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Music Therapy
with Shari

Pilot: Group Music Therapy in a Dementia Day Service

Presented at the Music Therapy Symposium August 2019



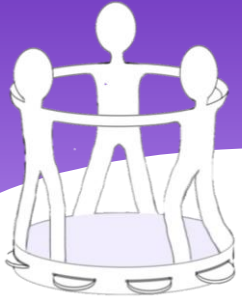
*With special thanks to
Heather Whineray and
The Selwyn Foundation*

Shari Storie (née Ludlam)
NZ Registered Music Therapist
MMusTher(Hons) BSc. BMus.



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Pilot Programme Rationale



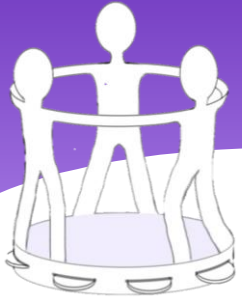
To provide engagement in life through meaningful activity within group music therapy as part of the dementia day programme.





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Pilot Programme Rationale



The benefits of music therapy, provided by a RMTh:

- * Developing communication
- * Encouraging social interaction
- * Supporting emotional wellbeing
- * Assisting memory, imagination and processing thought
- * Enhancing cultural and spiritual identity

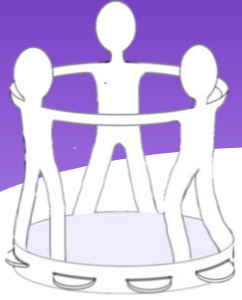
align with the five dimensions of the Selwyn Way:

spirituality, growth, contentment, belonging and resilience



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Music Therapy Approach

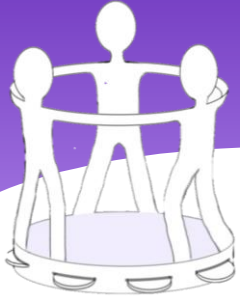


Clinical Orientation

- * Client-centred, strengths-based, goal-orientated
- * Holistic approach, drawing on:
 - * Kitwood's Personhood Theory
 - * Psycho-social-emotional model
 - * Behavioural, psychodynamic theories
 - * Community music therapy model

Recognition, Negotiation, Co-creativity, Facilitation

Pilot Programme Outline



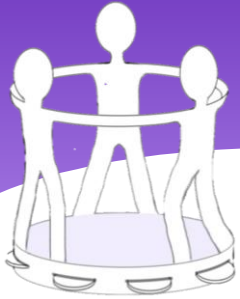
- * Large-group: up to 22 people (range 18 – 27)
- * Mild – moderate dementia, living at home/equivalent
- * Weekly - same time, same place
- * Final session open to family and loved ones to join
- * Trial incorporation of Selwyn’s ‘Soundbeam’
- * Two staff involved, two external Selwyn visitors
- * Staff education-induction
- * Family information letter





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Education-Induction Session



1. Experiential ice-breaker
2. musictherapy.org.nz/music-therapy-is/
3. Music Therapy Is
 - * Aims for your clients
 - * Things we might do in sessions
 - * What to expect, how it's different
 - * How you can support your clients' best experiences
3. Logistics, communications, referrals
4. Later: staff training of Soundbeam



Music Therapy is...

Music Therapy is the planned use of music to assist with the healing and personal growth of people with identified emotional, intellectual, physical or social needs.

What NZ Registered Music Therapists do
Music Therapists use the special qualities of music in a shared relationship with their clients, to meet personal needs, support learning, and promote healing and change.

They work with people of all ages and abilities, with individuals and groups, and in many different settings.

Music Therapists use the special qualities of music in a shared relationship with their clients.

Who can benefit

Music Therapy is effective with people of all ages and abilities, from newborn babies, through childhood and adolescence, to adulthood and the end of life.

People who are under stress, have intellectual, physical or emotional needs, live with dementia, are suffering the consequences of trauma, separation or abuse, or who have a terminal illness can all benefit from Music Therapy.





