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Therapeutic Effect of Music on Depression Among Youths in Warri Metropolis in Delta State

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ABSTRACT

The prevalence of depression and other mental health issues among young people is increasing all over the world. Depression has been found to be the most common single risk factor for youth whocontemplated or committed suicide. On the other hand, music therapy is a goal-directed and therapeutic approach in which music is used to improve, sustain, and restore a state of well-being in individuals. It is a therapeutic interface that improves the psychological, physical, emotional and social well-being of people. The purpose of this paper is to investigate the therapeutic effect of music on depression among youths in Warri metropolis of Delta State. Four Hundred (400) respondents from Warri South Local Government Area of Warri were used as the sample for the study which were narrowed down to One Hundred and Seventy Four (174) by Zung Self-Rating Scale. A well-structured questionnaire was used to collect data. The data collected were analyzed using simple percentage. Results showed significant relationship between music therapy and improvement in depression and emotional health management among respondents. Furthermore, the study revealed a high tendency of youths to slides into depression as a result of the prevailing socioeconomic conditions in the country and poor judgment and reaction to emotional issues. The findings of this study suggest that respondents who uses music therapy as a form of relaxation technique tend to have improve mental health and overcome depression. It is therefore recommended that, music therapists, counsellors and psychotherapists should continue to explore the beneficial effects of music therapy with relaxation as a way to overcome depression among youths.

Key word: Depression, Music Therapy, Music, Mental health, relaxation therapy, emotional health, Youth

1.0 Introduction

Today, Nigerian youths are unable to attain full potential due to increasing socio economic challenges facing the nation. The National Bureau of Statistics (2012), through the National Youth Policy defines a youth as a Nigerian between the ages of 18-35 years. The National Bureau of Statistics (2012), places Nigerians below 35 years at 60% of the entire population of the country. This statistics affirms the fact that the Nigerian youths are the ones hit the hardest by the challenges ravaging the nation.

The nation today with lots of socio- economic challenges ranging from inadequate healthcare facilities, large scale unemployment, poverty, insecurities have plunged the minds of many youths into the well of uncertainties, leading a greater proportion of youths to depression, crimes and lots of social vices. Depression is a significant challenge faced by the Nigerian society today. Having these realities on ground, it is therefore necessary to investigate and find helpful ways through the stage of depression. In this study we shall be exploring the therapeutic effect of music on depressed youths in Warri metropolis of Delta State.

2.0 Conceptual framework

WHO (2021), defines depression as a mental disorder characterized by an all-encompassing low mood, loss of interest, unemployment and reduced energy leading to increased fatigability and diminished activity. Zung (1965) also defined depression as any change in an individual life that causes alteration in the physical, mental or emotional state, which was assessed through the Zung self- rating depression scale.

Depression is the most prevalent form of emotional disorder experienced during adolescent and youth age; it presentsitself with depressed mood, loss of interest of pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, poor concentration, regret, worthlessness, hopelessness and confused thinking (Lapine & Briles, 2011, Derinde, Dada, Ogun et al., 2018). This disorder causes individuals, families, and communities' significant psychological trauma, diminishing quality of life, increasing disability and mortality rates. The above statement is backed by a report from WHO (2017) which stated that depression of medium or severe intensity increases risks of substance abuse and severe health problems such as diabetics and heart disease.

Depression can be caused by genetics, illness and drugs (Jamabo & George, 2014). It could also occur as a result of unfavorable life events such as loss of an important person, object, relationship or health, but can also occur due to no apparent cause, which when chronic can lead to asubstantial impairment in an individual's ability to take care of his/her everyday responsibilitiesNwajei et al.,(2021). The World Health Organization has predicted depression to be the second major cause of morbidity, only after cardiovascular disease throughout the world by 2020 (Moasheri BN, Sharifzadeh G, Nahardan M, Suofi K, 2016). To make things worse, depression has been closely associated in high income countries with suicide(WHO, 2021)

Depression among youths in Nigeria is a highly prevalent condition that is often under recognized or detected by families and physicians alike (Saluja, Lachan, Scheidt et al., 2004). Assumptions placed on the effect of puberty, hormones has made parents have little concerns about their youths living in depression. The poor state of the Nigerian economy and challenges across many sectors are not only creating uncertainties for the youths but also pushing them into depression. The Nigerian government ought to address the socio-economic and security challenges facing the nation, tackling the challenges may allay the fears of the youth about their future (UNICEF 2021). The fear of an unknown future is a contributory factor to why young Nigerians feel over pressured to secure for themselves a future by any means. Young people who are depressed are emotionally handicapped and have trouble making decisions (Klerman 1980; Nazu and Perri 1989).

