Music Reawakening

Musicianship and Access for Dementia

The Way Forward

Veronica Franklin Gould
Music Reawakening

Musicianship and Access for Early to Mid Stage Dementia – The Way Forward

“Dementia can be the most terrible blow to people and their families. Our priority has to be to transform people’s lives when they have dementia, so that they can still be part of society and enjoy life. It is vital for their wellbeing that when given a diagnosis that their brain is degenerating, they should at the same time be directed to creative activity as cognitive rehabilitation. It is amazing the effect that music can have – *Music Reawakening* is an important report.”

Baroness Greengross
Chair, All-Party Parliamentary Group on Dementia

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Film and Photography

We are grateful to Joseph Bor for filming our ECO project.

[www.arts4dementia.org.uk/music-reawakening-report](http://www.arts4dementia.org.uk/music-reawakening-report)
We are facing unprecedented public health challenges associated with an increasingly ageing population, which bring with it growing levels of dementia and other long-term conditions. There are wider concerns too with the growing epidemic of obesity, a rise in the incidence of diabetes, increased levels of antibiotic resistance, growing problems of alcohol misuse, all in the global context of looming catastrophic climate disruption. All of these challenges are compounded by financial pressures on the delivery of health and social care services and growing levels of stress and dissatisfaction among health professionals. Of course, we look to science for solutions to these problems, and continued investments in scientific research are needed to help us find new ways to ameliorate and manage long-term health conditions.

But science cannot address all of the problems we face. And essentially there is no scientific solution to the inevitabilities we all face of getting older and needing care if we are unable to look after ourselves. Issue of compassion and care, values and attitudes, training and skill, and adequate resources are all important in ensuring good quality care in older age.

It is surely timely and welcome, therefore, that over the last 20 years in the UK we have seen a growing interest in the field of arts, health and wellbeing. Across the country the creativity of artists in all fields – visual arts, drama, dance and not least music – is being drawn upon in the interests of supporting health and wellbeing in health care settings and in the community and not least for people affected by dementia and their families. I am delighted to commend this wonderful publication Music Reawakening from Arts 4 Dementia put together by the irrepressible Veronica Franklin Gould. Thank you for demonstrating yet again the life-sustaining power of music.

Professor Stephen Clift FRSPH
Director of the Sidney De Haan Research Centre for Arts and Health
Natvar Shingadia (harmonium) composing a piece, for which members of the English Chamber Orchestra and London College of Music students are improvising accompaniment.

*We started a new piece – my piece!*

*They accompanied it very well.*

*We’re gonna improve on it.*

*So we have work to do.*

*Can you imagine being part of that?*
Music Reawakening – Terms of Reference

Arts 4 Dementia, whose mission is to develop arts programmes to empower families affected by early stage dementia, has chosen to focus on music in 2015 because of its extraordinary neural robustness to transcend the challenges of dementia. Musicality, performance and music memory can remain powerful and intact. The exquisite magic of making and responding to all kinds of music together, makes it the most instantaneous and effective of all art forms as cognitive rehabilitation.

Our intention through the Arts 4 Dementia Best Practice Symposium 2015 “Musicianship and Access for Early Stage Dementia – The Way Forward” (Wigmore Hall, April 2015, see page 26 and Appendix 1) was to both experiment ourselves through a partnership programme of training and workshops with the English Chamber Orchestra and students of the London College of Music and to showcase the various ways orchestras, opera houses, choral groups, museums and galleries, conservatoires and music therapy groups use music and movement as lifelong learning to enable families with early-stage dementia to lead stimulating active lives together in the community.

Terms of Reference for Music Reawakening

Dementia Strategies across the UK, the All-Party Parliamentary Group on Dementia (2012), the Prime Minister’s Dementia Challenge (2012) and the World Alzheimer Report (2012) stress the importance of early diagnosis and treatment. The key advantages of this, according to The British Psychological Society’s Clinical Psychology in the Early Stage Dementia Care Pathway (2015) include better adjustment, slower progression and prolonged independence, delayed residential care, and ultimate savings to the health economy (see page 20).

“The inexpressible depth of music,” the neurologist Oliver Sacks, writing in Musicophilia: Tales of Music and the Brain, quotes the German philosopher Arthur Schopenhauer “so easy to understand and yet so inexplicable, is due to the fact that it reproduces all the emotions of our innermost being, but entirely without reality and remote from its pain.” (Sacks 2008, xii). As such, neurologists highlight the use of music in the treatment of dementia.

Germany’s “On Wings of Music” programme advises concert halls how best to accommodate families affected by dementia. Professor Theo Hartog of the University of Vechta demonstrated at the Institute for Culture and Education for the Elderly 2014 conference and which he again explained at the A4D symposium, where this was also shown to great effect by the BUDI Orchestra. Guidance from all contributors to our symposium and other music groups is represented in this report.

Music Reawakening – Aims

Music Reawakening will examine

- How the brain is affected by early symptoms of the various dementia types
- The challenges people face as symptoms set in
- Their existing skills
- How best to access these through involvement with music and musicians
- The dementia care pathway to and range of re-energising orchestral, choral, opera, music and dance workshops.

To help spread the practice, Music Reawakening includes

- Educational opportunities for young musicians
- Access developments at performance venues.

Who for?

- Musicians working with or wishing to work with people affected by early stage dementia
- Professional and amateur musicians affected by dementia
- People with dementia wishing to take up a new instrument
- Family and professional carers
- Music and arts organisations
- Conservatoires and colleges offering music courses
- Performance venues
- Music therapists
- GPs
- Dementia, memory and diagnostic services
- Occupational therapists
- Services for the elderly
- Social services
- Health and Wellbeing Boards
- Dementia Action Alliance.
Executive Summary

There is a growing avalanche of dementia cases. Some 850,000 people are currently affected by dementia in the UK. The figure is expected to rise to one million in 2025. This needs to be repulsed and the best non-pharmacological way is to reawaken and stimulate the brain through music.

A visceral language more profound than words, music can bypass symptoms of dementia, reach deep emotions to stimulate thought processes and enable speech. Playing an instrument, singing opera choruses, learning to play or sing, conducting members of a national orchestra, collaborating to create a song cycle is compelling, even life-transforming for families affected by dementia. Music can slow cognitive decline.

Arts 4 Dementia, the charity set up to help develop programmes at arts venues to re-energise and inspire people with early stage dementia and their carers, this year chose to focus on music, partly prompted by Arts 4 Dementia participants at music projects remaining symptom free for days afterwards, but also by a video showing a violinist with dementia (see page 43) playing fluently with the Philharmonia Orchestra.

The charity’s latest report Music Reawakening: Musicianship and Access for Early to Mid Stage Dementia – The Way Forward, is the outcome of the Arts 4 Dementia Best Practice Symposium 2015 at Wigmore Hall. The report presents programmes developed by leading opera companies, orchestras and choirs – most are offered free to families affected by dementia – music education opportunities and neurological evidence of the power of music to increase and maintain cognitive ability, improve wellbeing and reduce isolation in dementia and reduce the risk of developing dementia.

Among the organisations featured are Scottish Opera, Glyndebourne, English Touring Opera, the Philharmonia Orchestra, English Chamber Orchestra the Forget-me-Not Chorus, choirs for people with young onset dementia, and music therapy community groups, as well as the Alzheimer’s Society “Singing for the Brain”. Participants report rediscovering lost skills and value the time and interest the musicians give them, the feeling of being involved in the creation of new music, opera, their ideas integral to each project and final performance.

The programmes, all informed by training and mentoring, celebrate participants’ abilities, their ideas, emotions and musicianship, rather than losses. Arts 4 Dementia, keen to explore ways to enable musicians with dementia to address technical difficulties so as to enjoy playing in an ensemble without worry, had set up the partnership programme with the English Chamber Orchestra and London College of Music. This proved especially rewarding for musicians with young onset dementia and culminated in a performance of the participants’ composition on stage at Wigmore Hall for the symposium.

A4D believes that at the same time as receiving a diagnosis that their brain is deteriorating, with no hope as yet of a cure, people should be directed to musical interventions as cognitive rehabilitation, reablement, advised that they can lift the fog of dementia, by joining an orchestra or singing in a choir. Arts 4 Dementia invited Dr Trish Vella-Burrows of the Sidney de Haan Research Centre for Arts and Health to demonstrate in Music Reawakening how musical interventions can by integrated into the Dementia Care Pathway, from diagnosis, with a strategy for the systematic planning and delivery of nationally accessible Music and Arts Pathway 4 Dementia (MAP4D) programmes.

To help with referrals, Arts 4 Dementia provides a website where arts organisations can signpost and carers can locate activities for dementia. Finally, the report draws attention to the carers’ access scheme to enjoy discounted tickets taking partners to performances and special concerts.

Music Reawakening is published in memory of Myrtle Ruth Franklin (1923-2015), whose passion for music, the arts and education, inspired the foundation of Arts 4 Dementia. It was her response to a talented Russian cellist from the Guildhall School of Music and Drama, who came to perform Bach’s Cello Suite No.1 to her long after Alzheimer’s had set in, questioning him with such natural fluency, that sparked this research.

In her last days, Live Music Now (see page 75) kindly sent a young cellist to play to her - the magic of Schubert, the power and sensitivity of the bow triggering deep feelings, she opened her eyes.
1 Introduction

The impact of creating, playing, performing, singing and dancing and listening to music on the physical and emotional health of people affected by dementia – and to slow cognitive decline in the early stages and protect against the onset of dementia – is substantial (Korte et al, 2013; Särkärmö et al, 2013; Hartogh and Kehrer, 2014; Ginsborg, 2015).

Evidence of the power of music to bypass dementia symptoms and reach deep emotions, enabling people to articulate through song, to revive skills and even learn new instruments (Munster, Germany 2014), prompted Arts 4 Dementia to pilot an orchestral project and hold the Arts 4 Dementia Best Practice Symposium 2015 “Musicianship and Access for Early-Stage Dementia – The Way Forward” as a platform for academics, orchestras, opera houses, music for dementia partnerships, concert halls and conservatoires to share experiences.

A visceral language more profound than words, music can bypass symptoms of dementia. Music of whatever kind changes the atmosphere and our mood. We can enjoy it without conscious thought, though it keeps us fit. Music and dance can be used not only as therapies to rehabilitate tools, as reablement.

Arts 4 Dementia believes that to preserve wellbeing, when people are given a diagnosis that their brain is degenerating – a shocking, often long-term death sentence – they should at the same time be advised that arts activities, music and movement, can maintain cognitive ability. The knowledge that musical instinct remains strong, that they can still learn a new skill – not alone, but making music with others – and that because musical memory lasts longest, the experience will empower them.

Playing an instrument, learning a new musical skill, joining an opera group or choir and practising daily between sessions, going to concerts, will enable people with early dementia to preserve confidence and sense of purpose and to share the joys of making music, singing and dancing, painting to music and seeing inspirational performances together with family, friends and colleagues for as long as possible.

“Singing for the Brain” (see page 65) is offered all over the country by the Alzheimer’s Society for people as their dementia progresses. Music Reawakening presents this and instrumental, opera, choral, music for health models, educational opportunities to engage families with dementia from diagnosis, and performance access for carers nationwide.

2 Arts 4 Dementia and Music

In September 2009, a talented Russian postgraduate from the Guildhall School of Speech and Drama came to play Bach’s first cello suite to the writer’s mother, seven years after she had been diagnosed with Alzheimer’s disease. Transported by close contact once more with exquisite quality music, she began to question the cellist about his music, education and life in London. This dramatic, albeit brief, return of her communication skills spurred us to research the efficacy of arts processes to help bypass symptoms of dementia, and establish a charity to develop and co-ordinate re-energising programmes at arts venues.

Arts 4 Dementia’s board of trustees met for the first time at the Royal Academy of Art in January 2011. The charity had set up a music project with the University of Kingston, whereby Live Music Now (see page 75) trained music students to perform to couples coping at home with dementia, matched for musical taste by Age Concern Kingston. A4D patrons and advisors, senior figures in the arts and dementia, spoke at Arts 4 Dementia Best Practice Conference 2011 at the Royal Albert Hall, to launch our programme of stimulating weekly workshops at arts venues for families affected by early-stage dementia. Our London Arts Challenge in 2012 programme, tying in with the London 2012 Olympics, achieved the London 2012 Inspire mark. As a German study showed that daily stimulation kept symptoms at bay, we recommend themes to practice between sessions (Graessel 2011). To underpin the programme and help spread the practice, A4D worked with Dementia UK (now Dementia Pathfinders) to develop an early-stage focus to their dementia awareness training, for arts workshop leaders and volunteers.

2.1 Reawakening the Mind

Details of projects involving music can be seen in our evaluation Reawakening the Mind (Franklin Gould, 2013), funded by the Baring Foundation and Rayne Foundation and launched at the Royal Society of Medicine. This showed that 94% of the participants affected by dementia (all art forms) remained energised the day after artistic stimulation, 82-90% for two days, 90% remained energised three days after music (86% after dance) and 80% (79%) a week later.

Reawakening the Mind was disseminated at the Arts 4 Dementia Best Practice Seminar 2013 at Sadler’s Wells, which included debates on music and dance for early-stage dementia. We have since worked on new music projects with the Royal Philharmonic Orchestra, English National Ballet and latterly with members of the English Chamber Orchestra and London College of Music students (see pages 25, 40-41 and 80-81), which marked the start of this A4D music research project, Music Reawakening, the outcome of the Arts 4 Dementia Best Practice Symposium 2015 at the Wigmore Hall.
3 Dementia Types

"Dementia" is a generic description for a range of degenerative brain disorders for which there is as yet no known cure, although drugs can help manage symptoms (see pages 17 and 21). One in six people over eighty has dementia. 44 million people have been diagnosed worldwide. There are over 850,000 in England and Wales. Nearly 700,000 informal carers are caring for loved ones at home with dementia (Alzheimer's Research UK, May 2015.)

Scanning techniques reveal changes to the different regions of the brain affected by various forms of dementia, most commonly, Alzheimer’s disease (62%), vascular dementia (17%), mixed Alzheimer’s and vascular (10%), dementia with Lewy Bodies (4%), frontotemporal (2%) (Alzheimer’s Society, 2014).

3.1 Alzheimer’s disease

Damage to the temporal lobe in Alzheimer’s disease usually begins gradually with mild memory loss, some confusion, forgetting names and where possessions have been left, difficulty with finding the right word, reasoning and following conversation. People may become more withdrawn and experience mood swings. As the disease progresses to the middle stages, damage to the left parietal lobe affects the ability to read and write. In Alzheimer’s, the ability to perceive music and musical emotions remain relatively intact; and music can albeit temporarily, reduce anxiety and improve cognitive functioning (Särkärmö et al, 2013).

3.2 Vascular dementia

Vascular dementia, caused either by stroke or by poor blood supply to the subcortical, deep parts of the brain, may bring feelings of weakness on one side, difficulty thinking quickly or concentrating, and for short periods feel very confused. Some people may become depressed or anxious, though will not necessarily suffer memory loss at first. Damage to the occipital lobe, rare in Alzheimer’s, may affect vision in vascular dementia. Symptoms may begin suddenly, remain stable or possibly improve in the early stages. However, further strokes will advance the condition in a stepped rather than gradual progression.

3.3 Dementia with Lewy Bodies

Lewy Bodies, tiny deposits in the brain's neurons - nerve cells - bring symptoms similar to Alzheimer’s disease and to the motor problems associated with Parkinson’s disease. Subtle at first, symptoms vary from day to day. People may find it hard to remain alert and to plan ahead. In the longer term most will find difficulties with thinking, language, orientation, comprehension, calculation, judgement, memory and learning capacity, sleeping and spatial awareness. Hallucinations and delusions of persecution can be distressing to both person and carer.

3.4 Frontotemporal dementia

Frontotemporal dementia (FTD), or Pick’s disease, is subtle in the early stages. Damage to the frontal lobes of the brain, which, on the right, control behaviour and emotions, and on the left, language, may gradually lead to inappropriate and aggressive behaviour, even in mild-mannered people. Despite loss of inhibitions and speech difficulties, as in semantic dementia, a variant of FTD, their memory may be unaffected and they are likely to be aware of what is happening to them. FTD is most likely to be diagnosed between the ages of 45 and 65.

