

CHAPTER 2

Sanity, Madness and Music

The complaint of the depressive individual, 'Nothing is possible' can only occur in a society that thinks, 'Nothing is impossible.'

—Han (2015: 11)

Before examining in more detail, the relationship between contemporary conditions of musical production and mental health and wellbeing, it is important first to unpack what we mean when we use the terms 'mental health' or 'wellbeing'. In recent years these words have seeped into every area of our daily lives, so much so that we often use them interchangeably without paying much attention to what they actually mean or the differences between them. Just like music itself, messages about wellbeing are everywhere; no social media platform is without endless inspirational adverts, memes and proclamations each inciting us to be mindful of our mental health and look after our wellbeing by eating well or exercising (Rieger and Klimmt, 2018). There is no escape from the mental health and wellbeing industries.

In advance of the three empirical chapters which form the core of this book, this chapter will unpack what we call the new language of mental health. Here, we will sketch out some of the ways in which the terms 'mental health' and 'wellbeing' have been and are being defined, and the ways in which they are different. We suggest that in an environment of relative terminological ambiguity and imprecision, notions of the subject's relationship to their emotional state, that is, how a person attempts to articulate their own emotional and affective experiences, has become a key method by which they and others understand their mental health and wellbeing.

In doing so, in the first part of this chapter we draw on the work of Smail (1996, 2005), who argues that external interests, including the interests of

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psychology itself, have been noticeably absent or overlooked in the development of thought around psychology and the individual. He goes on to argue for a societal perspective to psychology that gives weight to and enables an understanding of human behaviour that is ‘more to be found in the complex structure of the social environment than they are in the relatively simple features of embodiment that we all share’ (2005: 27). He further argues ‘for a change in perspective that conceives of motivation not just as individual and internal, but as social and environmental as well’ (ibid). Although we do not deny the specificity of each individual’s subjective experiences, what we want to add into this, following Smail, is that individual motivation can be better understood if we give equal weight to both proximal and interior experiences and also allow for their social and environmental influences. In this way, the overemphasis on the individual is revealed and the interests at play can be seen for what they are. This in turn has repercussions for the individuals involved and also society at large.

This conceptualisation leads us to the second part of this chapter in which we explain the methodological approach adopted in our research. After outlining the quantitative findings of our large survey of musical workers, we suggest that while the numbers presented by our research are striking, important, and at times shocking, what is even more interesting are the explanations given by the music makers themselves of their working environment. Thus, we conclude by outlining why we felt it was so crucial to undertake a qualitative study such as ours and hear from musicians themselves, in their own words, about how they were experiencing their creative lives, and their subjective perception of how this impacts on their mental health and wellbeing.

2.1 Signs of Emotional Distress and the New Language of Mental Health

In the end, what makes the difference between distress that the individual feels somehow able to cope with and distress apparently needing professional help is more a matter of quantity than kind: rather than splitting into a dichotomy, they lie on a continuum.

—Smail (1996)

The idea of sanity as a state in which one ought to be able to think, feel and behave rationally has always had limitations, not least related to who was defining what is or should be thought of as rational. The central criticisms of these ideas were developed out of broader debates around the formation of subjectivity, notably in the fields of philosophy (especially in the work of Michel Foucault), politics, and psychoanalysis that influenced discourse across multiple disciplines, with significant and progressive contributions from feminist, critical race theory, and queer theory. These positions have all influenced the

development of what has come to be known as ‘identity politics’ (see Bernstein, 2005) both on the right and left of the political spectrum. The result is that, in the popular imagination, many such ideas argued under the banner of the post-political have been stripped of their original political positioning. Now, across social media, slogans, memes and aphorisms extolling the virtues of knowing who you are and so proclaiming your identity appear almost commonplace. ‘Identity politics’ in this sense is stripped of any political edge – reduced to what Dean calls ‘politics-lite’. These everyday uses are as contradictory as they are both simultaneously reductionist and broad.

