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The PERMA-based group music therapy: An intervention protocol for enhancing well-being in adults

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Abstract

In recent years, mental health promotion has increasingly focused not only on treating illness but also on fostering well-being at both individual and community levels. However, a theoretical framework is lacking to guide protocol development. The PERMA model, proposed by Seligman, conceptualizes well-being through five core elements: Positive Emotion, Engagement, Relationships, Meaning, and Accomplishment. The purpose of this paper is to present a detailed group music therapy intervention protocol based on the PERMA model. We offer a protocol for an eight-session group music therapy intervention designed around the PERMA principles, incorporating music listening, movement, and improvisation to support participants' well-being. The program begins with an introductory session to establish group connections, followed by six sessions dedicated to exploring the PERMA elements through music-based experiences, and concludes with a final session to reflect and consolidate progress. By offering a structured yet adaptable framework, this music intervention serves as both a proactive approach to mental health and a practical resource for music therapists. The protocol described here was implemented as part of doctoral research and may also serve as a structured framework for future trials.

Keywords: PERMA model; Music therapy; Well-being; Mental health; Music listening.

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Introduction

Promoting well-being among healthy adults has become increasingly important in recent years. The World Health Organization defines mental health not merely as the absence of illness, but as “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community...” [1] More specifically, mental health promotion not only focuses on illness but also on positive mental health in individuals and communities, which encompasses more than the absence of negative or ill-health states and is commonly defined as the presence of positive feelings and functioning [2;3].

Accumulating evidence shows that positive psychological well-being (e.g., optimism, life satisfaction) is associated with a reduced risk of cardiovascular disease and

healthier behaviors [4], as well as positive subjective health and well-being outcomes [5]. It has also been associated with a lower risk of developing depression [6] and improved prognosis in physical illness [7]. Moreover, promoting well-being can alleviate symptoms of depression and anxiety [8;9], improve overall mental health, reduce the frequency of negative emotions, behaviors, and thoughts, and lead to positive outcomes in work, relationships, and health [10].

The PERMA model, proposed by Seligman, offers a comprehensive framework for understanding and promoting well-being [11]. This model identifies five key elements that contribute to flourishing: Positive emotions, Engagement, Relationships, Meaning, and Accomplishment [11]. Each element is independently defined and measurable, providing a structured approach to fostering well-being and helping individuals reach their full potential [11].

Music therapy has been shown to enhance physical and psychological well-being while fostering social connections. It may also provide spiritual benefits, help individuals cope with challenges, and promote a sense of meaning, quality of life, and overall well-being across different clinical and non-clinical populations [12;13]. Research has demonstrated its positive impact on well-being in people with dementia [14;15], in hemodialysis patients [16], in bank workers [17],

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in COVID-19 patient care staff [18], in cancer patients [19;20;21], and in terminally ill patients [22;23;24].

Despite these encouraging findings, research on music therapy interventions for well-being lacks a unified theoretical framework. This absence makes it challenging to systematically develop, implement, and evaluate music therapy interventions aimed at enhancing well-being. Croom has shown that music practice and participation can positively influence all five PERMA elements [25]. Although emerging studies have begun to explore PERMA-informed approaches in music and related interventions, systematic group music therapy protocols explicitly grounded in the PERMA model remain scarce.

A theoretical framework that bridges the intuitive appeal of music therapy with the rigorous evidence-based practices demanded in healthcare settings is needed. Such a framework could provide a common language for researchers, practitioners, and policymakers, potentially accelerating the adoption of music therapy as a mainstream well-being intervention.

The purpose of this paper is to present a detailed group music therapy intervention protocol based on the PERMA model. This work specifically addresses the broader health and well-being context in China, where researchers have shown increasing interest in developing PERMA-based interventions for healthcare settings [26-29]. By integrating the principles of positive psychology with the therapeutic potential of music, this innovative approach aims to enhance well-being in healthy adults and possibly serve as a preventive measure against psychological issues. This protocol seeks to bridge the gap between theoretical frameworks of well-being and practical applications in music therapy, offering a structured method for promoting positive mental health through musical engagement.

