



# MUSICIANS VS. MUSIC THERAPISTS: UNDERSTANDING THE DIFFERENCE AND THE ROLE OF THERAPY IN MUSIC

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## Abstract

*Music therapy has emerged as a recognized field within healthcare, mental health, and wellness, yet it remains widely misunderstood. This article explores the critical distinctions between music therapy and musicianship, addressing common misconceptions that often blur the roles of music therapists and musicians. By examining the unique training, therapeutic objectives, and interdisciplinary nature of music therapy, this study clarifies its role as a clinical practice rather than a form of entertainment. Utilizing a literature review and qualitative analysis, we identified prevailing myths that may mislead clients and healthcare providers alike, potentially diminishing the perceived legitimacy and therapeutic value of music therapy. This paper aims to understand these distinctions and reinforce the significance of music therapy as an essential therapeutic modality that integrates psychology, medicine, and the arts to promote holistic care and improve patient outcomes.*

**Keywords:** music therapy, musicianship, misconceptions, healthcare, interdisciplinary, clinical practice

## INTRODUCTION

In a world where music has the power to inspire, heal, and connect us, a meaningful yet often misunderstood distinction exists between musicians and music therapists. While music therapy is a recognised clinical practice in healthcare and wellness, general music performance primarily emphasises artistic expression and entertainment. Music therapy involves the systematic use of music as a therapeutic tool to address physical, emotional, cognitive, and social needs across various settings (Aigen, K. 2013). Practitioners require specialized training, combining an understanding of therapeutic processes, psychological principles, and the clinical application of music to foster well-being and support healing (Amir, D. 1999).

In music therapy, the purpose is not merely enjoyment; rather, music interventions are used purposefully and scientifically to achieve therapeutic goals tailored to each client. These goals might include reducing anxiety, managing pain, improving communication, or enhancing the quality of life for individuals with various medical, psychological, or developmental needs (Baker, D. 2014). Techniques such as guided imagery, songwriting, and improvisation are employed to engage clients in meaningful musical experiences that support their therapeutic journey (Carr, C., Odell-Miller, H., & Priebe, S. 2013). Music therapy is a client-centered practice, emphasising each individual's therapeutic needs, cultural background, and music preferences rather than focusing on musical performance quality.

Despite these distinctions, people often confuse the roles of musicians and music therapists, leading to misconceptions about the skills, training, and objectives unique to each profession. Musicians are trained in performance, composition, and artistic expression, dedicating themselves to refining musical technique and artistic interpretation. Their work revolves around aesthetic, cultural, and expressive dimensions of music (Ballantyne, J. 2007), which, while deeply valuable, differ fundamentally from the clinical, goal-oriented focus of music therapists.

The purpose of this article is to clarify these distinct roles, illustrating how music therapists and musicians differ in terms of skills, training, and intended impact on clients or audiences. By understanding these differences, readers can better appreciate music therapy as a legitimate therapeutic discipline, while also recognizing the unique contributions musicians bring to culture and emotional well-being. This clarification will help healthcare providers, clients, and aspiring professionals understand when to seek the services of a





music therapist rather than a musician, as music therapy continues to grow as a clinical field rooted in research, therapeutic intent, and client-centered care.

## REVIEW OF LITERATURE

The distinction between music therapy and musicianship has become a significant area of exploration in recent literature, as researchers and practitioners strive to define each field's unique roles, methodologies, and impacts. This review examines foundational and contemporary studies in music therapy, highlighting its clinical applications and scope, while also exploring literature on musicianship to underscore its socio-cultural contributions. Addressing misconceptions, this section reveals common misunderstandings and clarifies the specialized nature of music therapy within healthcare and therapeutic contexts.

### 1. DEFINING MUSIC THERAPY AND ITS CLINICAL APPLICATIONS

Music therapy is a field grounded in clinical research, blending psychology, medicine, and music to create therapeutic outcomes. Studies emphasize its focus on health-related goals and evidence-based practices that distinguish it from general music-making (Aigen, 2014). Research underscores music therapy's goal-oriented nature, revealing the tailored approaches used to address specific physical, emotional, and cognitive needs across various populations (Moreno, 2003). Additionally, empirical evidence highlights music therapy's efficacy in mental health contexts, showcasing positive outcomes in areas like anxiety reduction, emotional expression, and social cohesion, particularly for individuals with Alzheimer's, PTSD, and other conditions (Silverman, 2011; Ferrer, 2014).

