

RHYTHMIC ACTIVITIES

FOR EVERYDAY
CARE

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Created by the **Institute for Music and Neurologic Function (IMNF)**, a member of the **Beth Abraham Family of Health Services**, filmed at **Schnurmacher Center for Rehabilitation and Nursing**.

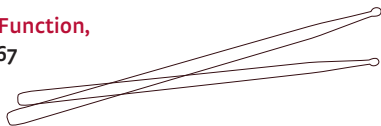
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INSTITUTE FOR MUSIC & NEUROLOGIC FUNCTION

A Member of the Beth Abraham Family of Health Services





RHYTHMIC ACTIVITIES

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A Dementia Care Video Training Guide

Welcome to the world of Rhythm. It's everywhere! Your heartbeat is rhythmic, your breath is rhythmic, handshakes are rhythmic, walking is rhythmic, talking is rhythmic, relationships are rhythmic, daily schedules are rhythmic, and that's naming just a few. It's no wonder that activities based on rhythm are beneficial to persons with dementia, as the activities offer perhaps a little of the rhythm of life that a person with dementia might have forgotten or lost. Watch the DVD to see a complete therapeutic rhythm group, and read the manual for additional important information and valuable resources so that you will reap the fullest benefit from this program.



RHYTHMIC ACTIVITIES

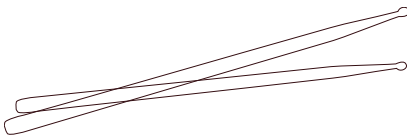
What Are Rhythmic Activities?

Rhythmic activities include any kind of activity that is based upon a steady and prominent beat. During rhythmic activities individuals participate in rhythmic body movement, drumming, auditory stimulation, playing musical instruments, singing, and chanting, to name a few, with a trained leader guiding the group toward a therapeutic purpose.

Purpose of the Program

Rhythmic activities and therapeutic drumming circles are among the most effective tools we have for creating a communal experience among residents with dementia. Rhythm and music strongly predicated on a rhythmic beat allow residents to respond to one another with feelings of competence, living “in the moment,” and, often, with joy. Participating in a drumming circle allows the resident with dementia, who may have lost executive abilities, to take an object and affect another object – and sustain that activity. It provides for meaningful sound when communication skills have deteriorated.

Rhythmic activities are beneficial to all levels of functioning, from early to late-stage dementia. Even when a resident is unable to play instruments or communicate, participation is still possible through body movements, breath, and eye contact. Groups of similar functioning levels and groups with mixed levels of functioning BOTH achieve positive results within a therapeutic rhythm program. Often, higher functioning residents will engage the lower functioning residents by singing to them, patting their arm, or encouraging them to participate.





Goals and Benefits

For the resident

1. Create feeling of community and belonging
2. Increase social interaction and communication
3. Improve emotional expression
4. Increase sense of organization in time
5. Reduce agitation and anxiety
6. Increase sensory stimulation
7. Improve physical exercise
8. Improve gross and fine motor skills
9. Improve cognitive function including attention, short term memory, and ability to follow cues
10. Improve mood

For the staff

1. Create awareness of residents' retained abilities to participate in large group
2. Improve working environment and increase ease of care-giving
3. Share pleasurable experiences in an atmosphere of mutually successful participation
4. Strengthen the relationships between staff and residents
5. Enhance person-centered care

How to Start a Therapeutic Rhythm Program in Your Facility

It is important to have leaders and facilitators in every group. Leaders lead the activities, while facilitators demonstrate and assist residents in participating. It is suggested to have at least one leader and one facilitator for each rhythm group. The more facilitators the better! Family members, guests, consultants, non-clinical staff can ALL act as facilitators during a rhythm group.

DVD CHAPTERS

1. Set up

- **Arrange residents in a circle.** A circle provides the atmosphere of an inclusive group, and allows for easy viewing of the leader.
- **Pass out instruments.** Allow residents to select instruments themselves, or choose instruments for residents based on your knowledge of the residents' preferences and physical abilities.

KEEP IN MIND:

- When passing out instruments think about what type of instrument will facilitate success for each resident. Ask yourself which instrument will be easy and fun for each resident to play.
- Positioning residents is often very important. You know your residents best, so position them in such a way that will encourage participation from every member. For example, put a talkative resident between two quieter residents, or seat friends next to each other. Residents often help each other out, which makes the job of the facilitators much easier!

SUGGESTIONS:

- It's often nice to have some kind of background music playing while you are setting up the room and handing out instruments. This intro music can set the tone for the whole group, so lively or familiar music, or music with a strong beat often works well.
- You can create your own adaptive instruments. Attach Velcro to bells or mallets and fix the instruments in hands or on shoes so that residents who have limited fine motor skills can still participate in making music. Be creative! Design your own adaptive instruments.