Although there are known effective therapeutic systems used for treatments of depressive disorder, out of which the most basic is allopathic therapy. Allopathic therapy has to do with the use of drugs in the treatment of ailments. These drugs could be administered orally or in intra muscular or intravenous forms, some of such drugs could include antidepressant medication. It has been noted that these drugs when administered have their own side effects. Other therapeutic systems deployed in the management of depression are behavioral activation, cognitive behavioral therapy and interpersonal psychotherapy (Evans-Lacko S, Aguilar-Gaxiola S, Al-Hamzawi A, et al., 2018). Non-Pharmacological interventions (NPI) or non-pharmacological therapies (NPT) are defined as any non-chemical, which is theoretically supported, targeted and replicable, performed on a patient or caregiver and potentially capable of obtaining a relevant benefit (Olazaran J, Clare L, et al. (2006).

Music therapy falls under the Non-Pharmacological Interventions. It basically involves the non-usage of any pharmacological substance but music in the treatment of emotional, mental or physical disorders. Cottrell (2002) as cited by Aluede&Omoera (2014) asserts that "since the beginning of recorded history, music has played a significant role in the healing of humankind; music and healing were communal which were natural to everyone". The concept of Music therapy has various definitions. It has been defined by various persons, since inception its meaning has evolved. Wang & Agius (2018) define Music Therapy as the use of Music in a therapeutic context in order to help improve mental health. Alvin (1975) defined Music Therapy as the controlled use of music in the treatment, education, training and rehabilitation of children and adults suffering from physical, mental and emotional disorders. Alvin's definition of Music Therapy clearly support the use of music as a therapeutic tool by all and not just by a professional music therapist. In this light this study is aimed in finding out how individual youths implore the therapeutic effect of music during depression.

Depression is a mental disorder characterized by a sad mood and a lack of interest in things, topics, associations, relationships that were once of interest. Its onset and progression are always accompanied by internal conflicts, despair, unusual tiredness and worry. Music is one of the most vital and appealing aspects of human spiritual existence. It is present throughout human history and pervades all facets of social life. It generates and continues to play a significant role that cannot be overlooked (Ram H, Dastager SG (2019). Music and its physical, emotional, spiritual, social and artistic aspects help people improve their health. It is one of the supplementary therapies for healthcare. Through listening, music therapy can act directly on the emotional centers of the human brain such as the hypothalamus and limbic system, influencing the patient's mental state and reducing despair and anxiety. This is important to those suffering from depression.

The use of music for mental health management has a wide range of application: from general mood elevation and stress reduction to clinical interventions designed to treat mental illnesses. Studies have shown evidence of successes in the application of music-based approach to mental health management and treatment. Some of the outcome includes improvement in the prospect of patients in assessment of care (Schroeder, 2018; Fancourt & Finn, 2019). Historically and from biblical-account music-based intervention has been used as a support for mental health management, this can be seen in the case of King Saul, where David implore the use of music in the treating of king Saul's mental disorder. Other studies equally suggest that mental health management and treatments that integrate music may improve health by providing benefits associated with arts exposure and participation, such as increased social connectivity(Kreutz, 2014; Welch et al., 2014; Fancourt et al., 2016). Consequently the purpose of this study was to investigate music therapeutic effect on depressed youths in Warri metropolis of Delta State.

Research Questions

The following research questions guided the study:

- 1. Would Youths in Warri Metropolis have the knowledge of Music?
- 2. Would Youths in Warri Metropolis have the knowledge of Depression?
- 3. Would Youths in Warri Metropolis have the knowledge of Music having a therapeutic effect on Depression?

3.0 Methodology

The study was designed to explore the therapeutic effect of music on depression among youths in Delta State. The quantitative research approachwas adopted forthisstudy with data collected from participant through questionnaires. The population for this study was youths in Warri metropolis in Delta State. The sample size consisted of youths in Warri randomly selected from Edjeba, Ugbuwangue, Ekurede –Urhobo, Egbokodo and Esisi.

Method of data collection: Data were collected using questionnaires. 400 questionnaires were distributed and all were returned. The respondent were asked to complete a questionnaire taking approximately 15mins. The questionnaire was divided into 3 sections with Section 'A' asking questions on biographic information regarding Age, Gender, Marital and Employment status. Section 'B' was the Zung Self-Rating Depression Scale (SDS) meant to ascertain the level of depression of the respondent. Section 'C' had 14 questions on the research questions. Completion and submission of questionnaires were entirely voluntary. The 400 questionnaires were made to pass through Zung Self-Rating Depression Scale (SDS) where 16 were rated severely depressed, 54 moderately depressed and 104 mildly depressed, totally 174 samples. The study made use of the 174 community samples consisting of 78 males and 97 females, with age ranging from 18-35.

