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# Philosophical Dimensions of Music Therapy: Bridging the Gap Between Art and Psychology

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#### ABSTRACT

**Objective:** This study explores the philosophical dimensions of music therapy, focusing on how it bridges the gap between art and psychology.

**Methods and Materials:** A qualitative research design was used, employing semi-structured interviews with 22 participants from Iran. The participants included both music therapists and individuals with personal experience in music therapy. The interviews were conducted until theoretical saturation was achieved, and the data were analyzed using NVivo software for thematic analysis. The analysis revealed key themes related to the therapeutic and philosophical aspects of music therapy.

**Findings:** Four main themes emerged from the analysis: (1) Music therapy as a therapeutic art, facilitating emotional expression, creativity, and personal identity; (2) Psychological impacts of music therapy, including emotional regulation, cognitive restructuring, and behavioral changes; (3) Philosophical dimensions of healing, such as the mind-body connection, existential reflections, and spiritual insights; and (4) Bridging art and psychology, where music therapy integrates artistic expression with psychological healing, blurring the boundaries between the two fields

**Conclusion:** Music therapy plays a unique role in bridging the gap between art and psychology by providing a space for emotional, cognitive, and spiritual exploration. Its ability to evoke emotions, stimulate cognitive engagement, and foster existential reflection makes it a powerful therapeutic tool. The study highlights the importance of understanding music therapy not only as a therapeutic practice but also as an art form that promotes holistic healing. Further research is needed to explore the cross-cultural applicability of these findings and the role of technology in music therapy.

**Keywords:** Music therapy, philosophical dimensions, emotional expression, cognitive restructuring, existential reflection.



#### 1. Introduction

usic therapy, as defined by Aigen (2008), involves the use of music to address physical, emotional, cognitive, and social needs of individuals (Aigen, 2008). The therapeutic potential of music is grounded in its capacity to evoke and regulate emotions, provide comfort, and enhance well-being (Fujianti, 2024; Kern & Tague, 2022; Vajari, 2024). Studies have shown that music can have profound effects on individuals undergoing medical treatment or experiencing psychological distress. For example, music therapy has been associated with decreased breathing problems and improved perceptions of spiritual support in cancer patients receiving hospice care (Burns et al., 2015). This therapeutic effect is particularly significant in end-oflife care, where music provides a medium for emotional expression and connection (Krout, 2003; Preissler et al., 2016).

The ability of music to evoke emotions has been widely studied, and its therapeutic applications are deeply rooted in its emotional power (Huang, 2023; Klyve et al., 2023; Rensya, 2023). Cochrane (2010) highlights the influence of cognitive sciences in understanding the emotional responses to music, arguing that music can evoke a wide range of emotions, from joy and excitement to sadness and tranquility. This emotional variability makes music a flexible tool in therapeutic settings, allowing therapists to tailor interventions to the specific needs of their clients (Cochrane, 2010).

The philosophical study of music offers valuable insights into its therapeutic role, particularly in terms of its ontology and expressiveness. Bartel (2017) discusses the ontology of musical works, examining how our intuitions about music shape our understanding of its emotional and therapeutic value. Music's ability to transcend mere sound and convey meaning is central to its therapeutic efficacy (Bartel, 2017). Similarly, Matravers (2007) explores the expressiveness of music, noting that music's ability to evoke emotional responses is not merely a byproduct of its structure but an inherent feature that enables its use in therapy (Matravers, 2007).

Philosophically, the use of music in therapy raises questions about the nature of art and its role in human well-being. Alperson (2009) argues that music exists not only as an aesthetic experience but also as a means of communication and expression, especially for marginalized voices. In the context of therapy, music serves as a medium through which individuals can articulate emotions that might

be difficult to express verbally (Alperson, 2009). This aligns with the views of Aigen (2013), who emphasizes the role of music therapy in giving voice to individuals' inner experiences and facilitating personal growth (Aigen, 2013).

In practice, music therapy has been applied to various populations, including individuals with developmental disabilities, psychopathology, and terminal illnesses. Curtis and Mercado (2004) describe the use of community music therapy for individuals with developmental disabilities, highlighting how music can foster social inclusion and enhance communication skills (Curtis, 2012; Curtis & Mercado, 2004). Similarly, Gold et al. (2004, 2007) demonstrate the effectiveness of music therapy in improving emotional and behavioral outcomes for children and adolescents with psychopathology (Gold et al., 2004; Gold et al., 2007).