Every individual’s experience with dementia is unique. In the earlier stages, the changes people experience, the worry that their social status may be devalued by the stigma, that their psychological control is in jeopardy, can engender feelings of fear, helplessness, loneliness and depression. For family carers observing changes in their loved ones, their anxiety, confusion and loss of self-esteem and experiencing the consequences can place a great physical as well as psychological strain. However, because people’s imaginative and emotional responses to arts interventions, and their ability to both revive and develop new creative skills can remain strong for years, there is increasing interest in the use of arts, especially music, as therapy for people affected by dementia and their carers.
"And yet I still have so much music in my head", the French composer Maurice Ravel (1875-1937) lamented. Ravel’s use of repetition and the increasingly inhibited notation in his handwritten score of his orchestral piece *Boléro* (1928) intrigues neurologists as symptomatic of FTD. Experts at the Institute of Neurology at University College London, observe that despite evident motoric and expressive difficulties, Ravel’s musical intellect in the composition of this powerful study of the crescendo & largely unaffected. Whether engaged in hearing or playing *Boléro*, the brain’s analysis of the tune, rhythm, tempo, crescendo and individual instrumental sound stirs emotional responses. Ravel went on to compose two more piano concertos, both masterpieces of musical delicacy and inventiveness (Clark C., 2013; Warren, 2003).

The neural robustness of music arouses considerable interest in the clinical neuroscience of music processing, and its use as a cognitive tool in helping to diagnose, understand, measure skills and treat the various dementias. The Royal College of Music “Rhythm for Life” study on learning to perform in older adulthood quotes neurological evidence that engaging with music improves plasticity in the cortex, which enhances the ageing brain’s cognitive abilities – perception, motor function, working memory – improves cardio-vascular strength, allows creative self-expression which gives a sense of accomplishment and success, and that the motivation to take up music lessons overcomes high pain thresholds may furthermore have a neurohormonal influence on reducing stress (Korte et al, 2019).

In Alzheimer’s and vascular dementia, the chemical neurotransmitters that process thoughts and memories from one neuron to another are reduced. Neurofibrillary tangles clog neurons and neuritic plaques from dead or dying neurons in brains affected by Alzheimer’s, making thoughts and memories some of which may still be preserved, inaccessible. Musical rhythm raises the level of the neurotransmitter serotonin and the sense of wellbeing may last for days. People whose speech is reduced can be reawakened through rhythm to sing words, and after doing so, as Arts + Dementia has witnessed, their speech may temporarily improve. They will gradually encounter visuospatial impairment and find difficulty reading music and following a conductor, but they will be able to improvise and their emotions will remain strong.

Those affected by FTD may be able to play instruments with competence, add appropriate ornaments in the style of the composer, and sight-read for some years. They may be less sensitive to emotions, but as they lose the powers of abstraction and language, they may develop startling musical talent or change of musical taste. A middle-aged Korean man with a behavioural variant of FTD, having had no musical training, learned to play the saxophone. Despite progressive cognitive decline and apathy, he practised daily for three years, mastering ten Korean folk songs better than the unimpaired players in the class (Cho, 2015).

The emotional and rhythmic powers of music engage and energise our being, from our minds, to our posture, fingers and toes “We listen to music with our muscles”, the neurologist Oliver Sacks quotes Friedrich Nietzsche in *Musikophilia*. “We keep time to music involuntarily, even if we are not consciously attending to it, and our faces and postures mirror the narrative of the melody, and the thoughts and feelings it provokes.”

The heart, as a muscle, responds to music, whose profound, abstract emotionality can enliven our soul (Sacks 2008, xii, page 15). At a live performance the experience is heightened, our posture and emotional engagement propelled by the visual movimentoé sensation, the frisson.

While the causes of disconnection in the various dementias differ, the brain pathways affected are the same. As Dr Julia Stewart Clark, consultant clinical neuropsychologist pointed out at the Arts + Dementia Best Practice Seminar 2013, music and indeed dance can help in all dementia types. Playing Bach or Mozart can cause neuro-transmitters to increase (Clark J.S., 2013 and 2010). Sacks described the 88-year-old pianist who could no longer speak, but played every day, able to cope with the complex demands of repeat sections when sight-reading Mozart. However, people do not need to have had previous musical training to enjoy and to respond to it at the deepest levels.

A University of Finland study involving coaching the carers of people affected by early dementia, which enables a couple to make music together between rehearsals – to root the music activity into their everyday life – has established the rehabilitative potential of music in the daily care of people affected by dementia, and the important role of regular music activity in maintaining cognitive ability, enhancing mood and quality of life, and promoting the wellbeing of family members in mild to moderate dementia (Särkärmö et al, 2013).

Psychologically, music in all genres, has a significant role in social interaction throughout life and can contribute to positive ageing by increasing emotional wellbeing, reducing isolation and maintaining competence; and regular musical hobbies, such as singing in a choir, singing and playing music with friends, in band, a chamber group or orchestra, enhance wellbeing and cognitive function, are associated with a reduced risk of developing dementia (Särkärmö et al, 2013).
Musical Memory

Musical perception, sensibility, emotion and memory can survive long after other forms of memory have disappeared. Procedural memory, which underlies skills required to play and sing music and is based on practice and learning, is the type of long-term memory most likely to be retained for longest.

Whatever their impairment, people with early stage dementia can continue to derive pleasure from singing and performing in their chosen style, to enjoy experiencing music in the moment and create new musical memories.

In trials conducted by the Institute of Neurology's Dementia Research Centre and Hammersmith Hospital in 2010, musicians with early stage Alzheimer's and semantic dementia were both able to continue to play and sing a tune after being given a musical – if not verbal – cue (Rohani et al 2010).

Sacks records that a pianist diagnosed seven years earlier with Alzheimer's continued to practise several hours a day, and planned to memorise the Schumann A-minor Piano Concerto (Sacks 2008, pages 373-74).

With lyrics, people with more profound language deficits, are better able to sing the words they cannot speak (Clark C 2013). Familiar music, whatever the style, takes people with dementia back to often happier times in their lives, can evoke shared memories, restore identity for a while; and the mood engendered can last after the memory of singing itself.

But of particular interest to Music Reawakening study is Professor Jane Ginsborg's reiteration of Sacks' quote that "The perception of music and the emotions it can stir is not solely dependent on memory, and music does not have to be familiar to exert its emotional power." As Ginsborg points out, learning produces changes in the brain: different aspects of music – pitch, rhythm, tempo, timbre, dynamics and meaning – recruit different parts of the brain, but combining them all. To appreciate music, to play, sing or listen, engages the whole brain (Ginsborg 2015).

Prescription for Music

By Dr Trish Vella-Burrows, Sidney de Haan Research Centre for Arts and Health

Models of healthcare and dementia

The first health professional that people commonly access for help with dementia-type symptoms is their local family doctor (GP). The nature of the GP’s response will be underpinned by his or her training which is bound to a philosophical perspective of health and culturally dominant model of health around which they practice. In the UK, it is likely that once a person affected by dementia is in the healthcare system, assigned biomedical labels will determine, to some large extent, the way they are perceived by health professionals and society at large, and this in turn will shape the type of care that they are offered and the relationship that they have with their community.

Notwithstanding the unprecedented value of the biomedical model to improve quality and prolong life, its limitations in terms of addressing the experience of ill-health are well-documented. This is particularly relevant in relation to dementia wherein post-mortem examination of degeneration of brain tissue of a person with the condition does not always correlate to his or her expression of cognition before death (Snowden, 1997). Many personal testaments from people affected by dementia also verify that the science of the condition is by no means the complete story. Rather, a whole set of complex co-factors that pioneers of new thinking, notably, Professor Tom Kitwood of the University of Bradford and Dr Mary Marshall at the University of Stirling, highlighted in the late twentieth century (e.g. Kitwood 1997; 2004; Marshall 2006), and are known to underpin the disease process and the way in which each individual lives their life post-diagnosis. These observations emphasise the need for a model of health that focuses on the ability of an individual to self-actuate positive life choices to support a better quality of life (QOL), despite a label of ill-health.

6.1 Antonovsky's salutogenic model of health

One useful alternative model of health in the context of people with dementia is salutogenesis. The term coined in 1979 in Israel by the medical sociologist, Professor Aaron Antonovsky. Rather than accepting the absence of disease as normal and disease as abnormal, salutogenesis regards body-function disruption and decline as inevitable in the human organism, despite which a sense of ordered coherence can still be achieved (Sidell 2007). By emphasising preserved assets, rather than focusing on loss, and on perceptual and behavioural adaptations in the face of changing circumstances, resilience to debilitating stressors can occur and a sense of coherence managed Antonovsky (1979).
6.2 Music and the salutogenic approach to healthcare

An America study of 2003 showed that QOL can be improved for people living at risk of dementia through the promotion of creative leisure activities that aimed to elicit salutogenesis. By facilitating participants to draw on their creative and productive selves, they appeared to build-up resistors that helped to protected them against overwhelming feelings of ill-being. Moreover, the authors conclude, that "playing musical instruments" are among activities that "are associated with a reduced risk of dementia" (Vergheze, Lipton, Katz et al, 2003 p. 2506).

In 2010, the Norwegian sociologist Dr Kari Batt-Rawden assessed the role of music in the context of the salutogenic model of health in relation to public health policy and health promotion for people with enduring mental ill-health. Batt-Rawden found that some participants with long-term health problems used music in preference to drugs or medical treatment, ‘often transcending pain and suffering through personal, musical practices’ (page 11). The study showed that listening, playing or singing, alone or in a group, could engender a 'sense of wholeness in body and mind'. The author reported that immersion of this nature, which she described as “musicking”, can produce a sense of coherence and a “zest for life”, which helps to engender coping mechanisms and to muster a stronger self.

6.3 Music as a conduit for health outcomes

Two important recent consultations that resulted in the reports, Narrative for Person Centred Coordinated Care (National Voices and Think Local Act Personal, 2013) and I’m Still Me (Redding, Gentry, Shand and Stuart, 2014) highlight the way in which older people want care services to support them. In terms of perceptions of health the latter reports:

While older people recognise the constraints that their health conditions sometimes place on their lives, they have told us that they do not identify themselves by these conditions and that they are focused on living their lives – not on a preoccupation with their health. This implies that there will be limits to the success of strategies that seek to engage people only through their management of their health (National Voices et al. 2014, page12)

This observation escalates an argument for embedding into health care strategies, activities that are known to have health outcomes but are traditionally set within an enjoyable leisure/entertainment context (Vella-Burrows, Ewbank, Mills, et al. 2014).

Health outcomes can occur through music activities, that is, music used by individuals to self-regulate a sense of wellbeing, such as going to a concert, playing in a band, or singing in a choir, listening to music, and music interventions which are specifically designed music-for-health programmes, such as singing-for-health choirs or music therapy. Collectively, music activities and interventions fit neatly to the distinct areas of arts and public health and health promotion; community arts for health; and arts therapies (McNaughton, White and Stacey 2005; Dose, 2006; Clift, Camic, Chapman, et al, 2009). Moreover, alongside dance, the omnipresence of music in all cultures and within all age and gender cohorts maximises the potential for meaningful, socially relevant interactions.

For people affected by dementia, the benefits of engaging in active music-making can foster and/or support:

- A sense of identity, empowerment, meaning, worthwhile productivity, creative achievement, place and belonging, flow and rhythm
- Improved respiratory health/breath control (singing/wind/brass-playing), vocal production/articulation (singing), posture and balance, coordination, upper body muscle strength, core body strength, neuro-biological transmission (feel-good hormones) and immune system efficiency
- Relaxation
- Motivation
- Emotional expression
- Social/community engagement/cooperation
- Positive interrelationships between carers and their cared-for
- Life-long-learning
- Cognitive functioning


These observations are particularly relevant in the move towards social prescribing and community development in general practice, which, in the context of dementia care, aim to help prevent, reduce or delay needs (MacLachlan, 2014) and will feed significantly into the fast evolving national integrated care programmes.

6.4 Integrated care pathways

The National Institute of Health and Clinical Excellence (NICE) provide guidance and quality standards on dementia care, which today demonstrates a fusion of bio-medical and alternative approaches to care. These are drawn together into interactive pathways for health and social care professionals to determine the most appropriate ways of managing each individual's trajectory of care (Kings Fund, 2011; NICE 2012; 2015).

Strategic planning for integrated care services (ICS) is also embedded into The Care Act of 2014 and is the subject of evaluation in Age UK's "wrap around" services which have been piloted from early 2014 (Age...
UK, 2015). In the latter, the reported interim findings of value include evidence of improvement in overall wellbeing by as much as 26% and a 46% reduction in hospital admissions with a cost saving of up to £3 in every £1 spent. This evidence supports an argument for the robust augmentation of existing ICS programmes on a national scale for people with dementia.

The nationally profiled Dementia Action Alliance (DAA) also aims to bring about an integrated society-wide response to dementia by promoting cooperation between a wide range of health and community services, for example, memory services, libraries and retailers. Members of the DAA include arts-based organisations (including Arts 4 Dementia) who aspire to contribute, through creative means, to integrated care services

6.5 Music and integrated dementia care pathways

Care in which Clinical Commissioning Groups, GPs, acute and community health trusts, local authorities, charitable and voluntary services work together aim to address the broad health and wellbeing of the nation’s citizens. For people diagnosed with dementia, and their carers, this will mean access to traditional bio-medical management and, importantly, opportunities for supported self-directed management through a range of psychosocial and environmental support services.

Evidence so far shows strong potential for music organisations/practitioners to contribute positively to integrated services to benefit people affected by dementia. But what of the nuts and bolts?

Table 1 shows dementia care pathways as set out by NICE (2015).

Table 1. Pharmacological and Non-Pharmacological (NP) Interventions
Adapted from NICE 2015.

*Interventions wherein music activities and interventions may play a role

Table 2. Integrated Dementia Care Pathways and Music
Adapted from Kent and Medway Public Health Observatory (KMHPO 2015)

* CST goals: physical movement/exercise; orientation (categorising objects) recognition (faces/voices), semantic/numerical orientation (word association, naming games, number games) creativity (sound exploration), social skills (social communication, team quiz) (Spector and Orwell 2005).
pharmacological pathways reflect a fusing of health models that have different underpinning philosophies and the ongoing campaign for reducing the use of antipsychotic drugs (e.g. Banerjee 2006) The boxes marked with a red asterix represent pathways wherein music activities and interventions could play a significant role in helping to build resilience, support independence, prolong function and improve QOL.

Using the Kent and Medway Public Health Observatory’s (KMPHO) ICS strategy for people with dementia as an example, Table 2 maps the potential practical application of music activities and interventions from pre-diagnosis to end of life.

Across the UK today, there are myriad examples of music activities and interventions as described in Table 2, but these are often short-term, grant-funded projects. Nor is there a consistent picture of delivery or take-up across the UK. This propels an argument for systematically scaling-up the pockets of good practice to a national level.

6.6 ‘Music and Arts Pathway 4 Dementia’ (MAP4D)

Due to the growing evidence of value in engagement in music and other arts media for people affected by dementia, strategic planning for the future should combine the two.

The following recommendations centre on a strategy for the systematic planning and delivery of nationally accessible Music and Arts Pathway 4 Dementia (MAP4D) programmes, in which the following should be considered:

- The development of a multi-agency steering group with representatives from the All Party Parliamentary Group on Dementia, Clinical Commissioning Groups, General Practice, acute and community health trusts, local authorities, charitable and voluntary dementia-focused and specialist dementia-centred arts/music organisations/practitioners.

- Information for dementia care health professionals on the evidence of music and the arts in the context of dementia and services in their local area to feed into social prescribing and community development training.

- Nurturing and growing the infrastructure of specialist MAP4D practitioners who sit within integrated care service teams and work with post-diagnostic services, offering information, advice and sign-posting to activities and interventions from the point of diagnosis.

- The promotion of dementia-friendly amateur choirs and music groups to which people affected by the condition are welcome, and from which can be drawn MAP4D buddies who will accompany them to their favoured existing or new activity/intervention over a sustained period of time.

- A national database of dementia-friendly choirs and music groups, building on the work of e.g. Alzheimer’s Society, (“Singing for the Brain” groups, Dementia Action Alliance, Making Music).

- Public performances by dementia-friendly choirs/music at post-diagnostic services (e.g. dementia cafes, CST groups).

