

# **Music in Healthcare/ Mental Health**

An evaluation of the participative music programme designed by Music Network, which took place in St. Stephen's Hospital, Glanmire and the Carrigmore Centre, Shanakiel as part of Cork 2005 – European Capital of Culture

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# **Introduction**

## **Parameters of the research and methodology**

The parameters of this evaluation involved:

- an exploration of the experiences of participants, staff, managers, musicians and organisers of the Music in Healthcare Project/ Mental Health and the outcomes of the project
- the identification of key elements that underpinned the most and least successful aspects of the programme
- the presentation of proposals for maintaining and developing the successful elements in both centres into the future

The methodology used in the research included:

***Background documentation*** – Documentation included scrap books kept by clients and staff in both centres, photographs, individual reports written by staff members, and background documentation compiled by the project organisers.

***Observation visits*** – Visits were organised to each centre in order to observe a music workshop in action.

***Group meetings and individual interviews*** – individual and group interviews were organised with clients, staff, management, musicians, and project organisers, and in some cases there were follow up conversations and/or correspondence by telephone and e-mail.

## **Attribution**

Throughout the report, feedback from stakeholders is presented without attribution to any named individual. For purposes of clarity and consistency, the word ‘participant’ consistently refers to clients taking part in the workshops, despite the fact that staff members and musicians also participated.

## **Chapter One - Background**

### ***1.1. The origins of the project***

The Music in Healthcare/ Mental Health project was developed under the Culture and Health Strand of Cork 2005 - European Capital of Culture, and in association with the HSE Southern Area and Music Network. The designation of Cork as Capital of Culture was an opportunity to integrate art into all areas of civil life. Programmes developed under the Culture and Health Strand were based on the principle that everybody living in the city and county had a right to participate in the arts, regardless of health, wealth or geographical location. The programme offered a varied and accessible programme of events, residencies and collaborative projects to patients, healthcare staff, and visitors to hospitals, day care centres, residential units and community healthcare settings in the Cork area.

It was in this context that the Music in Healthcare/ Mental Health programme was developed in association with Music Network<sup>1</sup>. Personnel at Cork 2005 - European Capital of Culture (also referred to in this document as Cork 2005) were familiar with an earlier programme that had been developed by Music Network in partnership with the HSE Midlands Area; it had targeted older people in day care and residential settings and the learning that emerged over a five year period had been documented and formulated into a model of good practice. Informed by this experience, the Music in Healthcare/ Mental Health programme was developed in two mental health facilities in Cork. It brought clients and staff together with professional musicians in a collaborative process that encouraged individual and group creativity, and adapted to the particularities of the settings involved.

### ***1.2. Aims***

Overall, the aim of the Music in Healthcare project was to develop a model of good practice for using music in mental health settings, which would impact favourably on

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<sup>1</sup> Music Network is the national music development agency

the healthcare environment, primarily through enhancing quality of life and promoting health and social gain.

On the ground<sup>2</sup>, the objectives were to deliver an enjoyable, creative experience of collaborative music to clients and to transfer musical understanding and skills to members of staff so they could facilitate musical activity in the periods between musicians' visits and after the programme ended. In each centre, these objectives were addressed by specific strategies that took account of individual needs, interests and resources.

### ***1.3. Key players on the ground***

The programme took place with clients and staff in St. Stephen's Hospital in Glanmire and Carrigmore Centre, Shanakiel.

Two professional musicians, Aingeala De Burca and Nico Brown were recruited to deliver the participative music workshops. Between them, the musicians had extensive experience of working collaboratively in a broad range of community and health settings. Significantly, Aingeala De Burca had previously worked on the Music in Healthcare Project in the Midlands region.

### ***1.4. Resources***

The IRMA Trust loaned a collection of tuned and un-tuned percussion instruments to each centre for the duration of the project. As well as the musicians, staff members and at least one client brought along their own instruments each week. These included drums, fiddle, guitars and a dulcimer.

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<sup>2</sup> Throughout the document the phrase '*on the ground*' refers to the work that took place within the two mental health facilities as opposed to the work that took place at an organisational level involving Cork 2005 and Music Network.

### ***1.5. Project outline***

In consultation with staff and clients, the musicians delivered a programme of participative music workshops over the course of two modules, each of which consisted of seven weekly workshops. The first module took place in May/ June 2005 and the second in September/ October of the same year.

The length of the workshops differed in each centre according to the needs, concentration and energy levels of the clients. In Carrigmore, workshops lasted approximately an hour while in St. Stephen's Hospital they lasted for approximately an hour and a half.

Pre-project planning and training was incorporated into each seven week module. In St. Stephen's Hospital, each weekly workshop was preceded by a meeting between staff and musicians for purposes of ongoing discussion, evaluation and collaborative planning, while in Carrigmore, the weekly meeting took place after the workshop.

### ***1.6. Associated performance events***

A number of performance events were organised in conjunction with the workshop programme. Clients and staff from both centres attended a performance by traditional musicians, Máirtín O'Connor, Brendan O'Regan and Desi Wilkinson, which took place in St. Stephen's Hospital during a Music Network tour. A group of Polish folk-dancers also visited Carrigmore during their visit to Cork as part of the Cork 2005 programme.