In therapeutic settings, music serves as both a procedural support and a means of emotional regulation. Ghetti (2012) explores the use of music therapy during invasive medical procedures, suggesting that music can help alleviate anxiety and provide comfort during stressful experiences (Ghetti, 2012). This aligns with the findings of O'Callaghan et al. (2013), who note that music's relevance for adults living with life-threatening cancer diagnoses extends beyond mere distraction; it provides emotional and existential support, offering a "quiet still voice" that touches patients at a deeper level (O'Callaghan et al., 2013).

Music therapy operates at the intersection of art and psychology, offering a unique approach to healing that incorporates both creative expression and psychological insight. Bonde (2019) identifies five approaches to music as health promotion, emphasizing the multifaceted nature of music therapy and its ability to promote physical, emotional, and social well-being (Bonde, 2019). This holistic approach reflects the broader philosophical debate about the role of art in human life. As Konečni (2013) notes, the emotional and cognitive effects of music are closely tied to its aesthetic qualities, making it a powerful tool for therapeutic intervention (Konečni, 2013).

The integration of art and psychology in music therapy is also evident in the way music therapists approach their work. Moreno (2016) likens music therapists to contemporary shamans, using creative arts to facilitate healing and transformation (Moreno, 2016). This view aligns with the work of Ledger et al. (2013), who discuss the challenges and opportunities involved in introducing music therapy to interprofessional teams, emphasizing the need for collaboration between artists and healthcare professionals to



maximize the therapeutic potential of music (Ledger et al., 2013).

As the field of music therapy evolves, the role of technology has become increasingly important. Gooding and Springer (2020) highlight the growing interest in music therapy among music education majors, suggesting that technology has the potential to enhance the accessibility and effectiveness of music therapy interventions (Gooding & Springer, 2020). Similarly, Ragone et al. (2021) explore how technology can be applied to music therapy and sound-based activities, particularly in addressing motor and social skills in autistic children. The integration of technology into music therapy practices opens new avenues for research and application, offering the potential to reach a broader audience and address a wider range of therapeutic needs (Ragone et al., 2021).

Music therapy also plays a critical role in promoting social justice and addressing issues of inequality and marginalization. Curtis (2012) reflects on her personal journey in music therapy, noting that the field has the potential to challenge social norms and empower individuals who are often marginalized by society (Curtis, 2012). This view is supported by Haire and Oldfield (2009), who discuss the use of humor in music therapy as a means of engaging with children in psychiatric settings, helping to break down barriers and foster communication (Haire, 2020; Haire & MacDonald, 2019; Haire & Oldfield, 2009).

The use of music therapy in war-torn regions and areas affected by trauma further highlights its role in promoting social justice. Ng (2005) describes the application of music therapy in post-war Singapore, where music served as a tool for healing and reconciliation. By addressing both individual and collective trauma, music therapy offers a powerful means of promoting peace and social cohesion (Ng, 2005).

In summary, music therapy represents a unique and powerful approach to healing that bridges the gap between art and psychology. Through its ability to evoke emotions, facilitate communication, and promote well-being, music therapy has become an essential tool in both clinical and community settings. The philosophical dimensions of music therapy, particularly its role as both an art form and a therapeutic intervention, offer rich opportunities for further exploration. As the field continues to evolve, the integration technology, social justice perspectives, interdisciplinary collaboration will play a crucial role in shaping the future of music therapy. This study aims to explore the philosophical dimensions of music therapy,

focusing on how it bridges the gap between art and psychology.

#### 2. Methods and Materials

#### 2.1. Study Design and Participants

This study employs a qualitative research design, aiming to explore the philosophical dimensions of music therapy and its intersection between art and psychology. The study was conducted using a phenomenological approach to gain a deeper understanding of participants' lived experiences with music therapy. A total of 22 participants from Iran were purposefully selected for the study. The participants were a diverse group, including music therapists, psychologists, and individuals who have undergone music therapy sessions. Inclusion criteria required participants to have at least two years of professional experience or personal involvement in the field of music therapy.