Our increasing interest in, and knowledge and awareness of, the complexity of emotional and mental states has led us to believe that both sanity and madness as discrete concepts have largely lost their usefulness. Consigned to us from the history and literature of a darker age, insanity fulfils its romantic trope. Today, people are no longer confined to madness; they are positioned along an increasingly graded and changing spectrum of mental illness diagnoses. Modernity, and with it the general secularisation of human experience, has played a significant part in the medicalisation of all human experiences from birth to death, discovering and arguably producing new psychological illnesses for the ever-expanding medical industries to deal with. Alongside these medical advances there has, over the last thirty years, been a huge increase in complementary and alternative medicine and diverse wellbeing industries (Kickbusch and Payne, 2003; Colquhoun, 2011).

This leads us to ask what are the differences between wellbeing and mental health? And how are musical production practices in the digital age implicated in these discussions? The key difference is that wellbeing is a general catch-all term that includes both an individual’s internal state as well as external factors that may contribute to his or her overall flourishing and feelings of happiness or contentment. Mental health on the other hand relates specifically to psychological states. According to the World Health Organization, wellbeing is: ‘a state where everyone is able to realise their potential, can cope with the normal stresses of life, can work productively and fruitfully and is able to make a contribution to their community’ (Mental Health Foundation, 2016). Thus, wellbeing is conceived as both containing external drivers/circumstances and internal psychological factors that impact the lives of individuals and communities allowing them to thrive. This includes: how we feel about our own health, our history of health – both mental and physical – our habits and behaviours such as sleeping patterns, and our relationship to alcohol and narcotics, for example. At the same time, it also includes ideas about ‘productivity’, social connectedness and external factors from our environment, such as the quality of our lives, how we live, and where we live (Department of Health, 2014).

In this sense, wellbeing is a societal goal: something that must be achieved for the overall improvement of people’s lives so that they as individuals, and in turn society as a whole, can achieve a better standard of living that includes positive ideas of flourishing and enjoyment. Measuring wellbeing has become

a central political descriptor (Davies, 2015), and therefore a way of showing how well or badly a society or an institution is doing. These measures range from work, to general health, education, housing and relationships, as well as how people feel about their lives. From a policy perspective, wellbeing is understood as something that can be measured objectively by looking at observable factors, as well as asking people for their subjective appreciation of themselves.

Wellbeing, however, has also become a way of assessing the impact of inequalities on individuals and societies. If music making is one area where people believe they are engaged in meaningful, positive practices by doing something they love, it might be an interesting focus group to observe how general changes in the overall working conditions brought about by the expanding gig economy (Poon, 2019) might be measured. Musical practices are particularly interesting because they share many of the characteristics that appear significant in terms of status evaluation as explained by Wilkinson and Pickett (2018). They focus primarily on 'vertical inequalities' and how these are implicated in the material differences of social hierarchies, as well as how these subsequently impact people's lives. Their concern is how hierarchies and social status – the evaluation by others and of ourselves – impacts our inner world to such an extent that it impacts the overall health of society at large. What we are suggesting here, is that the visibility of these patterns in specific areas of work may also indicate that there are external factors which are features of specific working practices. These are particularly seen in music and might be further amplified by digital media environments and thus further aggravate these 'inner' problems. These are not only the practices of self-promotion which are so central to the working lives of aspiring musicians, but also related to the reflective, repetitive and performative practices of a musical life.

Interestingly, Wilkinson and Pickett (2018) also refer to other forms of social vulnerability that fall outside the 'normal' remit of mental health and wellbeing but are nonetheless accepted as having an impact on people's experiences of their social worlds – shyness, for example. For musical workers, in common with the expressive and creative arts, evaluation is part of the central practice. There are parallels to be drawn, for example between a musician's self-criticism and athletes assessing their own performance (Power et al., 2009). Assessing one's own performance, abilities, progress, etc. is fundamental to musical practice, as it is to many types of work in the so-called knowledge economies. Musicians, however, are involved in an expressive form of labour which demands that, as performers, they not only communicate emotionally but they use their own emotions to do this; to be authentic they are required to feel it. Given that this is also affective insofar as music impacts the body sensorially, this might be arguably more pronounced or enhanced. Shyness is an interesting case in point. Despite being potentially distressing and disabling (Henderson et al., 2010) it falls outside of common ideas of emotional distress. Anecdotally, many musicians and performers describe themselves as shy and that somehow their

shyness is integral to the performer they then become. In this sense, being a musician and performing on stage can function as a way of coping as well as being a source of creative energy and impetus. This maps onto ideas about what musical practices and reflexive thinking have in common. Here, for example, it is possible to observe how shyness – an emotional characteristic which can be a social inhibitor and debilitating for the individual – does not qualify as emotional distress in the language of mental health, demonstrating well how problematic these terms are.