PERMA Theory and Interventions

In 2011, Seligman created the PERMA model arguing that the goal of positive psychology in well-being theory is to increase the amount of flourishing in a person: well-being should exceed the hedonic and be more than just fleeting emotions [11]. The PERMA model of well-being theory focuses on the multi-dimensional nature of humans, encompassing positive emotion, engagement, relationships, meaning, and accomplishment [11]. The PERMA model reconciles hedonic and eudaimonic well-being and offers the different practical dimensions of well-being which have been applied to interventions for different populations or needs.

The PERMA model has been used as a lens to examine well-being in several non-clinical populations. For example, Neumeier et al. applied a new PERMA-based program to increase employee well-being in a randomized controlled

trial [30]. Results showed that participants in the gratitude and PERMA-based programs experienced significantly higher well-being than the waitlist control group. Previous studies have explored the psychosocial benefits of cooking and proposed the PERMA model as a theoretical framework for understanding related psychosocial outcomes [31]. Evidence from large-scale online studies suggests that PERMA-based interventions can improve happiness and alleviate depressive symptoms among adults [32]. In China, recent studies suggest that PERMA-based interventions can improve well-being with clinical populations in various medical contexts, including cancer and stroke patients [28;29].

Research findings suggest the positive benefits of PERMA-based interventions in increasing feelings of happiness, reducing depressive symptoms, and promoting mental health. Overall, the PERMA model has proven effective in enhancing well-being across diverse populations, from patients with medical conditions to students and employees [28;30;33].

Music, Music Therapy & PERMA Elements

The potential of musical experiences to contribute positively to a flourishing life has gained increasing attention, particularly through the lens of the PERMA model of well-being. While empirical research explicitly connecting music interventions to the PERMA framework remains limited, emerging studies suggest a promising relationship between music and psychological well-being.

Music interventions have demonstrated significant potential in addressing PERMA elements, facilitating emotion regulation [34;35], inducing flow states and enhancing engagement [36;37]. Musical activities foster social connections and group identity [38;39], while helping individuals find meaning through spiritual amplification and life reflection [40;41]. Additionally, musical participation creates opportunities for accomplishment [42], with various experiences such as singing, drumming, performance, and songwriting contributing to a sense of achievement [43-46].

In addition to therapy for individual clients, music therapy is also provided to groups, such as couples, families, groups, and communities [47]. Group music therapy offers a very different therapeutic encounter compared to other group treatments. “Music therapy is distinct from other modalities because of its reliance on music experience as an agent, medium, and outcome for change” [47(p40)]. In a group context, music therapy is effective in both the intrapersonal and interpersonal domains, giving participants opportunities to enhance social skills like contact, social cognition, communication, cooperation, coordination, and social cohesiveness [48].

In light of the seeming promise of PERMA-based music therapy, guidance is warranted for specific interventions and methods to promote positive emotions, engagement, relationships, meaning, and feelings of accomplishment. A comprehensive intervention protocol for short-term supportive group music psychotherapy is presented, grounded in the PERMA model of positive psychology.

PERMA-Based Group Music Therapy Intervention (PERMA-GMT)

The protocol was developed and implemented within a doctoral research study and is designed to enhance well-being and facilitate personal growth through structured musical experiences [49]. Its development was informed by extensive teaching and clinical experience with college students in China, where group-based, resource-oriented approaches appeared particularly relevant for supporting well-being. This protocol aims to stimulate and support positive resources for healthy people rather than long-term insight-oriented treatment approaches designed for more complex clinical needs. It addresses key elements of group therapy, including therapist role, environmental factors, group composition, and session structure following the reporting guidelines for music interventions proposed by Robb et al. [50]. Progressing from establishing group cohesion to exploring positive emotions, engagement, relationships, meaning, and accomplishment, this framework offers a structured yet adaptable approach to group music therapy. By integrating evidence-based practices with innovative techniques, this protocol aims to create a nurturing environment for individual and collective growth, contributing to the fields of music therapy and positive psychology.

Preparation for the Intervention

Music Therapist. In conducting group psychotherapy for adults, therapists encounter challenges such as managing the heterogeneity of group members, emotional fluctuations, and social interaction barriers. Yalom and Leszcz emphasized the importance of the therapist's attitude towards the client, highlighting the need for concern, genuineness, empathy, and emotional engagement above all technical considerations [51]. For music therapists, facilitating group therapy requires not only presence, common sense, and the ability to create a therapeutic musical environment that fosters self-growth [52] but also specialized training in music psychotherapy approaches.

