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Research Paper

Role of Music Preference and Gender on Quality of Life

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ABSTRACT

Music can boost our mood, quality of life, and well-being. Music is also a medium to express emotion, culture, and national identity. Therapists can use music as a therapy for treatment. Quality of life may also a viewed from an interdisciplinary perspective or an environmental, economic, psychological, or sociological perspective. Many ecological factors enhance the quality of life. Quality of life analysis is a subjective perception to a considerable extent and depends on changes in attitudes, values, and norms. **Objective:** To examine the effect of music preference on quality of life among adults. To assess the quality of life among male and female adults. **Method:** The sample was comprised of 200 adults whose ages ranged from 20 to 40 years. Purposive cum incidental sampling methods was used. **Tools:** Quality of life scale developed by S. Sharma and N. Nasreen. **Result and conclusion:** Based on data, it can be said that the adults who listen romantic and melody song have better quality of life. There were no differences found on quality of life among rock/pop and ghazal listening adults. Also, female has better quality of life then male.

Keywords: Music preference, Quality of life, Adult, Music

usic Music is the ability to link individuals and communities to imagined and real places. Music is often organized to unite people and create a unique group identity (Bakagiannis & Tarrent, 2006; Lonsdale&North,2009). Music can boost our mood, quality of life, and well-being. Music also a median to express emotion, culture, and nation identity. Therapist can use music as a therapy for a treatment.

The role of music in creating, maintaining, and expressing culture and national identity, while the underlying social psychological process, remains unknown. Music is the psychological mechanism of identity construction and expression through culture-specific music preference. Different generations prefer different types of music to express their emotion—music preference is also an evaluation towards music styles.

In study Rentfrow and Gosling (2003) argued that music styles are the natural form when individuals think and express their music preferences. Furthermore, musical styles are broad categories, including a classification of songs and artists. Even if artists or songs vary in individuals' associations with a music style, the category is shared and provides common

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ground among individuals (shared cognitive framework; Hargreaves & North, 1999; Tekman & Hortacsu, 2002).

Music is one of the most remarkable features of life, which can change our quality of life. Age is a vital factor in determining music preference. There is also evidence that preferences and opinions toward music can change with age. There are several types of music, such as folk, old song, gazal, rock/pop, romantic Etc.

Several studies have demonstrated differences between male and female listeners' music preferences (Colley, 2008; North & Hargreaves, 2007; O'Neill, 1997), suggesting that systematic gender differences in music preferences are based on gender-role socialization into male toughness and female emotionality. Such differences in musical behaviors may be rooted in gender differences in affect proneness and personality traits, which are driven by physiological differences in emotional experience (e.g., Bradley, Codispoti, Sabatinelli & Lang, 2001). Female listeners also use music more frequently to fulfil emotional needs (North et al., 2000).

Music Therapy

Music uses as therapy. Therapists use music to reduce stress, decrease anxiety improve mood, and enhance good emotion. Music therapy is an acknowledged healthcare profession that uses evidence-based music interventions to address therapeutic healthcare goals. Music therapy emerges between a client and a music therapist who has completed a qualified graduate music therapy program. The United States War Department first well-defined and adopted formal music therapy in 1945 to help military personnel recover in Army hospitals through occupational therapy, education, and physical reconditioning. With the help of Music, autistic children improve their communication.

Quality of life

Quality of life refers to the degree of satisfaction of several human needs, physical, mental, emotional, and spiritual. After a brief introduction, four statements are presented, and the learner is expected to select the one which is considered most appropriate. The statement is as follows:

- Quality of life is synonymous with the standard of living;
- Quality of life means an increase in income:
- Quality of life is the balance between resources and human needs;
- Quality of life is the degree of the satisfaction of human needs;

Quality of life may also a viewed from an interdisciplinary perspective or an environmental, economic, psychological, or sociological perspective. Many ecological factors enhance the quality of life. Quality of life analysis is a subjective perception to a considerable extent and depends on changes in attitudes, values, and norms. Positive self-development enhances the quality of life for individuals. The other factor deals with the development of human potential, pointing out that maximizing one's potential is one way to improve quality of life.

WHO defines the quality of life as an individual's perception of their position in life in the context of the culture and value systems in which they live and about their goals, expectation, standards, and concerns.

Quality of life related to music

Recently, researchers have at the effect of music interventions on health-related quality of life and tried to solve the question about the best way to support and make that shift toward release, relaxation, and rehabilitation. In a recent systematic review, studies showed that music interventions in listening to music, singing, and music therapy could significantly improve mental health and minor modifications in physical health-related quality of life and found a positive impact on the psychological quality of life, they found music is the best way improve quality of life.

REVIEW OF LITERATURE

In 2021 Yashaswi and Sreenivas found that young adults who know Indian Classical music have a better quality of life than those who do not know Indian classical music.

In the study, Heeyoun Kim Cho (2018) found that the music therapy-singing group significantly increased positive affect scores and decreased negative affect scores of quality of life.

Dominic Upton & Penney Upton (2020) health-related quality of life of patients found significant differences in psychological well-being on quality of life.

According to a study conducted by Melissa Mercadal-Brotons in 2010, there were satisfactory results. They found that music improves their quality of life.

In 2005 Smith, Lamping, Banerjee, Harwood, Foley, Smith and Knapp study found that on health-related quality of life, individual and caregiver responses were similar in domains like daily activities, health and well-being, cognitive functioning, social relationships, and self-concept.