### Table 3. Abraham Maslow’s Hierarchy of Human Needs
(Simons, Irwin and Drinnien 1987, based on Maslow 1943)

<table>
<thead>
<tr>
<th>NEED IN ORDER OF HUMAN SATISFACTION</th>
<th>DETAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHYSIOLOGICAL NEEDS</td>
<td></td>
</tr>
<tr>
<td>Oxygen, water, food, sex, sleep, homoeostasis, excretion.</td>
<td></td>
</tr>
<tr>
<td>NEED FOR SAFETY</td>
<td>Security: of body, of employment, of resources, of family, of health, of property.</td>
</tr>
<tr>
<td>NEED FOR LOVE, AFFECTION AND BELONGINGNESS</td>
<td>A sense of belonging; family, friendships, overcoming loneliness and alienation, sexual intimacy.</td>
</tr>
<tr>
<td>NEED FOR ESTEEM</td>
<td>Stability and respect: respect from others, self-respect, self-confidence, self worth.</td>
</tr>
<tr>
<td>NEED FOR SELF- ACTUALIZATION</td>
<td>To be meaningful: engagement, creativity, spontaneity, achievement, acceptance.</td>
</tr>
</tbody>
</table>

This report recognises that music and arts activities and interventions that are centred in public health and health promotion, community health and psychodynamic therapy, support the salutogenic model of healthcare. Moreover, they can lead to fulfilment of the spectrum of human needs (Maslow, 1943, Table 2). For people with dementia and their carers this model can play a vital role in supporting their quality of life as stressors build.

Music Reawakening highlights the potential benefits of engagement with music and the arts to address integrated dementia-care service goals. These goals centre on a shift from the deficit model of health, in which healthcare is mobilised only once people become ill, and towards a crisis-based model, which protects wellbeing and quality of life to prevent ill-health occurring (e.g. Morgan and Ziglio, 2007).

Finally the report puts forward an argument for the systematic inclusion of MAP4D practitioners into multidisciplinary teams that drive integrated dementia care services. It makes recommendations for strategic planning and delivery for MAP4D programmes and suggests actions that could lead to the nationwide practice of music (and arts) on prescription.
In order to explore ways to enable musicians with early stage dementia to bypass challenging symptoms so as to enjoy playing in an ensemble without anxiety, A4D invited the English Chamber Orchestra (ECO) to create a weekly orchestral project (see pages 40-41 and Appendix 3). Thanks to the ECO’s residency at the London College of Music (LCM) at the University of West London in Ealing, the orchestral sessions took place at the college. Key to the project was the early-stage dementia training for musicians who were to lead and LCM students.

8.1 Early-Stage Dementia Awareness for Musicians

This full-day training workshop for the ECO musicians and LCM students leading and assisting at the workshop programme took place at on 30 January 2015.

To help guide the musicians, A4D invited Aubrey Maasdorp, a Dementia Pathfinders trainer with whom A4D has been developing an early stage focus to A4D training sessions for arts organisers, with specialist guidance from Julian West, head of the Royal Academy of Music’s Open Academy and music director of Glyndebourne’s “Raise Your Voice” (see pages 53-54), a highly experienced trainer in music for dementia.

The training aim was to equip musicians with insight and understanding of early stage dementia symptoms, to enable them to plan a programme of music using methods that would preserve the ability of musicians with dementia to make and perform music together in the community. Although more comprehensive guidance is reported in Appendix 2, it is helpful to refer here to Julian’s advice to concentrate on affirming participants’ identity, their musicianship and artistry more than technical facility and reading musical notation, to work towards quality of sound, of music making, expression and ensemble skills, the ability to watch and respond, to respond physically, with gesture and movement, leading and being led, with participants dictating their own parts in the music.

Figure 3. Spheres of Music Activity (Hartogh, 2013)
8.3 Arts 4 Dementia Best Practice Symposium 2015
“Musicianship and Access for Early Stage Dementia – The Way Forward”, Wigmore Hall, 17 April 2015

The aim of the symposium was to present fine examples of musical provision for families affected by early stage dementia so as to spread practice nationwide. Leading music academics, psychologists, orchestral and opera workshop leaders presented evidence to the symposium to demonstrate how people’s musical skills remain vibrant after diagnosis, the variety of musical opportunities from playing in orchestras, singing opera, in choirs, creating music inspired by museums. The conservatoire and concert hall panel discussed their practice and potential ways to extend educational music programmes to involve music for early stage dementia and to maximise performance venue opportunities for families with dementia.

Katie Derham, the BBC proms presenter chaired the morning session:

- Freya Wynn-Jones and Jane Haughton presenting Glyndebourne’s “Raise Your Voice”

and keynote speeches from

- Professor Jane Ginsborg, president, European Society of the Cognitive Sciences of Music, on “Music and memory”
- Professor Theo Hartogh, professor of music education, University of Vechta, Germany, on “Musical participation after diagnosis of dementia”

Professor Ginsborg chaired the orchestral session:

- “BUDI Orchestra”, the Bournemouth Symphony Orchestra and Bournemouth University Dementia Institute partnership
- Arts 4 Dementia partnership between English Chamber Orchestra and London College of Music
- “Hear and Now” partnership between Philharmonia Orchestra, Tibbs Dementia Foundation, Fusion Youth and Orchestras Live

Julian West chaired the opera and choral session:

- Scottish Opera “Memory Spinners”
- Alzheimer’s Society “Singing for the Brain”
- Jon Petter, composer, “Turtle Song”, partnership between English Touring Opera, Royal College of Music and Turtle Key Arts, with Dulwich Picture Gallery

The performance venue (see 9 page 27) discussion panel comprised Wigmore Hall, Scottish Opera, Glyndebourne and Barbican Centre. The conservatoire panel included Guildhall School of Music and Drama, Royal Academy of Music, Royal College of Music, Royal Northern College of Music, London College of Music (see Appendix 4) and Live Music Now (see 13 page 75).

8. Performance Venues

Concert halls, opera and dance theatres and arts centres – now more dementia aware, thanks to the Alzheimer’s Society’s Dementia Friendly programme to improve inclusion and quality of life – are opening their doors to accommodate families affected by dementia.

8.1 Access Schemes – Free or Discounted Tickets for Carers

Discounts or free tickets are offered by many performance venues under an Access Scheme to an assisting companion or carer bringing a person affected by dementia. To be eligible for assisting companion tickets, customers are advised to register with the venue’s access team in advance, either by telephone, or online application forms. In Wales, the Hynt Access Card Scheme (www.hynt.co.uk) entitles a personal assistant, companion or carer to a free ticket and provides a resource for access information.

8.2 Daytime Performances

Relaxed concerts, “coffee concerts”, chamber music, opera recitals in the daytime are well suited to families affected by dementia. Those in London include Barbican, Wigmore Hall, National Opera Studios

8.3 Creative Learning

Some performance venues offer weekly programmes specifically for families affected by early stage dementia, notably Glyndebourne Opera’s “Raise Your Voice” (see pages 53-54), Scottish Opera’s “Memory Spinners” (see page 55-56), and Wigmore Hall’s “Music for Thought” (see page 62). Others offer music and dance activities for older people, notably, Sadler’s Wells Company of Elders offers dance for the over 60s at their Lilian Bayliss Arts Club.

8.4 Dementia Friendly

Visitor services and venues are becoming “Dementia Friendly”, thanks to the popular Alzheimer’s Society initiative, which provides training, and to the useful online Dementia Friendly Environments Checklist http://www.dementiaaction.org.uk/assets/0000/4334/dementia_friendly_environments_checklist.pdf, which gives guidance on signage, quiet spaces, lighting flooring, seating, unisex loos and further detail.

Concert programmes encourages audiences to allow for spontaneous applause between movements, in consideration of enthusiastic neighbours affected by dementia.
9 Creative Learning - Music for Dementia

Music organisations, opera companies, orchestras, choirs and museums which offer weekly musical opportunities for people with early to mid stage dementia through their learning and participation departments are widening their audience participation, pushing boundaries to create exciting new opportunities. Participants are valued members of supportive musical groups, who understand their challenges and work towards shared musical goals (Vella-Burrows, 2012).

Arts for health organisations run singing, and music and dance groups provide weekly activities for various stages of dementia.

Our experience is that weekly rehearsals of up to two hours of music are challenging but achievable, each bringing a sense of accomplishment within the ensemble, building up towards a final performance.

Musicians with dementia are ideally accompanied by a companion – family, friend or professional – so as to
- Ensure safe arrival and departure
- Enjoy music making together
- Facilitate daily practice at home, which
  - Encourages motivation
  - Stimulates brain activity and energy
  - Overrides dementia symptoms
  - Builds up a sense of purpose towards the performance.

Constant eye contact with the conductor at rehearsals strengthens visuospatial abilities. Whether singing or playing an instrument, the opportunity to create an instrumental work, song cycle, opera, musical show, improvise, rehearse and perform together with professional musicians inspires teamwork and valued sense of normal musical life.

As educational programmes, for which the organisations have keenly sought and acquired funding, music sessions for dementia are usually offered free, or at a token or voluntary cost.

By nature, usually led by inspired musicians, most projects are partnerships, each bringing specialist knowledge and enhancing the profile of the other; and often younger, enthusiastic group members heighten the experience for older participants. Key principles of all projects are legacy and sustainability. However short-term each project is, the aim is that it should continue, and benefit the wider community.

A4D invites all organisations who provide musical opportunities for families affected by dementia to signpost these on the A4D website (www.arts4dementia.org.uk) – this will help with referrals and enable more families and carers seeking stimulation to locate them.

9.1 Ethos

A warm community spirit nurtures camaraderie and musicianship among all participants – professional musicians, singers those with dementia, their carers, student volunteers and academic researchers, amateur musicians young and old - collaborating enjoyably together as co-producers.

With an inspirational leader, professionals and experienced music students in the team to help unlock creative potential, each project aims to maximise participants’ abilities as individuals and in an ensemble, to achieve a positive, high quality musical experience for all; and thereby improve public perception of the abilities of people living with dementia.

Music programmes for dementia celebrate
- Music-making together in a welcoming, safe, inspiring environment.
- Musicianship and a creative process inspired by distinctive artistic qualities of creating and playing
- Music that engages individual and group interest and passion
- Interactive music-making, with rehearsals and performance, where mistakes and successes go with the flow
- The natural and existing musical skills of participants affected by dementia
- Person-centred musical care, so that each individual is valued as a person and player, with different needs, challenges and musical experience, their taste and ideas integral to the project
- New and life-long learning through music-making, for all participants – with high level incentives to progress and accomplish together
- Eagerness to learn and help each other learn new musical and communication skills, a shared endeavour to overcome challenge
- Cross-cultural projects linking and harmonising with music and song of different genres
- And by maximising the musical skills of the professionals will enhance each session and performance

9.2 Venue

It is advisable to chose an accessible, spacious, warm, well lit building:
- Conveniently situated, close to public transport or with disabled, free or convenient parking, with
- Ground floor rehearsal room, space for musical equipment and to play instruments comfortably, seating to enable good eye contact
- Toilet facilities near by
- Refreshment and quiet space for individuals.
For some musicians affected by dementia, continuing to play together and to perform gives a lifeline to normality with colleagues. Yet others, their sense of self affected by disintegrating technical facilities – for example, the ability to read or transpose music – stop playing in orchestras and lay down their instruments, an experience that feels like a bereavement. As musicians with dementia still have musicianship within them and the ability to play their instruments for years after onset of dementia, restoring this ability, within a creative professional community, reaps tremendous rewards. *Music Reawakening* outlines ways for musicians, who wish to do so, to keep playing.

Furthermore, as the BUDI Orchestra and Professor Theo Hartogh of the University of Vechta in Germany informed the Arts 4 Dementia Best Practice Symposium that people with dementia are able to learn to play the piano, violin, cello and other instruments. This accords with the Royal College of Music’s “Rhythm for Life” study, which found that learning an instrument and making music on older adult learners had resulted not only in improved psychological wellbeing but also hand flexibility (Korte, M et al, 2013).

Whether learning a new musical instrument or continuing to play or perform with an ensemble, jazz band or orchestra, with informed guidance to help override challenges presented by dementia, learning to play by ear, to improvise, to play to entertain, builds up a sense of accomplishment and self-worth, and creates opportunities to make music with others.

The veed-harp, taught in German music education for the elderly, can improve motor skills and cognition performance. This harp-shaped sound box with 18 to 37 strings can be held in the lap and plucked to produce a sweet tone. Its easy to read notation sheet is positioned between the harp body and strings so that the notes – dots joined by a zig-zag line read from top to bottom – align with each string (Hartogh and Kehrer, 2014).

Recommendations given here are based upon three orchestral partnership projects presented at the Arts 4 Dementia Best Practice Music Symposium – the BUDI Orchestra (see pages 38-39), “Hear and Now” (see pages 42-43) a large cross-cultural, intergenerational Bedford partnership with the Philharmonia Orchestra and the A4D project with the English Chamber Orchestra and London College of Music (see pages 40-41 and Appendix 3), with music for dementia guidance from Julian West, head of the Royal Academy of Music’s Open Academy.
An outgrowth of the orchestras’ learning programmes, these projects bring together a variety of expertise in music for dementia, involving professional musicians, dementia training, music student volunteers, intercultural groups, to engage people with dementia and their carers and provide new experience, therapeutic relief and exhilaration through making music.

10.1 Musical Team

A dynamic musical director, keen to understand and explore ways to override participants’ challenges and encourage their musicianship, and open to musical diversity and improvisation, will inspire success. Positive interpersonal skillsets – vision, energy, enthusiasm, team spirit, open-minded, patience, with a flexible and sensitive approach will draw out and developing participants’ strengths within a harmonious ensemble.

To heighten the sense of community and purpose, having a composer in the team – whether this is the conductor, pianist, composition student or combination – will help participants to create a piece for performance.

Most orchestral programmes for dementia are partnerships, involving professional musicians and music students wishing to learn to extend the use of their music for the benefit of a wider community. Their understanding of the instruments participants with dementia and carers will be playing should enable them to guide participants with dementia and carers, so that if it is an unusual instrument they can adapt techniques to harmonise with the instrument, or a new learner, they can demonstrate and provide individual assistance to play it. One-to-one support from student volunteers, under supervision of professionals has the multiple benefits of helping the musician with dementia, feedback on potential improvements, equipping the student to work as community musicians for this cohort in future, and to spread the practice.

If other groups, cross-cultural music groups, children, youth bands, join the project, mentoring will help them understand and feel comfortable with people affected by dementia. Allow time to build musical relationships.

Dementia awareness training for musicians and student volunteers (see Appendix 2 page 81-83), explains the challenges people face as the different types of dementia set in, their communication needs, existing musical skills and how to draw these out. Guidance from a musician with substantial experience working with people affected by dementia provide insight into approaches best suited to override dementia issues, musical repertoire, adaptation, improvisation, achievable techniques and aims to inspire joyful musical expression, artistry and ensemble.

10.2 Participants and Instruments

The project manager gathers together participants with dementia and their companions, either through a partner organisation or the local memory service or Alzheimer’s Society link workers, Age UK, Young Dementia UK, Help Musicians UK or other music or arts and health organisations. Liaising with musician and family carer, the project manager will complete a participant questionnaire, to ascertain

- Instruments they play and wish to bring.
- Instruments they wish to learn.
- Previous musical experience, professional or amateur.
- Their individual technical facility and challenges, i.e. difficulty reading music, talking about it, seeing the conductor, transposing key etc.
- Whether they play by ear, improvise.
- Their preferred musical style, or genre.
- What they like to play and sing.

BUDI recommends stringed instruments for beginners, because a plucked open string creates a pure sound, so that from the outset the player can contribute to an orchestral piece, with expression.

A piano is useful for both composition and filling instrumental gaps, enabling other players to weave in and out of the music.

Advance knowledge of the musical mix helps the director as a starting point, to plan an achievable programme and select music that will accommodate the range of musical ability, techniques and skills and allow for musical progress as players’ confidence grows through increased concentration, dexterity, co-ordination and ability to watch and respond.
10.3 Adaptable Techniques

What participants bring, the sound they make, their feel will affect and inspire the direction of the overall music and the composition piece, developing this more each week.

- Establish an environment in which, for all types of dementia, playing the music comes naturally and with ease.
- As long explanations may be difficult to follow, short introductions with musical demonstration work best.
- Challenging body percussion exercises – beating knees and thighs in time to music, clicking fingers, tricky clapping sequences – help re-energise and focus concentration.
- Physical gestures – the lead player’s facial expression, nod, upbeat intake of breath or use of the violin bow – are more than usually helpful to musicians affected by Alzheimer’s, who may no longer be able to read the music and are playing by ear.
- Chose musical pieces that will encourage players with dementia to focus on the quality of sound and expression
  - Simple musical patterns enable them to be expressive, perform to a higher standard and feel their musical achievement.
- Feeling, as well as seeing and hearing the vibrations an instrument makes when a professional is playing extends the musical experience and familiarises participants with a new instrument.
- If a participant brings an unusual instrument, inviting him or her to demonstrate it empowers them and encourages fellow musicians to improvise in harmony.
- Improvise and refine “in the moment” in response to group members’ reactions and individual learners.
- While musical notation remains helpful in early FTD, sequencing – reading a phrase of notes at a glance – can be difficult. To help them and others who will be using open strings, playing by ear or improvising to the harmony, it is helpful to transpose the music into a suitable key in advance, creating and printing new and adapted scores using music notation software (see “Notation” below).
  - E flat tenor horn player with FTD found it helpful to read the bass clef as treble clef, adding sharps as necessary and to adapt the key signature to 3/4 or 4/4.

