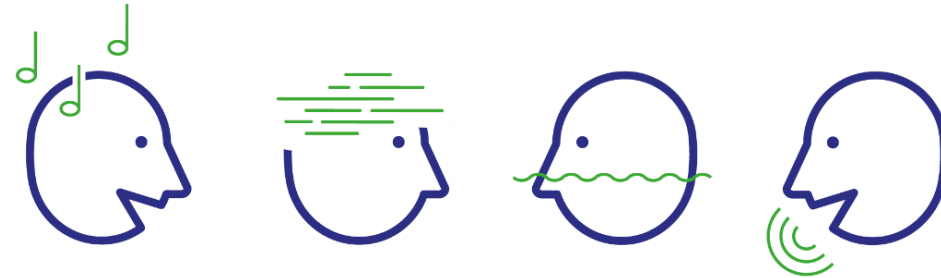


Person-centered approach in group-based music interventions



Naomi Rasing, PhD | in collaboration with Dr. Monika Geretsegger &
Prof. Christian Gold | Polyfon-konferansen | 07-11-2024 |

Context

- ❑ multinational Music Interventions for Dementia and Depression in Elderly care (MIDDEL) trial.
- ❑ Care home residents with dementia received group music therapy or recreational choir singing 1 or 2 times a week for six months (Gold et al., 2019).

Background

- ❑ A person-centred approach is essential since every individual has their own music preference and musical history (Kelly et al., 2023; Rajendran, 2022).
- ❑ Offering person centred interventions can contribute to positive health outcomes, reduced neuropsychiatric symptoms, increased well-being (Lee et al., 2022).
- ❑ Evaluation of music interventions proves to be challenging (McGee et al., 2018).
- ❑ As a result, studies that aim to demonstrate effectiveness of music interventions have not yet provided sufficiently convincing evidence (Hackett et al., 2022).

Session structure

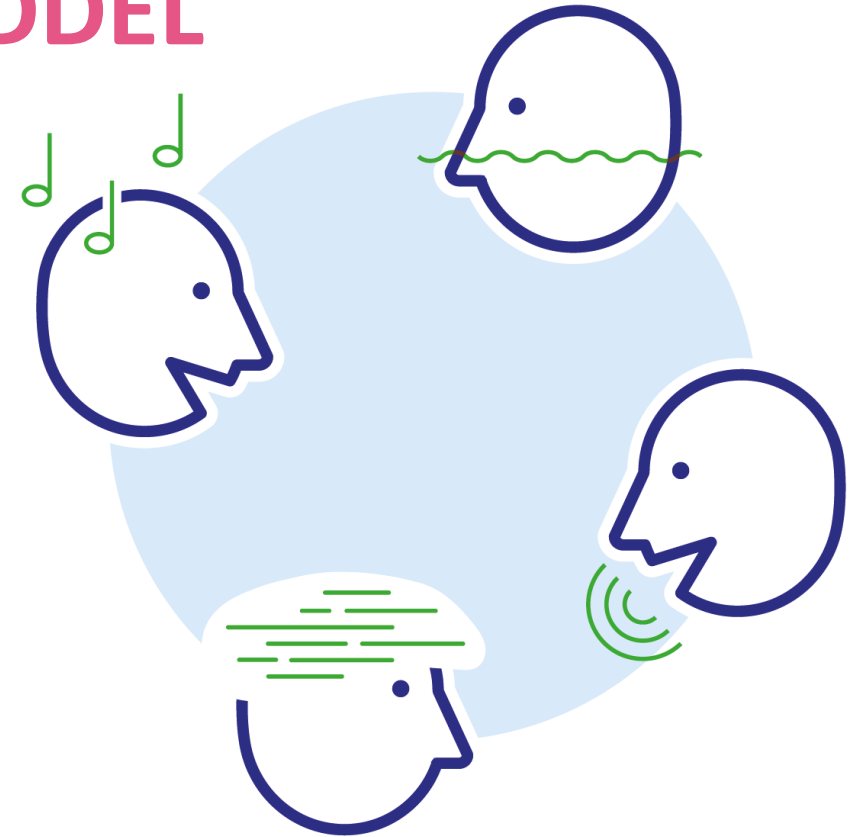
Group music therapy (GMT)



Person-Centred Approach in MIDDEL

Research questions

- ❑ What are the most common reasons for non-attendance or leaving early from group music intervention sessions among care home residents with dementia?
- ❑ How do music therapists and choir leaders tailor group music interventions to the needs of individuals?
- ❑ What are intervention providers' views on person-centered work within group music interventions?