According to a study conducted by Russell E Hilliard in 2003 in his research, there were no significant differences in results by age or gender of subjects on quality of life.

According to a study, Giorgos Dritsakis, Rachel M. van Besouw, Pádraig Kitterick & Carl A. Verschuur found in their research that there was a significant relationship between music engagement and quality of life.

Problem

To study the effect of Music preference and Gender on the quality of life of adults.

Objectives

- 1. To see the effect of music preference on quality of life among adults.
- 2. To assess the quality of life among male and female adults.

Hypothesis

- 1. "There would be a significant difference between music preferences on quality of life."
- 2. "Male and female adults would have differed significantly on their quality of life."

METHODOLOGY

Sample: The sample would comprise of 200 (N=200) adults in which 100 will be male and 100 will be female of age ranging from 20 to 40 years. Sample would be drawn from different

locations of Bihar. Purposive cum incidental sampling methods will be used for the selection of the sample.

Research design: Between group design used in this study.

Inclusion criteria:

- The sample were Adults between 20 to 40 years of age
- The sample were Residents of Patna
- Having interest in music

Exclusion criteria:

- Any history of psychotic disorder
- No interest in music
- Living outside Patna
- Below 20 and above 40 years of age

Tools

- 1. Quality of life scales (QOLS-SSNN): This scale was developed by S. Sharma and N. Nasreen. This scale consists of 42 items divided into eleven areas, (life satisfaction, goals and motivation, spirituality, happiness, hopes and wishes, stress reduction, frustration depression/anxiety, adjustment, physical well-being and self-care, effectiveness/efficiency of myself, personal development/personal evolution) out of them 34 are positive and 8 are negative items with three responses (Always, Seldom, and Never) respectively. Positive items are scored as 3, 2, 1 and negative items as 1, 2. 3 respectively. The reliability of the scale 0.80 and .82 was found through Cronbach's alpha method, and the validity by face validity respectively. It can administer on adults
- 2. Social Demographic Data Sheet: The data sheet was developed for the current study to collect relevant socio-demographic information about the participants. The following socio-demographic variables would be investigated: name, age, gender, educational status, socio economic status, music preference.

Group	Music	QUALITY OF LIFE					
	preference	N (200)	Mean	SD	t-test		
А.	Gazal	50	84.90	10.41	0.22		
	Romantic	50	95.45	11.12			
В.	Gazal	50	84.90	10.41	1.58		
	Rock/pop	50	73.25	8.54			
C.	Gazal	50	84.90	10.41	0.19		
	Melody/old song	50	92.33	10.84			
D.	Romantic	50	95.45	11.12	1.94		
	Rock/pop	50	73.25	8.54			
E.	Romantic	50	95.45	11.12	0.04		
	Melody/old song	50	92.33	10.84			
F.	Rock/pop	50	73.25	8.54			
	Melody/old song	50	92.33	10.84	1.98		

RESULT AND DISCUSSION

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From table 1 it can be observed that Quality of life of romantic (Mean=95.45, SD=11.12) music listener is higher than melody/old song (Mean=92.33, SD=10.84), gazal (Mean=84.90, SD=10.41), and rock/pop (Mean=73.25, SD=8.54) listener. The differences between the Mean among the types of listeners are not statistically significant. It means music preference has no specific role play in the quality of life among adults. Melissa Mercadal-Brotons, Giorgos Dritsakis (2010), Rachel M. van Besouw, Pádraig Kitterick & Carl A. Verschuur found in their study that music have an impact on the quality of life among individuals.

Hence the first hypothesis which stated that "Music preference of the adults will have a significant effect on their Quality of Life" has been rejected.

Gender	Ν	Mean	SD	Df	t-ratio	Level of significant					
Male	100	82.81	8.54								
Female	100	101.26	7.02	98	2.03	>0.05					

TABLE 2

From **table 2** based on result obtained the mean of male and female are 82.81 and 101.26 respectively. SD of male and female are 8.54 and 7.02 respectively and the t-ratio is 2.03 which is significant at 0.05 level. The obtained value of t-ratio is more than the table value 0.05 level. Hence hypothesis 2 "Male and female adults would have differed significantly on their quality of life" has been accepted.

CONCLUSION

On the basis of obtained data and the result in Table 1, we can say that statistically not significant difference was found between old song/melody, romantic, rock/pop, and gazal. The difference has come from by chance factor.

Based on the result in Table 2, it can be said that statistically significant difference at 0.05 level in the quality of life among males and females. According to result, a female has a better quality of life compare to male.

Scope for Future Research

Future studies could involve various individuals within their sample to obtain more accurate and applicable outcomes. The current sample size utilized in this research is relatively small. Therefore, it could be beneficial to increase the sample size. In addition, it may be helpful to conduct separate research studies for various music cultures to understand how music cultures impact people's emotional intelligence, perception of emotion and quality of life. Furthermore, it could explore the disparities in quality of life between music preferences based on different age groups and religions.

Implications

This study could be planned for developing music preferences on the quality of life among males and females. People can know how music boosts their mood and reduce stress. And improve their quality of life (hope, stress reduction, life satisfaction, mental health, and interpersonal relationship etc.), and music uses like therapy. Therapists can use this therapy to improve their quality of life.

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Conflict of Interest

The author(s) declared no conflict of interest.

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