2. Welcome

- Establish the group. Make a clear beginning to open the rhythm group, perhaps with an introduction activity (introducing participants and leaders by chanting or singing each person's name), or an orientation activity (singing or chanting some orienting fact about the present moment such as weather, date, holiday, people in the room, etc.), or start with a strong and simple rhythm activity (**1-2-3--- 1-2-3---**).

KEEP IN MIND:

- It's important to consider preferences of residents, cultural backgrounds, age, and tastes. Open with an activity that you think will encourage as many people to participate as possible.
- The opening activity should be simple, so that everyone can participate and be successful in his or her own way.

SUGGESTIONS:

- A simple chant such as, "Hello, hello, what is your name" often works well to get each resident participating, by stating his or her name, and by calling out with the group, "Hello, hello, what is your name". This also gets residents breathing and demands some upper body effort (i.e. wakes them up!).
- Establishing a strong beat is very important for any rhythm activity. Accenting the first beat (also called the downbeat) is an easy way to keep the beat clear and easy to follow, i.e. **1-2-3-4 1-2-3-4**.



DVD CHAPTERS

3. Movement

- Recorded, live, or no music can be used when doing rhythmic movement activities.
- The leader calls out the movements before and as they happen, while the facilitators demonstrate the action and assist residents when necessary.

KEEP IN MIND:

- Observation is important in this and all therapeutic rhythmic activities. Pay attention to residents' facial expressions and positioning. Notice if they are uncomfortable or comfortable, participating or not participating. Assist when needed.
- Keep up encouragement! Sometimes movement activities are challenging.
- It is often not necessary to use instruments in therapeutic rhythm activities. We move rhythmically, clap our hands, stomp feet, and chant or sing all without the use of instruments. Another idea: if your facility is low on musical instruments, make them - shakers out of plastic eggs, drums out of oatmeal canisters.

SUGGESTIONS:

- When leading movement activities, as well as any rhythm activities, make large movements with your body when demonstrating so residents can more easily see. Describe the movement, and help residents achieve proper movements when possible or necessary, for example gently touch an elbow to help a resident raise an arm.
- The type of music playing (or not playing) greatly dictates what kind of movement activity you will have. Rock and Roll with heavy drums will likely foster more active and energetic movements such as arm pumping or kicking, while classical piano music may facilitate movements like neck rolls, stretching, and deep breathing.



4. Dynamics:

- Activities that are often very successful in a therapeutic rhythm group are ones that require attention and focus. Listening and watching to know when to play or when to stop, when to play loud or when to play soft, demands attention from the participants.

KEEP IN MIND:

- When leading these types of activities, it is very helpful to have good command over different types of tones on the drum. High tones are played towards the edge of the drum. Low tones are played in the middle.
- Always lift your hand quickly after you strike the drum (as if the drum burns your hand to touch it) so as to allow for resonation and the clearest sound.

SUGGESTIONS:

- Try switching leaders, allowing facilitators or other participants (a resident) to lead the group. This provides different dynamics for participants.
- Try out these dynamic suggestions:
 - Play up high, play down low
 - Play loud, play soft
 - Play left, play right
 - Play fast, play slow
 - Play the instrument of the person sitting next to you
 - Divide group in half, and have right side play, then left side play

DVD CHAPTERS

5. Call And Response:

- Have residents echo leader's beat.
- Have residents respond with a single simultaneous instrument-strike after the leader's beat.

KEEP IN MIND:

- Be animated and exaggerated when leading. Use big gestures, loud speaking voice, and anything to get the attention of the residents so that they follow the activity accordingly.
- Jumping, crouching, bending up and down, pointing, repeating instructions loudly are all ways of cueing residents to participate.

SUGGESTIONS:

- Caregivers and other staff are very important to any therapeutic rhythm activity, as they can serve not only as participants, but as facilitators and leaders. Try to have all kinds of caregivers participate in rhythm groups, including CNAs, nurse managers, kitchen staff, housekeeping, physical therapists, and more. It gives the residents a chance to interact in a different and playful way with their caregivers. It also strengthens relationships between caregivers and residents, and between the staff.
- A steady beat is easy for practically anyone to follow. Always rely on the steady beat to keep it simple yet fun.
- Lots of eye contact and repeating participants' names is important when leading any rhythm activity.



6. Soloing - Individual Recognition:

- Highlight one or more residents individually with an opportunity to solo. This works best after the group has been playing together. Signal one person to continue playing, direct the group to stop playing, then give attention to soloist.
- Lead group back in after soloist plays for a period of time. Or, instruct another soloist to begin or to join the first soloist.