### 2. MUSICIANSHIP AND ITS ROLE IN CULTURAL AND SOCIAL ENVIRONMENTS

While musicianship does not typically aim to achieve clinical outcomes, it serves a crucial role in cultural expression, emotional sharing, and community building. Research reveals how music participation enhances social well-being and fosters communal bonds (Clift & Hancox, 2010). This perspective extends to the role of musicians in enhancing social environments without the clinical responsibilities or therapeutic assessments that characterize music therapy (Ansdell & Pavlicevic, 2005). These studies suggest that musicianship contributes to social cohesion and personal enjoyment, but it does not engage with therapeutic or clinical planning integral to music therapy.

### 3. TRAINING AND METHODOLOGICAL DISTINCTIONS

Research emphasizes the extensive training required to become a certified music therapist, which includes coursework in psychology, physiology, and therapeutic methods. Studies highlight the interdisciplinary training that sets music therapists apart from musicians, enabling them to conduct assessments, create individualized treatment plans, and integrate their services within healthcare teams (De Backer & Sutton, 2014). This preparation allows music therapists to develop measurable treatment objectives and respond to clients' health needs, distinguishing their work from musicians who primarily focus on artistic expression and technical skill (Stige & Aarø, 2012).

### 4. ADDRESSING MISCONCEPTIONS IN THE LITERATURE

The literature discusses common misconceptions that hinder the public's understanding of music therapy. Studies address widespread myths, such as the belief that any musician can function as a music therapist, emphasizing the rigorous training and specialization required (Aigen, 2014). Another misconception is that music therapy is solely passive listening, when in fact, it often involves active, client-centered interventions tailored to therapeutic goals (Vaillancourt, 2012). These misconceptions highlight the need for clearer public education on the differences between music therapy and musicianship, particularly regarding professional qualifications and clinical intent.





## 5. THE INTERDISCIPLINARY AND COLLABORATIVE NATURE OF MUSIC THERAPY

An important focus in music therapy research is its collaborative approach within healthcare settings. Studies demonstrate that the interdisciplinary nature of music therapy reinforces its alignment with healthcare goals, whereas musicianship remains largely within the artistic domain without these collaborative structures (De Backer & Sutton, 2014; Moreno, 2003). Music therapists often work alongside medical, psychological, and social work professionals to address patients' holistic needs, further differentiating their practice from that of musicians.

### METHODOLOGY

This study employed qualitative content analysis to examine and clarify the differences in training, purpose, and application between musicians and music therapists. Qualitative content analysis is a method well-suited for analyzing textual data by identifying and categorizing key themes within the literature (Carello & Butler, 2014). This approach was systematically applied to explore how each profession approaches music, focusing on aspects such as educational background, therapeutic or performance-based objectives, and application settings (Aigen, 2014).

To begin, a set of primary themes was established, guided by key questions:

- What are the educational requirements for musicians versus music therapists?
- What are their primary professional goals?
- How and where do they apply their skills?

Each study or article collected through the literature review was carefully analyzed to identify relevant excerpts or statements that addressed these questions. These excerpts were then coded based on recurring themes, such as "clinical versus performance goals," "client-centered focus," and "therapeutic versus aesthetic application" (De Backer & Sutton, 2014).

This thematic analysis helped organize the findings into distinct categories that highlight the specialized role of music therapists and the broader, performance-oriented role of musicians. This approach provided clarity in contrasting the two fields while examining common misconceptions that often blur the distinction between musicianship and music therapy (Davis et al., 2008).

By systematically categorizing this information, the qualitative content analysis laid a foundation for discussing and debunking myths about music therapy, ensuring the findings are grounded in documented research and professional standards within each field.

## RESULTS AND DISCUSSION

### DIFFERENCES IN TRAINING AND PROFESSIONAL STANDARDS

Musicians typically undergo training focused on technique, performance, and artistic interpretation. Their primary aim is to convey emotion, entertain, or provoke thought, using music as an expressive medium (Baker, 2014). In contrast, music therapists undertake specialized training that combines musical skills with clinical and psychological knowledge. Accredited programs in music therapy emphasize coursework in psychology, anatomy, therapeutic techniques, and supervised clinical practice (Davis et al., 2008). For example, board-certified music therapists (MT-BC) must complete rigorous academic programs, supervised internships, and national examinations in the United States (American Music Therapy Association, n.d.).

Misconception: Some believe that any musician can provide music therapy simply by playing or singing in a hospital or wellness setting. This misconception diminishes the professional qualifications of music therapists





and overlooks the therapeutic expertise needed for client-centered, goal-oriented intervention (Erkkilä et al., 2011).