Most definitions of ‘mental health’ explain that it covers emotional, psychological and social wellbeing, and that in doing so our mental health affects how we think, feel and act. Wellbeing on the other hand involves a wider range of components or indices that include and take note of one’s social world. We might understand mental health as being specifically about the individual and their state of mind, and wellbeing as more likely to include the individual’s external social position and how that impacts them. What is consistent in much of the literature, is that mental health and wellbeing include notions of positive thinking (Kensall, 1992; Macleod and Moore, 2000) and, as suggested in the previous chapter, the music industries are driven and propelled by this technopositivist mantra. This is one of the reasons why studying wellbeing within the music industries from a perspective such as ours is both intellectually fascinating and also, in some respects, slightly taboo.

Today, it would seem that everyone knows someone who has suffered or is suffering from emotional distress to the extent that it is labelled a mental health problem. Yet it is clear that when emotional distress is categorised as a mental health condition it can impact the outcome for different people in different ways, and for some it may mean losing their liberty altogether (Fernando and Keating, 2008). Mental health issues are now understood to cover a wide range of psychological conditions from panic attacks to eating disorders to clinical depression, schizophrenia and paranoia. However, as soon as one begins to interrogate these terms and look at the history of their conceptual and linguistic development, it becomes apparent that the landscape of mental health is extremely complex and highly contested (Smail, 1996). As historians, philosophers, social scientists and medical professionals point out, conversations about mental health are as much a product of western modernity as they are societal or evolutionary change (Foucault, 2001, 2006). On an individual, everyday level there appears to be a consensus that the idea of talking about the state of one’s mind can seem extremely daunting and often leaves the individual and those that care about them in a potentially vulnerable position. The idea of the separation of the body and mind, and then their reintegration in the discourse of wellbeing so prevalent across social media, are evidence of the contradictions, confusion, connotations and entanglement of terms and ideas that circulate in the broad mental health space. The very terms ‘mental health’ and ‘wellbeing’ are problematic, suffering from relative terminological imprecision and differing ideas vis-à-vis both cause and treatment. Indeed, when we study

these ideas in relation to the music industries – an environment riddled with myth, abstraction, narrative and fluid ideas of genius, fame and creativity – the landscape increases in complexity once again.

2.2 Music and Suffering: The Limits of Magical Thinking

The literature explored in the previous chapter and of which this book forms part, tells us categorically that musicians are suffering from poor mental health insofar as *they say they are*. Their self-diagnoses in many contemporary studies is, perhaps, a reflection of the triumph of a neoliberal ideology that locates all problems and experience within the individual so that it is not a political problem, but an individual problem that needs treating. After all, as per Borkar (2013: 1812, emphasis added): ‘Well-being is a valid population outcome measure beyond morbidity, mortality, and economic status that tells us *how people perceive their life is going from their own perspective*.’ The suggestion here is, in fact, a helpful one in many respects – that in this environment of terminological imprecision, what matters is what the subject says. A person’s relative perspective is what matters, and how they can tell us about what they feel. This idea is captured by Smail (1996: 53) when he notes: ‘It is of the utmost importance to distinguish between the way someone *experiences* their problems and what the causes of those problems are.’ On the other hand, this can be problematic given that the source of mental health problems are located within the subjective experience of the individual: there is an emphasis on the ‘why’ over the ‘what’. An example of this can be seen on the UK government’s official mental health information website (GOV, 2019), where the following are described as contributory factors to mental (ill) health (and it is notable that society and/or working conditions are not mentioned at all). The list begins with ‘Biological factors, such as genes or brain chemistry’. Evident here is the growing popularity of neuroscience with all its technical wizardry, looking inside to understand and see in real-time the workings of the brain. ‘Life experiences, such as trauma or abuse’ is the second factor listed and then, ‘Family history of mental health problems’, where again we can see the nature/culture implications albeit without wider societal conditions mentioned.

