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PLATO AND ARISTOTLE AS EPISTEMOLOGICAL PILLARS OF EVIDENCE-BASED MUSIC THERAPY

Platón y Aristóteles como pilares epistemológicos de la musicoterapia basada en la evidencia

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In recent decades, music therapy has firmly embraced an evidence-based practice paradigm. Yet, it is often overlooked that the methods underpinning this evidence are rooted in philosophical conceptions as ancient as they are enduring. Plato and Aristotle, foundational figures in Western thought, delineated two primary pathways to knowledge, reflected today in the qualitative and quantitative approaches of our discipline. Understanding this legacy illuminates the robustness of the scientific pillars upon which music therapy rests.

Pythagoras of Samos, predating them, explored how musical consonance—such as the octave, fifth, or fourth—adheres to precise numerical ratios, suggesting that the mathematical harmony perceived in sounds mirrors cosmic order. His empirical approach, blending practical observation (e.g., strings, forge hammers) with mathematical abstraction, inaugurated a tradition uniting logos with experience.

The Platonic path directs us towards essence, where truth resides in immutable, universal

Ideas transcending the mutable empirical reality. To attain true knowledge, or episteme, one must eschew reliance on sensory perception, a mere imperfect copy of these Ideas. This aspiration to uncover underlying “forms” resonates in qualitative and phenomenological research, which prioritises meaning over measurement. When exploring how a patient with dementia experiences shared musical improvisation or ascribes significance to silences or dynamic modulations, rigorous methods such as interviews, thematic analysis, or musical microanalysis are employed. Here, the therapist adopts a Socratic “midwife” role, guiding the patient through reflective dialogue, as proposed in Socrates’ maieutic method. Through careful, open-ended questions, no external truth is imposed; rather, the patient is facilitated to “give birth” to their own understanding, revealing profound meanings embedded in their lived experience. Thus, we interpret a deeper reality manifested through individual experience, constructed via dialogue and language. This approach, indebted to Platonic dialectic and enriched by Socratic maieutics, elucidates the “why” and “how” of therapeutic processes, illuminating phenomena resistant to numerical reduction and grounding theories of change that underpin clinical practice.

Conversely, the Aristotelian route grounds knowledge in systematic observation and logical analysis of the concrete. Though lacking precise instruments, Aristotle’s legacy resonates in contemporary quantitative designs, where evidence is constructed through precise measurement, variable control, and statistical inference. Randomised controlled trials on stress reduction interventions, systematic reviews synthesising effect sizes, and meta-analyses refining biases embody Aristotle’s mission to classify, quantify, and generalise. These methods address the “what” and “how much”: What is the magnitude of heart rate reduction? By how many points does anxiety decrease? The probative

strength of these methods, meticulously catalogued in typologies and increasingly refined reviews, legitimises music therapy within the healthcare community and informs public health policy.

These two voices are complementary and convergent, sharing, in musical terms, a harmony. Reducing music therapy research to a single axis would, in Aristotelian terms, mistake the part for the whole, or, in Platonic terms, forsake contemplation of the Idea. Contemporary clinical practice demands both an intimate understanding of subjective experience and the meanings individuals ascribe to music and therapy, alongside replicable demonstrations of effects through inductive and deductive methods.

Music therapy advances when quantitative findings align with qualitative narratives, and emergent meanings inspire empirically testable hypotheses. This forms a double helix, rotating in complementary directions around a shared axis. When aligned, the apparent tension between essence and phenomenon transforms into fruitful dialogue: phenomenological studies suggest mediating variables, while clinical trials identify response patterns that deepen case study insights. Platonic methods lend depth to statistics, while Aristotelian methods confer robustness to hermeneutics.

Just as Pythagoras' lyre and monochord revealed that numbers can be heard, modern science demonstrated they can be measured precisely. Galileo's pendulum transformed time into length, Descartes' analytical geometry translated celestial music into coordinates, and Newton's calculus unified motion and gravitation under a single equation. What distinguished them from their predecessors was the development of precise measurement instruments. Following this tradition, contemporary music therapists design scales and employ acoustic and biometric devices to record physiological and emotional changes with precision once only intuited.

In its editorial vision, MISOSTENIDO seeks to highlight and integrate these dual approaches to understanding the therapeutic phenomenon. We invite authors to articulate the philosophical perspectives underpinning their designs, to declare how their questions engage with these traditions, and to justify the coherence between method and purpose. We also encourage hybrid research, convergent reviews, sequential explanatory studies, and mixed-methods designs that embody this essential epistemological complementarity. As Bonde (2007) noted, researching "music in therapy" requires technical decisions but also ontological and ethical stances. Consolidating evidence-based music therapy does not entail venerating a single mode of knowing but orchestrating, with academic rigour and clinical creativity, the two voices that have historically shaped our conception of truth. At the intersection of Plato and Aristotle, of the dialectic of meaning and the logic of measurement, stands the discipline we champion: a science-art capable of listening to the invisible and demonstrating the audible.

Bonde, L. O. (2007). Steps in researching the music in therapy. En T. Wigram & T. Wosch (Eds.), *Microanalysis: Methods, techniques and applications in music therapy for clinicians, researchers, educators and students* (pp. 273–284). Jessica Kingsley Publisher.

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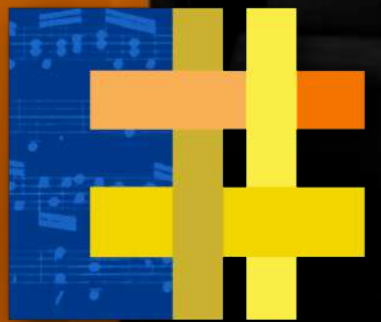
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