## Chapter Two - Outcomes

### 2.1. Outcomes for clients

The findings in this section are based on direct feedback from clients as well as observations from staff members and musicians. Wherever a quotation appears, it can be assumed that it comes from a participant, unless otherwise stated. Wherever findings are specific to clients in one centre or another, this will be indicated in the text. Elsewhere, findings will be based on feedback from both centres.

Participating clients experienced a range of outcomes on a personal, social and artistic level. These have been divided up for the purpose of clarity but in effect, there were a number of points of crossover between them. For example, while issues of musical identity and independence are included under *Artistic outcomes*, they also had a significant impact on self-confidence and could have been included under *Outcomes at a personal level*. While the project was not a music therapy project, both musicians and staff commented on the fact that many of the outcomes had a positive therapeutic impact.

#### 2.1.1. Outcomes at a personal level

At a personal level, the music project impacted on clients' mood, outlook and self-confidence as well as their levels of concentration and perseverance.

***Interest, enthusiasm and energy*** - The workshops were held on Mondays in both centres and provided a positive start to the week. The energy, interest and enthusiasm generated among participants often spilled into the following days. Client commented:

*'It wakes us up a bit'*

*'...it is a good way to get ready for the week'*

[The workshop] *'...gives you something to go for.'*



**Enjoyment** - Participants had fun at the workshops. They got ‘a lift and a buzz’ from engaging with the musicians and commented that the time went by fast. Clients found that music could alter their moods significantly; one participant described how: ‘sometimes I come in and I’m down in the dumps and I can feel that I’m lightened.’ Staff and musicians regularly noted evidence of enjoyment through smiles, laughter, bright faces and levels of eye contact among the clients. They concluded that the programme had a significant impact on clients’ quality of life.

**Relaxation** – Although the music workshops involved high energy, many clients found them relaxing. One client commented: ‘What I liked... was how I was so relaxed at the music session... It is a very wet and a very cold day... but that did not stop [me] from enjoying myself. I think we should have music everyday of the week.’

**A positive distraction** - Clients in both centres found that music distracted them from thoughts of illness or inner turmoil. One client commented: ‘It interrupts negative thoughts’. Staff commented on the way in which this extended beyond the workshop period and how clients afterwards were heard talking and laughing about certain songs or musical exercises that had captured their imaginations. One client with a tendency to take things apart was distracted from such impulses during the workshops, attending sessions regularly without damaging any of the instruments.

**Hope for the future** - Positive musical experiences gave people greater hope for the future. At a basic level, clients looked forward to upcoming workshops while, at a more reflective level, one participant remarked on her realisation that: ‘...if I can enjoy this there is no reason I can’t enjoy things in the future.’

**Trust and confidence**<sup>3</sup> - Trust levels deepened and self-confidence grew as the workshops went on. Knowing that their input would be respected, participants gradually lost their initial inhibitions and became more open and free to participate. Clients tried out new and different instruments and volunteered to play and sing both solo and with the group. One client, known for being quiet, started to sing songs for the group, while another who known to be shy and inhibited gradually demonstrated

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<sup>3</sup> Musical confidence is treated in more detail under 2.1.3 Artistic Outcomes

his enjoyment openly, smiling throughout the workshops, although he still wouldn't sing or play an instrument. One staff member commented *'I've seen them blossom.'*

**Concentration** - Staff members in both centres emphasised the positive impact of music on clients' concentration levels. In order to collaborate with the musicians, participants had to follow instructions, raising and lowering the volume of their playing, and stopping and starting as required. Their ability to do this over the full length of the session without leaving for a cigarette surprised staff from the beginning as this level of focus was unusual in both centres. Both staff and management commented that music appeared to hold people's attention longer than other activities and this was echoed by a client, who noted: *'I feel that the session today really helped my concentration powers. Usually I am unable to concentrate for a long period such as an hour but today with musical interaction, I was.'*

**Motivation and perseverance** - Consistency of attendance could not be guaranteed for clients however staff and musicians commented positively on the number of clients who regularly returned to the workshops. In Glanmire, clients often queued at the door before the workshop started, waiting to get in. Some clients also demonstrated significant perseverance in developing musical skills, sticking with a particular rhythm or musical exercise until they got it right.

**Dexterity** - One client commented to the musicians that his hands were functioning better as a result of the workshops.

**Ownership and achievement** - Participants developed a sense of ownership over the music created in the workshop. They contributed words for songs, and provided sounds and rhythms for improvised pieces of music. All contributions were valued and this resulted in feelings of personal and group achievement. In one centre, this process was augmented when clients and staff began to prepare songs in advance and perform them for the musicians.

**Leadership** - Participants were facilitated to 'lead' at whatever level they found appropriate. This ranged across the spectrum from those who could initiate a basic sound, such as a clap, to be copied by the rest of the group, to one particular

participant who went on to co-plan and lead entire workshops with staff members and is now considering training as a music therapist.

### ***2.1.2. Social and interpersonal outcomes***

Participants experienced a number of social benefits from participating in the music workshops and honed a range of interpersonal skills.

***A sense of community*** - Clients, staff and musicians formed a '*sense of community*' through the project. Coming together for workshops gave people a sense of occasion and a feeling that they were part of something special. Staff members commented that this helped address problems of social isolation so often experienced in the area of mental health.

***Relationships*** – New and stronger friendships were built through the workshops where people had the opportunity to get to know each other through their engagement with music. Relationships with staff also changed within the workshop where a different dynamic was generated and where everybody was '*in it together experimenting*'. Clients and staff were both encouraged to contribute musically and on an equal basis. Clients also developed good relationships with the musicians. They enjoyed their company and found them to be '*friendly*' and '*understanding*'.