Interventionists implementing this protocol should have completed a recognized music therapy training program and hold relevant certification or credentials (e.g., MT-BC in the U.S.). Additionally, given that this intervention is based on music psychotherapy principles, therapists should have advanced training in music psychotherapy methods, such as

The Bonny Method of Guided Imagery and Music (BMGIM), Vocal Psychotherapy, or other specialized approaches. Familiarity with psychological theories and techniques relevant to group psychotherapy is essential.

Beyond general music therapy competencies, therapists leading this PERMA-based group intervention should have foundational training in positive psychology principles and a deep understanding of the PERMA model elements (Positive Emotion, Engagement, Relationships, Meaning, and Accomplishment). Given that the intervention incorporates movement, therapists should also have experience facilitating movement-based interventions and feel comfortable and aware in their own bodies, enabling them to facilitate participants safely and effectively through movement experiences.

Furthermore, unlike individual therapy, where the focus is on a one-on-one therapeutic relationship, group therapy requires navigating complex interpersonal relationships, managing group processes, and balancing individual and collective therapeutic goals. Continuous professional development in both music therapy advanced skills and psychotherapy approaches is essential for maintaining therapeutic effectiveness and ensuring the highest quality of care for group members.

Each session will be led by one trained music therapist who needs to communicate concern, genuineness, and emotional engagement while fostering both individual expression and group cohesion. In facilitating these sessions, therapists should remain culturally sensitive, adapt to individual differences, and uphold privacy considerations.

Setting and Equipment Setup. The selection and arrangement of the venue are crucial when implementing group music therapy. An ideal setting for group music therapy should ensure privacy, safety, and comfort, allowing participants to express themselves freely. The venue should have adequate space, excellent sound insulation to maintain confidentiality and prevent external noise intrusion. Adjustable lighting, comfortable temperature and ventilation conditions, as well as safe, non-slip flooring, contribute to a secure and welcoming environment. Thoughtful arrangement—such as simple, warm decor and appropriate seating—supports emotional regulation, encourages social interaction, and fosters exploration of musical instruments and free movement. A well-designed setting ultimately enhances the therapy's effectiveness [53].

In this protocol, a variety of musical instruments are primarily utilized during improvisational experiences to enrich the musical experience and encourage participants' creativity and expression. Percussion instruments should be selected that allow participants to explore diverse rhythms and textures, such as 12-inch Bahia Bass drums, 10-inch Djembe drums, and Fruit Shakers. Additional instruments should be carefully selected for their accessibility and

versatility, enabling participants of all musical backgrounds to engage actively and collaboratively in the improvisation process. For example, a selection of wooden percussion instruments and triangles can add layers of sound and variety.

Equally important is the strategic placement of instruments and equipment, which significantly influences engagement and safety. Musical instruments are arranged by the therapist in the center of a circle to ensure easy access for all participants. When certain experiences do not require instruments, they are kept out of sight to minimize distractions. Audio equipment should be positioned for even sound distribution, with power cords properly secured to prevent safety hazards.

Recommended Number of Participants. Yalom and Leszcz advised that nine or ten members is a good size for a cohesive interactional group [51]. Considering the participant attrition rate, group functions, and effective interaction with each member, each PERMA music therapy group might be formed by 12 people for a group with one therapist.

Duration and Frequency of Sessions. Music therapy interventions described in the literature vary widely in duration and frequency because of differences in populations and therapeutic goals. This intervention protocol aims to stimulate and support positive resources through short-term supportive music psychotherapy, with a focus on well-being enhancement rather than long-term, insight-oriented treatment approaches. Combined with these considerations, weekly PERMA music therapy groups are recommended over an eight-week period.

In considering effective practices for group psychotherapy, Yalom and Leszcz noted that the therapist’s effectiveness is optimized within an 80 to 90-minute session, which allows for both the warm-up phase and the exploration of the session’s main themes [51]. To provide participants with ample time to fully experience and express their feelings in music therapy, it is recommended that each session should last up to 90 minutes.