This absence of external explanatory factors calls to mind Smail (1996: 43) when he wrote: ‘For psychotherapy, along with all those approaches that see people’s problems as inside them (as illnesses, “character disorders”, unconscious complexes, “maladaptive” learning etc.), obscures the fact there exists a world outside them in which the reasons for their distress are located.’ That is not to say that Smail in any way diminishes or disregards the internal experience of the individual; after all, he was a psychologist committed to improving the conditions of his patients and furthering the understanding of his discipline. However, what he argues for is an understanding of an individual’s total circumstances that includes their exterior world. That is, one has to look both

outward and inward: from the person who is an embodied subject, to their environment which is material and made up of 'social space-time', as well as the distal powers of economics, politics, culture, and ideology that they exist within and under (Smail, 2005: 27). What Smail is suggesting, and which we wish to bring attention to, is how both wellbeing and mental health are always linked to positivity, as well as productivity and coping with stress, with no real definition of what those terms might mean, given they are always stripped of context. It is in this environment that we have seen in recent years increasing talk of 'resilience' (Newsinger and Serafini, 2019) – a highly loaded term which we will return to at the end of the book. In the context of findings which suggest that musicians suffer from high levels of anxiety and depression, it is interesting how much attention is paid to the possibility that this group may contain a larger portion of people who have suffered, for example, early childhood trauma (Bellis et al., 2012). It is equally interesting how neurosciences consider that biological and neurological factors might be responsible for elements of music perception and performance (Marin and Perry, 1999), and that by extension musician's brains might be somehow different to those of non-musicians (Gaser and Schlaug, 2003; Schlaug, 2011), perhaps making them more susceptible to emotional distress. It is not difficult to see how these different approaches are effectively motivated by the interests of their disciplines and that all of them are looking somehow to locate the problems predominately in either the proximal relationships or biological or neurological reactions. Alternatively, as we suggest, the more helpfully inclusive and complex position might be that all of these things may have bearing on the individual's wellbeing, including the exterior social and political conditions. Developing a tool to measure wellbeing and mental health whereby due weight is given to the individual's social and economic position might lead to a deeper and more powerful understanding of how such distress is produced in the first instance. Likewise, these singular approaches fail to consider that this distress is both produced and actually productive, in the sense that it fuels the wellness and medical industries as well as the fields of entertainment and technology.

The pathologising of distress and emotional or sexual expression has a long and highly contested history: Foucault made clear it is more about power and control than treating any identifiable 'illness'. Nonetheless, the medicalisation of our emotional states is so common nowadays that it is hardly ever questioned and our relationship to music follows a similar path. The common sense understanding of mental health and now emotional wellbeing, like music, are considered important generally for our own good and an essential element of a flourishing life and society. In this context, two key 'conditions' – depression and anxiety – have come to play an increasingly significant part in our everyday experience. It is almost as if, as many have argued, we live in an age of anxiety (Haig, 2018) and, like many other ideas of psychological and now neurological description, everything is on a spectrum. Depressive feelings or anxiety and/or panic attacks might be seen as 'normal' everyday expressions of

momentary or temporally specific distress. For example, a singer performing in public might feel that a bit of stage fright is ‘acceptable’ or just part of the job, whilst others may feel a debilitating performance anxiety that stops them from working, and which will subsequently be seen from a medical and individual perspective as something that needs treatment (in the field of classical music, the work of Dianna Kenny has perhaps been the most influential in this area). Human beings of course have a broad range of emotional experiences that fluctuate constantly. We can go from feeling angry to sad within seconds if we are faced with information that impacts us – sudden death, infidelity or even everyday news; things we feel strongly about. However, when does worrying about what somebody thinks about your song turn into an anxiety that you can no longer cope with? When does anxiety about your competitors catching up with you become paranoia? When does leaving your studio or walking onto a stage freeze you with fear? When feelings are part of your everyday practice, how would you know if they are out of control? Who, in reality, can disentangle these questions?

