

Music in the community

Investigating the effects of group
music making programmes on older adults
and higher education music students

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DECLARATION

I hereby confirm that the entire submission is my own work and has not been submitted for a comparable academic award.

ABSTRACT

This thesis examines the potential of music-based interventions involving residents in nursing homes and higher education music students. While a large amount of research suggests that engagement with music can have positive effects on the health and wellbeing of older adults, many questions related to the access to and the meaning of music for residents in nursing homes are still unanswered. At the same time, recent studies indicate that community-based musical activities can also improve the health and wellbeing of the musicians providing them. However, research addressing higher education music students' involvement in such activities is still at an early stage, and very few research projects have included the perspectives of both the recipients and the providers of music-based interventions in their investigations.

This thesis addresses these gaps through four qualitative studies, employing thematic analysis, carried out in Southern Switzerland. The PERMA model (Seligman, 2011) was used to assess the impact of group music making experiences on the participants, and the concept of mutual recovery (Crawford, et al., 2013) was considered to observe whether the encounter between residents and students generated mutual benefits. For Study 1 (Chapter 5) 20 residents (13 women and 7 men, aged 71-99 years, mean = 84.6, SD \pm 7.3) of 6 nursing homes were interviewed about their access to music and the role and function music plays in their lives. The findings revealed that residents, regardless of their musical background, considered music to be an important life resource.

Music was linked to their identity and could improve their wellbeing by promoting positive emotions and facilitating social interactions. However, many residents had less access to music than they had in the past and felt that more musical experiences in their daily lives would be welcomed. Study 2 (Chapter 6) focused on a 10-week programme of group music making carried out in four nursing homes. Each session was led by an experienced music teacher from the Conservatorio della Svizzera italiana (Lugano, Switzerland) supported by 9 students trained to act as music facilitators. Residents were engaged in singing and drumming with appropriate instruments and were interviewed at the end of the programme about their experiences and what effects they perceived on their health and wellbeing through taking part. Residents of three nursing homes (N = 22, 16 women and 6 men, aged 72-95 years, mean = 83.6, SD \pm 6.9) reported positive emotions, engagement and anticipation of the sessions, as the programme offered

opportunities to learn and to interact both with peers and highly skilled musicians. Moreover, the opportunity to approach unfamiliar repertoires and to listen to students' short performances were considered rewarding. Study 3 (Chapter 7) investigated how the 9 students involved (7 women and 2 men, aged 19-26 years, mean = 23.1, SD ± 1.9) experienced the programme and the effects they perceived on their health, wellbeing and career preparation. Data were collected through interviews before the beginning of the training and at the end of the programme, and through an oral diary updated at the end of each session. The results highlighted the students' appreciation of the humanitarian and innovative components of the programme, which had positive effects on professional and personal spheres. Students reported that this experience enlarged their competences and provided new insights into teaching and audience engagement, as well as encouraging them to question their tendencies towards perfectionism. Moreover, they perceived psychological and physical benefits and experienced meaningful interactions with the residents. Study 4 (Chapter 8), based on the same data collected for Study 3, aimed to understand the shortcomings experienced by the students in terms of their preparation, and their thoughts about how to improve the training they received. The findings suggest that the students at times felt a lack of preparation in interacting with residents and the need to improve teamwork and to be trained further to develop some musical skills. As a consequence of becoming more familiar with residents session by session, and of some changes made to the programme in the second academic year, the shortcomings and the problems experienced by students diminished considerably.

Overall, this thesis demonstrates that the encounter between residents and music students generated mutual benefits, and it provides new understanding about the meaning of music-based interventions for both recipients and providers. The thesis highlights the importance of facilitating access to music in nursing homes, and it also describes an activity that can improve the role of musicians and music institutions in the community.

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TABLE OF CONTENTS

LIST OF PUBLICATIONS	PAG. 13
LIST OF TABLES AND FIGURES	PAG. 14
INTRODUCTION	PAG. 16
CHAPTER 1	
OVERVIEW ON OLDER POPULATION AND ON THE LITERATURE FOCUSING ON MUSIC, HEALTH AND WELLBEING IN THIRD AND FOURTH AGE	PAG. 19
INTRODUCTION	PAG. 19
1.1 THE GROWTH OF AN AGEING POPULATION	PAG. 20
1.2 HETEROGENEITY AND RESOURCES OF THE OLDER POPULATION	PAG. 21
1.2.1 THE ABILITY TO LEARN IN OLD AGE	PAG. 23
1.2.2 THE ROLE OF RESILIENCE IN OLD AGE	PAG. 24
1.2.3 THE CONCEPT OF FRAILITY	PAG. 25
1.3 DEALING WITH THE AGEING PROCESSES: TWO THEORETICAL FRAMEWORKS	PAG. 26
1.3.1 SUCCESSFUL AGEING	PAG. 27
1.3.2 ACTIVE AGEING	PAG. 29
1.4 AN OVERVIEW OF THE OLDER POPULATION LIVING IN SOUTHERN SWITZERLAND	PAG. 31
1.4.1 EDUCATION AND ECONOMIC PROFILE	PAG. 32
1.4.2 FAMILY AND INTERPERSONAL RELATIONSHIPS	PAG. 32
1.4.3 SOCIAL ISOLATION AND LONELINESS	PAG. 33
1.4.4 PARTICIPATION IN THE COMMUNITY	PAG. 34
1.5 THE CONTEXT OF NURSING HOMES IN SWITZERLAND	PAG. 35
1.6 THE POTENTIAL OF ARTS-BASED INTERVENTIONS FOR HEALTH: A REPORT FOR THE WORLD HEALTH ORGANIZATION	PAG. 37
1.7 THE IMPORTANCE OF MUSIC IN THE LIFE OF OLDER ADULTS	PAG. 39
1.7.1 OLDER ADULTS' REFLECTIONS ABOUT THEIR MUSIC EDUCATION, PREFERENCES AND ACTIVITIES	PAG. 40
1.7.2 OLDER ADULTS' REPORTS ABOUT UNFORGETTABLE EXPERIENCES WITH MUSIC	PAG. 42

1.8 THE IMPACT OF MUSIC ON THE WELLBEING OF OLDER ADULTS	PAG. 45
1.9 THE POTENTIAL OF ENGAGEMENT WITH MUSIC IN LATER LIFE: AN OVERVIEW	PAG. 47
1.9.1 HOW CONCERT SEASONS PLANNED SPECIFICALLY FOR OLDER ADULTS ARE EXPERIENCED BY RECIPIENTS	PAG. 48
1.9.2 THE MEANING OF LIVE MUSIC IN HOSPITAL WARDS FROM OLDER PATIENTS' PERSPECTIVES	PAG. 50
1.10 MUSIC-BASED INTERVENTIONS FOCUSING ON SINGING	PAG. 53
1.11 MUSIC-BASED INTERVENTIONS FOCUSING ON MUSICAL INSTRUMENTS	PAG. 57
1.11.1 A SEMINAL PROGRAMME OF GROUP MUSIC MAKING IN A NURSING HOME	PAG. 58
1.11.2 OBSERVING THE EFFECTS OF MUSIC MAKING ON OLDER ADULTS' QUALITY OF LIFE	PAG. 59
1.11.3 TAKING MUSIC LESSONS FROM YOUNG MUSICIANS IN OLDER ADULthood	PAG. 62
1.12 CONCLUSIONS AND RESEARCH QUESTIONS	PAG. 63
CHAPTER 2	
OVERVIEW ON THE LITERATURE FOCUSING ON THE HEALTH, WELLBEING AND TRANSITION TO PROFESSION FOR HIGHER EDUCATION MUSIC STUDENTS	PAG. 68
INTRODUCTION	PAG. 68
2.1 THE END OF UNIVERSITY STUDIES AND THE START OF A MUSICAL CAREER: A CHALLENGING TRANSITION	PAG. 68
2.2 MAKING MUSIC AT PROFESSIONAL LEVEL: MULTIFACETED IMPLICATIONS IN TERMS OF HEALTH AND WELLBEING	PAG. 70
2.3 WHAT RESEARCH TELLS ABOUT THE HEALTH AND WELLBEING OF HIGHER EDUCATION MUSIC STUDENTS	PAG. 72
2.4 POSSIBLE INITIATIVES THAT CONSERVATOIRES CAN UNDERTAKE TO SUPPORT THE WELLBEING OF THE MUSICIANS OF THE FUTURE	PAG. 74
2.4.1 INCREASING FORMAL MENTORING AND BROADENING STUDENTS' CURRICULA	PAG. 75
2.4.2 RECONSIDERING THE NOTION OF SUCCESS	PAG. 76
2.4.3 IMPLEMENTING PEDAGOGICAL FRAMEWORKS ABLE TO IMPROVE INTERPERSONAL AND INTRAPERSONAL ABILITIES	PAG. 77
2.5 MAKING MUSIC IN COMMUNITY ENVIRONMENTS: THE RELEVANCE ON THE TRAINING OF HIGHER EDUCATION MUSIC STUDENTS	PAG. 79
2.6 THE IMPACT OF MUSIC-BASED INTERVENTIONS ON HIGHER EDUCATION MUSIC STUDENTS	PAG. 82

2.6.1 BRINGING STUDENTS TO MAKE MUSIC IN THE YAKIMA HIGHLAND	PAG. 82
2.6.2 BRINGING HIGHER EDUCATION MUSIC STUDENTS INTO DAY CENTRES FOR IMMIGRANTS, DRUG ADDICTED AND PSYCHOTIC PEOPLE	PAG. 83
2.6.3 EXPLORING ENCOUNTERS BETWEEN MUSIC STUDENT-TEACHERS AND HEALTHY OLDER LEARNERS	PAG. 85
2.6.4 INVOLVING STUDENTS IN MUSICAL PROGRAMMES FOR PEOPLE “OF ALL AGES AND DISPOSITIONS”	PAG. 87
2.6.5 INVESTIGATING THE MEANING OF MAKING MUSIC IN HOSPITAL WARDS	PAG. 88
2.7 THE PERSPECTIVE OF PROFESSIONAL MUSICIANS INVOLVED IN COMMUNITY-BASED ACTIVITIES	PAG. 90
2.7.1 THE PROFESSIONAL IDENTITY OF MUSICIANS WORKING IN HOSPITAL SETTINGS	PAG. 90
2.7.2 MOVING AWAY FROM THE MUSIC STAND IN THE ORCHESTRA TO MAKE MUSIC WITH CHILDREN	PAG. 92
2.8 CONCLUSIONS AND RESEARCH QUESTIONS	PAG. 93
CHAPTER 3	
HEALTH AND WELLBEING: THE THEORETICAL PERSPECTIVES CONSIDERED IN THIS STUDY	PAG. 98
INTRODUCTION	PAG. 98
3.1 THE COMPLETE STATE OF MENTAL HEALTH	PAG. 99
3.2 THE PERMA MODEL	PAG. 100
3.3 USE OF THE PERMA MODEL IN THE FIELD OF MUSIC AND ITS RELEVANCE FOR THE PRESENT RESEARCH	PAG. 101
3.4 MUTUAL RECOVERY AND ITS RELEVANCE FOR THE PRESENT RESEARCH	PAG. 107
3.5 CONCLUSIONS	PAG. 109
CHAPTER 4	
METHODOLOGY	PAG. 110
INTRODUCTION	PAG. 110
4.1 OVERVIEW OF RESEARCH QUESTIONS	PAG. 110
4.2 SOCIAL CONSTRUCTIONISM	PAG. 112
4.3 QUALITATIVE RESEARCH	PAG. 114
4.4 PROCEDURE	PAG. 115
4.4.1 THE MUSICAL ACTIVITIES: THE CONTENTS OF A TYPICAL SESSION	PAG. 116

4.4.2 THE ROLE OF THE STUDENTS	PAG. 117
4.5 THE STUDIES CARRIED OUT FOR THIS THESIS	PAG. 118
4.5.1 STUDY 1 (REPORTED IN CHAPTER 5)	PAG. 118
4.5.2 STUDY 2 (REPORTED IN CHAPTER 6)	PAG. 119
4.5.3 STUDY 3 (REPORTED IN CHAPTER 7)	PAG. 124
4.5.4 STUDY 4 (REPORTED IN CHAPTER 8)	PAG. 125
4.6 DATA COLLECTION AND ANALYSIS	PAG. 126
4.6.1 SEMI-STRUCTURED INTERVIEWS	PAG. 126
4.6.2 ORAL DIARIES	PAG. 130
4.6.3 THEMATIC ANALYSIS	PAG. 132
4.6.4 ANALYTICAL PROCEDURE	PAG. 133
4.6.5 OVERVIEW OF ETHICS ASPECTS OF THE PRESENT STUDY	PAG. 137
4.7 CRITERIA FOR ENSURING THE VALIDITY OF THE RESULTS	PAG. 139
4.8 CONCLUSIONS	PAG. 143
CHAPTER 5	
STUDY 1: MUSIC IN THE LIFE OF NURSING HOME RESIDENTS	PAG. 146
INTRODUCTION	PAG. 146
5.1 METHOD	PAG. 147
5.1.1 PARTICIPANTS RECRUITMENT	PAG. 147
5.1.2 PROCEDURE	PAG. 148
5.1.3. DATA ANALYSIS	PAG. 149
5.2 RESULTS	PAG. 150
5.3 DISCUSSION	PAG. 159
5.4 CONCLUSIONS	PAG. 161
CHAPTER 6	
STUDY 2: ART FOR AGES: THE EFFECTS OF GROUP MUSIC MAKING ON THE WELLBEING OF NURSING HOME RESIDENTS	PAG. 163
INTRODUCTION	PAG. 163
6.1 METHOD	PAG. 164
6.1.1 STUDY DESIGN	PAG. 164

6.1.2 PARTICIPANT RECRUITMENT	PAG. 164
6.1.3 DATA COLLECTION	PAG. 165
6.1.4 DATA ANALYSIS	PAG. 166
6.2 RESULTS	PAG. 167
6.3 DISCUSSION	PAG. 178
6.4 CONCLUSIONS	PAG. 185
CHAPTER 7	
STUDY 3: GROUP MUSIC MAKING IN NURSING HOMES: INVESTIGATING THE EXPERIENCE OF HIGHER EDUCATION MUSIC STUDENTS	
	PAG. 186
INTRODUCTION	PAG. 186
7.1 METHOD	PAG. 187
7.1.1 STUDY DESIGN AND RECRUITMENT	PAG. 187
7.1.2 PROCEDURE	PAG. 188
7.1.3 DATA COLLECTION	PAG. 189
7.1.4 DATA ANALYSIS	PAG. 189
7.2 RESULTS	PAG. 190
7.3 DISCUSSION	PAG. 202
7.4 CONCLUSIONS	PAG. 206
CHAPTER 8	
STUDY 4: THE SHORTCOMINGS AND NEEDS PERCEIVED BY STUDENTS IN TERMS OF TRAINING	
	PAG. 207
INTRODUCTION	PAG. 207
8.1 RESULTS	PAG. 208
8.2 DISCUSSION	PAG. 222
8.3 CONCLUSIONS	PAG. 227
CHAPTER 9	
DISCUSSION AND CONCLUSIONS	
	PAG. 228
INTRODUCTION	PAG. 228
9.1 DISCUSSION OF THE RESULTS	PAG. 229
9.1.1 THE MUTUAL BENEFITS PERCEIVED BY RESIDENTS IN NURSING HOMES AND HIGHER EDUCATION MUSIC STUDENTS INVOLVED IN GROUP MUSIC MAKING	PAG. 229

9.1.2 THE ROLE OF ACTIVE ENGAGEMENT WITH MUSIC IN THE ENCOUNTER BETWEEN NURSING HOME RESIDENTS AND HIGHER EDUCATION MUSIC STUDENTS	PAG. 232
9.1.3 THE POTENTIAL OF GROUP MUSIC MAKING IN NURSING HOMES IN TERMS OF RELATIONSHIPS FOR RESIDENTS AND HIGHER EDUCATION MUSIC STUDENTS	PAG. 234
9.1.4 THE LEARNING OPPORTUNITIES OFFERED BY GROUP MUSIC MAKING TO RESIDENTS IN NURSING HOMES AND HIGHER EDUCATION MUSIC STUDENTS	PAG. 236
9.1.5 AVENUES TO IMPROVE THE MUSICAL PROGRAMME	PAG. 239
9.2 LIMITATIONS OF THIS WORK	PAG. 241
9.3 RECOMMENDATIONS FOR PRACTICE	PAG. 245
9.3.1 THE NEED TO INVOLVE HIGHER EDUCATION MUSIC STUDENTS IN RECEPTIVE MUSIC-BASED INTERVENTIONS FOR OLDER ADULTS	PAG. 245
9.3.2 THE NEED TO INVOLVE HIGHER EDUCATION MUSIC STUDENTS IN MUSIC-BASED INTERVENTIONS ADDRESSING THIRD AGE AND COMMUNITY-DWELLING POPULATIONS	PAG. 247
9.3.3 THE NEED TO INCLUDE COMPETENCES RELEVANT TO ENGAGING OLDER ADULTS WITH MUSIC IN CONSERVATOIRE CURRICULA	PAG. 249
9.4 AREAS FOR FURTHER RESEARCH	PAG. 252
9.5 KEY RECENT DEVELOPMENTS IN THE FIELD AND THEIR IMPLICATIONS FOR THIS THESIS	PAG. 254
9.6 CONCLUSIONS	PAG. 260
REFERENCES	PAG. 266
APPENDIX 1	
STUDY 1: MATERIAL USED FOR DATA COLLECTION AND EXTRACTS OF TRANSCRIPTIONS	PAG. 309
A1.1 CONSENT FORM FOR AUDIO RECORDING OF INTERVIEWS	PAG. 309
A1.2 INTERVIEW SCHEDULE	PAG. 310
A1.3 INTERVIEW EXTRACTS	PAG. 312
APPENDIX 2	
MATERIAL USED FOR DATA COLLECTION AND EXTRACTS OF TRANSCRIPTIONS	PAG. 319
A2.1 PARTICIPANT INFORMATION SHEET	PAG. 319
A2.2 CONSENT FORM FOR AUDIO RECORDING OF INTERVIEWS	PAG. 321
A2.3 INTERVIEW SCHEDULE	PAG. 322
A2.4 INTERVIEW EXTRACTS	PAG. 322

APPENDIX 3	
STUDIES 3 AND 4: MATERIAL USED FOR DATA COLLECTION AND EXTRACTS OF TRANSCRIPTION	PAG. 329
A3.1 PARTICIPANT INFORMATION SHEET	PAG. 329
A3.2 CONSENT FORM FOR AUDIO RECORDING OF INTERVIEWS	PAG. 331
A3.3 INTERVIEW AND DIARY SCHEDULES	PAG. 332
A3.3.1 INTERVIEW SCHEDULE USED BEFORE THE BEGINNING OF THE PROGRAMME	PAG. 332
A3.3.2 INTERVIEW SCHEDULE USED AFTER THE LAST SESSION OF THE PROGRAMME	PAG. 333
A3.3.3 INTERVIEW SCHEDULE USED AT THE END OF THE PROGRAMME WITH STUDENTS WHO ATTENDED TWICE	PAG. 334
A3.3.4 SCHEDULE USED IN THE ORAL DIARIES	PAG. 335
A3.4 INTERVIEW AND DIARY EXTRACTS	PAG. 335
APPENDIX 4	
DESCRIPTION OF THE SEMINAR RELATED TO ART FOR AGES AND OF THE MUSICAL SESSIONS	PAG. 349
INTRODUCTION	PAG. 349
A4.1 STRUCTURE AND FORMAT OF THE SEMINAR	PAG. 349
A4.2 FORMAT OF EACH GROUP MUSIC MAKING SESSION	PAG. 350
A4.3 THE PERCUSSION INSTRUMENTS USED DURING THE SESSIONS	PAG. 352
A4.4 TASKS CARRIED OUT BY STUDENTS DURING THE SESSIONS	PAG. 352
A4.5 REPERTOIRE PERFORMED IN THE PROGRAMME	PAG. 353

LIST OF PUBLICATIONS

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LIST OF TABLES AND FIGURES

CHAPTER 5

TABLE 1. PARTICIPANT CHARACTERISTICS. **PAG. 148**

TABLE 2. THEMES AND SUBTHEMES ARISING FROM THE ANALYSIS
OF THE NURSING HOME RESIDENTS' INTERVIEWS. **PAG. 150**

CHAPTER 6

TABLE 3. PARTICIPANT CHARACTERISTICS. **PAG. 165**

TABLE 4. OVERARCHING GROUPS, THEMES, AND SUBTHEMES ARISING
FROM THE ANALYSIS OF RESIDENTS' INTERVIEWS FOLLOWING THE 10-WEEK
GROUP MUSIC MAKING PROGRAMME. **PAG. 167**

CHAPTER 7

TABLE 5. PARTICIPANT CHARACTERISTICS. **PAG. 188**

TABLE 6. THEMES AND SUBTHEMES ARISING FROM THE ANALYSIS
OF INTERVIEWS AND DIARIES. **PAG. 191**

CHAPTER 8

TABLE 7. OVERARCHING GROUPS, THEMES AND SUBTHEMES ARISING
FROM THE ANALYSIS OF INTERVIEWS AND DIARIES. **PAG. 208**

APPENDIX 4

TABLE 8. CONTENTS OF THE SEMINAR. **PAG. 349**

TABLE 9. SET OF INSTRUMENTS AND OBJECTS USED AS PERCUSSION INSTRUMENTS. **PAG. 352**

CHAPTER 6

FIGURE 1. INTERACTIONS BETWEEN THEMES AND SUBTHEMES ARISING FROM THE INTERVIEWS.

PAG. 179

FIGURE 2. RELATIONSHIPS BETWEEN THE RESULTS AND THE FIVE DIMENSIONS OF THE PERMA MODEL.

PAG. 182

CHAPTER 7

FIGURE 3. EFFECTS ON PROFESSIONAL AND PERSONAL DIMENSIONS RESULTING FROM THE PARTICIPATION IN THE PROGRAMME.

PAG. 203

INTRODUCTION

This thesis focuses on a music-based intervention involving nursing home residents and higher education music students, and considers the perspectives of both groups using a qualitative approach.

The motivations for investigating in this direction are manifold. In the last few decades both life expectancy and the number of older adults have increased significantly. These trends have been observed in a large number of countries and are particularly significant in Switzerland, the country where this research was carried out. It is therefore imperative to find effective and sustainable approaches to ensure the highest possible level of health and wellbeing for the older population. A large body of literature suggests that involvement with music can play a key role in this regard. Encouraging findings have been derived from various modes of engagement with music, including singing, playing an instrument, going to concerts or listening to recorded music. Moreover, beyond evidence of benefits in psychological, cognitive and physical dimensions, some studies suggest that it is possible to improve one's musical knowledge even in old age. This not only represents a further reason to consider the possible benefits of music-based interventions, but also invites reflection on possible misconceptions about the potential of older populations in terms of acquisition of musical competences.