10.3.1 Notation

Notation software, notably, Sibelius (http://www.sibelius.com) enables composers to transpose and orchestral parts and scores for all musical abilities. For learners playing on open strings, BUDI uses a flip chart and points to each note, while mouthing its name.

With pizzicato, the note speaks immediately.

10.4 Repertoire

Working on a piece the professionals will be performing in a concert participants can be invited to attend, will heighten their identification with the orchestra.

- Bach chorales from the St Matthew Passion and Pachelbel’s Canon have a calm quality that inspires confidence and expression. Their contrapuntal features are adaptable to various instruments. The Bach is a good starter, with repetitive music patterns that help reinforce learning and provide opportunities to explore dynamics, crescendos, diminuendos, texture, tempo and experiment with adding different lines of harmony.
- Pachelbel’s Canon, whose bass notes are repeated with higher, layered melodies allows a variety of musical instruments to explore effects of texture and tempo. The use of pizzicato, for example, can galvanise the ensemble with an instant pluck, and the rhythm encourages those who play by ear.
- While the director will structure the programme, accommodating participants’ ideas for repertoire will give them special interest and ownership over the weeks.
- Pieces arising from their varying taste and experience presents opportunities to explore different genres of music, promote inclusivity cultural and stylistic skills.
- Playing recognisable music will bring a sense of accomplishment both during sessions and when participants next hear it.
- Steve Reich’s Clapping Music (1972), with its challenging rhythmic pattern – twelve quavers in a clapping pattern including rests, shifting the quaver along twelve times – is tough as body percussion, and only suitable for early-stage dementia. A strong downbeat helps. Stop and if possible share a collective laugh if the challenge appears too much. But for its cognitive stimulation in early stage dementia and if successful, bringing feelings of accomplishment, is worth a try.
- The opening eight-bars of Mozart’s Dona Nobis Pacem work well as a round.
- As a performance piece, Henryk Wieniawski’s virtuosic violin duo has the two violinists exploring texture, dynamics and harmonies, which stimulates participant concentrate, focus on the differences, and arouses interactive discussion.
- Haydn’s “The Joke” string quartet Opus 33 triggers participant response.
- Ravel’s Bolero as a repeated one bar, three-note pattern, simple to accompany, requires concentration to create and retain interest. While the professionals can develop a musical pattern, the violin learners can chose more than one open string to experiment and blend in and express the crescendo over the relentless pulse.
10.5 Rehearsal Structure

A robust musical programme, its clear rehearsal and performance structure flexible to participants’ needs, abilities, experience and aims, inspires confidence in the professional quality of the group they are joining; and with individual musical support on hand helps build up trust.

- Meet and greet at the venue to re/familiarise, build up rapport and group cohesion.
- Invite participants to enter the rehearsal room while members of the orchestra and students are playing, exploring musical effects. Whether Bach or Gershwin, this creates an informal yet high quality musical atmosphere that inspires participants to feel part of the group, part of the rehearsal from the start.

10.5.1 Refreshments

Welcoming refreshments can be offered at the start, as a positive opportunity for interaction, looking forward to the rehearsal. A couple sitting alone may face dementia issues after their journey and may prefer to go straight into the rehearsal room. A good time to provide refreshments encouraging interactive chat sharing thoughts about the music, is when running through the evaluation questionnaire with person and carer at the end of each session.

10.5.2 Warm Up

A Bach chorale offers a range of opportunities as an opening piece, to explore dynamics, crescendos and diminuendos

A familiar song, orchestrated to suit the group, helps warm up the body and vocal chords, and builds up confidence and ensemble.

Body percussion and other warm-up exercises can be developed over the weeks, offering greater musical challenge as the group becomes more confident.

10.5.3 Rehearsal interspersed with Recital

The rehearsal needs to build up to the performance over time at a pace that meets the members’ progress.

To keep up inspiration and take pressure off participants, intersperse group exercises and pieces with the opportunity to enjoy and focus on listening to the professionals play.

- Whether listening or playing, varying techniques and tempo engages interest and arouses discussion help to sustain concentration.
- Giving each participant a chance to lead a musical exercise builds up confidence and sense of accomplishment.

10.6 Performance

- Inviting them to conduct encourages musical expression and hand movement.
- Experiment with transposing key at the workshop to accommodate participants.
  - To avoid worrying about each note, it is helpful to focus on leading each phrase and
  - For the professionals playing unused to having to transpose music, to try transposing the music, helps understand the difficulties faced by some musicians with dementia.
- As well as the music itself, participants can be encouraged to sing and dancing to the music adds to the enjoyment.
- To create a group piece, as participants gain confidence, demonstrating or singing a few notes, a melody, improvising in harmony, a group piece will evolve, for which the musician with composition skills could arrange an orchestration.
- For example, when a violinist with dementia suddenly played “On Ilkley Moor Bar ‘at”, the Philharmonia Orchestra joined in and jammed with him. The conductor then arranged an orchestration for the group to perform in concert.
- It is helpful to record sections of the performance piece for participants to practice daily between sessions, for enjoyable distraction from dementia as well as practice.
- Closing with the opening piece that all have played or a special closing piece, both increasingly familiar, sends participants away with a warm sense of belonging.
- Evaluation questions with person and carer at the end of the session as well as observation notes taken throughout by the project manager or dedicated evaluator.

10.6 Performance

- A brief rehearsal immediately before the performance promotes confidence and comfort in the performance venue. Repetition is paramount to promote a sense of security and confidence when performing without losing the enjoyment and spontaneity when playing.
- Performing with an orchestra is exhilarating. Making music with different cultural groups, spirited youngsters expands the mind and to make music with a professional orchestra sees the fulfilment of musical desire, and for some of a lifetime’s ambition.
- Celebrating together after the performance enables participants to celebrate their collective achievement, their musical bond and enthusiasm to rehearse and perform in future.
Outcome
Creating a sense of community is a key outcome for musicians, those with dementia, carers and students. An instructive guide has now been produced (Baker et al., 2015). BU hopes to continue these workshops.

Referrals
GPs refer patients to memory clubs who recommend BUDI Orchestra. Referrals also through BUDI contacts and word of mouth.

Contact
Laura Reynolds: Tel: 01202 962771. lreynolds@bournemouth.ac.uk

Jack
A professional bass player, Jack was forced by eye cancer and dementia to leave his bands. He joined the BUDI Orchestra in 2014. As a jazz musician, he played by ear, in a circle of fifths. With his wife playing the viola for the first time since school, they find the orchestra staves off loneliness. Jack’s confidence has returned. "You are My Sunshine" is introduced. Jack laughs and performs solo, as of old. Inclining his head to hear the music, Jack recalls G F Watts’s painting Hope (1886) of a blind girl seated atop the world, her head bent to hear the music she is making from the last unbroken string of her lyre, which inspired Picasso’s The Old Guitarist (1903), etched by David Hockney (1973-75).

Elizabeth
Elizabeth, who had learned to play the piano as a child, loved going to concerts and listening to music – from Beethoven to the Beatles – with her husband George. Both are learning the violin with BUDI. Elizabeth now lacks co-ordination and understanding yet smiles throughout and the benign effect lasts into the evening and is rekindled when the couple watch the BUDI recording on YouTube. George is amazed that at 77 years old he is playing the violin with members of the Bournemouth Symphony Orchestra.
Music for dementia training workshop followed by eight weekly two-hour sessions for musicians with dementia and carers (January – March 2015) at London College of Music, University of West London, St Mary’s Road Ealing W5 5RF

A4D’s full-day early-stage dementia awareness workshop was delivered by our Dementia Pathfinders trainer Aubrey Maasdorp, with music for dementia guidance from Julian West, head of the Royal Academy of Music’s Open Academy. The orchestral sessions were attended by two pianists with dementia, each accompanied by a carer, and two musicians with young onset dementia, an Indian harmonium player and tenor horn player. In highly energising sessions, the ECO musicians adapted the programme to ease the path of each player, inviting the older pianists to conduct, improvising accompaniment and music for each participant with dementia, working out ways to overcome the various symptoms.

Repertoire
Pachelbel, Haydn, Wieniawski, Gershwin, Mozart, Brahms, Prokofiev and improvisation. Sessions opened and closed with a Bach chorale.

Creative Team
Jeremy Isaac (violin), Paul Sherman (double bass), John Mills (violin) and five further ECO colleagues (flute, violin, cello, double bass), LCM head of performance Dr Emilie Capulet and six students (violin, viola, piano, saxophone, composer Alessandro Sotgiu).

Performance
Arts 4 Dementia Best Practice Music Symposium at Wigmore Hall.

Incentive to revisit
The University invited participants to free concerts.

Impact
When invited to conduct the orchestra, the pianists with more advanced dementia showed innate musicianship, and were clearly moved by the experience. One, a former professor, was encouraged to play the piano when sitting with the LCM head of performance. The other played Mozart from memory. But it was the two younger players who interacted closely with the musicians and for whom the programme was best suited and meant a great deal. The orchestra worked with the horn player to override issues of sequencing and transposition; and the Indian harmonium player, who improvised naturally, composed a piece, which the LCM composition student adapted for instrumental accompaniment.

Outcome
The group performed Nat’s piece at the Wigmore Hall. LCM plans to continue these workshops.

Referrals
Ealing Dementia Concern

Contact
Emilie.Capulet@uwl.ac.uk

NAT
Nat, a 60-year-old former aeronautical engineer with Alzheimer’s sees music as his lifeline. He improvised on his Indian harmonium Paul’s double bass and the violinists plucking in harmony. When he brought his father’s sitar, the group experimented and learned to play it together. Working on the harmonium with a piano student guided by Jeremy, Nat composed a piece inspired by the Bach chorale. The group joined in. Alessandro recorded them and later printed an arrangement. Nat, unable to return due to a heart attack, was thrilled that the group continued to rehearse and perform his piece at Wigmore Hall.

CHRIS
For Chris, a horn player formerly in the Life Guards mounted band and founder of the Kent Police Band, music is the breath of life. Forced by heart attacks to give up the horn, he felt so bereft that on diagnosis of FTD at 58, he took it up again. Though he had never played with an orchestra, the ECO programme offered a chance to avoid difficulties he now encountered with sequencing and transposition. The ECO transposed music to suit his Bb horn and tested the experience of transposing themselves. Where Chris hit a transpositional challenge, he read the bass clef as a treble clef and added a sharp. Such was the musicians’ interest in addressing each difficulty that Chris felt confident to play with strings, widening his musical experience and restoring the pure enjoyment of music-making.

(See Appendix 4 for details of this programme).
“HEAR AND NOW” (f.2008)

Partnership between
PHILHARMONIA ORCHESTRA
www.philharmonia.co.uk
MUSIC 4 MEMORY
www.tibbsfoundation.co.uk
ORCHESTRAS LIVE
www.orchestralive.org.uk
FUSION YOUTH SINGING
www.fusionqueenspark.org.uk/fusion

A series of workshops over four to six days, at All Saints Parish Church, Westbourne Road, Queen’s Park, Bedford MK40 4LD, with performances at Queen’s Park and the Royal Festival Hall.

This cross-cultural, intergenerational project is a Bedford community music collaboration. “Music 4 Memory” (M4M, see pages 71-72) and the teenage vocal and instrumental ensemble Fusion work with Tim Steiner and Philharmonia players to create new music. Inspiration comes from discussion with participants at reminiscence and creative workshops. M4M and Fusion are joined in 2015-16 by an intergenerational orchestra combining the North Bedfordshire Youth Chamber Orchestra and Da Capo String Ensemble, a string group for adult beginners and relearners, and musicians affected by dementia, who play or have played an instrument. All participants work together to create and compose original lyrics and music, with themes and genres developing organically from small ideas into large-scale orchestral and choral arrangements by Tim. The component choirs practise weekly between “Hear and Now” sessions.

Repertoire

With the repertoire of the orchestra as the starting point, Tim and the Philharmonia players work closely with participants to produce music in a fusion of styles and genres, to reflect the cultural and musical diversity of Queen’s Park and beyond.

Creative Team

Tim Steiner (composer, conductor, music education specialist), Jeni Melia (music therapist, soprano, choral conductor), players from the Philharmonia Orchestra, Hazel Gould (librettist).

Impact

A huge yet cohesive intergenerational community making music together, with highly experienced musicians focussing participants’ abilities, has enabled and supported participants to be part of a spectacular project, inspiring hope, energy and the belief that they can be fully engaged, learn and take creative risk. Philip, a violinist with dementia had retained his skills and joy in playing. A former flautist, who suffered from depression, and had not played for forty years, was moved to ask his wife retrieve his flute so that he could play with the Philharmonia’s flautist. The partners’ shared vision and commonality of purpose built up over the years draws the group together.

Outcome

High quality public performances showcase “Hear and Now”’s cultural and musical diversity.

Referrals

GPs, memory clinic, self-referrals.

Contacts

Fflur.Huysmans@philharmonia.co.uk. Tel: 020 7921 3925. Sarah Russell; tibbsfoundation@hotmail.com. Tel: 07795 177948

PHILIP

A violinist who used to play in a band, could still play by ear after he was diagnosed with Alzheimer’s when he joined “Hear and Now”. Tim and Philharmonia musicians often took a lead from him; and on one occasion he began playing “On Ilkley Moor Bar T’at” and they joined in and jammed with him. Tim then arranged a sophisticated orchestration for the group for their concert, starting with the Philharmonia players and young musicians, then Philip naturally joined in, then all sang as though it were an informal jam in a workshop.

Philip has since died, but seeing him play and speak in the “Hear and Now” film inspired Arts 4 Dementia to set up an orchestral programme for dementia, the music symposium and the present report.
This music session is part of a monthly programme using different sensory stimuli to make connections to the heritage setting and the people who lived and worked in our palaces.

In the 90-minute Tudor Music session, which Historic Royal Palaces (HRP) participants are welcomed in the community room at Hampton Court Palace, the session topic is explained with a simple welcome song. Through storytelling they explore popular music and dance of the Tudor era. Participants join a procession accompanied by the sound of the pipe and tabor, into the Great Hall. Here they are introduced to the instruments of the court and King Henry VIII’s famous musical composition “Pastyme with Good Company”. They learn an adaptation of the Pavane dance and perform it to Tudor music in the Great Hall.

Creative Team
Jana Haragalova and Kim Klug, HRP learning producers co-ordinate the programme with freelance musicians.

Impact
As well as fostering relationships and access to Hampton Court, which may be a first encounter with HRP, Tudor Music had a considerable impact on participants’ health and wellbeing. They reported experiencing positive changes in mood caused by the calming effect of the spaces and activities, being immersed in the creative media (music, movement, mark-making) and participating in stimulating group discussions.

Referrals
Alzheimer’s Society, Richmond.

Contact
Hollie Liu, Dementia Support Worker, Richmond. Hollie.liu@alzheimers.org.uk. Tel: 020 8877 0033.
< Keep Learning >

- Participants’ musical skills are developed and enhanced as a direct result of their involvement.
- A rare instrument brought by a participant encourages the group to learn and harmonise together.

< Give >

- The empathetic nature of student volunteers towards participants and their willingness to learn is important to each project.
- Mentoring younger members of the team helps build musical relationships and makes learning easier and fun.
- Engaging players so that each voice is heard enables them to feel comfortable and at ease within the group.

Progression with musical learning was clear for some people with dementia.

This gives them a sense of achievement and increased confidence. (Professor Innes, BUDI)

Music is a gift from God, instinctively inside us.

(Professor Innes, BUDI)
11 Opera, Choirs and Singing for the Brain

Our voice is our most accessible musical instrument. Singing does wonders for our wellbeing, our psychological and social status. Expanding the diaphragm, deep breathing increases oxygen to the brain, releases endorphins and makes us feel better, and the joy of song raises our spirits further. Singing together as a choral group brings people affected by early stage dementia out of isolation, encourages communication and can help preserve speech. Social interaction between singers heightens vigilance and concentration; and part-song brings opportunities to form new friendships, which in turn enhance the relationship between person and carer. Regular choral activity can have long-term emotional and cognitive benefits and transform their quality of life. As such, singing reables people affected by dementia.