KEEP IN MIND:

- Soloing is a chance for self-expression from the soloist. Be observant of the soloist and maybe you can determine (or at least discuss later) what he or she is “saying” through the solo.
- It is not necessary to do much talking to lead a soloist in while stopping the group play. Use arm gestures such as a “CUT” gesture to stop the group. Then point to the soloist. If he or she is not already playing, encourage play with arm gestures.

SUGGESTIONS:

- Encourage group to cheer on soloist. Start a chant or phrase, i.e., “play it, play it now”, or use the resident’s name, i.e., “go, Sarah, go”.
- Depending on the cognitive level of your group, you may want to discuss the solo experience after the activity ends. Ask soloist to describe what he or she was expressing. Ask group to guess what the soloist was expressing.
- Throughout the therapeutic rhythm group, if one resident says something it is a good idea to repeat the comment to the whole group. Often it is hard to hear across large circles, and repeating the comment allows the entire group to participate, while ensuring that the speaker is heard.

DVD CHAPTERS

7. Unison Play – Group Recognition

- Play together as a group. Each member is part of the whole, contributing to the unique sound of this particular group. It can be powerful, especially when everyone participates.

KEEP IN MIND:

- Residents who are physically unable to play instruments can still participate in a rhythm group. Tapping a foot, or even making eye contact can show enthusiasm and participation. Be observant.
- Forceful and simultaneous strikes of the instruments together create a powerful atmosphere, one of group cohesion and togetherness.

SUGGESTIONS:

- Lead simultaneous instrument strikes through echoing. Play a simple 1-2-3. Have group echo. Pause after their echo, and then play your 1-2-3 again. Have group echo. Pausing creates a silence, which makes the unison strikes stand out, and seem more powerful.
- Lead different beats and have group echo. Challenge them to play exactly what you played.
- Lead a succession of beats. Count to see how many consecutive beats residents remember. You play: 1-2-3-4-5-6-7-8-9. Listen to see if residents play all 9 beats. If they don't, drop down to 6 or 7. If they do, challenge them to do more!



8. Wind Down

- Bring group to a close with a clearly defined ending.
- Take up instruments while talking with residents about how the rhythm group was for them.

KEEP IN MIND:

- Often rhythm and music is emotional for residents, and brings back memories. Be open to talking with residents about their feelings and memories.
- Often there is more conversation after a rhythm group. Encourage this conversation to continue between residents once they have left the group.

SUGGESTIONS:

- It is often effective to end the group with a song that is about leaving, such as, “Goodnight Sweetheart”, or “Show Me the Way to Go Home”. This provides a cognitive sense of ending in addition to the formal closure as the song ends.
- Encourage caregiver and peer interaction by helping start conversations between two people. For example, ask someone, “What did you think about Mary’s tambourine solo?” while Mary is sitting there. Ask another person, “Have you ever played a conga before today?”
- Talk about the next time the rhythm group will happen, asking residents what they would like to do more of, or what their favorite thing was.

ADDITIONAL APPLICATIONS

Therapeutic Rhythm Activities with Individuals

- Conduct therapeutic rhythm activities as part of a daily routine.
- Blend rhythm into common acts of care.

KEEP IN MIND:

- Each resident has a unique cultural background, personal preferences, personality, and mood.

SUGGESTIONS:

- Sing while you comb hair or play music during bathing time.
- Hum when putting resident in bed for the evening.

Contribute to the Therapeutic Rhythm Environment:

- When you don't have time to conduct a full rhythm group, make your environment more rhythmic.
- Blend rhythm into common acts of care.

KEEP IN MIND:

- You are unique and creative. Use your talents and your creativity to contribute to your residents' current experience of life. And most importantly, don't forget to have FUN!

SUGGESTIONS:

- When you pass a resident in the hall who seems bored, say or sing a line of his or her favorite song to the resident.
- When you walk into a sleepy day room and say a simple chant like: "1 o'clock, 2 o'clock, 3 o'clock, 4, if you say you're happy I'll give you some more".
- Talk in rhythm (rap) or sing to resident as you wheel him or her down the hallway (i.e., "we're going, we're going, we're going down to therapy"). Or sing a familiar song, one that he or she likes.
- Tap or clap the beat, "shave and a haircut", to a room full of residents and see who responds.

DEMENTIA

TIPS ON GETTING ATTENTION AND KEEPING IT!



Remember the following pointers during any kinds of activities or interactions when you want to maintain attention from dementia residents, either as a group or individually!

Cueing:

A cue is the same thing as a reminder. During activities try different forms of cues.

Visual – any type of cue that the resident can see.

- Make eye contact
- Make large gestures or movements
- Point
- Talk with hands

Verbal – any type of cue that is spoken to a resident.