Working with and in music has been characterised as an environment where passions, emotions and feelings are an ingredient of musical practices – they are, quite literally, part of what is being worked with (Long and Barber, 2014). In a musical setting, many of the social and professional boundaries that might apply in other areas of one’s life are much more entangled and so are far more difficult to identify and unravel. To understand how music might be implicated within this complex, chaotic, contradictory web, one has to understand how music operates not only as a technology of self – of personal articulation and realisation (DeNora, 2000) – but also as an instrument of the state, a useful tool in the construction of public identities, and as an expression of cultural power, both soft and hard. As explored in the previous chapter, music as organised sound is especially understood amongst the expressive arts to be profoundly affective. Music’s ability to move us, to influence our emotional states, has never been considered innocent. At the same time, while musical experiences are simultaneously perceived to be both profoundly individual and social, they are also cultural. More recently, the relationship between music and wellbeing has become an industry in itself, and the idea of music as an essential part of human and social development is well integrated in policy debates from education (Iadeluca and Sangiorgio, 2009) to criminal youth justice (Daykin et al., 2017). Therefore, to ask questions about what all this music-focused thinking might mean for those engaged in the production of music is entirely appropriate. It is the embodied experience of musical activities that marks musical practice as distinct from other forms of occupation. However, if musical practices in some situations can actively improve health – as is claimed by those working in the field of music therapy (Cohen et al., 1995; Hass-Cohen, 2014; Morrissey, 2013) – is it not possible that this embodiment when overly entangled in economic and psychological experiences might potentially cause the opposite effect, even if unintentionally? Even though none

of the respondents in our research believed music making itself could make them sick – because for them their musical practice was a place of solace – even they were unable to always recognise the line between practices that enriched their lives and those that could also be damaging. It is against this complex backdrop explored in the previous chapter on work, harm, participation and abundance, and the debates in this chapter on how mental health and wellbeing are defined and by whom, that we developed our research project.

2.3 Methodology: Our Survey Findings – Anxiety and Depression by Numbers

A two-stage methodological approach was adopted and implemented alongside Help Musicians UK, an independent charity based in the United Kingdom which offers help and support to those working as professional musicians. The project was driven by two research questions. Firstly: *how widespread are mental health conditions (focusing on anxiety and depression specifically) amongst music workers?* To answer this, we sought to ascertain the scale of the problem via an online pilot survey comprised of fourteen simple questions, with space for respondents to share comments. The guiding objective was to listen to what a selection of musicians and creative workers had to say about their mental health and, more generally, about their careers. Respondents self-identified as both professional musicians and as having physical or mental health issues ranging from anxiety and depression to schizophrenia and bipolar disorder. We did not seek evidence of these assertions (the percentage of their income derived from creative work, for example, or medical verification). A total of 2,211 musical workers responded to our online survey, making this the largest ever study of its kind.

The headline findings of our survey were twofold. Firstly, in response to the question, ‘Have you ever suffered from panic attacks and/or high levels of anxiety?’, 71.1% of our respondents confirmed that they had; and when asked if they had ever suffered from depression, 68.5% said yes. These are startling numbers. Indicators of the incidence of anxiety and depression in the general population vary, and there is considerable variance in how the terms are defined, so it is problematic to compare like-for-like accurately. However, as an indicative guide, according to the ONS (2013) nearly one in five people (19%) in the UK aged 16 years or over experienced anxiety or depression in 2010–11 (using the GHQ method which asked if they had experienced these things ‘recently’, unlike ours which asked if they have experienced these things ‘ever’). This was consistent across the two subsequent years for which ONS data was available at the time of our survey (ONS, 2015), with 18.3% of people similarly responding in both 2011–12, and again in 2012–13. This suggests that, based on these comparisons at least, the artists and wider musical workers we surveyed were three times more likely to have experienced anxiety and/or depression than the

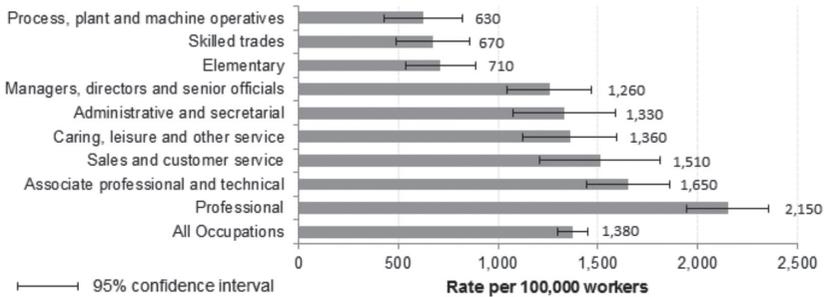


Fig. 1: Prevalence rate for work-related stress, depression or anxiety by occupational category per 100,000 workers 2016/17–2018/9 (HSE, 2019).

general public (Gross and Musgrave, 2016). Recent data from the UK government's Health and Safety Executive (HSE, 2019) can be seen above to contextualise these findings against data from other professions, for which the incidence of these conditions is significantly lower across all roles and sectors, although again it is difficult to make like-for-like comparisons, and indeed this was not the aim of the pilot survey.

