ISSN 3034-3836 (Online)

Horizons of Musicology

Original article
UDC 78.071.4
https://doi.org/10.56620/RM.2026.3.141-152
EDN WUEHPN

# The Opportunities and Limitations of Applying Musical-Therapeutic Programs for Harmonizing the Student Musicians' Psychophysical Conditions

**Roza Sh. Akhmadieva[1], Rezeda S. Garifullina[2], Tatiana Yu. Gordeeva[3], Svetlana G. Dodonova[4], Raushaniya R. Mirnaya[5], Elena E. Novgorodova[6]**

*[1, 2, 3, 4, 5, 6]Kazan State Institute of Culture,*
*Kazan, Russian Federation*
*[1]Roza79.08@mail.ru✉, https://orcid.org/0000-0002-1583-3975*
*[2]nauka@kazgik.ru, https://orcid.org/0000-0002-2163-6660*
*[3]gordeeva-muz@rambler.ru, https://orcid.org/0000-0002-9272-9610*
*[4]dodonova_1603@mail.ru, https://orcid.org/0000-0002-9082-4788*
*[5]rushanka13@gmail.com, https://orcid.org/0000-0002-9645-1687*
*[6]alena_novgorodov@mail.ru, https://orcid.org/0000-0001-8753-4547*

***Abstract.*** This research is focused on musical therapy as an instrument for harmonization of people's psycho-emotional and physiological states. Most notably, it studies the process of application of music therapy to the professional preparation of musicians. The integrative model of music therapy, which combines listening to musical compositions selected especially, active participation in musical activities and body-oriented practices, is conducive to the abatement of stress, preventing professional risks, and to the development of emotional intellect. An interdisciplinary approach to music therapy expands our knowledge about its psychosomatic and cognitive effects, discloses the capabilities for creating new strategies of utilizing music for complex rehabilitation and enhancement of health, and also confirms its effectiveness in the spheres of medicine and education. The methodological basis of the research is formed by an interdisciplinary approach and the neurohormonal resonance theory, which make it possible to organize adaptive-sanative sessions, as well as conceptual ideas of scholars regarding the selections of musical-therapeutic compositions. This experimental work has been carried out in three stages. On the ascertaining stage, a selection of musical tracks has been compiled and music therapy programs have been developed. At the generating stage, adaptive-sanative sessions and a monitoring reverse causality have

Translated by Dr. Anton Rovner.

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been organized. Substantiation is made of utilizing the national musical heritage providing for a steady adaptive effect, and preventative maintenance of stress in the conditions of heightened emotional and mental pressure. At the testing stage, the influence of music therapy programs on the psychophysical states of the first-course students are analyzed, and the levels of their adaptation are disclosed. The possibilities of applying music therapy in professional instruction of musicians consist in the correction of states of stress, the development of emotional intellect and empathic listening, the organization of body-oriented practices, and the minimization of stage stress. Application of music therapy in professional instruction of musicians possesses scholarly-methodic, resource-related, psychological, repertoire-related, temporal and ethic limitations.

***Keywords*:** music therapy, music education, instruction of musicians, a music therapy program, music therapy compositions, interdisciplinary approach, neurohormonal-resonance theory

***Funding*:** This work was supported by a grant from the Science and Technology Foundation of the Republic of Tatarstan (agreement No. 26 from 01.12.2025).

***For citation:*** Akhmadieva R.Sh., Garifullina R.S., Gordeeva T.Yu., Dodonova S.G., Mirnaya R.R., Novgorodova E.E. The Opportunities and Limitations of Applying Musical-Therapeutic Programs for Harmonizing the Student Musicians' Psychophysical Conditions. *Russian Musicology*. 2026, no. 3, pp. 141–152. https://doi.org/10.56620/RM.2026.3.141-152

# Возможности и ограничения применения музыкально-терапевтических программ для гармонизации психофизического состояния студентов-музыкантов

**Роза Шайхайдаровна Ахмадиева[1], Резеда Саитовна Гарифуллина[2], Татьяна Юрьевна Гордеева[3], Светлана Геннадьевна Додонова[4], Раушания Рафисовна Мирная[5], Елена Евгеньевна Новгородова[6]**