The sample size was determined based on the concept of theoretical saturation, which was achieved after interviewing the 22 participants. This ensured that no new themes emerged from the data, indicating that sufficient depth of information had been obtained to answer the research questions.

#### 2.2. Data Collection

Data collection was conducted through semi-structured interviews, allowing for flexibility while focusing on key areas of interest related to the philosophical aspects of music therapy. Each interview was guided by an open-ended question framework that encouraged participants to elaborate on their experiences and insights. The interview questions were designed to explore how music therapy bridges the gap between art and psychology, focusing on participants' perceptions of its emotional, cognitive, and therapeutic impacts.

Interviews were conducted in-person and virtually, depending on participants' preferences and availability. Each interview lasted between 45 and 90 minutes and was recorded with the participants' consent. Data collection continued until theoretical saturation was reached, with no new significant themes emerging after the 22nd interview.

#### 2.3. Data analysis

The collected data were transcribed verbatim and analyzed using NVivo software, which facilitated the organization and coding of qualitative data. A thematic



analysis approach was employed to identify recurring patterns and key themes. The analysis process involved multiple stages: initial coding, identification of broader thematic categories, and the refinement of themes through constant comparison.

#### 3. Findings and Results

The study included 22 participants, all from Iran, who were purposefully selected based on their involvement in music therapy, either as therapists or individuals who had undergone music therapy sessions. Among the participants, 12 were female (54.5%) and 10 were male (45.5%), with

ages ranging from 28 to 55 years. The majority of participants (68%) were between 30 and 45 years old, and the mean age was 39.5 years (SD = 8.2). In terms of professional background, 14 participants (63.6%) were music therapists with at least 5 years of experience, while 8 participants (36.4%) had personal experience undergoing music therapy. Most participants (72%) held a master's degree or higher in fields related to psychology, music, or health sciences, and 6 participants (27.3%) had a bachelor's degree. This diverse range of experiences allowed for a comprehensive exploration of the philosophical dimensions of music therapy.

**Table 1**The Results of Thematic Analysis

Categories	Subcategories	Concepts (Open Codes)
1. Music Therapy as a Therapeutic Art	Emotional Expression	Catharsis, Emotional release, Deep connection with self
	Cognitive Engagement	Memory recall, Focus, Active listening
	Creativity and Self- Expression	Improvisation, Composing, Artistic freedom
	Cultural and Personal Identity	Representation of self, Cultural heritage, Personal history
	Aesthetic Experience	Beauty in sound, Harmony, Emotional resonance
2. Psychological Impacts of Music Therapy	Emotional Regulation	Anxiety reduction, Stress management, Emotional balance
	Cognitive Restructuring	Changing negative thought patterns, New perspectives, Self-awareness
	Behavioral Changes	Improved social interactions, Healthy coping mechanisms, Increase in daily productivity
	Therapeutic Alliance	Trust with therapist, Safety in therapy space, Collaborative healing
3. Philosophical Dimensions of Healing	Mind-Body Connection	Holistic approach, Embodiment through music, Connection to physical sensations
	Existential Reflections	Meaning-making, Life purpose, Mortality awareness
	Spiritual Insights	Transcendence, Connection to a higher power, Spiritual fulfillment
4. Bridging Art and Psychology	Integration of Art in Therapy	Artistic expression in treatment, Merging of therapeutic techniques, Multidisciplinary approaches
	Symbolic Interpretation of Music	Music as a metaphor, Symbolic meanings of lyrics, Music representing emotions
	Cross-Disciplinary Communication	Collaboration between musicians and therapists, Shared understanding between fields, Blurring boundaries between art and psychology
	Therapeutic Process as Art Form	Fluidity of therapy sessions, Unique and evolving process, Personalized therapeutic journeys
	Perception of Music's Dual Role	Music as both art and science, Cognitive and emotional pathways, Complex role of music in healing

# 1. Music Therapy as a Therapeutic Art

Emotional Expression: Music therapy plays a vital role in enabling emotional expression. Participants emphasized the release of emotions through music, describing it as "a way to get out what I couldn't say in words" (P1). Concepts like catharsis, emotional release, and deep connection with self were frequently mentioned. As one participant shared, "Music helps me dive into my feelings and express them without fear" (P5).