The cognitive demands of singing involve verbal learning and retrieval to remember words, and motor planning and implementation for voice production. This engages prefrontal areas of the brain and improves verbal and episodic memory. A University of Finland study into the cognitive, emotional and social benefits of regular musical activities in early dementia found that singing not only improves mood, orientation and remote episodic memory, but also enhances short-term and working memory (Särkärmö, 2013). Furthermore, the use of muscles in the laryngeal region, face, throat and chest, strengthens voice production and improves lung activity, capacity and posture.

Like orchestral playing, singing highlights abilities, encourages people to express and explore emotions. Challenging vocal exercises, repetitive so not too demanding on memory, are achievable, likewise improvisation exercises, designed to elicit spontaneous communication in song. High quality musical communities using their voices to bond together in choral harmony each week, creating a song cycle, working towards a performance build up a compelling sense of purpose and ultimately, accomplishment.

Whether learning opera, singing familiar songs, humming, moving to the rhythm, experiencing a comforting connection with the musical tonic or experimenting with atonal sounds give participants a concentrated focus. Examples given here of weekly singing, include choirs, groups singing and creating opera projects, Singing for the Brain, choirs for people with young onset dementia and choral groups inspired by art.

If carers have had no choral experience, the idea of singing as rehabilitation may not have occurred to them, but the joyful improvement in wellbeing and relief of psychological stress at home could enrich families affected by dementia with a compelling new interest, social group and joyful lease of life.

11.1 Aims and Objectives

The aim of all singing sessions is to engender a warm, welcoming and creative community spirit, within a safe setting, and encouraging participants to spend time together, often over tea or coffee.

Best practice

- Weekly choral and creativity sessions.
- Assignments, with CD, to practise at home encourage
  - Enjoyable music-making together.
  - Help relieve stress of dementia for person and carer.
  - Practice which helps learn and remember parts.
  - Sense of purpose towards the next session and performance.
- Concert performance.
- Songbooks and CD or DVD of final performance.
  - To encourage continuation of music-making at home.
  - As incentive to rejoin next choral programme.

11.1 Musical Team

Ideally, at least two creative professionals should lead each group – for choirs a conductor or choir leader and an accompanist, and including music students, who can assist and learn from the experience to spread the practice.

To create a song cycle or musical theatre, the full team will be expanded to involve workshop leaders experienced in opera, drama, poetry, costume, and a range of arts and crafts and local arts students. The opera companies point out that it is best to work with just a few professionals at each session.

11.1.1 Training and Mentoring

So that all team members understand and do not underestimate participants’ abilities as well as their challenges and to assure high artistic quality, focussed training is essential. To give the creative team insight and understanding as to how best to plan the project, training should cover

- The challenges and existing skills of people affected by the various types of dementia.
  - How best to access these through music and communication.
  - Effective signage, colours.
- The concept and delivery of the musical programme.
- Using song as a vehicle for expression and participants’ feelings.
50

11.2 Participants

Workshops will be led by one or two professionals – singing usually benefiting from accompaniment – and assisted by music student volunteers.

As participants with dementia may include those with young onset and all projects invite carers – partners, children and grandchildren, and professional carers – there is likely to be a wide range in age, musical skill, background and nationality.

11.3 Adaptable Techniques

- To simplify the melody line and encourage expression, words may be adapted and ornaments and tricky upbeats removed.
- It may be helpful to transpose the key so that singing is comfortable for the older voice.
- To adapt a piece of repertoire, it can be fun and interesting to have pairs of people experiment in the use and the various ways it can be expressed in song, for example, “Viens” in Don Giovanni.
- As reading the music may have become difficult, the use of gesture, using hand, arm and eye, can serve as a prompt for words and melody.
- For those with frontotemporal dementia whose reading abilities are less affected in the early stages and for carers of all participants to practise together at home, it is helpful to provide large font words to songs rather than musical notation.

11.4 Repertoire and Content

Participants’ ideas, feelings and experience and the inspiration and expertise of the professionals are integral to the content of each project.

To help improve the quality of singing and performance, it is empowering and life-affirming to help develop new skills, working on vocal colour, dynamics, expression and characterisation.

The diversity of age, background, musical experience and skill allows a wide range of music to be explored and has the potential to create exciting new and inclusive work together.

While singing familiar songs and choruses encourages participants and ensemble, composing new songs together is a key factor in heightening concentration, focus, camaraderie and community engagement in creativity and choral singing.

Glyndebourne’s “Raise Your Voice” and Scottish Opera’s “Memory Spinners” choose an opera from the company’s current production as the hook for the project, and “Turtle Song” chooses a theme with participants, which may relate to the venue – for example, the nearby sea, or paintings in a museum - and intersperse this with a variety of songs, the musical inspiration and ideas for new music stimulated by participants’ experiences, interests and imagination.

11.5 Rehearsal structure

- Group leaders maintain a regular structure to keep workshops focussed.
- To nurture community spirit from the start, greet everyone with refreshments, so that new members feel welcome from the first.
- Start and end with the same song, special to the group.
- Interspersing group practice with recital or example by professionals or student singers – especially, near the beginning and end - can add inspirational lift.
- Include memorable and familiar songs helps relate to participants’ lives.
- Each week, practising songs created over previous sessions celebrates achievement and community spirit and helps memory and progress.

11.5.1 Warm-up

- Warm-up exercises – standing or seated in a circle - stimulate the body, voice and mind, and engage all participants together from the start.
- Vocal exercises – being repetitive as they climb up and down the scale – can happily extend to dominant sevenths or other challenge, with the build-up of breath heightening wellbeing and confidence.
- The character of the exercises can relate to individuals, the opera themes and revisit songs or story already developed.

11.5.2 Creating Musical Theatre

Opera involves story and narrative, composing and conducting, set and costume. The outline for participants with dementia should be brief.

When selecting the elements to use, whereas it is best not to focus on upsetting topics – such as, death or infidelity or confusing aspects such as disguise or gender change – positive anger, jealousy, dark emotions and the trials of first love offer scope for characterisation, reminiscence and artistic imagination.

Small groups work best to generate lyrics, each group in response to a question thinks up descriptive words. Each group’s ideas can be swiftly recorded on a flipchart and put together to create a longer line. On the principle that every idea is valuable, “Turtle Song” advises that the first suggestions are used. This encourages a fun and easy process.

As a starting point for the music, the composer or director may give a chord sequence, on which to base and help construct melodies.
Participants sing a short phrase, which the composer translates on the piano. Physical actions can be added to help remember the songs. Participants and students performing together give intergenerational lift. The song lyrics can be typed up and shown on a screen as prompts, and the song recorded for practice at home as stimulation between sessions.

Opera workshops also include elements of choreography and crafts, as well as reminiscence work to interlace into the theme or song cycle.

With a choreographer, improvised sections can be punctuated by more structured choreographed dance.

The variety of practical craftwork, designing and making costume and parts can accommodate the skills of all participants, encouraging them to work together, again in small groups or pairs, on creative elements that interest them.

However, the opera groups advise that rather than try too much too quickly, it is more productive to spend longer on activities and fit fewer into the session, than to cover every creative aspect each week.

11.5.3 Recording progress

It is helpful to record aspects of workshops and to share these with participants, for stimulation and practice between sessions and when the project is over. Between sessions, professionals notate and refine the material to accommodate individual participants’ needs and skills and plan the development of the musical project.

11.6 Performance

Concerts or sharing performances with invited audiences, whether in community halls, conservatoires or at key performance venues, are an incentive for participants, their identity in a musical ensemble. The performance itself, a choir now singing with an orchestra maximises the musical experience and their own sense of accomplishment. Memories of the performance, the group experience will remain and provide new opportunities for joyful reminiscence, pride and association with high quality music.

11.7 Post Performance

Keeping in contact, having a follow-up after the conclusion of the project to watch the DVD of the performance, or inviting participants to revisit for other events at the venue is beneficial for everyone in the group, a valued socialising opportunity.

Trainee workshop leaders have the experience to help plan new choral or opera projects to spread the practice.

“We have very high expectations of our participants – it’s not a singalong.”

“The music touches your heart.”

“It’s about expression and using the songs to be a vehicle for how they are feeling.”

“I feel like a human being again.”

“It awoke something that was dormant in my husband, gave him a whole month of pleasure.”

“I could see from his face that he was absolutely loving it and totally engaged and because he loves the Italian language it had even more resonance for him.”

“RAISE YOUR VOICE” (f.2007)

www.glyndebourne.com

Annual cycle of twenty sessions across four seasonal terms at Beechwood Hall, Beechwood Lane, Cooksbridge, East Sussex BN7 3QG, with performance sharing at Glyndebourne.

A partnership between Glyndebourne’s education department, the Royal Academy of Music and the Alzheimer’s Society, “Raise Your Voice” takes as its inspiration an opera from Glyndebourne’s Festival or Tour programme. Participants, as an operatic chorus, learn the context of the opera, create elements of costume and set design, compose text and music in response to the opera’s themes, and listen to artists sharing skills as singers and musicians. Each January a new project begins at Beechwood Hall. A CD is cut at the end of each term for singing practice and enjoyment between sessions. The programme concludes with intensive five-week winter workshops, building up and bringing together all facets of the opera project at Glyndebourne itself.

‘Raise Your Voice” aims to provide a high quality, enjoyable social activity, improve participants’ sense of self-worth, enables carers to share experiences and offer mutual support, provide enjoyment, stimulation and creativity in a safe, accepting setting, improve participants’ confidence to continue social activities and enjoy expressing themselves through music.

Repertoire

A well known opera as springboard, with songs that relate to the theme.

Creative Team

Jane Haughton (choirmaster), Freya Wynn-Jones (director), Sam Glazer and Julian West (music directors).

Performance

Mildmay, Glyndebourne.

Incentive to revisit

Opera screenings, dress rehearsals of other education projects, summer picnic with singers, children’s concert, garden and backstage tours at Glyndebourne.
Impact
Participants feel valued, involved and confident, singing with the Glyndebourne team. Learning new skills at a time when they may be losing a faculty, can be life-affirming.

Outcome
Involvement with the opera group programme and opportunities Glyndebourne opens up gives participants a feeling that they have a meaning to life and that it is worth living again.

Referrals
Alzheimer’s Society, East Sussex County Council Carers Break Project, ESCC Project Kindness, Lewes and Seaford Dementia Supper Clubs, Sussex NHS Partnership Trust.

Contact
Chris Stones, Glyndebourne Education Department: 01273 812321.
education@glyndebourne.com

“Raise Your Voice” © Glyndebourne Productions Ltd. Photo: Sam Stephenson

CARER
This is a very special project. My mother-in-law absolutely loves coming – it is a real highlight of her week. I really appreciate the respect with which the participants are treated, down to the details of good coffee and biscuits. Everyone is given a very warm welcome. All the helpers are so positive and encouraging and look as if they are enjoying themselves too.

Being in the beautiful environment and having so many musicians and singers to help in the final term is wonderful. As Glyndebourne is a special place it makes the participants feel special too.

We are on a journey here together. We are creating something, something which we can be really proud of.

It helped me find my dad again. I’d lost him for a while to this illness. I had fun with my dad. Real, proper grown up fun. It’s been wonderful affirming experience for both of us.

“Memory Spinners” provides a high quality programme involving elements of the various art forms of opera – choreography, storytelling, movement, craft, film and photography. Workshops integrate aspects of participants’ personal stories into a music theatre performance, using extracts from current Scottish Opera repertoire. Participants are invited back to watch the DVD of their final performance

Repertoire
A well known opera as springboard – most recently Gluck’s Orfeo, Puccini’s Madama Butterfly, Gilbert and Sullivan’s The Pirates of Penzance, Puccini’s La Bohème – interspersed with participants’ songs relating to the theme.

Creative Team
Deborah McArthur (director), Marie Claire Breen and Stephen Faughey (vocal specialists), Mathew T Brown (music leader), Barbara Ridley (visual art and design).

Performance
Staged sharing in costume on set at Scottish Opera Production Studios.

Incentive to revisit
Participants are invited to Opera Unwrapped, an hour-long taster from the set of each Scottish Opera production, involving singers, orchestra and back-stage crew.
Impact

Participants value the social interaction and intergenerational sharing involved in working together to create the show, surprising the creative team by their achievements. Their anxiety is reduced and cardiovascular fitness, physical mobility, mood, concentration and relaxation improves. Carers find mutual support.

Outcome

Scottish Opera is now planning a high-calibre training programme in opera for dementia, for volunteers and carers, to enable them to spread the practice to dementia groups across Scotland. The creative team will receive up-to-date training from Alzheimer Scotland.

Referrals

Alzheimer’s Scotland.

Contact

Jane.Davidson@ScottishOpera.org.uk  Tel: 0141 332 9559.
Audrey.blake@scottishopera.org.uk  Tel: 0141 352 4002.

“TURTLE SONG”  (£2008)

www.turtlekeyarts.org.uk/index.php/turtle-song

A ten-week song cycle programme devised by Turtle Key Arts (TK) in partnership with English Touring Opera (ETO) and the Royal College of Music, offered in London and around the UK

“Turtle Song” offers a creatively challenging framework that involves drama lyric writing and composition, culminating in a public performance. Led by a composer and a director, the group work with participants with dementia and their carers alongside music students to create a new song cycle. “Turtle Song” allows people to rediscover their creativity and provides social interaction, a positive outlook through shared activity, whilst stimulating both brain and body. Pastoral staff are provided to organise transport where needed. Past projects have taken place in Cambridge, Leeds, Newbury, Norwich, Oxford, Reading, Stockton-on-Tees, Suffolk and Wolverhampton.

Projects follow a model that encourages participants to not only sing songs, but engage fully in their creation and then to perform them to an invited audience. The group tends to write one song per session as well as rehearse songs written in earlier weeks. The process often involves dividing into small groups, each involving a student and ensuring that everyone can have individual input. The final performance is recorded on CD and DVD which allows the participants to revisit the songs and the experience after the end of the project. The model allows space to experiment with music ideas, encourages movement and dance for the more mobile participants and creates a joyous community where the boundaries blur between carer and participant.

Themes

There is usually a theme that ignites the ideas for the song cycle, as well as major deviations. Recent themes include The Sea, The Odyssey, Folk Stories, Vices and Virtues, A Mysterious House, A Picture in a Frame, An Elopement or The Objects in the Wolverhampton Art Gallery

Creative Team

The project mentors, Tim Yealland (ETO), Charlotte Cunningham (Turtle Key Arts), RCM Sparks, find teams to lead each project and train composers, directors and students, with the aim of developing a

Figure 4 Brainstorming reminiscence ideas for the final opera scenes.
larger groups of animateurs, so that more artists can run more projects around the UK. Music students gain insight into how to lead the work. Recent project leaders include: Tim, Carolyn von Stumm, Hazel Gould, Anna Jewitt, Alice Knight, Cassie Friend, David Calcutt, Alyx Kihl (directors) and Rachel Leach, John Webb, Jon Petter, Ruairi Glasheen, John Barber, Russell Hepplewhite, Danyal Dhondy (composers).

Impact

Each “Turtle Song” project benefits up to 40 participants and carers, trains new leaders and up to ten music students or young musicians. It has a significant impact and informs local networks about dementia and ways to include those living with it in activities: the host venue or theatre, local music college/course, occupational therapists, social workers, GP's, Alzheimer’s Society, Admiral nurses, care home staff and family support networks.

Outcome

- Creates new experiences and memories among participants, enabling them to forge new memories together, and sense of community.
- Helps people with dementia to deepen and broaden their self-narratives through active recall in an artistic context.
- Increases a person’s quality of life and a sense of self.
- Gives participants the experience of these cumulative or enhanced modes of interpersonal communication where mundane interaction is transformed through a shared goal.
- Changes the outlook and expectations of carers and students towards those with dementia.
- Trains students and artists to extend the work after the end of the initial project.

Turtle Song has led to the “Visual to Vocal” programme, creating music inspired by paintings at Dulwich Picture Gallery (see page opposite).

Future Locations


Referrals

Alzheimers Society, other dementia charities, Admiral nurses, occupational therapists, family support groups.

Contact

carlo@turtlekeyarts.org.uk, Tel: 020 8964 5060.
tim.yealland@englishtouringopera.org.uk, Tel: 020 7833 2555.

It's nice to come to the gallery. It offers material that draws everyone. It's exciting.