Table 1. Protocol Content of Eight PERMA-Based Group Music Therapy (PERMA-GMT) Sessions

| Session | Strategy | Experiences | PERMA Dimensions and Therapeutic Aims | Time |
|--------------|---------------------|---|---|--------|
| Session 1 | Introduction | Completion of pre-program measures Sign the group commitment Draw member’s name tag Music game | Introduction of the PERMA-GMT Familiar with each other | 90 min |
| Sessions 2-7 | Music Gift | Sharing music | Relationships Meaning | 20 min |
| | Musical Movement | with Warm up Music Listening Movement Discussion | Engagement Positive Emotion Relationships | 35 min |
| | Collective Creation | Vocal, singing or playing instrument | Engagement Relationships Accomplishment | 25 min |
| | Postlude | Reflect on the experience through verbal discussion or other ways | Relationships Meaning | 10 min |
| Session 8 | Closure | Summarize Post-program measure | Bring the program to a closure | 90 min |

Note: The suggested time allocations for each section serve as a general guideline. Therapists are encouraged to adjust the timing flexibly based on the group’s needs and dynamics.

Intervention Content

The protocol includes eight sessions: an introductory session to establish group connections, six sessions with experiences targeting positive emotions, engagement, relationships, meaning, and accomplishment, and a final session to summarize and provide a platform for farewell emotions (see Table 1). By integrating these elements, the design

systematically promotes participants’ well-being and overall health based on the PERMA model of positive psychology. It aims to maximize therapeutic effectiveness, to enhance participant engagement, and to provide a supportive environment for mutual growth and well-being. Each session includes either live music, created by the therapist and group participants, or recorded music, depending on

the session's structure and goals. At the end of each session, the therapist sings the same closing song to provide a sense of continuity and emotional closure for the group.

Session One. This is an introductory session. This session includes the following contents: introducing the goals of the program and group members; completing the pre-program measures; discussing the group commitment; introducing the “Music Gift” experience; facilitating a music dance for the purpose of encouraging familiarization between group members, and a closing song.

The introductory phase establishes trust and safety by setting group goals, initial connections, and clear norms (such as respect, openness, punctuality, and confidentiality), which lays a foundation for smooth progression and helps members build a sense of safety and understanding of expectations [54]. This phase is a critical stage in the therapeutic process, providing foundational principles and guidelines for the group's function [51] and equipping members with the necessary information and support for better integration into the therapeutic process [55].

Given the importance of creating an effective group culture, the therapist needs to discuss expectations for group commitment with members during the first session, helping them establish norms such as respecting differences, maintaining authenticity, being punctual, attending regularly, and adhering to confidentiality principles. These norms not only ensured safety for members but also contributed to the smooth running of subsequent sessions [51].

Music Intervention Strategies in Session 1: The experience called “Music Gift” aims to encourage interaction among members and promote meaning by sharing music with others as a gift. The music will be chosen by the participants, and all selections will be pre-recorded.

In the first session, the therapist asks members to take out a name tag from a box that contains all group members' names. Each person plays both the role of “Music Sharer” and the role of “Music Receiver” in this group. As a “Music Sharer”, he or she is asked to anonymously send at least one piece of their own favorite music to the “Music Receiver” (the name taken out from the box) in the following sessions. “One-to-one” sharing ensures that everyone can receive music. During the “Music Gift” activity, group members can share music with others besides their assigned recipient while remaining anonymous. The purpose of anonymity is to prevent participants from forming sub-groups thereby enhancing group cohesion. Therefore, the recipient does not know who sent them the music until the final session, when all identities are revealed. There is no fixed requirement for the number of pieces participants must send to their assigned recipient, but they are asked to send at least one piece during the entire process.

Given that this is the first session and participants may still feel unfamiliar with each other, engaging in movement and shared musical experiences can help group members become more familiar with one another and foster a sense of safety and connection. At the end of this session, the therapist will facilitate a social dance experience. The therapist preselects the music for the dance and will play the recorded music through a speaker, which will be placed on one side of the room to ensure clear sound without obstructing the movement space. The music will be played at approximately 70 decibels, providing an engaging but not overwhelming auditory experience. Through this interactive experience, members will have the opportunity to engage in lighthearted movement, reduce initial awkwardness, and establish a foundation for trust and group cohesion.

Sessions Two - Seven (see Table 1). The following six sessions feature three music therapy experiences—*Music Gift*, *Musical Movement*, and *Collective Creation*—designed to target elements of the PERMA model, such as positive emotions, engagement, relationships, meaning, and accomplishment. These experiences aim to stimulate participants' emotional experiences, creativity, and group cohesion, using music as a medium to promote growth and development on both individual and group levels.

