INTRODUCTION

Life and death have always fascinated human beings as well as researchers and is seen from biological, social, emotional, psychosocial as well as philosophical and spiritual aspects. Ageing a process between life and death has also been deliberated likewise. Ageing is a universal phenomenon observed variably. Ageing actually a natural process was negatively seen as a natural disease by Aristotle [1] whilst traditional Indian philosophy saw this process as ashrama dharma with finally disengagement of social attachment and responsibility viz., Brahmacharya (student life), Grahasthya (family life), Vanaprastha (retired life), and Sannyasa (life of renunciation) [2]. The process itself of ageing would however depend on family genetic history, habits and choice of lifestyle discipline followed when as young as possible. This choice would eventually reflect in overall general health, quality of life and wellbeing in the ageing process that is also accompanied by hormonal changes. Slow noticeable changes take place in neurological, cardiovascular and musculoskeletal biological systems bringing comorbidities. Diabetes and uncontrolled blood pressure levels along with obesity increase the risk of getting neurodegenerative diseases, hypertension, heart ailments or Alzheimer’s and dementia, a progressive disease that affects memory and cognition. The five senses viz., touch, sight, smell, hearing and taste are also affected to disturb activities of daily living. Therefore, it is pragmatic to seriously consider habits and lifestyle to facilitate good healthy ageing. Factors like balanced diet, exercise, environment, society and economy as well as accessibility need to be included for planning an active ageing program.

Ageing has been scientifically explored from multiple angles and the most commonly accepted dimensions of ageing are four-fold viz. chronological, biological, psychological and social ageing. Chronological ageing has been referred to as the duration of one’s life since birth viz., calendar years. However, it is not “...recognized as an adequate measure of the extent of ageing because, as a process, it is thought to vary between individuals.” Biological ageing means biological changes that take place within an individual that gradually deplete the physiological capabilities and makes the organism vulnerable to disease. “From this perspective, the ageing process stems from several physiological factors, and is modified throughout the life course by environmental factors (such as nutrition), experiences of disease, genetic factors and life stage.” Psychological ageing focuses on the psychological changes that take place within an individual in the life course. “Psychological ageing focuses upon changes that occur during adulthood to an individual’s personality mental functioning (e.g. memory, learning and intelligence) and sensory and perceptual processes.”[3]

Lastly, social Ageing: It is a broader concept that focuses on the dynamics of the roles and relationships that individuals experience during their life -course. “As an individual experience, social ageing affects perceptions of who we are, but can also be shaped or ‘constructed’ by social and cultural contexts which dictate the normative expectations about the roles, positions and behaviour of older people in society [3].” Looking after just the physical aspect of ageing is not enough. Mental health and its care are equally important as that of the body. Lots of concerns in this ageing process to name a few are falls and being bedridden, financial insecurity, dependence on others, family issues, social, psychological duress,
depression, feeling lonely arising out of being neglected and unwanted by family and friends. Here arises poor self-worth. How can the ageing population come out of this crisis of sorts?

There are many options available viz., joining social groups, becoming members of social organisations, volunteering to name a few. Learning a new language or a musical instrument, hobbies like art, craft, painting, needlework, dance, music or exercise forms of Yoga, Tai-chi or Pilates are choices that one can make to keep mentally and physically busy.

Music, be it listening, singing or playing an instrument is a popular choice with many as it is the least expensive to even listening to music that is freely available on a great platform like YouTube Channel and audio-visuals. Music is a great intervention that is therapeutic and can play an important role in improving the quality of life for all. The ageing population can be less mobile than others and centres for social interaction may not be easily accessible. Music like Yoga is extremely beneficial to the listener, singer or player and practitioner respectively. Its therapeutic benefits help the elderly, to begin with, as a mood changer especially when practiced in groups.

Music has now attracted much more interest not only for research studies but also to be used as a therapeutic intervention by the medical fraternity. It has been deemed as a promising tool to manage depression and other psychological symptoms. A review states that non-pharmacological person-centered therapy helps treat behavioural and psychological symptoms of dementia as per Dementia Care Practice recommendations of the Alzheimer’s Association [4].

A review article [5] mentions of the impact of music therapy on patients in post-stroke rehabilitation and persons with dementia who improved their cognition skills as well as their auditory and motor functions. Further, it was noted that music preserved their emotional and cognitive functions across cortical and subcortical regions in the brain. It is interesting that cognitive function is also preserved and relatively less affected by Alzheimer’s and dementia.

With the increasing global numbers of those affected by dementia and the decade, 2021-2030 declared as Decade of Health Ageing how important it is to improve the quality of life for all especially that of the ageing population [6]. Music is one intervention that has been proved to be conducive to improving the quality of life of all be they children, adolescents, elderly population including those with special needs and those living with Alzheimer’s and dementia.

Another study observes that encouraging effects of music and musical activities are seen on quality of life, social health and general satisfaction irrespective of age, especially in older adults. Musical activities of any kind whether humming, singing, just listening to music, playing an instrument, can help improve the quality of life and health factors for wellbeing. Experience of loneliness, bereavement in the family, switch-over from an active life to that of sedentary existence and retirement with little to do can influence social and emotional psyche of the ageing population. In such circumstances, music interventions and its use as therapy can contribute to healing and benefit everyone [7].