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Group Music Therapy Goals

Facilitating and providing a safe, supported environment

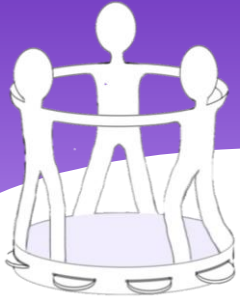
- * Relationships
 - * Experiencing positive, meaningful relationships and interactions
 - * Breaking isolation, creating a sense of belonging and togetherness.
- * Emotional Wellbeing and Communication
 - * Promoting fun and addressing BPSD
 - * Communication and self-expression
 - * Quality of life
- * Reminiscence and Identity
 - * Memory, cognition
 - * Physical activity
 - * Vocalisation and singing
 - * Self-identity (history, cultural and spiritual)





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Outcomes and observations



Relationships

Emotional Wellbeing and Communication

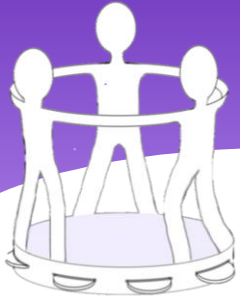
Reminiscence and Identity





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Outcomes and observations



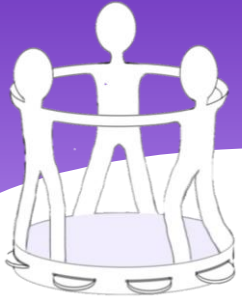
- * Enhancing quality of life and well-being through the planned use of music as a therapeutic tool





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Outcomes and observations



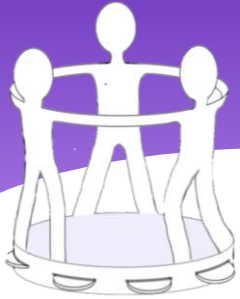
- * Facilitating person-centred, positive experiences that build connections and realise the potential in people and bring meaning to daily life





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Outcomes and observations

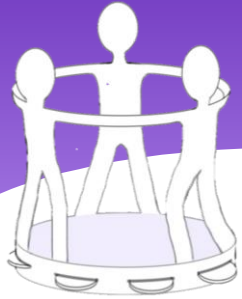


- * Increasing interaction, socialisation and community interconnectedness through live music making and the sharing of stories





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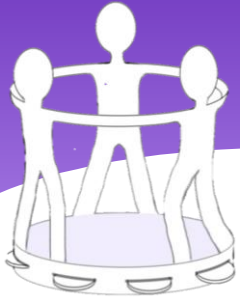


Outcomes and observations

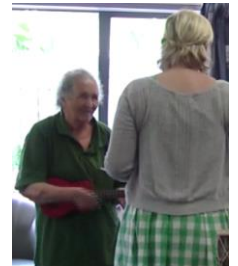
- * Providing a holistic non-verbal approach which meets the needs of older adults who are living with neurological conditions and/or different stages of dementia

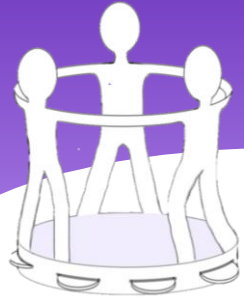


Individual Observations



- * Engaging in their own ways
 - * Watching and listening
 - * Gradually open to participating
 - * Unexpectedly engaging in creative improv, leading to highly interactive exchanges
 - * Enthusiastically suggesting favourite ‘identity songs’
 - * Encouraging others
 - * Readily reminiscing, leading to group discussion, leading to more musical experiences

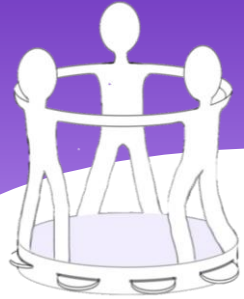




Session Structure

- * Book-ended: Greeting and farewell songs, their choice
- * During, a client-centred, responsive and flexible approach
 - * Instruments available and accessible, space
 - * Opened up for client's suggestions
 - * Offering options for choice when needed
- * Example of session evolution





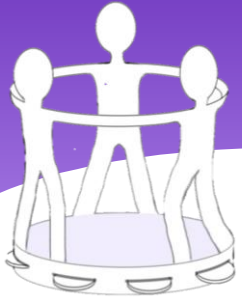
Session Experiences

- * Musical improvisations with selected instruments
 - * Creativity and co-creativity
 - * Freedom to explore
 - * Group celebrations
- * Singing
- * Interactive music-making activities
- * Verbal reflections, discussions and reminiscence





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Other comments

- * Staff engagement
- * Individual sessions
- * Soundbeam





Music in Dementia Assessment Scales (MiDAS)

- * Aims to assess if there have been changes in the wellbeing of a person with dementia participating in Music Therapy
- * Developed and psychometrically validated in 2013.
- * Here, measurement of MiDAS scores was adapted
 - * from McDermott, O., Orrell, M., and Ridder, H. (2018) MiDAS - Music Therapist. Retrieved from <https://www.musictherapy.aau.dk/midas/midas-forms/>
 - * 5-point Likert scale ranging 0 – 4, as opposed to a Visual Analogue Scale ranging “None at all” to “Highest”
 - * *Acknowledgement of previous work that led to my private practise template, with thanks to Helen Dowthwaite and Music Moves Me Trust; and Auckland District Health Board*



