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The Impact of Music on Mental Health from Adolescence to Middle Adulthood

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Abstract
Music is a universal human experience with significant psychological relevance across the lifespan. This conceptual paper examines the relationship between adaptive music listening functions and mental health outcomes among individuals aged 12 to 45 years, covering adolescence through middle adulthood. Using the Adaptive Functions of Music Listening Scale (AFML) as the primary instrument, alongside validated mental health measures, the study proposes a correlational design with a stratified random sample of 200 participants drawn from three developmental cohorts. Grounded in theories of emotional regulation, self-determination, and psychosocial development, the framework investigates how music serves functions of emotional regulation, social connection, meaning-making, and entertainment, and how these functions correlate with well-being and psychological distress across age groups. Findings from this study are expected to inform music-based mental health interventions suited to different developmental stages.

Keywords: Music listening, mental health, adaptive functions, adolescence, adulthood, AFML, emotional regulation, well-being

Introduction

Music is a ubiquitous part of everyday human experience, but its systematic psychological impact at various stages of development has been insufficiently investigated. People from adolescence to middle age experience different psychological tasks: identity formation, transition to independence, occupational pressures, and relationship commitments, and music may play different roles in each phase. Mental health issues such as anxiety, depression, and emotional regulation are common to all these age groups and are a rising public health issue.

The Adaptive Functions of Music Listening Scale (AFML) is a theoretically driven, multi-dimensional approach to investigating how people use music for various psychological purposes. Unlike other instruments, which only measure genre preference or the amount of listening, the AFML measures particular functional aspects of engagement, which makes it ideal for exploring the relationship between music behaviour and mental health. This paper will describe a conceptual framework that explores how these functions are related to mental health outcomes across three age groups: adolescents (12-17 years), young adults (18-25 years), and adults (26-45 years), and a correlational study design to test these relationship.

Background And Context

Music as a Psychological Resource

Music has been found to be a cognitive, emotional, and neural resource that is uniquely multifaceted. Music activates the reward system of the brain, modulates arousal, elicits autobiographical memory, and facilitates emotional regulation. Current research has expanded from the clinical use of music in therapy to the study of music listening in everyday life as a significant mental health activity. This is important because the typical music-mental health experience is self-initiated and naturalistic rather than therapist-mediated.

The Developmental Span 12–45 Years

This age span encompasses some of the most developmentally salient years of the human life span. Adolescents use music centrally for identity exploration and social connection. Young adults use it for stress management and meaning construction. Adults in the 26-45 age range increasingly use music for stress recovery and emotional maintenance. Music use also changes across these years, peaking in adolescence and young adulthood and becoming more intentional in adulthood. Analysing these changes enables a developmentally informed approach to the music-mental health link.

The Adaptive Functions of Music Listening Scale

The AFML scale was created to assess the psychological functions of music listening in everyday life, including emotional regulation, social bonding, self-reflection, and entertainment. Its multidimensional design differentiates between adaptive and potentially nonadaptive uses, allowing a more detailed analysis of the link between specific listening functions and mental health than has been possible before.

Need For The Study

There are a number of interrelated reasons why this research is necessary. Firstly, there is an increasing incidence of mental health issues across all age groups worldwide, and music listening has never been more widespread than it is today, thanks to streaming technology. Secondly, the current literature is narrowly focused on individual age groups or clinical music therapy, rather than the general music listening habits of a wide age range. Thirdly, very little research has utilized functionally specific measures such as the AFML, and as such, the mechanisms underlying the relationship between music and mental health are not well understood. Fourthly, there is a need for cost-effective, accessible mental health interventions, and the current literature is very limited in terms of music-based interventions.

Review Of Literature

Music and Emotional Regulation

Saarikallio (2021) identified, among other things, seven strategies of mood regulation through music such as entertainment, diversion, discharge, and comfort. The author further demonstrated how these strategies associate with adaptive functions. Furthermore, Carlson et al. (2021) noted that young adults who used music for emotional regulation exhibited lower levels of anxiety and positive emotions compared to those whose coping was diversion through music. Baltazar and Saarikallio (2020) noted that positive mood regulation strategies and social connections consistently demonstrated a positive relationship with well-being. In contrast, rumination strategies either exhibit negative or mixed outcomes.