*[1, 2, 3, 4, 5, 6]Казанский государственный институт культуры, г. Казань, Российская Федерация*
*[1]Roza79.08@mail.ru✉, https://orcid.org/0000-0002-1583-3975*
*[2]nauka@kazgik.ru, https://orcid.org/0000-0002-2163-6660*
*[3]gordeeva-muz@rambler.ru, https://orcid.org/0000-0002-9272-9610*
*[4]dodonova_1603@mail.ru, https://orcid.org/0000-0002-9082-4788*
*[5]rushanka13@gmail.com, https://orcid.org/0000-0002-9645-1687*
*[6]alena_novgorodov@mail.ru, https://orcid.org/0000-0001-8753-4547*

***Аннотация.*** Исследование фокусируется на музыкотерапии как инструменте для гармонизации психоэмоционального и физиологического состояния человека. В частности, изучается процесс её применения в профессиональной подготовке музыкантов. Интегративная модель музыкотерапии, объединяющая прослушивание специально отобранных музыкальных произведений, активное участие в музыкальной деятельности и телесно-ориентированные практики способствуют снижению стресса, предотвращению профессиональных рисков и развитию эмоционального интеллекта. Междисциплинарный подход к музыкотерапии расширяет наши знания о её психосоматических и когнитивных эффектах, открывает возможности для создания новых стратегий использования

музыки для комплексного восстановления и поддержания здоровья, а также подтверждает её эффективность в медицинской и образовательной сферах. Методологической основой исследования стали междисциплинарный подход и нейрогормонально-резонансная теория, позволившие организовать адаптационно-оздоровительные сессии, и концептуальные идеи учёных о подборе музыкально-терапевтических произведений. Экспериментальная работа проходила в три этапа. На констатирующем этапе составлена подборка музыкальных треков и разработаны музыкально-терапевтические программы. На формирующем этапе организованы адаптационно-оздоровительные сессии и мониторинг обратной связи. Обосновано использование в музыкотерапии национального музыкального наследия, обеспечивающего устойчивый адаптационный эффект и профилактику стресса в условиях повышенной эмоциональной и умственной нагрузки. На контрольном этапе проанализировано влияние музыкально-терапевтических программ на психофизическое состояние студентов первых курсов и выявлены уровни адаптации студентов. Возможности применения музыкотерапии в профессиональном обучении музыкантов состоят в коррекции стрессовых состояний, развитии эмоционального интеллекта и эмпатического слушания, организации телесно-ориентированных практик, минимизации сценического волнения. Применение музыкотерапии в профессиональном обучении музыкантов имеет научно-методическое, ресурсное, психологическое, репертуарное, временно́е, этическое ограничения.

***Ключевые слова:*** музыкотерапия, музыкальное образование, обучение музыкантов, музыкально-терапевтическая программа, музыкально-терапевтические произведения, междисциплинарный подход, нейрогормонально-резонансная теория

***Финансирование.*** Работа выполнена на средства гранта Фонда науки и технологий Республики Татарстан (соглашение № 26 от 01.12.2025).

## Introduction

Music therapy presents a unique interdisciplinary sphere that studies the impact of music on the psycho-emotional and physiological state of human beings. It synthesizes the achievements of musicology, culturology, art studies, psychology and medicine and makes it possible to examine music as an aesthetic phenomenon and an instrument of regulation of the inner states of a person. According to the definition of the World Federation of Music Therapy (WFMT, 2011), music therapy presents the clinical use of musical interferences within the frameworks of therapeutic relations, which distinguishes it from passive listening to music.[1]

Professional training of musicians is traditionally oriented towards the development of technical mastery, an auditory culture, and interpretational skills. However, intensive pressure, chronic stress, stage fright and perfectionism become indispensable components of the educational process. In this context, musical therapy offers instruments capable of transforming not only the psycho-emotional and physical conditions of the students, but also the very paradigm of their interaction with the musical material. Nonetheless, implementation of therapeutic methods into the strict academic milieu is connected with a set of restrictions, demanding a critical insight.

