

American Music Therapy Association, Inc.

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MUSIC THERAPY AND MENTAL HEALTH

What is Music Therapy?

Music Therapy is the clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program. It is an established health service similar to occupational therapy and physical therapy and consists of using music therapeutically to address physical, psychological, cognitive and/or social functioning for patients of all ages. Because music therapy is a powerful and non-invasive medium, unique outcomes are possible. In addition to its applications in mental health, music therapy is used successfully in a variety of additional healthcare and educational settings.

How Does Music Therapy Make a Difference for Persons with Mental Health Needs?

Music therapy is an efficacious and valid treatment for persons who have psychosocial, affective, cognitive and communicative needs. Research results and clinical experiences attest to the viability of music therapy even in those who are resistive to other treatment approaches. Music is a form of sensory stimulation that provokes responses due to the familiarity, predictability and feelings of security associated with it. Music therapy for clients with mental health concerns uses musical interaction as a means of communication and expression. The aim of therapy is to help individuals develop relationships and address issues they may not be able to address using words alone. Music therapy sessions include the use of active music making, music listening, and discussion.

What do Music Therapists Do?

Music therapists use music strategies, both instrumental and vocal, which are designed to facilitate changes that are non-musical in nature. Music selections and certain active music making activities are modified for client preferences and individualized needs (i.e., song selection and music may vary). Music therapy programs are based on individual assessment, treatment planning, and ongoing program evaluation. Frequently functioning as members of an interdisciplinary team, music therapists implement programs with groups or individuals that display a vast continuum of needs, from reduction of anxiety to deeper self-understanding.

What Can One Expect From a Music Therapist?

Music therapists work with the interdisciplinary team to assess emotional well being, physical health, social functioning, communication abilities, and cognitive skills through musical responses. When individualized music experiences are designed by the music therapist to fit functional abilities and needs, responses may be immediate and readily apparent. Clients need not have a music background to benefit from music therapy. Music therapy intervention provides opportunities to:

- Explore personal feelings and therapeutic issues such as self-esteem or personal insight
- Make positive changes in mood and emotional states

- Have a sense of control over life through successful experiences
- Enhance awareness of self and environment
- Express oneself both verbally and non-verbally
- Develop coping and relaxation skills
- Support healthy feelings and thoughts
- Improve reality testing and problem solving skills
- Interact socially with others
- Develop independence and decision making skills
- Improve concentration and attention span
- Adopt positive forms of behavior
- Resolve conflicts leading to stronger family and peer relationships

Who is Qualified as a Music Therapist?

Graduates of colleges or universities from more than 70 approved music therapy programs are eligible to take a national examination administered by the Certification Board for Music Therapists (CBMT), an independent, non-profit certifying agency fully accredited by the National Commission for Certifying Agencies. After successful completion of the CBMT examination, graduates are issued the credential necessary for professional practice, Music Therapist-Board Certified (MT-BC). In addition to the MT-BC credential, other recognized professional designations are Registered Music Therapists (RMT), Certified Music Therapists (CMT), and Advanced Certified Music Therapist (ACMT) listed with the National Music Therapy Registry. Any individual who does not have proper training and credentials is not qualified to provide music therapy services.

Where do Music Therapists Work?

Music therapists offer services in psychiatric treatment centers, outpatient clinics, community mental health centers, substance abuse programs, group homes, rehabilitation facilities, medical hospitals, senior centers, schools, hospice and other facilities. Some music therapists specialize in mental health and have additional training in advanced music therapy techniques and psychology. Some music therapists are self-employed and may be hired on a contractual basis to provide assessment, consultation, and treatment services for children and adults.

What Research And Resources Are Available To Substantiate And Support Music Therapy?

AMTA has promoted a vast amount of research exploring the benefits of music as treatment through publication of the *Journal of Music Therapy, Music Therapy Perspectives*, and other resources. The CD-ROM "Music Therapy Research - Quantitative and Qualitative Foundations" offers a complete collection of research published by the music therapy associations in the United States from 1964 through 2003.

What Outcomes are Documented in Music Therapy Research?