***Communication*** - Music offered participants new and different ways to communicate with each other, with staff and with the musicians. Staff members commented on the freedom that music offered some clients in this regard, especially those who experienced difficulties with verbal communication.

***Listening skills*** – Some clients developed their listening skills over time. In order to participate effectively in the music workshops, they had to listen not only to instructions from the musicians, but to the sounds made by people around them. Staff members commented on the respect that developed among the group for each other's efforts.

### ***2.1.3. Artistic outcomes***

***Musical confidence and skills*** – Clients developed confidence in trying out instruments and joining in with exercises. Some identified specific progress in areas such as singing, rhythm work or playing particular instruments. Participants also learned to engage in group composition and to develop set pieces that came together as a whole in an end.

***Musical identity and independence*** - Clients valued opportunities to establish their own musical identity and independence within the group and to influence the musical direction of the workshop. They gained a sense of their own creative potential and an awareness of individual talents and tastes, many of which had been untapped or forgotten.

***Musical appreciation*** - Clients commented that they enjoyed hearing good musicians play both solo and together. They were introduced to new genres of music and instruments they had never seen or heard before. Musical horizons were broadened; one participant commented that he had only listened to rock and pop in the past, but since becoming involved in the workshops, he had expanded his collection to include classical music CDs.

***Interest in attending live music performances*** – Clients’ appetites for live music performances was whetted by their exposure to live music in the workshops and the additional outreach performances that took place. A number of individuals commented that they would be more likely to attend music performances in the future.

***Creative expression through other art forms*** - Some participants expanded into other art forms such as clay work and poetry in order to express how they felt about the music workshop. One participant wrote about the emotional impact of live music in the scrapbook provided:

*‘Music played well, brings joy to our ears,  
Mountains so high, awesome, brings tears.’*

Another wrote a poem that captured and summarised many of the outcomes identified in this report:

*Name saying, drum playing, foundation laying,  
Slowly, softly dissipating fear.  
Thumping, banging, clanging,  
Which tune to follow is not always clear.  
Pling-plonging, sing-songing, ding-donging  
Sounds surrounding both muffled and clear.  
Stand-upping, sit-downing, clapping and clowning,  
Changing of seats from far to near.  
A melody, a harmony,  
Humming then awing,  
Soon there is music in every ear  
But that is not all that is happening here –*

*If you have the time,  
Give yourself the time to  
Stop, stoop, tilt your head to one side,  
Look, see,  
Aged faces with twinkling, dancing eyes,  
Listen, hear,  
No scorning, free spirits, spiralling, soaring  
Silently, roaring,  
'I can do this, I'm alive, I'm alive,  
I am alive!*

## **2.2. Outcomes for staff**

Involvement in the music programme led to personal, professional and artistic outcomes for the staff in both centres.

### ***2.2.1. Outcomes at a personal level***

***Enjoyment*** – Staff members in both centres enjoyed the workshops and found themselves enlivened by their participation. In Glanmire, where there were a number of keen musicians among the staff, their enjoyment was enhanced by the weekly opportunities for personal creative expression. Non musicians also found participation in the workshops to be '*liberating*' and '*stimulating*'.

***A sense of creative potential*** – At all levels, staff discovered new creative horizons opening as a result of the workshops. While some were familiar with the creative process and were interested in applying their musical skills to their professional lives, others were completely new to it and were surprised to find what they were capable of achieving at a personal level.

***Music facilitation skills*** – In both centres staff members developed a clear understanding of the parameters of the work and learned to spread themselves throughout the group in order to assist individual clients. The level of musical experience varied considerably between the two centres and as a result music facilitation training was prioritised differently and individual staff members developed skills to varying degrees.

***In Glanmire*** music facilitation training was given high priority due to the pre-existing interests and skills among staff members. A consistent group of staff members attended the training days organised at the start of each module and built up their facilitation techniques through observation and collaboration with the musicians in the weekly workshops. With the help of an equally

skilled ex-client<sup>4</sup> they took full responsibility for independently planning and facilitating a series of music workshops between modules.

At least one staff member transferred the learning to other contexts, using warm up, breathing and humming exercises very successfully with groups in the community. He also experimented with recorded jazz and initiated a dance session to powerful effect.

***In Carrigmore*** Live music was as new an experience for the staff as it was for many of the clients and approaches to training and skill sharing were tailored accordingly. Key outcomes included a new awareness of the role staff members could take in encouraging and facilitating music, even if they were non-musicians.

The training day<sup>5</sup> provided staff with an idea of what to expect from the workshops and an understanding of the boundaries of the work. One staff member described it as ‘... *a great road map for what was going to take place*’. As staff gained in confidence they experimented at a basic level, playing CDs and leading clients in singing between workshops. Staff also learned a lot from watching the musicians interact with the clients.

### ***2.2.2. Social and interpersonal outcomes***

There is some cross over between the social and interpersonal outcomes identified for staff and clients however there are different points of emphasis in each.

***New ways of communicating with clients*** – Exercises such as passing a sound around the circle opened up new forms of contact and enabled a new and different type of rapport.

