Interdisciplinary Aspects of Cultural Engagement in Older Adults: Who/What/Why/When/How

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Abstract
The population of the United States is aging. Caring for older adults requires a variety of approaches and collaboration among professionals. One approach, cultural engagement, involves experiences rooted in cultural activities, such as choir singing, group music, art- and craft-making, drama involvement, etc. Cultural engagement provides opportunities to address aging-associated issues that will not interfere with medication or other treatments. The concept of cultural engagement has been successfully applied to a number of fields including chronic disease management, addictive behaviors, and pain control.

Music and Health Institute Terms
Elderly

Disciplines
Geriatrics

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Interdisciplinary Aspects of Cultural Engagement in Older Adults: Who/What/Why/When/How

Penny Roberts, PhD, MT-BC

Cultural Engagement: The Who

By the year 2050, one in six adults will be over the age of 65 worldwide, (United Nations, 2019); in the United States, one in every five adults will be above retirement age by 2030 (US Census Bureau, 2014). In the United States, older adults will likely outnumber children for the first time in history (US Census Bureau, 2014).

Older adults are more likely to have pain and comorbidities as they age, both physical and psychological in nature (Cameron, Chandler & Schofield, 2018), thus, caring for them is a complex problem that requires a variety of approaches and collaboration among professionals.

One approach, cultural engagement, that involves experiences rooted in cultural activities, such as choir singing, group music, art- and craft-making, drama involvement, etc. provide opportunities to address aging-associated issues that will not interfere with medication or other treatments.

Cultural Engagement: The What

Cultural engagement (CE), engagement in cultural experiences, is different and distinct from alternative interventions such as music or art therapies. The goals of engagement are often to improve well being and resilience (Ginwright, 2018), whereas the goals of therapy, creative or otherwise, include healing or ameliorating an illness and/or its effects within a therapeutic relationship (American Music Therapy Association, 2019). Cultural engagement, i.e., successfully engaging in an active (music making) or passive (attending a concert) cultural endeavor with others, increases self-efficacy as one interacts with the environment to produce positive effects for the self, and also improves self-confidence and sense of control (Patterson & Perlstein, 2011). The concept of cultural engagement has been successfully applied to a number of fields, including chronic disease management, addictive behaviors, and pain control (Carey & Forsyth, 2019).

The definition of CE in this context is similar to that of Environmental Enrichment (EE) in animal research. Although many facilities have used EE for some time, it became a requirement of the 1985 Animal Welfare Act. Although facilities vary in EE delivery, EE is thought of as the combination (Patterson & Perlstein, 2011) of socialization opportunities (more than one animal per enclosure), novelty (toys changed, new food experiences, etc.), and exercise (running wheel, apparatus, etc.). These three elements (socialization, novelty, and exercise) are inherently involved in CE practices, as their presence will lead to the most successful intervention possible. For example, singing in a choir involves using breath support, engagement of the core muscles, balance and strength, while also requiring interaction with others and flexibility to frequent changes in rehearsal structure and music. In the best possible situations, participation in any CE
involves coordination from a variety of partners; this interdisciplinary collaboration provides the maximum benefit for both participants and organizations.

Cultural engagement is inherently interdisciplinary. As distinct from multi- or trans-disciplinary care, interdisciplinary care involves collaboration among distinct and independent partners to provide a systemized outcome (Siedlock & Hibbert, 2013). For example, when one participates in a choir, music must be chosen (conductor), rehearsal musicians secured (accompanist), and the hall reserved (administration) and set up properly (physical plant), etc. This is similar whether one is engaged in visual art (ordering supplies, providing space, scheduling sessions, etc.) or movement activities (space, instruction, musical considerations, etc.). Although “interdisciplinary” (IDP) is a commonly used phrase, in practice it can be simultaneously difficult and rewarding. Benefits of IDP (improved communication, deliberate action, support, relationship skills, etc.) extend to both the patient and professional team (Petri, 2010); however, barriers to IDP remain. These barriers include institutional challenges and factors and differences between and among interventions. Addressing and solving these challenges requires effort, and collaboration is imperative for success.

Cultural Engagement: The Why

CE is more relevant now more than ever for several reasons related to health care delivery. First, as care becomes more specialized among physicians–there are 120 or more medical specialties (Association of American Medical Colleges, 2019) with many subspecialties in each category–care inevitably becomes more compartmentalized. It is rare for all physicians to be aware of one another’s treatment of patients, and almost impossible to predict how those treatments may interact. Secondly, medicine and medical technology continue to allow for more specific diagnoses and treatments, which, in turn, require more complex and well-rounded skill sets many professionals do not possess. Last, as modern medicine embraces the impact of the mind upon the body (mind/body connection), the great need for IDP care and holistic, rather than the fragmented, treatment has become obvious.

While some issues require therapeutic treatment such as music, talk, or art therapy, CE is a viable and distinct intervention. CE has been shown to positively impact a number of both psychological and physical indices in older adults, including frailty, depression, and indicators of physical health. Older adults who regularly engaged in CE were shown to be different in both prevalence and progression of frailty (Rogers & Farncourt, 2019). Journals of Gerontology, suggesting both a protective and ameliorating effect of CE, and those who engaged in regular CE showed a protective effect against depression (Fancourt & Tymoszuk, 2019). Further, CE impacts physical factors: older adults engaged in CE report fewer falls, decreased medication consumption, and an overall trend toward increased levels of activity when compared to their less engaged counterparts (Cohen et al, 2006).

Cultural Engagement: When

Although a dose dependent relationship was found between frequency of cultural interactions and variables affecting older adults such as frailty and depression (Rogers & Farncourt, 2019; Farncourt, 2018), it can also be stressful to be overwhelmed with sensory information. It is
imperative to maintain one’s self-efficacy to manage sensory overload. In other words, older adults must always have the choice to opt in and opt out of experiences. It is essential to offer a variety of types of CE, an accessible schedule, and ensure the autonomy of all to participate as much or as little as they choose.

Cultural Engagement: The How

To accomplish sensitive CE, community partners are essential; resources and challenges must be shared among organization to maximize benefit. In addition, the mission of each organization must be served. One very successful example took place at a CE event at the Louisiana State Museum’s Cabildo. This structure was built in the 1700’s and now houses exhibits to educate the public about Louisiana history. Its Mardi Gras collection was highlighted for this particular event. The New Orleans Preservation Hall Jazz Band (whose mission is to preserve the music of New Orleans) performed traditional music, and local art educators provided art-making opportunities. Older adults came from around the city (socialization) to engage in unique art-making activities (exercise, novelty) and had the opportunity to dance to a band playing traditional jazz music (exercise, novelty, socialization) while learning more about Mardi Gras history.

This example highlights the considerations necessary for CE to be its most effective; care and sensitivity must be employed during planning to maximize benefit. These include giving attention to various cultures, offering a variety of interventions, and making provisions for inclusion. For example, in New Orleans’ Mardi Gras culture, members of Indian krewes create extravagant and complicated costumes all year, a very solitary endeavor. When group experiences are organized around this craft, those who may not each other are connected, those who already do benefit from shared interaction, and the city’s culture is preserved as well.

Cultural engagement is a viable, accessible option for connecting communities and working toward the best health possible for older adults. With planning, sensitivity of community partners and attention to the needs of older adults, CE is an option to address concerns of the growing population of older adults.

References