The Zung Self-Rating Depression Scale was designed by William Zung to assess the level of depression for participants with depressive disorder. The Zung Self-Rating Depression Scale is a shortself-administered survey to quantify the depressed status of a participant. There are 20 items on the scale that rate the four common characteristics of depression: the physiological equivalents, other disturbances, and psychomotor activities. The Zung Self-Rating Depression Scale has fairly good reliability.

There are ten positively worded which are reversed scored (from 4 down to 1) and tennegatively worded questions scored from 1 to 4. Each question is scored on a scale of 1 through 4 (basedonthesereplies:"alittleofthetime,""someofthetime,""goodpartofthetime," "mostofthetime"). Scoresonthetestrangefrom 20through 80. The raw score is converted to a SDS index score by multiplying by 1.25 or raw score divided by 80 and multiplied by 100. Thescoresfallint of our ranges.

20-49: NormalRange

50-59: MildlyDepressed

60-69 : Moderately Depressed

70and above: SeverelyDepressed

StatisticalAnalysis

Descriptive and analytical statistics were used for statistical analysis. Demographic variables were analyzed using simple percentage method in answering research questions.

4.0 Results

The levelof depression was assessed and data on the therapeutic effect of music on the depressive participants obtained. The data collected was grouped and analyzed using descriptive and inferential statistics in the form of tables and figures. With the study intended to find the effectiveness of music on depressive participants, a total of 174 samples rated by Zung Self-Rating Depression Scale to be suffering from depression participated. Data collected from the 174 samples were tabulated, analyzed and interpreted to study the therapeutic effectiveness of music on depression among the depressive participants. The baseline data were age, sex, employment status and marital status.

Table 1 Distribution on Demographic Variables of Participants

(N=174)

Variable	Option	Frequency	Percentage
Gender	Male	100	57.5%
	Female	74	42.5%
	Total	174	100%
Age	18-23	88	50.6%
	24-30	64	36.8%
	31-35	22	12.6%
	Total	174	100%
Marital Status	Married	36	20.7%
	Single	136	78.2%
	Unmarked	2	1.1%
	Total	174	100%

Employment Status	Public/Private Employment	62	35.6%
	Self Employed	32	18.4%
	Unemployed	74	42.5%
	Unmarked	6	3.5%
	Total	174	100%

Theabovetable 2.1 showsthedistribution of demographic variables in experimental group. With regard to age majority of the participants 50.6 % (88) were 18 - 23 years of age, 36.8% (64) were 24-30 years and 12.6% (22) were 30-35 years of age. With regard to gender 57.5% (100) were males and 42.5% (74) female. For marital basis, 20.7% (36) were married, 78.6% (136) were unmarried and 1.1% (2) did not specify their marital status. With regards to employment status, 35.6% (62) were publicly/privately employed, 18.4% (32) self- employed, 42.5% (74) unemployed and 3.5% (6) unmarked.

TABLE 2 Distribution of Test Scores on the Level of Depression among the Depressive Participants InExperimentalGroup Using Zung Self Depression Scale.

(N=174)

Level of Depression	el of Depression Experimental group		
	No of		Percentage
	participant		%
Nodepression		-	-
Milddepression		104	59.8
Moderatedepression		54	31.0
Severedepressio		16	9.2
Total		174	100

Test analysis

The above table shows the distribution of test scores on the level of depression among depressive community participant using the Zung Self-Depression scale. Concerning level assessment of depression, 59.8% had mild depression, 31.0% had moderate depression, while another 9.2 % had severe depression.

Research Question One

Would Youths in Warri Metropolis have the knowledge of Music?

Table 3 Distribution of Youths knowledge of Music

S/N	Knowledge of Music	Agreed	Disagreed	Undecided	Total
1	You feel a sense of relaxation when you listen to Music	97.7%	-	2.3%	100%
				4	
		170			174
2	You have heard of Music Therapy	62.1%	36.8%	1.1%	100%
		108	64	2	174
3	You have used Music Therapy	59.8%	39.1%	1.1	100%
		104	68	2	174

Table 3 above shows the distribution of participants' knowledge of music. 97.7% (170) agreed that there is a sense of relaxation listening to music, nonedisagreed, and 2.3% (4) were undecided.62.1% (108) agreed to item 2, with 36.8% (64) disagreeing and 1.1% (2) not deciding. Item 3 had 59.8% (104) agreeing, 39.1% (68) disagreeing and 1.1% (2) unable to decide. Therefore a high percentage of respondent have a knowledge of music.

Research Question Two

Would Youths in Warri Metropolis have the knowledge of Depression?