### **PURPOSE AND GOALS OF MUSIC THERAPY VS. MUSICIANSHIP**

The goals of music therapy differ significantly from those of musicianship. While musicians aim to evoke emotions or connect with an audience, music therapy utilizes structured interventions to achieve therapeutic goals such as physical coordination or emotional healing (Magee et al., 2017). Music therapists engage clients in active music-making, creative expression, and movement-based activities, fostering a dynamic therapeutic environment (Garred, 2005).

Misconception: A common misconception is that music therapy involves passive listening to pleasant sounds, ignoring the interactive and goal-oriented nature of therapy (Carr et al., 2013).

### **APPLICATION IN HEALTHCARE AND MENTAL HEALTH SETTINGS**

In healthcare settings, music therapy has been shown to support pain management, anxiety reduction, and emotional regulation (Lee, 2016). For instance, music therapists working with surgical patients or individuals undergoing cancer treatment tailor interventions to achieve measurable outcomes, such as lowering preoperative anxiety (Gold et al., 2009).

Misconception: Many equate live musical performances in hospitals with music therapy, undervaluing the structured, evidence-based approaches employed by music therapists (Amir, 1999).

### **EVIDENCE OF EFFECTIVENESS AND CLINICAL BENEFITS**

A significant body of research reinforces music therapy's position as a clinical intervention. Studies indicate that music therapy improves physiological markers such as heart rate and blood pressure, while also enhancing emotional well-being in medical patients (Jäncke, 2008). In mental health, music therapy facilitates emotional release, promotes self-esteem, and offers an effective outlet for individuals coping with trauma (Erkkilä et al., 2011).

Misconception: The perception that music therapy lacks scientific backing contributes to skepticism among healthcare providers. However, evidence-based practices, supported by interdisciplinary research, ensure that music therapy interventions are both scientifically grounded and individually meaningful (Clift & Hancox, 2001).

### **ROLES AND RESPONSIBILITIES IN THERAPEUTIC CONTEXTS**

Music therapists are responsible for conducting assessments, setting clinical goals, and evaluating progress, akin to other healthcare professionals (Davis et al., 2008). In contrast, musicians in hospitals or communities focus on bringing comfort and joy, without clinical objectives (Levitin, 2008).

Misconception: Musicians performing in therapeutic settings are sometimes mistakenly viewed as fulfilling the same role as music therapists, leading to underutilization of trained professionals (De Backer & Sutton, 2014).

### **THE INTERDISCIPLINARY NATURE OF MUSIC THERAPY**

Music therapy integrates psychology, medicine, and the arts to provide holistic care, distinguishing it from musicianship, which remains largely within the artistic realm (MacDonald & Saarikallio, 2024). Music therapists collaborate with healthcare teams to align interventions with broader treatment goals, ensuring clinical efficacy (Denora, 2000).

Misconception: The notion that "playing music" suffices for therapy fails to acknowledge the extensive training and clinical expertise required of music therapists (Carello & Butler, 2014).





## CONCLUSION

In conclusion, music therapy stands apart as a specialized and evidence-based clinical practice, distinct from the art of musicianship. While both fields utilize music as a central medium, their purposes, methodologies, and impacts diverge significantly. Music therapists are trained professionals who harness the power of music to address specific therapeutic goals in healthcare, mental health, and rehabilitation, using a structured, individualized approach to enhance emotional, cognitive, and physical well-being. In contrast, musicians focus on artistic expression, performance, and the aesthetic experience of music, without the clinical interventions that music therapists employ.

This article has highlighted key distinctions in training, goals, application, and evidence of effectiveness between musicians and music therapists. It has also addressed common misconceptions, such as the assumption that music therapy is simply passive listening or that musicians can easily perform the same therapeutic functions as certified therapists. By clarifying these misunderstandings, it becomes clear that music therapy is an essential tool in healthcare, offering unique benefits that go beyond the scope of musical performance.

Ultimately, music therapy's true value lies in its integration of music with psychology, medicine, and human connection, forming an interdisciplinary practice that fosters healing, growth, and well-being. Recognizing the specific roles of both musicians and music therapists enhances our understanding of how music can be used to serve diverse needs, from therapeutic interventions to artistic enjoyment. The continued development and recognition of music therapy will ensure that its powerful potential as a healing modality is fully realized and appreciated.

