Music as a therapeutic resource in mental health intervention

O uso da música como recurso terapêutico em saúde mental

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ABSTRACT: From the follow-up of a music group in a Psychosocial Care Center for Alcohol and Drugs, a study with drug users was developed to understand the role of music in their lives and in the treatment and, based on the results, to think the use of music as a therapeutic resource. This is a qualitative research with analytical/descriptive characteristics. Bibliographic analysis, observations and interviews were submitted for content analysis. From the results, two main topics emerged: Impacts of Music and Therapeutic Potential of Music. Impacts can be positive, when resulting in well-being, memories of good times and social relation improvement, or negative, according to music styles and messages, which may be associated to interferences in the treatment. Regarding the therapeutic potential, it was found that music helps to establish bonds and to develop personal and collective changes. As a conclusion, music promotes expression of emotions and perception of reality, and its use in the therapeutic context favors internal balance and exchange spaces.

KEYWORDS: Music; Mental Health; Mental Health Services; Drug Users.

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RESUMO: A partir do acompanhamento de um grupo de música em um Centro de Atenção Psicossocial para Álcool e Drogas foi desenvolvido um estudo com os usuários participantes com objetivo de compreender o papel da música em suas vidas e no tratamento e, com base nos resultados, refletir sobre o uso da música como recurso terapêutico. Trata-se de investigação qualitativa de caráter analítico/descritivo. Utilizou-se de estudo bibliográfico, observação e entrevistas submetidas à análise de conteúdo. Nos resultados, dois principais temas emergiram: Os Impactos da Música e A Potencialidade Terapêutica da Música. Os impactos podem ser positivos, quando associados ao bemestar, recordações e melhora das relações sociais, ou negativos, de acordo com as preferências musicais ou mensagens contidas que podem ser associadas à interferências no tratamento. Com relação à potencialidade terapêutica, verificou-se que a música colabora na constituição de vínculos e no desenvolvimento de mudanças pessoais e coletivas. Conclui-se que a música promove a expressão de emoções e percepção da realidade e a sua utilização no contexto terapêutico favorece o equilíbrio interno e facilita espaços de trocas.

DESCRITORES: Música; Saúde Mental; Serviços de Saúde Mental; Usuários de Drogas.

This study is part of the Research Group on Mental Health and Collective Health of the Alagoas State University of Health Sciences. The data are part of the Curricular Integration Work presented in Occupational Therapy at Alagoas State University of Health Sciences, as a requirement for obtaining the Bachelor's degree in Occupational Therapy of the first author in 2013.

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INTRODUCTION

he transformation process of the care offered in community-based mental health services, made possible to create initiatives focused on production of life, social skills, art, creativity and transformation of empty spaces into collective spaces¹.

Specifically created for the care of users of alcohol and other drugs, the Psychosocial Care Center for Alcohol and Drugs (CAPSad) are aimed to treat addiction and substance abuse with emphasis on rehabilitation and social reintegration.

These services should rely on the work of multidisciplinary teams involved in interdisciplinary proposals with the purpose of articulating damage reduction, prevention, recovery and inclusion actions².

In addition to the individual care, activities in groups are suggested such as therapeutic workshops, employment and income generation workshops, playful and sport activities, family care, as well as other strategies to encourage protagonism of users regarding life¹.

These practices include a range of activities and dynamics that must be thought through and discussed by all the actors that constitute the service (manager, technical team professionals and other secondary education professionals, users, family and restricted community)³.

Thus, such practices are developed in the perspective of psychosocial care and must be linked to the quality of life improvement and creation and strengthening of wishes, affections, pleasure and bonds within the services as well as in the territory in which the users of those services transit.

Once art is able to produce subjectivities, to catalyze affections, to create unknown and/or unexplored territories, it has been used in its various expressions in the CAPSad context, although in some cases, the appropriation of its conceptual field is still done in an incipient way by their workers³.

