**Mental health and the music industry: An evolving intervention landscape**

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doi: [https://doi.org/10.1016/S2215-0366(23)00093-7](https://doi.org/10.1016/S2215-0366%2823%2900093-7)

url: <https://www.thelancet.com/journals/lanpsy/home> [https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(23)00093-7/fulltext](https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366%2823%2900093-7/fulltext)

Professional musicians in the popular music industries seem to have increased mental health difficulties relative to the general population[[1]](#endnote-1), however, the reasons for this are poorly understood. From Janis Joplin to Avicii, high-profile deaths from suicide and drug misuse by musicians in the public eye are part of our collective cultural history. Such losses have engendered growing concern, as well as academic and clinical interest, in the mental health of people who pursue music as a career. Public debate around musicians’ mental health has often been depicted problematically, from the pathologisation of artistry to the romanticisation of suffering and trauma.

Questions of causality in this area have been approached from two distinct—though not mutually exclusive—perspectives. The first perspective is that a career in music selects people with a particular personality structure or life history, which might engender important benefits such as increased creativity and the capacity to push boundaries, but also exposes particular vulnerabilities[[2]](#endnote-2). Associated research has explored the relative predominance of traits such as neuroticism, extraversion, and openness to experience in this population[[3]](#endnote-3), as well as constructs such as sensitivity and imaginativeness[[4]](#endnote-4).

The second perspective adopts a psychosocial focus on the systems within which musicians function. Underpinning this perspective is the idea that the working conditions of the music industries and the processes involved in building a musical career are inherently stressful. Associated research has highlighted the multiple embedded contexts within which musicians operate, as well as associated stressors and their putative effects on mental health, for example, anxieties linked to financial uncertainty[[5]](#endnote-5), doubts and conflicts around the definitions of perceived success[[6]](#endnote-6), and the challenge of maintaining relationships within these contexts[[7]](#endnote-7).

In response, the popular music industries—notably major record companies, but also the charitable sector and other stakeholders—have shown an increased interest in the welfare of musicians. Mental health initiatives have been launched in the UK and other countries, and a new and evolving intervention landscape has emerged. This includes dedicated helplines, industry-specific workshops on continuing professional development, therapeutic retreats, peer support groups, therapists accompanying musicians on tour, charters of best practices, and a range of therapeutic interventions.

At present, a wide range of practitioners with heterogeneous professional qualifications and expertise operate within this landscape, including life coaches, mental health first-aiders, counsellors, psychotherapists, clinical psychologists, and psychiatrists. While many of these practitioners are—in our experience—dedicated, professional and highly empathic, often with lived experience of the music industries, they work in different ways, commonly without systematic monitoring of the effects of their work.

As a group of academics, researchers, and clinical psychologists with a shared interest in the wellbeing of creative professionals, we suggest changes to this landscape are required if it is to meet the diverse needs of its target population, with a need for greater regulation, accountability, and evidence-based expert care. Specifically, we propose that psychological interventions and the provision of mental health support are most likely to elicit positive change when the work is undertaken by specialised, appropriately qualified, and highly trained professionals, underpinned by comprehensive formulation and understanding, which takes into consideration a broad array of both individual and systemic factors.

Research, as well as our combined clinical experience, highlights a need to understand musicians and the multiple systems in which they are embedded, from their personality and developmental history, to their social and professional networks, and the wider sociopolitical context in which they exist[[8]](#endnote-8). Only then can interventions be targeted at the correct level. For example, where an initial formulation identifies that the presenting problem is linked to longstanding difficulties with attention or social communication, a neurodevelopmental assessment might be indicated. Where working practices are deemed to be a maintaining factor, an intervention might be best focused on working with the team around the artist. Consequently, funders (eg, record labels) should be aware of what kind of professionals are appropriately qualified to undertake the work or to formulate the main concerns and highlight or refer to allied professionals. Given the common misunderstandings about the role of different mental health professionals, however, such an approach might not be adopted and might require raising of awareness within the industry.

In addition, we propose that monitoring outcomes or measuring client satisfaction is crucial if high-quality support is to be provided, tracked, and flexibly adapted to the needs of artists. Such monitoring should be fit for purpose and have face validity to relevant stakeholders, which raises important questions and ethical issues. For example, if a record label is offering mental health support for a musician, open and forthright conversations need to be had about whether a good outcome for the company (eg, continuation of a tour) is necessarily the same for the musician. Furthermore, if record labels offer in-house therapy to the musicians they work with, how does this change the nature of the treatment offered, and are potential conflicts of interest meaningfully considered?

Finally, high-quality research is needed in this emerging field if we are to ensure that existing and future interventions are clinically useful, meaningful, and relevant to our clients. For example, we welcome a recent scoping review exploring the ways professional musicians perceive, engage with, and respond to specific mental health interventions[[9]](#endnote-9), as well as a study employing client satisfaction surveys with popular musicians in the USA[[10]](#endnote-10).

Great advances have been made in the field of musicians’ mental health. However, further dialogue between all major stakeholders is needed if, collectively, we are to shape this emerging intervention landscape to serve the target population effectively, both the musicians themselves and the teams around them.

1. Vaag J, Bjørngaard JH, Bjerkeset O. Symptoms of anxiety and depression among Norwegian musicians compared to the general workforce. *Psychol Music* 2014; **44:** 234–48 [↑](#endnote-ref-1)
2. Kemp AE. The musical temperament: psychology and personality of musicians. Oxford: Oxford University Press, 1996. [↑](#endnote-ref-2)
3. Gillespie W, Myors B. Personality of rock musicians. *Psychol Music* 2016; **28:** 154–65 [↑](#endnote-ref-3)
4. Buttsworth LM, Smith GA. Personality of Australian performing musicians by gender and by instrument. *Pers Individ Dif* 1995; **18:** 595–603 [↑](#endnote-ref-4)
5. Berg L, King B, Koenig J, McRoberts RL. Musician occupation and financial stress and mental health burden. *Psychol Music* 2022; **50:** 1801–15. [↑](#endnote-ref-5)
6. Loveday C, Musgrave G, Gross SA. Predicting anxiety, depression and wellbeing in professional and non-professional musicians. *Psychol Music* 2023; **51**: 508-522 [↑](#endnote-ref-6)
7. Musgrave G. Musicians, their relationships, and their wellbeing: creative labour, relational work. *Poetics* 2023; **96:** 101762 [↑](#endnote-ref-7)
8. Gross SA, Musgrave G. Can music make you sick? Measuring the price of musical ambition. London: University of Westminster Press, 2020. [↑](#endnote-ref-8)
9. Visser A, Lee M, Barringham T, Salehi N. Out of tune: perceptions of, engagement with, and responses to mental health interventions by professional popular musicians—a scoping review. *Psychol Music* 2021; **50:** 814–29. [↑](#endnote-ref-9)
10. Berg L, King B, Koenig J, McRoberts RL. Popular musician responses to mental health treatment. *Med Probl Perform Art* 2018; **33:** pp. 124-130 [↑](#endnote-ref-10)