Yet even in this encouraging context, there remains a significant knowledge gap in relation to nursing home residents. This population is extensively studied in the field of music therapy, which offers a large body of literature primarily addressing people with significant cognitive impairments. However, the effects of involvement with music for non-therapeutic purposes on residents with good cognitive health does not seem to have been studied in depth. Addressing this knowledge gap may thus offer important insights into supporting health and wellbeing in the later stages of life. This thesis therefore seeks to clarify the role that music plays in the lives of nursing home residents by focusing on how they experienced a group music making programme and what effects they perceived in terms of their health and wellbeing as a result of taking part in it.

The programme was carried out in four nursing homes by an experienced higher education music teacher who acted as workshop leader and was supported by higher education music students enrolled in an elective seminar. Thus, in addition to

considering the perspectives of residents this thesis also investigated how the students experienced the group music making with residents and what effects they perceived. There are several reasons for addressing these questions. Firstly, a considerable number of studies show that both professional musicians and pre-professional music students are exposed to a wide range of physical and mental stressors. Secondly, the literature shows that the transition into the music profession can be extremely difficult. Possibilities for obtaining full-time permanent jobs are extremely limited for musicians, and to work freelance, often pursuing a portfolio career, requires a wide range of non-musical skills. As a result, many music students abandon their professional careers shortly after completing their university studies, or embark on careers which are unsustainable in terms of health and wellbeing. This has led many scholars to consider the role that music colleges can play in preparing students to face these challenges more effectively. In this context, involving students in community-based activities could be relevant. This hypothesis is based on two assumptions. Firstly, recent research (which is still at an early stage) suggests that music-based interventions addressing specific communities can also offer significant benefits to providers. Secondly, numerous scholars consider this type of activity to be effective in helping higher education music students to develop a wide range of relevant musical and non-musical skills.

By investigating the experiences of both recipients and providers, this thesis aims to contribute to understanding the potential of a group music making programme involving nursing home residents and higher education music students. It also aims to provide information that would make it possible to replicate the training offered to the students involved, to suggest ideas for the development of further music-based interventions addressing older populations and to indicate further areas for research. In this way, it is hoped that this thesis will contribute to clarifying the role that music colleges can play in fostering the well-being of the community and the employment of their students. Considering the recommendations of the United Nation Educational Scientific and Cultural Organisation (1998) related to the need to “educate highly qualified graduates and responsible citizens able to meet the needs of all sectors of human activity” (article 1, p. 3) and “educate students to [...] look for solutions to the problems of society, apply them and accept social responsibilities” (article 9b, p. 6) it is timely and relevant to address the research questions investigated here.

This thesis is based on four studies and is divided into 9 chapters.

Chapter 1 reviews literature related to the older population, reporting demographic data on global and local (Swiss) levels, describing salient features of this population, and discussing some paradigms related to ageing processes. In addition, studies related to older adults' engagement with music are reviewed, considering in particular literature which has used a qualitative approach to investigate the effects of musical activities on health and wellbeing.

Chapter 2 focuses on the literature addressing relevant aspects related to professional musicians and higher education music students. It considers studies focusing on the transition to the profession, and on the health and wellbeing of professional and pre-professional musicians. Literature focusing on the role that conservatoires and music colleges could play to ensure adequate support for students in these areas is also discussed. Finally, the chapter considers research investigating the effects that community-based programmes can have on the musicians providing them.

Chapter 3 clarifies that this thesis is situated in the field of positive psychology and briefly discusses the role of the complete model of mental health (Keyes, 2005), the PERMA model (Seligman, 2011) and mutual recovery (Crawford et al., 2013) to address the research questions.

Chapter 4 discusses the overall methodological approach of the project, clarifying the reasons why a qualitative approach based on social constructionism and thematic analysis was chosen, and why semi-structured interviews and oral diaries were used for data collection.

The following four chapters correspond to the four studies on which this research is based. Chapter 5 reports the investigation into the role of music in the life of nursing home residents and the ways in which they access music. Chapters 6 and 7 focus respectively on the residents and students involved in the music making programme, investigating how the participants experienced their participation and what effects they perceived. In order to identify strategies to improve the training offered to the students, Chapter 8 sheds light on the challenges and difficulties experienced by the students during their participation in the programme. Finally, Chapter 9 presents an overall discussion of the results of the studies carried out, discussing the limitations of this research and suggesting recommendations and avenues for further research.

CHAPTER 1

OVERVIEW ON OLDER POPULATION AND ON THE LITERATURE FOCUSING ON MUSIC, HEALTH AND WELLBEING IN THIRD AND FOURTH AGE**INTRODUCTION**

This chapter discusses aspects of the older adult population and the different ways in which they are engaged with music. The first section begins with demographic data showing the growth of the older population globally and then considers the characteristics of older adults, focusing in particular on the heterogeneity and the resources of this population. It will be observed that, as a result of increased life expectancy, the ageing process can last for several decades and can be supported in ways that may significantly slow down the onset of chronic physical and cognitive problems. Two theoretical frameworks are then introduced: successful ageing and active ageing, followed by a profile of the older population and the characteristics of nursing homes in Southern Switzerland where this study was carried out.

Subsequent sections consider the relationship between older adults and music, looking first at a recent report commissioned by the World Health Organization on the effects of arts-based interventions on health and wellbeing. Two investigations of the role that music plays in the life of older adults are then discussed, followed by an exploration of studies that have specifically addressed the possible effects of music on older adults' wellbeing. These studies have observed the effects of specific musical activity programmes on older people of different ages and conditions and have focused variously on listening to live music, singing, and playing instruments. The chapter concludes by highlighting some gaps in the literature and introduces the research questions for the thesis.

1.1 THE GROWTH OF AN AGEING POPULATION

In recent decades, the global population of older adults has increased significantly and more rapidly than all other age groups. In 2014 the World Health Organization (WHO) predicted that by 2050 people over 65 will total 2 billion and that the number of those reaching 80 years old will exceed four times the number counted in 2000. In 2013 the United Nations Department of Economic and Social Affairs conducted the study *World Population Prospects: The 2012 Revision*, revealing that people over 60, whose number amounted to about 841 million, will reach 3 billion in 2100. The same study predicted that in some countries where the aged population is particularly large (for instance in Japan, Germany and Portugal), by 2050 the overall percentage of over 60s will be between 38% and 43%. In the UK, according to the Foresight Mental Capital and Well-Being Project, a survey conducted in 2008 by the Government Office for Science, by 2071 there will be about 21.3 million people over age 65 and 9.5 million over 80. Considering Southern Switzerland, where research from the present project has been based, a similar trend emerges. According to the Federal Statistical Office (2018), by 2040 the population of over 80s will be almost doubled increasing from about 24,000 to about 46,000 and the number of people over 65 is expected to represent almost one third of the overall population (about 130,000 in a population of 413,000).

Apart from the data on the numerical growth of this population, it is also important to consider the significant increase in terms of life expectancy that has occurred in recent decades. According to the WHO (2019), life expectancy increased globally by 5.5 years, from 66.5 to 72 years between 2000 and 2016. Considering Southern Switzerland, in 1948 life expectancy was around 65 years, while in 2018 it reached 81.8 years for men and 85.8 for women. This trend is expected to continue, with estimates for 2040 standing at 85.8 years for men and 89.6 for women (Bruno, 2017). A consequence of this trend is that the life stage beginning with retirement has lengthened significantly, making it necessary to observe older populations with particular care and to avoid overly broad and superficial generalisations. In fact, the difference between individuals in the later stages of life are unparalleled in the other stages (Cavalli and Corna, 2020), and the next sections consider these diversities from several perspectives.

1.2 HETEROGENEITY AND RESOURCES OF THE OLDER POPULATION

A closer look at the older population suggests that concepts such as “ageing” and “older adults” are difficult to define. The older population is particularly heterogeneous (Dannefer, 1987, 2003; O’Rand, 2003), and ageing should be viewed as a multidimensional concept affected not only by biological and psychological elements, but also by geographical, cultural and social elements (Egloff et al., 2015). Ageing processes are actually idiosyncratic: their evolution and implications are complex to measure unequivocally and can vary dramatically even between people of the same age (Castelli and Sbattella, 2008). Biographical elements, lifestyle and economic status impact on the health, attitudes and social roles of older adults (Cavalli et al., 2015; Ferraro and Kelley-Moore, 2003). Furthermore, due to the widespread improvement of health conditions as well as hygienic and dietary habits, the established idea that retirement implies an advanced ageing and an unavoidable loss of abilities and autonomy is no longer tenable. To better analyse the evolution and the processes of ageing, Baltes and Smith (2003) proposed to conceptualise oldness not on the basis of a specific range of ages but to measure it considering the presumable amount of years a person still has to live. Although this approach can be useful for investigating specific research questions, it has some serious limitations, not only because determining life expectancy can be difficult but also because it can be inadequate to describe the heterogeneity of the older population with accuracy.

A further challenge, perhaps less obvious, relates to the great diversity within this segment of the population in terms of family, socio-economic status, and education. This picture is made even more complex by the fact that, in developed countries, some of the most basic aspects of sociality and interpersonal relations have changed significantly in recent years. In many countries the family model has changed and the image of large families living in the same household is now, mostly, an anachronism. In addition, increased divorce rates, declining birth rates, and an increase in age at the birth of the first child, makes two opposite scenarios frequent. On the one hand, many older adults live alone; on the other hand, it emerges a significant number of families with few members but as many as four generations living in the same household (Perrig-Chiello et al., 2009). As a consequence, individuals generically qualified as “older adults” might actually belong to extremely diverse family contexts, which in turn imply considerable differences in many aspects of everyday life. Considering this population as an

undifferentiated group of people with the same lifestyle and addressing their needs with same approaches would, therefore, be a serious error.

Despite many prejudices and assumptions, the heterogeneity just highlighted has among its main implications the fact that older people have resources that are often ignored or underestimated. A significant number of studies suggest that after retirement it is possible to maintain or even develop high functioning in a wide range of dimensions. Considering informal and unpaid activities, it emerges that older adults may carry out various tasks within family and local contexts, for instance taking care of their grandchildren or their parents, or volunteering in various forms, thus making a contribution in economic and social terms (Browne-Yung et al., 2017; Rowe and Kahn, 1997). At the same time, numerous studies have shown that older adults can show high levels of adaptation to cope with physical and cognitive decline, thus reporting self-esteem, life satisfaction, and quality of life to significant degrees (Jeste et al., 2013; Kahana et al., 2012, Pavot and Diener, 2008, Stawbridge et al., 2002; Wagner et al., 2013).

The picture discussed so far reveals that a significant portion of people over 65 show good levels of wellbeing as well as positive attitudes towards being engaged in new experiences and activities after retirement. There also are evidences that, along with life expectancy, the probability of maintaining good health for many years after retirement is increasing, and the literature highlights a number of strengths, opportunities and benefits related to ageing. As a consequence, the gap between retirement and the onset of serious age-related impairments is increasing, and it has become necessary to conceptualise oldness in two different stages: namely, the “third” and “fourth” ages.

The concept of the third age (Laslett, 1989) originates from the improvements which have emerged in recent decades concerning the over 65 population and refers to those individuals who, having reached retirement age, still show good health and a significant level of autonomy. People in the third age are also called “young old”, and thanks to important medical, economic and social advances, this phase can continue for many years. Conversely, the notion of the fourth age, also called the “age of frailty” (Lalive d’Epinay and Cavalli, 2013) refers to a condition well-known in every epoch and encompasses the irreversible biological decline that causes the physical and cognitive impairments distinctive of oldness. According to Bortz (1993) ageing, disease and disuse

are key elements in determining the onset and the extent of frailty in each individual. As a consequence, chronological age and the passing of time are not the only factors affecting frailty, and the related impairments can to some extent be reversible and slowed down. The transition into the fourth age, therefore, depends to a large extent on individual conditions and cannot be attributed to a specific age. The notion of frailty is further discussed in section 1.2.3, and the next three sections focus on areas that are considered important to better understand the heterogeneity and resources of the older population. They relate to the learning abilities of the older population, to resilience and to frailty.

1.2.1 THE ABILITY TO LEARN IN OLD AGE

A considerable body of literature suggests that the desire and the ability to learn new things, to deepen ones' own competences and to have new experiences, can be very high in the third and fourth ages. Findsen (2005) made an important contribution to the field of learning in the later stages of life by arguing for the need to dispel three preconceptions in his work. The first relates to the heterogeneity mentioned above, which may also affect learning styles. This suggests the necessity to utilise a plurality of approaches to meet the requirements of people from different backgrounds and to implement a wide range of strategies to support different modes of learning. The second is the assumption that the impairments linked to ageing are insurmountable obstacles to learning: despite the decline of some cognitive abilities, individual backgrounds and previous experiences can make it possible to acquire and process new information. The third point raised by Findsen questions the belief that the decrease in autonomy accompanying ageing necessarily leads older people to be dependent and passive subjects, making them static recipients in the area of learning. This preconception is contrasted with the concept of "interdependence", which argues that it is possible to create and foster "intergenerational exchanges" between older and younger generations. These interactions can occur in different forms and may generate mutual benefits. These aspects, as will be seen later, have a significant place in the present study. Dabback (2008) has also questioned several misconceptions about older music learners, highlighting that older adults do have a desire for musical activities; that they do not prefer a passive and sedating use of music; that they are not satisfied by mediocre performances; and that frailty does not prevent entirely their musical advancement. Indeed the literature

suggests that older adults can show creativity in various forms and situations (Hickson and Housley, 1997; Iwasaki et al., 2010) and that music making can have positive effects on their creativity (Boswell, 1992; Kellmann, 1986). Looking specifically at musical learning, the potential of older people has been verified by several studies with encouraging results. Gibbons (1982) conducted a study comparing the results of three groups of participants aged 65-70, 71-75 and 76-93, highlighting minimal differences in the ability to identify differences between a series of pairs of music extracts. A few years later, Myers involved participants in three age groups (22-37 years old, 50-59 years old and 60-76 years old) in a programme aimed to develop pitch recognition, and the results contradicted the idea that older adults' musical abilities and capacity for improvement were limited compared with younger people (Myers, 1988). Recent studies on music learning among older adults have produced similar results (Dabback and Smith, 2012; Gembris, 2008; Prickett, 2003).

The picture discussed so far reveals that, although ageing is often considered in negative terms, a significant portion of people over 65 show positive attitudes towards being engaged in new experiences and activities after retirement. There also are evidences that, along with life expectancy, the probability of maintaining good health for many years after retirement is increasing, and the literature highlights a number of strengths, opportunities and benefits related to ageing. As a consequence, the gap between retirement and the onset of serious age-related impairments has lengthened and, as anticipated, it has become necessary to conceptualise oldness in the "third" and "fourth" ages.

1.2.2 THE ROLE OF RESILIENCE IN OLD AGE

In relation to resources, potential and wellbeing in the later stages of life, resilience is considered to play a key role. Resilience can be conceptualized as a trait, a process or an ability developed over time by the interactions of diverse factors, and broadly speaking, it can be described as the "individual's level of tolerance and ability to adapt positively to adversity and other challenging life circumstances" (Browne-Yung et al., 2017, p. 283), managing negative events such as illness, bereavement and trauma by finding something positive from the overall experience (Joseph and Linley, 2006). An overview of the literature reveals that two notions of resilience are particularly widespread: the

first derives from developmental psychology, the second considers a wider range of dimensions. The former considers resilience as a personal trait enabling people to learn from both positive and negative experiences, and it implies an attitude of considering dimensions of one's own life highly meaningful. Browne-Yung and colleagues indicate in their article two models related to this approach.

The first, proposed by Baltes and Baltes (1990), is the Selective Optimization with Compensation (SOC), which considers the compensatory strategies used by individuals facing both diverse challenges and a decrease in their resources. The second, proposed by Carstensen (1992) is the Socioemotional Selectivity Theory, which connects resiliency to elderly people's awareness of the little time remaining to live and the consequent need to cultivate positive emotions and meaningful relationships. The latter approach to resilience moves towards a holistic and ecological perspective, taking into account a wide range of dimensions such as socioeconomic, educational and infrastructural factors as well as social and spiritual attitudes. According to Browne-Yung and colleagues, this approach may be particularly useful to create interventions aiming to tackle problems related to ageing.

1.2.3 THE CONCEPT OF FRAILTY

A further concept considered crucial to address the heterogeneity of the older population and thus preserve wellbeing to the greatest possible extent throughout the ageing process is frailty (Bortz, 1993; Fried et al., 2001), which was mentioned briefly in section 1.2. In 2008 the team of SWILSOO (Swiss Interdisciplinary Longitudinal Study of the Oldest Old) proposed a distinction between the "fragilisation process" and "frailty" (Lalivé d'Épinay et al., 2008). The former is related to sensorial and motor abilities, and refers to a process irrevocably linked with ageing and affected by external factors, such as lifestyle, illnesses, injuries and risky behaviours. The latter takes place when the resilience of a person is seriously affected by the aforementioned causes. In other words, frailty does not refer to the actual conditions of a person but to the severity of consequences related to the occurrence of further illnesses or accidents. Fried and colleagues (2001) propose five indicators to measure frailty: malnutrition, muscular weakness, fatigue, slowing down in movements, and a low level of physical activity. Seven years later, Lalivé d'Épinay and colleagues (2008) proposed five different indicators: mobility (for instance,

in climbing and descending stairs, in moving outside or in walking for about 200 meters), sensorial abilities (reading and carrying on a conversation), cognition (which includes memory difficulties), energy metabolism (related to fatigue and lack of appetite), and various kinds of aches and physical problems. Broadly speaking, the use of these five criteria can determine three different conditions: dependence, which implies the person is completely unable to perform everyday activities included in the Activities of Daily Living scale; frailty, which includes people who show deficits in at least two dimensions; and independence, which occurs if the person is neither dependent nor frail. Although frailty is unavoidable in ageing, it does not necessarily imply dependence. The SWILSOO survey revealed that in the 85-89 age range frail people outnumber independent ones, and a prevalence of dependent people is found only in those older than 90. Even though in Southern Switzerland there are more than 1,000 people in the third age who may already be defined as dependent (Cavalli and Dus, 2015), these data define a positive landscape. People younger than 80 are generally in good health, and along with an increased life expectancy, past decades have also seen an improvement in wellbeing among people in the third age.

Carstensen and Lockenoff (2003) suggest that emotion regulation skills may improve with age, and it is particularly interesting to see that many older adults show a high level of cognitive plasticity, which allows them to react productively to adversities and losses and to enhance the benefits specific to their condition (Baltes and Smith, 2003; Marigo et al., 2009). Consequently, the large majority of people in the third age in Southern Switzerland show high levels of wellbeing: 97% enjoy their everyday activities, 93% are self-confident and 73% have an optimistic view about the future. As discussed before, most elderly described their health as good or very good, and only a third are concerned about it. Considering negative feelings, it emerges that anxiety affects 17% of the population, loneliness 12%, boredom 10%, sadness 9% and crying spells 7% (Egloff, 2015).

1.3 DEALING WITH THE AGEING PROCESSES: TWO THEORETICAL FRAMEWORKS

In designing this research project a number of theoretical frameworks were considered with the aim of identifying the best strategies to cope with ageing processes while preserving individual resources and slowing down age-related decline. In particular the

concepts of successful ageing and active ageing were explored, and the following sections clarify how they inspired the design of the musical interventions used in this study.

1.3.1 SUCCESSFUL AGEING

The notion of successful ageing emerged in gerontology during the last decade of the last century (Abeles et al., 1994; Baltes and Baltes, 1990; Garfein and Herzog, 1995; Rowe and Kahn, 1997) with the aim of overcoming the dichotomy between pathology and non-pathology, where the latter is defined just as an absence of serious diseases and disabilities. Rowe and Kahn (1997) propose a further distinction between non diseased elders, namely “usual aging” and “successful aging”. While the first group includes persons not seriously diseased but at high risk of pathologies, the second includes people not only at low risk but also showing a high level of some functions. More specifically, successful ageing can be described as the concurrence of three main components: low probability of disease and disease-related disability, high cognitive and physical functional capacity, and active engagement with life. Regarding the first, Rowe and Kahn question the view that the aforementioned risks are intrinsically and unavoidably linked to biological ageing processes and suggest they are also due to lifestyle and other external factors. The probability of coronary heart disease, for instance, is related to elements such as the amount and distribution of body fat (Elahi et al., 1982; Kohrt et al., 1990), physical activity and diet (Zavaroni et al., 1986). Regarding the preservation of cognitive function, a study conducted by MacArthur Foundation Research in 1995 suggests that predictors include education (Albert et al., 1995), strenuous activity in and around the home (Neeper et al., 1995), peak pulmonary flow rate (Cook et al., 1991) and self-efficacy (Lachman and Leff, 1989; Lachman et al., 1992). Moreover, some studies show that through specific training cognitive function can be improved (Schaie and Willis, 1986; Kliegl et al., 1989), suggesting that by means of opportune interventions and activities, it is possible not only to preserve but also to enhance the cognitive abilities of elders. Regarding physical function, another study conducted in 1995 by MacArthur Foundation Research suggests as predictors both health elements (such as body mass index and blood pressure) and life-style elements (such as moderate physical activity and a solid network of friends and relatives). According to Rowe and Kahn (1997), the notion of successful ageing goes beyond the absence of impairments and illnesses, and the preservation of functional capacities. Consequently, it seems important to consider

with particular attention the engagement with life, which can be divided in two main elements.

The first is related to social and interpersonal relationships. The relevance of this aspect as a predictor of longevity has been suggested by a number of studies (Durkheim, 1951; House et al., 1988), and the authors propose a dichotomy between socio-emotional relations and instrumental ones. While the former relates to expressions and exchanges of feelings such as affection and respect, the latter considers the provision of concrete support such as material assistance and financial aid. The literature offers studies related to both kinds of relationships, and it emerges that isolation is confirmed as being a severe risk in terms of health and longevity. At the same time, although emotional and instrumental support can both have positive impacts, it does not seem possible to assess uniformly their effectiveness, as this is related to the context and the conditions of the person receiving the support. The second element related to engagement with life is productive activities. Successful ageing implies the ability to maintain usual occupations and to stay involved in leisure activities (Atchley, 1989; Havighurst et al., 1968). It is important to stress that the older population is able to be productive, although their contributions are often made in informal and unpaid ways (such as taking care of grandchildren, volunteering and helping friends and relatives in every-day tasks). In this case, the literature highlights, besides functional capacity, two predictors of successful ageing: education (Chambre, 1987; Cutler and Hendricks, 1990; Herzog et al., 1996; Herzog and Morgan, 1992; Lawton, 1983) which in turn implies socio-economic factors (Rowe and Kahn, 1997), and self-efficacy. In concluding their article, Rowe and Kahn (1997) took into account the point that even people experiencing successful ageing are very likely to have moved “in and out of success” (p. 439) – that is, they too experienced stressful events and tough conditions, and in this regard, the authors highlighted the relevance of resilience.