Music Gift. This experience involves music listening and aims to address the PERMA concepts of ‘Meaning’ and ‘Relationships’. Before the session starts, the Music Sharer sends a piece of published music and a message to the music therapist to explain why he/she chose the song to share with the designated person (Receiver) in the group. The therapist tells the group who the Receiver was, but does not disclose the name of the Music Sharer. Then, the therapist plays the Music Sharer's pre-recorded music with a speaker, and asks the Receiver how he (she) is feeling after listening to the music. In each session, one or two people take the role of Music Sharers, spontaneously and anonymously shared their favorite music with the designated person in the group.

Musical Movement. This experience involves movement to music using pre-recorded music selected by the therapist and aims to address the PERMA concepts of ‘Positive Emotion’, ‘Engagement’ and ‘Relationships’.

Warm up. Participants are asked to take a deep breath and feel their emotions and body responses in the moment, which helps them be present and prepares them to engage in music at physical and emotional levels. The therapist facilitates the participants in moving from head to foot, to warm up their whole bodies with music, as paying attention to and identifying physical and emotional responses can help regulate emotions and increase emotional elasticity [56]. During this process, the therapist plays preselected energetic and rhythmic dance music through a speaker to accompany the movement.

Music Listening. In this process, the therapist selects pre-recorded music based on evidence that positive emotions are associated with a fast tempo (over 120 beats per minute) and a major mode [57;58;59]. These musical qualities are expected to elicit uplifting emotions, enhance focus, and promote active participation—factors contributing to the intervention’s overarching goal of improving well-being. To ensure relevance and engagement, the selection aligns with participants’ age and aesthetic preferences, regardless of the country of origin, provided it does not conflict with cultural sensitivities. To further enhance engagement, it is recommended to ask participants about their music preferences at the start of the program. The selected music is played through a speaker to ensure clear, consistent sound quality during the sessions.

As part of a “Tune In” procedure, participants are encouraged to notice the characteristics of the music, along with their physical responses, imagery, or emotions while listening. This reflective process aims to heighten self-awareness and deepen emotional processing. Following the listening experience, participants briefly share how the music affected them, including any emotions, physical responses, or imagery that emerged.

Movement. In this experience, the therapist plays the same pre-recorded, bright, and upbeat music used in the Music Listening section. The therapist plays the music again through a speaker, creating an environment that invites participants to move freely and respond to the music’s energy. At the beginning, the therapist offers verbal guidance and physical modeling to encourage participants to move. Moving with the music aims to deepen participants’ emotional responses. This process not only helps individuals to bring music into their inner worlds, but also to enhance positive emotions, and experience its flow. The therapist helps members engage with the music and supports them in strengthening and expanding their awareness of their whole bodies. Following this, the therapist invites members to interact with each other through experiences such as mirroring movements and sensing each other’s energy. By facilitating these interactions, the therapist aims to strengthen the connection between group members and foster awareness of the relationships between the self, others, and the music.

Collective Creation. This experience aims to address the PERMA concepts of Accomplishment, Relationships and Engagement. Music creation provides a space for collaborative creativity, facilitating interaction and mutual development among participants [42;60]. In this experience, the therapist uses live music improvisation, such as vocal sounds, singing and playing instruments to stimulate the group’s creativity, playfulness, and cooperation, thereby fostering a sense of accomplishment and strengthening interpersonal relationships while enhancing engagement.

For example, the therapist typically begins by demonstrating a simple vocal improvisation, starting with a basic sound. Participants are then invited to join, using their voices freely without overthinking to express whatever arises naturally from their hearts in the moment. As participants become more comfortable expressing their sounds, the therapist gradually fades out his or her voice, allowing the group to take the lead and encouraging fuller self-expression and active contribution.

When introducing a new improvisational approach, the therapist first provides a demonstration to guide participants, encouraging them to listen to and support each other through music. As participants express themselves more freely, the therapist invites the group to collectively create a final piece as a closing experience. Participants are further encouraged to improvise flexibly using various modes—vocal sounds, singing, or playing instruments—once they become familiar with each approach. Throughout the process, the therapist respects participants’ choices, and supports the group in completing the musical creation together.