Adapted Referral, MiDAS Progress and Review Template

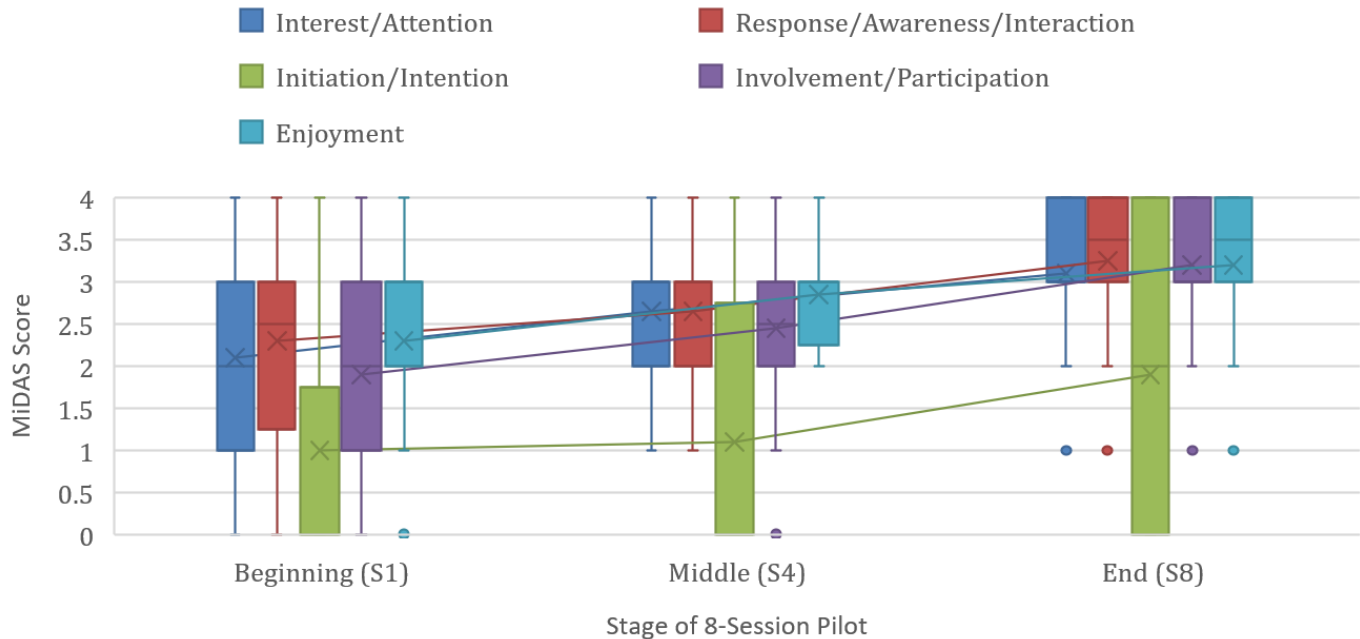
MiDAS indicators adapted from
McDermott, O., Orrell, M., and
Ridder, H. (2018) MiDAS - Music
Therapist. Retrieved from
[https://www.musictherapy.aau.dk/
midas/midas-forms/](https://www.musictherapy.aau.dk/midas/midas-forms/)

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Group MiDAS Outcomes



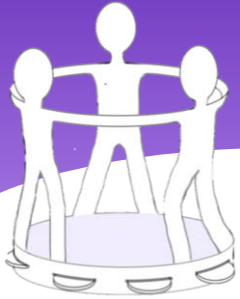
MiDAS Outcomes for Group Music Therapy
Selwyn Anchorage Pilot March - May 2019
Shari Storie, NZRMTh



Observable positive changes in wellbeing



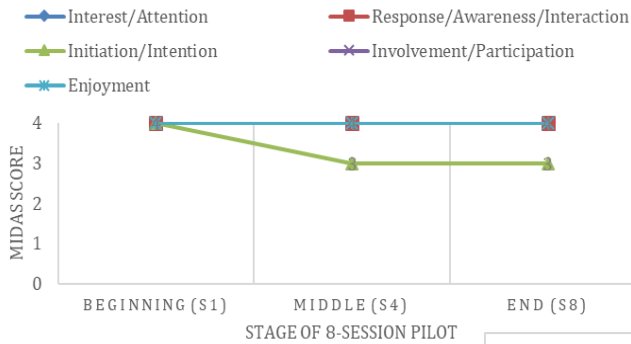
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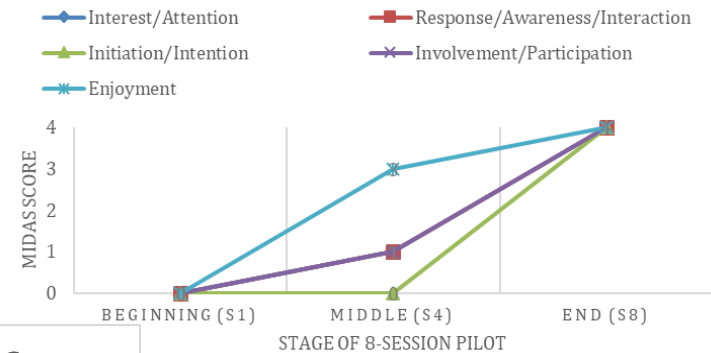
Individual MiDAS Outcomes