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<sup>4</sup> This individual, attended Module One as a client but came back voluntarily as a workshop leader between modules and again for Module Two

<sup>5</sup> Staff in Carrigmore only took part in the training day as part of Module One. Due to a breakdown of communication internally, the second training day did not take place however staff emphasised that they would like to undertake training as part of any future modules.

***More sociable interaction*** – Staff in both centres commented on the more sociable interaction achieved with clients in the music workshops. As one staff member commented: ‘*It shouldn’t all be work and tablets!*’

***A more positive and holistic view of clients*** - Staff got a more positive view of clients through their experiences in the workshops. The focus was on the clients’ creativity rather than their illness and highlighted musical potential and talent. Staff members got to know participants in a ‘*more respectful*’ and ‘*more human*’ way, in some cases enabling them to see beyond specific negative experiences they may have had in the past. The workshops placed them on a more equitable footing where they faced the same musical challenges.

***Improved therapeutic relationships outside the workshops*** – Improved relations between staff and clients spread beyond the workshops and impacted favourably on therapeutic relationships. One staff member experienced a change in attitude from a client who had previously been resistant to taking their medication. After working together musically, the client appeared to see the staff member in a more positive light and was more cooperative.

### ***2.2.3. Artistic outcomes***

***Musical skills*** – Accomplished musicians and beginners alike developed their musical skills in the course of the programme. Those familiar with music making benefited from opportunities to hone their improvisational and performance skills at solo and group level and to experiment with unusual combinations of instruments. Those who were new to the art form commented on a greater awareness and understanding of rhythm.

***Musical appreciation*** – Staff in both centres enjoyed the music played by Aingeala and Nico and appreciated their musical skill.

For the more musically experienced staff members, the opportunity to collaborate with musicians of the calibre of Aingeala and Nico was particularly rewarding. This was further deepened by their experiences during training days, which provided



opportunities to explore music, mood and emotion at a deeply personal level. Staff described their experiences in this regard as '*other worldly*' and '*bliss*'.

Staff members with less musical experience developed an increased interest in building and maintaining a creative musical environment in their hospital. They commented on their increased attention to local music performances and heightened interest in music books that may be of use to the clients.

## **2.3. Outcomes for musicians**

### ***2.3.1. Outcomes at a personal level***

***Enjoyment*** – The musicians greatly enjoyed the sessions in both hospitals and felt affirmed by all involved. They commented on the goodwill that permeated both centres and how the staff provided a warm welcome as well as refreshments each week. Their enjoyment was enhanced by the positive atmosphere and sense of occasion created by staff members, and by the care and concern that was consistently shown for the welfare of the clients.

***A new experience*** – While both musicians had extensive experience in participative music in a wide range of contexts, neither had worked in a mental health setting before. It was a new and very positive experience for both musicians, and one which raised a lot of interesting and stimulating questions.

### ***2.3.2. Outcomes at a professional level***

***Confidence*** – Before the programme started, both musicians felt intuitively that their experience and ability to work with diverse groups in a variety of contexts would stand them in good stead in mental health settings. Their experience in both centres affirmed their confidence in this regard.

### **2.3.3. Artistic outcomes**

**Artistic collaboration** - The artists enjoyed working together and benefited artistically and professionally from being part of a musical team.

**Artistic freedom** – Working with the two groups gave rise to great musical freedom. Both musicians had opportunities to play and improvise in response to each client's individuality while the breadth of musical requests challenged them to play music that was not in their usual repertoire. They enjoyed '*...the sense that you can play anything; it is all interesting.*'

**Artistic enjoyment** – The musicians looked forward '*a good play*' with clients and staff both in Glanmire, where there were some skilled and enthusiastic musicians among staff and clients, and in Carrigmore, where they experienced some wonderful musical moments, as participants engaged with the highs and lows of the music in a very direct way. In both centres, the musicians enjoyed many '*hair on the back of the neck*' moments where the music took off in unexpected and sometimes deeply moving directions.

## Chapter Three - Key Factors

A number of key factors were identified as underpinning the most successful elements of the Music in Healthcare programme in the two centres.

### 3.1. Key factors on the ground

**3.1.1. *The participative music model*** – The workshops were built on a model of musical participation and collaboration, which had been developed and tested over a five year period with groups of older people in the in the Midlands. While elements of practice had to be adapted to the specifics of the mental health environment, there were many areas of crossover and the advantages of prior experience and learning contributed significantly to the success of the programme in Cork.

***Participation*** – Clients were encouraged to join in and contribute to the best of their ability tapping feet, clicking fingers, using their voice or playing percussion or musical instruments. For many this was a very new experience as they were used to a more passive approach to music. One client commented: ‘*...joining in was best!*’ The participative model was acknowledged by staff and management as an effective way for clients to build confidence and self-esteem. It was distinguished from other activities in the centres by the way it tapped into ‘*...potential that is locked away in the hearts and minds of people*’.

***Collaboration and improvisation*** - A number of clients commented on the joys of musical collaboration and improvisation. One client, who had only ever played music alone, commented: ‘*Its better doing music in a group than alone*’, while another was enthusiastic about the opportunities to ‘*...get a thing going... and the musicians might join in with an instrument and play along with you.*’

***Individual creativity*** – Within the group context, there was also room for the individual voice. The importance of this was underlined by staff who pointed

out that a sense of individuality is often damaged or lost when a person suffers from mental illness. One member of management commented that more creative work was needed in mental health contexts in order to get away from the attitude that activity is limited to ‘...*something to pass the time*’.