2.4 A Deep Dive: Solo Artists, Gender and Age

For this book, we have been able to drill down into our survey data in greater detail by working alongside our colleague Professor Catherine Loveday, a neuropsychologist who has written extensively on music and memory (Alexomanolaki, Loveday and Kennett, 2006; Alexomanolaki, Kennett and Loveday, 2010; Loveday, Woy and Conway, 2020). When we break our data down by specific occupation, we can see that when we isolate artists (defined in our survey responses as adhering to either the category of musician, solo artist, songwriter or DJ, and highlighted in bold below) then levels of self-reported anxiety and depression are significantly higher than for more broadly defined music industry workers (defined in survey responses as adhering to either the category of live crew, audio production, publisher, management or other). If we construct averages based on the table below of absolute figures, we can see that levels of self-reported anxiety amongst artists is 75.82% compared with 65.95% amongst other music industry workers. Likewise for depression, we can see scores of 72.7% for artists contrasted with 63.1% amongst music industry workers.

It is also particularly interesting to note that within the category of musicians, we can see that those whom it might be reasonable to classify as solo performers – that is, solo artists, songwriters or DJs – demonstrate higher levels of self-reported anxiety and depression than musicians more generally or band members. Striking is the figure for self-reported anxiety amongst DJ respondents

	Anxiety	Depression	Other
Musician	73.5	70.7	17.9
Solo artist	76.0	77.1	16.0
Songwriter	76.5	77.9	20.8
DJ	85.0	75.0	22.5
Band member	68.1	62.8	17.0
Live crew	62.4	55.9	16.0
Audio production	72.6	65.3	25.3
Publisher	65.1	60.5	17.0
Management	63.2	68.4	21.1
Other	66.4	65.4	18.6

Fig. 2: Percentage of respondents reporting anxiety, depression and other mental health difficulties in relation to specific occupation.³

which was an astonishing 85% compared to 68.1% of band members and 73.5% of musicians generally. Likewise for depression, songwriters indicated a 77.9% self-reported incidence compared to 62.8% of band members, and 70.7% of musicians generally. Overall, rates of self-reported anxiety and depression were statistically higher in people who are solo performers or songwriters (76–77%) compared with band members and live crew (55–65%). This suggests that solo musicians might be more likely to suffer from anxiety and/or depression than those who typically work in groups, although there may be other factors at play here, notably genre norms (something we will explore more in later chapters). Indeed, it is interesting to note that at the Amsterdam Dance Event in 2018, our research was the basis of a panel entitled ‘Silence the Shame’ looking at this issue in dance music, and the topic has been picked up by a number of publications (Varley, 2017; Usher, 2018).

Gender also plays a significant role in our survey responses. As can be seen in Fig. 3 below, both levels of self-reported anxiety and depression were higher among our female than our male respondents, with anxiety demonstrating a particularly large differential – 77.8% of female respondents self-identified as having suffered from panic attacks and/or high levels of anxiety compared to 65.7% of males. This suggests that the experiences of female musicians may be qualitatively different to that of men, and we will explore this theme later in chapter five.

Finally, the impact of age on our respondents' self-reported levels of anxiety and depression is significant too. Here, once again, absolute numbers from our survey data can be seen below in Fig. 4, but it is striking how those under the age of 35 identified higher levels of anxiety, depression and ‘other’ compared to those over 35. These findings chime to a certain extent with those of Bellis et al. (2012) and Kenny and Asher (2016) whose work suggested that mortality rates decreased in those over the age of 25.

