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CONTRIBUTIONS OF MUSIC THERAPY IN THE TREATMENT OF DEPRESSION: A BIBLIOGRAPHIC REVIEW

Aportaciones de la musicoterapia en el tratamiento de la depresión: revisión sistemática

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ABSTRACT

Background: Music therapy has been the subject of research as a therapeutic intervention in the treatment of depressive disorder. Its application has shown that it can reduce symptoms, and it is essential to systematically evaluate the available evidence on its effectiveness. **Objective:** To conduct a systematic review of the literature to evaluate the benefits of music therapy in the treatment of depressive disorder. Method: A search for information was carried out in various scientific databases and repositories such as Google Scholar, PubMed, Dialnet and ScienceDirect. Selecting 13 studies under inclusion criteria, the information was systematized and analyzed with Microsoft Excel, using tables, figures and comparative graphs. **Results:** The analysis of the studies indicated that music therapy is effective in reducing depressive symptomatology and improves emotional well-being. In addition, Microsoft Excel facilitated the processing and comparison of the data analyzed. **Conclusions:** The usefulness of Microsoft Excel for the analysis and evaluation of the information is highlighted. Likewise, the systematic review supports the use of music therapy as an effective complementary treatment for depression; however, due to its limitations, it is recommended to continue with research to strengthen the evidence on its effectiveness in different clinical and population contexts.

Keywords: music therapy, depression, systematization, data, analysis

RESUMEN

Antecedentes: La musicoterapia ha sido tema de investigación como intervención terapéutica en el tratamiento del trastorno depresivo. Su aplicación ha demostrado que puede reducir los síntomas y es fundamental evaluar sistemáticamente la evidencia disponible sobre su efectividad. **Objetivo:** Realizar una revisión sistemática de la literatura para evaluar los beneficios de la musicoterapia en el tratamiento del trastorno depresivo. **Método:** Se llevó a cabo una búsqueda de información en diversas bases de datos científicas y repositorios, como Google Académico, PubMed, Dialnet y ScienceDirect, seleccionando 13 estudios bajo criterios de inclusión; la información fue sistematizada y analizada con Microsoft Excel, utilizando tablas, figuras y gráficos comparativos. **Resultados:** El análisis de los estudios indicó que la musicoterapia es efectiva para reducir la sintomatología de la depresión y mejora el bienestar emocional. Asimismo, Microsoft Excel facilitó el procesamiento y comparación de los datos analizados. **Conclusiones:** Se destaca la utilidad Microsoft Excel para el análisis y valoración de la información. Asimismo, la revisión sistemática respalda el uso de la musicoterapia como un tratamiento complementario eficaz contra la depresión; sin embargo, debido a las limitaciones, se recomienda continuar con investigaciones que fortalezcan la evidencia sobre su efectividad en diversos contextos clínicos y poblacionales.

Palabras clave: musicoterapia, depresión, sistematización, datos, análisis.

INTRODUCTION

Depression is an increasingly common disorder affecting individuals in diverse areas and societies worldwide. Vidal (2023) states that depressive disorder, or depression, is a mental condition that impairs mood, causing feelings of sadness in sufferers and impacting their actions, behaviour, and thought patterns. Consequently, the implementation of various treatments, whether allopathic medicine or alternative or complementary therapies, has become necessary to prevent or mitigate its effects. According to Atehortúa Rivera (2022), the World Health Organization reported that in 2021, three hundred million individuals globally were affected by this disorder, making depression a pathology that significantly increases disability, thereby detrimental to the well-being and performance of those afflicted.

In this context, music therapy has emerged as an effective therapeutic strategy for enhancing the quality of life of patients with depression. Gustavson et al. (2021) observe that music therapy has long been the subject of empirical clinical and non-clinical research, with studies indicating positive associations between engagement with music and improvements in quality of life. Furthermore, music therapy has been found to contribute to a reduction in symptoms of depression, anxiety, and less frequent substance use.

This article presents a systematic review of the benefits of music therapy in improving the quality of life for patients aged 12 and over with depressive disorder. According to Corimanya and Sotelo (2019), a systematic review is a scientific research method that allows for the collection of relevant information on a topic to subject it to rigorous analysis. This process aims to summarise the findings of various studies and draw evidence-based conclusions, thereby minimising bias.

Therefore, this review aims to analyse the positive impact of music therapy on patients with depressive disorder through the consultation and collection of data acquired from reliable sources, implementing analytical tools for the subsequent evaluation of results.

