



Music Therapy Selected Research Bibliography for Older Adults

Aldridge, D. (1994). Alzheimer's disease: Rhythm, timing and music as therapy. *Biomed & Pharmacotherapy*, 48, 275-281.

“Active music-making provides a form of therapy for the Alzheimer's patient which may stimulate cognitive activities such that areas subject to progressive failure are maintained.”

Brotons, M. & Brooks, D. (2003). Music therapy with Alzheimer's patients and their family caregivers: A pilot project. *Journal of Music Therapy*, 40(2), 138-150.

Cevasco, A.M., & Grant, R.E. (2003). Comparison of different methods for eliciting exercise-to-music for clients with Alzheimer's disease. *Journal of Music Therapy*, 40(1), 41-56.

Cevasco, A.M., & Grant, R.E. (2006). Value of musical instruments used by the therapist to elicit responses from individuals in various stages of Alzheimer's disease. *Journal of Music Therapy*, 43(3), 226-246.

Clair, A.A. (1996). *Therapeutic Uses of Music with Older Adults*. Baltimore: Health Professions Press.

Using Music Therapeutically with Older Adults: Music provides physical and emotional stimulation, facilitates social integration, provides communication, provides emotional expression, evokes associations, and provides diversion from inactivity, discomfort, and daily routine. Development of musical skills in healthy older adults may facilitate social integration, self-expression, structuring of time, and intellectual stimulation. Music is effective as a therapeutic medium because it is flexible, structured, occurs through time, and is an aesthetic experience.

Clair, A.A., & O'Konski, M. (2006). The effect of rhythmic auditory stimulation (RAS) on gait characteristics of cadence, velocity, and stride length in persons with late stage dementia. *Journal of Music Therapy*, 43(2), 154-163.

Coffman, D.D. & Adamek, M.S. (1999). The contributions of wind band participation to quality of life of senior adults. *Music Therapy Perspectives*, 17, 27-31.

Participation in organized music activities improves social interaction, well-being and a sense of accomplishment among community-dwelling senior adults.

Engen, R.L. (2005). The singer's breath: Implications for treatment of persons with emphysema. *Journal of Music Therapy*, 42(1), 20-48.

“Findings of this study suggest that vocal instruction, inclusive of breathing exercises, may help to improve the quality of life for senior citizens with emphysema.”

Gaudreau, D. and Peretz, I. (1999). Implicit and explicit memory for music in old and young adults. *Brain and Cognition*, 40, 126-129.

Aging affects explicit but not implicit memory for melodic material.

Gerdner, L.A. (2000). Effects of Individualized Versus Classical “Relaxation” Music on the Frequency of Agitation in Elderly Persons With Alzheimer's Disease and Related Disorders. *International Psychogeriatrics*, 12: 49-65.

A significant reduction in agitation was found during and following individualized music as compared to classical music.

Hamburg, J. & Clair, A.A. (2003). The effects of a movement with music program on measures of balance and gait speed in healthy older adults. *Journal of Music Therapy*, 40(3), 212-226.

Movement sequences set to music composed to reflect the dynamics, rhythm, timing, and phrasing of the movements showed statistically significant increases in measures of one-foot stance balance, gait speed, and functional reach.

Hilliard, R. (2004). A post-hoc analysis of music therapy services for residents in nursing homes receiving hospice care. *Journal of Music Therapy*, 41(4), 266-281.

Hilliard, R. (2003). The effects of music therapy on the quality and length of life of people diagnosed with terminal cancer. *Journal of Music Therapy*, 40(2), 113-137.

Johnson, G., Otto, D., & Clair, A.A. (2002). The effect of instrumental and vocal music on adherence to physical rehabilitation exercise program with persons who are elderly. *Journal of Music Therapy*, 38, 82-96.

Kim, S.J. (2005). The effects of music on pain perception of stroke patients during upper extremity joint exercises. *Journal of music therapy*, 42(1), 81-92.

Positive affects and verbal responses were observed while performing upper extremity exercises with both music and karaoke accompaniment music.

Mercado, C., & Mercado, E. (2006). A program using environmental manipulation, music therapy activities, and the Somatron Vibroacoustic Chair to reduce agitation behaviors of nursing home residents with psychiatric disorders. *Music Therapy Perspectives*, 24(1), 30-38.

Background music resulted in the significant reduction of accidents/incidents, PRN medication, STAT orders by physicians, and unplanned staff absences. Both music therapy sessions and Somatron sessions resulted in decreased agitation behaviors.

Mitchell, L.A. (2006). An experimental investigation of the effects of preferred and relaxing music listening on pain perception. *Journal of Music Therapy*, 43 (4), 295-316.

“It is suggested that personal preference is an influential factor when considering the efficacy of music listening for pain relief.”

O'Callaghan, C.C. (1993). Communicating with brain-impaired palliative care patients through music therapy. *Journal of Palliative Care*, 9(4), 53-55.

“Using language and music together therapeutically with brain-impaired patients offers a greater chance of activating intact neurological pathways than using language alone. Music therapy also offers an alternate and creative way of communicating with these patients.”

Walworth, D. D. (2003). The effect of preferred music genre selection versus preferred song selection on experimentally induced anxiety levels. *Journal of Music Therapy*. 40(1), 2-14.

Watkins, G. (1997). Music Therapy: Proposed Physiological Mechanisms and Clinical Implications. *Clinical Nurse Specialist*. 11(2):43-50.

“Findings from clinical research suggesting that music may facilitate a reduction in the stress response include decreased anxiety levels, decreased blood pressure and heart rate, and changes in plasma stress hormone levels...Music therapy may be useful in a wide range of clinical settings with patients experiencing health problems as diverse as hypertension/cardiovascular disease, migraine headaches, and gastrointestinal ulcers.”

Winninger, S.R., & Pargman, D. (2003) Assessment of factors associated with exercise enjoyment. *Journal of Music Therapy*, 40(1), 57-73.

“Satisfaction with music accounted for the most variance in exercise enjoyment, followed by satisfaction with the instructor, and finally salience of exercise role identity.”