**3.1.2. The musicians** – The musical and interpersonal skills of the musicians<sup>6</sup> were mentioned by clients and staff alike. Most important in this regard were:

***Personality and interpersonal skills*** – The musicians were warm, approachable and friendly in the workshops. They were able to communicate and engage with both clients and staff and were respectful of all abilities and all contributions made. They could tap into individual potential and draw out abilities without putting anybody on the spot. They also had sufficient maturity and experience to respect professional boundaries.

***Flexibility*** – The musicians adapted to the specifics of the mental health settings, which in one case involved working in a secured environment. They took in their stride unexpected interruptions and inconsistent attendance. They were open to working with people wherever they were at and didn’t ‘*pull people up*’ unnecessarily. They were also flexible in artistic terms, creating room for all tastes and encouraging participants to influence the musical direction of the workshops. Clients commented on the musicians’ openness to musical requests, from country to reggae, and their flexibility with regard to volume: ‘*I like the fact that you can make noise as loud as you like and it’s still ok and you can still enjoy it.*’

***Artistic quality*** – Both clients and staff commented on the fact that Aingeala and Nico were ‘*fantastic musicians*’, which brought a sense of occasion to the workshops. Skilled musicianship also enabled them to improvise around all sounds, songs and music produced by clients in a way that maximised the value of their contributions.

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<sup>6</sup> Performers involved in the outreach programme (i.e. music and dance performances in Glanmire and Carrigmore) also demonstrated flexibility and had strong interpersonal and artistic skills, which were central to the success of the outreach programme.

***Personal enjoyment of the sessions*** – The musicians’ evident enjoyment of the music filtered down to everybody participating in the workshop and was instrumental in energising participants.

***Gender balance*** – Having a mixed musical team with different styles and approaches worked well and maximised their ability to reach a diversity of clients.

***The ‘outsider’ factor*** – The fact that the musicians come in from ‘outside’ brought a sense of community integration to both centres. In Carrigmore, staff also commented that it brought a sense of ‘normality’ for both clients and staff. The ‘outsider factor’ also made the workshops special and motivated management, staff and clients to be focused and organised in advance of each workshop.

***3.1.3. The support of management and staff*** – No project that encourages creative expression at individual and group level will ever be an ‘easy option’. Consequently, it is essential to have advocates among management and staff who will champion the project, supporting those involved and informing those who are not. One of the key factors in the success of the Music in Healthcare programme in Cork was the strong support and commitment that came from all levels.

***Staff support and commitment*** – Key members of staff<sup>7</sup> remained involved in the project consistently throughout the two modules, which led to a certain level of continuity and progression. These staff members negotiated and moderated group attendance each week. The high level of support they offered within the workshops was reassuring to clients and musicians alike. In general, they responded swiftly and effectively to any queries and concerns raised by the musicians. On one occasion when the musicians commented on the bleak look of the allocated room in Carrigmore, staff members filled it with bright paintings, which improved the atmosphere and softened the

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<sup>7</sup> Five or six staff members and student nurses were consistently involved in the project in St. Stephen’s, while two members of staff backed up by student nurses attended regularly in Carrigmore where the client group was smaller.

acoustics. In Glanmire, staff members were so eager to attend workshops that they came in on their days off or just after they finished their night shifts.

***Management support and commitment*** – The support of management made it possible for staff members to be released from other duties in order to attend the music workshops, and the healthy ratio of staff to clients contributed significantly to the effectiveness of the programme. Throughout the project, management made available resources such as time and space and generated consistent good will at all levels, which made the project possible. While they did not attend the workshops, the managers kept up to date with progress either through regular contact with participating staff members or through direct communications with the musicians.

#### ***3.1.4. Co-operation between musicians and staff***

***The combination of skills*** - The combination of skills and interests between musicians and healthcare staff was effective, allowing the musicians to focus on the artistic aims and objectives in the knowledge that staff were equipped to deal with any health related issues that might arise.

***Weekly meetings*** – The weekly meetings that took place between musicians and staff provided a forum for ongoing evaluation and facilitated some elements of co-planning. Musicians and staff discussed each workshop and identified elements that could be further developed or done differently in the future.<sup>8</sup>

***3.1.5. Timeframe*** – The modules took place over two defined periods of seven weeks. The main benefit of such a limited timeframe was the focus it provided to all involved. Management, staff, clients and musicians were all strongly motivated and committed for the period and commented that there was no time for burnout or for the work to become stale. However, one musician felt strongly that the benefits of long term projects should not be ignored and pointed out that problems such as burnout and

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<sup>8</sup> The level of two way communication differed between the two centres and is further discussed in Section 4.3.

diminished energy are not inevitable in such projects if sufficient support and resources are put in place.

**3.1.6. Continuation** – A number of stakeholders commented on the depth of the musical experience offered by the workshops and the loss that would be felt if they were to be discontinued. When the first module ended, it was important for both staff and clients to know that the musicians would be returning and that opportunities for collaborative music making would resume after a break<sup>9</sup>.

**3.1.7. Access to instruments** – The combination of the instruments provided by the IRMA Trust and those brought in weekly by musicians and staff contributed significantly to the success of the music programme.

**Diversity** - Many of the instruments were unfamiliar to the clients and trying them out was a highlight. When asked to identify the things they liked best about the workshops, clients listed the opportunities to try out whistle, harp, tambourine, spoons, castanets, mouth organ, drums, tin whistle and guitar as well as the more general percussion instruments.