	Anxiety	Depression	Other
Male	65.7	67.5	15.1
Female	77.8	69.6	22

Fig. 3: Percentage of respondents reporting anxiety, depression and other mental health difficulties in relation to gender (non-binary, fluid not investigated in this analysis).⁴

	Anxiety	Depression	Other
18–25	73.3	68.0	20.7
26–35	74.3	71.5	19.7
36–45	71.0	70.0	15.9
46–55	63.4	62.1	16.5
55+	55.3	58.9	9.2

Fig. 4: Percentage of respondents reporting anxiety, depression and other mental health difficulties in relation to age.⁵

What does this all tell us? According to our survey, musicians and more widely defined musical workers tell us that they are suffering from anxiety and depression in huge numbers. Artists are suffering in even greater numbers than musical workers. Solo artists are suffering in even greater numbers than those in groups. Women are suffering in even greater numbers than men, and workers under 35 are suffering more acutely than those who are older. All of which begs the key question: why?

2.4.1 Interviews: Understanding Feeling

As per the discussion in our opening chapter, one might hypothesise that music making attracts the emotionally vulnerable – the classic ‘all musicians are mad’ trope – and that this might explain the findings seen above. However, we decided that the only way to meaningfully answer this question was to ask musicians themselves. We wanted them to tell us, in their own words, about their experiences of their work and their anxiety and/or depression. In order to achieve this, we followed up our survey with in-depth, semi-structured interviews with twenty-eight musicians. Respondents were drawn primarily from our pilot survey but also included some from our professional networks who had heard about it and expressed an interest in participating.

Instead of measuring people’s subjective perspectives against the objective theoretical frameworks of the ONS or DSM-5 (*Diagnostic and Statistical Manual of Mental Disorders*), we found it helpful to probe these perspectives further, inquiring into how musicians understand the stresses of their work. We therefore asked

them to communicate, in their own terms, *what this work feels like*. We wanted to write their stories and bring out the texture of their creative lives; to communicate the qualitative experience of doing musical work. We wanted to know how they were psychologically experiencing working in the music industries, and what we could learn about the emotional conditions of this labour, as opposed to a more clinical assessment of the relationship between music and psychological disorders. This, brings us to our second research question: *how do musicians feel about the work they do and the impact it has on their emotional wellbeing?* We were not asking people for their medical records or doctors' notes: we are not medical practitioners nor mental health professionals and did not seek to uncover any clinical links between the nature of their work and their emotional states whether through the use of clinical questionnaires or other neurological or psychological methods (although this is something we have addressed in subsequent research). Instead, we were seeking to examine how these cultural workers experience and understand their own mental health and wellbeing issues in relation to the work they do, and exploring what we can learn from their accounts. In this sense, the musicians we spoke to self-identified as struggling with feelings of anxiety and/or depression, and we took people's self-assessment seriously both as indicative of their *relative* mental state (rather than a clinical diagnosis) and in line with an ethics of respect towards our research subjects. We did not seek to problematise their self-reported feelings by questioning whether, for example, the anxiety they presented was medical/clinical anxiety or just a feeling of anxiousness. The material reality of their labour presented here is of course entirely subjective and interpretive; that is, we wanted to understand how they understood their work, their emotions and their world. We suggest that self-reporting of this kind cannot be dismissed and the voices of these musicians ignored on this basis. The starting point for anyone's entry into medical treatment or a therapeutic environment is if they say they are anxious or depressed. As such, we took what they had to say in good faith, and the honesty and openness of our interviewees was always sincere and often very moving.

Our research approach was designed to encourage openness and was constructed in response to the debates raised in this chapter so far around the centrality of subjective experiences and their articulation as being central to understanding wellbeing. Doing things in this way helps us to explore in qualitative detail some of the meaning behind our quantitative data, and to move away from the limitations of a purely statistical overview. That is, we want to highlight and emphasise the value of a *different* (i.e. social and cultural) view of musical work and mental health. Different, that is, from the normative demands of more quantitative approaches – such as our own mental health survey and other similar ones – or those seen in self-help guides. Our findings, which we explore in the subsequent chapters, should therefore be understood as answering, critiquing, or complementing such approaches, and it is for this reason that a qualitative study, informed by critical concepts and theoretical frameworks, is useful.

