



Creating Effective
Music Listening
Opportunities

**Personal
Listening Devices**

How and When to Use a Personalized Playlist

When is a Good Time to Listen to a Playlist?

In general, there are many appropriate times and reasons to offer opportunities to listen to music. For example: when you have private time with the individual or, prior to transitions (e.g. to help motivate him/her before going to lunch, or to provide relaxation before having a nap). There are also times when listening to music is not a good fit. For example, it is difficult to focus on another activity (e.g. a baking program) when listening to music through headphones. It might also be difficult for the individual to feel connected to the group while wearing headphones. The overarching goal of using music with older adults, and especially those with dementia, is to help them connect with: memories, emotions, and the people and world around them. The following section provides some tips on how to achieve this effectively.

How to Most Effectively Use a Playlist

1. When it is an appropriate time, find somewhere to listen to music. If there is no quiet/private space available, then ask those around if they are receptive to hearing some music.
2. Play the music using a personal listening device that has speakers (e.g. a CD player or iPod dock). Headphones should be used with caution. They may block out unwanted environmental

noises or ensure that others do not hear the music; however, headphones also create a barrier. If you are listening to the music together and able to talk to the individual, it is much easier to share in the moment and to know what music he/she is or is not reacting to.

3. While you are starting the music, talk to the individual and tell him/her what's happening. For example: "Ok Rebecca, we're going to listen to some music together. It sounds like Benny Goodman is first".
4. Quietly listen together and occasionally ask questions to see if the individual is engaged in the music. For example: "Rebecca, isn't that voice lovely?", "Can you hear the trumpets?", "Are you enjoying this song?" Simple questions will help you decide if he/she is engaged in the music, if a new song is needed, or if maybe he/she has had enough music for now.
5. When you notice a reaction, acknowledge it while the music is playing. For example: "You look happy, does this song bring back a good memory?" or "You look sad. Music can make us feel many emotions; would you like to continue listening?"
6. Use your judgment to decide how long the music should be played for. Too much music may lead to agitation, sleepiness or boredom. Stop the music while the individual is still engaged. This way he/she leaves the experience feeling connected and active.



Music: A Way of Connecting

You might also want to try more active ways of engaging with the individual while listening to music such as: singing together (let him/her teach you the song), moving/dancing while seated together, clapping or tapping your hands together. Make it a shared musical experience.

Many individuals cannot make decisions independently due to decreased cognitive abilities. In these cases, the person who is providing the music listening experience for the individual must make informed decisions about what kind of music the individual will listen to (see additional information in the *Creating Effective Playlists* section), when he/she will listen and how he/she will listen to it.

Headphones

If you choose to use headphones, here are recommendations from the Baycrest Audiology Department:

1. Regarding headphones: Small ear-buds are not recommended. Use either over-ear headphones or stetoclip headphones. Behind-the-ear type hearing aids should be removed before headphones are used. Deep fitting hearing aids should not give feedback and are appropriate to leave in.

2. Regarding volume: Loud and soft are different for each person. If an individual cannot tell you when the music is too loud or too soft look for signs on his/her face. Turn it up until you see a response. If it is too loud he/she will likely show a response as well (i.e. pulling headphones off, grimacing, etc.) There is a very small window of comfort for individuals who have hearing loss, so be patient and take some time to find a level that works.

3. Please note that headphones of any kind are not to be used unsupervised. It is important that individuals with dementia be monitored while they are listening to a personal listening device. It is not recommended that individuals be left alone listening to music, especially through headphones. Individuals who are not able to turn the music off when they no longer wish to hear it may become anxious or agitated. Even favourite music can sometimes evoke difficult emotional responses (e.g. sadness) and caregivers need to be mindful of this. If music listening is “overused,” individuals may become immune to its positive effects.

Creating Effective Playlists

Consider the Music Choices

Take time to choose a playlist that is meaningful and appropriate to the needs and interests of the person you are preparing it for.

If you know the individual extremely well (e.g. your spouse or your father) you may feel confident making assumptions about music you think he/she will enjoy and relate to. Even so, take your time and consider your choices carefully. You can also use the information below to help refine your list.

If you are not close to the individual and do not know exactly what his/her preferences might be, try not to make assumptions. For example, not all people who grew up in the 60's liked the Beatles, nor do all persons of the Jewish culture relate to traditional Hebrew music. Making assumptions based on age, culture, or background are not always effective. The following are helpful tips:

Talk to the Person

If a person is in the early stages of dementia, asking specific questions such as "What are your favourite songs?" or "What is your favourite kind of music?" might be too difficult for the person to answer. Even without dementia, it might be challenging for an individual to think of this information immediately. However, when we hear a certain song or singer we know instantly how we feel about it.

Suggestions to try:

Put some music on (music you guess the individual might enjoy or relate to) and ask questions...

As you are asking questions and discussing music, the songs you are playing in the background may catch the individual's attention. If you notice him/her singing along, or looking toward the source of the music, ask a question: "Do you know this song?" or "Do you like this song?" Take notes. Be a music detective!

ADDING MUSIC TO THE MIX

There is a growing body of research acknowledging and supporting the use of music with people who are living with dementia; and recently there is also more media focus on the benefits of music.

