

# A Cure for the Soul? The Benefit of Live Music in the General Hospital

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## Abstract

From 2005 to 2006 a professional orchestra (the Irish Chamber Orchestra) performed in a university teaching hospital with the aims of bringing live music to patients who could not access traditional concert venues and of improving quality of life for patients and staff. This was the first time an orchestra was resident in a hospital in the Republic of Ireland. An independent contemporaneous evaluation was carried out to assess the benefit of live music for patients. Live music in hospital was found to enhance the quality of the aesthetic environment of the hospital, with both patients and staff stating that listening to live music helped them to relax, feel happier and more positive. Patients' perception of the hospital was affected positively by live music in waiting areas. Music was found to have strong emotional effect and the individual preferences and experiences of patients need to be carefully taken into account when programming music in hospital. Listening to live music while in hospital has positive benefits with few negative effects.

## Introduction

Patients often have limited access to the arts while in healthcare settings and the quality of the aesthetic environment can be poor<sup>1</sup>. Hospitals are one of the few places in society where there is an absence of music<sup>2</sup>. Whilst there is a large body of literature on the role of music in healthcare settings, there is relatively little evidence-based research supporting the positive role of music on health gain and healing. Music in hospital can be seen to have social, emotional, therapeutic or educational benefit for patients<sup>3</sup>. Interventions are usually either music therapy (which is a clinical intervention using music to reach therapeutic goals) recorded music, live music performance and community music. Live music performed by professional musicians in concert format has been practised for many years in hospitals outside of Ireland, but research is limited in this area.

We investigated the impact of a professional orchestra residency in a university teaching hospital, the first such initiative in Ireland. The aims of the independent evaluation were to assess the impact of live music in an acute hospital, to investigate best practice for using music in hospital, and to contribute to higher standards regarding the role of music in hospitals in the future.

## Methods

The setting was a public voluntary teaching hospital which appointed an Arts Officer in 2003 to explore the role of the arts in health. The well-established arts programme includes a weekly music performance programme since 2003, creative writing workshops for cardiology patients, art sessions in renal dialysis and oncology, music therapy in stroke and psychiatry and interior design projects.

From September 2005 – June 2006 members of the Irish Chamber Orchestra (ICO) visited the hospital, performing in small groups in the Age Related Health Care Unit, Neurology ward, Psychiatry wards and the main atrium of the hospital. The performances were open to all patients, staff and visitors and were free. The orchestra gave forty recitals during the residency, each recital being thirty minutes long. The ICO is a highly distinguished national institution with an education and community outreach programme, which grows out of the orchestra's commitment to the development of music in schools and communities.

The aims of ICO's residency in the hospital were to bring live classical to patients who could not access tradition concert venues, to improve quality of life for patients, to offer distraction and relaxation for patients undergoing stressful treatment and to

pioneer the concept of an orchestra in residence in an acute hospital in the Republic of Ireland.

An independent evaluator was engaged to carry out the evaluation of the benefit of live music in the hospital. The independent evaluation was both qualitative and quantitative in nature. Three different methods were used to evaluate the benefit of live music for patients in acute hospital:

1. A detailed questionnaire was given to 93 patients, staff and visitors after the concerts. This provided both quantitative and qualitative data.
2. Three public consultation exercises were carried out in the main atrium of the hospital. 226 staff, patients and visitors at AMNCH were consulted. Participants were invited to give their comments on the music in an open-ended manner.
3. Three focus groups were held with musicians at the beginning, middle and end of the project.

## Results

### Detailed questionnaires

Of the 93 questionnaires, 37 were completed by staff, 38 by patients, 14 by visitors and 4 'other'. The age of respondents varied from 20 to 92, with 28 staff (76%) surveyed aged 20 – 40 and 31 patients (82%) over the age of 60. The length of stay for the 38 patients surveyed ranged from 3 hours to 6 months, with a median length of 14 days. 45 (48%) of those surveyed had previous experience of listening to live music in the hospital, whilst 48 (52%) stated they were listening for the first time. Each recital was thirty minutes long. 61 (66%) were happy with this length, while 22 (24%) stated it was too short and 2 (2%) that it was too long.

Respondents were asked to name their favourite music. While answers included classical, opera, jazz, rock, blues, Indie, Irish traditional, Gilbert and Sullivan, Country and Western, ballroom dancing music, chart music and ballads, the most frequently cited musical preferences were 'Light Classical' (26 respondents, 28%), Rock/Pop (17 respondents, 18%) and 'Traditional Irish' (5 respondents, 5%). When asked which music people would like to hear in hospital, the most frequently cited responses were 'light Classical' (40 responses, 43%) a mixture of light styles (17 responses, 18%), 'relaxing and uplifting' music (10 responses, 11%), and 'Traditional music' (10 responses, 11%). Other responses included Jazz (5 responses, 5%) pop (5 responses,

5%) and country (4% of responses). The most popular music indicated for hospital can be summarised as:

- Light classical music
- Relaxing and uplifting music
- A mixture of light styles
- Traditional Irish

Patients and staff were asked how they felt before hearing the music. The majority (82 responses, 89%) of staff used the words 'tired', 'busy', 'stressed' or 'pressurized', while 8 patients (21%) stated that they felt tense, stressed or anxious before hearing the music, 7 (18%) felt 'down', 'dejected', 'sad' or 'depressed' and 13 patients (34%) stated that they felt 'ok' or good. Other responses from patients included feeling 'down', 'depressed', 'lonely' and 'sad'.