The concept of successful ageing has had a remarkable impact in recent decades, but it is important to stress that at the same time it is highly debated and is considered by many as a paradigm fostering ageism and stigmatisation of people failing to cope optimally with their own ageing (Prouchno and Carr, 2017). According to many scholars, the recommendations underlying successful ageing can be implemented only in advantaged socio-economic conditions and, by assigning high levels of responsibility to individuals and their lifestyles without adequately considering social inequities

(Calasanti, 2016; Katz and Calasanti, 2015), this paradigm can encourage the tendency to divide older adults into “winners and losers” (Kahn, 2002; Strawbridge et al., 2002). Some contributions also point out that the boundaries between successful ageing and anti-ageing are sometimes blurred, resulting in the promotion and increased consumption of unproven and potentially harmful therapies and treatments (Flatt et al., 2013). The relevance of these points and the need to consider carefully the multiplicity of contributions offered on this complex topic are acknowledged. There is insufficient space within this thesis to discuss all aspects of the literature on successful ageing in depth, and it is therefore pointed out that recommendations in terms of social relationships, leisure activities and enhancement of cognitive abilities have been given particular attention throughout this project.

1.3.2 ACTIVE AGEING

The expression “active ageing”, which first appeared in WHO documents in the late 1990s as an evolution of the concept of healthy ageing, is currently referred to as “the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age” (WHO, 2002, p. 12). The term “health” is here to be understood as defined by the WHO in 1948 and refers to “a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity” (WHO, 1948, p.1). The concept of active ageing, which considers older adults in both their individual and collective dimensions, stresses the importance of putting people in the third and fourth ages in the most suitable conditions to realise their potential in terms of physical, social and mental wellbeing. The concept of “active” is put into practice by supporting older adults’ ability to contribute to the social, economic and cultural welfare of the community. At the same time, this paradigm aims to promote conditions appropriate to take into account their needs, desires and abilities, ensuring adequate protection, safety and care. Among the elements included in the notion of active ageing there are autonomy, independence and quality of life. The first refers to the “perceived ability to control, cope with and make personal decisions about how one lives on a day-to-day basis” and stresses the importance of respecting individual preferences and rules. The concept of independence refers to the “ability to perform functions related to daily living [...] with no and/or little help from others” (p. 13). Crucially, the WHO report specifies that this form of independence implies that the individual’s life takes

place in connection with the community. Finally, quality of life refers to the individual perception of one's position in the context in which one lives. It is linked to individuals' "goals, expectations, standards and concerns" and takes into account elements such as "a person's physical health, psychological state, level of independence, social relationships, personal beliefs and relationship to salient features in the environment" (p. 13). In this context, the aforementioned concepts of interdependence and intergenerational solidarity (Findsen, 2005) are particularly important. A further point to stress is that the concept of active ageing calls for a paradigm shift that leads to the conception and implementation of strategies rooted in a "rights-based approach" rather than on a "needs-based approach". This encourages the overcoming of the vision of older people as "passive targets" in favour of a paradigm that seeks to protect the rights and opportunities of every individual throughout his or her ageing path. In this regard, another element considered in the present study is the definition of long-term care, which the WHO conceptualises as

the system of activities undertaken by informal caregivers (family, friends and/or neighbours) and/or professionals (health and social services) to ensure that a person who is not fully capable of self-care can maintain the highest possible quality of life, according to his or her individual preferences, with the greatest possible degree of independence, autonomy, participation, personal fulfilment and human dignity. (WHO, 2002, p. 22)

The present project is closely linked to these recommendations. The programme that was developed aimed to create an inclusive and protective environment, targeting an intergenerational cooperation in nursing homes between residents and higher education music students. It focused on engagement with music, which, as discussed from section 1.7 to section 1.11, can have positive effects on the quality of life of older adults, promoting their personal fulfilment. Chapter 4 and Appendix 4 describe how residents' individual preferences were considered when deciding on repertoire and in carrying out each session. Residents' autonomy was also preserved by providing different types of music engagement and by offering the choice of whether to sing, play different instruments or listen to the music performed by the group. Finally, participants' independence was preserved by implementing content, approaches and instruments designed considering their physical and cognitive abilities.

The next section concludes this chapter's overview of the older population, focusing on people over 65 and the context of local nursing homes in Southern Switzerland where the present project took place. Section 1.5 then discusses a recent report by the WHO on the effects of arts-based interventions on health, after which the diverse ways in which older adults engage with music are explored.

1.4 AN OVERVIEW OF THE OLDER POPULATION LIVING IN SOUTHERN SWITZERLAND

The profile of older adults living in Southern Switzerland has been described in a recent report (Cavalli and Corna, 2020) based on statistical data from the following sources:

- ISS: "Indagine sulla salute in Svizzera", data collected by the Federal statistical office in 1992, 1997, 2002, 2007, 2012 and 2017
- VLV: Vivre/Leben/Vivere, an interdisciplinary survey carried out in 2011-12 by the Centre Interfacultaire de Gérontologie et d'Études des Vulnérabilités (CIGEV, University of Geneva) in collaboration with the Centre of Competence on Ageing of the Department of Business Economics, Health and Social Care, University of Applied Sciences and Arts of Southern Switzerland (CCA-SUPSI, Lugano)
- Ustat: Federal population census and structural surveys conducted by the Federal Statistical Office, data collected every 10 years from 1850 to 2000 then every year since 2010. (Ustat)

It emerges from these sources that the older population has a significant presence in Southern Switzerland and that it is expected to increase in size. In 2018 Ustat predicted that by 2040 the number of people over 80 in the region will have approximately doubled and will represent 11% of the whole population, while people aged 65-79 will represent about one third of the population. The statistics related to the gender of the over 65s reveals a significant predominance of women: in 2016 their proportion with men was 110 to 100 and this increased to 291 to 110 considering people over 90. The next subsections briefly describe this population considering data related to their socioeconomic profile, family and interpersonal relationships, social isolation and loneliness, as well as participation in the community.

1.4.1 EDUCATION AND ECONOMIC PROFILE

The education level of the older adults living in Southern Switzerland has improved considerably over the years, although there is a remarkable difference between men and women. The Ustat data show that between 1990 and 1997 the percentage of people who had only attended compulsory schooling decreased from 38% to 24% for men and from 63% to 40% for women. At the same time, the percentages of people who had completed a university or higher education course rose from 15% to 31% for men and from 4% to 13% for women. With regard to economic conditions, in 2011 less than one out of ten people aged 65-84 was classified as “poor” and that this percentage reached about 10% for people over 85. This means that in Southern Switzerland 8,000-9,000 older adults live below the poverty line, and considering the increase in unemployment and precarious jobs observed in recent years, this problem is likely to increase in the near future (Cavalli and Corna, 2020).

1.4.2 FAMILY AND INTERPERSONAL RELATIONSHIPS

Considering family ties it can be seen that widowhood tends to occur later than in the past. This is related to the increase in life expectancy, and the number of widows exceeds that of widowers. Moreover, about two thirds of people over 85 have at least one sibling still living. The data provided by Ustat reveals that the percentage of women aged 75-84 still married rose from 24% in 1990 to 42% in 2017. However, separations and divorces have increased. Considering the period between 1990 and 2017, they increased from 3% to 12% for men aged 65-74 and from 4% to 15% for women in the same age range. In every case, the probability of living alone is very high and concerns about half of people over 65 (Ustat), while a counter-trend is noted among people over 85, where the percentage of those living alone fell from 58% to 51% between 2010 and 2017. It also emerges that living with a son or daughter became very unusual, and this living arrangement only applied to one person in seven among the “young old” and just one in ten among over 89s (Cavalli et al., 2015). In Southern Switzerland, however, the percentage of older adults who have sons or daughters is very high (around 80%), and this percentage is expected to decrease and this picture is expected to worsen significantly when the “baby boom generation” will reach the third and fourth ages.

1.4.3 SOCIAL ISOLATION AND LONELINESS

Considering social relations more broadly, it emerges that the widespread idea that old age inevitably implies loneliness and isolation has been contradicted by several studies (Hansen and Slagsvold, 2016; Jylhä and Saarenheimo, 2010; Wenger et al., 1996). The most recent statistics related to Switzerland and the particular region considered in this study confirm the need to rethink this commonplace notion. A particularly striking finding, which would deserve an analysis that cannot be developed here, shows that in Southern Switzerland the number of people suffering from loneliness is higher among those aged 15-34 than among older adults (Pahud and Roth, 2019). In fact, the results related to the older population are particularly comforting, as the VLV data reveal that about 60% of 65-84 year olds and 70% of the over 85 have contact with someone in their family at least once a week and that about half of those groups have daily contact. The telephone is also widely used and 43% of the older population have contacts in this way every day. This picture is reassuring because it suggests that family ties remain stable for older adults and also that relationships between friends stay strong in Southern Switzerland. About one third of older adults, in fact, have weekly meetings with friends and acquaintances.

However, to better understand the complexities present in this context, it is necessary to distinguish the concept of social isolation from that of loneliness. The former refers to an objective situation related to the number of contacts an individual has with other people. The latter refers instead to how the lack or loss of social relations is subjectively perceived (Cavalli and Corna, 2020). The statistics show rather comforting results even in respect to the latter, as considerable proportions of older adults are happy to live alone and are satisfied with their autonomy and independence. Nevertheless, when health impairments become significant and make it difficult or impossible to go out, to meet people and to play an active role in the community, isolation can be experienced with distress and result in feelings of loneliness (Cavalli and Dus, 2015).

Considered from this vantage point, the picture becomes rather problematic and suggests worrying future prospects. ISS data show that in 2018 in Southern Switzerland about 12,000 people over 65 suffered from loneliness, and on the basis of the increase in this problem among people aged 55-64, it is predicted that by 2030 the number of people over 65 affected will be about 15,000. This scenario may become even more worrying,

both in Southern Switzerland and internationally, when the members of the so-called “baby boom generation” reach the third and fourth ages. These people, born between 1945 and 1965, have on average had fewer children than previous generations and therefore have a particularly high risk of not having a solid family network in the latter stages of their lives.

1.4.4 PARTICIPATION IN THE COMMUNITY

The statistics related to the participation of older adults in their community again reveal a picture that challenges some preconceptions. In spite of age-related impairments in terms of health and autonomy, it emerges that the idea that older people are mostly dependent and passive is largely unfounded. In fact, they can make important contributions to the community by providing informal aid and services to family members, friends, acquaintances and associations. Statistics for Southern Switzerland indicate that almost all people aged 65-84 and about 70% of people over 85 provide at least one service such as helping a person with personal hygiene, keeping company, offering moral support or offering financial aid. The recipients of these services are mostly working sons and daughters, surviving relatives and grandchildren (Cavalli et al., 2015; Masotti and Oris, 2015). Regarding the last of these, this phenomenon has increased in recent years, and VLV data reveal that 55% of people aged 65-74 and 33% of those aged 75-84 take care of their grandchildren at least occasionally. Outside of the family, the support offered by older adults to friends and acquaintances is also significant, as almost half of older adults provide company and moral support on a regular basis. This reveals dynamics of reciprocity and the need, even on the part of frail individuals, to feel useful and able to offer support to others.

With regard to active participation in the community, older people are also increasingly engaged in voluntary work. In 1979 less than one in ten participated in this kind of activity, whereas in 2011 about a quarter of people aged 65-84 offered a portion of their time to others. In Southern Switzerland 15% of people aged 60-80 do voluntary work on a regular basis (Cavalli and Corna, 2020).

1.5 THE CONTEXT OF NURSING HOMES IN SWITZERLAND

In general in this country the relocation of older adults into nursing homes is postponed as long as possible, and as a result, support services and home care have been significantly developed (Egloff, 2015). Considering the statistics on Southern Switzerland, it emerges that in most cases people move to nursing homes at an advanced age and that the average age has increased in recent decades. In 1990, residents in nursing homes were on average 82 years old, while in 2012 this increased to 85.7, and the overall percentage of people over 80 rose from 68.8% to 81%. Women (76.7%) outnumber men, while the average length of stay is 3 years and 8 months (Egloff, 2015). Considering the overall health condition of this population, the transition to the nursing home is often seen as a convenient solution. Indeed, results suggest that it is experienced with positive feelings such as relief (91.4%), serenity (87.5%) and joy (74.2%), even though in some cases it causes negative reactions such as sadness (38.9%), anger (16.7%) and a sense of abandonment (10.5%). With regard to this last point, it is interesting to observe that before this change a large percentage (65%) were living alone.

The large majority of nursing home residents is seriously impaired, both physically and cognitively. From the report of Tomada and colleagues (2011) it emerges that one of the main reasons for older adults to move into nursing homes is dementia, a complex syndrome that includes more than 200 subtypes of diseases (Stephan and Brayne, 2009) which can be briefly described as a long-term medical disability causing a progressive decline in cognition (Zeilig et al., 2014). Another common health-related problem is comorbidity, which is actually widespread even in younger people: on average men over 65 living in South Switzerland are diagnosed with 4.2 illnesses, while for women the average is 4. It emerges a predominance of hypertension, cardiovascular problems and dementia; 80% of nursing home residents have significant health problems, and about one third suffers from chronic pain, while dementia affects more than 40% of people and motor impairments very seriously compromise everyday activities (Tomada et al., 2011).

From this overall landscape three main issues emerge: (1) a high consumption of medicines, (2) an onerous workload on nursing home staff and the various kinds of practitioners involved, and (3) a low level of autonomy among residents. Considering the first point, the study of Tomada and colleagues (2011) reveals that in Switzerland about half of residents take at least four different medicines daily and a third consume more

than eight drugs per day. When inspecting these findings more closely, it may not be surprising that medications for hypertension and heart disease are the most widely used (by more than 50%), while it is interesting to observe the significant use of psychiatric drugs. About 30% of residents take antidepressants and more than 20% anxiolytics. The use of neuroleptics is even more prevalent, and the same article highlights that the average number of people using these drugs in Southern Switzerland is almost double the national average (about 36% versus about 20% nationally). This raises some concerns, and even though the present study is not focused on this kind of issue, it is worth mentioning that in recent years several studies on a European scale have warned about the appropriateness of such widespread prescription of neuroleptic and psychiatric drugs (Bronskill et al., 2004; Fossey et al., 2006; Furniss et al., 1998; Lau, 2004).

According to the study of Tomada and colleagues (2011), about 66% of residents in nursing homes in Southern Switzerland who are diagnosed with depression use antidepressant medications, and this kind of medicine is used also by about 20% of residents in nursing homes with no symptoms of depression. At the same time, neuroleptic drugs are often improperly used to combat dementia, leading to severe consequences such as anxiety, delirium, incontinence and increased risks of falls (Tomada et al., 2011). The second and third points are clearly interrelated, and it is important to consider both physical and cognitive problems affecting a large portion of residents. In relation to the former, it emerges that only 20% do not use any support to walk, while a significant number of residents use a wheelchair, and with a considerable difference between the average in Southern Switzerland (about 50%) and in the whole of the country (less than 33%). At the same time, the percentage of people bedridden in the region (10.4%) exceeds about five times the national average (2.1%). Differences between Southern Switzerland and the whole country are relevant especially considering everyday activities: for instance, 25% of residents in nursing home are able to go to bed and get up independently and 14.2% are able to dress and undress, while in Switzerland as a whole these percentages are 44% and 30.6% respectively. This situation clearly implies a significant workload for nursing home staff, and cognitive problems are even more of a challenge. Tomada and colleagues (2011) reveal that among residents in nursing homes difficulties in understanding information and making decisions are widespread. Only 7.1% of residents are able to make decisions autonomously, while about 50% show some alterations in decision-making capacity or a complete inability to make decisions. Significant impairments are already experienced by people 65-79 years living in nursing

homes. Only 34% are able to express adequately their needs, feelings and ideas, and this percentage drops to 29.4% when the older population are considered. These findings may be largely due to the wide diffusion of dementia, which represents one of the main causes of older adults moving into nursing homes.

The following section continues to refer to WHO recommendations by discussing some elements from a recent report, whose findings highlight the potential of arts-based interventions on wellbeing and health.

1.6 THE POTENTIAL OF ARTS-BASED INTERVENTIONS FOR HEALTH: A REPORT FOR THE WORLD HEALTH ORGANIZATION

The potential of music and the arts in general for the health and wellbeing of different sections of the population has been analysed by a large number of studies over the past decades. Numerous communities have been involved in arts-based programmes, the effects of which have been investigated using a wide variety of methodological approaches. A particularly significant contribution to organising such a vast amount of research was offered in 2019 by Fancourt and Finn (2019) in a report for the WHO. The report, based on a scoping review of over 3000 studies, suggests that the arts can play a relevant role in two dimensions related to health, defined respectively as “prevention and promotion” and “management and treatment”. In order to highlight some of the starting points for the present study, this section discusses the report in relation to concepts presented in the previous sections.

Firstly, the report clarifies that the concept of health proposed in 1948 has evolved over the years, in particular with regard to chronic illnesses, both mental and physical. For cases where the attainment of a complete state of health is not possible, it is appropriate to consider the concept of health as a dynamic process. This view suggests that resilience can play a central role and stresses the necessity to support individuals in seeking and achieving a balance with their own impairments, in a way that can make it possible to realise their full potential in terms of independence and social participation. It is stressed that “integration within society, contribution to society, acceptance and trust within society, individual understanding of society and belief in the potential of society” (Fancourt and Finn, 2019, p. 2) can play a central role in health. This picture is

aligned with recommendations previously discussed with regard to the notion of active ageing and can be applied to the context of nursing homes for two reasons. On the one hand, it is an environment where individuals are subject to chronic impairments of diverse severity and nature. On the other, residents are exposed to the risk of being marginalised, losing contact with society in the broad sense and reduced opportunities for interpersonal interactions. At the same time, as pointed out previously, older people can possess significant levels of resilience, which can play an important role in preserving health and preventing or slowing down various forms of decline. The hypothesis of the present study is that offering residents an arts-based intervention, namely enabling them to participate in a group music making programme along with young students, can have a positive impact on their health.

What are the main characteristics of arts-based interventions? And how can they influence health-related dimensions? To answer these questions it is first of all appropriate to observe a series of characteristics widely shared between different cultures that, according to Fancourt and Finn (2019), can help to define the concept of art, considering both aspects related to the artistic product itself and the process leading to its creation or execution. Faced with the complexity of this operation and the consequent difficulty of finding satisfactory and complete answers, the authors proposed a series of recurring characteristics according to which an art object: can be both physical and experiential; can be assessed on the basis of its intrinsic value as an art object rather than its practical usefulness; is able to offer imaginative experiences both to the recipients and to the producers; contains elements of novelty, creativity, originality; requires specialised skills to be created or performed; relates, in ways that can involve both adherence and transgression, to conventions concerning form, composition and expression (Fancourt and Finn, 2019).

Considering more closely the concept of arts-based interventions, the authors highlight an aspect that is particularly important in the present study. Engagement with the arts can in fact be receptive or active. In the former case the recipients act as beholders or spectators; in the latter they act as co-creators and/or co-performers. Combining these aspects with the results of the review, the authors hypothesise that some specific components of the arts can provide positive effects in psychological, physiological, social and behavioural dimensions, in relation to the aforementioned areas of “prevention and promotion” and “management and treatment”. In that way, “because

they operate simultaneously on the individual and social, as well as physical and mental, levels, arts-based health interventions are uniquely placed to address the full complexity of the challenges that being healthy and well are increasingly recognized to present” (Fancourt and Finn, 2019, p. 6).

In this promising context, music seems to have strong potential. The wealth of effects and implications that engagement with music can have, in its various forms, on health and wellbeing are summarised very clearly by Fancourt and colleagues (2014) who, in referring to a study in particular (Juslin et al., 2001), stated:

Music can also influence our brains and bodies in different ways: aurally, via direct auditory perception; physically, through the movements of muscles and sensory experience of vibrations involved in the production and reception of music; socially, as many musical activities can bring with them additional psychosocial experiences such as increases in confidence, social participation and self-esteem; and personally, as music will be approached differently by each individual, depending on whether they like or dislike the music; whether they are familiar with the style, genre or work; or whether they feel any particular emotional connection to it. (p. 16)

Before considering studies that have observed the effects of music-based interventions on older adults, the next section discusses studies focusing on the importance they attribute to music.

1.7 THE IMPORTANCE OF MUSIC IN THE LIFE OF OLDER ADULTS

This section considers two studies that, on the basis of a rich collection of qualitative data, have investigated the relationship with music (Flowers and Murphy, 2001) and the impact of significant musical experiences (Gabrielsson, 2002) on people over 65 with different socio-economic profiles and musical backgrounds. Three studies that addressed these questions with a quantitative approach are then introduced, as well as a further qualitative study aimed at shedding light on the impact of music on the wellbeing of older people.

1.7.1 OLDER ADULTS' REFLECTIONS ABOUT THEIR MUSIC EDUCATION, PREFERENCES AND ACTIVITIES

Flowers and Murphy (2001) interviewed 45 people aged between 65 and 90. The participants had different socio-economic profiles and educational qualifications and were grouped according to both age (65-69, 70-79, 80-90) and experience with music, classified as high, middle, or low. It emerged that music was almost unanimously enjoyed by the participants and was an important part of everyday life, even for those who had a strong preference for other activities and hobbies. The vast majority of participants attended concerts or had gone dancing at least sometimes in their lifetime.

Music was considered to be able to offer comfort during difficult times and was seen as a source of reminiscence or simple relaxation. Very often music was used as a backdrop or enhancement for other daily activities. However, almost half of the respondents stated that they “just listen” with no competing activity and some of them paid close attention to music. The home was the most common place to listen to music. About a quarter of respondents regularly used CDs, tapes or similar media, while most used radio and television. Almost all, however, said they had at least a few records at home. It emerged that outside the home respondents listened to music mainly in the car, but church (1 response), club/senior centre (2 responses), and outdoors (3 responses) were also mentioned. The percentage of concert goers was, however, substantial and amounted to 11%, while three respondents stated that they did not remember ever attending a concert.

There were no large differences among the age groups in their music preferences, and the results showed a prevalence of music produced between the 1930s and 1940s. Classical music, however, had a significant appreciation rate, being mentioned by about half of the participants. Other styles mentioned among those liked were country-western (24%), musical theatre (22%), and religious music (22%). The names mentioned by the respondents give some idea of the wide variety of preferences, including Beethoven, Bocelli, Vienna Boys Choir and Mormon Tabernacle Choir, but also Sarah Brightman and Elvis Presley, Perry Como and Frank Sinatra, and big band music such as Glenn Miller and Tommy Dorsey. The interviews did not include questions about music they disliked, but a significant proportion of participants spontaneously expressed their dislikes, showing a general rejection of rap and other forms of contemporary music

considered too loud/noisy and repetitious. These responses also made it clear that country-western, opera, and rock 'n' roll were liked by some but disliked by others.

