

FILM REVIEW



The power of music in aged care: a review of *Alive Inside*

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Henry sits hunched in his chair, staring blankly into space.

‘Do you want to hear your music, Henry?’

Henry mumbles an unintelligible response, head lolling into his torso. A nurse gently places a pair of headphones over his ears and music begins to play. Henry looks up, eyebrows raised and eyes suddenly shining as a smile creeps across his face.

‘Can I sing with this?’

From church hymns and wedding marches to football anthems and obligatory happy birthdays, we are surrounded by music throughout our lives. Often, we find the songs we are regularly exposed to begin to soak up the emotions and memories we associate with a particular time in our lives. When listened to again, these may subsequently conjure up wistful recollections of that bygone era. This innate ability to remember and respond to familiar music remains generally well preserved as we age. Even, it would seem, in instances where more complex and arguably more important functions have long since degraded. A prime example of this can be seen in cases of Alzheimer’s and dementia, where patients display incredible recall of childhood songs despite debilitating memory loss in other areas. It is this astounding phenomenon, and its untapped therapeutic potential, that makes up the central tenet of Michael Rossato-Bennett’s stunning documentary *Alive Inside*.

The story of Henry, an elderly dementia patient seemingly revived by a few bars of his favourite tunes, makes up just a small part of the much bigger picture painted by *Alive Inside*. Chronicling the journey of one social worker, Dan Cohen, attempting to change the face of neurological care in the United States, this 2013 documentary is a fascinating examination of the seldom-acknowledged link between music and the ageing brain. Director Rossato-Bennett deftly weaves together elements of neuroscience, psychology and an appreciation of the undeniable power of music, to explore the idea that effective neurological treatment doesn’t necessarily have to come in a bottle.

Cohen, the founder of the non-profit organization Music and Memory (www.musicandmemory.org/), has spent years trying to revolutionize geriatric care in nursing homes across America through the widespread introduction of ‘music therapy’. For residents living with conditions such as Alzheimer’s and dementia, this form of therapy involves the provision of personal iPods filled with music tailored to their individual music taste and background. By revisiting music from their youth, patient-specific music therapy has already been shown to aid memory retrieval, shift mood, manage agitation, facilitate cognitive function and coordinate motor movements (Dassa & Amir, 2014; Prickett & Moore, 1991). These benefits are beautifully illustrated throughout *Alive Inside* by

frequent examples of patients 'coming alive' in response to the music Cohen plays for them, offering a brief but nonetheless tantalising glimpse of what this treatment potentially has to offer.

Sadly, the audience quickly realizes that Cohen appears to be fighting a losing battle. Despite the ever-increasing anecdotal evidence of music's ability to stimulate cognitive activity and memory recall, it remains a phenomenon that is little understood and vastly under-researched. Dr Bill Thomas, a longstanding advocate for music therapy and a key voice in *Alive Inside*, suggests this may be due to such a method appearing too far removed from 'real medicine' to be thought to have any genuine therapeutic value. He observes that:

If I want to write out a script for a \$1000 a month anti-depressant: no problem, no questions asked. But if I want to provide them with a \$40 personal music system, that will take a lot of work Personal music doesn't count as a 'medical intervention'.

This is hammered home by Cohen's dealings with health care officials, many of whom casually brush off his proposals due to 'financial factors' and 'questions of administration'. Such individuals, mostly doctors and nursing home managers, appear to be far more focused on expense and convenience than the needs of the people they purport to look after. Rossato-Bennett sends his audience reeling at the extent of this insensitivity by cleverly contrasting it with uplifting images of patients responding energetically to the music of their past. We are left to wonder how anyone, particularly medical professionals with a duty of care to their patients, could convince themselves that it is not worth exploring something potentially offering a momentary reprieve from the troubles of neurological illness. The latter half of *Alive Inside* thus morphs from a simple illustration of the promise of music therapy to a call to arms against a broken health care system unwilling to listen to the needs of its elderly charges.

As someone who has witnessed the transformative influence of music first-hand, I challenge these sceptics to join Cohen in giving a session of music therapy and remain wholly unmoved and unconvinced of its potential. Speaking from personal experience, having spent two years working as a volunteer on the dementia ward of a local nursing home, I feel it fundamentally alters the way one thinks about the relationship between music and the ageing brain.

The residents I spent the most time with were those whose conditions, either vascular dementia or Alzheimer's, had progressed so far they were no longer capable of looking after themselves. Most had very little understanding of who or where they were, and tended to spend their days sitting stiffly in their armchairs, staring at the television set and making the occasional (assisted) trip to the toilet. With no clear way of connecting with these men and women, I decided on a whim to bring my guitar with me one afternoon and found myself utterly unprepared for the response.

Much to my surprise, as I began my rendition of the Irish classic *Danny Boy*, I found a ripple of activity spread across the room. My previously distant and almost totally unresponsive audience appeared to gradually transform around me. One woman, who had previously turned her head away from me and refused to meet my eye, lifted her gaze to me as a broad grin spread across her face. Another, whom I had only ever known to sit passively in her chair, began to sway and wordlessly hum along. Some tapped their feet, others simply smiled, and a few even made excited attempts to join in. The

sudden animation and energy in the room was incredible and certainly left an indelible mark on me, as a soon-to-be neuroscience student coming face to face with one of the unsolved mysteries of the human brain.

While it's important to remember that music is not a 'cure-all', witnessing its ability to stimulate dormant neural pathways in individuals otherwise lost in the depths of disease illustrates just how powerful it can be. It was clear to me, as it was to Cohen in his journey across America, that for many of these patients the music of their youth represents far more than just a collection of notes. It's an identity; a momentary connection to the events, emotions and experiences of their past. For an instant, transient though it may be, these patients – or, rather, people – are no longer lost. With the underlying mechanisms responsible for this fascinating quirk of the human brain still unclear, we can only hope that the rapidly expanding field of neuroscience will one day be able to shed some light on how it arises and, perhaps, how we can best exploit it in a therapeutic context.

Whether the geriatric medical community will ever come to acknowledge music as a form of therapy, only time will tell, but its potential is clear. The question is: will they choose to listen to it?

References

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