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HOW CAN MUSIC BE USED IN THE TREATMENT OF DEPRESSION?

The origins of music therapy can be linked back to the end of First World War (1918) where, the vast number of those suffering with Post Traumatic Stress Disorder (PTSD) and the lack of doctors meant that an alternative treatment had to be found, this being music therapy. Through the 20th century music therapy has been researched, trialled and been formally opened for use in healthcare centres; it would seem that music therapy has been presumed to have some health benefit towards psychological diseases. We can see that there seem to be two main treatments available to treat depression: Active and Receptive music therapy. This is all well and meaningful but does not answer the question of how can music be used to treat depression? The best place to start is to look at the effect of music; it stimulates emotion, it brings a response (“affective motivational qualities”) - but why? Part of the answer would seem to lie in the “non-referential” qualities of music; this is referring to the fact that music cannot be explicitly related to something else but only shown to have effects or similarities with something; it could be said the music has a strong metaphorical function.

For example, one can say “music is like a painting” because it may share in the similar feelings that a painting evokes, but that does not mean in any way is music a painting; rather it shares collective effective qualities that the painting has. How does this relate to the topic of music and depression? It’s like saying “music is like a drug” it can act in a similar way to a drug in that it can change the levels of absorption in the neurotransmitter process; but again it is not a drug. Perhaps it’s this non-referential property of music that takes the listener to an unexpected place: for example, this might be through the use of an interrupted cadence (IV-V-VI) where, the listener would be expecting to go back to the “home key” (tonic), but is instead taken on a journey. Through this, a change in the absorption of the neurotransmitter levels can be observed in a similar way to that of an antidepressant and is the reason why music can be used in the same way to treat depression.

In a lecture, given by Jeremy Begbie, he too talks about the qualities music can have with medicine. In his paper ‘Theology, music and time’ he writes that there are four ways music can help “shape someone for the better” - this of course being relevant as the point; as a main objective of music therapy is to raise a depressive patient to a “higher Cognitive state.” The first, music can “help and reshape someone by combining dissonance with hope;” what does this mean? Here, Begbie is talking about musical dissonance in harmony. There are many examples of dissonances in harmony, the most simple being the use of a V7 chord in a perfect cadence (seen in example 1). Take the perfect cadence of C major; the V7 chord would consist on G, B, D and F natural if the chord is in root position. It is the addition of the F natural that provides dissonance - it no longer makes the chord consonant and this is what Begbie is referring to when about dissonance. But why does it provide hope? And why is this important in treating depression? It provides hope because one knows where its leading - back to the home key, in the case of the V7 chord in c major, the listener knows the chord will resolve in c major, again reinforcing this idea of a home key...