Flowers and Murphy's (2001) study also offers information about active music making. Apart from some relationships between school education and involvement with music that will not be considered here, the results show a widespread desire to be able to play an instrument. Out of 45 respondents 30 had played an instrument at some point in their life, and 14 of them continued to play occasionally. The greatest number of those continuing to play were aged 80-90, for whom instruction had been provided by a parent or a private teacher, and the most commonly learned instrument was the piano. Looking more closely, it emerged that 40% of participants included in the "high-experience" group wished to become even more proficient on their instruments. Among participants in the middle- and low-experience groups, significant percentages of people said they would still like to play an instrument (38% and 47% respectively) and to learn more about music appreciation (13% and 21% respectively). The piano was the instrument most desired to learn, and this may be due to the fact that it is an instrument that could be played independently at home or in social settings.

Considering access to and engagement with music in general, it emerged that "what was learned in music education classes (general music, ensembles, and private instruction) had a lasting effect, both in subsequent activities that were selected and in the opinions and attitudes that were formed" (p. 32), while the respondents "without prior music experience viewed their inability to make or understand music as somewhat of a loss" (p. 30). A further point related to access to music is that participants with financial problems expressed interest and appreciation for free concerts in community contexts. In this regard the importance of scheduling these concerts in daytime hours and providing comfortable seating was also stressed. Frequently mentioned barriers to concert going related to physical difficulties, including night vision for driving, and declines in hearing and alertness. Despite these problems and the consequent limitations in engagement with music, the authors pointed out that "most of the older adults showed vitality in their musical interests" (p. 31) suggesting that music played a considerable role in their lives.

1.7.2 OLDER ADULTS' REPORTS ABOUT UNFORGETTABLE EXPERIENCES WITH MUSIC

In the context of the “Strong Experiences of Music” research programme, Gabrielsson collected and analysed testimonies from 880 people regarding their experiences of engagement with music during their lifetimes. This research, conducted in Sweden, included older adults, resulting in the 2002 paper “Old people’s remembrance of strong experiences related to music”, which focused on the accounts of 78 persons aged between 70 and 91 years. The profiles of respondents were diverse, including professions as “teacher, lawyer, businessman, engineer, clergyman, therapist, nurse, housewife, clerk, dentist, worker, journalist, and still others” (Gabrielsson, 2002, p. 106). Five participants were professional musicians, 35 musical amateurs, and 38 had never played an instrument or did not give any information in this regard. Data were collected through written reports or interviews focusing on “the strongest, most intense experience of music” participants had ever had and to describe both the “experience and reactions in as much detail” as possible (p. 105). Participants were also invited to provide information about the reasons they thought these experiences had been so intense, the frequency of such intense experiences and the impact of each of them over time, and also to clarify whether experiences of similar intensity had occurred in other situations. The majority of reports were linked to “nature, space, love, art, theatre, film, literature, religion, sports, being together with liked persons, children, birth of one’s child, death of person close to oneself, and one’s own near-death experience” (p. 119). Participants were free to report as many musical experiences as they wanted and to decide how thoroughly to describe each of them. As about one-third of participants reported two or more experiences, 123 accounts were collected, 85 of which provided by women and 38 by men.

This type of data collection required the participants to reconstruct events and situations that took place several decades ago and thus demanded a considerable amount of time, which in some cases spread over several days. Nevertheless, the participants showed great interest and motivation in carrying out the task and some of them expressed gratitude for having had the opportunity to share these meaningful experiences.

Due to the low numbers of musicians involved, only nine reports related to experiences linked to participants’ own performance, which in most cases consisted of

singing in a choir. The majority of accounts referred to listening experiences, in most cases involving classical music. Popular and Swedish folk music together represented 20 instances, while jazz was mentioned only once. Gabrielsson relativised the scope of these findings by pointing out that a considerable number of the reported experiences took place in the first part of the twentieth century, when rock, pop and jazz were not yet widespread in Sweden and in a time where the possibility of listening to concerts was only offered in the big cities. Some particularly old accounts showed that the very fact of being able to listen to a radio was an unforgettable experience. Apart from these contextual elements, it is important to stress that a great deal of diversity was found within the classical music involved in these experiences, including composers with profoundly different languages from Bach to Bartók and from Handel to Wagner, as well as works of different character and combination of instruments ranging from Schubert's string quartet *Der Tod und das Mädchen* to Stravinsky's *Rite of Spring* and including also solo piano pieces and operas.

The effects linked to these experiences related to very diverse spheres, placed in the following categories: physical reactions and behaviours; perception; cognition; feelings and emotions; existential and transcendental aspects; personal and social aspects. Particularly recurrent effects were tears, tendency to move or dance, feelings of complete absorption and loss of control in terms of body and time, and acquisition of new insights and possibilities. Moreover, a considerable number of reports implied to some extent therapeutic effects of music in diverse dimensions. A gender difference was also found, whereby women reported that music allowed them to reach their innermost feelings, or described feeling elevated, liberated, cleansed, hopeful, or feeling free from worry, while men in many cases reported a new interest in music in general, or in a certain genre, certain composers, or in performing music themselves.

The particular methodology used in this study shed light on the fact that the memory of these experiences is powerful. Some of these reports go as far back as reconstructing encounters with music that took place 60 years earlier, and 11 reports refer to experiences that occurred at less than 10 years of age. In this sense, a participant recalling with intensity his listening to a piece of music on a silent film when he was 5 years old represents the extreme. Another important aspect to highlight in this respect is that in most cases these experiences occurred when the interviewees were between 10 and 19 years old, and according to Gabrielsson this "is in agreement with a widespread

opinion that music experienced during adolescence receives a special importance during the rest of one's life" (p. 114).

With regard to the possible causes of such intense experiences, the analysis of the reports highlighted three areas, related to specific features of the music, to the respondent's individuality, and to the situation. Gabrielsson stressed that in each experience these elements interact in complex ways, pointing out that the "music is perceived, or performed, by a person with specific experiences and characteristics and in a specific physical, psychological, and social condition" (p. 118). Thus, he acknowledges the possibility that in some cases the musical component may play a much smaller role than the other two. Nevertheless, this three-area categorisation is extremely useful for the purposes of this project, and some of the elements emerging from each of these areas will be now be explored.

The first area includes accounts that merely juxtapose adjectives of appreciation for the work in question, hardly ever offering particularly detailed and in-depth analyses. This area also comprises reflections focused not so much on the work but rather on the performer(s), with reasons of appreciation related to technical skills, sound quality, depth of interpretation, visual elements and charisma on stage. In the second area, the intensity of the experience is linked to the respondent's expectation regarding a specific situation. This thus includes accounts of long-awaited concerts that turned out to be truly excellent, but also cases where indifference to the music, or even the expectation of being bored while listening, were totally subverted by exciting and unforgettable experiences. This area also includes reflections on deeper autobiographical aspects. For example, the profound impact of the music is often associated with adolescent sensitivity or with specific moments of difficulty. In other cases, specific musical experiences were particularly intense because a certain piece of music was perceived as related to one's mood or was associated with biographically important elements. The third area refers to contextual elements related to the performance venue such as the acoustics, the location, one's position in the auditorium or the weather. Other contextual elements considered significant related to particular anniversaries, either institutional or private. In some cases, the experience was special because it was shared with family members or relatives.

Many reports gave information also about the feelings felt immediately after these musical experiences. In this regard, respondents often mentioned a sense of

gratitude for being able to enjoy such a rewarding experience and also positive feelings such as happiness, euphoria or calmness. Some participants reported a sense of difficulty in “coming back to reality” and in relating to others after having experienced pleasant feelings of estrangement and detachment from oneself. Conversely, for other respondents the enthusiasm and sense of discovery provoked by these experiences turned into a need for contact and sharing with others.

A final point relevant for the present study refers to participants’ thoughts about the impact of such experiences over a longer period of time. Beyond reflections on the fact that such moments are unforgettable, it should be pointed out that in many cases the same happy feelings and memories may appear again. Strong experiences with music then become memories that are nice to return to in different situations of life. In many reports it is clearly expressed that the intensity of the first listening, or at least of that specific listening, had not been reached again when approaching the same piece, but considering these testimonies in their entirety, what mostly emerges is a lasting effect in terms of interest towards music in general or towards a specific genre or composer.

1.8 THE IMPACT OF MUSIC ON THE WELLBEING OF OLDER ADULTS

The two studies just discussed offer clear evidence about the wide ranging roles music can play for older adults. On this basis, it seems reasonable to assume that engagement with music can improve or maintain wellbeing for this population, and this section will discuss some studies whose aim was to explore this.

In 2002, Cohen and colleagues pointed out that, considering the importance of maintaining individual habits as long as possible to slow down the decline related to ageing, music can play a very important role. This statement is based mostly on a starting assumption and on the results of the survey they ran. About the former, even though cognitive, motor and auditory impairments can in some cases have considerable consequences, “listening to or playing music may place fewer demands on an aging body than the demands of the other past enjoyable activities of one’s youth, such sports, camping, even dining out on spicy food. Therefore, the elderly person may better maintain continuity through musical activities than through other means” (Cohen et al., 2002, p. 90). About the latter, the authors submitted a short questionnaire to 320 people

aged between 69 and 100 years (mean age 78.3, SD \pm 5.90). To validate the results, two and a half years later the same questionnaire was submitted to 93 people, including 78 participants previously recruited. The aim was to investigate the significance of music in the lives of older adults and to clarify the reasons for its importance. The results revealed that over 90% listened to music at least twice per week in the past or currently and highlighted that music can play a significant role in terms of quality of life regardless of musical background and cognitive abilities. As the study involved participants living in a “remote rural island” and in an urban environment, it emerged that music is considered important regardless of the geographical region. Furthermore, a trait common to people whose age range spanned 30 years was that music heard in the early stages of life is considered particularly meaningful. In light of these findings the authors stressed the importance of considering strategies to facilitate access to music for older people by government agencies and professionals active in gerontology, developmental psychology, music education, music therapy, and music psychology.

The validity of these recommendations are confirmed by the results of two other studies published a few years later. Hays and Minichiello’s (2005) qualitative study suggests that music is more than just an entertainment and it can basically play two functions in the lives of older people. On the one hand, music can support the remembrance and preservation of emotions, memories and connections linked to the past. On the other hand, music can facilitate interpersonal and social interactions. In this way, music “provided ways for defining and redefining their self-identity, knowing and understanding emotions, and maintaining personal wellbeing” (Hays, 2005, p.29). Involvement with music can thus be extremely intense and can offer unique stimuli to imagination, intellect and spirituality. At the same time, music can help to pass the time and can offer pretexts for meeting other people.

These results were echoed by a quantitative study involving 500 people aged between 65 and 75 years, which revealed that listening to music is a frequent activity and that older adults intentionally use “a variety of listening strategies related to emotional functions (e.g., pleasure, mood regulation, and relaxation) and issues of identity, belonging, and agency” (Laukka, 2007, p. 215). The effects observed highlight the importance of music in terms of identity and links to biographical memories. Furthermore, data revealed that participants find music interesting because of its aesthetic content and its ability to offer entertainment and other pleasant sensations.

Significantly, it also emerged that participants with low scores in terms of wellbeing use music to mitigate their diseases. Considering that individuals increase their ability to regulate their emotions over the years (Carstensen and Löckenhoff, 2003), Laukka (2007) pointed out that as “music listening is an activity that is not cognitively or physically demanding, and may place fewer demands on an aging person than other past enjoyable activities of one’s youth” (p. 218) it can be a valuable element of continuity for older adults. Beyond these encouraging results, the findings presented by Hays and Minichiello (2015) highlight two further reasons inviting promotion of the encounter between young musicians and older people.

Firstly, in line with what has also been pointed out by Cohen and colleagues (2002) involvement with music can have very intense effects regardless of one’s musical background. It emerged that “participants’ narratives revealed that many of the people who were the most articulate often identified themselves as having little or no musical training” (Hays and Minichiello, 2005, p. 442) and that people without musical training may find even the simple act of listening to music extremely meaningful. Secondly, in many cases the engagement with music increased significantly after retirement and people spent more time than before on listening, making music or in supporting musical initiatives. It is thus very important to find strategies and activities to facilitate older adults’ engagement with music.

1.9 THE POTENTIAL OF ENGAGEMENT WITH MUSIC IN LATER LIFE: AN OVERVIEW

This section reviews some studies based on specific music-based interventions. It starts by considering two studies in which listening to live performances was central, then moves on to studies in which active engagement had the main role. A clear predominance of programmes dedicated to choral singing can be seen in the interventions involving active engagement, but in some cases, the use of instruments or individual lessons was central.

1.9.1 HOW CONCERT SEASONS PLANNED SPECIFICALLY FOR OLDER ADULTS ARE EXPERIENCED BY RECIPIENTS

Costa and Ockelford (2019) focused on concert seasons specifically planned to overcome barriers perceived by older adults and to facilitate their participation. In this regard, the authors stressed the need to consider specific factors that might discourage this population. Describing London, where the study was located, they pointed out that financial concerns, unsuitable transport schedules, physical impairments or reluctance to leave the house in the evening may make it less feasible for older people to attend concerts, despite the high number on offer. It is important to address properly these obstacles because they have negative consequences for social contact, increasing the risk of isolation for a population who are likely to face demanding adjustments linked to retirement, bereavements and health problems.

Moreover, in line with previous studies discussed in section 1.7, participation in concerts is considered a particularly effective activity, as listening to music does not require physical effort and can be engaging despite cognitive impairments. Echoing Hays and Minichiello's (2005) study discussed above, Costa and Ockelford (2019) further stressed that music, when experienced in a group, can contribute to the maintenance of self-esteem and reduce isolation or loneliness. Finally, the authors stressed that live performances are considered to provide particularly meaningful experiences, as also found by Staricoff (2004), and that the facial expressions and gestures of musicians play an important role in generating affective responses and meaningful experiences for listeners as noted by Finnäs (2001).

Based on these assumptions, Costa and Ockelford (2019) focused on a series of concerts hosted by a parish church in London, which were followed by a tasting of quality tea. These concert seasons, specifically designed for the older population, were introduced in 2009 aiming "to give older people in the community regular opportunities to access live music and to enjoy social interaction in a warm and welcoming environment" (p. 35).

Attendance at each concert varied between 250 and 500 people and only professional musicians were involved, while a committee of volunteers offered a significant contribution in serving tea and other practical issues. According to the organisers,

generally the audience was heterogeneous, including people aged from 65 years to centenarians, and healthy individuals living in sheltered housing as well as clients of day care clinics and elderly people living in residential care.

The study considered two concerts offered in the same season, featuring a blind autistic pianist accompanied by his mentor and a renowned solo violinist. Data were collected through short interviews, limited to just four simple questions with the aim of involving a large number of spectators and compromising their experience of the event to the least extent possible. In this way, the interviews lasted on average between two and three minutes, and using a mobile phone app, it was possible to audio-record 150 testimonies at the end of the first concert (equivalent to about half of the audience present) and 89 in the second (about a quarter). The data thus collected were analysed thematically (Braun and Clarke, 2006), and two themes were identified, related to musical (1) and extra-musical (2) elements that positively influenced the wellbeing of audience members. With regard to the former theme, enjoyment and awe emerged and were directly linked to the high level of performance and the expressive abilities of the musicians. Participants were significantly engaged by the technical skills and the charisma on stage of the performers. The repertoire, in turn, played a central role in the experience of the interviewees, who appreciated the variety of the pieces offered and the presence of some familiar ones. In addition, the overall duration of 45 minutes was considered appropriate, as a longer duration would have been fatiguing physically and in terms of the attention required. In this way, the music aroused feelings of happiness, relaxation and inspiration. For some the music simply provoked pleasant feelings, while others received relief from worries and concerns. A further theme related to the sense of inspiration provoked by the music, and feelings of being “uplifted”, “exhilarated” and “being taken to a different world” (p. 39) were reported, while for some participants these concerts triggered memories and feelings of nostalgia.

Considering the theme related to the effects of non-musical aspects on wellbeing, it emerged that the regularity of the concerts supported social cohesion and made it possible to create and consolidate friendships among regular attendees. Participants considered this important, and it emerged that many of them lived alone. Another much appreciated aspect is related to the quality of the tea and food offered, and it is important to underline this aspect for two reasons. On the one hand, the attention paid to this aspect by the organisers seemed to be matched by the attention paid in involving

high standard musicians. On the other, many respondents linked their satisfaction directly to the “winning combination of music, tea and social contact” (p. 40). Based on these elements, the authors pointed out that for “regular attendees, confidence in the quality of the event gives them something to look forward to, [which] is itself a positive experience” (p. 40). In fact, this study confirms that listening to music can offer particularly significant benefits for the older adults, while also highlighting how listening to live performances can be even more meaningful. Beyond the relational aspects just discussed, the authors found that their results aligned with those of previous studies (Skoda et al., 2016; Vuoskoski et al., 2016) which demonstrated that attention and response in attending live performances are likely to be higher compared with listening to recorded music. Furthermore, stating that “the performers’ spoken words, body language and facial expressions enhanced the interaction between the performers and members of the audience and served to intensify the emotions that they experienced” (p. 41), they highlighted the importance of ensuring high musical levels when offering music programmes to older people. This aspect is also crucial in the next study discussed, even though the context and mode of engagement are different.

1.9.2 THE MEANING OF LIVE MUSIC IN HOSPITAL WARDS FROM OLDER PATIENTS’ PERSPECTIVES

Although music, unlike medication, is considered to be free of side effects and adverse interactions with other therapies (Davies and O’Mahony, 2015; McLachlan et al., 2009), the effects of live performances in hospital setting have not yet been explored in depth (Ambler et al., 2021). However, the use of recorded music in this context has been considered by numerous studies over the past decades (Evans, 2002), and this body of literature seems to confirm the hypothesis of beneficial effects on physical, cognitive and emotional dimensions.

A recent contribution (van der Wal-Huisman et al., 2018) proposed a set of four theoretical models to explain the interactions of music on health highlighted by previous studies. The first, the Cognitive-behavioural framework model, suggests that music can promote coping with stress and pain through distraction facilitated by competence, autonomy and relatedness. The second, the Gate Control Theory, suggests that music may have beneficial effects on pain perception due to its ability to influence the listener’s

'synapse' connections. The third model, proposed by Twiss and colleagues (2006), hypothesises that the benefits of listening to music are due to the fact that, by releasing endorphins and modifying catecholamine, blood pressure, heart rate, respiratory rate, and oxygen consumption decrease, thereby generating pain relief. The fourth model, proposed by Pasero and colleagues (1999), suggests that music is able to influence the sympathetic nervous system and consequently reduce heart rate, blood pressure and oxygen demand.

Smilde and colleagues (2019) recently investigated the effects of live music on hospitalised older adults. This study involved postsurgical patients, aged over 60, in a series of interventions performed in various wards of the University Medical Center in Groningen (NL). The research utilised an ethnographic approach, focusing on the experience and the interactions between all the actors involved, including nurses, professional musicians and higher education music students. This section focuses on the older adults in the study, and the results relating to students are discussed in Chapter 2 section 2.6.5. Mixed methods were used with regard to the older adults, including quantitative measurements of anxiety, relaxation and physical parameters.

Live bedside music performances were carried out once a day for six or seven consecutive days, and data were collected in three stages: before each intervention, 30 minutes afterwards and three hours later, for both an experimental group and a control group. Experienced pain, anxiety and relaxation were assessed using visual analogue scales, while heart rate variability was measured during the intervention with the HeartMath emWave 2 using an ear clip. Blood pressure, respiratory rate and oxygenation were also measured. The analysis of these data is still ongoing but the emerging results in terms of pain perception are encouraging, both comparing the intervention group with the control group and comparing the pre-test score with the two following tests. These preliminary results are reported in the book *If Music Be the Food of Love, Play On* (Smilde et al., 2019), which focuses on the ethnographic component of the study. Describing the experience of patients from this perspective, the authors highlighted a pathway of seven "semantic clusters" (p.91): "insecurity", "dependency", "body engagement", "mutual empowerment", "being in the moment", "feeling satisfied in the moment", and "reflective release". The authors pointed out that for some of the patients only some of these themes might be representative, but taken together they can offer a valid summary of the journey experienced by the recipients throughout the programme.

The patients, who found themselves detached from their daily lives and their networks, in a context of worry and loss of control and autonomy, experienced a sense of insecurity and inability to predict what would happen. These uncomfortable feelings were accompanied by a sense of dependence on other people, and caused stress and worry. While for some of them this situation generated reactions of reluctance and rejection, others faced this challenging situation with curiosity and openness towards the novelty represented by the musicians in the ward. In this difficult context, it emerged that music played an important role because both music itself and the interactions with musicians “moved patients away from their dependency” (p. 92). Such an encounter in fact gave space to meaningful relationships and also to physical reactions expressed with tapping, singing along and other movements, which allowed patients to become “part of the musical world that the musicians offer” and to take part in “decision-making about the music” (p. 92). In this way, patients found again feelings of agency, which made them feel autonomous and triggered feelings of mutual empowerment with the musicians.

This positive dynamic thus engaged the recipients and by offering fun, intense emotions generated a feeling of being “satisfied in the moment” (p. 92) which was able to distract them from their status as patients. When the musical intervention was over, the recipients returned to their “everyday reality in hospital” (p. 92) and were able to consider their condition of uncertainty and dependence from a different perspective. In discussing the pathway so reconstructed, the authors highlighted links with some theoretical frameworks that are further discussed in this thesis. One, which has a core role in the present study (see Chapter 3 section 3.2), is the PERMA model (Seligman, 2011), which conceptualises wellbeing on the basis of five dimensions (*Positive emotions, Engagement, Relationships, Meaning and Accomplishment*) which have been stimulated and reinforced to varying degrees by these interventions. Secondly, these results are aligned with the concepts of patient-centred (Kitwood, 1997) and value-based (Gray, 2017) approaches, both of which aim to offer patients significant room for participation and autonomy during each stage of their medical treatment. In this respect, Smilde and colleagues (2019, p.78) suggest that music-based interventions could contribute to “transform the healthcare system towards more humanistic forms of treating patients” and support health carers to approach patients holistically rather than “merely focusing on curing the disease”.

1.10 MUSIC-BASED INTERVENTIONS FOCUSING ON SINGING

This section considers studies focusing on active engagement based on singing. In some cases, these programmes go beyond the performance of pre-existing repertoire and also include songwriting. Allison (2008) focused on residents in nursing homes in a study involving about 30 members aged on average 87. Although these people presented a considerable diversity both in their backgrounds and in their psychological and physical conditions, songwriting encouraged the sharing of memories, feelings and ideas, thus improving the sense of community and belonging between participants. Another study including songwriting which highlighted its benefits in terms of learning, mutual support, creativity and self-esteem was conducted by Lally (2009). This study was based on the *Sweet Tonic* programme, which involved 26 healthy people aged 51-83 years in a 30-week singing programme culminating in a public performance. The data collection included focus groups, interviews and questionnaires and showed benefits in three areas: physical wellbeing, social wellbeing and creativity. Regarding the first aspect, participants perceived improvements in their breathing and vocal production, and in some cases they increased the volume of their voice not only when singing but also when speaking. This point is important to highlight as many participants reported not having many opportunities to talk to other people in their daily lives. As the participants were expected to be standing throughout the sessions, stretching exercises were also included, which in turn provided benefits in terms of flexibility and mobility. The programme also offered benefits in terms of social interaction, which was particularly important because a large proportion of the participants lived alone. Participants reported mutual support during sessions and moments of cohesion during breaks, and some of them reported an increase in their participation in the community outside of the group. With regard to creativity, most people perceived an improvement in this respect.