Information was sourced from research studies, scientific articles, books, and dissertations, among others. The search was conducted in scientific databases, reputable publishers, and leading portals and journals. Initially, information was consulted, collected, and organised. Subsequently, both qualitative and quantitative analyses of the data were performed. Using Microsoft Excel as the primary tool, the quantitative analysis was conducted on spreadsheets and represented using bar charts and tables. Conversely, the qualitative analysis was represented by a cyclical graph, in addition to a comparative table. Following this, the acquired data were evaluated, and the phases of the systematic investigation were presented in a PRISMA diagram to finally arrive at the conclusions.

MATERIALS AND METHOD

Search Strategy

This systematic review concerning the benefits of music therapy as a treatment for depressive disorder was carried out rigorously and exhaustively, implementing three phases. In the first phase, information was searched across various portals, databases, and repositories. In the second phase, the data obtained from different research studies and articles were compiled and inserted into a Microsoft Excel table to organise the information and select works for the literature review. In the third phase, data that met the inclusion criteria were selected. These were retrieved from Dialnet, Google Scholar, PubMed, and ScienceDirect. Subsequently, they underwent both quantitative and qualitative analyses, represented through graphs, figures, and tables to facilitate a clearer understanding of the information.

Inclusion and Exclusion Criteria

Inclusion Criteria:

1. Studies and articles on music therapy intervention in depression, to ensure a coherent and relevant review aligned with the study's objectives.
2. Articles and studies in English, Spanish, and Portuguese, allowing for a global perspective and access to a wider variety of studies from regions such as Latin America, the United States, Europe, and Brazil, recognising that practices, approaches, and results may vary depending on the cultural context.
3. Works published from 2014 to 2024 to ensure the studies were recent, relevant, and reflected the latest trends and advancements in music therapy intervention for depression.

Exclusion Criteria:

1. Studies with insufficient data.
2. Quasi-experimental designs.
3. Single-case studies.

Selection Procedure

After reading the titles and abstracts of the scientific articles and dissertations, which were carefully organised and systematised using Excel data matrices, 106 files were excluded. Subsequently, 62 files were selected, of which 37

were used as consultation material, 29 for developing the theoretical framework, and 6 were discarded due to duplication. Finally, 13 studies were utilised, from which information was extracted for the empirical framework and data analysis to obtain the results required in this article.

Table 1

Databases

Database and Search Engine	Keywords	Results	Results Post-filter	Articles meeting the inclusion criteria.
Dialnet	Depression + Music Therapy	52	24	3
Google Academic	Depression + Music Therapy, Older, Teenagers, children	7430	52	19
Pubmed	Music Therapy + Depression	1029	47	11
Science Direct	Music Therapy + Depression	12293	6	1

Note. Authors' own work.

In the initial search, a total of 20,804 records were identified, including articles and dissertations. The specific sources yielded the following results: Dialnet produced 52 records; Google Scholar, 7,430; PubMed, 1,029; and ScienceDirect, 12,293. After reviewing the titles, 23 articles from Dialnet, 52 from Google Scholar, 47 from PubMed, and 6 items from ScienceDirect were selected, as shown in Table 1.