The issue of applying computer music technologies in the therapy of psychogenic disorders has already been examined on the pages of *Problemy muzykal'noi nauki / Music Scholarship.* [1] Marina N. Korsakova-Kreyn and Alexander I. Fedotchev (2023) disclose the

[1] See: World Federation of Music Therapy. Definitions and perspectives on music therapy. WFMT. 2011. URL: https://wfmt.info/music-therapy/definitions/ (accessed: 06.07.2026).

achievements, possibilities and limitations of the methods of musical therapy, where the patient is offered a number of empirically selected musical compositions. [Ibid.] Elaborating on the subject, we have chosen as the object of our research the process of applying music therapy in the professional training of musicians.

The transfer from the general school education to professional musical instruction presents one of the most stress-generating stages in the lives of future musicians. This stage is accompanied by a sharp rise of psycho-emotional, cognitive and social pressure. Empirical data suggest that up to 84% of first-course students experience chronic distress, while the adaptive reserves of the organism are frequently worn out already by the first examination period. In the conditions of increasing requirements of resilience for the students, there is an increase of the demand for academically substantiated, non-intrusive technologies of preventive maintenance and premorbid conditions.

The aim of this research is to reveal the opportunities and limitations of applying music therapy programs for harmonization of the psychophysical states of first-course music students.

## Discussion of the Issue

The issue of applying musical therapy in professional training for musicians has been examined in scholarly literature numerous times. During the 1990s, the Laboratory for Music Therapy successfully functioned at the Gnesin Russian Academy of Music. Summarizing the work of this center, Yulia Evdokimova and Valery Melnichenko (1993) observed that the possibilities of the impact of music on human beings are diverse to the same extent as the structure of human personality is diverse. Music therapy not only treats, but also forewarns psychic and somatic disorders. [2]

Contemporary authors highlight that for first-year students the initial examination period turns into a serious ordeal: the new tutorial activities, the changed format of knowledge and the necessity for self-organization require considerable resources for adaptation. The problem of the students' psychological well-being during the examination periods remains to be among the most relevant in professional music instruction. As observed by Elizaveta Nikonova, Avn Mokhammad Makhmud Baniyunes and Regina Khalfina (2019), the exams evoke two forms of stress—the informational type, connected with the deficit or surplus of information, and the emotional type, conditioned by personal factors. [3] Research works have demonstrated consistently that students present a risk group prone to developing states of distress. In the longitudinal research of Bridgette Bewick and her colleagues (2010), it is found that the stress levels rise considerably with the beginning of the study period, reaches a peak during the first semester, and after that does not return to the pre-university figures. [4] Helen M. Stallman (2010) showed that around 84% of students experience a heightened sense of distress, while among 19,2% of them the symptoms of acute psychic disorder have been observed. [5] The examination period requires intense self-discipline and the ability of controlling independently the process of preparing for exams and passing them. [6] Maria Ionova, Natalia Rezepova, Daria Kuzmenkova and Yulia Tyurina (2024) in their empirical research reveal that only 7% of the students are successfully coping with stress, whereas 55% experience serious difficulties; a correlational analysis showed a moderately direct connection between optimism and stress resilience and a reverse causality with personal anxiety. [7] Igor Kuryasev (2013) connects the increment of stress pressure with the technological development and observes that the problem of the students' stress resilience has remained insufficiently studied, although the application of anti-stress strategies prior to the exams increases resilience to stress to a considerable degree. [8]

An effective countermeasure against stress and the way to increase the level of students' adaptation may be found in music therapy. Music presents an unalienable attribute of human existence. A number of recent scholarly research works confirm the positive effects of applying music therapy in the sphere of education (Ekaterina Voronchikhina, [9] Marina Korsakova-Kreyn, [1] Tatiana Leontieva, [10] Galina Samsonova, [11] Sergei Shushardzhan [12]).