Ellis and Thayer [8] discuss the close interconnectedness of autonomic nervous system (ANS) and music. Further, they believe there is great scope for more research on how and why even small changes in elements of music: tempo, beat and pitch can act as a stimulus to bring about behavioral, emotional, neurophysiological and psychophysiological changes in responses within the human body.

Ageing brings about changes in tastebuds where food is concerned, choice of colours and style, clothes, type of books to read likewise choices on various genres of music. Ageing brings about more preference for old songs and melodies that they are familiar with or just to go down memory lane. They may even prefer songs that were hits or top of the charts in their youth. With fading memory, old tunes resound memories. Therefore, music activities actually help reminisce, improve cognition, buffer emotions as well as allow bottled-up emotions. Music is that which cannot mute thoughts and feelings and that which can also be ‘spoken’ non-verbally.

Those with neurological disorders often have frequent mood swings and depression that affect behaviours. Music be it instrumental or songs with lyrics have varied impact on persons at different times depending on the frame of mind they are in. Therefore, whilst using music as therapy, it is important that this is done only by a trained music therapist who does enough research and chooses the right music for designing modules for each session followed up with recorded observations for customizing the next session. Different cultures have genres of music and instruments that are of regional variety as music has no boundaries and impact is
universal. Impact of music could be through its language, sound, melody, rhythm, harmony, tempo or timbre. Studies have shown that different languages, tempos, tones, and sound levels of music can cause different effects on emotions, cognition and physical reactions in people. And, these also could change with the circumstances and the place or environment they are in.

Music activities can be enjoyed by oneself or as group activity. In the latter, there is stronger impact on the emotional, social and psychosocial domains. Other benefits include increase of social interaction that allows for stimulation and relaxation. Most enjoy group sessions as it is heterogenous in structure where the atmosphere is well balanced and many mini-groups are formed on the basis of common likes and dislikes. Hence, people are more comfortable and less self-conscious even if they are new to one another. There is regular interaction with people they meet in group sessions, make new friends with additions regularly joining the group. This brings about with social, cohesive togetherness improving psycho-social health and wellbeing especially within groups involved in singing or listening to religious music and healthy.

Music is a common denominator that connects and bonds people of different generations. Music is all-inclusive and has no barrier of age and attitudes, economic strata, language and culture. A review [9] by Belgrave studied the effect of an intergenerational music therapy program on children and older adults, their interactions, cross-age attitudes, and older adults' psychosocial well-being. It revealed how participants comprising of elders, youth and children enjoyed these intergenerational music sessions. The effects of these sessions cultivated a change in the mindset of children for the better. It was observed that the children started looking at the elders with more respect for them understanding the process of ageing and the changes it brings. Elders became more tolerant of these children which was not so earlier. Further, these interactions helped elders to be more patient with children, there was bonding and they found that the youth wanted to learn from their experiences and wisdom. This made them feel wanted and valued. This kept isolation and depression at bay for elders.

Alzheimer’s disease and dementia are progressive neurological disorders that impact memory and brings about personality changes. In spite of lots of ongoing medical research, presently, Alzheimer’s has no cure. The person living with dementia (PwDem) whose personality has totally changed, living with dependence on the spouse who may also be living with co-morbidities, other family members or caregivers do require respite from caregiving. This onerous challenge of caregiving gives psychosocial and emotional stress leading to mental and, subsequently, physical health problems. Music, a route as an outburst for the soul, has been proved to be good for the elderly and caregivers as it helps them better manage stress, anxiety, depression or agitation they commonly live with. Music gives a spa-like treatment to the inner being. Music is, therefore, a strategic tool whose benefits can be actively or passively experienced. PwDem often cannot voice their thoughts, find it hard to convey or express their feelings and mainly communicate non-verbally. Another study [10] shows how music can influence the body and how music allows subtle expression of feelings through conscious or unconscious physiological responses through the autonomic nervous system (ANS). Music and its elements can be used as interventions by designing special programs for individuals to heal various health disorders, age-related diseases and as intervention for wellbeing and improving quality of life. Good hormones, dopamine and serotonin, alleviate pain and also uplift mood. A study [11] states how music as an intervention helps regulate pulmonary-respiratory diseases, neurological disorders as well as those having sleep apnea and problems of snoring. Singing and playing wind instruments can help better the function of lungs through use of breath control and support bringing about clarity in speech and depth of voice added with other interventions to reinforce muscle strength.

Music and related activities are a great source for the aging to go down memory lane to improve the emotional state of mind. An effective interventional therapeutic strategy, music impacts and improves total health and wellbeing specially supporting the ageing population. Music is available free of cost, thanks to technology, an accessible tool and risk-free. It is a great stress buster that can improve mood, regulate emotion, reduce anxiety and depression, boost memory, help in rehabilitation, facilitate emotional expression and encourages spiritual growth. Music has many genres to choose from and is soothing to help those having difficulty getting sleep or suffer insomnia. Furthermore, elders are able to revive memories with nostalgia, group sessions allow for building new bonds and forge stronger relationships to promote holistic health. Benefits of music and musical activities are to be experienced to understand its impact on quality of life. Music, in a way, allows one to age gracefully.
Music is indeed a magical potion easily available and risk-free. Today, research is confirming the benefits of music as a therapeutic tool for those in need of rehabilitation of any kind, the multi-disciplinary rehabilitation includes the function and expertise of a music therapist as part of its Team for its patients, both children and its geriatric population.

REFERENCES


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