**Awareness** – Having had access to a diversity of instruments, staff members in each centre became more aware of the value of having instruments available for clients and the potential to use them between sessions or modules. They also became familiar with the instruments that were most popular and grew keen to build instrument banks of their own.

**3.1.8. Music outreach events** – The inclusion of music and dance performances organised in collaboration with Music Network and Cork 2005 added diversity and broadened the reach of the programme. It expanded the musical experience of clients and staff, and increased receptivity to live music in the centres. It also reinforced the sense of community integration generated in the workshops.

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<sup>9</sup> In Glanmire, the collaborative music workshops continued, led by staff and an ex-client. However, the element of continuation was important there too, as the temporary workshop leaders looked forward to working with the musicians again in order to get re-energised and to ask advice on issues that arose in their absence.

**3.1.9. Ongoing support from Cork 2005 and Music Network** – Management and staff both commented on the ongoing support received from Cork 2005 and the Project Manager’s ability to understand the specifics of working in the mental health context. Also invaluable was Music Network’s ability to select, train and support musicians who were skilled in working in healthcare environments and their support for those musicians. These sentiments were echoed by the musicians<sup>10</sup> who found personnel from both organisations helpful and supportive.

## **3.2. Key factors at an organisational level**

While it is beyond the brief of this evaluation to explore the roles and experiences of the organising agencies in any depth, it is important to note the vital role they played in the success of the Music in Healthcare Project in Cork. The combination of skills and resources available to Cork 2005 and Music Network and the positive working relationship that developed between them and the HSE Southern Area underpinned the positive outcomes experienced on the ground.

From the beginning, trust was an essential ingredient. From the perspective of Cork 2005, Music Network was *‘guaranteed to deliver’* as they had a proven track record in music development, most particularly in the area of music in healthcare. Music Network was allocated funding and trusted to get on with the work with a minimum of supervision. Personnel in Cork 2005 summed up the outcome as *‘...a great [project], well funded, with great good will... [that] was built slowly and carefully and done right.’*

From Music Network’s point of view, Cork 2005 provided solid groundwork in the area of local networking, communications, planning and advocacy, which made it possible for them to become involved at short notice and ensured a welcoming atmosphere for the musicians from the start. The Project Manager of the Culture and

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<sup>10</sup> While it was not identified as a key factor in the success of the programme, it is interesting to note an additional support that was provided to the musicians through a regional networking initiative established by the West Cork Arts Centre where, on one occasion, the musicians met up with a group of other artists working in healthcare contexts.



Health Strand played a particularly important role in this regard and continued to provide an essential link between stakeholders throughout the Music in Healthcare programme.

## **Chapter Four – Issues to Consider in the Future**

Before outlining the range of issues to be considered in the future, it is important to say that first and foremost, stakeholders would like to see the programme continue in both centres, based around the existing participative model. While their feedback was overwhelmingly positive, a number of issues were identified for consideration in future planning. The majority of issues outlined below arose from discussions with stakeholders, although a small number of observations arose from my visits to both centres. Some refer to successful aspects of planning and practice that people would like to see continued and extended, while others include suggestions for slight modifications or levels of emphasis. A small number propose new directions.

### **4.1. Logistics**

*Modules* – The modular approach worked well for all involved and should be retained in the future. Ideally, staff and musicians would like to see two modules of seven weeks per year, one taking place before Christmas, the other in the spring. In both centres, staff would like to retain an initial training session on the first day of each new module.

*Time* – While Mondays were found to be particularly popular in both centres, the afternoon session did not suit clients or staff in Carrigmore at first, as it necessitated a disruptive break in routine. While a new routine was established over the course of the project, the afternoon remains less than ideal in relation to the organisation of staff time. Again, the issue should be revisited but staff members did not consider it crucial.

*Duration* – While the length of the workshops has worked well in each centre, the musicians found the duration of their visits to each centre too short, giving them a sense of rushing in then rushing out again. Contact with participants was particularly limited outside workshop time, although there was some time to chat to clients in Carrigmore during the refreshments period at the end of the session. The musicians

would recommend visits of three hours at a minimum, in order to allow sufficient time to discuss the work and generate ideas with both clients and staff. Ideally, they would recommend a full day in each centre so they could work with a range of smaller groups and cater more effectively for different abilities.

**Space** – Workshop space was adequate but not ideal in either centre. In St. Stephen's, the workshops in module one took place in the day unit, which provided excellent light and space however they were moved to a different unit in module two, where the space was more confined and less comfortable especially on days when attendance was at a maximum<sup>11</sup>. In Carrigmore, the same room was used throughout both modules. It too was small and had limited natural light and ventilation. The issue of space should be revisited in any future planning meeting although the options appear to be particularly limited in Carrigmore. In neither case was the issue considered crucial for the continuance of the project.

**Instruments** – While the IRMA Trust instruments were invaluable in the development of the programme, both centres are now at the stage where they could usefully build and house a collection of their own. In Glanmire, staff members have already consulted with the musicians and devised a list of instruments needed, and steps have already been taken to secure funding for this purpose. More support may be required in Carrigmore to facilitate staff with non-musical backgrounds to access resources they can use confidently and effectively with clients.