Conveying
Range of
Individual
Client
Outcomes

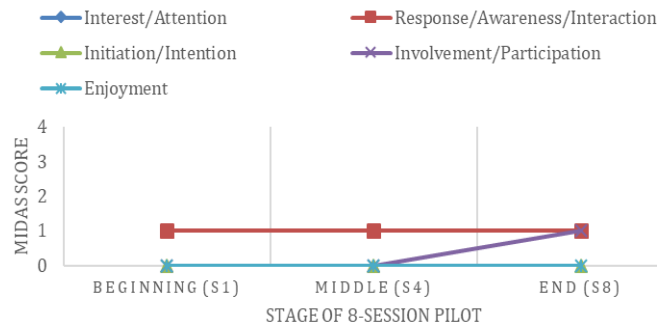
INDIVIDUAL MIDAS OUTCOMES - Client A

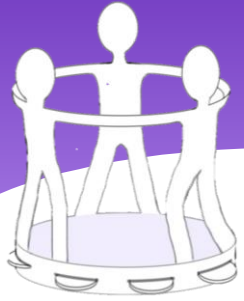


INDIVIDUAL MIDAS OUTCOMES - Client C



INDIVIDUAL MIDAS OUTCOMES - Client B





How a song sparked
reminiscence, and
feeling heard led to:

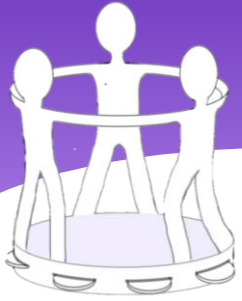
Individual Outcomes



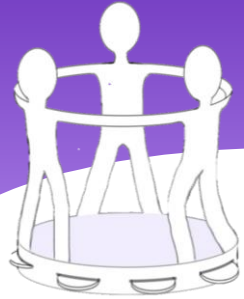
initiating another 'identity song' and dancing, shared drumming and peer interactions



Clients' Verbal Feedback



- * “Thank you so much, it’s just so wonderful that people like you come, otherwise we’d just sort of sit here.”
- * “A lot of fun, I’m [Name]” before talking at length about their kids after a session
- * “Thank you, come again.” – Client, spontaneously as I was packing up.
- * “Wonderful, wonderful.” – Client, in response to, “How was it today?”
- * “Music is so, it just lifts, doesn’t it.”
- * “That was lovely.”



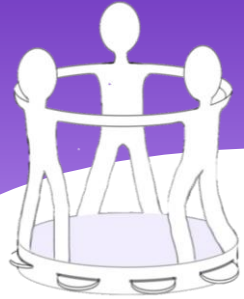
Staff Feedback

- * “For most clients the session reduced anxiety, depression and improved their communication”
- * “It was great to see [client] up and dancing”
- * “Even [client], she was looking at the newspaper, but she was singing the songs, she was with us”
- * “It’s difficult to get the reminiscence going with such a large group isn’t it”
- * “You can see they really enjoy it. I think it’s your soft voice and the way you are, it makes them feel comfortable to do things”
- * “One of our clients joined in... he does not really sit for too long”
- * “After the session [client] said he’d liked it and would join in next week”
- * “A client who rarely speaks had suddenly verbalised and started singing”
- * “Everyone had a chance”



Recommendations

- * Further music therapy in future
 - * Consider small groups
- * Direct contact with families to gather information about clients' identity music, with a focus on clients' cultural musical heritage.
- * Regular family join-in sessions; trial family sessions
 - * Use to create playlists
- * Trial an intergenerational session approach
- * Selection of instruments, and upgrade of piano
- * Staff-led music programme ideas – requested as part of pilot



Acknowledgements

With thanks to those people and the families and caregivers who gave their permission for images of themselves or their loved ones to be used to promote music therapy in New Zealand

Thank you to Heather Whineray and The Selwyn Foundation for allowing today's presentation

Questions?

Contact: shari.storie@outlook.co.nz