The results of the research devoted to evaluation of the impact of music therapy on the physiological and psychological indicators associated with stress bear witness to its expressed therapeutic effect. In particular, it was established that:

1) Passive listening to music results in a reduction of the level of stress by means of lessening physiological excitement, a deceleration of the frequency of cardiac contractions, and lowering of the average arterial pressure. [13] It also results in a decrease of distinct manifestation of negative emotional states, including subjective unease and situational anxiety, [14] symptoms of depression and anger. [15]

2) Application of active music therapy is associated with the development of empathy, improvement of cognitive functions and normalization of patterns of sleep. [16]

3) Integrative approaches to music therapy are conducive to the development of communicative competencies, actualization of creative potential [17] and correction of maladaptive social behavior. [18]

## The Methodology of Research

The methodological basis of the research was provided by several different approaches.

1. The interdisciplinary approach, which makes it possible to combine knowledge from various scholarly disciplines (musicology, culturology, art studies, psychology, pedagogics, medicine) and establish the topicality of the research, the search for methods.

2. The neurohormonal resonance theory, which substantiates the multilevel impact of acoustic signals on the human organism through the auditory, tactile and bio-acoustic systems and is conducive to the disclosure of the possibilities and limitations of applying music therapy in professional instruction of musicians.

On the basis of neurohormonal resonance theory, two methods of organizing music therapy are highlighted—the algorithmic and the archetypic.

The algorithmic method envisages a strict consistency of actions for the achievement of a concrete therapeutic effect. This method includes three chief musical acoustic algorithms, distinguished by the frequency, amplitude and intensiveness of sound: S-algorithms (arousing psychic and muscular relaxation and reduce the level of adrenaline and cortisol), T-algorithms (producing a stimulating effect) and HR-algorithms (stabilizing the nervous system and the hormonal material pool, conducive to the revitalization of homeostasis). [12, pp. 27–28]

The archetypical method is connected with analysis and the use of archetypes—universal symbolic patterns, which may manifest themselves in musical compositions and influence the perception and experiences of human beings (the archetypes of appeal, supplication, play or meditation).

The algorithmic and archetypical methods formed the basis for the organisation of adaptation and health-promoting sessions.

3. The conceptual ideas of Russian scientist Vladimir Bekhterev (1857–1927), who notes the strong reflexive impact of music on the neuro-physical processes, its ability to influence breathing, blood pressure and muscular work. Bekhterev recommended comprising the health-promoting repertoire with consideration to the genre-related homogeneity of music. This arouses a particular mood in listeners during the entire composition (joy, elevation of mood, light

sorrow, dreaminess, etc.), in comparison with the music of the large-scale forms, which "acts either in a sedative and even disturbing manner, or, on the other hand, elevates and exhorts, brings the feeling of ease and bliss, or entices to the point of a passionate impulse." [19, p. 113] Bekhterev's conceptual ideas were used while selecting the musical tracks.

4. The principles of selection of therapeutic musical compositions defined by Russian scholar Sergei Shushardzhan, including ethno-cultural adequacy (comprehensibility for the listener as a member of a particular ethnic group and the possessor of musical culture); the combination in a musical repertoire of the ideals of truth, good and beauty; observance of moderation (tempo, character, dynamics), conducive to the compilation of musical-therapeutic programs.

5. Lyubov Garkavi's methodology, [20] which makes it possible to bring to the light non-specific adaptive reactions of an organism and evaluate the level and the tension of adaptation according to the leukocyte formula of blood.

During the process of research, a complex set of theoretic and empirical methods suitable to the object has been applied. The theoretical methods comprised studying the experience of applying music therapy in the professional instruction of the musicians; analysis of the agitation level of an organism; compilation of the musical therapeutic programmes. The empirical methods were: observation, conversations, self-evaluation, discussion of the obtained results in the focal groups.

## Music Therapy as an Instrument of Harmonization of the Musicians' Psycho-Emotional and Physical States

The experimental work on examination of the effectiveness of applying music therapy programs for harmonization of the psycho-physical states of first-year music students involved the participation of 400 students of the Kazan State Institute of Culture. A probabilistic selection of first-year students aged 18–19 was compiled. None of them refused to participate in the experimental work. The students were divided into two groups. The first group was experimental. It was comprised of 270 people to whom musical therapy was applied. The second group consisted of the examiners. It was comprised of 130 people, to whom the music therapy sessions were not applied.