Methods

Data collection

- Reasons for **non-attendance**
- Open-text comments
- Two online **focus groups**

rc027a -gmt 15 - 090622

12.2 Presentielijst

GMT RCS

VPH-code/Groepsnummer/Sessienummer: 27a

Sessie datum: Sessie starttijd: 16:00

Sessie eindtijd: 16:45

Naam van interventie-uitvoerder: Simone Zwart

Aanwezigheid:

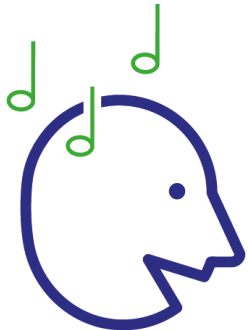
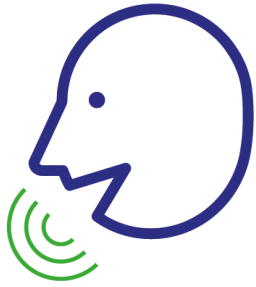
| Naam: | Aanwezig? Ja/Nee/Deels: | Zo nee, waarom niet? (bijv. ziek, liep weg, weigerde) Deels: (bijv. vertrok eerder) welk moment/ wanneer en waarom? |
|-------------|----------------------------|---|
| 1) Mevr. B. | ja | |
| 2) mevr. G. | ja | lag op bed in andere hoek |
| 3) dhr. | nee | |
| 4) mevr. L | ja | |
| 5) mevr. A | ja | |
| 6) mevr. W. | ja | |
| | | |
| | | |

Opmerkingen (per bewoner):

1) Zong de liedjes mee, mevr. was in eerste instantie boos, had boven gebit in haar hand en wilde het niet in. Zong heeft gebit meegenomen en mevr. had meerde na ~~10~~ 10 minuten.

5) mevr. was heel helder, zong alle liedjes mee en ze wat zei was 1^e zin wel begrijpelijk, maar daarna niet meer. mevr. foert zichtbaar.

6) mevr. is altijd helder en actief betrokken.