Cognitive Engagement: Participants noted that music therapy stimulates cognitive functions, particularly in memory recall and focused attention. One participant stated, "It's like the music pulls memories out that I didn't even know were there" (P12). Concepts such as memory recall, focus, and active listening emerged strongly in this subcategory.

Creativity and Self-Expression: Creativity is deeply embedded in music therapy, allowing participants to improvise and compose, leading to a sense of artistic





freedom. "When I play, I feel like I'm creating something new every time," one participant remarked (P8). The subcategory involved concepts such as improvisation, composing, and artistic freedom.

Cultural and Personal Identity: Music therapy also serves as a platform for expressing cultural and personal identity. Participants reported that music connects them to their heritage and personal history. As one interviewee noted, "The music I choose reflects who I am and where I come from" (P9). Concepts related to representation of self, cultural heritage, and personal history were highlighted in this subtheme.

Aesthetic Experience: The beauty and emotional resonance of music were cited as essential components of the therapeutic experience. "There's something about the harmony that just brings a sense of peace," said one participant (P3). This subcategory includes the concepts of beauty in sound, harmony, and emotional resonance.

#### 2. Psychological Impacts of Music Therapy

Emotional Regulation: Music therapy was identified as a powerful tool for managing emotions. Participants frequently spoke about how music helped them reduce anxiety and manage stress. "Listening to calming music just eases my anxiety and makes me feel balanced again" (P7). Emotional regulation through anxiety reduction, stress management, and emotional balance were recurring themes.

Cognitive Restructuring: Many participants noted the way music therapy helped them change negative thought patterns and gain new perspectives. One interviewee expressed, "When I hear certain songs, it's like a light bulb goes off in my head, and I see things differently" (P14). Concepts such as changing negative thought patterns, new perspectives, and self-awareness were central to this subtheme.

Behavioral Changes: Music therapy was also linked to positive behavioral changes, especially in social interactions and daily routines. "I found myself more open to interacting with others after sessions," one participant mentioned (P4). Concepts under this subcategory include improved social interactions, healthy coping mechanisms, and increased productivity.

Therapeutic Alliance: The relationship between the therapist and the patient, often referred to as the therapeutic alliance, was highlighted as an essential factor. "I trust my therapist more because music therapy feels so personal," said one participant (P11). Trust, safety, and collaboration were the key concepts identified here.

# 3. Philosophical Dimensions of Healing

Mind-Body Connection: Participants frequently discussed how music allowed them to connect their mind and body in a holistic manner. "It's like the music makes me feel my body in a way I normally don't" (P2). Concepts like holistic approach, embodiment through music, and connection to physical sensations were central to this subcategory.

Existential Reflections: Music therapy led participants to reflect on life's deeper questions, including the meaning of life and mortality. "Certain melodies bring up thoughts of my purpose and what I've done in my life" (P10). Themes such as meaning-making, life purpose, and mortality awareness emerged as important concepts.

Spiritual Insights: Music was frequently associated with spiritual experiences. Several participants described feeling connected to a higher power during sessions. "When the music plays, I feel something bigger than myself, almost like a divine presence" (P13). Concepts such as transcendence, connection to a higher power, and spiritual fulfillment were frequently mentioned.

#### 4. Bridging Art and Psychology

Integration of Art in Therapy: Participants noted the blending of artistic and therapeutic elements, with one saying, "It's more than just therapy; it's like creating art that heals" (P6). The merging of therapeutic techniques and artistic expression were key themes under this subcategory, with concepts such as artistic expression in treatment, multidisciplinary approaches, and therapeutic integration.

Symbolic Interpretation of Music: Music's metaphorical nature and symbolic meaning were frequently explored by participants. "The lyrics become symbols of my own emotions," one interviewee remarked (P15). Concepts included music as a metaphor, symbolic meanings of lyrics, and music representing emotions.

Cross-Disciplinary Communication: Participants emphasized the collaboration between art and psychological disciplines in music therapy. "It's a dialogue between art and psychology that enriches both" (P17). Concepts such as collaboration between musicians and therapists, shared understanding, and the blurring of boundaries were prominent in this subcategory.

Therapeutic Process as Art Form: Many participants saw the therapeutic journey as an evolving art form. "My therapy sessions are like an ongoing creative process," one participant stated (P19). Fluidity of therapy sessions, evolving processes, and personalized therapeutic journeys were the main concepts here.



