

Creative Music Therapy and Dementia Care in an Acute Care Setting

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Description

People with dementia (PWD) cope with cognitive, psychological, emotional, social deficits. PWD are usually cocooned beneath layers of confusion and other manifestations of the pathology. In addition to their failing abilities to comprehend the events that unfold around them, they might find it difficult to communicate their needs and emotions. Thus, PWD may exhibit behaviour that might be challenging to manage, especially for those who are in an acute-care setting.

The hospital ward can be unfamiliar and stressful for older patients with impaired cognition, rendering them prone to agitation and resistive to care. Disruptive behaviours can arise due to sensory deprivation and lack of meaningful engagement. Music therapy has been used to improve engagement and decrease agitated behaviours in people with dementia mostly in long-term care settings. As such, it may hold promise as a non-pharmacological intervention for PWD in acute care settings.

This paper discusses, both quantitatively and qualitatively, the impacts of Music Therapy with PWD in an acute-care setting within an Asian context. The work takes place in a ward where the team focusses on person-centered care for PWD. The patients are of various levels of cognitive decline and come from different ethnic backgrounds. Music Therapy is carried out 5 mornings a week, in both individual and small-group setting, depending on the needs of the patients.

The main music therapy approach used is Nordoff-Robbins Creative Music Therapy(NRCMT) which functions on the premise that every individual is capable of responding to music, regardless of pathology. Musical interventions used include: (i) clinical improvisation (ii) receptive music interventions (iii) singing and playing of instruments to both set and improvised pieces.

The paper evaluates the impact of NRCMT on mood and engagement in PWD in an acute care setting, as well as highlights other benefits not easily quantifiable in numbers.