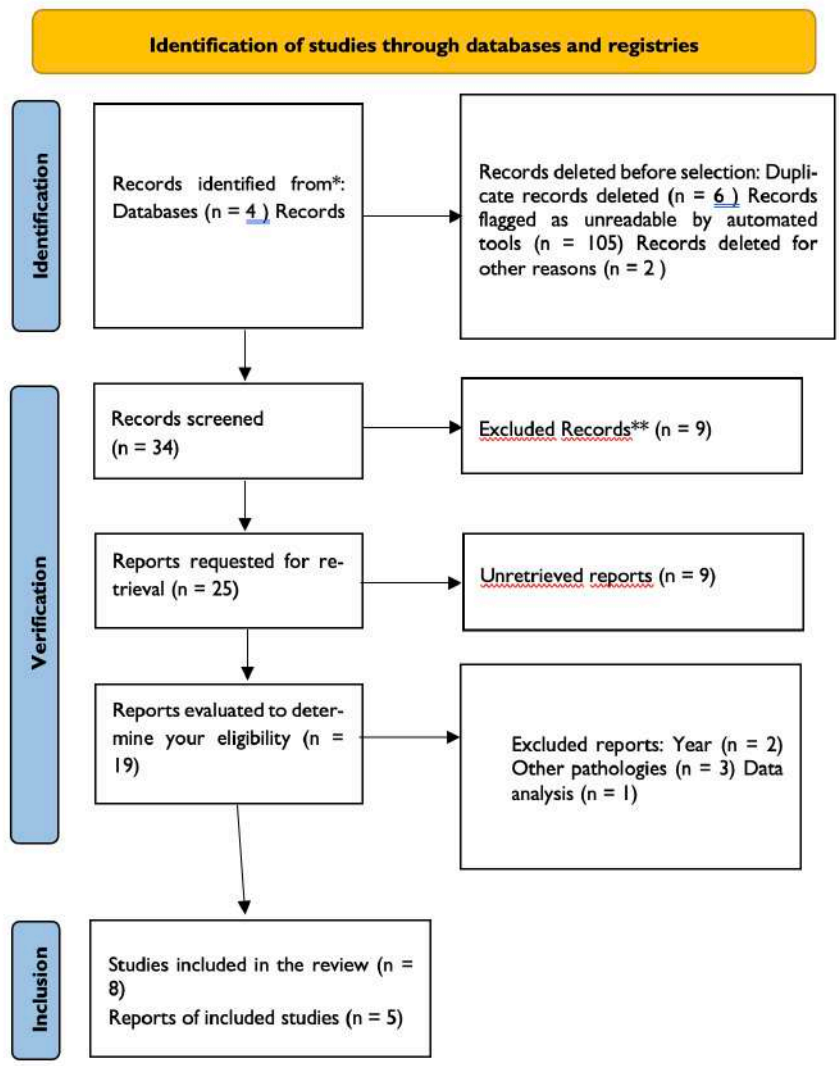
Results of Study Selection

This section details the studies ultimately used for the data analysis process, as well as the number of publications by country, years of publication, and research obtained from each database. The countries that conducted the research in question are diverse and distributed across various regions of the world: Bolivia with (1) study; Colombia with (2) studies; Cuba with (1) article; Mexico with (2) investigations; Peru with (1) study; Spain with (1) article; Finland with (1) study; China with (1); South Korea with (1) article; and Nigeria also with (1) study, as shown in Figure 1.

Regarding the publication years of these studies, Figure 2 shows that the works have been carried out continuously over a decade. Studies were published in the years 2014, 2016, 2017, 2018, 2020, 2021, 2023, and 2024. This temporal interval suggests that music therapy has been gaining recognition and acceptance within the scientific community, with an increase in the production of academic works exploring its benefits and applications.

Figure 1

PRISMA Flow Diagram



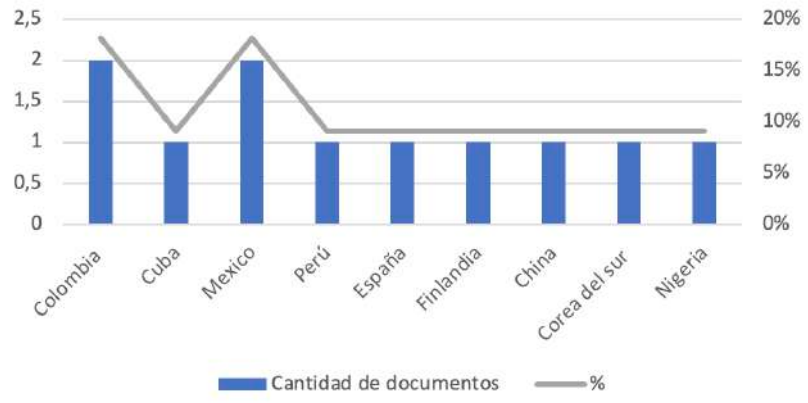
Note: Authors' own elaboration, based on Haddaway et al. (2022).

In Figure 3, the different databases are observed, along with the quantity and percentage of research studies that were selected for this work after meeting the inclusion criteria. The chart identifies that 2 articles (15%) were taken from Dialnet, 3 articles (23%) from PubMed, 7 works (54%) were extracted from Google Scholar, and 1 article (8% of the total research) was used from ScienceDirect. Dissertations were obtained from the repositories of several universities, which are listred: Universidad Católica de Pereira, Universidad Alas Peruanas, Universidad de Lima, Universidad Cooperativa de Colombia, Pontificia Universidad Javeriana, Universidad de La Rioja, and Universidad Nacional de La Plata.

The studies ultimately utilised for the work were conducted in the following countries: Bolivia, with one study; Colombia, with two studies; Cuba, with one article; Mexico, with two investigations; Peru, with one study; Spain, with one article; Finland, with one study; China, with one; South Korea, with one article; and Nigeria also with one.