The experimental work of verifying the effectiveness of applying music therapy programs for harmonization of the psycho-physical states of the first-year music students was done in three stages (asserting, formation, and control).

During the asserting stage of the experimental work, a selection of music tracks was compiled, including fragments from concert repertoires of the students, 5 Tatar folk songs and 49 works by 20th and 21st century composers (Rustem Yakhin, Salikh Saidashev, Nazib Zhiganov, Farid Yarullin, Renat Yenikeyev, Ilyas Kamalov and others), presenting instrumental, symphonic, popular, piano, pop-jazz, and pop-orchestral music. A number of small-scale compositions, homogenous in terms of genre, was chosen. The selection of musical tracks was made in accordance with the criteria of acoustic safety, cultural identification and emotional predictability for minimizing the risk of maladaptive reactions from the listeners. For example, the musical tracks corresponding to acoustic safety included such works as *The Mysterious Voyage* for eight cellos by Ilyas Kamalov, Renat Yenikeyev's *Arietta* for String Ensemble and Piano, and Rustem Yakhin's Piano Concerto. The cultural identification was expressed by Nazib Zhiganov's Suite on Tatar Themes, the "Dance of the Girls with Kerchiefs" from Farid Yarullin's ballet *Shuralé*, Salikh Saidashev's *Tatar Waltz* and the Tatar Folk Songs. For the sake of preventive maintenance of emotional predictability and for minimizing the risk of maladaptive reactions, the folk music suites of Rafael Belyalov and Nazib Zhiganov were selected.

The Tatar national musical legacy may present an effective component of music therapy. It provides for a steady adaptive effect and a preventative maintenance of stress in the conditions of heightened emotional and mental pressure. When listening to music based on national melodies, a person feels the connection with archetypal spiritual roots; he acquires a feeling of calm, confidence and stability in the surrounding space; he strengthens in the comprehension of his inner harmony. Listening to fragments from the concert repertoire helped the students minimize stage fright.

Six music therapy programs were compiled from the selected musical tracks with consideration of the contrast between the compositions (in tonality, character and tempo), making it possible to avoid the conventionalism of auditory perception. Each program consisted of 6–7 tracks and presented a completed cycle, each 25–35-minutes long. This kind of dramaturgy is explained by the time of conducting the sessions (morning/noon), when the students, after their relaxation, and receiving the impact from music therapy, had to get involved in an active educational process.

The integrity of the programs was provided by a correlation of algorithmic and archetypic characteristic features of the adjacent musical compositions. The use of the national repertoire enhanced the effect of cultural identification and became an additional resource for overcoming sociocultural dissonance by the first-year students during the period of their adaptation to the milieu of the educational institution.

During the formation stage of the experimental work, adaptation and health-promoting sessions and monitoring of feedback were organized. The adaptation and health-promoting sessions were conducted in a specialized venue (a laboratory of psychic health) fitted out with ergonomic recliner armchairs (Relax Space 90×80×110 cm.), which made it possible to assume a comfortable position (lying/half-lying) and were designated for a complete laxation of the body. The isolation of sound and light was provided for by thickset window curtains. From the very first minutes, a friendly atmosphere was established in the auditorium, all the students assumed comfortable positions and prepared themselves for listening through the programs. The sessions took place in a calm, auspicious setting, completely isolated from outward stimuli, under the direct control of the researchers-instructors, providing the observation of the methodological report and tracing out the psychophysiological comfort of the tested. The high quality of the sound of the program was provided by the Soundbar LG S60T 3.1 audio system.