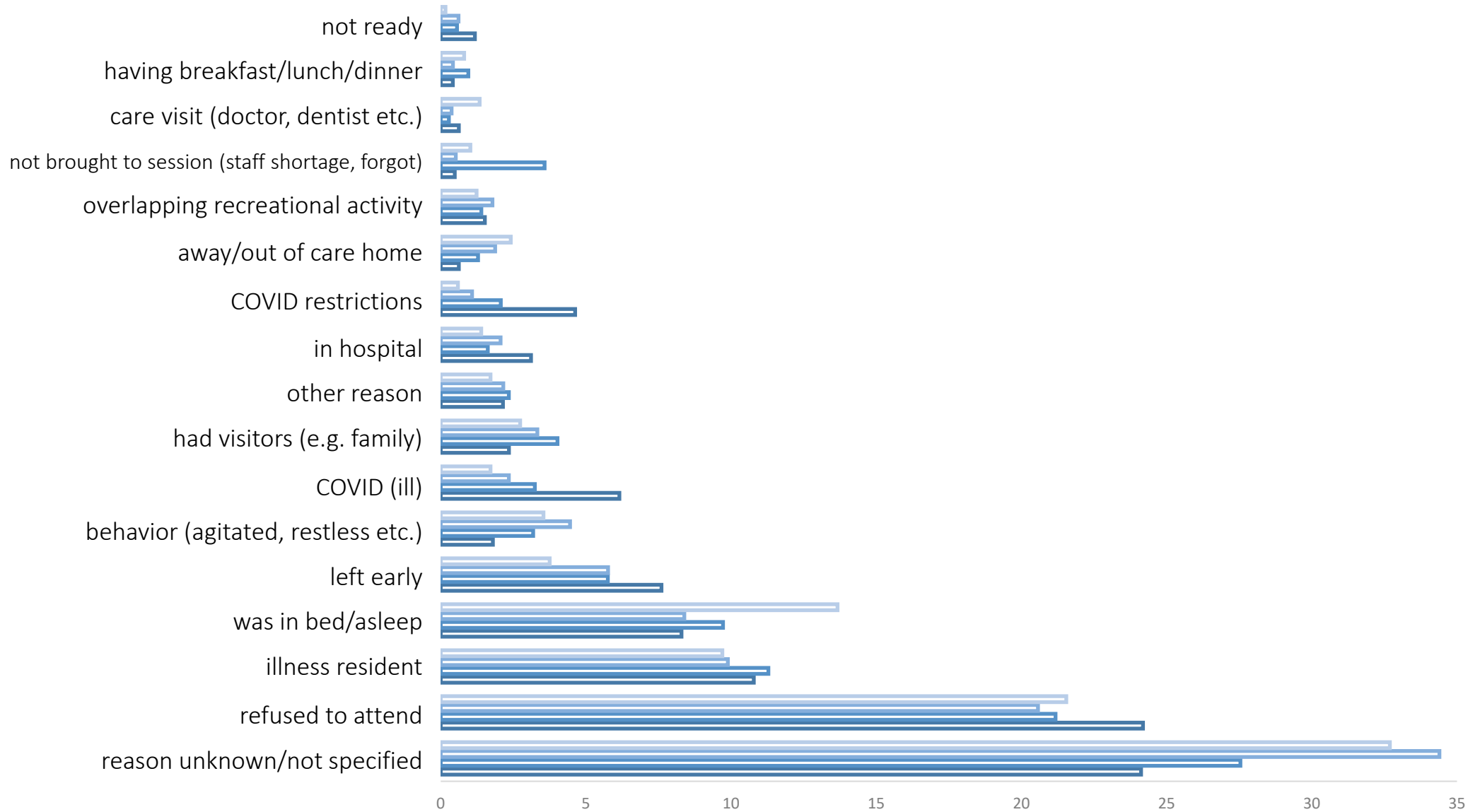
Focus group topics

- Gain knowledge of a person's background (music preferences, life story, significant songs, interests)
- Dementia severity (involving participants with varying levels of awareness)
- Group sessions in the care home environment (support to implement GMT)
- Discover and embed well-known songs in GMT
- Reasons for non-attendance

Reasons for non-attendance

group-based music interventions in care homes (percentage)

RCS+ RCS GMT+ GMT





Results: Non-Attendance

Key findings

- ❑ Often the reason for non-attendance was **unknown** by care staff and/or intervention provider (figure 1)
- ❑ **Refusal** was by far the most frequent reported reason for non-attendance in each intervention group across countries
- ❑ **Illness** or physical health-related issues, being **in bed** or asleep frequently prevented residents from participating
- ❑ **Leaving early** from a session was a common phenomenon.

Results: Open Text Comments

| Open text comments | GMT, n (%) | RCS, n (%) |
|------------------------------|------------|------------|
| Positive interactions | | |
| Celebration | 14 (9.4) | |
| Collaboration | 27 (18.1) | |
| Giving | 14 (9.4) | |
| Creation | 4 (2.7) | |
| Facilitation | 24 (16.1) | 5 (1.8) |
| Holding | 17 (11.4) | 5 (1.8) |
| Negotiation | 22 (14.8) | 60 (21.7) |
| Play | 47 (31.5) | 170 (61.4) |
| Recognition | 21 (14.1) | 55 (21.0) |
| Relaxation | 19 (12.8) | 8 (2.9) |
| Timalation | 3 (2.0) | |
| Validation | 49 (32.9) | 3 (1.1) |

Table 1. Positive interactions described in open text comments of GMT and RCS sessions

“Other residents really enjoyed themselves, knew a lot to tell based on questions and songs. Rolled over with the ball to music, nice to see how fanatic a resident became! Also had nice conversations about that.”
(GMT)

| Open text comments | GMT, n (%) | RCS, n (%) |
|------------------------|------------|------------|
| Total, n = 426 (100.0) | | |
| UK, n = 125 (29.3) | 31 (7.3) | 94 (22.1) |
| NL, n = 301 (70.7) | 118 (27.7) | 183 (43.0) |

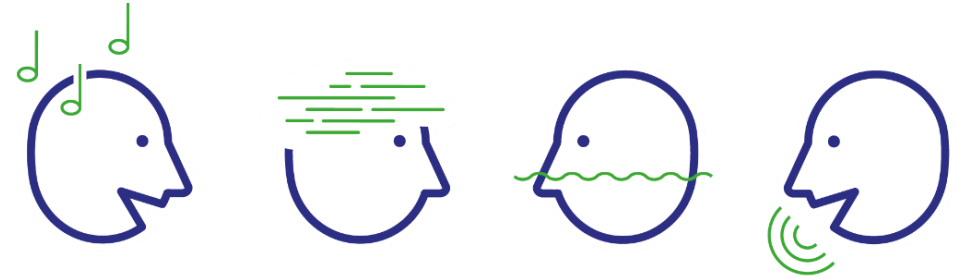
Results: Open Text Comments

| Open text comments | GMT, n (%) | RCS, n (%) |
|---|------------|------------|
| Other content addressed in comment | | |
| Attendance | 55 (36.9) | 160 (57.8) |
| Recording | 17 (11.4) | 15 (5.4) |
| Communication/ Support care staff | 46 (30.9) | 75 (27.1) |
| Intervention provider | 9 (6.0) | 18 (6.5) |
| Lyrics/capabilities choir activities | | 79 (28.5) |