Figure 1

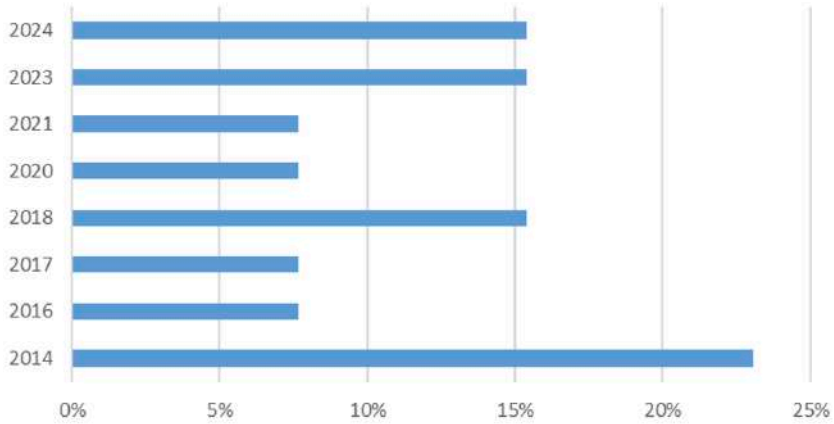
Publications by Countries



Note. Source: Authors' own elaboration.

Figure 2

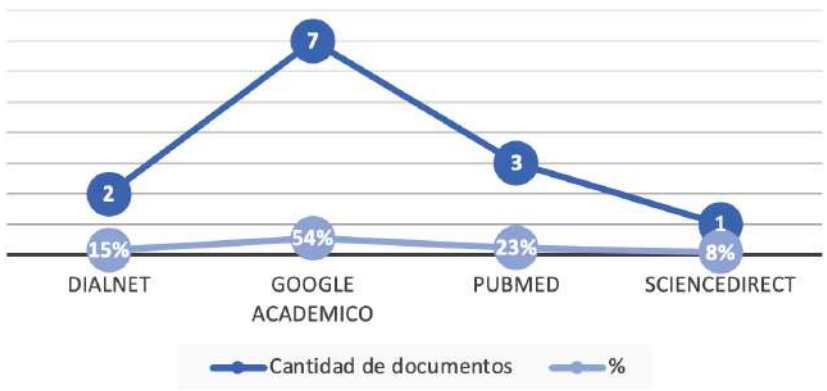
Years of Publication



Note. Source: Authors' own elaboration.

Figure 3

Databases



Note. Source: Authors' own elaboration

The selected research highlights the effectiveness of music therapy in diverse contexts and populations. Sánchez and de la Jara (2014) evaluated the action of music therapy as a non-pharmacological treatment for depression, finding a decrease in depressive symptomatology after the intervention. For their part, Hartmann et al. (2023) analysed the correlations between the beneficiary's improved state and musical interaction, concluding that musical improvisation allows for a better therapeutic relationship.

Regarding the development of psychotherapeutic instruments, Torres et al. (2014) designed the MUSITHERAP-1, which showed a 50% reduction in depression levels. Similarly, López (2018) studied the effects of song-writing-based music therapy, finding improvements in the emotional state of the participants. Likewise, Arpi (2016) evaluated the efficacy of music therapy in secondary school students, reporting a decrease in depression levels.

Windle et al. (2020) analysed the feasibility of music therapy for long-term depression, providing evidence of improvements in the emotional state of patients. In a similar line of research, López (2020) studied the effects of active group music therapy (MTGA), finding a 95% reduction in depression levels. Furthermore, Castillo-Pérez et al. (2014) conducted an experimental study that demonstrated the superiority of music therapy over the control group.

Conversely, Subirats and Taranilla (2017) investigated the effects of receptive music therapy in patients with dementia and depression, finding a significant decrease in depressive symptoms after 16 sessions. Similarly, Lu et al. (2024) analysed how the emotional context of music influences mood in individuals with depression, highlighting that the emotional process is key to the intervention's effectiveness.

Finally, Xu et al. (2024) explored the effects of group music therapy in nursing homes, concluding that this intervention significantly reduced depressive symptoms. Complementarily, Park et al. (2023) examined music therapy as a treatment for depression in children and adolescents with ADHD, finding that serotonin activation is a key mechanism in improving emotional state.

These studies support the efficacy of music therapy as a complementary intervention in the treatment of depression, demonstrating its positive impact across diverse populations and clinical contexts.