## **4.2. Clarification of aims and objectives**

While musicians and staff shared common aims, there was a lack of clarity about specific objectives in each centre and some potential for working at cross purposes. The term '*music therapy*' crept into the project in one of the centres and clients were using it in relation to the workshops despite the fact that they were not part of a music therapy project.

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<sup>11</sup> Space considerations need to be weighed against the need to provide access to different clients at different stages of the project. Effective and ongoing communications are needed to ensure that decision making procedures are clear and that all stakeholders understand the rationale for changes that are made.

Before any future module takes place, clients, staff and musicians should revisit the parameters of the programme and engage in a series of wide ranging discussions of what they hope to achieve from both the workshops and the staff training days. Each centre should devise a clear and agreed set of aims and objectives within a specific timeframe, which reflects their particular needs, strengths and ambitions. While this may seem quite a formal process, it would facilitate the development of more flexible programmes with clear performance indicators, which in turn would provide structure to the weekly meetings between musicians and staff. Outreach performances should also be considered in this process and clear aims developed for future programmes.

### **4.3. Communications**

Both staff and musicians found the weekly meetings useful and helpful and would like them to continue in any future programme. However certain difficulties in communication need to be addressed in order to maximise their effectiveness.

Communication difficulties were more immediately apparent in Carrigmore where there was less of a shared vocabulary between musicians and staff and it was difficult to get beyond the most basic element of feedback, which happily was that everybody was pleased with the work. More structured facilitation of the meetings would have helped the discussions to go deeper, as would the preparation of key questions and performance indicators in advance.

Musicians and staff in both centres would benefit from a more open and ongoing discussion of roles and approaches within the workshops. A process is needed whereby questions that arise are noted and addressed each week. Issues that go undocumented are liable to be treated casually, easily forgotten and may go unaddressed completely. The type of questions that have arisen<sup>12</sup> and which would benefit from more formal discussion and resolution include:

- the extent to which staff members are co-participants in the workshops and the extent to which they are there to support clients

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<sup>12</sup> Most issues arose in one centre or the other. Some arose in both but generally to different degrees

- the extent to which all staff members attending the workshops understand the aims, objectives and parameters of the programme
- the extent to which the clients have been involved in formulating those aims and objectives and whether they have a full understanding of the parameters
- the extent to which musicians have been informed about the group attending the workshops and whether they can, or should be able to distinguish clients from staff members
- the value of initiating a feedback session with clients as well as staff after each workshop
- the appropriateness of having refreshments as a 'reward' at the end of a session

#### **4.4. Creative collaborations**

In order to keep the programme fresh and challenging, and in order to '*inject a bit of fizz*' for all involved, it was proposed that additional artists would be brought in to work with the core team of musicians from time to time. Other musicians could be invited to collaborate but equally practitioners from other art forms could become involved. Such interventions would sustain the creative energy and give each module a distinct direction and identity.

#### **4.5. Associated outreach events**

Clients, staff, management and musicians are all keen to expand the performance element of the programme in tandem with the workshops, in order to build the musical environment in both centres and extend the musical experiences of all involved. Weekends have been identified as a particularly quiet time in Carrigmore, when additional music activity would be most welcome.

The facilities in Glanmire are sufficient for hosting concerts and can accommodate visiting clients and staff from Carrigmore, where space is not so flexible. This

arrangement worked well when musicians on a Music Network traditional tour visited and performed. While the centre at Carrigmore lacks suitable indoor facilities for large scale concerts, staff utilised an outdoor area as a performance space for a troupe of Polish dancers who performed there as part of the Cork 2005 programme. They see potential for further outdoor programming during the summer months and also see possibilities for smaller scale performances in the centre itself. Staff members have begun to make contact with local singers and musicians in this regard.

One area that could be usefully addressed in future planning for outreach performances is the possibility for greater integration. Closer connections between the regular music team and the musicians visiting the centres for a once off performance could lead to new creative directions and would help to maximise the impact of the overall programme.

#### **4.6. Documentation**

Documentation is essential in any arts programme for a number of reasons and on a range of different levels. On the ground, it provides opportunities to capture creative breakthroughs, recognise good practice, identify emerging difficulties and track progress. It can stimulate critical reflection and debate among all involved. At a broader level, documentation provides a record of work done and can act as an effective tool for advocacy.

Documentation of the Music in Healthcare in Cork project was carefully considered from the outset but a number of challenges arose with regard to privacy, which is paramount in the area of mental health care. Scrap books were left in both centres and both clients and participants recorded their responses to the workshops. This was very successful in Carrigmore, where comments were recorded every week, but did not work well in Glanmire, where it was underutilised. On the other hand, plans for making a sound recording of the groups' music went ahead in Glanmire but had to be scrapped in Carrigmore due to objections from a small number of clients.

What emerged from these experiences was the need for staff to take a central role in supporting clients to decide whether they wish to document their participation and if so, to identify the best ways of doing so. While the musicians may be in a strong position to support the staff by making creative suggestions and demonstrating examples of documentation from other projects, they should not be to the fore in negotiating these issues with clients. It is important to leave room for individuals to opt out of the documentation process in the future but it is equally important to fully facilitate others who wish to reflect on their experiences and record their achievements.

Once decisions have been made about the methods for documentation, ongoing encouragement from staff is required otherwise the documentation element will be forgotten in the creative energy of the workshops.