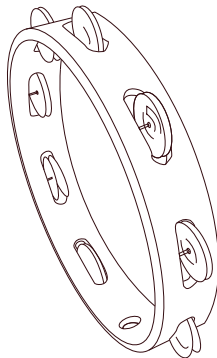
- Speak loudly
- Speak clearly (often this requires you to slow down your normal rate of speaking)
- Frequently use the resident's name
- Face resident when speaking
- Make eye contact when speaking

Tactile – any type of cue that involves touch.

- Lightly touch resident on the arm
- Rhythmically tap on the resident's knee
- Hold or shake resident's hand

Cognitive – any type of cue that might spark memory or thought.

- A familiar song, for example, "Happy Birthday"
- A familiar rhythm, for example, "Shave and a haircut."
- A familiar sound, for example the doorbell



Interrupting Expectations

When you interrupt the expectations of a resident, this often results in drawing attention to the present moment. Some examples are below.

Unexpected silence – make a break in sound during an activity

- Stop speaking (unexpectedly)
- Pause a cd (unexpectedly)

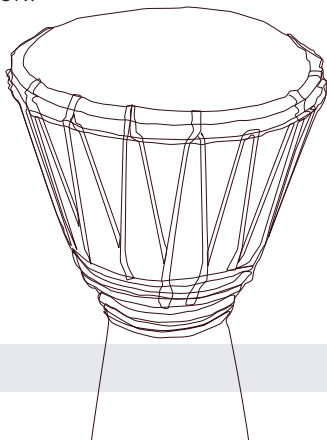
Unexpected movements – Begin or stop movement during an activity
freeze in an unlikely position (unexpectedly)

- Freeze in an unlikely position (unexpectedly)
- Jump, wave, dance

Unexpected sounds – Make a sound during an activity

- Clap (unexpectedly)
- Make a strange mouth noise like “zzzzzzz” or “brrrrrrrrr” (unexpectedly)
- Click your tongue
- Fake an accident (i.e. dropping papers on the floor)

Overall, PRESENT Yourself! You are important. You are a leader. Be one!
Remember to command and move the energy, notice the space you are in
and maximize it, and HAVE FUN!



EXTRA RESOURCES



PURCHASING INSTRUMENTS:

All prices are approximate, as of Feb. 2008.

Drums

- Frame drums (\$20 and up)
- Paddle drums (\$25 and up)

Floor drums:

- Djembes (\$65 and up)
- Tubanos (\$80 and up)

Percussion Instruments

- Agogo Bells (\$20 and up)
- Cabasas (\$15 and up)
- Claves (\$5 and up)
- Cow Bells (\$14 and up)
- Finger Cymbals (\$4 and up per pair)
- Guiros (\$10 and up)
- Jingle bells (\$3 and up)
- Maracas (\$2 and up)
- Shakers (\$2 and up per pair)
- Tambourines (\$20 and up)
- Woodblocks (\$4 and up)
- Xylophone (\$50 and up)

(Prices approximated from Internet sources)

WHERE TO PURCHASE:

Sam Ash Music: www.samash.com, 1-800-472-6274

Guitar Center: www.guitarcenter.com, 1-866-498-7882

West Music: www.westmusic.com, 1-800-397-9378

For greater detail about implementing a Therapeutic Rhythm program, visit this New York State Department of Health website: <http://www.health.state.ny.us/diseases/conditions/dementia/edge/>

SING-A-LONG VIDEOS/DVDs/CDs:

Barbara Jacobs Productions:

Front Row Seat Sing-A-Longs
www.frontrowseatvideos.com
1-415-893-9929

Geriatric Resources Inc.:

Sing-A-Longs from the 30s and 40s
www.geriatric-resources.com

Music Outreach:

CDs and Tapes of Old Favorites
www.music-outreach.com

DEMENTIA MUSIC RESOURCES:

ElderSong Publications, Inc.: Books and Music; www.eldersong.com; 1-800-397-0533

Innovative Caregiving Resources

Music and Images Videos
www.videospite.com

Memory Lane Media:

Entertainment and Stimulation
www.memorylanemedia.com;
1-877-963-6679

Sunshine Terrace Foundation:

Books and Videos on Music and Dementia
www.sunshineterrace.com

OTHER MUSIC RESOURCES:

Recordings for Recovery:

Music Donation Center;
www.r4r.org; 1-800-798-1192

Remo – Health Rhythms:

www.remo.com; 1-661-294-5600

West Music Company:

Instrument sales and advice
www.westmusic.com; 1-800-397-9378

We have presented these rhythmic activities, ideas, and resources so that caregivers of people with dementia can engage them in more meaningful ways that can ultimately improve quality of life as well as quality of care giving. These programs should not be confused with music therapy, which is provided by a professionally trained and board certified (in some states licensed) music therapist. For information about music therapy go to www.musictherapy.org and www.cbmt.org.