Data Analysis

Microsoft Excel was utilised as a tool for the organisation, collection, and analysis of the obtained data, leading to the creation of data analysis matrices. Subsequently, the various tables and graphs presented in the article were generated, which highlight the findings from the different consulted documents, thereby enabling a better understanding of the results. The extracted data included the types of music therapy

Table 1

Results from articles in the matrix

Authors	Country	Research type	Objetive	Results
Sánchez, R. O., y de Juan, T. F. (2014).	México	Research paper	To evaluate the action of music therapy as a non-pharmacological treatment alternative and to contribute to the reduction of depression.	After applying the BDI before, during and after the treatment, it was evident that there was a significant reduction in symptoms, since in the EG the Process began with 35 people with different types of depression and at the end only 8 patients showed symptoms. On the other hand, the CG beganǫ with 25 people with depressive disorder and finally in 19 the symptoms persisted.
Hartmann et al. (2023)	Finland	Research paper	Investigate possible correlations between customer improvement and musical interaction.	There was a level of improvement in the RFB respiratory resonance rate;, improvisation allowed for a better relationship between client and therapist that enabled better social interaction and an increase in self-esteem.
Torres et al. (2014)	Cuba	Research paper	To create a psychotherapeutic instrument, MUSITHERAP-1, with the purpose of reducing the levels of depression in the patients treated.	The MUSITHERAP-1 instrument was designed and there was a 50% reduction in depression levels, as well as the regulation of HR and RF.
López, J. (2018)	Colombia	Dissertation	To describe and analyze the effects of a music therapy intervention based on songwriting on the levels of depression of a group of institutionalized older adults.	Depression levels decreased during the therapeutic intervention, as did their emotional state.
Arpi, D. (2016)	Perú	Dissertation	To determine the efficacy of music therapy in depression in secondary school students.	Depression levels decreased during the therapeutic intervention and patients' mood improved.
Windle et al. (2020)	UK	Research paper	To look at the feasibility of using group music therapy for long-term depression.	Levels of depression decreased and there was strengthening of the emotional state.
López, M. (2020).	Bolivia	Research paper	To reduce the levels of depression in patients of the CNS Psychiatric Hospital, through an intervention program in Active Group Music Therapy MTGA.	The intervention with active group music therapy managed to reduce depression levels in EG by 95%.
Castillo-Pérez et al. (2014)	México	Research paper	To assess the effects of music therapy on depression.	Depression levels in the experimental group were markedly reduced in relation to the control group.
Subirats Olaya y Taranilla Izquierdo (2017)	Spain	Research paper	To investigate the effects of responsive music therapy on symptoms of anxiety and depression in people with dementia.	After16 sessions, a significant decrease in depression-related symptoms was observed. It was also evidento that the effect was diminished during the following month without treatment.

Table 1 (cont)

Results from articles in the matrix

Authors	Country	Research type	Objetive	Results
Lv et al. (2024)	China	Research paper	To analyze how the emotional context of music affects mood in people with depression.	According to the data collected, it is shown that music stimulates the brain in emotional processing,; relating the benefits of music therapy to the particular taste, enjoyment or degree of happiness that it produces in each person in particular, which reduces depression.
Xu et al. (2024)	China	Research paper	To explore the effects of group music therapy on depression in two nursing homes.	Group music therapy has been shown to be an effective method to decrease symptoms of depression in older adults with dementia.
Park et al. (2023)	Republic of Korea	Research paper	To determine the effect of music therapy as an alternative treatment on depression in children and adolescents with attention deficit hyperactivity disorder (ADHD) by activating serotonin (5-HT) and improving stress coping skills.	The application of music therapy as an alternative treatment for depression in children and adolescents with ADHD showed positive neurophysiological and psychological effects.
Yang, J. 2021	China	Research paper	To verify the effects of music therapy on depressive disorder.	Music therapy was found to be an effective method in the treatment of depression in middle-aged and elderly people

Note. Source: Authors' own elaboration.

employed, the modality of the sessions, the percentage of symptoms before and after music therapy interventions, and the overall percentage of symptom recovery. Furthermore, results were classified according to the demographic characteristics of the participants, such as age, sex, and sociocultural context.

Quality Evaluation

The studies were evaluated considering various criteria: quantitatively, the percentage of the type of music therapy implemented, the type of population, session modality, gender, the presence of symptoms before and after the intervention, as well as the number of individuals who reported one or more symptoms, and the total number of users who showed some improvement after the music therapy intervention. This was represented by the mean of the final values. Qualitatively, tables were created containing the documents used for the analysis, including the author, publication years, objective, results, and intervention process. This was done to ensure the quality and veracity of the results.

RESULTS

This section outlines the results following data analysis, taking into account: the ages of the users, the most affected gender, the types of music therapy utilised, the session modality, the percentage of symptoms before and after music therapy interventions, and the overall percentage of symptom recovery.

The ages of the population ranged from 6 to 93 years, indicating that the studies involved various groups, such as children, adolescents, adults, and the elderly, as well as both male and female sexes. It was observed that 31% of the investigations targeted the older adult population, i.e., over 60 years old; 46% focused on adults; 15% on adolescents; and 8% on the child population, as indicated in Figure 4.