Participant

You can feel the community that's working behind, allowing us to create a little community when we come together.

Carer

The special thing here is the most amazing paintings and working with people from different generations.

ETO director Tim Yealland.

When its song, when it's poetry, there is no Alzheimer's it's all her, she's very much with it, engaged with the art and with the songs.

Carer

I don't really think of them as having dementia. They're just normal people.

Dulwich College boys.

Some delightful relief, a sense of pleasure and it just stays with you for some time. It's lovely, the thought of it.

Participant

It's using the creative spirit to genuinely feel alive.

Rosie Cooper, DPG Co-ordinator

“VISUAL TO VOCAL” (f.2012)

Partnership

DULWICH PICTURE GALLERY
www.dulwichpicturegallery.org.uk

DULWICH COLLEGE www.dulwichcollege.org.uk

ENGLISH TOURING OPERA www.englishtouringopera.co.uk

Seven two-hour practice sessions, final rehearsal and public recital at Dulwich Picture Gallery, Gallery Road, London SE21 7AD.

This annual intergenerational programme at which participants create an operatic cycle is based on the “Turtle Song” model and inspired by pictures in the galleries. The “Visual to Vocal” team encourages participants to look more deeply at the pictures and discuss them with the gallery’s art historian, to identify themes for an opera. In the studio, working with composer, singer, musicians and director, participants suggest words and phrases to capture their observations and create lyrics and music, practise and develop their songs. The public recital at the gallery is a very exciting interactive and fulfilling moment for all participants.

Creative Team

Tim Yealland (ETO writer/director), Rachel Leach (ETO composer), Abigail Gostick (mezzo soprano), Ralph Clarkson (trombone), Philippa Owen (art historian).

Impact

Participants, excited by the energy and purpose of creating an opera inspired by masterpieces of art, and with the exuberance of the Dulwich boys, demonstrate a sustained increase in wellbeing and joie de vivre.

Referrals

Dulwich Picture Gallery community groups and Alzheimer’s Society.

Contact

Michelle Weiner, Community Engagement Manager, Dulwich Picture Gallery; m.weiner@dulwichpicturegallery.org.uk, Tel: 020 8299 8734.
Performances
National Museum Cardiff, Lysaght Institute Newport, Dinas Powys parish hall, Weston Studio (Wales Millennium Centre), Dora Stoutzker Hall, Hoddinott Hall, Caerphilly Castle.

Impact
A community of singers who come together to have fun, laughter in a very safe space, to dare to be the best they can, to build new memories as a couple and to perform.

Referrals
Newport@alzheimers.org.uk. Tel: 01633 665110.
cardiffandvale@alzheimers.org.uk. Tel: 02920 434960.

Contact
Sarah Teagle. Tel: 02922 362064; hello@forgetmenotchorus.com

"FORGET-ME-NOT CHORUS" (f.2012)
www.forgetmenotchorus.com

A Welsh choir with weekly rehearsals on Monday evenings at Bethany Baptist Church, Heol Uchaf, Rhiwbina, Cardiff CF14 6SS and on Wednesday evenings at Lysaght Institute off Corporation Road, Newport NP19 0RA.

Each weekly rehearsal lasts two hours and is singing led with other creative arts activities such a concerts, dance and writing. The “Forget-me-Not Chorus” work on projects throughout the year, each designed to take the participants on a journey together with the person they love, showing that a good quality of life can be achieved together, despite dementia, and then through an ‘end of project’ performance sharing this with their wider friends and family.

The “Forget-me-Not Chorus” aims to empower both people with dementia and their families to use their voice in song to express themselves and to use the power of music to provide an escape from the everyday caring routine – providing a sense of normality, giving families a positive experience of being together.

Repertoire
Well-known songs. Choristers rehearse in harmony, focus on diction, dynamics and transferring text to the audience.

Creative Team
Mezzo soprano and vocal animateur Kate Woolveridge was named Inspirational Woman of the Year in 2012 for her work with the Forget-me-not Chorus; Dyfed Wyn Evans (choir leader, Newport); Jan Ball (pianist), David Harrington (composer), Lou Osborn (writer).
A programme of poetry and song at Wigmore Hall and the Royal Academy of Music, comprising six workshops, with recording plus supported visits to two concerts

Weekly two-hour sessions begin with social chat over refreshments to re-introduce group members to each other and share poetry and ideas, vocal warm-up exercises guided by musicians, gestures, movement, interaction, making eye contact. Participants learn songs with live music, use favourite texts and write their own poetry, which they set to music, with improvised percussion accompaniment. This is then performed and recorded on stage at Wigmore Hall. Participants receive a copy of the recording and are invited back to concerts at the Royal Academy of Music (RAM) and Wigmore Hall.

Repertoire

Well-known songs “Come Live with me and be my love”, “How do I love thee?”, Edward Lear “There was an old man with a beard” sung as an Irish jig and “Belle Mama”.

Creative Team

Julian West, head of RAM Open Academy, RAM fellows and students, Kate Whitaker, Wigmore Hall; Kathryn Gilfoy, Director, Westminster Arts’ Resonate programme.

Impact

RAM musicians inspire a creative experience for participants to share. Enhanced sense of identity and achievement.

Referrals

Through Westminster Memory Service, Dementia Advisory Service and other local partners.

Contact

Kathryn Gilfoy. Kathryn@westminsterarts.org.uk

“MUSIC FOR THOUGHT” (f.2013)
Partnership between
WIGMORE HALL
wigmore-hall.org.uk
RESONATE
westminsterarts.org.uk
ROYAL ACADEMY OF MUSIC www.ram.ac.uk

Annual series of four opera workshops sailing down the Regent’s Canal on Tuesday mornings in May

Each weekly two-hour trip to re-energise and inspire families affected by early to mid stage dementia is led by young opera singers, who set the scene with an aria as the boat departs and encourage participants to sing vocal warm-ups, breathing and facial exercises as the boat rises and sinks in the loch. Operatic songs and solos are interspersed by group exercises, call and response, operatic and operetta choruses and sing-alongs with body percussion. All enjoy an unusual experience and heightened focus in the long dark tunnel, absorbed by remarkable reverberations and echo over the water as the singer performs an aria from La Bohème, Carmen or Orpheo and Euridice. They rejoin the singing, acting out gestures to illustrate the choruses, hum and add lyrics, singing songs chosen to blend with the theme of the session, as the boat continues its leafy architectural journey and moors by the canal side.

Song sheets and web links are given for practice between sessions.

Repertoire

“Brindisi” from Verdi’s La Traviata and Gershwin’s “I’ve Got Rhythm” as stretching exercises, “Oh What a Beautiful Morning” as warm-up and close, “Habanera”, “Toreador Song” and “Seguidillo” from Carmen; energising exercise from the overture to Rossini’s William Tell, “Humming Chorus” from Puccini’s Madama Butterfly, “Chorus of the Hebrew Slaves” from Verdi’s Nabucco, Tchaikovsky’s Eugene Onegin, Handel’s Messiah, “For he’s gone and married Yum Yum” from Gilbert and Sullivan’s The Mikado, Fauré’s “Après une rêve”, singalongs “The Water is Wide”, “Moon River”, “Edelweiss” and “You are My Sunshine”.

Creative Team

Vivien Conacher, mezzo soprano, and her team of opera singers.
Impact
The health benefits of the physical and mental exercise and the emotional impact and challenge of singing opera on the water delights all participants, the re-energising effects lasting for days.

Referrals
Islington Dementia Navigator Service. Tel: 020 7561 4409. charlotte.dick@candi.nhs.uk
Islington Memory Service. Tel: 020 7561 4198. helen.souris@candi.nhs.uk
Alzheimer’s Society Islington. Tel: 020 7561 420. islington@alzheimers.org.uk

Contact
Maura Hamer. Tel: 020 8780 5217. admin@arts4dementia.org.uk

DAVID HAWKEY
David, a science researcher who had worked for 27 years at Shell, was, with his wife Pauline, the life and soul of many Arts 4 Dementia projects. Aboard the Angel boat, always anticipating the workings of the lock and the upcoming long tunnel, he sang with gusto, his voice deep and resonant, the zingier the song the better, “a-baby, one, two three”, tapping his hands to the beat and conducting. “When is the Hebrew chorus coming?”

Despite the challenges of frontotemporal dementia, his memory was undented and each song, especially Verdi, triggered an anecdote – he may have sung it at the Bedford College choir the couple still attended, or heard it at the opera. Uplifted by the music, mischievous, relaxed and safe on the boat, free from usual dementia issues, he showed interest in the singers and their current projects. “We just can’t get enough of this! It is just the most magical thing. It stays with us for days after,” says Pauline. “It’s a great source of conversation with our friends.”

David died shortly afterwards. We miss his dynamic company.
The “Harmony” choir programme is tailored to suit people with young onset dementia (YPWD), aged 65 and under at time of diagnosis. Founded by occupational therapist Claire Watts (with the backing and support of YPWD Berkshire West, herself a choral singer), the choir builds on techniques used in Singing for the Brain sessions, using songs that often evoke past events to harness the power of music to enable participants to express themselves and improve their language. Singing songs which they remember from their teenage years lifts participants above their stressful symptoms, provides enjoyment and social support with singing that helps focus attention and highlights participants’ abilities.

**Repertoire**
Songs from the 1960s and 1970s.

**Creative Team**
Sabrina Findlay, choir leader and pianist, with support from YPWD staff and volunteers.

**Performance**
Harmony holds performances throughout the year and links up with the local Bel Canto Chorus for the annual Christmas concert.

**Impact**
The therapeutic impact boosts mood and wellbeing, reviving happier memories for all participants through the songs. Having the routine of going to choir and its structure help increase confidence and sense of belonging. Physical benefits are focussed on breathing techniques and posture; and learning new songs and harmonies help to boost self-esteem.

**Contact**
Charlie Draper, operations manager, YPWD Berkshire West; Tel: 01188 9495101 or 07500 806385. charlie.draper@ypwd.info

"WALES YOUNG PERSONS WITH DEMENTIA CHOIR"
(f.2011)
Head4Arts
www.head4arts.org.uk
Alzheimer’s Society
www.alzheimers.org.uk
Weekly rehearsals on Thursday afternoons
At Llanyrafon Church Hall, Cwmbran, Gwent NP44 8RA and At RAFA Club, Merthyr Tydfil CF48 1BA

The two choirs, which began as an Alzheimer’s Society pilot programme for young people with dementia in Gwent, have flourished under the leadership of Helen Woods from Head4Arts, now also under the leadership of Ros Evans, with over 30 singers with dementia and their carers in each choir. In the relaxed informal atmosphere, participants feel empowered and their mood lifted, singing together at rehearsals with others in a similar situation.

**Repertoire**
Variety of songs, from Tom Jones’ pop classic “Delilah” to show tunes “Any Dream will Do” and “Singing in the Rain”.

**Performance**
Llanyrafon Church Hall, Cwmbran; Blaenavon Heritage Music Festival; St David’s Hall, Cardiff (Welsh Proms 2013).

**Impact**
Attendance has grown from fifteen couples in one choir to thirty couples in each choir per year. Participants regard the group as family, and find that the choir enables them to stay active and independent.

**Referrals**
Referred on diagnosis from Alzheimers Society, Gwent and Cwm Taf.

**Contact**
David Jones (Head 4 Arts). Tel: 01495 357815. info@head4arts.org.uk, merthyr@alzheimers.org.uk, gwentyounger@alzheimers.org.uk
< Connect >

- Most singing projects are partnerships, a collaboration of expert musicians, volunteers and dementia services.
- Each project creates a sense of community and, importantly in view of the isolation felt by families with dementia, opportunities for new friendships.
- People of all ages, backgrounds and skills come together to sing.
- Singing and making music with family is a positive activity to enjoy together, blurring the space between carer and cared for.
- Singing involves reciprocal communication through music.
- Singing encourages expression and can be a vehicle for people to express their feelings.
- Breaking up into small groups or pairs allows for more intimate interaction and enables person and carer to work together and develop the theme between sessions.
- Words and melodies suggested by participants enable them to take ownership of the project and what they are learning.
- Creating opera combines experience of a range of art forms and interest for participants.
- Everyone in the room is part of the creative team.

< Be Active >

- Engaging in song exercises the brain and can maintain cognitive ability.
- The involvement of gestures rather than printed music heightens the activity.
- Singing and dancing to music improve physical health, heart rate and emotional wellbeing, the gentle aerobic activity helping to improve and maintain neurological pathways.
- Homework to practise between sessions is an enjoyable active means to lift the psychological burden of living with dementia and to maintaining memory.
- The positive exercise of brain, body and voice in singing opera enables singers to remain active in the community for longer.

< Take Notice >

- Singing lifts participants' mood, helps restore personal identity.
- Choral singing exercises and improves memory and encourages singers to focus and concentrate.
- Participants with dementia perceive musical emotions and storyline through song.
- Their shared ideas are amplified into group ideas to inform each project.
- Each project creates new creative memories for all participants and shows that a good quality of life can be achieved together despite dementia.
- The experience transforms the conceptions and often exceeds expectations of carers, students, professionals and audience with regard to the creative capabilities of people affected by dementia.

< Keep Learning >

- Participants with dementia are encouraged to learn new songs.
- Led by inspiring leaders, participants learn to develop new musical techniques to encourage expression.
- Participants learn to create new music.
- The opportunity to learn to sing and experience the creation of opera with high quality creative artists energises participants.

< Give >

- Choirs provide social support to families affected by dementia.
- Volunteers give their time to enhance the experience.
- Professional musicians give time and expertise to further the experience of volunteer students and enrich the lives of families affected by dementia, restore confidence and skills through a high calibre musical experience.
- Projects provide a stimulating experience leading to high quality sharing.
12 Music Therapy

When words fail, music speaks (“Music 4 Memory”, 2013). Although developments in music therapy research (see page 00) and individual therapy are not the subject of this report, music therapy can be of great help in enabling people to express deep emotions and worries whenever needed and from the earliest moment, from diagnosis. Individual feelings about dementia, deeply distressing and beset by confusion can be overwhelming and hard to articulate. Music, whatever the genre – pop, folk, classical, rock, or other – in connecting with the motor sense in the brain, can motivate people to express their feelings.

Community Music Therapy Groups offer psychosocial support to people with dementia and their carers, using elements of music to meet their psychological needs. Music therapists aim to encourage communication through movement, instruments and voice, according to each individual, inviting relationship through verbal and nonverbal means, breaking isolation and empowering individuals through music, though no prior musical ability is required.

Improvising with elements of pitch, rhythm, tempi, timbre, mood, song or silence, music therapy participants are encouraged to interact and communicate. Through music, song and dance, they become reconnected and feel valid beings who can speak and be heard.

“Maybe it’s not all about loss. Human beings are so adaptive, resilient that we can fill in the gaps,” Jenia Melia explains. “Where the logic has gone then passion can come in, emotion can enter our lives, and we can think about other dynamic ways of communicating, of creating. We can understand ourselves as creative, emotional beings” (Music 4 Memory, 2013).

As with creative learning activities described earlier, music therapy works with people’s existing abilities, cultural and musical resources to help draw out and preserve identity, restore sense of self, relationships and joyful interaction, and encourage a life of musical companionship.

However, the focus of each group music therapy session is communication, spontaneity and self-expression of feelings in the moment, rather than working towards a performance (Harbron, 2013), though one of the two community music therapy groups featured here both of which use musical instruments, percussion, conducting, song and dance, does also perform.

(See page 91 for Universities Providing Education in Music Therapy).
Creative Team

Jeni Melia (soprano, choral conductor, music therapist); The Elastic Band (accordion, clarinet, flaut, violin, guitar and keyboard).

Performances

M4M gives four concerts a year, including a Christmas Extravaganza at All Saints Church and local festivals. Performance opportunities are extremely validating for some participants and an important part of building community awareness, though people do not have to take part. Concerts are informal, relaxed and interactive.

Impact

M4M provides a warm, positive, caring, joyful atmosphere where everyone is accepted, acknowledged, valued and respected. To families affected by dementia, M4M is the highlight of the week, an uplifting activity they can engage together, with beneficial effects for both person and carer long after sessions have ended.

M4M-at-home

In response to changing needs M4M’s music therapists deliver an at home service to support people who as their dementia advances may find social groups overwhelming and also for those becoming isolated and unable to leave their family home at any stage of their dementia.

Referrals

Self referrals are welcome. Families may also be referred by the Alzheimer’s Society, Carers in Bedfordshire, the memory clinic and community mental health team.