Perception of Music's Dual Role: Finally, participants discussed the complex role of music as both an art and a science. "It's not just about emotions; music touches the mind and body in scientific ways, too" (P21). Concepts such as music as both art and science, cognitive and emotional pathways, and the dual role of music in healing were identified in this subtheme.

#### 4. Discussion and Conclusion

The present study explored the philosophical dimensions of music therapy, focusing on how it bridges the gap between art and psychology. Through thematic analysis of semi-structured interviews with 22 participants, several key themes emerged, including music therapy as a therapeutic art, its psychological impacts, the philosophical dimensions of healing, and the role of music in integrating artistic and psychological practices. This section discusses the significance of these findings and situates them within the broader context of existing literature.

One of the key findings of this study was the role of music therapy in fostering emotional expression, creativity, and personal identity. Participants frequently discussed how music provided an outlet for emotions that were difficult to articulate verbally, facilitating catharsis and emotional release. This finding aligns with Aigen's (2008) work, which highlights the unique capacity of music to express and process emotions that cannot be easily communicated through language (Aigen, 2008, 2013). Music's capacity to evoke deep emotional responses and its therapeutic power lies in its ability to transcend verbal limitations and engage individuals on a more profound level (Bartel, 2017; Fujianti, 2024; Huang, 2023; Kern & Tague, 2022; Klyve et al., 2023; Rensya, 2023; Vajari, 2024).

In addition to emotional expression, music therapy was found to stimulate cognitive engagement and promote self-expression through creativity. Participants noted that music allowed them to engage with their thoughts and memories in new ways, a concept echoed by Cochrane (2010), who explains that music stimulates both cognitive and emotional processes (Cochrane, 2010). This supports the idea that music therapy, as a form of art, has a dual role: it facilitates emotional processing while simultaneously engaging cognitive faculties. Music therapy's capacity to evoke memories, foster self-expression, and stimulate creativity mirrors the findings of Curtis and Mercado (2004), who found that music can enhance communication and social

skills among individuals with developmental disabilities (Curtis & Mercado, 2004).

The study revealed that music therapy significantly contributes to emotional regulation and cognitive restructuring, leading to positive behavioral changes. Participants reported reduced anxiety, improved emotional balance, and a greater capacity to cope with stress. These findings are consistent with Burns et al. (2015), who demonstrated that music therapy can reduce anxiety and improve patients' perception of spiritual support in hospice care (Burns et al., 2015). Additionally, the ability of music therapy to foster cognitive restructuring, as noted by participants, aligns with Ghetti (2012), who highlighted music's role in helping patients navigate emotionally difficult medical procedures (Ghetti, 2012).

Music therapy's impact on behavioral changes, particularly in social interactions and coping mechanisms, was another important finding. Many participants described how music therapy improved their daily functioning and social relationships. This is consistent with the work of Gold et al. (2007), who found that music therapy improved emotional and behavioral outcomes in children and adolescents with psychopathology (Gold et al., 2007). Music's ability to affect both emotional and behavioral domains highlights its therapeutic versatility, which can be tailored to individual needs.

The philosophical dimensions of healing, particularly the mind-body connection, existential reflections, and spiritual insights, were prominent themes in this study. Participants frequently discussed how music therapy helped them connect their physical sensations with their emotional and cognitive experiences, an idea that resonates with Moreno (2016), who likens music therapists to modern-day shamans guiding individuals through transformative experiences (Moreno, 2016). Music's role in facilitating existential reflections, such as life purpose and mortality, aligns with the findings of O'Callaghan et al. (2013), who found that music therapy helped cancer patients navigate existential crises (O'Callaghan et al., 2013).

Spiritual insights, such as transcendence and connection to a higher power, were also a significant part of participants' experiences with music therapy. This is supported by Aigen (2013), who explores the spiritual dimensions of music therapy and its ability to connect individuals with something greater than themselves (Aigen, 2013). Participants' descriptions of feeling spiritually fulfilled through music therapy echo the findings of Burns et al. (2015), who showed that music therapy can provide patients with a sense of



spiritual support, particularly in end-of-life care (Burns et al., 2015).