- Reduced muscle tension
- Improved self-image/Increased self-esteem
- Decreased anxiety/agitation
- Increased verbalization

- Enhanced interpersonal relationships
- Improved group cohesiveness
- Increased motivation
- Successful and safe emotional release

Selected Research Samples

- Music therapy as an addition to standard care helps people with schizophrenia to improve their global state and may also improve mental state and functioning if a sufficient number of music therapy sessions are provided.
 - Gold, C., Heldal, T.O., Dahle, T., Wigram, T. (2005). Music Therapy for Schizophrenia or Schizophrenia-like Illnesses. The Cochrane Database of Systematic Reviews, 3. Accession: 00075320-1000000000-03007 PMID: 15846692
- Music therapy significantly diminished patients' negative symptoms, increased their ability to converse with others, reduced their social isolation, and increased their level of interest in external events. As music therapy has no side-effects and is relatively inexpensive, it merits further evaluation and wider application.
 - Tang W, Yao X, Zheng Z. Rehabilitative effect of music therapy for residual schizophrenia: A one-month randomised controlled trial in Shanghai. British Journal of Psychiatry 1994;165(suppl. 24):38-44. PMID: 7946230
- Results indicated that music has proven to be significantly effective in suppressing and combating the symptoms of psychosis.
 - Silverman, M.J. The Influence of Music on the Symptoms of Psychosis: A Meta-Analysis. Journal of Music Therapy 2003; XL(1) 27-40.
- Depressed adolescents listening to music experienced a significant decrease in stress hormone (cortisol) levels, and most adolescents shifted toward left frontal EEG activation (associated with positive affect).
 - Field, T., Martinez, A., Nawrocki, T., Pickens, J., Fox N.A., & Schanberg, S. (1998). Music shifts frontal EEG in depressed adolescents. Adolescence, 33(129), 109-116.
- Music therapy clients significantly improved on the Aggression/Hostility scale of Achenbach's Teacher's Report Form, suggesting that group music therapy can facilitate self-expression and provide a channel for transforming frustration, anger, and aggression into the experience of creativity and self-mastery.
 - Montello, L.M., & Coons, E.E. (1998). Effect of active versus passive group music therapy on preadolescents with emotional, learning, and behavioral disorders. Journal of Music Therapy, 35, 49-67.

Additional References

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- Cevasco, A. M., Kennedy, R., & Generally, N. R. (2005). Comparison of Movement-to-Music, Rhythm Activities, and Competitive Games on Depression, Stress, Anxiety, and Anger of Females in Substance Abuse Rehabilitation. Journal of Music Therapy, 42(1), 64-80.
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- Kerr, T., Walsh, J., & Marshall, A. (2001). Emotional change processes in music-assisted reframing. Journal of Music Therapy, 38(3), 193-211.
- Mayers, K. S. (1995). Songwriting as a way to decrease anxiety and distress in traumatized children. Arts in Psychotherapy, 22(5), 495-498.
- Reilly, J. (1997). LIGHTNING strikes: A correlational study of the gesturo-musical responses of inpatients with acute manic or depressive symptomatology using the LIGHTNING module. Journal of Music Therapy, 34(4), 260-276.
- Tornek, A., Field, T., Hernandez-Reif, M., Diego, M., & Jones, N. (2003). Music Effects on EEG in Intrusive and Withdrawn Mothers with Depressive Symptoms. Psychiatry: Interpersonal and Biological Processes, 66(3), 234-243.

What is AMTA?

The American Music Therapy Association (AMTA) represents over 5,000 music therapists, corporate members, and related associations worldwide. AMTA's roots date back to organizations founded in 1950 and 1971. Those two organizations merged in 1998 to ensure the progressive development of the therapeutic use of music in rehabilitation, special education, and medical and community settings. AMTA is committed to the advancement of education, training, professional standards, and research in support of the music therapy profession. The mission of the organization is to advance public knowledge of music therapy benefits and increase access to quality music therapy services. Currently, AMTA establishes criteria for the education and clinical training of music therapists. Professional members of AMTA adhere to a Code of Ethics and Standards of Practice in their delivery of music therapy services.

How Can You Find a Music Therapist or Get More Information?

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