Music and Adolescent Mental Health

Miranda (2020) also pointed to music as one of the fundamental resources in terms of promoting identity in adolescents, alleviating their emotions. Clabaugh and Morling (2022) found that exposure to music in relation to emotional regulation was predictive of lower depression scores in adolescents. Dingle et al.

(2021) found that sharing music experiences was a robust predictor of interconnectedness in adolescents and alleviating feelings of loneliness.

Music and Young Adult Mental Health

Van den Tol and Edwards (2021) studied university students who were using music to understand emotions versus those who were using music to escape. The former group took less time to improve their mood than the latter. Schäfer et al. (2020) established that there is a positive association between self-reflective music experiences and the occurrence of a sense of purpose in young adults. McFerran et al. (2020) differentiated between music for emotional processing and music for avoiding. There was a disparate effect related to mental health outcomes.

Music and Adult Mental Health

Thoma et al. (2020) found that self-directed music listening in response to stressful life transitions resulted in reduced levels of cortisol and self-reported stress in working adults. Fancourt and Finn (2020) used large-scale methods to demonstrate the association of music engagement with the alleviation of depression and anxiety; music engagement also showed concurrent associations with cognitive functioning in midlife.

Resilience and Protective Functions

The function of music as a resilience source is that it helps with adversity processing alongside identity maintenance as proposed by Garrido et al. (2021). Groarke & Hogan (2020) also demonstrated that contextualized engagement with music is a significant factor for adult well-being routines, emphasizing the role of intentional engagement with music.

Theoretical Foundations

Four traditions of psycho-theory serve to frame the model. Fredrickson's broaden and build theory of positive emotions is notable in that it presents how positive emotions evoked by music can add up to build long-lasting resources. Beck's cognitive theory and Lazarus and Folkman's transactional model of stress and coping explain how rumination-oriented listening can hinder negative thoughts. Finally, there is the self-determination theory of Deci and Ryan. This theory is significant in that it proposes that freely chosen music listening is beneficial to mental health because it satisfies human needs for autonomy and competence. Erikson's theory of psychosocial development introduces the element of chronology or age in relation to which musical interventions might be the most beneficial.

Conceptual Framework

The independent variable is Adaptive Music Listening Functions (AFML) which encompasses four subscales: emotional regulation, social functions, meaning-making/self-reflection, and entertainment/arousal. The dependent variable is Mental Health Outcome, covering psychological well-being, emotional well-being, and psychological distress. Age Cohort is used as a grouping variable to represent adolescents, young adults, and adults. The four subscales of the AFML — Emotional Regulation, Social Functions, Meaning-Making, and Entertainment — are expected to show differential relationships with mental health outcomes depending on the developmental stage of the participant. Theories behind the association of music and mood.

Theoretical Argument

Why adaptive music listening can help with mental health:

Music serves as a natural tool for emotional regulation that individuals intentionally utilize in daily life. Fredrickson's Broaden and Build theory proposes that the positive emotions derived from music build psychological resources over time, enhancing overall well-being. The Transactional Model-the concept of

coping with a changing world-laid down by Lazarus and Folkman-indicates that those individuals who use music as an active coping strategy tend to have significantly better psychological outcomes compared to those who use music largely to ruminate or distract themselves from their emotions.

Why changing age impacts the effect:

Erikson's stages of psychosocial development suggest that our psychological needs and challenges change with growth. The teens rely on music to attain identity and maintain contact with peers. Younger adults use it to face major life changes and find meaning. People in midlife use it to recover from stress and to stabilize their emotions. Together, these developmental changes suggest that how music listening supports mental health will vary considerably across different age groups.

Proposed Conceptual Model

(H1) Direct effect

The authors suggest that by adapting how we listen to music—tailoring experiences to fit mood, context, and needs—a direct shaping of mental health can be achieved in people aged between 12 and 45 years. As individuals become more engaged with adaptive music listening for emotional regulation, establishing social connections, and attaining meaning, their psychological well-being is likely to increase while their psychological distress diminishes. This is the direct effect, which constitutes the core of the present study.