In addition, we drew on three other complementary sources of knowledge. We wanted to hear the perspectives of key stakeholders from within the music industries: how do they understand the challenges facing both artists and themselves vis-à-vis mental health and wellbeing? We conducted a supplementary interview with a senior music business executive from a major record company, as well as with a music manager of some of the biggest acts in the UK. These interviewees were drawn from both our professional music networks and those who responded to the coverage produced by our earlier survey. Secondly, as suggested, one of our key objectives in undertaking this research and writing this book was to better inform our professional practice as music educators. As part of the modules on our MA program, we invite music industry guests to speak to the students each week in order to connect them to everyday practice. These might be marketing managers from major record labels, DJs from national radio stations, radio pluggers, digital distributors, branding professionals, music managers and so on. These guests see themselves as advisors, drawing on their own experiences to inform the students of how they see the music industry. We will draw on some of the insights we have heard over the past decade throughout this book. Certainly there are limitations to what these speakers tell us, not least that they don't necessarily communicate the reality of how the music industries actually 'are', but instead are their interpretive and subjective version of how they see both themselves and the industry. Nonetheless, they act as a fascinating insight into how music industry workers see themselves and their world, and the advice they give the students tells us a great deal about how the music industry sees itself. Finally, we spoke to several providers of mental health services to build up a picture of the existing mental health services landscape.

2.5 Conclusion: Status and the Rhetoric of Fantasies

In 2017 we published the preliminary findings of our interviews in a paper that sought to list and examine some of the key factors which musicians felt were impacting their mental health and wellbeing (Gross and Musgrave, 2017). This book enables us to interrogate these findings further, and explore their repercussions more fully. We see three key features of the systemic, institutional conditions of music enterprise and music practices that act together to corrosively and painfully harm the mental health and wellbeing of musicians engaged in these practices:

1. **The status of work**, in which we examine how what musical work is – and how it is understood and experienced by musicians – has fundamentally changed;
2. **The status of value**, in which we unpack how the methods by which musicians evaluate their creative labour both online and in the music industry

in an environment of abundant musical production has profound ramifications for how they communicate, and how the nature of this evaluation leads to problematic ideas surrounding blame;

3. **The status of relationships**, in which we explore the ways in which musical labour occupies and consumes the lives of artists and in doing so destabilises their closest relationships.

The concept of a musician's relationship status with music plays on the idea from social media that our relationships with others are often a 'status' to be updated and amended over time – friends, separated, engaged, 'it's complicated'. Indeed, there is a small body of literature exploring the links between these online relationship status posts and the impacts they can have in users' real lives (Papp et al., 2012; Toma and Choi, 2015; Lane et al., 2016). We borrowed this idea as a way to conceptualise how musicians might understand their 'relationship status' to music making and to their musical ambition. More than this, the term serves as useful reminder of status in one's professional and/or social standing i.e. it is a relational term which trains our attention on the social. In addition, these three statuses loosely correspond to ideas of economic (the status of work), cultural (the status of value) and social (the status of relationships) validation. Certainly these concepts are not mutually exclusive – on the contrary, they are mutually interdependent – and throughout the chapters it will become clear that they overlap, intersect and come into conflict with each other in distinct ways.

As suggested, in writing this book we wanted to not only report on the reality on the ground, but also to find a way to interrogate the meaning of the musical practices we uncovered in our interviews. Therefore, alongside the presentation of findings based on our interviews, we will also be interpreting this qualitative data drawing largely – but not of course exclusively – on the work of Jodi Dean as outlined in the introduction. We propose that Dean's theory of communicative capitalism maps fascinatingly onto contemporary musical practices which act as an exemplar of the phenomena she highlights, and that therefore her theory acts as a prism through which we can make sense of why and how musical production taking place within the broader music ecosphere is potentially so emotionally damaging. Each chapter draws on central ideas from Dean's thesis – the transformation of messages into content conceptualised as the fantasy of participation, the decline of symbolic efficiency, and the loop or trap of reflexive subjectivity – and proposes that the insights she offers from the world of political theory concerned largely with participatory democracy and its relationship to media, in fact help us to better understand what is taking place in the contemporary music industries. We build on her use of the concept of 'fantasies' in our analysis too, a phraseology which is particularly helpful in an industry driven so much by mythology and appearance.