#### **4.7. Information and advocacy<sup>13</sup>**

Staff members who are not directly involved in creative programmes can often play an important part in their success or otherwise. If staff believe that a programme is important and meaningful, they are more likely to be flexible and supportive to their colleagues, and to encourage and facilitate clients to participate.

The occasional involvement of consultants in the workshops in Carrigmore was an effective way of sharing information and promoting the value of the work but overall, internal advocacy was a challenge in the Music in Healthcare/ Mental Health project. In general, awareness was restricted to staff members directly involved. In St. Stephen's the size and layout created particular difficulties in this regard as the complex is large and the buildings are scattered and self-contained.

Whether members of staff are working in the canteen or the wards, it is valuable for them to hear what is taking place and understand the principles underpinning the work. If attendance at a workshop is not feasible, management and staff should

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<sup>13</sup> External advocacy is covered under the recommendations in Chapter Five.

consider actively adopting a word of mouth strategy and explore possibilities for making short presentations, posting photographs (where appropriate) on notice boards and writing articles for internal/ HSE newsletters.



## Chapter Five - Recommendations

1. That the Music in Healthcare programme should be continued in St. Stephen's Hospital and the Carrigmore Centre, utilising the skills and experience of the current team of musicians; the programme should build on the key factors that made it successful and address the issues of concern raised in the evaluation report.
2. That management in both centres should meet in order to develop a joint music strategy that reflects the different needs of each centre and promotes integrated provision across residential and community settings.
3. That management in both centres should meet with the HSE/ Cork 2005 Culture and Health Working Group in order to:
  - secure short term funding to continue the project in 2006
  - secure representation for the mental health sector on the working group
  - plan for longer term development of creative programming in the context of learning that emerges from the Culture and Health Strand of Cork 2005
  - contribute to the Cork 2005 National Arts and Health Conference, which is planned for February 2006
  - maintain links with Music Network and continue to inform the growing body of knowledge and expertise in relation to music and healthcare
  - make practical linkages with other Arts and Health partnerships that were formed as part of the Culture and Health Strand of Cork 2005
  - make practical linkages with local arts organisations that could contribute to the development their ongoing music/ arts programmes
  - source information on similar projects that have been established in Ireland or abroad

- explore ways in which to disseminate information about the work among:
    - their colleagues in the mental health sector
    - senior management in the HSE
  - collaborate in influencing policy and funding decisions with regard to Arts and Health
4. That the musicians involved in the project should continue to liaise with Music Network, sharing their experience and skills in the mental health sector and benefiting from the national training and mentoring support programme planned by the organisation.

## **Conclusion**

The Music in Healthcare/ Mental Health Project was successful in meeting its aims from a range of perspectives.

At an organisational level, Cork 2005 – European Capital of Culture extended its reach into the area of mental health care and delivered a high quality programme that encouraged and valued individual and group creativity.

Music Network succeeded in testing out key music and healthcare principles in the specific area of mental health, adding to the organisation's knowledge, understanding and expertise in the area. The learning that emerged from the project will feed into Music Network's plans for further mentoring and support for professional musicians interested in working in healthcare environments.

On the ground, the programme had a significant impact on two mental healthcare facilities in Cork. It delivered a range of positive personal, social and artistic outcomes and helped to enhance the therapeutic environment and quality of life on offer to both clients and staff. While each centre shared a number of common outcomes, the programmes differed according to the individual needs, circumstances and resources available, reinforcing the key principle of specificity and the importance of individualised planning in any similar programmes that may emerge in the sector in the future.

The programme also added to the skills and experience of the two musicians employed to facilitate the workshops, who successfully adapted their existing creative and facilitative skills to a new setting.

In speaking with stakeholders over a period of two months, a sense of urgency marked all conversations regarding continuation. It is important that this energy is harnessed so clients, staff and musicians can resume their creative journeys together as soon as possible. It is also important that this continuation is not limited to 'more of the same' but instead, builds on the flexibility demonstrated to date, acknowledging

and accommodating change as individuals move on and as new and different needs emerge.

Both short and long term strategies are needed for this to happen. Looking into the future, there are exciting opportunities to expand and develop the creative arts programmes in each hospital, and to build strategic alliances with other key individuals and agencies for purposes of networking, shared learning and advocacy. The existence of a HSE/ Cork 2005 Culture and Health Working Group<sup>14</sup> offers a particularly focused point of departure for this process where representation by the mental health sector would bring mutual benefits.

First and foremost, however, a short term solution is needed to fund the music programme in 2006. Two seven week modules in the coming year would maintain the creative momentum generated and further build levels of confidence and enthusiasm. Simultaneously, it would provide clients staff, management and musicians with time and space to reflect on the evaluation of the programme and to co-plan for long term development. The financial cost of the programme is small when weighed against the positive outcomes that emerged and, as one stakeholder from the HSE Southern Area commented, it '*...was very good value for money when you see the results.*'

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<sup>14</sup> The Health Service Working Committee includes the following members: Aidan Warner, HSE Southern Area, Principal Community Worker, South Lee; Rebecca Loughry, HSE Southern Area, Principal Community Worker – Social Inclusion; Michael Shemeld, HSE Southern Area, Development Manager / Physical & Sensory Disability Services; Una Webster, HSE Southern Area, Capital Projects Co-ordinator; Lisa Clancy, HSE Southern Area, Director of Communications; Tony Sheehan, Cork 2005, Programme Team; Ann O' Connor, Cork 2005, Project Manager, Culture + Health.