This study found that music therapy serves as a unique bridge between art and psychology, integrating artistic expression with psychological healing. Participants described music therapy as a fluid, evolving process that allows for creative self-expression while addressing psychological needs. This is consistent with Bonde (2019), who identified music as a form of health promotion that operates on multiple levels—physical, emotional, and social (Bonde, 2019). The integration of art and psychology is particularly evident in the symbolic interpretation of music, where participants used music as a metaphor for their emotions and life experiences. This aligns with the views of Alperson (2009), who emphasizes the role of music as a means of communication and self-expression (Alperson, 2009).

The cross-disciplinary nature of music therapy was another key finding, with participants describing how music therapy blurs the boundaries between art and psychology. This supports the findings of Ledger et al. (2013), who argue that music therapy requires collaboration between therapists, musicians, and other professionals to maximize its therapeutic potential (Ledger et al., 2013). Music therapy's ability to straddle both artistic and psychological domains makes it a unique and valuable therapeutic modality, offering clients a holistic approach to healing.

# 5. Limitations & Suggestions

While this study provides valuable insights into the philosophical dimensions of music therapy, several limitations should be acknowledged. First, the sample size was relatively small (22 participants), which may limit the generalizability of the findings. Although theoretical saturation was achieved, a larger and more diverse sample could provide a more comprehensive understanding of the themes explored in this study. Additionally, the participants were all from Iran, which may have influenced their perceptions of music therapy. Cultural factors play a significant role in shaping how individuals experience music, and further research is needed to explore how these findings translate across different cultural contexts.

Another limitation is the reliance on self-reported data. While semi-structured interviews allowed for in-depth exploration of participants' experiences, self-reported data are inherently subjective and may be influenced by social desirability bias. Participants may have provided responses

that they believed were more socially acceptable or aligned with the perceived goals of the study. Future research could benefit from incorporating additional data collection methods, such as observational studies or physiological measures of emotional and cognitive responses to music therapy, to complement the self-reported data.

Finally, this study focused exclusively on the philosophical dimensions of music therapy and did not explore other potential factors that may influence its effectiveness, such as the therapist's approach, the specific musical interventions used, or the duration and frequency of therapy sessions. These factors may significantly impact the therapeutic outcomes of music therapy, and future research should consider exploring these variables in more detail.

Future research should address the limitations identified in this study by expanding the sample size and exploring music therapy in diverse cultural settings. Given the influence of culture on music perception, it would be valuable to conduct cross-cultural studies to examine how individuals from different backgrounds experience music therapy. Additionally, longitudinal studies could provide insights into the long-term effects of music therapy, particularly in relation to its psychological and existential impacts.

Further research is also needed to explore the specific mechanisms through which music therapy facilitates cognitive restructuring, emotional regulation, and spiritual insights. While this study identified these processes as key themes, the underlying mechanisms remain unclear. Investigating the neurobiological and psychological processes involved in music therapy could enhance our understanding of how and why it is effective.

Finally, future research should explore the role of technology in music therapy. As Ragone et al. (2021) noted, technology offers new possibilities for music therapy, particularly in reaching populations that may not have access to traditional in-person sessions (Ragone et al., 2021). Studies examining the effectiveness of technology-mediated music therapy interventions, such as online sessions or apps, could provide valuable insights into how technology can be integrated into music therapy practice.

Music therapists and clinicians can draw several practical implications from the findings of this study. First, the importance of emotional expression in music therapy suggests that therapists should focus on creating a safe and supportive environment where clients feel comfortable expressing their emotions through music. Therapists should



encourage clients to explore their emotional responses to music and use it as a tool for emotional regulation.

Additionally, given the strong connection between music therapy and cognitive restructuring, therapists may want to incorporate cognitive techniques into their music therapy sessions. For example, therapists could use music to help clients reframe negative thoughts or develop new perspectives on their challenges.

Finally, the spiritual and existential dimensions of music therapy highlight the need for therapists to be attuned to the deeper, often non-verbal, aspects of their clients' experiences. Therapists should be open to exploring existential themes, such as life purpose and mortality, and use music as a way to facilitate these reflections. Music therapy offers a unique space for clients to engage with profound questions, and therapists should be prepared to support this process.

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#### **Declaration of Interest**

The authors of this article declared no conflict of interest.

## **Ethical Considerations**

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

# Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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#### **Authors' Contributions**

All authors equally contributed in this article.

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