Therefore, even though these professionals are still in doubt about the ways of understanding the relationship between art and therapy, its value in rehab is the possibility of users to discover and expand their potential in the conquest of social spaces³.

As an element of the set of these artistic expressions, music has also been used as a tool in the care of people in mental distress, to develop therapeutic interventions that can promote rehabilitation and inclusion.

In that sense, it has been described as a promoter of self-knowledge, reflection and incentive to social conviviality⁴, being able to extend the protagonism related to the treatment and to daily issues.

In order to improve knowledge about the potential of music as a therapeutic resource, the following of a music group offered in a CAPSad III has been proposed by the discipline Occupational Therapy Applied to Mental Health of the Occupational Therapy undergraduate course.

During the development of that experience, it emerged the need for a deeper understanding about the opinion of the users of that group about the role of music in their lives and in the treatment. Thus, with this goal in mind, we developed a research that, from its results, aimed to reflect about the use of music as a tool of intervention in the field of mental health.

This paper discusses the results and analyses of this research, which was approved by the Research Ethics Committee of the Alagoas State University of Health Sciences, Brazil in May 09, 2013 under the code number 2007.

METHODOLOGY

The qualitative analytical-descriptive research developed a bibliographical study, observation and semistructured interviews with 10 users and participants of the music group of a CAPSad of Maceió city, in the State of Alagoas.

The following inclusion criteria of subjects were defined: to be a participant in the music group for more than a month and to accept collaborating with the study. As exclusion criteria: impossibility to understand the purposes of the research.

At the beginning of the investigation, there was a meeting with all participants, in which they were informed on the research development and invited to participate according to their desire and availability.

The data were collected from June to November, 2013. The users who agreed to participate were told about risks, benefits, research goals and signed an informed consent form.

The interviews were recorded and performed individually in private, aiming at the secrecy of the respondents. With an average duration of 20 minutes, the questions were guided by a semi-structured form prepared by the researchers, and aimed to get to know the musical preferences and the relationship with music in participants' lives and treatment.

The collected data were transcribed and analyzed by the Thematic Analysis technique. In this way, all phases of analysis were developed: pre-analysis, material exploration, processing of the results, inferences and possible interpretations⁵.

THE MUSIC GROUP

Proposed with therapeutic purposes, the group in which the study was carried out used to meet once a week, with an average of 15 to 20 participating users. It was coordinated by a psychoeducator and had the participation of a an undergraduate student of the Occupational Therapy course.

The material used for the group development were music lyrics and guitars.

The dynamics used by the coordinator happened as follows: in the meetings, the professional chose the theme to be explored by the group and then, songs were played so that users could interpret their lyrics; through interactions and dialogs, links were made about life, treatment and feelings awakened; at other times, music was used more freely and users could play and sing songs of their own choices.

RESULTS

Regarding the characterization of the study participants, it was found that the age of respondents ranged from 20 to 59 years old. Eight users were male and two female. Most mentioned to be single, only two reported to be married. Two of them completed the primary education and other two, the secondary education. The others claimed they interrupted their studies before finishing the primary education. Four of them were never admitted for specific treatment for use of alcohol or drugs and six reported some type of hospitalization in closed institutions. The admission date in the service ranged from late 2009 to early 2013.

Concerning the involvement of respondents with music in the CAPS, six participated in the music group just singing and four of them, besides singing, used to play the guitar. Most of them reported that their contact with music started within the CAPS by indication of the psychoeducator that coordinated the group.

From the deep analysis of the discourses of the respondents, two topics emerged: The impacts of music and the therapeutic potential of music.

Topic 1: The Impacts of Music

When asked about the feelings caused by the music, the respondents presented the following insights:

[...]. When I listen to these songs, I feel peace, joy. Whenever I'm sad I listen to music. [...] music makes me feel good, it changes me, calms me down, makes me happy, it's like an immense happiness came inside me, like it could take away that bad thing inside of me. (U1)

[...] I feel pleasure to feel the music, it touches the soul, raises the self-esteem. [...] It makes you relax. (U10)

In addition to positive feelings, the music capability of rescuing memories of social relationships and past moments was evidenced.