The majority of respondents reported positive emotional states after the music: 76 (82%) of respondents stated that listening to the music helped them to relax, 54 (59%) stated that hearing the music made them feel happier, 44 (47%) felt more positive, 27 (29%) felt more energised and 18 (19%) felt part of a group. A small minority 3 (3%) of respondents felt less pain as a result of listening to the live music. Only one respondent 1 (1%) felt lonely. Positive physical and emotional reactions were noted while listening to live music. This included 'relaxing your body' 54 (59%), 'smiling' 47 (51%), 'tapping your foot/feet' 40 (44%), 'forgetting your worries temporarily' 32 (34%), 'moving/dancing to the music' 27 (29%) and gaining peace of mind 26 (28%). 14 (15%) stated that the music distracted them from their state of health and 10 (11%) stated that it helped them cope with their hospital stay.

Patients and staff were asked their impression of the hospital before and after listening to the music. Responses varied widely in both questions, but the most common impression of the hospital before listening to the music was that the hospital was a good hospital 15 (16%), dull or boring 9 (10%) and busy 5 (5%). After listening to the music, comments were largely positive. 45 respondents (48%) stated that after hearing the music they had a more positive impression of the hospital, with comments such as the hospital appearing calmer (4 responses 4%), more caring (3 responses 3%) and a happier place (3 responses 3%).

#### *Public Consultation Exercise*

Of the 226 patients, visitors and staff consulted, 130 (58%) stated that the music was appropriate and had a positive impact on the hospital atmosphere. 39 (17%) stated a physical relaxation effect of the music whilst 23 (10%) stated that the music had a positive emotional effect on mood. 14 (6%) stated that the music distracted them from either boredom or worries about being in hospital. The overall impression of the hospital, after listening to the music, was of a positive, calm atmosphere. Twelve (5%) commented favourably on professionalism of the musicians. Overall, there were few negative perceptions of the live music recitals. The main criticism were that performances were too short (18 responses 8%) and seating was uncomfortable (5 responses 2%). Some staff found the music 'distracting from work' (9 responses 4%) or were 'too busy to listen' (2 responses 1%).

#### *Focus groups with musicians*

Three focus groups were held with musicians from the ICO. The key benefits of performing in a hospital, as perceived by the musicians, were the engagement with patients, the benefit of the music on the atmosphere on the ward, the opportunity to bring live classical music to new audiences and the opportunity to interact with their audience. The issues for musicians were the development of appropriate musical repertoire for the different patient groups and the quality of the performance space, which made it difficult to perform on certain wards.

## **Discussion**

"A cure for the soul" was the evocative description of one of the patients of the programme. It amplifies in a personal way the overall finding from the evaluation that live music in hospital received an overwhelming positive reaction from patients, staff and visitors. This descriptive study suggests that live classical music has a role in the hospital in the areas of relaxation, patient well-being, quality of life and enhancement of the environment. Providing live music in hospital had an impact on how much patients felt valued and cared for by the hospital. The evaluation provided some evidence of the benefit of live music for patients in hospital and makes some contribution to the recognition of live music in hospitals as an addition to care.

The professionalism of the musicians was perceived by the organizers of the project as making a difference to the quality of the experience for patients, and this point of view was volunteered in the survey as well. It is important that musicians in hospital are trained and sensitive to healthcare environments, and we are currently developing the template for a course for artists in the general hospital with Arts Council funding. Musicians reported that engaging with the patients on wards was particularly rewarding for them, and performances were often more intimate than in traditional concert venues.

In an era of evidence-based medicine and constant pressure on healthcare budgets, the provision of programmes such as this requires further exploration as to the manner and funding of their implementation<sup>4</sup>. Further research is needed to define any specific benefits of music for patients in hospital. This largely involves two distinct pathways: a potential therapeutic effect of an environment informed by the arts, and the more general issue of access to the arts in healthcare settings.

The first of these is explored in this descriptive paper, the potential effect of an arts programme on well-being of patients, visitors and staff. Given the positive impact demonstrated, it would not be unreasonable to aim to explore this effect in a randomised controlled trial, although blinding would be difficult. However, reduction of anxiety, and improved well-being have been reported from studies ranging from music in intensive care units<sup>5</sup>, visual environments (one of the most well known of which suggests that patients exposed to views of trees appeared to recover more quickly than those with a view of a brick wall<sup>6</sup>) to design of radiology facilities<sup>7</sup>. Healthcare settings are associated with stressful experiences and disempowerment, and the design of a therapeutic environment has been a goal of healthcare architects and planners for some considerable time<sup>8</sup>. The synthesis of live music in a structured programme may well be a powerful addition to the design of this environment. It is critical that potential positive and negative impacts are more fully studied<sup>9,10</sup>, as well as the ideal format of interaction between musicians and service users and providers.

A wider question is that of access to the arts in settings that traditionally have been exempt from formal artistic activity. Within the public sphere in the developed world, the role of the arts in the environment is widely recognized by the Percent for Arts scheme which dedicates one per cent of cost of new buildings to art works – although participation by public bodies (including hospitals) is not mandatory in Ireland<sup>11</sup>. There are those who feel that the intrinsic value of the arts is such that a wider evaluation is not necessary, but we would consider that the vulnerability of patients and the stress of hospital environments require a careful and well-considered debate. This debate has been well served by recent policy paper and handbook from the Arts Council<sup>12,13</sup> and an overview from the former Eastern Regional Health Authority<sup>14</sup> and the Arts Council of the United Kingdom<sup>15</sup>. However, one benefit of this wider approach is access to funding pathways and partnerships that allow access to a wider range of funding options

and creativity, above and beyond the resources intrinsically available from healthcare budgets.

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