Contact

Sarah Russell, Tibbs Dementia Foundation. Tel: 07795 177948. tibbsfoundation@hotmail.com

ANNE

Anne was the life and soul of the party. She sang, danced, laughed and mischievously admonished M4M’s Friday group for five years. Her language was muddled, yet M4M enabled her to share an entertaining narrative and sought interaction. When her dementia and physical health declined, M4M provided one-to-one music therapy sessions at home until her death in 2014. Anne loved music and the last thing she heard was music played just for her by Jeni from M4M-at-home. Her funeral, like Anne, was full of colour, poetry and music.

“MUSIC IN MIND”

MANCHESTER CAMERATA

www.manchestercamerata.co.uk/learning/health/dementia/music-in-mind

Weekly group music therapy programmes for people with young onset dementia and their carers in Rochdale area of Manchester:

Tuesdays at the Demensna Community Centre, Asby Close, Middleton M24 4JF.

Wednesdays at the Crimble Croft Community Centre, Aspinall Street, Heyward OL10 4HW.

“Music in Mind” combines the expertise of music therapists and orchestral musicians of Manchester Camerata to co-facilitate the two fourteen-week programmes for groups of up to six participants with dementia, each with a carer. As part of a University of Manchester research project, the orchestral musicians have been specially trained in dementia awareness and music therapy. Music in Mind focuses on improvisation and offers access to simple – albeit, concert standard - world percussion instruments, to make connections, to speak to someone through music. Centred on what participants wish to express, each session is different.

Participants, who can pick up percussion instruments as and when they feel like it, are encouraged to tap and touch as the therapist and musicians join in alongside them. Song can be introduced at the request of the participant or when it arises naturally and spontaneously within musical improvisation, when both the therapist and musicians can add harmonic support. As well as their own instruments, the orchestral musicians use percussion or voice, or facilitate participants to do so. Dance may be introduced into the music-making. More structured activities include conducting and call-and-response games to enhance communication and relationships with others in the group.

Creative Team

Christina Rhyst (music therapist, harp), Brigitte Schwarting (music therapist, piano), Naomi Atherton (principal horn), Janet Fulton (percussion) Helen Quayle.

I had no idea he could make tunes out of simple instruments... didn’t realise he had this musical side to him. Carer.

Each session begins, not when I pick up my instrument to play a tune, but when a participant initiates it, which is the key to Music in Mind. I have to go against my natural instinct to lead. The experience is organic in its purest sense and very liberating for professional musicians. Helen Quayle.
Live Music Now (LMN) supports inspirational professional musicians at the start of their careers, to use their talents for the benefit of those who are otherwise excluded from the joy of experiencing live music.

Among LMN’s special interests for which they train young musicians, is how to perform participatory sessions to engage people affected by dementia. Musicians from a wide range of musical traditions and cultures will have completed their advanced musical training at a conservatoire (See Appendix 4 pages 89-90), before auditioning to join LMN for four to six years. The charity works with over 300 musicians each year, holding auditions throughout the UK to maintain the highest standards of musical excellence.

LMN chooses musicians who demonstrate the potential to engage with their audiences in an exciting way, a generosity of spirit and an insight into participants’ needs; and enhances their skills through a distinctive approach to training and performance. Experienced musicians, educators and alumni mentor newcomers, giving guidance on how to engage with very different audiences and develop their presentation and communication skills. LMN training offers continued professional development, preparation and paid performances and workshops in a variety of community settings.

Sensitivity is at the heart of LMN’s approach. By encouraging people affected by dementia to participate as fully as they wish, LMN musicians help them nurture and celebrate their own creativity.

The joy that live music brings in a moment can be transformative over time. Engaging participants in music stimulates responses that can have a profound and lasting effect, as A4D participants found during and for some time after LMN-trained musicians’ participatory programme at Cadogan Hall (see example on next page, and for more detail, see Franklin Gould, 2013, pages 104-8).

Impact

- Some participants rekindle their interest in music and their instrument. Encouraged by the music, a participant bought a keyboard and brought it along to sessions.
- For family carers sessions reduce stress and improve communications at home, where they find playing music helps restore their conversation.
- The experience for musicians reinforces the value of music as communication. Although some find refraining from playing a challenge, they value learning improvisation skills and the experience of music therapy, listening and learning to play new percussion instruments and how to explain them to participants with dementia.

Outcome

- Improves quality of life for people with dementia and carers.
- Enhances relationships with others.
- Helps maintain a secure sense of dignity.
- Introduces and restores musical skills and develops musicality.
- Stimulates long-term memory.
- Creates enduring musical companionship.
- Can reduce the use of medication.

Referrals

Alzheimer’s Society

Contact

Lucy Geddes: lgeddes@manchestercamerata.com Tel: 0161 226 8696
Nick Ponsillo, Head of Learning and Participation, Manchester Camerata. Tel: 01612 268696 nponsillo@manchestercamerata.com

Music, amongst all the great arts, is the language which penetrates most deeply into the human spirit, reaching people though every barrier, disability, language and circumstance. This is why it has been my dream to bring music back into the lives of those people whose lives are especially prone to stress and suffering . . . so that it might comfort, heal and bring delight.

Yehudi Menuhin

What Live Music Now gives you as a young musician is not just a stepping stone, but a whole way of thinking and expressing yourself that will stay with you throughout your musical life.

LMN alumnus.

13 Live Music Now

It’s a really lovely experience as it is organic. The musical freedom is great, mainly because the people we are working with can set the tone.

Manchester Camerata musician.

Impacts

• Some participants rekindle their interest in music and their instrument. Encouraged by the music, a participant bought a keyboard and brought it along to sessions.
• For family carers sessions reduce stress and improve communications at home, where they find playing music helps restore their conversation.
• The experience for musicians reinforces the value of music as communication. Although some find refraining from playing a challenge, they value learning improvisation skills and the experience of music therapy, listening and learning to play new percussion instruments and how to explain them to participants with dementia.

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It’s a really lovely experience as it is organic. The musical freedom is great, mainly because the people we are working with can set the tone.

Manchester Camerata musician.
The group met in a rehearsal room for one-hour sessions at Cadogan Hall in Chelsea and had one session on stage. To engage participants from the start, the musicians gave brief introductions to themselves, their instruments, each composer and meanings of their chosen pieces. To re-energise and inspire participants, the musicians began with lively virtuoso pieces, followed by a familiar participatory song inviting a participant to dance, encouraging others to join in, a reflective duet to engage emotions, keeping up the momentum with performance and participation, opportunities to conduct, recite poetry, with increasingly challenging exercises and emotional pieces, calm and virtuosic, ending on a high participatory note (Franklin Gould 2013, pages 105-8).

Creative Team
Kokila Gillett (violin and voice), Pavel Timofeyevsky and Craig White (piano) and Anya Birchall (violin)

Repertoire

Impact
Participants were energised by singing, dancing, conducting and listening to high quality performances. Vocal exercises were extremely effective cognitively, lifting their spirits. They sang with increasing confidence and worked on improving their phrasing. All but one was moved to waltz. He preferred to sing and listen, yet danced as he walked in to Beethoven. Moved by the music, he opened up to the songs and their meanings, shedding quiet tears. The actions of those who danced became more fluid. The keenest dancer was the only one unable to read. All others rose to this unexpected challenge. Carers noted their loved ones remained happy and energised long afterwards.
Professor Ginsborg, a music psychologist, chair of the research degrees programme at the Royal Northern College of Music, has a particular interest in the social and cognitive processes underlying experts' individual and collaborative rehearsal and performance and singers' memorizing strategies. Her paper on the subject of music and memory with regard to autism prompted our invitation to speak on the subject of with regard to dementia. She explained the Atkinson-Shiffrin modal model of memory (1968), how dementia disrupts memory processes and how learning an instrument can protect people from developing dementia, and how the various elements of music – pitch, rhythm, tempo, timbre, dynamics and emotional meaning – recruit different parts of the brain and putting them all together to appreciate, play or sing music engages the whole of the brain; and yet the ability to read music is affected in Alzheimer’s. Pointing out that procedural memory, which underlies skills such as playing and singing, is likely to be retained longest because it is based on practice and over-learning, she concluded that “The perception of music and the emotions it can stir is not solely dependent on memory, and music does not have to be familiar to exert its emotional power” (Sacks 2010, page 385).

Professor Theo Hartogh of the University of Vechta in Germany, specializes in music education for the elderly and his experience of people with dementia learning new instruments was key to this symposium. His papers are referred to within the *Music Reawakening* text.

A1.5 Creative Learning Programmes

Speakers presenting creative learning programmes for people with early- to mid-stage dementia and their carers outlined best practice for orchestral, opera and choral projects. Their techniques to draw out musicianship, revive musical skills, to learn new instruments, sing, dance and make music together, to overcome dementia challenges, together form the guidance recommended in *Music Reawakening*:

A1.5.1. Orchestras

The orchestral programmes, chaired by Professor Ginsborg, presented:

- The BUDI Orchestra, a partnership between Bournemouth Symphony Orchestra and Bournemouth University Dementia Institute (see pages 38-39).
- The Arts 4 Dementia partnership with the English Chamber Orchestra and London College of Music (see pages 40-41 and Appendix 3) included a performance of a piece composed by an Indian harmonium player with dementia, arranged by a London College of Music composition student and performed by professionals, students and a tenor horn player with dementia.
• “Hear and Now”, the partnership between the Philharmonia Orchestra, “Music + Memory” (Tibbs Dementia Foundation), Orchestras Live and Fusion Youth Singing (see pages 42-43).

In response to Professor Ginsborg’s question, “What is the effect of doing this work on your day job?”

• Jeremy Isaac, ECO violinist and workshop leader, replied: “I don’t take my skill as a violinist into the session, I take my skills as a musician. You remember that shift that actually you are a musician first, that skill will come back to you. It’s very important that you can relate to someone through music. They say it’s the universal language. You can take that understanding onto the stage and into the session.”

• Chris Norris, tenor horn player with young onset dementia, replied: “It has given me the confidence to play again. All the things I have lost ability to do because of dementia, this has shown me I can still play the horn, and that is what drives me”. He quoted Churchill “Never, never give in”.

Professor Ginsborg concluded: “I would make the observation that today’s generation of orchestral players playing a major symphonic concert or running a workshop, those two things enjoy equal status. That is relatively new; and we find players are more enthusiastic because they know it supports and enhances what they do on the main concert platform.”

A1.5.2. Opera and Choirs

The opera and choral projects, chaired by Julian West, head of the Royal Academy of Music’s Open Academy, presented:

• Glyndebourne’s “Raise Your Voice” demonstration opened the symposium (see pages 53-54).
• Scottish Opera’s “Memory Spinners” (see pages 55-56).
• The Alzheimer’s Society’s “Singing for the Brain” (see page 65).
• “Turtle Song” partnership between Turtle Key Arts, English Touring Opera and the Royal College of Music (see pages 57-58), including here Dulwich Picture Gallery (see page 59).

In response to Julian West’s question about finding subjects and ideas when composing songs, “Do you ever get people to compose their own?” Jon Petter, ETO composer, replied that Turtle Song questioned the group to create the final piece, ‘What’s the mood?’ ‘What’s the colour?’ ‘Shall we do this?’ ‘Or this?’ Or I might do a chord and ask “Does anyone feel like singing that word?” to find our way to start the chorus.”

Videos showed the orchestral, opera and choral projects in action. The outcome of the concert hall and conservatoire discussion panels can be seen on pages 27 and 89-91 respectively.

Appendix 2: A4D Early Stage Dementia Awareness Training for Musicians of English Chamber Orchestra and students at London College of Music, 30 January 2015

A2.1 Training in preparation for Weekly Workshop programme with English Chamber Orchestra (ECO) and London College of Music (LCM)

A4D has been working with Dementia Pathfinders to develop an early-stage focus to full day dementia awareness workshops for arts facilitators and postgraduate arts students – across art forms – planning creative learning programmes to help re-energise and inspire people with early stage dementia and their carers. Workshops give insight and understanding into symptoms people face as the various dementia types set in, their communication needs, existing skills and how best to access these. Ideal A4D practice invites students attending training to volunteer at eight-week creative learning programmes at arts venues to consolidate their arts training for early-stage dementia.

A2.1.1 Aim of the Training Workshop

To equip musicians with insight and understanding of early-stage dementias, so as to provide the best possible stimulation to revive people’s musical skills, trigger their imagination and use music to bypass stressful symptoms of dementia, to restore fulfilling life, social interaction and sense of joy and purpose in the community.

A2.1.2 Training Team

Aubrey Maasdorp (Dementia Pathfinders), Julian West (Royal Academy of Music), Veronica Franklin Gould (Arts + Dementia).
A2.1.3 Musicians and Students Attending Workshop

ECO musicians: Jeremy Isaac (project leader, violin), Paul Sherman (outreach co-ordinator, double bass) Katie Hill (flute), Cathy Schofield (violin), Bozidar Vukotic (cello). LCM musicians: Dr Emilie Capulet (head of performance, piano), Isabella Barton (violin), Matthew Curtis (saxophone, piano), Gavin Fernandes (violin), Yoshinori Hayashi (viola, violin), Diego Schlaeppi (piano), Alessandro Sotgiu (composer).

A2.1.4 Dementia Awareness

Veronica, A4D founder, welcoming all to the mutual endeavour to rekindle joy in music-making for those affected by dementia, quoted from Professor Susan Greenfield's You and Me: The Neuroscience of Identity (2011), which people facing a new diagnosis are anxious to preserve, and explained the dementia referral system.

Aubrey invited musicians to explain their hopes and expectations from the training; The ECO musicians were keen to extend their educational practice, to see how music relates to the emotional side of the brain in dementia. Paul Sherman explained, “My expectation for today is to expand my knowledge and find connections to use our skills in this important work. It is very important for great cultural institutions to make a difference.” The students were keen to learn how they could use their art to help people with dementia. “I feel everyone has an equal opportunity to get in touch with good quality music.” Yoshinori explained that his interest in the training due to family disabilities, “so I want to work with these problems.”

Aubrey’s morning session covered how dementia differs from natural ageing, neuroscience and dementia warning signs and dementia types and how these affect individuals. The film about head teacher Keith Oliver, diagnosed with young onset dementia, stirred searching questions from the musicians.

The early afternoon was devoted to person-centre care (Kitwood 1997), and communication: changes and breakdown of communication by dementia type, effective methods of communication (slowing down, simple sentences, using gestures, objects, visual arts, focus on key words in their speech, interpret stories for relevance to present issue and hearing feelings behind their words) and communication with body language (facial expression, eye contact and gesture).

Environmental guidance was given to ensure safe, comfortable, well-lit welcoming space. Finally, Aubrey counselled that the focus should not be on participants’ diagnosis, but a positive focus on their individuality and desire to participate, as this will be reflected in our behaviour towards them.

A2.1.5 Music Training for Dementia with Julian West

Julian West, oboist, as head of the Royal Academy of Music’s learning and participatory department leads the “Music for Life” programme for people in the advanced stages of dementia, “Music for Thought” (see page 62) and Glyndebourne’s “Raise Your Voice” (see page 53-54) for those in the earlier stages of dementia and their carers, and potential model for the A4D orchestral project.

Mindful that participants’ technical facilities may not be what they were and that they may not have the capacity to talk about their music, Julian advised musicians to think about what could be achieved, to

- Affirm participants’ musicianship and artistry.
- Work at a level above technical issues, above notation.
- Appeal to a greater artistry (experiment with sound, quality of sound, quality of music making, what is being expressed) and ensemble skills (ability to watch and respond, respond physically, expression, leading and being led).

Facial expression and gestures are useful when printed music is hard to read, and movement.

Julian advised that the programme should serve as a blueprint for future work, that participants should feel included and that this journey has a sense of direction and purpose, a piece will be created, maintaining a desire to keep coming, that they should record the final piece, for the sound rather than the look, for participants to take away afterwards.

The first session needs to have a solid, clear structure to give participants confidence in the programme. If the orchestra is playing when they enter, say, a Bach Chorale for its contrapuntal features, this encourages them to feel part of the ECO rehearsal, to give them impetus and enthusiasm to join in. Working around constraints to build up trust, discover what participants wish to play, listen to their ideas, allow time to communicate, be flexible, don’t add too many elements in the first session - allow participants space to grow, reacquaint them with their musicality. If a participant is unresponsive, offer to perform a piece.

Performing superb quality music for participants delights and alleviates pressure. Listening to a performance or solo give time to think.

Offer the opportunity to improvise in the moment, find a structure out of which the composed piece could eventually grow, basing the work on instinct and emotion rather than cognition, with a clear sense of purpose. Allow participants to lead, with the composer to help bring the work forward.