This result is probably linked to the components of songwriting, public performance and mutual support. At the same time, and in line with what was mentioned in section 1.2, these results highlighted older peoples' ability to learn. The oldest participants showed considerable motivation and ability to compensate their difficulties in memorisation, for example by taking notes regularly during the sessions. With regard to learning, it emerged that learning melodies was easier than learning harmonies and that in some cases changes to previously agreed arrangements gave rise to complaints and dissatisfaction. These elements should be taken into account for the development

of similar programmes. From all of these results, it emerges that collective singing can activate a series of dynamics capable of promoting self-esteem and self confidence in the elderly (Lally, 2009).

Similar results were found in a choir-based project conducted by Langston and Barrett (2008) in Tasmania involving 27 members, mostly retired, which revealed many positive attitudes such as trust, camaraderie and support among participants. Another investigation, particularly close to the present study, focuses on *Happy Wanderers*, a choir composed of healthy older adults who perform (as volunteers) in nursing homes for people with dementia (Southcott, 2009). Over time this group developed a wide repertoire and became in high demand within their community. Participants' experiences were investigated with a phenomenological approach using focus groups, and the author related the results with the concept of active ageing (WHO, 2002) discussed in section 1.4.2. Southcott's analysis showed that participating in this choir and reaching older people in difficulty through singing offered benefits in terms of purpose, interpersonal relationships and personal growth. These results are particularly interesting because they show dynamics of mutual benefit, arising from the fact that it is meaningful and important for the participants to do something useful for others. In that way, this type of programme is aligned with the concept of social participation in appropriate ways, thus favouring active ageing. Furthermore, this study also suggested that this kind of engagement with music offers older adults learning opportunities in terms of repertoire and singing skills.

Another project, *Silver Song Club* (Bungay et al., 2010), was developed in the UK involving 258 participants randomly distributed between a singing group and a control group. At the end a 12-week programme, singing group members reported an increase in self-belief, social relationships and mental health, and measurements repeated three months later revealed that these positive results were still visible. More recently, Skingley and colleagues (2016), whose study involved 131 participants aged between 58 and 91, also found physical, psychological and social benefits related to singing. This research is particularly significant because, in addition to results similar to those of previous studies, it offers a number of useful points for reflection. Firstly, it emerged that more than 100 participants continued to sing in other groups after the end of the programme. Moreover, the data showed that the opportunity to be part of a singing programme was welcomed by many participants because they liked the music and expected to experience

positive feelings and other benefits. With regard to the social sphere, taking into account the significant amount of perceived loneliness, the possibility of spending time with like-minded people of a similar age was particularly appreciated and fostered networking and a greater sense of belonging to the community. On a physical level, participants noted that the respiratory, vocal and postural benefits had positive repercussions in terms of stamina in the context of daily activities. The data collected in this study also covered ideas and suggestions for improving the programme, thus offering useful insights for future initiatives. In this respect, it is important to highlight that the inclusion of old songs was not appreciated by all, as some considered such repertoire appropriate for people older than themselves. Another element in line with some results already discussed was the desire expressed by many to be able to make a recording or a final concert. This point not only highlights motivation, commitment and ownership, but also underlines the desire to feel themselves useful in the community, as the desire to associate the concert with solidarity purposes clearly emerged.

Themes related to commitment and other positive dynamics that can be achieved through long-term involvement also emerge from a recent study developed by Lamont and colleagues (2017). This study considered a particularly long period of time and tried to shed light on the transformative aspects linked to participation in a choir. Interviews, focus groups, observations and participatory discussions were carried out over a period of four years. The data collected were analysed through the lens of the PERMA model (Seligman, 2011), one of the theoretical frameworks underpinning the present study which was briefly described above (p. 52) and that is discussed in detail in Chapter 3 section 3.2. The use of a qualitative approach, aimed at investigating the participants' experience over a long period of time "allowed participants to tell their own stories about what they valued and, more importantly, why the choir was important to them in the context of retirement and growing older" (p. 4). Five themes emerged: the first, "Personal investment and reward", highlighted high levels of engagement and motivation, manifested in the participants' persistence in regularly attending weekly rehearsals, in learning a large repertoire of songs with lyrics in different languages, in performing concerts and, for a significant proportion of them, in actively engaging to find performance venues or to collaborate in organisational activities. In this context, feelings of pleasure and enjoyment emerged significantly. The second theme, "Inclusive community" referred to the support and the sense of inclusiveness experienced in making music together, which facilitated cooperation between the participants and the

inclusion in the group of those who were musically less prepared or less gifted. In this way, the choir itself became a kind of community, in which participants find meaningful social interactions and are motivated to take responsibility towards others. The third theme, “Always evolving yet fundamentally unchanged”, referred to the evolution of the ensemble and its components over time. In this sense, an awareness of the progress made emerged, offering a sense of achievement and fuelling motivation to grow further. At the same time, a strong sense of collective identity emerged, confirmed by the widespread desire to leave such a valued alchemy unchanged. The fourth theme, “A desire to connect”, was related to the sense of evolution, identity and achievement described above and had to do with the relationship with the audiences for the performances, which assumed a significant role in terms of social relationships promoting a sense of belonging to an expanding community. This theme also manifested itself in the increased desire to expand the reach of performances to more people. The fifth theme, “Leadership and organisation” referred to the appreciation and key role attributed to the leader but also to the collective desire to make a personal commitment to the survival of the group, which was manifested for example in the financial support offered at each rehearsal once the funding that made the creation of the project possible ended.

An important concept emerging from these overall results is linked to the importance of ensuring the sustainability of these initiatives and making it possible for everyone to participate for as long as possible. With specific references to the literature, the authors discussed their results pointing out that

sustained engagement leads to long lasting relationships and meaning, supporting existing suggestions that singing together leads to deeper connections (e.g. Dingle et al., 2013) over a longer time period. Huta and Ryan (2010) suggested short-term pleasure and long-term meaning overlap to engender lasting wellbeing, and this is apparent here. (Lamont et al., 2017, p. 14)

The present review of studies focusing on singing closes with a study that considered the effects of this activity in terms of health maintenance, health promotion and disease prevention. Cohen and colleagues (2006) observed the effects of a 30-week programme that included public performances, comparing an intervention group and a control group. The data collected via questionnaires and self-report measures showed a lower level of doctor visits, drug use, falls and loneliness, with improvements in overall

health and morale in the intervention group. Considering that the average age of the participants was 79 years and that positive elements also emerged in terms of social activities, the authors underlined how involvement with music can play a relevant role even after the age of 80, with positive consequences in economic terms linked to the reduction of doctor visits and medication. Furthermore, the authors pointed out that arts-based programmes “foster sustained involvement because of their beauty and productivity. They keep the participants involved week after week, compounding the positive effects being achieved. Many general activities do not have this highly engaging and sustaining quality” (p. 727). These considerations are also based on the motivation and appreciation showed by the participants and led the authors to argue that singing can have a significant impact on two dimensions considered important for maintaining health through ageing, namely sense of control (Rodin, 1986, 1989) and social engagement (Avlund, et al., 1998; Bennett, 2002; Glass, et al., 1999).

1.11 MUSIC-BASED INTERVENTIONS FOCUSING ON MUSICAL INSTRUMENTS

Research devoted to singing is particularly abundant, probably because it is a widely diffused activity (Clift et al., 2010; Skingley et al., 2016) that does not involve special physical skills or economic and organisational problems due to the use of musical instruments. The literature focusing on the effects of community programmes based on playing instruments is smaller than that devoted to singing, and some of the programmes discussed in this section actually include a combination of these two kinds of music making. Before discussing these studies, it is important to mention briefly some investigations suggesting that playing an instrument can be beneficial for older adults. Studies based on keyboard instrument lessons have revealed that, compared with control groups, learners showed decreased depression and loneliness (Koga and Timms, 2001) and increased cognitive functioning (Bugos et al., 2007).

These activities have also been shown to have benefits for cortical connectivity (Altenmüller et al., 2009), while Schneider and colleagues (2007) suggest that the therapeutic use of playing the piano or drums can improve dimensions of physical movement.

1.11.1 A SEMINAL PROGRAMME OF GROUP MUSIC MAKING IN A NURSING HOME

Vanderark and colleagues (1983) carried out a pioneering study based on a programme of ten 45-minute music sessions that aimed to observe the impact of music making on life satisfaction, socialisation, music attitudes, and self-concept in music of residents in nursing homes. The sessions were delivered twice per week and featured diverse musical activities, including singing familiar songs and playing melodies, simple accompaniments or ostinatos to those songs using the autoharp or tone bells. Each participant used a tone bell, and through the instructions of the first author, the group was able to perform the melodies of the songs. In other cases, the bells were used to form chords, mostly on root, subdominant and dominant to accompany the songs. In other arrangements, tonic and dominant chords were played by the autoharp, which was played by the first author or by the residents capable of using it. Participants were also involved in creating sound effects for familiar tales read by the principal investigator.

This project involved 20 people in the intervention group (average age 78) and 23 people as a control group (average age 82). In both groups the age range was between 60 and 95 years, and participants were heterogeneous in terms of physical and cognitive health. The proposed activities took account of their major impairments, related mostly to paralysis, arthritis and states of confusion and disorientation. Data were collected using a battery of questionnaires and the results revealed improvements in all the dimensions considered. However, the authors interpreted them with caution, as the two groups were significantly different in terms of musical self-concept before the intervention, while the improvements in terms of socialisation and general self-concept were not statistically significant. Taking due account of these limitations, the authors nevertheless affirmed that it “appears that music should be used as an integral aspect of daily activity for the elderly” (p.80). In particular, with regard to interventions focusing on active engagement, they called for further exploration of the potential of hand bells and for identifying activities which appropriately stimulate both the fine and gross motor skills of the residents. At the same time, with regard to gaps to be addressed, the authors pointed out the need “to more clearly understand the interrelationship of psycho-social factors to perceptual characteristics of the elderly population” (p. 80) and suggest that longer programmes could offer more statistically viable results.

The studies conducted in subsequent decades have substantially addressed these aspects and, beyond the already noted abundance of studies focusing on singing, two programmes developed in recent years in London are particularly significant: *Music for Life* and *Rhythm for Life*.

1.11.2 OBSERVING THE EFFECTS OF MUSIC MAKING ON OLDER ADULTS' QUALITY OF LIFE

Music for Life was funded by the UK Research Councils' "New dynamics of ageing" (NDA), which was an eight-year interdisciplinary research programme. NDA aimed to understand ageing processes better and to improve the lives of older people. Within this programme, several arts-based projects were developed, including, for instance, visual arts and acting. The overall goal of *Music for Life* was to understand how the active and creative involvement in music could enhance the quality of life of older adults. In particular, the research focused on singing in small or large groups, classes on music appreciation and the learning of various instruments (e.g. guitar, recorder, keyboard and percussion). The effects of these activities were compared with control groups involved in other activities, including yoga, book and art/craft classes. The whole project was delivered through three sub-programmes hosted by three institutions.

The Sage Gateshead, a concert venue including a centre for musical education, led the *Silver Programme*, which provided musical workshops and events to about 100 people over 50 years old. Along with courses on diverse instruments and singing, it included music theory sessions and allowed participants to perform repeatedly in public concerts. *The Connect Programme*, developed by the Guildhall School of Music and Drama, took place in sheltered housing accommodation in East London and had strong creative and intergenerational features. Older adults had the opportunity to create music and lyrics and to perform along with children from primary schools. Finally, the music department of Westminster Adult Education Service (WAES) provided choir and music-appreciation classes to residents in care homes. In total, 500 residents participated in the study (398 taking part in musical activities and 102 in the control group) and about 80% were women. The eldest participant was 93 years old and the youngest 43. The mode age was 65, and considering only the musical groups, 73% were aged 50-75 years old and 23% were over 75.

Music for Life adopted a mixed methods approach, including questionnaires, focus-groups, interviews, video recordings and observations of the contents of the sessions and the spatial arrangement where they took place. Data were also collected from consultative activities with stakeholders. The project considered not only the participants' perspectives but also those of facilitators and care-givers as well as relatives and friends of participants. Consequently, the results have been disseminated in several ways, and the present review considers two articles.

The first is "Benefits experienced by older people in group music-making activities" (Varvarigou et al., 2012). Data collection was based on a pre-post questionnaire including open questions and on subsequent interviews involving 27 people randomly recruited on a voluntary basis. From the thematic analysis of these data the authors found four kinds of benefits: cognitive, social, emotional and physical. Regarding the first of these, it emerged that both music making and taking part in music appreciation courses offered a rewarding sense of accomplishment and a number of cognitive challenges that were considered stimulating and engaging by the participants. In particular, according to many participants these challenges offered an opportunity to acquire new skills, were useful to support concentration, memory and interest, and were helpful in alleviating boredom and promoting pleasant feelings of youthfulness and alertness. With regard to social benefits, it emerged that taking part in music programmes provided opportunities to socialise and a consequent sense of belonging in a group, and at the same time helped to structure participants' spare time, adding enjoyable activities to their weekly schedules. Furthermore, as already seen in studies previously discussed, many participants highly valued the opportunity to give something back to the community (e.g. through public performances or providing support to less skilled peers), and several participants expressed the need to increase the intergenerational component of the activities. Considering the emotional benefits, it emerged that music was both useful to promote positive feelings and to reduce negative ones, and the opportunities for creative expression provided by music were highly valued. Joy, spiritual fulfilment, positive engagement and confidence emerged as pleasant reactions. At the same time, making music was often considered as a support after bereavement and as an effective protection against depression and stress. Finally, although in some cases participation in the activities was compromised by hearing and mobility problems, many participants reported physical benefits, referring in particular to their breathing, their joints and their general health and vitality.

The second article considered here is “Different ways of experiencing music-making in later life: Creative music sessions for older learners in East London” (Varvarigou et al., 2013). In this case, the authors investigated how participants experienced the creative music sessions delivered within the *Connect Programme*, which focused on singing, songwriting and playing small percussion instruments. This programme involving people over 75 lasted one year and ended with a concert with primary school children. The data collection included face-to-face interviews (with 8 participants), one focus group (with 5 participants and two music facilitators), questionnaires (involving 9 participants) and a talking heads video (involving 6 participants). These data were analysed through a phenomenographic approach (Marton, 1981), which aims “to capture the relationship between the actors and the phenomenon and not the phenomenon per se” (Varvarigou et al., 2013, p. 107). Five categories emerged. The first was labelled “music-making as a means for interaction with others”, referred to four participants and revealed that the music sessions were attended purely because they represented an opportunity to meet peers and to interact with children. The second was labelled “music-making as a means for interactions with others and reminiscing” and referred to only one participant, who joined the group not only for its social value but also because the programme represented an opportunity to remember songs important in her biography. The third category was “music-making as a means for interaction with others and for developing a new skill” and referred to two participants who were interested in being involved in new activities such as singing, playing the djembe and group composition. The fourth category was “returning to active music-making after several years” and referred to three participants who were used to playing recorder, violin and karkabou (an Algerian percussion instrument) during their childhood or youth. The last category, “music-making as a means for creative self-expression” referred to only one participant, who was interested in writing songs and motivated to share them with the group. Overall, these results highlight a remarkable heterogeneity in terms of experiencing active engagement with music. On the one hand, it emerged that for some participants, benefits related to non-musical dimensions were of primary importance. Conversely, other participants considered this experience meaningful also in terms of learning, creativity and acquisition of musical skills, showing high levels of commitment and energy despite the physical decline due to their age. In this sense, the hypotheses about learning abilities (Dabback, 2005; Findsen, 2005) discussed in section 1.2 seem to be confirmed. In the light of these results, and considering the relevance of facilitators’ skills in terms of engagement and motivation, the authors stress the importance of using a wide range of

strategies to deal successfully with the heterogeneity of these recipients. Moreover, they suggest that it is important to create a repertoire that contains a balance of familiar and unfamiliar pieces, and to use approaches that combine inclusivity with opportunities for the development of musical skills (Varvarigou et al., 2013).

1.11.3 TAKING MUSIC LESSONS FROM YOUNG MUSICIANS IN OLDER ADULTHOOD

Another key project is *Rhythm for Life*, a programme developed in 2010 and involving students and alumni of the Royal College of Music acting as music facilitators. In this case the researchers monitored not only the recipients of the interventions but also the providers, and in the next chapter of this thesis, some contributions related to the latter group are discussed. In this chapter, the results related to older adults are explored. The project consisted of a 10-week programme of music making provided to individuals over 50 years old and investigated how subjective wellbeing can be improved by learning to make music in older adulthood. The programme offered three diverse learning opportunities: one-to-one instrumental lessons in the learner's home, small group instrumental lessons (from 3 to 8 people) or music workshops involving around 20 people. The instruments taught were keyboard, guitar, recorder or djembe drums. The investigation was conducted using a mixed methods approach, and the article considered here, by Perkins and Williamon (2014), reported the results of two interlinked studies conducted concurrently. Study 1 involved 68 music learners (mean age 67.87 years), with 20 people additionally recruited to a control group engaged in programmes provided by the University of the Third Age. Data were collected through a pre-post battery of three questionnaires focusing on demographic information, mental wellbeing and health-promoting behaviours. Study 2 was based on qualitative analysis and involved 21 people (mean age 64.38 years), recruited through an invitation to all music participants to take part in an interview. The interview was divided into two sections aiming to understand what it means for participants to begin learning musical instruments and the effects this experience can have on their wellbeing. Data were analysed through Interpretative Phenomenological Analysis (Smith and Osborn, 2008) and six interlinked themes were identified: "subjective experiences of pleasure", "enhanced social interactions", "musically-nuanced engagement in day-to-day life", "fulfilment of musical ambition", "ability to make music" and "self-satisfaction through musical progress". While the quantitative

study provided a picture that was encouraging yet not entirely clear, some important aspects emerged from the qualitative data. Firstly, the pleasure reported by participants seemed to derive from feelings of joy and happiness, which in many cases were linked to significant increases in self-esteem and to a rewarding sense of discovery due to the progress made session after session. Furthermore, some participants had desired to play a musical instrument for a long time, and these programmes represented a precious opportunity for them. In this respect, in line with the contribution discussed above (Varvarigou et al., 2012), this study also recommends that facilitators have a supportive attitude and carefully consider the wishes and interests of the participants. Finally, it emerged that the social benefits provided by these programmes were not limited to the interactions between peers. It became clear that participants also significantly valued their interactions with the music teachers, and in some cases, the individual lessons represented a meaningful opportunity to enlarge their social network.

1.12 CONCLUSIONS AND RESEARCH QUESTIONS

At the beginning of this chapter it was demonstrated how increases in the number of older people and in life expectancy, both internationally and in the context in which the present study took place, make it important to find effective strategies to ensure adequate wellbeing for this population. This review also highlighted a number of preconceptions and misunderstandings related to ageing and older adults. First of all, this population is extremely heterogeneous in terms of physical and cognitive health as well as in socio-economic profiles, and these differences may have significant repercussions in everyday life. Some theoretical frameworks addressing this complexity were then considered, and these stressed the distinction between the third and fourth ages and the concepts of autonomy and frailty. This overall picture can be useful for better understanding some of the processes of change that generally begin at retirement age and that develop over a period of time lasting several decades. It also was clarified, on the basis of international literature and local statistics, that older people can enjoy relatively high levels of wellbeing, that they can often rely on a solid and meaningful network of relationships and that they often retain a desire to have new experiences and to learn, both in general terms and specifically in musical terms. These resources become particularly significant when it is considered that over the years the risks of negative events such as bereavements, physical impairments and cognitive decline can

increase individuals' frailty, seriously compromising their autonomy and increasing the probability of isolation, anxiety and depression. In this context, additional resources that can impact ageing positively are resilience and adaptability to changes. The debate regarding these issues and possible approaches to optimise the ageing process is rich, and in this context, two paradigms in particular were considered: namely, successful ageing and (especially) active ageing. Beyond important differences and implications which are outside the scope of the present study, it can be summarised that in order to slow down the decline associated with ageing it is important to keep active and productive for as long as possible; to cultivate meaningful social relationships; to maintain lifestyle habits; and to keep an active role in the community. It also emerged that, according to the World Health Organization, which proposed the concept of active ageing, it is crucial to consider the rights of older people as well as their needs, and to create supportive contexts that can maximise their potential in terms of autonomy, independence and quality of life.

On this basis, it can be assumed that facilitating access to music for older people could offer considerable benefits to this population. The literature on arts-based interventions is rich and diverse, covering different types of recipients, arts and forms of engagement. What emerges is that the arts can have a particularly beneficial role in terms of health and wellbeing because they can significantly involve both the physical and mental spheres and, at the same time, both the individual and the social spheres. Arts-based interventions are thus considered capable of promoting independence, social participation, and resilience in chronically ill individuals. Consequently, it is suggested that fostering nursing home residents' engagement with the arts could be instrumental in increasing the quality of life and preserving the physical and cognitive abilities of such a fragile population.

A large body of literature suggests that music can provide important support throughout the ageing process, and consequently, it is proposed that it can play an effective role in the context of nursing homes. This idea is mainly based on three encouraging elements that emerged from the literature reviewed in this chapter. The first refers to intrinsic characteristics of music: both music making and listening are activities that do not require any particular physical effort, can be accessible and engaging even for people with significant cognitive impairments and can be meaningful regardless of individual musical background. The various possible engagements with music thus

seem capable of meeting the heterogeneity that characterises the elderly population. The second element derives from studies focusing on the role of music in the lives of older people. From these investigations it emerged that being engaged with music is highly appreciated by older adults. The literature suggests that older people are used to listening to music in different ways and that it might represent more than just entertainment, being considered as something precious which is capable of keeping memories and links with one's identity alive, and offering very intense and fulfilling emotions. Thus, music is often used to maintain wellbeing or to cope with difficult moments. Apart from this important role, music has a wide range of different functions. For example, it emerged that older adults listen to it at home or while driving, and some attend concerts with some regularity; for some, music is used as background to other activities while others listen carefully to it, in some cases using their own albums; quite a few play an instrument and many wish they could. Moreover, music education received at school seems to have a lasting impact, even for those who have not continued with this type of study. In addition, particularly intense listening experiences, which often took place many decades earlier, remain extremely vivid in the memory of the elderly. This leads to the suggestion that facilitating nursing home residents' access to music could be a way to preserve identity and support memory and other cognitive abilities, offering at the same time opportunities for discovery, learning and aesthetic fulfilment.