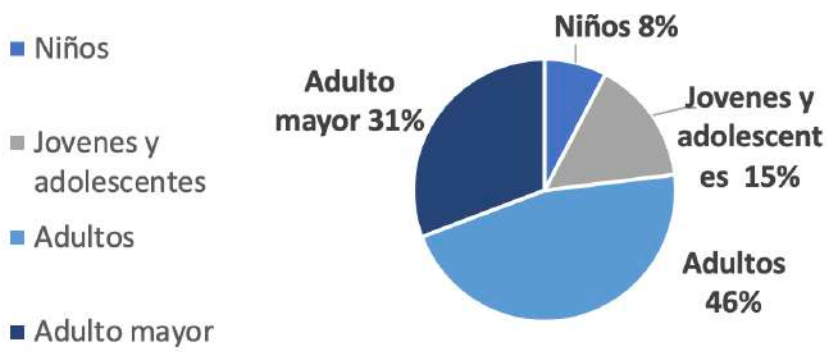
Furthermore, the percentage of men and women who participated in the music therapeutic processes was calculated according to the group to which they belonged. According to the calculations performed, it was found that among older adults, 86% were women and 14% men; for adults, 67% were women and 33% were men; in adolescents, 55% were women and 45% were men. In all consulted works, the population was mixed, as shown in Figure 5.

Figure 6 illustrates the percentage of the type of music therapy used across the different investigations that formed the body of this work, with passive music therapy being the most frequently implemented, used in 7 of the 13 investigations, representing 50% of the total works. This is followed by active music therapy, utilised in 4 studies, accounting for 30%; and finally, combined music therapy, employed in 2 studies, making up 20%.

Figure 7 presents the percentage of session modality from the investigations used in the study, showing that group sessions obtained a higher percentage at 85%, while individual sessions accounted for 15%. Figure 8 shows the percentage of impact on the main symptoms of depression before and after music therapy intervention. The percentages are linked to three of the thirteen selected studies, as these focused on the recovery of each individual symptom.

Figure 4

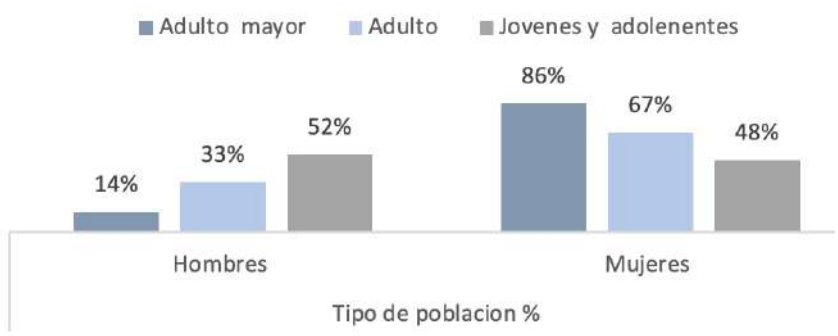
Target Population



Note. Source: Authors' own elaboration.

Figure 5

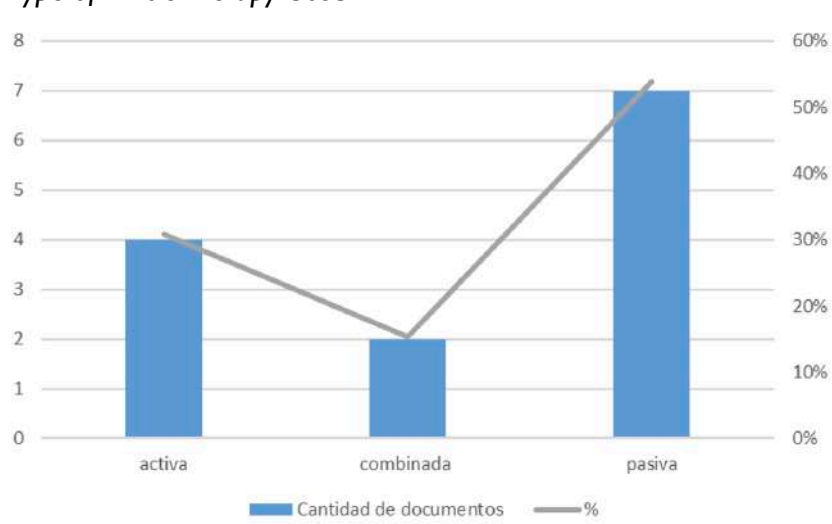
Gender Percentage.



Note. Source: Authors' own elaboration.

Figure 6

Type of Music Therapy Used



Note. Source: Authors' own elaboration.

Figure7

Session Modality Note. Source: Authors' own elaboration.