Every day the students listened in comfortable conditions to music therapy programs lasting about 25–30 minutes. In order to uphold the academic strictness of the experiment, the listening sessions was organized for small groups of up to 20 people each. The instructor regulated the loudness and wrote down the listeners' behavioral reactions. Observation in all the groups of students showed that after listening to 2/3 of each track, the majority of the students found itself in a state of sleep or a light trance, which bore witness to an adequate level of relaxation. During the course of the fifth composition, as a rule, 40% of the recipients (105–110 people) began coming out of their states of relaxation, and during the sixth/seventh composition and the fragments from the concert repertoire, the students livened up, smiled, readily shared their impressions of what they had heard, and reflected on the states of their bodies, the effects of body-oriented practices, and the overcoming of stage fright.

The monitoring of feedback included having group discussions based on the results of listening to music therapy programs. The students expressed the dynamics of their moods, their psycho-emotional background and psychosomatic reactions. Further adjustments of the musical programs were made based on the results of these conversations.

At the control stage of the experimental work, the influence of music therapy programs on the psycho-physical states of the first-year students was analyzed, and the levels of the students' adaptability (high, medium, low) were determined.

The diagnostics were carried out via subjective evaluation of the psycho-physical states on the basis of several parameters (anxiety, irritability, susceptibility to fatigue, despondency, working efficiency in terms of time and speed, appetite, quality of sleep, optimism and general activity) with the aid of a specialized questionnaire. Each student evaluated his or her state individually according to a 7-point scale (from –3 to +3), where the negative points indicated at the level of discomfort and tension, while the positive points reflected an auspicious background.

The medical employees also carried out general blood tests with the aim of disclosing the level of the students' adaptability based on hematological factors (the leukocytal formula indicating the percentage of various types of leukocytes).

The results of the experimental work showed that the proportion of students with high levels of adaptation increased considerably: from 36% at the asserting stage to 74% at the control stage. The proportion of students with high or intermediary levels decreased. The proportion of students with intermediary levels of adaptability comprised 45% at the asserting stage and 15% at the control stage. The proportion of students with low levels of adaptability decreased from 19% at the asserting stage to 11% at the control stage.

## Conclusions

Research has demonstrated that applying music therapy programs in professional preparation of musicians may be a valuable instrument for harmonizing the psycho-physical states of first-year students. Their benefits are in the following:

1. *Elimination of stress*. Students, especially those from the first course, frequently suffer from muscular tension, irregular breathing and anxiety connected with performances and grades. Music therapy solves this problem, suggesting listening to music chosen especially according to its tonality and tempo. This helps reduce the level of cortisol (the stress hormone) and activate the parasympathetic nervous system, which is in charge of relaxation and rehabilitation. For example, slow tempo compositions in major keys, such as piano pieces, romances, lyrical songs or classical arias, create calm, light moods, relax the muscles and normalize heart rate. However, it must be noted that as far back as in the 1990s, Yulia Evdokimova (1993) observed that the choice of musical compositions must take into consideration the correlation of the patient's individual biological rhythm to the rhythmic beat of the musical composition. [2]

2. *The development of emotional intelligence* and *empathic listening,* since in the professional instruction of musicians it is usually the mastery of the technical aspects of sound production that predominates. These skills are critically important for the identification and expression of feelings, as well as for expanding the emotional lexicon. Music therapy provides students with the unique opportunity of perfecting the skills of modeling emotions with the aid of music: associating the minor mode and slow tempi with sadness, the major mode and fast tempi—with joy, and dissonances—with anxiety. Such practical lessons not only improve self-awareness and attention to details, but also allow us to immerse more deeply into the content of a musical composition, "become used to" the musical image and understand the composer's emotional world.

3. *Organization of body-oriented practices* especially developed for musicians and directed at harmonizing the psycho-emotional and physical condition. A lengthily static position of the body and repeating motions