The third element is related to studies that specifically investigated the effects of music-based interventions for older adults, facilitating their receptive or active engagement with music. With regard to the former, it has been discussed that attending concerts can trigger positive feelings and constitutes an important opportunity for social interactions in both the third and fourth ages. At the same time, various organisational aspects need to be considered carefully in order to make participation by the elderly population feasible and attractive. It also emerged that live music can offer a significant benefit even in a completely different context from concert halls, namely in hospital wards, decreasing the perceived pain by older patients and reducing the stress related to feelings of loss of control and autonomy. From both studies, it emerged that the high standard of the musicians, along with training and planning appropriate to those specific contexts, play a decisive role in shaping the experiences of the elderly. The next chapter highlights that these elements can also have significant implications for musicians' training, employability and professional identity. Considering here the perspective of recipients, it seems plausible to hypothesise that listening to high standards of live music

could also be significant for residents of nursing homes. This population is exposed to loneliness and a lack of autonomy, and finding appropriate ways to bring live music into these institutions would preserve the right of access to quality artistic experiences for people with a serious degree of frailty.

With regard to active engagement, which implies active participation in the creation or performance of artistic products, the literature is particularly rich with regard to choral singing. The literature, however, also offers some investigations that have studied the effects of music making programmes using musical instruments or individual lessons. In short, it emerges from these contributions that making music can offer a diverse range of benefits in physical and psychological terms, regardless of individuals' backgrounds. Playing or singing provides rewarding feelings and offers important moments of socialisation and mutual support. Through these activities older adults are offered opportunities to learn new things and feel a sense of achievement, strengthening their self-esteem and motivation and regaining or reinforcing an active role in the community.

However, there is a gap in this literature regarding residents in nursing homes. While research in the field of music therapy is rich in this area, to my knowledge only one study, conducted around 40 years ago, has considered the effects of active engagement with music without therapeutic purposes for nursing home residents (Vanderark et al., 1983, as discussed in section 1.11.1). At the same time, as discussed in the next chapter, research on the impact of music-based interventions on providers is still at an early stage, and studies involving higher education music students are even rarer.

Addressing this gap and investigating the effects of group music making programmes involving residents in nursing homes and higher education music students is therefore extremely important. Music-based interventions could be particularly effective in improving the quality of life of a large population that, as discussed, has considerable limitations in terms of frailty and autonomy as well as significant limitations in terms of interpersonal contact and social participation. Looking closely at the context of Southern Switzerland, where the present research has been conducted, it also emerged that alongside problems related to high medication use and considerable workloads for staff, there are high percentages of residents who retain significant abilities in terms of motor and cognitive skills. Therefore, exploring the potential of a non-pharmacological

intervention accessible to residents with very different clinical pictures could be helpful in improving the quality of life in the facility for all actors involved. The involvement of students in this programme could be particularly relevant, as it could guarantee a high musical level and at the same time give rise to meaningful intergenerational encounters.

For these reasons, this thesis focuses on this kind of music-based intervention with a qualitative approach, through the investigation of four research questions (RQs). Two of them concern higher education music students as music providers and are discussed in the next chapter. Those focusing on older adults are:

RQ1: How and to what extent do residents in nursing home access music in their daily lives?

RQ2: What function and role does engagement with music play in their lives?

RQ3: How do residents in nursing homes experience group music making activities?

RQ4: What effects on their health and wellbeing do they perceive as a result of doing these activities?

RQ1 and RQ2 aim to deepen our knowledge of the context of nursing homes and to understand how residents describe their relationships with music. They are addressed, primarily, in Chapter 5. RQ3 and RQ4 focus on a music programme that is described in detail in Chapter 6 and aim to clarify the impact of group music making with music students in nursing homes from the residents' perspective.

CHAPTER 2

OVERVIEW ON THE LITERATURE FOCUSING ON THE HEALTH, WELLBEING AND TRANSITION TO PROFESSION FOR HIGHER EDUCATION MUSIC STUDENTS**INTRODUCTION**

This chapter discusses a number of studies which, considered as a whole, support the idea that music universities and conservatoires should facilitate the involvement of their students in community-based musical programmes. The discussion begins by considering the difficulties musicians face in the transition from student to professional status. It then considers the problems that musical activity at a professional level can cause in terms of health and wellbeing, as well as recent studies which suggest that this profession can have a very positive impact on several dimensions of wellbeing. The chapter continues by considering the possible contributions that conservatoires can offer to facilitate students' transition into the music profession and to preserve their wellbeing. In this regard, three directions in particular emerge, suggesting that conservatoires should (1) provide formal teaching focusing on these points, (2) reconsider the concept of success in the music profession and (3) implement a wider range of pedagogical paradigms. In this last respect, the notion of lifelong learning is explored, as it highlights the relevance of introducing learners to unfamiliar environments and professional contexts. The next step looks more closely at studies dedicated to the role of community-based music interventions in music students' learning. After discussing the themes emerging from the literature devoted to this field, the chapter reviews the main studies focusing on the impact of community-based activities on music students as well as two studies in which the musicians involved were professionals.

2.1 THE END OF UNIVERSITY STUDIES AND THE START OF A MUSICAL CAREER: A CHALLENGING TRANSITION

In recent years a considerable body of research has considered the challenges related to accessing and sustaining a career in the music profession. The statistics reveal that

only a very small percentage of music performance graduates find full-time permanent work as performers (Beeching, 2010; Burns, 2007; López-Íñiguez and Bennett, 2020; Perkins, 2012). Well before the outbreak of Covid-19, both research and market surveys highlighted a widespread decline in well-established patterns of consumption and access to music such as frequency of attendance at classical concerts and purchase of recordings from different musical genres. These trends are creating a complex and constantly changing labour market, which requires the vast majority of musicians to conduct their work on a self-employed basis, playing different roles and to some extent developing entrepreneurial skills. In this way, musicians are likely to need to be involved in activities such as community cultural development, writing, arts administration, retailing or management (Cunningham and Higgs, 2010). Beside the probable need to acquire competences related to these activities, for music graduates the necessity to create and sustain a portfolio career (Cawsey, 1995; Mills, 2004) can be particularly demanding for many reasons. A career in artistic fields is often run through unconnected projects, which may be concurrent and overlapping (Bennet and Bridgstock, 2015), implying collaborations using creative skills with different people (Daskalaki, 2010). Unlike the work contexts available to graduates from other disciplines, the majority of music alumni find themselves in professional environments lacking formal application processes. In these kinds of contexts, a proactive attitude can be essential, as professional opportunities often arise from previous reputation and informal contacts emerging from a network built in a highly competitive environment. This framework can significantly undermine musicians' ability to make both choices and predictions about their work and their professional development (Bennett and Bridgstock, 2015).

The transition from university to professional life is actually complex regardless of the nature of the degree obtained, and in this stage students are likely to face enduring uncertainty in terms of personal and professional identity experience (Buckham, 1998; Nyström et al., 2008). In the field of music, the extent of this problem can be particularly significant. Formal education of music students is mostly based on one-to-one tuition (Perkins et al., 2017), where learning processes based on imitation predominate (Burwell et al., 2017; Gaunt, 2011; Jørgensen, 2000) and focus on the acquisition of virtuosic skills (Smith, 2013). This approach is inadequate to prepare students to enter the contemporary labour market, as it does not provide the necessary abilities to deal with its complexity and rather perpetuates an obsolete model of the "successful musician" (Bennett, 2013). In this regard, a number of studies has revealed that professions related to music are

often considered in hierarchical terms, reinforcing the idea that a solo career is the highest expression of success (Burland and Pitts, 2007; López-Íñiguez and Bennett, 2020; MacNamara et al., 2008). This idea is echoed by Smith (2013) who, focusing on popular music, stressed that scholars in that field as well as the mainstream media reinforce assumptions related to success without taking into account the multifaceted demands of the music profession or its related challenges in terms of work-life balance (Teague and Smith, 2015). A further challenge in the transition from higher education to the music profession is that, while students are struggling to find their own professional space and to build an appropriately entrepreneurial attitude, they must also retain and improve their technical skills (Bennett and Bridgstock, 2015). What emerges from this overall picture is that a good level of instrumental skill is neither sufficient to support a rewarding career nor just to make a living through music. According to Triantafyllaki and colleagues (2012) for music students it is crucial nowadays to possess “unprecedented skills of musical and intellectual flexibility, enquiry and reflection” (p.97), while López-Íñiguez and Bennett (2020) stressed that “there no longer [sic] any dispute that musicians need myriad capabilities beyond performance if they are to create and sustain a career”. These assumptions are supported by many authors, and there is now a significant literature in this field that aims to address the complexity of the music profession (Cottrell, 2004; Gaunt and Westerlund, 2013; Hallam and Gaunt, 2012; Teague and Smith, 2015). At the same time, studies reveal that many music graduates change their professional orientation without having a real knowledge of the professional opportunities related to music (Myers, 2016; Pike, 2017). In view of this, it clearly emerges that universities could play a decisive role in facilitating students’ transitions into the professional world. The next section considers the music profession in terms of health and wellbeing and explores further arguments to reconsider paradigms and curricula in higher music education.

2.2 MAKING MUSIC AT PROFESSIONAL LEVEL: MULTIFACETED IMPLICATIONS IN TERMS OF HEALTH AND WELLBEING

Research into musculoskeletal pain and dysfunction related to music making has developed significantly in recent decades and has shown that playing-related pain and musculoskeletal disorders such as weakness, numbness and tingling are very common in musicians (Ackermann et al., 2012; Cruder et al., 2018; Gembris et al., 2018; Kok et al.,

2016; Kreutz et al., 2009; Williamon and Thompson, 2006), although the causes are not yet fully understood (Baadjou et al., 2016). The long exposure to loud sounds can also provoke hearing impairments (Hagberg et al., 2005; Schmidt et al., 2011). Considering the psychological dimension, performance anxiety is a frequent problem among musicians (Antonini Philippe and Güsewell, 2016; Biasutti and Concina, 2014; Kenny and Osborne, 2006; Kenny, 2011; Osborne et al., 2014), and it may appear from the early stages of learning (Boucher and Rayan, 2010), affecting both orchestral musicians as well as soloists (van Kemenade et al., 1995). Dealing with psychological and physical problems while at the same time facing the ordinary demands of the music profession can create vicious circles, causing chronic stress and exposing musicians to high-risk behaviors (Dobson, 2010; Sternbach, 2002). This scenario is particularly worrying considering the complexity of the labour market described in the previous section. Beside the high level of technical skills demanded by the music profession, careers based on freelancing or self-employment require a “multifaceted professional identity [that] exposes performing artists to a variety of occupational demands categorised under organisational, interpersonal, and intrapersonal domains” (Willis et al., 2019, p. 2). It can therefore be assumed that musicians’ health and wellbeing may be influenced not only by the specific characteristics of their activity but also by elements of the context in which they carry out their profession. After several years spent practising their instrument for many hours per day, young music professionals are expected to prove that they have developed a strong artistic identity while facing a complex and changing environment, which requires high levels of autonomy and proactivity. In such a context, the discontinuity of job opportunities and financial insecurity become considerable stress factors, increasing competition between peers (Creech et al., 2008; Perkins et al., 2017; Steptoe, 1989) and perfectionism (Kenny et al., 2004; Stoeber and Eismann, 2007). These elements, while affecting psychological wellbeing, triggering or worsening the anxiety problems already mentioned, can also have consequences in the physical dimension, as musicians are often reticent about their physical problems, avoiding talking about them with colleagues and employers and neglecting pain and other symptoms in order to continue working (Perkins et al., 2017; Willis et al., 2019).

Despite these areas of concern, a significant number of studies highlight that professional musicians can have high levels of wellbeing in several dimensions. Ascenso and colleagues (2017) began with the idea that “stereotypes regarding the music profession as a source of stress and strain seem to prevail and to be deep

enough to permeate musicians' identity constructions" (p. 77). They investigated how six professional musicians perceive their own wellbeing through the lens of positive psychology: using the PERMA model (Seligman, 2011), which is described in Chapter 3 section 3.2, the data revealed high levels of wellbeing. It emerged that making music provokes positive emotions and fosters a sense of accomplishment, reinforcing the idea that music making is a rewarding activity per se and can thus provide high levels of satisfaction and meaningful experiences (Brodsky, 2006; Perkins et al., 2017; Sandgren, 2002). Moreover, Ascenso and colleagues (2017) found that the variety of repertoires and situations linked to portfolio careers appeared to be an engaging component. This result is aligned with other investigations, which suggest that freelance careers, compared with regular employment, can provide significant advantages in terms of autonomy, creativity, learning experiences (Bujacz et al., 2017), job satisfaction (Andersson, 2008; Warr and Nielsen, 2018) and life satisfaction (Binder and Coad, 2016). According to Ascenso and colleagues (2017), the dimension in which the results were less satisfactory was that of interpersonal relationships, reinforcing the idea that a prolonged commitment in individual music practice may increase the risks of isolation (López-Íñiguez and Bennett, 2020; Perkins et al., 2017). However, the overall picture is positive and reveals that the music profession can provide enormous value in terms of self and of eudaimonic wellbeing for musicians. Significantly, it emerged from the accounts of the musicians involved in Ascenso and colleagues' study that the transition into the profession was seen as the most difficult moment of their careers, thus confirming the need for the conservatoire to play a dual role towards its students, namely "going beyond refining musical skills and focusing also on resilience and life-skills in an anticipatory approach to professional life" (Ascenso et al., 2017, p.78).

2.3 WHAT RESEARCH TELLS ABOUT THE HEALTH AND WELLBEING OF HIGHER EDUCATION MUSIC STUDENTS

In recent years a number of studies have shed light on how music college students experience their studies, and it has emerged that, although students are highly motivated and can derive significant benefits from their involvement with music, they are exposed to a high number of risks and stressors. For various reasons, young musicians often struggle to cope with these problems, finding themselves with limited capacity to understand their causes and without appropriate support.

The literature suggests that the years of university study present a particularly significant set of stressors regardless of the subject of study (Arslan et al., 2009; Bostanci et al., 2005; Bayram and Bilgel, 2008). Students are faced with problems related to family detachment, relocation to a new environment, autonomy and identity. While an extensive review of the differences between musicians and students of other disciplines is beyond the scope of this study, it is necessary to highlight two specific features of university-level music study that may pose particular problems. One is the need to display very high levels of technical skill in public, in a context where making mistakes can have serious and lasting consequences and where it is also required to demonstrate high levels of creativity and artistic personality. The other is the fact that in music universities learning experiences are mostly based on one-to-one teaching and imitative processes, thus making the individual relationship with a single teacher central to the whole academic path. In addition to these problems, conservatoire students have been found to experience sleep disturbance, inappropriate tiredness, weather sensitivity, concentration problems, or headaches requiring medication (Kreutz and Lotze, 2008). Literature also suggests that music students often have unhealthy habits. Despite the importance of having an appropriate diet (Perkins et al., 2017; Williamon and Thompson, 2006) and of taking physical activity regularly (Nawrocka et al., 2014), young musicians experience eating disorders (Kapsetaki and Easmon, 2017) and practice sports less than students of other disciplines (Ginsborg et al., 2009).

Students are also exposed to myriad psychological challenges. As discussed in the previous section, the high level of performance expected of musicians can cause stage fright and anxiety problems not only among professionals but also among students (Demirbatir, 2015; Hildebrandt et al., 2012; Kaspersen and Gotestam, 2002). The level of perfection required and the difficulty in achieving it can lead to depression and low self-esteem (Kenny and Ackermann, 2015; Pecun et al., 2018; Vaag et al., 2014), and this may be further exacerbated by interpersonal factors. On the one hand, the nature of the one-to-one teaching they receive and their workload in terms of practice leads students to isolate themselves, neglecting interpersonal relationships and leisure (Creech et al., 2008; López-Íñiguez and Bennett, 2020; Perkins et al., 2017), and making it difficult to find support in case of difficulties. On the other hand, the high levels of perfection required, together with the awareness of a difficult working environment, make the conservatoire environment particularly competitive. This problem can be so severe as to be described as “back-stabbing” (Dobson, 2010, p. 246), and one study suggested that for freelance

musicians the years in the conservatory were more difficult than those in the profession (Dobson, 2010). Problems related to competitiveness, anxiety and low self-esteem may also be linked to job insecurity and concerns related to the difficulties around finding work after the completion of academic studies. Combinations of the problems just described can create dangerous vicious circles leading, in some cases, to alcohol abuse (Dobson, 2010).

Perkins and colleagues (2017) explored the health-related barriers and enablers perceived by conservatoire students, and their study largely confirmed the stressors previously discussed. However, it also highlighted a number of encouraging elements. Many students reported finding adequate mentoring and stimuli promoting their versatility and open-mindedness, in an environment that took care of their health and wellbeing. Furthermore, significant levels of performance success and enjoyment emerged. Encouraging findings also emerged in terms of relationships, networks, supportive communities and family support.

This study put forward recommendations, in particular stressing the importance of increasing the students' awareness of the health-oriented activities promoted by their universities because very often students lacked adequate awareness in this sense or perceived the available resources as insufficient.

2.4 POSSIBLE INITIATIVES THAT CONSERVATOIRES CAN UNDERTAKE TO SUPPORT THE WELLBEING OF THE MUSICIANS OF THE FUTURE

The findings and recommendations discussed so far can help to reflect on the role of the conservatoire in fostering students' transition towards the music profession. From such a complex and multifaceted picture two priorities emerge. On the one hand, it seems necessary to fill some gaps in students' training and to make the curriculum offered by universities more comprehensive. On the other hand, it is important to find ways to promote the students' wellbeing. Three closely interconnected areas for action emerge from the literature considered: firstly, some authors suggest increasing or improving the support offered by conservatoires by increasing mentoring and broadening the curricula; secondly, some underline the need to reconsider the idea of "success" within the music profession; and thirdly, some authors consider it crucial

to offer students environments and learning experiences that strengthen their interpersonal and intrapersonal abilities.

2.4.1 INCREASING FORMAL MENTORING AND BROADENING STUDENTS' CURRICULA

Improving mentoring and other modes of support that conservatoires can offer is important. This idea arises from the multifaceted stressors students are exposed to and the largely one-to-one nature of their learning style (Burwell et al., 2017; Gaunt and Westerlund, 2013). It is suggested that teachers should be encouraged to act as mentors, capitalising on the deep experience they have gained in the field and the close contact they have with each student (Creech et al., 2008; Pecen et al., 2018; Perkins et al., 2017). At the same time, students' skills could be increased by attending extra-curricular activities (Pecen et al., 2018) or by enriching the courses and seminars offered in the conservatoire, integrating "courses presenting working strategies and relaxation techniques, memory research, time management and coping with stress" (Demirbatir, 2015, p. 2205) or on the development of interpersonal and organisational skills (Creech et al., 2008; Pecen et al., 2018). Increasing this kind of offer is important because students often perceive such support as inadequate (Perkins et al., 2017). At the same time, as the music labour market offers little space for specialism (Creech et al., 2008) universities can facilitate the transition to the profession also by training students in a broader range of musical genres, increasing their versatility. Beyond the ability to master and perform a wide-ranging repertoire, a sustainable career also relies on the ability to seize varied performance opportunities (Ascenso et al., 2017) and to have an open-minded approach (López-Íñiguez and Bennett, 2020). This may have profound implications for the professional identity of new generations. Educating them in this sense may decrease the risk that alumni consider themselves with frustration as a "jack of all trades" (Creech et al., 2008, p. 327), suffering the discrepancy between their expectations as students and the professional reality outside the school walls (Pecen et al., 2018). As already noted, the trajectories suggested by the literature to facilitate transition to the profession are interconnected, and the theme just discussed leads to explore the idea that it is necessary to redefine the concept of success.

2.4.2 RECONSIDERING THE NOTION OF SUCCESS

The literature offers numerous contributions that have attempted to shed light on the cultures, or learning environments, of music in higher education (Perkins et al., 2017). Nevertheless, a “lack of understanding about the roles in which musicians engage” (Bennett, 2008, p.82) is still widespread. Music colleges are often an environment where the focus is entirely on performance and related skills (Nettl, 1995) and where individual talent occupies central importance (Kingsbury, 2001). This may as a consequence promote the idea that solo performance should be considered the absolute pinnacle of a professional career, supporting a view that does not do justice to other possible rewarding careers (Ascenso et al., 2017; Juuti and Littleton, 2010; López-Íñiguez and Bennett, 2020). A further element to consider is that the emphasis on performing skills and talent fosters the development of hierarchical mindsets in music institutions (Perkins et al., 2017). This can lead to an uneven offer of learning opportunities to students (Davies, 2004), fomenting the already highlighted competitive component of the learning environment (Dobson, 2010; Juuti and Littleton, 2010) and affecting students’ perception of their reputation. Dobson (2010) suggested that both students and professionals give great importance to their reputation, but she also points out that this concept is often difficult to define and measure:

In [their] accounts, the opaque nature of the musicians’ reputations interacted negatively with the proclivity within conservatoire culture for peer-comparison and competition. These musicians have a clear idea of the means by which reputations are formed, yet the nature of their own reputation – which holds the potential to mediate both social and professional relationships – remains far from transparent. The participants’ uncertainty about the nature of their reputations exacerbated their propensity for making self-comparisons with peers, increasing their likelihood of engaging in self-doubt. (Dobson, 2010, p. 247)

Pecen and colleagues (2018) develop reflections close to this theme and, in line with other authors, stress the need to increase skills related to planning and goal-setting behaviours (Hatfield, 2016; Talbot-Honeck, 1994). In their study focusing on elite musicians, after emphasising the importance of cultivating self-management skills, Pecan and colleagues (2018) state:

With regards to goal setting, it also became clear that a personal definition of what constitutes “success” was needed along with subsequent acquisition of skills to teach performers “how to achieve their idea of success”. Practitioners might consider how to cater to the subjectivity of career success in the twenty-first century, along with tailored provision of the necessary organizational and psychosocial skills to achieve it. (p. 13)

These elements are linked to inter-personal and intra-personal dimensions, which bring to discuss the third trajectory suggested by the literature to facilitate students’ entry into the music profession.

2.4.3 IMPLEMENTING PEDAGOGICAL FRAMEWORKS ABLE TO IMPROVE INTERPERSONAL AND INTRAPERSONAL ABILITIES

Considering that successful transitions into the music labour market were found to be strongly dependent on relationships with other musicians, Creech and colleagues (2008) stress the need to create within the conservatoire itself a community of practice, namely an environment capable “of providing a source of moral support, for exchanging ideas with like-minded people and for forging performance relationships” (p. 329). In this way, while increasing performance opportunities, which are sometimes perceived as a matter of luck, music universities could also facilitate learning and promote the acquisition of relevant skills. Such an environment, in fact, could help to overcome the assumption, pointed out by Dobson (2010), that the difficulties and competitiveness experienced in the conservatory can be useful to learn adaptive practices relevant in professional life. In other words, students may learn key competences not from specific curricular activities but rather from a “hidden curriculum” (Pitts, 2003, p. 282) intimately linked to the culture of the institution itself. Establishing a healthy community within the university is also considered useful for the building or refining of a self-concept appropriate to initiate and maintain a professional career in music (Burland and Davidson, 2002).