> I remember forró from my childhood with my grandparents, love songs make me remember people I got involved in a relationship, reggae reminds me of when I used to go out with friends. (U2)

> *I have a feeling of freedom. I start to dream all over again, all the places I went to, the places where I played.* (U9)

Respondents also revealed that activities with music are rewarding. Their reports show satisfaction for participating in the group and indicate a better bond with the treatment:

I feel good because we're going to sing and share about music, I know that I'm going to play, that people is gonna hear, [...] It is a relief, mission accomplished, another day of treatment. (U3)

Music also is perceived as a facilitator of social exchanges and it is evaluated as a positive resource in the expansion of cultural knowledge.

> [...] I don't have the gift for singing, but I enjoy music so much, because we're Brazilians, and our culture is very rich in terms of music [...]. People gain more knowledge, because music is culture. (U2)

It was possible to verify that different types of music can cause different feelings.

I don't like Brazilian Funk, I don't like the lyrics, they're very obscene. [...] They give me indignation and anguish. (U1)

What I don't like is double meaning music, pornographic music and also these Rap types, but I like all the other things. (U7)

The negative perception of music has also been pointed in relation to musical styles or when the song lyrics

bring messages that interfere negatively in the treatment process.

The songs I don't like are the ones that talk about drugs and reggae, I just go away [...] I feel like it wants to take me to the same place I was. (U4)

Topic 2: The Therapeutic Potential of Music

When asked about possible changes in their lives and treatment influenced by participation in the music group, the following answers were obtained:

I learned to listen more to my friends and that I'm not the only one there, [...] so it is companionship to get to listen to others. (U3)

I got more popular, I was shyer. I've been here for four years and only in the past two years that I became more outgoing. (U5)

It was possible to notice that music influences many contexts and is considered important for contributing in personal and collective changes, collaborate in interpersonal exchanges and facilitate movement at the environments.

The wish music was present in more service activities was evident, since the respondents understand this therapeutic approach as a necessity.

> I get anxious, I miss it when it doesn't happen. [...] In my opinion, there should be more, even to play an instrument, to set up a band. (U1)

> [...] We want more, we want an instrument for each one, we want to tune up. (U9)

From the understanding of this need, music has also been described as a tool for individual and group transformations in the confrontation of difficult situations of daily life, in the improvement of living conditions and treatment of respondents.

Yesterday I [...] I got here furious, I withdrew and didn't want to talk to anyone, I just asked L. to sing for me. That's what calmed me down. (U1)

[...] I'm sure music is the main tool to get rid of drugs, to leave any bad habit you have. (U9)

DISCUSSION

This research showed that music is able to recover positive feelings, improve self-esteem, transform realities, bring joy, relaxation and tranquillity, thus promoting wellbeing. This indicates that she carries out functions that go beyond simple distraction, becoming a communication tool capable of exceeding the limits of verbal expression⁶.

It allows the association with significant past experiences that evoke specific memories, in which it is possible to recover emotions, imagination and life experiences⁷.

In this way, by articulating music with life experiences and daily life, the therapeutic dynamics uses music as a facilitator of memory stimulus. So, in addition to awake feelings and experiences, its use can enable resignification of memories.

According to Sekeff⁸, music is a resource for personal development, balance, stimulation and integration of individuals to the sphere where they live, able to promote the development of potentialities as well as associate and integrate experiences.

Bergold et al.⁹ consider that by using music in a group, it stimulates creativity, relaxation and fun. Even those who have no musical skills can learn how to play simple instruments. Movement and dance can also be stimulated and facilitated. Considering ludic possibilities, music is able to favor social interaction.

Within this understanding, the research also showed that participation in a group activity that generates positive emotions help to build interpersonal bonds.