made while playing an instrument frequently cause problems with the nervous system and the muscular-skeletal system, affecting the hands, the palms, the back, the neck and even the lungs. Within the framework of music therapy, the principle of the "three points of rest" is applied. This technique establishes the connection between the body and the instrument, liberates the musician's motion and improves control over the sound. When the instrument supports itself on the three points, the main pressure for holding it is taken up by the muscles and the joints, while the fingers and the other parts of the forearm freely emit the sound. This prevents muscular cramps, becomes conducive for the achievement of balance and precision, which in the final outcome leads to a freer and more expressive type of performance. Examples of the points of support vary, depending on the instrument: for the flute it is the lower lip, the basis of the first phalanx and the index finger of the left hand, as well as the tip of the thumb of the right hand; for the piano—the legs, the seat of the stool and the points of the fingers; for the accordion—the stool, the floor and the lower back. It is important to understand that the "three points of rest" do not present a rigid rule for each instrument, but rather provide a general approach to organizing the process of playing. A regular appliance of exercises based on this principle reduces the probability of emergence of neurological and bodily problems, improves the freedom of motion and enriches the expressivity of performance.

4. *The minimizing of stage fright*. Here the methods of visualization along with musical accompaniment become effective. For example, a student may listen to a fragment from the concert repertoire, perceiving an ideal performance in a safe setting. Gradually, through the mechanisms of neuroplasticity, the brain ceases from coding the concert stage as a threatening element. Research has shown that the combination of music therapy with cognitive-behavioral techniques reduces the level of pre-concert anxiety at a rate of 40–60% during the course of the semester.

The limitations of applying music therapy programs for harmonizing the psycho-physical states of the first-year students affect several spheres:

1. *The scholarly-methodic sphere*. Music education is traditionally based on precision, repeatability and normativity of the results. On the other hand, music therapy is in many ways subjective: the reactions of two different students to the same stimulus may be diametrically opposite. An instructor who is used to standardized criteria of evaluation (a purity of intonation, the dynamic range, the culture of strokes) is confronted with categories that are measurable with difficulty: "improvement of the state of health," "an abatement of the level of anxiety," "an increase of awareness." Incorporating these parameters into the teaching curriculum requires a reevaluation of the entire system of attestation, which arouses resistance from the conservative section of the community of instructors.

2. *The resource sphere*. There are exceedingly few qualified music therapists endowed simultaneously with clinical methods and a profound understanding of musical performance. Most of the presently active specialists have a basic psychological or medical education and are only superficially familiar with the specificity of playing instruments. The reverse situation—when a musical instrumentalist-instructor not possessing the appropriately corresponding certification makes the attempt of engaging in music therapy—bears the danger of an amateurish approach and even harmful effects for the student's psyche. The organization of the full-fledged service of music therapy in an artistic educational institution requires financing, which is frequently not enough even for the renewal of the instrumental arsenal.

3. *The psychological sphere*. In the academic milieu the following notion is widespread:

a musician must be "strong" and overcome difficulties through his will and discipline. Turning to the aid of a music therapist is perceived as a sign of weakness or inadequacy. Students are afraid that they would be directed to "musical treatment," if they are not able to manage with their program, so they conceal symptoms of professional slagging-off. This stigmatization hampers early interference, wherein the problems are still susceptible to correction by delicate means.

4. *The sphere of the repertoire*. The traditional range of tools in music therapy includes musical compositions that are simplified in their harmonic language and structure—folk song arrangements, jazz standards and meditative sound canvases. Nonetheless, the professional musician is able to work with the most complex musical score wherein each dissonance or polyrhythmic superposition have an artistic meaning. The use of classical therapeutic proceedings in the work of the concert repertoire frequently becomes impossible without considerably adapting them. The combination of "music as an art" and "music as medicament" requires delicate balance, which so far has been found only in isolated experimental projects. For example, at the Laboratory of Music Therapy of the Gnesin Russian Academy of Music in the 1990s, on the basis of the method of synesthesia, the methodology of color coding of musical compositions was developed and tested. The creators of the methodology observed that people perceive the world through color and sound. Color coding of musical compositions makes it possible for humans to convey the peculiarities of their perception of the world and the psycho-emotional state of the personality. Visual accentuation of particular measures in the music with color (the measures carrying the main thematic burden were highlighted with red; the measures supporting the main theme—with green; the measures changing the tempi—with yellow; and the conclusive measures—with blue) provides the students with the possibility of "seeing" musical form, rhythm and dynamics. [2; 21]

5. *The temporal sphere*. Professional instruction for musicians is competitive and saturated to the maximum. Introduction of supplementary sessions of music therapy is perceived as taking away time from rehearsals. The students complain that they "do not have time to practice on their instruments," and they reject therapeutic sessions in favor of drilling the relevant musical passages. The paradox lies in that it is particularly these students who demonstrate most often the greatest decline of their productivity by the end of the semester stemming from accumulated fatigue and nervous exhaustion. But convincing a student that an hour of relaxation would be of greater advantage than an hour of mechanical practicing presents a task requiring not only vindication, but also a change of the entire educational milieu.