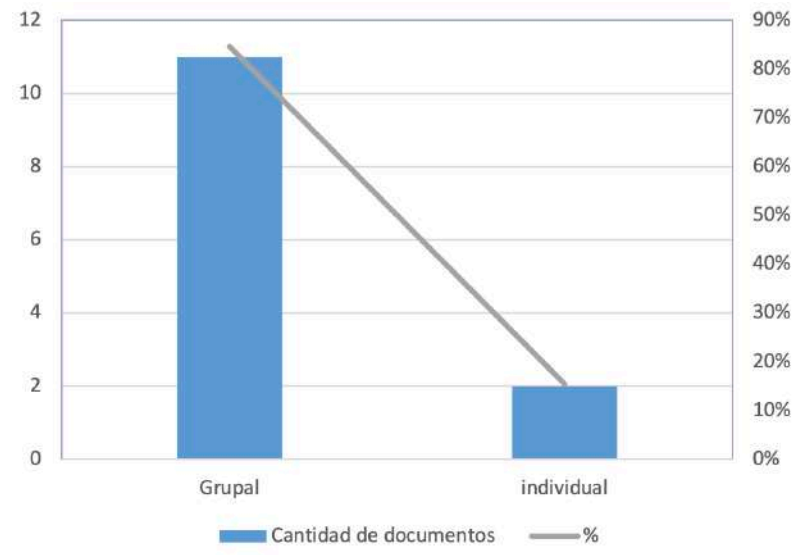
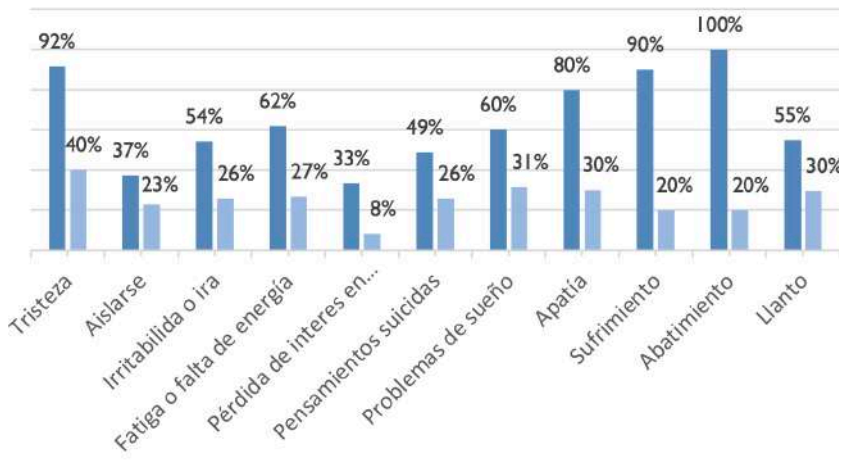


Figure 9

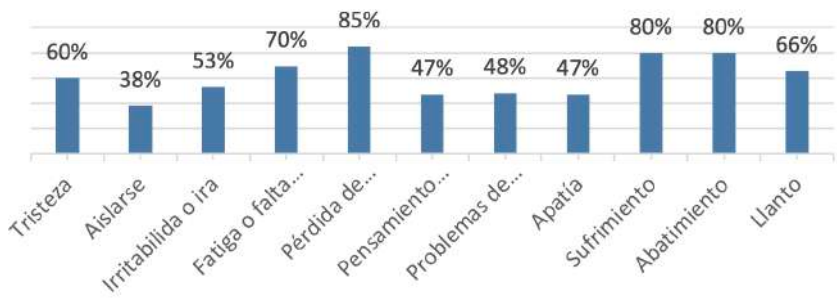
Percentage of Symptoms



Note. Source: Authors' own elaboration.

Figure 9

Percentage of Recovery



Note. Source: Authors' own elaboration.

Regarding Figure 9, the percentage of beneficiary recovery is observed, where the mean is calculated by dividing the number of individuals who manifested one or more symptoms by the total number of users who showed some symptom improvement after music therapy intervention. The studies, number of users, and mean recovery per symptom are detailed below:

- Sadness: In study 1, initial users: 10; final users: 3. Study 2, initial: 5; final: 3. Mean recovery: 60%.
- Isolation: In study 3, initial: 13 individuals; final: 8 individuals. Mean recovery: 38%.
- Irritability or anger: Study 3, initial: 19 patients; final: 9. Mean recovery: 53%.
- Fatigue or lack of energy: Study 2, initial: 4 users; final: 2. Study 3, initial: 20; final: 7. Mean recovery: 70%.
- Loss of interest in activities: Study 2, initial: 4 individuals; final: 1 individual. Mean recovery: 85%.
- Suicidal thoughts: Study 3, initial: 17 users; final: 9 users. Mean recovery: 47%.
- Sleep problems: Study 3, initial: 21 patients; final: 11. Mean recovery: 48%.
- Apathy: Study 1, initial: 8 users; final: 3. Mean recovery: 47%.
- Suffering: Study 1, initial: 9 individuals; final: 2. Mean recovery: 80%.
- Despondency: Study 1, initial: 10 patients; final: [no value given for final users]. Mean recovery: 80%.
- Crying: Study 1, initial: 3 users; final: 2. Mean recovery: 74%.