By the sixth session the piece should be created to give enough time for rehearsal. Over the last rehearsals participants will feel pride in their achievements and final performance.
Appendix 3: A4D Weekly Workshop Programme with English Chamber Orchestra and London College of Music to re-energise musicians with early-stage dementia and carers, February - April 2015

A series of eight weekly orchestral workshops led by musicians of the English Chamber Orchestra (ECO) with students at the London College of Music (LCM), University of West London, St Mary’s Road, Ealing W5 5RF

Wednesday mornings, 4 February – 18 March 2015 10.45 am – 1 pm, with final performance at the A4D Best Practice Symposium, Wigmore Hall, on 17 April 2015.

The high calibre stimulation provided by the ECO and the intimacy of a chamber group were strong motivating factors in A4D’s desire to work with the ECO to devise ways for musicians to bypass dementia challenges so as to enjoy a high standard of performing and playing together.

As A4D practice is to involve postgraduate students keen to develop their art to work with people facing a new diagnosis of dementia, this tripartite partnership with LCM musicians proved rewarding for all participants. We were especially keen to involve a composition student who would work with our musicians to create a piece they could perform at the Wigmore Hall symposium.

A3.1. Orchestral and Student Musicians

Musicians who participated in our orchestral programme on Wednesday mornings at the LCM comprised

- Eight members of the ECO: Jeremy Isaac (violin), Paul Sherman (double bass), John Mills (violin), Bozidar Vukotic (cello), Cathy Schofield (violin), Kate Hill (flute), Natalia Bonner (violin), Lucy Shaw (double bass). On average three of eight /ECO musicians attended each session.
- Six LCM students: Alessandro Sotgiu (composer, piano), Yoshinori Hayashi (violin and viola), Matthew Curtis (piano and saxophone), Isabella Barton (violin), Gavin Fernandes (violin), Diego Schlaeppi (violin) and LCM head of performance, Dr Emilie Capulet (piano). Five students attended each session.

A3.2. Musicians with Dementia and Carers

- Natver Shingadia (Indian harmonium player with young onset Alzheimer’s), Chris Norris (tenor horn player with young onset FTD dementia), neither of whom had ever played with a chamber orchestra, and two older pianists whose symptoms of Alzheimer’s were more advanced, each accompanied by professional carers.

A3.2.1. Referrals

Referrals in Ealing were unusually challenging because, rather than refer A4D to family carers who value our programmes as life-transforming opportunities for couples affected by dementia, with enduring benefit to wellbeing, the memory service referred us instead to Dementia Concern who quickly identified five potential musicians with dementia, but as a care service, the carers regarded such an opportunity as a fun occupation for the morning. So in the event four musicians came through Dementia Concern and finding the programme well suited to young onset dementia, we contacted Young Dementia UK and Chris Norris, a tenor horn player drove to Ealing each week from Kent.

A3.1. Aim of the Weekly Orchestral Workshop Programme

Our aim was to provide stimulating and accessible high quality orchestral practice which would explore ways for musicians with dementia to bypass technical difficulties, so as to restore and enhance the musicianship, artistry, expression and joy in ensemble playing, for them and their family partners, and also to create a piece which all musicians would perform at the end of the programme.

A3.2.3. Orchestral Workshops

Each session opened and closed with a calm Bach Chorale from St Matthew Passion, to build trust, for its clear structure and harmony, useful to build an ensemble, explore different levels of engagement in order to facilitate the use of other repertoire.

Sessions 1 - 3

Nat and an elderly professor with more advanced dementia attended the first session, led by Paul and Jeremy, opening with the Bach piece to explore dynamics and tempi. Alessandro the composition student conducted. A much travelled aeronautical engineer, Nat was at first concerned at first that due to Alzheimer’s he might play wrong notes, and initially preferred to sit and listen, yet his hands gestured to the music. The musicians began to play pizzicato and encouraged the professor to feel the double bass vibrate. They chose Pachelbel’s Canon, to enable improvisation and to explore different techniques and use of sounds, first pizzicato, then with bows, pianissimo. The professor, enchanted, sat by Emilie to experiment on the piano. He played chords,
Above: Natver Shingadia (sitar), Jeremy Isaac (ECO, violin), Yoshinori Hayashi (LCM, viola)

Below: Paul Sherman (ECO, bass) and Chris Norris (tenor horn) perform Nat’s composition ‘Preet’ on stage at Wigmore Hall.

You don’t realize how inspiring you are to me. All week I said I was do this and it kept me occupied.

My idea is that it should be really sweet with the idea you would all blend in with it. Let me play it and see how it goes and if you want we can make some changes.

We started a new piece – my piece – they played it very well and we’re gonna improve on it. So we have work to do! I want to see it develop into a performance level.

If there’s something like this going on I really want to be part of it. Marian.

I like the informality of it, the comradeship. I felt part of it straight away. I’m accessing skills I’d thought had gone. I haven’t looked at the bass clef since 1975.

Chris

If there’s something I can’t do, they understand. Chris

the musicians gradually improvising plucked accompaniment. Nat explained that his harmonium is not an orchestral instrument, but provides supplemental background sound. He began to improvise. The session closed with Bach. Warmed by the players’ inviting attitude, Nat was relieved to find his passion for music hadn’t deteriorated and felt he had made a start.

He brought his father’s sitar to the next session. He and the musicians began to play it together. They played the Pachelbel Canon pizzicato, the technique blending with Nat, improvising on the sitar, sounding like a sparkling shower of drops, he says, like a water sprite. The musicians introduce Haydn St Anthony Chorale to build upon the Bach and lead onto the idea of theme and variation. Nat conducts and told the musicians how much he had looked forward to coming again.

Next session, at brought back his harmonium. He had been looking forward to the session all week. Inspired by the Bach, he begins to improvise, guided by the student Matthew. He himself takes the lead. The musicians start to accompany him. As Nat said “My thoughts were that I’d start, then you join in. I would do it and you would compliment it. There’d be portions where you would take over, then I’d join in.” We videoed the musicians. Nat named his piece ‘Preet’ for creating atmosphere, and enjoyed the East-West collaboration. In contrast an ECO player and student performed a virtuosic violin duo by Wieniawski, the contrasting effects of two identical instruments fascinating to Nat. To his delight, the musicians promise to work on his piece for the final concert. They did, but Nat suffered a heart attack, which ended his participation, though we kept in touch and he was glad to hear that his composition was to be the concert piece.

Sessions 4 - 8

The horn player Chris Norris and the two elderly pianists came to the fourth session. The musicians welcomed Chris with Gershwin Three Quarters Blue. He told the group that heart attacks had forced him to give up his brass band player, but he had felt so bereft that when diagnosed with FTD at the age of 58, he restarted. He now had difficulties with sequencing and could no longer read whole phrases, Chris needs to read each note and has to devise coping strategies. The musicians had transposed the Bach Chorale in large print to suit Chris’ flat horn. He had begun to play when a new participant Marion, an older pianist, arrived. Swiftly and fluently she played a Mozart Allegro from memory. Both were invited to conduct, and did so with sensitive elegant gestures. Chris joined the group playing Mozart Dona Nobis Pacem, as a round. For Brahms Variations on a Theme of Haydn, Chris walked over to play from the cellist’s music, reading the bass clef as treble and adding a sharp. The older pianists were especially moved by the opportunity to conduct, to lead and respond to the orchestra.
The fifth week the musicians tried transposing their music, so as to understand Chris’s difficulties. The professor, his dementia more advanced, was content to watch, but was clearly engaged. Much of the sixth session was devoted to technique and exchange of ideas. Prokofiev’s ‘Peter and the Wolf’ was introduced at the sixth session, to explore characterisation through the use of sound. Chris explained that he can read half a note ahead but has to return to the note, and read, count and to read it again several times before it goes into auto memory.

Next session, Chris played the piano for the first time for years. Steve Reich’s Clapping Music (1972) – twelve quavers in a complex clapping pattern – troubled Chris, though he appeared to take its complexity in his stride. His defense against dementia was not to give in.

Alessandro has brought his arrangement of Nat’s piece for flute, alto saxophone, E flat horn, Indian harmonium, two violins, viola and double bass. We sent an audio track with video tutorial to Nat as he does not read music. Alessandro conducted the players, who took their parts home to practice. Chris’ part is not difficult, but it is written in 12/8, which as a coping strategy he has to think of as 4/4, a dotted crotchet as a crotchet. He enjoyed sight-reading, comforted by having a conductor - he used to be able to take his eyes off the music to watch the conductor, keeping one eye on the part. Now he has to sense the conductor. He finds that playing with the orchestra is augmenting his musical life, an experience for which he has to rise at six to reach Ealing by 10.45 am.

At the last session he enjoyed the challenge of a piece in five sharps. Invited to lead the Bach, he sped it up, challenging himself, admitting that he ran out of puff. Chris enjoyed the chamber orchestra atmosphere, crossing the room to read and transpose another player’s part. At the end of the series he felt a natural member of the ensemble. "There’s a sense of accomplishment. Dementia hasn’t got me and I’m still in charge. And I did that alright and no one really noticed.” Happy to share his challenges, Chris was at all times a consummate professional.

A4D’s partnership programme with ECO and LCM was shown to be especially effective at helping musicians affected by young onset dementia to access skills they thought had gone, to improvise in a chamber ensemble and to create new music.

Filmmaker Joe Bor filmed the final session and interviewed participants.

To Nat’s delight, although he himself was unable to attend, “Preet: Theme and Variations for Chamber Ensemble”, arranged by Alessandro Sotgiu on a theme given by Natver Shingadia, was performed to a professional standard, by three ECO musicians, three LCM, their head of performance and Chris Norris at the A4D Best Practice Symposium to a seventy-strong audience at Wigmore Hall on 17 April.

Appendix 4: Conservatoires and Universities

Conservatoires and universities increasingly offer Dementia Friendly training for students and staff. With rising interest in lifelong learning and evidence of the power of music to improve wellbeing, the conservatoires and universities mentioned in this section include community engagement modules in undergraduate and / or postgraduate programmes to provide for students wishing to build up a portfolio careers, research facilities and music therapy courses.

Conservatoires Offering Courses and Research for Musicians Considering a Portfolio Career in Community Education

Birmingham Conservatoire, Birmingham City University, www.bcu.ac.uk/conservatoire/departments/pedagogy, Music, Community and Wellbeing as a Professional Development option at postgraduate level.

Guildhall School of Music and Drama – PG Cert in Performance (www.gsmd.ac.uk/music/courses/postgraduate/) a new programme, designed to support professional musicians, actors, theatre technicians and dancers who teach as part of their practice as performers or in undertaking a portfolio career. Believing strongly in the power of music to transform people’s lives, the Guildhall encourages students to use their craft and learning to benefit local communities, offering BMus and MMus training in participatory, community settings to build up a broad portfolio of skills. BMus Professional Studies module explores performance psychology, health and wellbeing, as well as improvisation and communication skills.

London College of Music www.uwl.ac.uk/academic-schools/music/lcm-news/exciting-partnership-english-chamber-orchestra. LCM plans to continue involving students in workshops for musicians with dementia as research in association with their School of Psychology.

Leeds College of Music, www.lcm.ac.uk/courses/Postgraduate/creative-musician

Royal Academy of Music offers creative music leadership programmes involving dementia, through their Open Academy in partnership with Glyndebourne "Raise Your Voice" and Wigmore Hall "Music for Thought". http://www.ram.ac.uk/study/open-academy/recent-open-academy-projects

Royal College of Music; www.rcm.ac.uk/sparks/projects/foradults/ Turtle Song, an extracurricular RCM Sparks project, offers students the
option to join the Turtle Key Arts, English Touring Opera and RCM partnership project (see page 00). MSc in Performance Science
www.rcm.ac.uk/courses/postgraduate/msc/. Doctoral research at the
RCM has involved research into learning instruments in later life to
enhance wellbeing (Korte et al, 2013).

Royal Conservatoire of Scotland: www.rcs.ac.uk/postgraduate/ma-
learning-teaching/

Royal Northern College of Music: www.rncm.ac.uk/study-here/what-
you-can-study/graduate/. The RNCM Graduate School offers advanced
studies in performance (including conducting), composition, musicology,
music psychology, and music education.

Royal Welsh College of Music and Drama: www.rwcmd.ac.uk/courses.aspx, RWCMD offers a range of
postgraduate conducting programmes.

Trinity Laban Conservatoire of Music and Dance: www.trinitylaban.ac.uk/research Research at Trinity Laban includes
connections with the cognitive sciences, performance science and music
psychology. Postgraduate programmes include MA in Music Education and Performance and Postgraduate Certificate/Diploma: “The
Teaching Musician.

Universities Offering Music Education and Research for Dementia

Bangor University: www.bangor.ac.uk/music/research/health.php.en
Bournemouth University: blogs.bournemouth.ac.uk/dementia-institute
Canterbury Christ Church University: www.canterbury.ac.uk/research-
and-consultancy/research-centres/sidney-de-la-haan-research-
centre/research-projects/singing-and-dementia/singing-and-dementia-
home.aspx
Institute of Education, University College London: www.ioe.ac.uk/research/97826.html
Institute of Musical Research, University of London: music.sas.ac.uk/research-networks/music-and-science
University of Bradford: www.bradford.ac.uk/research/our-
research/research-in-faculties/health-studies/research-
themes/dementia-research/living-well-with-dementia/
University of Chichester: www.chi.ac.uk/research/creative-
art/music/highlights
University of Edinburgh: www.smuh.bss.ed.ac.uk/content/music-
health-wellbeing

University of Kent: www.kent.ac.uk/ckp/BeaconInstitute.html
University of Sheffield:
www.sheffield.ac.uk/music/research/researchcentres/musicandwellbein-
g/projects/musicdementiacare
University of Stirling: dementia.stir.ac.uk/dementia-and-music-cpd-
resources
University of Winchester, Music Research Institute:
www.mri.ac.uk/index.php/singing-wellbeing/background/
University of Worcester: www.worcester.ac.uk/discover/dementia-
creativity-dementia.html
York St John University: www.yorksj.ac.uk/rcomh/rcomh/research-
programmes/occupation-and-older-peoples/apr12-cford.aspx

Universities Providing Education in Music Therapy

Anglia Ruskin University: www.anglia.ac.uk/study/postgraduate-
taught/music-therapy
Guildhall School of Music and Drama:
www.gsmd.ac.uk/music/principal_study/music_therapy
City University London: www.nordoff-robbins.org.uk/content/what-
we-do/train-music-therapist
Queen Margaret University Edinburgh: www.qmu.ac.uk/mt
Royal Conservatoire of Scotland:
www.rcs.ac.uk/postgraduate/ma-learning-teaching/
University of Roehampton: www.roehampton.ac.uk/postgraduate-
courses/music-therapy/index.html
University of South Wales: courses.southwales.ac.uk/courses/1233-ma-
music-therapy
University of the West of England: courses.uwe.ac.uk/B99942

The Music Research Institute: www.mri.ac.uk publishes papers and
maintains a research database on the benefits of music and its process,
runs workshops on music and communication and organises conferences
on music therapy
Appendix 6: Music Organisations and Arts for Health Organisations

Music Organisations

British Association for Performing Arts Medicine™ www.bapam.org.uk
Help Musicians UK: www.helplmusicians.org.uk
Incorporated Society of Musicians: www.ism.org.uk
Music Research Institute: www.mri.ac.uk
Musicians Union: www.themu.org
Royal Society of Musicians: www.royalsocietyofmusicians.co.uk

Arts and Health Organisations

Age of Creativity: www.ageofcreativity.co.uk
Age Exchange: www.age-exchange.org.uk
Arts for Health (Manchester Metropolitan University): www.artsforhealth.org
Arts & Health South West: www.ahsw.org.uk
Creative Dementia Arts Network: hwww.creativedementia.org
Dementia and Imagination: dementiandimagination.org.uk
Equal Arts: equalarts.org.uk
European Reminiscence Network: www.rememberingtogether.eu
Head4Arts: www.head4arts.org.uk
London Arts in Health Forum: www.lahf.org.uk
National Alliance for Arts Health and Wellbeing: www.artshealthandwellbeing.org.uk

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Patrons
Harry Cayton CBE       Sir Jonathan Miller CBE
Katie Derham       Professor Sir Andrew Motion FRSL
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Maura Hamer (administrator)

Arts 4 Dementia       www.arts4dementia.org.uk

20 Charlwood Road, London SW15 1PE. Telephone: 020 8780 5217.
Email: admin@arts4dementia.org.uk
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