The role of music as a mediator of relationships that are developed in the therapeutic setting, facilitates the establishment of new bonds, through the awareness of the self and the other in the collective perspective.

If we consider some aspects of the reality of the subjects being treated in CAPSad, such as: many bonds are broken due to the dependency process of psychoactive substances such as alcohol or other drugs, these subjects present serious difficulties establishing new bonds and the main working network among their bonds is the CAPS¹⁰; we can say that the music group, inserted in the context of therapeutic activities, has been recognized as a potentiator to establish new bonds and to keep them, therefore showing up as a component that operates positively in this binding process.

By experiencing the music, a relationship is established with the network of meanings constructed in the social world. As an integrant part of a culture, musical activity is lived in the collective dimension, which can receive meanings that are socially shared¹¹.

When used for therapeutic purposes in the CAPS, music allows people to share problems, interact with others by providing support and assistance in the process of solution of the difficulties experienced. Besides mediating relationships, it also meets other objectives such as expansion of knowledge and personal potential, as well as development of practices focused on cultural and social local issues.

Although it is possible to cite a range of benefits brought by music, it is important to notice the social and cultural context to which individuals are inserted, as it is necessary to point out that activities with music can also bring negative feelings.

A selection of inappropriate songs can act as a stressing factor⁹. Moreover, feelings and reactions awake by music are not equal for all people. Therefore, it is difficult to generalize musical communication and meaning, as this is a dialectical process and happens in the cultural dimension, through the action of the subjects¹¹.

For that reason, we must take into consideration the relation of each subject with music, being difficult to propose a general rule. Music reports each person's uniqueness and their personal, family and cultural experiences, and, therefore, it may interfere positively or negatively according to each lived experience⁶.

By promoting the awakening of affectivity and contribute to the way subjects perceive the world that surround them¹², music may be able to remove barriers, minimize resistance, improve communication and the relationship with the user and yet facilitate access to the treatment¹³.

By participating in the group, the users point out music as a need, claim the interest in more activities with music in the CAPS, demonstrate the desire to learn how to play instruments, to form bands for performances within the service or even in other spaces. It is understood that the contact with music provides achievements that lead to recognition of reality and appropriation of yourself. In this way, users demonstrate interest in transforming their reality.

In addition, activities with music can cause physical reactions that allow changes and transformations, leading subjects to operate new realities that intensify their lives¹⁴. As an integrant part of the art, music has the capability to favor the expression of feelings, emotions, sensations, perceptions and, as a consequence, to organize inner content¹⁵.

In a group context and used for purposes of support care strategies of the CAPS, music is described as a tool that facilitates individual and group transformations in the confrontation of difficult situations of daily life and in the improvement of living conditions.

The CAPS should choose interventions that can establish bonds that get stronger day after day¹⁶, that offer hosting spaces for different needs of subjects in mental distress and that may give effective responses to these needs, contributing to the establishment of bonds with the institution and the treatment.

In this sense, as evidenced in the study, music collaborates in this binding constitution and, through it, the service can develop insertion not only inside, but outside of it.

Therefore, as an intervention resource in the CAPSad, music appears to be a significant component, a potentiator of individual and collective changes and, therefore, it should be more present in therapeutic actions aimed at rehabilitation and inclusion.

CONCLUSION

The main objective of this study was to understand the role of music in life and treatment of users from a CAPSad and, from the results, to think about its use as a tool of intervention.

It was evidenced that music promotes the resignification of memories, expression of emotions and perception of reality and its use in the therapeutic context favors the internal balance and facilitates exchanges inside groups, in culture and territories where they move or want to move.

In this sense, the experience reported indicates that services and professionals involved in mental health care, should consider the use of music in new therapeutic propositions, expanding its transforming potentialities that operate in the individuals, collectively and, more importantly, in strengthening the bonds that are so compromised in the course of drug dependence.

Finally, we must point out that the study refers to only one service, therefore, it stands out the need for more comprehensive studies related to the use of music as a therapeutic resource in mental health care services.

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