6. *The ethical sphere.* There arise questions concerning the boundaries of interference: where does education end and therapy begin? If a student experiences anxiety because of an objectively low level of preparation, should music therapy alleviate this discomfort, or is the instructor obligated to preserve the healthy tension stimulating the student towards work? The differentiation between pedagogical and therapeutic impact presents one of the most acute discussions in present-day musical pedagogy.

Music therapy is endowed with a considerable, though an unrealized potential in professional instruction of musicians. It is capable of reducing the psycho-physical toll of performance work, developing intellect and averting professional illnesses. However, standing in the way are: methodological conservatism, staff shortages, cultural stigmatization and the complexity of adaptation of therapeutic proceedings to high art. A breakthrough is possible in the condition of systematic dialogue, when music therapists

would begin to understand the specific features of performance more deeply, and the instructors would acknowledge the student's right to psychological aid as a full-fledged part of the educational process. This path is not a swift one, but it is indispensable, if we wish to bring up not merely virtuosi, but also healthy, artistically mature musicians.

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*Information about the authors*:

**Roza Sh. Akhmadieva** — Dr.Sci. (Pedagogy), Professor, Rector, Kazan State Institute of Culture, Kazan, Russian Federation.

**Rezeda S. Garifullina** — Dr.Sci. (Pedagogy), Professor, Vice-Rector for Research, Kazan State Institute of Culture, Kazan, Russian Federation.

**Tatiana Yu. Gordeeva** — Dr.Sci. (Culturology), Cand.Sci. (Philosophy), Professor of the Department of Vocal and Instrumental Art, Kazan State Institute of Culture, Kazan, Russian Federation.

**Svetlana G. Dodonova** — Cand.Sci. (Pedagogy), Associate Professor of the Department of Vocal and Instrumental Art, Kazan State Institute of Culture, Kazan, Russian Federation.

**Raushaniya R. Mirnaya** — Associate Professor of the Department of Vocal and Instrumental Art, Kazan State Institute of Culture, Kazan, Russian Federation.

**Elena E. Novgorodova** — Cand.Sci. (Pedagogy), Head of the Department of Pedagogy and Socio-Cultural Activities, Kazan State Institute of Culture, Kazan, Russian Federation.

*Информация об авторах*:

**Р.Ш. Ахмадиева** — доктор педагогических наук, профессор, ректор, Казанский государственный институт культуры, г. Казань, Российская Федерация.

**Р.С. Гарифуллина** — доктор педагогических наук, профессор, проректор по научной работе, Казанский государственный институт культуры, г. Казань, Российская Федерация.

**Т.Ю. Гордеева** — доктор культурологии, кандидат философских наук, профессор кафедры вокального и инструментального искусства, Казанский государственный институт культуры, г. Казань, Российская Федерация.

**С.Г. Додонова** — кандидат педагогических наук, доцент кафедры вокального и инструментального искусства, Казанский государственный институт культуры, г. Казань, Российская Федерация.

**Р.Р. Мирная** — доцент кафедры вокального и инструментального искусства, Казанский государственный институт культуры, г. Казань, Российская Федерация.

**Е.Е. Новгородова** — кандидат педагогических наук, заведующая кафедрой педагогики и социально-культурной деятельности, Казанский государственный институт культуры, г. Казань, Российская Федерация.

Received / Поступила в редакцию: 05.06.2026
Revised / Одобрена после рецензирования: 16.07.2026
Accepted / Принята к публикации: 20.07.2026