Table 1. Positive interactions described in open text comments of GMT and RCS sessions

“Mr. L: participated well, could find the songs in the songbook by himself, present friendly. Mrs. W: pleasant presence, always up for a chat. Mrs. Z: reasonably clear today, needed help with everything. Mrs. D: was still having breakfast, spent most of the time on this. Mrs. V: quietly present, needed help with searching today. Mr. w: seemed to enjoy it, didn't want a songbook.” (RCS)

Results: focus group



Key findings

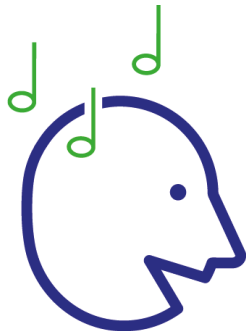
- It takes time and effort familiarizing with songs relevant to participants.
- Place participants with specific needs (e.g., advanced dementia, hearing loss, restlessness) strategically in the room (e.g., right next to the interventionist)

“When I started with a new group, I always came with a certain **repertoire**. I was on the safe side when I started with these songs.” (GMT)

“When someone is further in the dementia, I always try to **place them next to me**, in the neighborhood. So the people next to me, I can easily make contact with. I think it's good to have the contact with the people who are in the further stadium to stay close to them.” (GMT)

Results: focus group

“The people with dementia told me the same story every session, but at each session I learned a new piece of the jigsaw and then I could give certain keywords which they would react to and talk a bit more about another part of the story. With proceeding sessions, I had more and more possible points where I could reach them when the information was collected in this **dynamic process**. For me it was like I knew them very well, but for them it was like they told me the story for the first time.” (GMT)

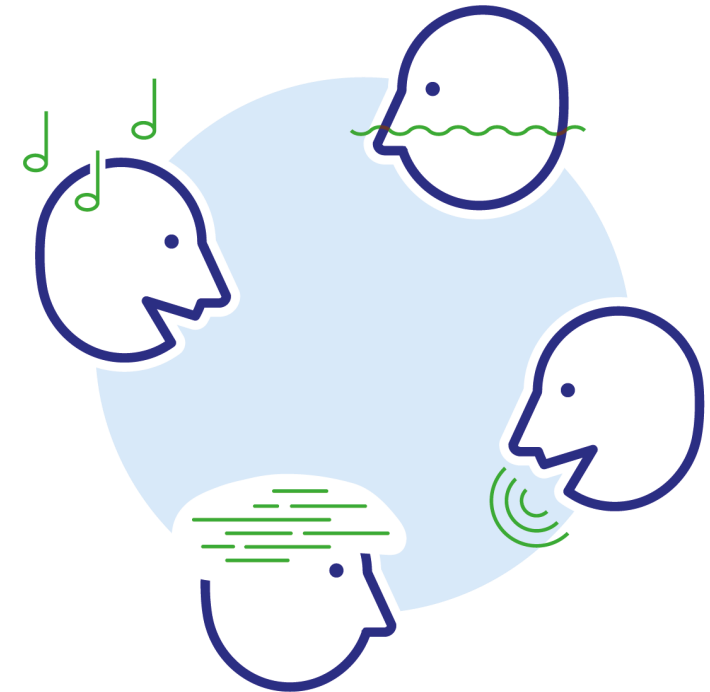


Limitations

- Not all positive interactions are suitable to describe in text and could rather be observed in **video-recorded sessions**.
- Future studies may need to specifically ask interventionists to report on their efforts to work in a person-centered way.
- Findings of the open text comments and the focus groups **may not be generalizable**, since data were not available from each participating country and the focus groups were relatively small.

Practical recommendations

- Consider appropriate session **duration**
- Way of **inviting** people to the session
- **Time of day** affects how and how many people participate
- Support of **care staff** is essential
 - to help bring and collect choir participants
 - to assist with choosing and finding songs in the songbook
- Consider **suitability** of
 - 'Moving to music' and 'Improvising on instruments' in GMT
 - Using a songbook, physical and vocal warm-up in RCS
- **Facilitate** engagement and attunement by
 - eye contact
 - physical contact
 - promixity
 - comfortability



MIDDEL

Music Interventions for
Dementia and Depression
in Elderly Care



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