Postlude. This experience aims to address the PERMA concepts of Meaning and Relationships. The purpose of the postlude is to reflect verbally on the music experience to find meaning and foster connections. The therapist facilitates a group discussion to help participants consolidate their experiences and insights. To close the session, the therapist uses a six-string acoustic guitar with steel strings to accompany and guide the participants in singing the same goodbye song each week. Using a consistent closing song provides a sense of continuity and emotional closure for the group.

Session Eight. It is the last and closing session of the treatment protocol. In this PERMA program, the final session summarizes the therapy process, reviews experiences, and provides a platform for expressing farewell emotions. This not only provides emotional closure for participants but also offers data support for evaluating the intervention’s effectiveness. In this session, the therapist summarizes the overall experience and reveals the identity of each Music Sharer, as participants are unaware of who shared the music throughout the process. Participants also have the opportunity to express their feelings about the conclusion of the group. For evaluating the effects of the group, participants may be asked to complete the same measures as in the first session.

Discussion and Conclusion

Extensive research with several clinical and non-clinical populations shows that music therapy can significantly boost participants’ positive emotions, increase engagement,

improve relationships, provide a sense of purpose, and enhance personal achievement. These benefits align closely with the core elements of the PERMA model. As described earlier, this PERMA-based group music therapy intervention was implemented as part of the authors' doctoral research to examine its effectiveness in promoting mental health and well-being in healthy adults.[49] Both the structure of each week's session and the overall structure of the course of therapy require careful planning beforehand.

One of the key intervention strategies, Music Gift, aims to foster social interaction and meaning by encouraging participants to share music with others as a symbolic gift. Sharing favorite music with peers can be a powerful tool for social interaction [61;62]. Positive psychology also emphasizes the importance of altruism in relationships [63]. Seligman states that meaning is “belonging to and serving something that you believe is bigger than the self” (p.17) [11]. Similarly, Yalom and Leszcz have proposed that altruism is one of the primary therapeutic factors of group therapy [51]. Thus, selecting and sending one's favorite music to another may improve the meaning for the sharer and enhance the sense of belonging to the group for the receiver.

The selection of music in the PERMA group music therapy protocol needs careful consideration. Research shows that lively, rhythmic music can improve attention, evokes positive emotions, and enhance engagement in musical experiences [64;65]. A fast tempo (over 120 BPM) and a major mode are associated with positive emotions [57-59]. These findings support the intervention's goal of enhancing participants' well-being through increased positive emotions and sustained involvement in group activities. Based on this, when using this intervention, it is recommended that the interventionist selects music to uplift emotions, enhance focus, and encourage active participation—key elements in fostering well-being.

Integrating movement with music strengthens the connection between emotions, the body, and physical expression. Adopting different postures can influence positive energy levels [66], while movements such as jumping, spreading one's arms, or adopting light, upward postures can elicit positive emotions, promote physical and mental health [67-70], and guide individuals into new states of being [71]. Musical parameters also significantly affect movement imagery and can enhance movement duration, speed, and range of motion [72;73]. By combining movement and music, participants actively engage in the musical experience, positive emotions can be evoked quickly, and participants can strengthen their social connections. These elements align with the program's goal of promoting well-being through Engagement, Positive Emotion, and Relationships.

Closure in music therapy is an essential aspect that ensures the therapeutic process is complete and that aims to leave clients in the session feeling settled and positive. Proper closure is not just about ending the session but also about providing a sense of completion and reflection for the client. Clients generally tend to respond in some way to the end of therapy, irrespective of how the therapist handles or views the termination process [74]. By incorporating structured closure techniques, such as a consistent closing song or reflection activities, this intervention ensures a smooth transition at the end of each session.

The PERMA group music therapy intervention presented here attempts to incorporate the five key elements of the PERMA model into the music therapy practice. Through experiences like music sharing, movement, listening, and collective creation, the program may address the different aspects of participants' well-being. These experiences may not only improve emotional expression and interaction but also promise to foster creativity and a sense of belonging, leading to a well-rounded boost in mental health and well-being.

Promoting well-being among healthy adults may help to aid with managing life stressors through bringing individual realization of one's strengths and ability to contribute to the community. The PERMA-based group music therapy protocol presented here aims to address the key elements that contribute to flourishing. While this protocol was implemented as part of doctoral research, further studies are warranted to examine its applicability and effectiveness across broader populations and settings. Overall, this article offers a theoretical and empirical foundation for group music therapy protocol, emphasizing its multifaceted role in enhancing mental health in healthy populations.

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