Table 4 Distribution of Youths Knowledge of Depression

S/N	Knowledge of Depression	Agreed	Disagreed	Undecided	Total
1	You have been down hearted	70.1%	27.6%	2.3%	100%
		122	48	4	174
2	You have had trouble sleeping at night	67.8%	29.9%	2.3%	100%
		118	52	4	174
3	You have been depressed	71.3%	28.7%	-	100%
				-	
		124	50		174
4	You have used medication such as anti-depressant along	16.1%	81.6%	2.3%	100%
		28	142	4	174

Table 4 above shows the distribution of participants' knowledge on depression.70.1% (122) agreed to have been down hearted, 27.5% (48) disagreed and 2.3% (4) undecided. 67.8% (118) agreed with item 2, 29.9% (52) disagreed and 2.3% (4) remain undecided. Items 3 and 4 shows 71.3% (124), 16.1% (28) agreeing, 28.7% (50), 81.6% (142) disagreeing, with 2.3% (4) remaining undecided respectively. A high percentage of respondent have a knowledge of depression.

Research Question Three

Would Youths in Warri Metropolis have the knowledge of Music having a therapeutic effect on Depression?

Table 5 Distribution of Youths knowledge of the therapeutic effect of Music on Depression

S/N	Knowledge of Music's therapeutic effect on Depression	Agreed	Disagreed	Undecided	Total
1	Music have Positive effect on your mood	73.6%	26.4%	-	100%
		128	46		174
2	Music therapy help my depression	62.1%	36.8%	1.1%	100%
		108	64	2	174
3	Music Therapy was very helpful to my mood and depression	48.3%	45.9%	5.7%	100%
		84	80	10	174
4	The effect of music on your mood last for days	82.8%	16.1%	1.1%	100%
		144	28	2	174
5	Listening to music between 5-60 mins have effect on your mood	67.8%	28.7%	3.5%	100%
		118	50	6	174

6	You have tried using music to positively influence your mood and it didn't work	51.8%	39.0%	9.2%	100%
		90	68	16	174
7	All genres of music positively affect your depressed state.	41.4%	56.3%	2.3%	100%
		72	98	4	174
		72			
8	You feel better listening to Fast paced genres of music like Dancehall, Hip-hop only	44.8%	52.9%	2.3%	100%
		78	92	4	174
9	You feel better listening to slow paced genres of music like Blues, country, Reggae	48.3%	50.6%	1.1%	100%
		84	88	2	174
10	You feel better listening to both fast and slow paced genres of music	72.4%	26.4%	1.1%	100%
					174
		126	46	2	

Table 5 above shows the distribution of participants' knowledge of the therapeutic effect of music on depression. From the data analyzed above, majority of the respondent have knowledge on music having a positive effect on mood with 73.6% (128) agreeing, 26.4% (46) disagreeing, music helping depression with 62.1% (108) agreeing, 36.8% (64) disagreeing, 1.1% (2) undecided. The duration of the effect of music on mood and depression with 48.3% (84) agreeing, 45.9% (80) disagreeing, 5.7% (10) undecided. Item 4 was on duration of listening to music for effect on mood and depression,82.8% (144) agreed, 16.1% (28) disagreed, 1.1% (2) undecided. 67.8% (118) of the respondent agreed to item 5 which stated that listening to music between 5-60 mins has effect on mood. Item 6 stating you have tried using music to positively influence your mood and it didn't work has 51.8% (90) agreeing, with items 7, 8 &9 having 56.3% (98),52.9% (92) and 50.6% (88) in disagreement respectively. 72.6% (126) agreed that you feel better listening to both fast and slow paced genres of music.

4.0 Discussion

Different genres of music have been shown to reduce depression levels in the studies described above. Although music has been shown to have a significant therapeutic impact in the treatment of psychiatric disorders in several scientific studies conducted by notable experts throughout the world, Nigeria based music has been used in this study for the current population. Various genres of music are commonly used, depending on the culture, not only for therapeutic purposes but also for musical enjoyment.

The current study found that music has a therapeutic effecton depression. The implication of the result in table3 shows that majority of the youths in Warri are aware of music having therapeutic effect. The result in table 4 revealed that majority of Youths in Warri metropolis of Delta State have a knowledge of depression, with table 4, item 4 showing majority of depressed youths have not been on anti-depressant. Theresult in table 5 reveals that Music has a therapeutic effect on mood, depression with items 7,8,9 &10 showing the effectivenessof the different genres of music in helping depression. Finally, results in table 5, item 10 revealing that respondents listening to both slow paced music genre such as Blues and fast paced music genre such as Rap feel better in their depressed mood than listening to either.

5.0 Conclusion

The study was conducted to identify the therapeutic effect of music on depressionamong depressive youth in Warri metropolis Delta State. Findings from the study reveals that genres of music is important in the effectiveness of music therapyon depression. The study suggests that there should be more sensitization on depression amongst youths, the use of anti-depressant drugs and music therapy in managing depression be widely encouraged.

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