In this regard, a more recent study stresses the need for music universities to consider that “more than training performers (the “doing”), empowering musicians (in the “being”) should be part of the mission” (Ascenso et al., 2017, p. 78). Recognising the potential of mentoring, Ascenso and colleagues (2017) suggest that this can be realised by “going beyond refining musical skills and focusing also on resilience and

life-skills in an anticipatory approach to professional life”, through “a ‘living curriculum’ addressing the development of the whole individual” (p. 78). This holistic and dynamic vision seems in many respects close to the importance of fostering the metacognitive processes suggested by Bennett (2019a), who focuses on the notion of employability, a multi-dimensional concept which transcends the specific discipline. It is based on a deep understanding of one’s own personal value and implies success in planning, finding and sustaining work, notwithstanding the constantly evolving context. This attitude, based on metacognition, reflexivity and adaptability, is crucial also because musicians often tend to accept, rather than attempt to solve, the conflicts related to their professional identity and psychological stress (Bennett, 2019a).

A further contribution is provided by Smilde (2012) who regards it as crucial to reconsider the learning environment to prepare undergraduates to face the multifaceted challenges linked to the changing nature of music consumption. Considering the need to engage new audiences by providing performances adapted to different contexts and by interacting appropriately with different audiences, Smilde suggests that conservatoire cultures should promote the notion of lifelong learning. This conceptual framework is based on the idea of transforming “experience into knowledge, skills, attitudes, values, emotions, beliefs and the senses” (Jarvis, 2002, p.60). Rather than aiming to increase students’ knowledge of information and theories through formal learning, lifelong learning combines formal, nonformal and informal learning, aiming to enable students to apply their knowledge in specific yet differentiated contexts (Bjornavold, 2002). The training and assessment of students are thus linked to a significant extent to professional environments. For these reasons, it is considered necessary that music universities create and maintain a solid network with professional organisations and relevant partners. In this way, it is possible to impact on students’ attitudes and values positively, facilitating simultaneously their professional and personal growth as well as the development of their imagination and self-reflexivity (Smilde, 2012). This contribution is particularly relevant because it strongly stresses the direct links between involvement in unfamiliar environments and interprofessional encounters with the acquisition of relevant skills and the development of reflexivity. Consequently, the next section takes a closer look at the literature focusing on the potential of community-based programmes in terms of learning for music students.

2.5 MAKING MUSIC IN COMMUNITY ENVIRONMENTS: THE RELEVANCE ON THE TRAINING OF HIGHER EDUCATION MUSIC STUDENTS

In 1986, Peter Renshaw, describing the *Music Performance and Communication Skills* programme developed by the Guildhall School of Music and Drama in London, stressed the need for conservatoires to take a more active role in society. In his view, a crucial element of this was the development of partnerships with local institutions, which would aim to promote engagement with music in diverse contexts using tailored programmes. Among the many benefits that this change could bring to all the actors involved, Renshaw pointed out that this would enable the implementation of “a more realistic focus for the curriculum” (p. 86). Due to the political and social changes of those years and their repercussions on the professional lives of musicians, this goal was considered necessary as “students can no longer afford to hide behind a fantasy world of false expectations” (Renshaw, 1986, p. 86). Nevertheless, at the time of writing this thesis, the implementation of seminars and teaching modules focusing on community-based musical activities is still far from widespread. In a recent paper, Triantafyllaki and Anagnostopoulou (2013) “call for a renewal of well-established perceptions of norms and values in higher music education” stressing the need to enrich students’ backgrounds by providing “new knowledge through the experience of dealing with new, challenging situations” (p. 63). In the United States, recommendations made by the National Association of Schools of Music (NASM) include three points relevant to the involvement of music students within communities: the importance of providing learning opportunities to local communities, including through appropriate performances; the need to implement pedagogical preparation and techniques adequate to teach musical amateurs effectively; and the necessity of increasing competences related to entrepreneurship, leadership, advocacy, management, and audience development (NASM Handbook, 2016-2017).

As shown in the next section, research focusing on music students’ perspectives on being involved in music-based interventions is still at an early stage. Nevertheless, in recent years some scholars have argued that it is important to include opportunities to be engaged with audiences, venues and contexts alternative to the traditional ones in music colleges curricula. The literature in this area is varied, but it is possible to recognise some recurring themes, which highlight the relevance of these experiences in shaping the identity of young musicians and in encouraging a reflective attitude. Moreover,

bringing students to work in diverse contexts and facilitating their encounters with unusual audiences and with professionals from other fields is considered an effective way in which to facilitate different kinds of learning and to promote the acquisition of a wide range of personal and musical skills.

According to Smilde (2012), to facilitate students' transitions into the profession and to prepare them for sustainable careers a "dynamic synergy between the college and the outside world is needed. Strategic alliances and partnerships are important to help reinforce the learning environment of the music college" (p. 5). Involving students in community-based activities can thus enhance their awareness of professional opportunities and their self-management skills. At the same time, these synergies may offer students formal, non-formal and informal learning experiences that help them to achieve skills relevant to acting as performer, composer, teacher, mentor, coach, or leader according to the needs of the context (Smilde, 2012). This idea is close to that proposed by Renshaw (1986), who in the aforementioned paper asserted that by preparing "students to cope with challenging situations outside their more conventional experience" it is possible to offer a "broad view towards different forms of music-making" (p. 81). In this way, it should be possible to foster planning and management skills along with the ability to communicate effectively with different audiences, to adapt to a variety of performance conditions and to increase "basic musical skills, e.g. aural skills, rhythmic sense, fluency in musical literacy, improvisation, transcription, arrangement and creative skills" (Renshaw, 1986, p. 81). This opinion is widely agreed upon by the authors considered in this section (Bowles and Jensen, 2018; Gande and Kruse-Weber, 2017; Smilde, 2012; 2018; Triantafyllaki and Anagnostopoulou, 2013). At the same time, it is almost unanimously agreed that the impact of this type of experience goes far beyond the acquisition of specific sets of competences and skills. According to Triantafyllaki and Anagnostopoulou (2013, p. 85) "when students are faced with experiences unfamiliar to them, [...] they are prompted to engage in reflection on their acquired habits and understandings and are led to question their existing identities and the relationships in which these are situated".

Smilde (2018, p.299) echoes this view, pointing out that the synergy between the conservatory and the "external world" can expose students to "a variety of learning pathways" that may include working with "children, prisoners, or the elderly" and that can encourage them to change their "frame of reference", with positive consequences

in terms of proactivity and adaptability. In this framework, providing context-related evaluations in collaboration with external partners is paramount as it offers feedback and assessment by professionals in fields outside of music. This element is considered important to foster students' reflexivity (Smilde, 2018). Renshaw is also convinced that it is important to offer situated learning opportunities to students, because these can have positive impacts in terms of identity and reflexivity. In his book *Engaged Passions: Searches for Quality in Community Contexts* (2010) he states:

By positioning learning and knowing in the context of active participation in social communities, arts practitioners are far more likely to deepen their understanding, engagement and commitment to what they are doing. But at all times their growing practical awareness of what it is to be socially engaged has to be underpinned by reflective conversation and critical dialogue within a shared process of collaborative learning. By exposing all practitioners to different contexts and perspectives, this enables them to make new connections, and opens them up to new challenges and a wider range of possibilities in their practice. (p. 108)

This section closes by suggesting that a greater commitment by music universities to offering community-based activities would be an important step to reach new audiences, with consequences that could provide benefits far beyond the students' curriculum. In a paper describing *Meet4Music*, a community music programme established in Austria in 2016, Gande and Kruse-Weber highlighted the mutual benefits provided by these initiatives, claiming that "community music can offer new perspectives for institutions and professional musicians to connect with new audiences, and it may provide those audiences with the opportunity to get involved with music and creative arts in novel and fascinating ways" (Gande and Kruse-Weber, 2017, p. 374). The authors stress that these operations can contribute significantly to strengthening the presence of conservatoires in society. Beneficial consequences can also emerge from involving students in teaching activities for adult amateurs. According to Bowles and Jensen (2018) in this way it is possible to "provide opportunities for music students to work alongside adult learners, as well as to experience intergenerational teaching and learning" (p. 284). The authors also point out that the inclusion of students in community ensembles could facilitate the students' mastery of a wider range of styles and genres, thus increasing their versatility. On the basis of these encouraging insights, the next section considers the literature focusing on the effects of community-based activities on the musicians involved.

2.6 THE IMPACT OF MUSIC-BASED INTERVENTIONS ON HIGHER EDUCATION MUSIC STUDENTS

Despite the wealth of studies dedicated to the effects of arts-based interventions on recipients, the literature considering providers' perspectives is still at an early stage. However, this small amount of research includes interesting investigations focusing on music students engaged in programmes addressing specific communities. First of all, the contexts considered are very diverse and involve vulnerable recipients with very different profiles, which invites reflection both on the role music can play in different communities and on possible approaches to be used for specific contexts. Secondly, to some extent the studies considered highlight that this kind of training, despite its short duration, can have a lasting impact on students. The review presented in this section has been organised chronologically, and it allows to consider interventions involving rural communities, refugees, drug addicts, healthy older adults and older adults in hospital settings.

2.6.1 BRINGING STUDENTS TO MAKE MUSIC IN THE YAKIMA HIGHLAND

An early paper focusing on the perspective of music students involved in community music activities is given by Campbell (2010), who described the project *Music Alive! In the Yakima Valley*. This initiative was started in 1999 by the University of Washington School of Music and, while aimed at music education majors, was also open to music performance, ethnomusicology, and jazz students. The fundamental aim of this programme, in which the ethnomusicology course played an important role, was to bring together higher education music students and children living in a disadvantaged area. Through programmes lasting between one day and one week, students had the opportunity to leave their familiar university environment and engage children and youth from poor and rural communities with music. Crucially, this programme consisted in a sort of exchange, as students did not just play their own repertoire on their own instruments but also listened to and learned about the music of the Mexican-Americans and Yakama Indians, involving genres such as conjunto, mariachi, son jarocho, and powwow traditions. In this way, the programme offered mutual benefits to both recipients and providers, promoting the dissemination and appreciation of alternative

musical genres to those familiar to university students. According to Campbell, such a strong, and in some ways disorientating, experience made students more open and sensitive towards music and musicians from different cultures, stimulating them to use their musical skills in contexts very different from their own. The effects of this experience have meant that over the years a significant number of students “have taken the pathway to teaching jobs in places beyond their own familiar and safe suburban environments, to work with children and youth far from the mainstream who deserve highly skilled and sincerely dedicated musicians in their midst” (Campebell, 2010, p. 306).

2.6.2 BRINGING HIGHER EDUCATION MUSIC STUDENTS INTO DAY CENTRES FOR IMMIGRANTS, DRUG ADDICTED AND PSYCHOTIC PEOPLE

Triantafyllaki and Anagnostopoulou (2013, p. 63) observed that

where undergraduates have engaged in community music activities either as part of their course or as an extracurricular activity, it is often the case that the wider benefits for students themselves are only tacitly spoken of rather than the focus of systematic research

and that “where university music departments and conservatoires/music colleges have included community music modules in their courses of study, the positioning of those modules within particular institutional and disciplinary knowledge cultures is seldom addressed” (p. 63). Their study attempted to address these issues. In the academic years 2009/10 and 2010/11, a five-year musicology degree at Department of Music Studies, University of Athens, included a *Music in the Community* module, which focused on engaging with audiences who cannot access music easily. In this way, students were offered the opportunity to do practical work outside traditional disciplines and to focus on improvisation and performance in different settings. The subjects covered in this module also included definitions and aspects of community music and music therapy, as well as basic principles of sociology, psychology, psychiatry, education and informatics. Groups of three or four students were involved in music-based interventions in three kinds of day centres, for immigrants (including children), drug addicts (including teenagers) and patients with psychotic diseases. The programmes carried out included a wide range of musical activities, such as musical games, improvisation, song writing

and musical theatre. Through focus groups involving between two and four students and documentary analysis of the students' final essays, the authors aimed to understand what knowledge and skills students developed through their encounter with peers and recipients. The impact of this experience on students' career choices and professional identity development was also investigated. The results highlighted achievements in diverse yet interrelated dimensions and changes to their perception of their relationship with "others" (both colleagues and recipients of the interventions); to their professional identity and self; to their commitment to music; and to their ideas about learning and teaching. The opportunity to work for the benefit of marginalised groups and vulnerable people was rewarding in terms of social and moral commitment. In this way, students developed feelings of belonging and group identity, also enhanced by their negotiation with heterogeneous recipients in terms of musical activities and repertoires. Furthermore, it was meaningful for students to discover how music can be engaging for people who are not formally trained and to observe high levels of interest and commitment towards music by hard to reach populations.

It also emerged that working in community settings stimulated students' abilities to respond and adapt to the context. In this way, students questioned their ideas about musical "talent", "excellence" and "virtuosity". According to the authors, students reconsidered their ideas of music as "high art" and by taking part in this learning experience "the focus of attention seems to shift from academic forms of knowledge, universal values and the acquisition of specific skills towards how, where and when music is learnt, as well as what motivates musical learning in both formal and informal learning situations" (Triantafyllaki et al., 2012, p. 101). Overall, this experience enhanced students' ability to adapt to different contexts and their capacity for self-reflection, encouraging them to consider a broader range of approaches to making music and thus of professional opportunities. According to Triantafyllaki and Anagnostopoulou (2013), a key point of community-based experiences is that these activities subvert the traditional position of students as recipients of knowledge and instead offer opportunities for collaborative, practice based and informal learning. In this way it is possible to promote a reflexive attitude in students with consequences in the development of their professional and musical identities. As the authors pointed out, community music

activities during a higher music education degree could become a vehicle for students to re-examine and possibly revise their musical identities. Musical identities negotiated

through participation in the CM [community music] activities are distinguished not only by the embodiment of a variety of musical knowledge and skills but also by the adoption of roles as valuable contributors to the group (p. 85)

2.6.3 EXPLORING ENCOUNTERS BETWEEN MUSIC STUDENT-TEACHERS AND HEALTHY OLDER LEARNERS

Another research project offering higher education music students the opportunity to be involved in community-based music activities was based on *Rhythm for life*, a programme developed by the Royal College of Music as mentioned in Chapter 1. As already noted, the study addressed people over 50 years old (average age 68 years) and was run in 2010 and 2011 (Perkins and Williamon, 2014).

The programme focused on music making and offered 10-week programmes in three different formats: individual instrumental lessons in the learners' homes, small group instrumental lessons (from 3 to 8 people), and music workshops involving around 20 participants. The instruments taught were keyboard, guitar, recorder or djembe drums. The investigation involved both recipients and higher education music students and alumni, who acted as music facilitators. Acknowledging that older adults represent a growing yet unfamiliar population for conservatoire student-teachers, the rationale of this research project was based on the idea that, to teach to older learners successfully, it is necessary to take a holistic approach considering the biography and the background of each individual (Hartogh and Wickel, 2008).

As a consequence, teaching music to older adults represents a "departure from the norm for the majority of conservatoire students, requiring them to step beyond their specialisms and to engage in new practices, with new people and in new spaces" (Perkins et al., 2015, p. 3). *Rhythm for life* was not part of the formal curriculum, and the students involved received a small bursary and were recruited based on their teaching experience and their attitudes toward working with older adults. A training programme developed in collaboration with a local charity dedicated to older adults was offered before and during each programme. Through open-ended questionnaires, diaries and video-stimulated recall interviews, the authors aimed to understand what students learned by teaching music to older adults and to observe whether this kind of programme can play a relevant role in training contemporary musicians.

The analysis intended to detect changes in students' practices, attitudes and values related to their commitment as teachers of older adults. Data were analysed through Interpretative Phenomenological Analysis (Smith and Osborn, 2008), and two superordinated themes emerged. The first, "becoming a teacher of older adults", highlights the questioning of assumptions about older adults' resources in terms of learning potential and commitment to music. As a consequence, students became aware of the need to broaden their teaching strategies and, by recognising the commitment of older adults despite their vulnerabilities, expressed motivation to improve their teaching skills to address successfully a new population of recipients. The second superordinate theme, "becoming a music teacher" referred to new attitudes and insights specific to teaching music. It emerged that students enlarged their repertoire of teaching practices, by including for instance metaphors and singing. Furthermore, they gained confidence in working with groups of learners, and in this setting they had the opportunity to discover and evaluate peer-learning and peer-support. Overall, students developed their reflexivity and improved their ability to balance accurate planning and flexibility.

Echoing concepts discussed in the previous sections, Perkins and colleagues (2015, p.2) pointed out that this type of seminar is aligned with "the educational as well as societal imperatives" which stress the importance of strengthening the links between conservatoires and communities through appropriate partnerships. They also highlighted that the effects offered by these experiences can be lasting and significant even though the actual involvement of the students is short, precisely because such initiatives offer students opportunities for transformative learning, namely "learning that evokes a change in a person's 'frame of reference', their 'meaning perspectives, habits of mind, mind-sets'" (Perkins et al., 2015, p. 9; see also Mezirow, 2000, p. 7).

In this case, music students had the opportunity to question their views about older adults' potential in terms of engagement with music and learning. As a consequence, they had new insights about teaching opportunities and were encouraged to consider unforeseen roles in local communities. Briefly, in the authors' words, "Shifts of this sort can be fundamental in equipping students for lifelong careers in music, offering the opportunity to step outside of 'the box' to encounter new practices with new people" (Perkins et al., 2015, p. 9).

2.6.4 INVOLVING STUDENTS IN MUSICAL PROGRAMMES FOR PEOPLE “OF ALL AGES AND DISPOSITIONS”

A more recent study comes from Austria and is based on *Meet4Music*, a programme briefly mentioned in section 2.5. It was developed by the Institute of Music Education, University of Music and Performing Arts, Graz, and offered drum circle activities, choir singing and dancing “to participants of all ages and dispositions, from all sociocultural backgrounds, whether already musically trained or not” including “children as well as elderly people, citizens of Graz, migrants, trained musicians, amateurs and people with disabilities” (Gande and Kruse-Weber, 2017, p. 376). This programme also involved students who, attending an elective course, had the opportunity to participate in the workshops and to spend about 15 minutes acting as leader. In this way, students were offered opportunities for creativity and proactivity while being supported and coached by experienced facilitators. The aim of the course related to engaging heterogeneous groups with music and facilitating intercultural exchanges encouraging students to develop a reflexive attitude and to use multiple approaches. In their paper “Addressing new challenges for a community music project in the context of higher music education: A conceptual framework”, Gande and Kruse-Weber (2017) investigated the experience of three professional music facilitators involved in *Meet4Music* in order to clarify how to equip students with competences relevant in the field of community music.

The interviews explored five areas: flexibility and spontaneity, empathy and attentiveness, acceptance and openness, communication, and collaboration. It emerged that, due to the recipients’ heterogeneity, running musical activities in an informal setting required the ability to be adaptive and flexible to unforeseen circumstances, quickly evaluating the needs and desires of recipients and communicating effectively with them. As a consequence, “empathy, attentiveness, openness, non-verbal and other constructive ways of communicating” (p. 381) were indispensable. Crucially, the authors point out that the relevance of this set of attitudes and competences goes far beyond the context of *Meet4Music* and that it is “essential for every teacher and facilitator, whether working in community music projects, teaching elementary music, giving instrumental tuition or leading a choir” (p. 381). This leads to reflect again on an aspect discussed in section 2.5, namely the potential impact of community-based experiences in terms of the identity and employability of higher education music students.

In addition, the efforts of Gande and Kruse-Weber (2017) to clarify some conceptual aspects linked to the proposed programme is very useful in the context of the present study. The authors, taking into account the concepts of lifelong learning and community of practice discussed above, offered further insights into the perspective of the students involved. Their paper suggests that assigning students unfamiliar responsibilities and roles, in a systematic and assisted manner, made it possible to observe a gradual assumption of responsibility on their part. In this sense, the supportive and open approach of the facilitators and the team members was crucial, as students' self-reflection and self-confidence were constantly supported by welcoming students' ideas and thoughts, by providing constructive feedback and by using appropriately open questions throughout the learning process.

2.6.5 INVESTIGATING THE MEANING OF MAKING MUSIC IN HOSPITAL WARDS

Another investigation relevant for the present study was undertaken by Prince Claus Conservatoire, (Groningen), and focused on music-based interventions carried out in hospital settings, as reported by Smilde and colleagues (2019) and as previously mentioned in Chapter 1 section 1.9.2. The research, which was carried out between September 2016 and June 2017, used an ethnographic approach to focus on the experiences of, and the interactions between, all the actors involved, including post-surgery patients, nurses, professional musicians and higher education music students. The latter were recruited on the basis of their interpersonal abilities and of their skills in improvisation, solo playing and ensemble musicianship. After training, which included an observation on-site, the students took part in an internship and were involved in music interventions in one hospital ward for six successive days. The interventions were based on person-centred music making performed by ensembles of three musicians. This approach involves a great deal of interaction with recipients, as music is largely interpreted, arranged, improvised and composed through co-creative processes based on verbal and non-verbal communication with each patient. The research aimed not only to investigate how people involved experienced these interventions, but also to inform the design of an elective training programme for Master of Music students interested in working in health care settings.

Daily observation reports, field notes, interviews and reflective journals were used to investigate the interactions between musicians, fragile older people and health professionals. The experience of musicians may be described as a journey that began with feelings of disconnectedness and apprehension. This was due to the fact that they felt immersed in a complex and unfamiliar environment, where their role was not entirely clear, neither to themselves nor to the significant others (patients and carers) they were working for and with. As a consequence, the musicians experienced feelings of vulnerability. On the one hand, their certainties and habits had to be renegotiated in order to redefine their profile in a context unaccustomed to their presence. On the other hand, they were also faced with unexpected and not always positive reactions in response to their commitment to make people feel good through music. In this difficult climate, however, all the actors involved were able, through human contact and moments that favoured reciprocity, to “share the grief” (p. 59), and it was possible for the musicians to discuss and share the concerns and uncertainties experienced in making music in that environment. Moreover, the musicians’ self-compassion increased significantly, as they became less judgemental about themselves both as individual musicians and as ensembles. Throughout this experience, their focus often shifted from feelings of inadequacy and guilt to attention to and awareness of the complexity of the situations they faced. The authors relate this to the concept of reflexivity and, in line with what is suggested by Bloom (2016), highlight that “self-compassion goes hand in hand with a strategy for coping with emotions, while keeping a certain professional distance, through (indeed) observing a situation rather than be [sic] taken in by it” (p.63) and that “self-compassion needs to be exercised, in order to let go of a perfectionism that can work in a hampering way, and accept and ‘tolerate’ one’s perceived shortcomings” (Smilde et al., 2019, p.76). In addition to this, musicians’ experiences also included elements referring to the notions of shared leadership and interprofessional collaboration. In this way, through dialogue with colleagues and carers, they overcame the aforementioned concerns to a significant extent, and reconsidered their individual value and their abilities. Working in such a complex context, musicians also experienced situations of “reflection on action” (Schön, 1987) increasing their ability to act in complex situations and thus making appropriate decisions quickly. Finally, due to the need to consider the individual characteristics of each recipient, the musicians also faced the necessity of using a large number of approaches. In some cases this created dilemmas in terms of artistic integrity, which in turn triggered reflection processes. In this way, while becoming more aware of their overall development throughout this experience, they reconsidered

important elements, reflecting for instance on the importance of finding effective ways of establishing a deep connection with their audience or reevaluating the relevance of improvisation skills.