(H2) Moderation effect:

The age group serves to moderate the relationship between adaptive music listening functions and mental health. This is based on the assumption that the relationship will differ between adolescents, young adults, and adults. This is because of the unique mental needs individuals have during their developmental stages. We will examine the moderating effect of the age group using the SPSS PROCESS.

(H3) Mediation Effect:

It recognizes conceptually that emotional regulation could potentially serve as a mediator that might link music listening with mental health outcomes. In other words, listening to music could potentially lead to enhanced ability to regulate emotions. The enhanced ability to regulate emotions, then, might contribute to better mental health.

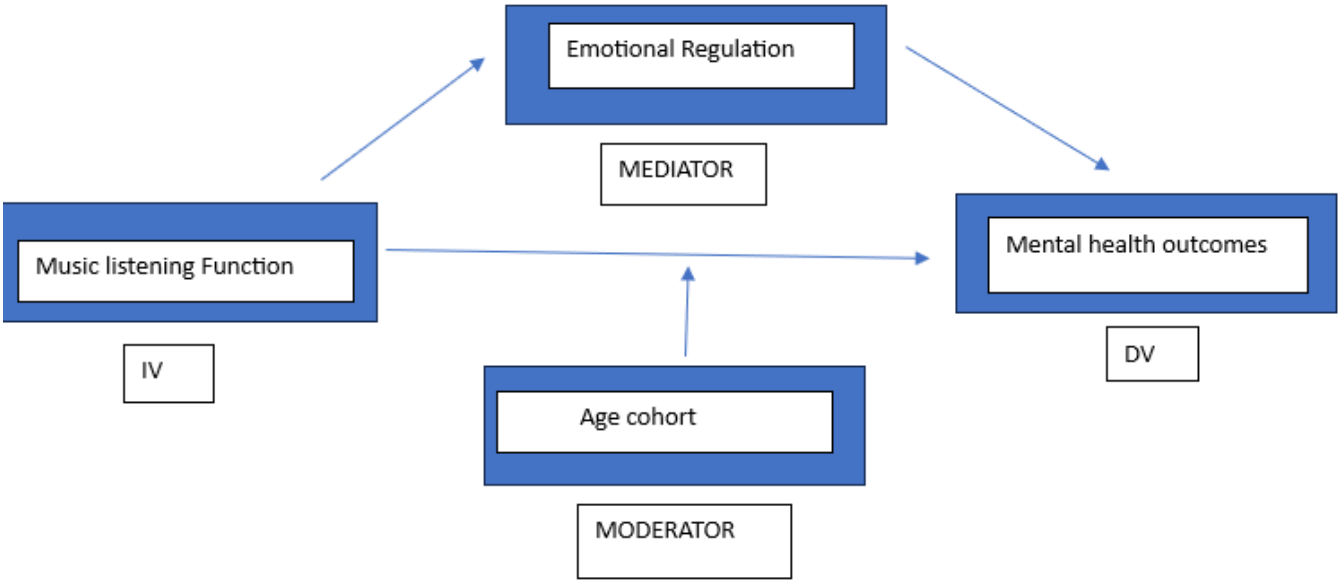

Figure-1 Visual Representation of the Conceptual Framework

The diagram below illustrate the Mediating effect and Moderating effect proposed in this paper.

Research objectives and Questions

Objectives

R1: Explain how the process of GMLR is linked to mental health outcomes in persons aged 12 to 45 years.
R2: Note the different forms that these linkages take between teens, young adults, and mature adults.
R3: Determine how to best link each AFML subscales to well-being at different stages of development.
R4: Consider how social music functions relate to social well-being in the group.
R5: Establish a theoretical basis for music-based mental health interventions appropriate to developmental stages.

Questions

Q1: How strong and what type of relationship lies between AFML scores and mental health outcomes?
Q2: Do the relationships of certain sub-scales of the AFML with mental health constructs change across the three age groups? Q3: What adaptive music functions are best suited to predicting the well-being of adolescents, young adults, and adults, respectively? Q4: Does there exist a significant relationship between social music listening functions and social well-being?