This has created an excitement and desire in caregivers to include music in their care provision, and it raises the importance of creating responsible and effective personalized playlists. The following information will help you to create safe and effective playlists.

Take Time to Assess

If the individual is in a more advanced stage of dementia and conversations are not helpful, your assessment might take more time and patience. With individuals who have advanced dementia, make the assessment more about music than questions. If they cannot engage effectively in conversation it could become very frustrating for the individual. Instead, make some educated assumptions. First, consider what you know about the individual. For example, did he/she play an instrument or sing in a choir? What kind of music? Did he/she enjoy dancing? Choose a few songs based on what you know about the individual, and then also choose music from his/her culture (traditional and modern) and from the decade that he/she would have been between 20-30 years of age. These are broad assumptions; choose many artists and several different kinds of music. Include classical music and other styles (e.g. if he/she was a dancer, try tango or waltz music).



Remember, there is no “one size fits all” playlist. Music is personal and can be a dynamic way to reach people with dementia. Carefully consider the music you are choosing in order to maximize the potential connections the music can make with the individual.

Once you have some selections, find a quiet private place and begin to play the music. Avoid using headphones while you are assessing. You need to hear the music too. If the piece you are playing does not elicit a response right away, be patient and let the music continue. If there is still no recognition or response then move on to the next song. When you observe a response, engage with the individual: hold his/her hand if you are comfortable doing so and move to the music; ask if he/she likes the music. Look for emotions involved in the response: Happy? Sad? Agitated?

Order of Songs and Length of Playlist

It is also important to consider the order of the music and the length of the playlist. Creating several shorter playlists will be more useful than one long playlist. Ideally, shorter playlists for individuals with cognitive impairment are preferred and recommended. Creating playlists for different purposes is also a productive idea. For example, a morning playlist (and other times of the day); a calming playlist; an energetic playlist to become more alert and active; or a playlist of familiar family music to be played prior to family visiting to prime the individual for his/her visitors. Sometimes songs can be arranged in a certain order that can help to improve mood or increase alertness or energy level. Please connect with a music therapist for more information about this.

How to Respond to Deep Emotion

Be Present

If an individual is left alone to listen to his/her music it is impossible to know how he/she is responding, making it challenging for you to support the individual in times of need. If you are preparing someone to wear headphones or to listen to music without the use of headphones, ensure the individual is seated somewhere where you can check on him/her frequently.

Observe and Listen

If you observe an emotional response, check to see if you are needed. The individual may really need your support, or, you may not be needed at all.

Check In

Take some time to ask questions rather than immediately saying what you think the problem is. Rather than asking "Why are you so sad?" try "I see that you are crying. How is this music making you feel?" Tears don't necessarily indicate sadness. It is also possible the emotion may not be directly related to the music, for example, you might see anger and assume the person is angry but when asked the response might be unexpected, such as, "My son hasn't called me today".

Acknowledge

After you have asked questions to identify the emotion and what might be causing the emotion then it is time to validate what the individual is feeling. It is very important to acknowledge what he/she is experiencing rather than avoiding the emotion. Here is an example: "It's okay to feel upset. Music often makes us feel different things. Does this song bring back memories?" Rather than: "Mrs. Smith, don't feel sad! Let's put on a song that will make you happy!"

MUSIC AND EMOTION

Listening to music can make us feel a range of emotions. Research is continually proving how powerful music can be. It is sometimes surprising how the same song can make someone smile and sing along and in another moment make that same individual cry uncontrollably.

As older adults are engaging in personalized listening on iPods or similar devices, caregivers need to be prepared to support whatever emotions may emerge from their listening experiences.

Support

Take time to support the person. If you are busy then it is important to find someone who has a few minutes to do this. Rushing often leads to diverting the individual away from the source of his/her emotions. Taking time to acknowledge and briefly explore the emotion is often all that is needed for that person to feel supported and cared for.

Transition

After some time is spent exploring the emotions and the individual is feeling more settled, it is time to decide what comes next. Does the individual want to listen to more music, or has he/she had enough for the time being? Where is the most appropriate place for the individual to be? What other daily routine or activity would be meaningful for the person to transition to?

If you have any questions about this resource, please contact a member of the Baycrest music therapy department:

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Further Reading if You Want to Continue Developing your Skills

Cantello, M. (2004). *Communing with music*. Camarillo, CA: DeVorss & Company.

Clements-Cortes, A. & Bartel, L. (2015). Sound stimulation in patients with Alzheimer's disease. *Annals of Long Term Care: Clinical Care and Aging*, 23(5), 10-16. <http://www.annalsoflongtermcare.com/article/sound-stimulation-patients-alzheimer%E2%80%99s-disease>

Levitin, D. (2007). *This is your brain on music: The science of a human obsession*. New York, NY10-: Penguin.

Rio, R. (2009). *Connecting through music with people with dementia: A guide for caregivers*. London, UK: Jessica Kingsley Publishers.

To Cite this Document: Clements-Cortes, A., Pearson, C., & Chang, K. (2015). Creating Effective Music Listening Opportunities. Toronto, Ontario: Baycrest, www.baycrest.org/care/culture-arts-innovation/therapeutic-arts/music-therapy/creating-effective-music-listening-opportunities

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