## REFERENCES

- Aigen, K. (2014). The study of music therapy: Current issues and concepts.
- Amir, D. (1999). Musical and verbal interventions in music therapy: A qualitative study. *Journal of Music Therapy*, 36(2), 144–175. <https://doi.org/10.1093/jmt/36.2.144>
- Baker, D. (2014). Becoming a musician: Crafting a career in classical music.
- Ballantyne, J. (2007). Integration, contextualization and continuity: three themes for the development of effective music teacher education programmes. *International Journal of Music Education*, 25(2), 119–136. <https://doi.org/10.1177/0255761407079955>
- Carello, J., & Butler, L. D. (2014). Potentially perilous pedagogies: teaching trauma is not the same as trauma-informed teaching. *Journal of Trauma & Dissociation: The Official Journal of the International Society for the Study of Dissociation (ISSD)*, 15(2), 153–168. <https://doi.org/10.1080/15299732.2014.867571>
- Carr, C., Odell-Miller, H., & Priebe, S. (2013). A systematic review of music therapy practice and outcomes with acute adult psychiatric in-patients. *PloS One*, 8(8), e70252. <https://doi.org/10.1371/journal.pone.0070252>
- Clift, S. M., & Hancox, G. (2001). The perceived benefits of singing: Findings from preliminary surveys of a university college choral society. *The Journal of the Royal Society for the Promotion of Health*, 121(4), 248–256. <https://doi.org/10.1177/146642400112100409>
- Davis, W. B., Gfeller, K. E., & Thaut, M. H. (2008). An introduction to music therapy theory and practice. American Music Therapy Association.
- De Backer, J., & Sutton, J. P. (2014). The music in music therapy: Psychodynamic music therapy in Europe: Clinical, theoretical and research approaches. Jessica Kingsley Publishers.
- Denora, T. (2000). This book explores the role of music in everyday life and how musicians contribute to cultural and social identity. Cambridge University Press.
- Erkkilä, J., Punkanen, M., Fachner, J., Ala-Ruona, E., Pöntiö, I., Tervaniemi, M., Vanhala, M., & Gold, C. (2011). Individual music therapy for depression: randomised controlled trial. *The British Journal of Psychiatry: The Journal of Mental Science*, 199(2), 132–139. <https://doi.org/10.1192/bjp.bp.110.085431>
- Garred, R. (2005). Theory building in music therapy—an international archive. *Nordic Journal of Music Therapy*, 14(2), 164–164. <https://doi.org/10.1080/08098130509478137>





- Gold, C., Solli, H. P., Krüger, V., & Lie, S. A. (2009). Dose-response relationship in music therapy for people with serious mental disorders: systematic review and meta-analysis. *Clinical Psychology Review*, 29(3), 193–207. <https://doi.org/10.1016/j.cpr.2009.01.001>
- Jäncke, L. (2008). Music, memory and emotion. *Journal of Biology*, 7(6), 21. <https://doi.org/10.1186/jbiol82>
- Juslin, P. N. (2010). A comprehensive exploration of how musicians elicit and convey emotion, providing insight into musicians' impact on audiences. Oxford University Press.
- Lee, J. H. (2016). The effects of music on pain: A meta-analysis. *Journal of Music Therapy*, 53(4), 430–477. <https://doi.org/10.1093/jmt/thw012>
- Levitin, D. J. (2008). *The world in six songs: How the musical brain created human nature*. Dutton. (Explores the psychological and cultural importance of music, giving perspective on musicians' roles in society).
- MacDonald, R., & Saarikallio, S. (2024). Healthy musical identities and new virtuositities: a humble manifesto for music education research. *Nordic Research in Music Education*, 5. <https://doi.org/10.23865/nrme.v5.5565>
- Magee, W. L., Clark, I., Tamplin, J., & Bradt, J. (2017). Music interventions for acquired brain injury. *Cochrane Database of Systematic Reviews*, 1(1), CD006787. <https://doi.org/10.1002/14651858.CD006787.pub3>
- Mantie, R. (2017). Discusses the role of music-making and how musicians contribute to leisure and socialization. Oxford University Press.
- McFerran, K. S., & Saarikallio, S. (2014). Depending on music to feel better: Being conscious of responsibility when appropriating the power of music. *The Arts in Psychotherapy*, 41(1), 89–97. <https://doi.org/10.1016/j.aip.2013.11.007>
- Montello, L., & Coons, E. E. (1999). Effects of active versus passive group music therapy on preadolescents with emotional, learning, and behavioral disorders. *Journal of Music Therapy*, 35(1), 49–67. <https://doi.org/10.1093/jmt/35.1.49>