Hypothesis

H1: There is a positive relationship between higher AFML emotional regulation scores and psychological well-being across all age groups.
H2: Higher AFML Social Function scores will have a positive association with Social Wellbeing and a negative association with Loneliness.
H3: Higher levels of AFML meaning-making will be positively correlated with purpose in life and psychological growth, especially among young adults.

Research Methodology

Research Design

This research is a correlational, cross-sectional study investigating how people's natural patterns of engaging with adaptive music listening relate to their mental health across three developmental stages.Population and Sample was targeted people aged 12–45 years residing in urban and semi-urban areas of India. In order to represent these stages fairly, we will perform stratified random sampling and divide participants into three groups: adolescents, young adults, and adults, aged 12–17, 18–25, and 26–45 years, respectively. We will reach the adolescents through schools, young adults through colleges, and adults through the community and workplace networks. We are seeking approximately 200 participants, around 65–67 in each group, and will enroll about 230 in order to accommodate dropouts. Inclusion criteria: between 12 and 45 years of age; voluntary music listening for at least 30 minutes per week; capability to fill in the questionnaire; informed consent. Exclusion criteria: hearing problems which affect the patient's usual listening habits; acute psychiatric crisis; inability to give informed consent.

Measurement Instruments

1. Adaptive Functions of Music Listening Scale (AFML)
2. Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)
3. Depression Anxiety Stress Scales — 21 item (DASS-21) are used for collecting the data.

Data Collection

Offline surveys by visiting schools and colleges for young adult and adult cohorts. Paper-based administration in school settings for adolescents. Estimated completion time is 25–35 minutes. Mental health support resources will be provided to all participants at the close of the survey.

Variables

Independent Variable (IV) Music Listening Functions (Measured by AFML) is taken Dependent Variable (DV) Mental Health Outcomes (Measured by WEMWBS and DASS-21) are taken . Moderating Variable Age Cohort (Adolescents 12–17 / Young Adults 18–25 / Adults 26–45) is taken Mediating Effect is Emotional Regulation.

Statistical Analysis

For the statistical analysis with 200 samples of data, using the Pearson correlation method on SPSS statistical software version 26. This method is appropriate for a correlational study to determine the strength of association between adaptive music listening functions (AFML) and mental health outcomes (WEMWBS & DASS-21), as well as the relationships between the variables with the three study age groups. We will assume a $p < 0.05$ to determine the significance of the results.

Ethical Considerations

It will ensure that approval for the study is granted by the appropriate ethical clearance board. Informed consent shall be elicited from all participants, and for participants below the age of 18, consent from the parent shall also be sought. Participation in the research is voluntary, and participants can withdraw at any point. Confidentially of the information shall be ensured through the use of anonymising procedures. The research shall not involve deception.

Research gaps of this study

This research aims to address four important gaps that are identified, namely, there has been no previous study to date that systematically examined music and mental health domains over all of this range of ages, namely, between ages 12-45 years old. There have been few AFML-based studies that have utilized functionally specific tools within this domain, and previous research in this field has been predominantly Western-centric, not Asian-centric like this study, particularly focusing on the Indian population, and, lastly, most of the studies lacked a combination, resulting in limited completeness of conclusions being drawn.

Consequences

On the theoretical side, this study sharpens our grasp of how music's mental-health effects unfold across different life stages. It ties together music psychology with lifespan development and lays out clearer, testable hypotheses that will guide future work.

In practical terms, the findings have the potential to inform how school and college counselling is conducted by identifying which musical functions are most protective at each life stage. They also provide a foundation for low-cost, widely accessible music-based interventions to foster wellbeing. And for policy, the study gives further substance to the notion that music engagement can be taken seriously as a mental health resource worthy of support within community health structures.

Conclusion

The paper presents a theoretically sound, unbiased method for examining the connection that exists between AM listening and MH from adolescence through midlife. The work is informed by well-founded psychology theory and empirics, pointing a tentative course for a correlative study with a multi-level sampling pool of 200 participants, with use of the AFML as a primary research tool. The proposed research is theoretically and practically viable, and as MH concerns escalate with music listening becoming more integrated into daily life, this type of research is both timely and warranted. In this paper, we have provided a foundation for future research into just that.

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