Only three of the studies directly addressed the symptomatology of depression, which limited a broader analysis encompassing all the works.

Recommendations for Future Research

More rigorous research on the effects and benefits of music therapy in the treatment of depressive disorder is suggested. Although previous studies indicate the benefits of music therapy and its positive impact on reducing depression symptoms and generally improving mood, the available scientific evidence is still scarce, thus necessitating a greater quantity of research on the impact of music therapy.

Given the absence of a control group in a large proportion of the identified studies, it is recommended that future research include both an experimental and a control group to allow for a better comparison and the obtainment of more reliable and precise results.

DISCUSSION

Critical Review of Recent Advances

The application of music therapy has proven beneficial for the treatment of various pathologies. The growing evidence that has been documented and supported by numerous scientific investigations conducted worldwide has validated music therapy as an effective form of complementary or alternative treatment, contributing significantly to the recognition of this discipline within the healthcare sector.

Thanks to these advancements and the increasing interest in music therapy, there has been a demand for professionals trained in this area, which has facilitated the development and establishment of higher education programmes in different regions globally to train professional music therapists.

Music therapy treatment, in its various modalities (active,

passive, and combined), allows for a comprehensive approach to the complex needs of individuals suffering from depressive disorder, by significantly reducing symptoms associated with depression and thereby improving the quality of life for beneficiaries.

This therapeutic approach has demonstrated high effectiveness in several aspects of emotional and psychological well-being, as well as in strengthening self-esteem and improving communication.

Since older adults constitute the demographic group on which the majority of studies and investigations into the application of music therapy for depressive disorder have focused, they have become a key area of interest for music therapists and other health professionals to conduct new research, owing to the various predisposing factors this population faces regarding depression.

Limitations and Recommendations

Firstly, it is observed that many studies did not consider the importance of including a control group to allow for comparison with the experimental group.

Another limiting factor is that some databases, repositories, or associations are private and do not allow access without a subscription. Consequently, valuable information that could enrich the research is lost.

The publication date was also a limitation: most works conducted on the treatment of depression with music therapy pre-date 2014, which led to their exclusion based on the inclusion criteria for being more than 10 years old.

Some of the consulted works aimed at obtaining a degree in psychology or psychiatry. In some of these, it was observed that music therapy was confused with sound therapy or "music for healing," which does not contribute seriously to the study of music therapy.

CONCLUSIONS

Based on the work undertaken, it has been identified that music therapy benefits patients from different groups in reducing symptoms of depressive disorder. A loss of interest in activities, suffering, and despondency showed the highest recovery percentages, demonstrating an improvement of between 80% and 85%. Conversely, irritability or anger, fatigue or lack of energy, crying, and sadness exhibited a recovery of between 50% and 70%. Similarly, suicidal thoughts, sleep problems, and apathy achieved a recovery of 48%, while isolation had the lowest recovery rate at 38%. In 92% of the studies, a significant general reduction in depressive disorder was observed. Only in 8% of the studies did the experimental group not show a considerable difference in symptoms compared to depressive patients in the control group who also received medication. This finding suggests that, in some specific cases, music therapy might not be sufficient to make a notable difference.

However, the overwhelming majority of studies support the efficacy of music therapy, highlighting its value as a complementary and non-invasive intervention in the management of depressive disorder. This reinforces the importance of considering music therapy as a safe and potentially effective therapeutic option in a wide variety of cases, always evaluating its application in conjunction with other forms of treatment according to the individual needs of each depressive patient.

From the data obtained in the study, a comprehensive comparative analysis was conducted, covering different key aspects, including the databases used, the groups involved, and the symptoms. Through the databases, the quality, robustness, and relevance of the information were assessed, taking into account factors such as the variety of sources and sample sizes. Regarding the groups, the clinical factors of the involved cohorts were considered. Finally, concerning the symptoms, a detailed comparison was made of the prevalence, intensity, and variability of symptoms, both at individual and group levels. This comparative analysis allowed for the determination of significant relationships and differences between the various elements of the study.

Generative AI Statement

The author declares that no Generative AI was used in the creation of this manuscript.

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