2.7 THE PERSPECTIVE OF PROFESSIONAL MUSICIANS INVOLVED IN COMMUNITY-BASED ACTIVITIES

To complete this review it is also necessary to consider the literature focusing on professional musicians acting as providers of music-based interventions. The literature in this area is currently scarce and the discussion is therefore limited to just two studies. However, despite this paucity of material, a significant number of insights can be found. Indeed, these studies invite reflection on the professional identity of musicians and on the benefits they can obtain by committing themselves to roles and contexts different from those in which they traditionally perform their profession. In this way, they provide further reasons to make participation in these activities possible during undergraduate music study.

2.7.1 THE PROFESSIONAL IDENTITY OF MUSICIANS WORKING IN HOSPITAL SETTINGS

Preti and Welch (2013) focused on professional musicians involved in healthcare settings. Through semi-structured interviews they aimed to explore the musicians' motivations and to clarify the competences they considered necessary to work in healthcare contexts. In this way, the authors attempted to shed light on the professional identity of a category of musicians which, unlike music therapists, has not yet been adequately researched. In the field of music therapy, for example, the research literature has focused on both professionals and students. From these studies it emerges that "altruism" is one of the main reasons to undertake a career in music therapy (Ben-Shem and Avi-Itzhak, 1991; Oppenheim, 1984). Moreover, themes are found related to the desire to combine a musical career with support for vulnerable people (Clark and Kranz, 1996), as well as the desire to be involved in a new and expanding profession, to combine clinical practice with music, to observe the interactions between music and patients, and to meet different generations through music (Decuir and Vega, 2010). The study of

Preti and Welch (2013) was carried out in the United Kingdom and Italy. It involved eight musicians working in healthcare settings such as hospitals, nursing homes, and palliative care homes in the UK. They were mostly engaged in providing interactive performances as well as interventions for small groups or individual patients. Nine Italian musicians working in a paediatric hospital were also recruited. They were employed long-term on a regular basis to provide musical interventions in hospital corridors, waiting rooms and at bedsides. The results suggested that the professionals involved in healthcare settings recognised a great humanitarian and moral value in this type of activity, which in some cases could also imply religious aspects. For these musicians, observing how impactful their performances can be provided a deep sense of reward.

It also emerged, from a perspective defined as “pragmatic” by the authors, that some musicians saw in this kind of activity a concrete professional opportunity that allowed them to keep their identity as musicians alive by working as performers. It is important to stress that although the interviewees were all reluctant to talk about the therapeutic value of their interventions, they nevertheless described the reactions of the recipients in terms which went far beyond mere distraction and seemed rather to relate to health dimensions. In this regard, the authors pointed out that when musicians mention, for example, “change of emotional state” and “release of emotions”, they to some extent “recognized the therapeutic potential of their musical interventions” (p. 13). From the interviews it also emerged that musicians faced the complexity and the unpredictability of their work by relying on an articulated set of competences, built combining both professional training and years of practice in the field. The authors placed these elements in relation to the criteria proposed by Hoyle (1990) to define a profession, highlighting that these musicians seemed to possess four characteristics of a professional group despite the fact that they do not describe themselves as professionals working in healthcare settings. Preti and Welch (2013) argued that:

- (i) the musicians performing in healthcare settings exhibited a high degree of musical and interpersonal skills that drew on a body of systematic knowledge, developed as part of their experience as performers in such settings; (ii) they had to undergo an initial training prior to their formal employment [...] (iii) they exhibited autonomy in their music practice and (iv) they expressed a commitment – as part of the hospital culture – to the primacy of their clients’ interests. (p. 14)

The insights provided by this study underline the importance of including an awareness of the potential of community-based activities in the culture of conservatoires. This could be extremely helpful not only to equip music students with a richer set of skills but also to support them in elaborating a stronger professional identity. The literature considered so far offers clear signs of encouragement in this sense, and the study considered at the end of this review offers further evidence of the benefits that professional musicians engaged in “traditional” careers can derive from their involvement in activities addressing “non-traditional” audiences and contexts.

2.7.2 MOVING AWAY FROM THE MUSIC STAND IN THE ORCHESTRA TO MAKE MUSIC WITH CHILDREN

The last study considered here aimed to investigate the effects of participation in community-based projects on professional musicians. Fifteen members of two orchestras (the London Philharmonic Orchestra and the London Contemporary Orchestra), aged between 26 and 57, were interviewed about their experience in working with primary school children in order “to investigate how these musicians view this type of work and its value for the profession more broadly” (Ascenso, 2016, p.4). Analysing the data using Interpretative Phenomenological Analysis (Smith and Osborn, 2008), three overarching themes were identified: identity, skills, and wellbeing. Each of these themes generated a considerable number of sub-themes; only those that seem most relevant to the present project are discussed here.

In terms of identity, it emerged that working in community settings could decrease the risks of alienation and self-centredness related to a career focusing on performance, offering musicians opportunities to give to others and to benefit new generations. Being committed to emphasising the collective components of music was important in particular for some interviewees, who considered the propensity to give to others an intrinsic component of being a musician. It also emerged that community work gave space for their self-expression and their individuality, decreasing their tendency towards perfectionism and the sense of anonymity they experience working in an orchestra. Musicians also considered outreach programmes relevant because they can facilitate the finding of new audiences and increase music appreciation, thus providing benefits in terms of employment and sustainability of the music profession. With regard to

skills, a range emerged including those related to personal, interpersonal and musical elements. Musicians reported benefits in terms of flexibility and readiness, which could be useful in responding to unexpected reactions and when performing music in difficult conditions. In terms of interpersonal skill, improvements in empathy, teamwork and communication emerged, which referred both to musicians' teaching activities and to public speaking when aiming to engage an audience. Considering musical skills, this kind of experience can provide musicians with an opportunity to consider the basic elements of instrumental technique and ways to explain it from a renewed perspective. Moreover, orchestral musicians appreciated the opportunity to find space for their own creativity by improving their improvisational skills and by elaborating novel ideas and approaches. At the same time, by working in a community setting musicians considered alternative teaching strategies, and their abilities as teachers were also improved both by working with groups of learners and by interacting with colleagues. Finally, considering the effects on wellbeing, interviewees revealed improvements in both hedonic and eudaimonic dimensions. About the former, musicians reported positive emotions such as joy, satisfaction and gratitude. In relation to the latter, the benefits experienced by recipients and the appreciation they expressed provided musicians with feelings of engagement and accomplishment. Considering the effects reported overall, it emerged that being involved in this kind of activity caused professional musicians to reconsider the power of music, both in society and in their own lives. The following quotation from Ascenso (2016) makes for a thought-provoking conclusion to the review of this study, and also to this chapter:

Throughout the accounts mentioning creativity, it stood out that there seems to be a paradox around classical music performance: it is part of a so-called creative industry and musicians see themselves as creative, however, on the other hand, it remains a business where there is little room for experimenting with novel ideas and conformity to tradition is reinforced. (p. 24)

2.8 CONCLUSIONS AND RESEARCH QUESTIONS

This chapter highlighted that when higher education music students graduate they face a very challenging labour market and that entering the profession is very difficult. In addition to achieving a high level of musical and expressive skills, they also need a

wide range of skills in which in most cases they are not formally educated. Moreover, it emerged that very often the models of success offered to students are not up to date, and in many cases there are no formal procedures or pathways into the music profession. Identifying job opportunities and knowing how to access them is therefore demanding and stressful.

This picture is further complicated by the fact that making music at high levels can involve serious risks in terms of health and wellbeing. These problems can affect both the physical and psychological spheres, and it is important to stress that the interaction between work difficulties and potentially dangerous behaviours related to musical activity can create vicious circles. This aspect is particularly relevant considering that, compared with other professionals, musicians often experience insufficient interpersonal interaction and are thus significantly exposed to isolation. However, making music at professional levels can also engender high levels of wellbeing. The creative and autonomous aspects of this kind of career can in fact be rewarding in terms of eudaimonic wellbeing, generating significant levels of positive emotions, engagement and fulfilment. The literature focusing on music students' wellbeing suggests a similar scenario, and studying music presents additional challenges to those common to most university students. Young musicians are required to demonstrate publicly that they possess considerable technical and artistic skills yet as their education is largely based on one-to-one tuition, they are particularly exposed to isolation. This can lead to and exacerbate problems of insecurity and competitiveness, which expose students to physical and psychological problems comparable to those of professional musicians, and to unhealthy behaviour in terms of socialisation, sleeping and eating. At the same time, it emerges that students also share positive aspects with professionals, and recent literature suggests that students may find some significant forms of formal and informal support in university environments.

This overall picture suggests the need for higher education music institutions to act in two essential directions. On the one hand, the academic curriculum should provide students with a wide set of competences, including musical and non-musical skills that can help them to start and maintain a musical career. On the other hand, it is important that these institutions strive to preserve students' wellbeing not only by reducing stressors and risks, but also by finding ways to maximise the positive aspects related to making musical at professional levels. To achieve these improvements three

approaches seem particularly promising. One relates to the formal training offered by music universities, and it is assumed that a greater commitment to tutoring and the implementation of specific workshops can better equip students to enter the profession. The second relates to the need to reconsider the concept of “success”, moving beyond hierarchical models that assign the highest importance to technical ability and solo performance, instead proposing models linked to the real possibilities open to musicians to pursue a fulfilling professional career. Finally, the literature suggests that by offering students an environment promoting communities of practice and lifelong learning, music universities could promote the development of self-concepts and reflexive attitudes appropriate for a career in music. The concept of lifelong learning particularly highlights the important role of experiencing diverse professional contexts in student development.

In the light of all this, it may be assumed that preparing students to be involved in community-based activities could embrace all these recommendations and represent a feasible solution to increasing students’ employability and wellbeing. This idea is supported by the reflections and suggestions offered in the research literature. It is widely believed that music colleges have a duty to be closer to their communities, strengthening their role through partnerships with local institutions. In this way, while generating mutual benefits between musical institutions and their communities, it would also be possible to reach new audiences and to engage populations that, for various reasons, do not have easy access to music. In the context of such a difficult and complex labour market, it is considered crucial for musicians to engage proactively with new audiences in any case. Consequently, it is important for music universities to make greater efforts to identify a variety of approaches and contexts, as well as to inculcate this mindset in students while equipping them with relevant skills. This also ties in with the literature suggesting that participation in community-based activities can have a meaningful impact on students’ professional identity and positive effects on their health and wellbeing.

Initiatives of this kind are becoming increasingly widespread, but the research focusing on students involved in community-based activity is still at an early stage. The available literature, however, is diversified and addresses a wide range of recipients of music-based interventions, including refugees, post-surgery hospital patients, older adults, communities living in rural areas, drug addicts and patients with psychotic

diseases. Each of these studies shows encouraging results. Involvement in these activities offers music students numerous learning opportunities, which can increase their repertoire and improve their improvisation and teaching skills. Moreover, these experiences facilitate interprofessional encounters and the acquisition of skills considered indispensable in terms of employability, such as reflexivity, responsibility, flexibility and cooperation. At the same time, being involved in community-based settings invites students to reconsider the role of art and the artist in society, stimulating feelings of empathy, compassion and self-compassion while decreasing anxiety and perfectionism. A particularly significant aspect is that being exposed to unfamiliar environments, playing new roles and interacting with new audiences and colleagues, even if only for a short time, can have lasting effects, leading students to discover new possibilities and perspectives and to question preconceptions and old assumptions.

These results represent strong reasons for offering music students opportunities for experiences in community contexts and for including related training in their curricula. This idea is also reinforced when considering the effects these experiences have been found to have on professional musicians. It emerged in this section that musicians working on a regular basis in hospital settings, while possessing considerable professional experience, may not have a clear professional identity.

It is therefore important to prepare young musicians to these practices during their university years, not only to make them aware of the professional opportunities related to this particular setting but also to stimulate their reflections on the impact that high-level musical skills can have in particular contexts and to invite them to reflect on other possible forms of “success”. Moreover, it emerged that established orchestral musicians can derive significant benefits in personal, interpersonal and professional dimensions by engaging in music-making programmes in non-traditional contexts.

On the basis of what has been discussed in this chapter, the aim of this thesis is to investigate how higher education music students experience their participation in group music making with residents in nursing homes and what effects they perceive in terms of health and wellbeing. Moreover, in order to identify ways to prepare adequately students to act as music facilitators in nursing homes, this thesis aims to clarify the shortcomings perceived by students in terms of training received.

Therefore, the following research questions are addressed:

RQ5: How do higher education music students experience group music making activities in nursing homes?

RQ6: What effects on their health, wellbeing and career preparation do they perceive as a result of doing these activities?

RQ7: In what situations and performing what tasks did the students involved in these activities perceive their preparation as insufficient?

RQ8: What changes to their preparation could make the training offered to students more comprehensive?

Investigating the encounter of developing musicians with residents in nursing home is important because, as discussed in the previous chapter, older adults represent an important portion of the population and they can receive important benefits from their engagement with music. The present study aims to pay particular attention to the impact of this type of activity on the health and wellbeing of students, an element whose relevance is indisputable but which has not been specifically considered by previous studies. At the same time, this work aims to explore if and to what extent doing this experience by taking part in an elective university seminar impacts their expectations about a musical career. Chapter 7 aims to investigate these points by addressing RQ5 and RQ6. Moreover, by addressing RQ7 and RQ8, Chapter 8 considers the students' perceived shortcomings related to their preparation. In this way, it is expected that this project will offer a contribution to consolidating this type of activity in ways that will maximise the benefits for both providers and recipients.

CHAPTER 3

HEALTH AND WELLBEING: THE THEORETICAL PERSPECTIVES CONSIDERED IN THIS STUDY**INTRODUCTION**

The first two chapters of this thesis aimed to review the literature discussing relevant points related to the two populations involved in this investigation. With regard to the older population, Chapter 1 highlighted the strong growth of this population globally and that engagement with music can offer a wide range of benefits to older adults in terms of health and wellbeing. Thus, it was emphasised the potential of music and the need for further research in this regard in order to reduce ageing-related problems and to enhance the resources of older people through effective music-based interventions. Crucially, it was also argued out that research focusing on the perspectives of residents in nursing homes engaged in group music making is still at an early stage.

Chapter 2, on the other hand, highlighted a number of typical stressors among higher education music students and professionals. In particular, it emerged that the transition to the profession can be difficult and that young musicians may also encounter significant obstacles during their music studies. Both professionals and students are exposed to a number of stressors that can compromise their health and wellbeing, not only physically but also psychologically. However, from the literature review, some indications of how to facilitate the transition in and sustainability of the music profession emerged, and in this sense, the development of community-based activities by conservatoires is considered by many scholars as a key point.

On this basis, the present thesis includes in its aims the investigation of the effects of group music making in nursing homes on the health and wellbeing of the residents and the higher education music students involved. This objective made it necessary to define the concept of health and wellbeing and to elaborate a theoretical framework to address the related research questions. This thesis is situated in the field of positive psychology and the paradigms on which it is based are basically three.

In the first section, the definition of mental health on which this thesis is based is clarified. Section 3.2 offers a brief description of the PERMA model. Section 3.3 articulates the choice of this model as a lens to interpret the data collected, both in terms of the perceived effects on nursing home residents and on the music students involved, in order to define the concept of wellbeing in the context of this thesis. Finally, the notion of mutual recovery (Crawford et al., 2013) is considered as useful for obtaining a deeper understanding of the impact of the encounter with residents on students' health and wellbeing, and it is used in combination with the PERMA model to address the research questions related to higher education music students. Section 3.4 thus describes the principles of mutual recovery and illustrates why this approach is considered relevant in the context of the present project.

3.1 THE COMPLETE STATE OF MENTAL HEALTH

In 2005, Keyes proposed a model of mental health that went beyond “the untested assumption that measures of mental illness and health form a single bipolar dimension” and “where health and illness are correlated unipolar dimensions that, together, form a complete state of (mental) health” (Keyes, 2005, p. 539). This echoed previous ideas that health should be assessed considering not only the absence of disease but also the presence of positive indicators (Ryff and Singer, 1998; Seligman, 2008; Sigerist, 1941; WHO, 1948). Moving from the idea that mental health can be defined as “a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with people, and the ability to adapt to change and to cope with adversity” (U.S. Public Health Service, 1999, p. 4), Keyes stated that mental health and mental illness “are not opposite ends of a single continuum [...] Thus, the absence of mental illness does not equal the presence of mental health” (2005, p. 546). The complete model of mental health proposed by Keyes includes both hedonic and eudaimonic elements, and it is based on three dimensions: emotional wellbeing, psychological wellbeing, and social wellbeing (Keyes, 2002). Briefly, the hedonic perspective is linked to experiences or acquirement of pleasure and avoidance of pain, and it refers to pleasant feelings and states. Conversely, the eudaimonic perspective relates to purposes in life, self-realisation and actions that go beyond individual pleasure (Ryan and Deci, 2001).

3.2 THE PERMA MODEL

In past years several scholars have proposed theoretical models combining hedonic and eudaimonic dimensions (Disabato et al., 2016; Keyes et al., 2002; Samman, 2007). In 2002 Seligman presented his theory of authentic happiness, which in turn combines hedonism and eudaimonia. According to the author, happiness is a positive psychological state based on three building blocks: pleasure, meaning and engagement. Briefly, the first refers to the tendency to pursue positive emotions avoiding the negative; the second refers to the sense of being connected to something transcending the self; the third refers to experiences and activities that are absorbing in rewarding ways (Seligman, 2002). These three are independent of one another, can be addressed simultaneously and are linked to life satisfaction (Peterson and Seligman, 2004). A few years later, Seligman (2011) extended his theory integrating the three building blocks with two further dimensions, referring to positive relationships and accomplishment. This led to the definition of the PERMA model, which comprises five “pillars” (Seligman, 2011, p. 24): Positive emotion, Engagement, Relationships, Meaning and Achievement. According to Seligman (2011), each element of the PERMA

must itself have three properties to count as an element: (1) it contributes to wellbeing; (2) it is pursued for its own sake, not merely to get any of the other elements; and (3) it is defined and measured independently from the other elements. (p. 16)

According to Seligman, the *positive emotion* dimension is linked to happiness and life satisfaction and involves aspects related to the idea of a “pleasant life” such as “pleasure, rapture, ecstasy, warmth, comfort and the like” (p.17). Ascenso and colleagues (2018) pointed out that the importance of these aspects in terms of physical, psychological and cognitive health has been widely highlighted in the literature (Lyubomirsky et al., 2005; Howell et al., 2007; Huppert, 2009). The dimension of *engagement* “is about flow: being one with the music, time stopping, and the loss of self-consciousness during an absorbing activity” and presupposes the involvement of “all the cognitive and emotional resources that make up thought and feeling” (Seligman, 2011, p. 11). It is thus related to the deep involvement in a particular “activity, organization or cause” (Ascenso et al., 2018, p.4). Unlike the *positive emotion* dimension, which refers to the present, this dimension can only be estimated retrospectively, and the concept of flow (Csikszentmihalyi, 1991) plays a central role in the engagement dimension. The third

dimension of the PERMA model, *relationships*, relates to the quantity and quality of social bonds and connections, and includes the sense of being loved and valued (Ascenso et al., 2018; Cromm, 2015; Seligman, 2011). Again, a substantial body of literature highlights the role of this dimension in terms of physical and psychological health, also showing benefits in terms of mortality, healthy habits and decreases of suicidal tendencies (Taylor, 2011; Tay et al., 2013).

Unlike *positive emotion* and *engagement*, which have a strong hedonic connotation, the PERMA dimension of *meaning* is linked to the eudaimonic dimension and implies belonging or serving something bigger than one's self and transcending the egocentric dimensions. According to Ascenso and colleagues (2018) *meaning* provides a sense that one's life matters, and it has been associated with better physical health, reduced mortality risk, and higher life satisfaction (Boyle et al., 2009; Ryff et al., 2004; Steger, 2012).

The fifth dimension, *accomplishment* (or *achievement*), can be related both to external indicators and internal goals and the achieved result "does not have to appear significant to the outside world, as long as it is intrinsically meaningful to the individual" (Ascenso et al., 2017, p. 68). It is related to a sense of achievement, mastery, competence and success and "is often pursued for its own sake, even when it brings no positive emotion, no meaning, and nothing in the way of positive relationships" (Seligman, 2011, p. 18).

Since its introduction, PERMA model has been the subject both of further development and of criticism. For instance, several scales were developed to measure the PERMA-related dimensions. Huppert and So (2013) added to the five dimensions of this model emotional stability, optimism, resilience, self-esteem, and vitality, while Su and colleagues (2014) developed the 54-item Comprehensive Inventory of Thriving including the PERMA dimensions along with other domains linked to wellbeing. In 2016, Butler and Kern developed the PERMA profiler, a scale consisting of 23 item "designed to be multidimensional in nature" and able to detect "potentially meaningful variation amongst the domains" (Butler and Kern, 2016, p. 22). At the same time, studies published after the procedure and methodology of this thesis was defined expressed criticism of PERMA. According to Donaldson and colleagues (2022, p. 3) the PERMA model "lacks the capacity to explain the organization of complex phenomena" and is "too narrow and specific in focus"; Wong and Roy (2017, p. 142) argue that Seligman developed "not

a formal theory, but rather a listing of the phenomena related to wellbeing” (Wong and Roy, 2017, p. 142); Goodman and colleagues (2017) consider PERMA redundant as in their view it focuses on the same type of wellbeing measurable with the Subjective Well Being model proposed by Diener in 1984. The position of Seligman towards some of these criticisms is clear. For instance, he stated that PERMA should be considered not as a theory but rather as a framework useful to develop wellbeing (2011), while in a paper published in 2018 he defended his model against the criticism of Goodman and colleagues. Besides these criticisms, this model is considered useful and relevant by many scholars, and according to Farmer and Cotter (2022) “PERMA offers a multi-dimensional operationalized definition of well-being that helps someone involved in an activity move beyond a success/fail evaluation” and can be useful to evaluate “relative strengths and weaknesses of an activity’s effects on the different key well-being dimensions” (p.4). In fact, in recent years the PERMA model has been widely used, included in studies focusing on diverse fields related to wellbeing, such as cooking (Farmer and Cotter, 2022), soccer (Friedrich and Mason, 2018), aging processes (Bartholomaeus et al., 2019), nursing interventions and intergenerational arts and health interventions (Chen et al., 2022; Jenkins et al., 2021; Wang and Li, 2022), work-related wellbeing (Donaldson et al., 2022; Ho and Chan, 2022; Yang et al., 2021; 2022), higher education (Barker et al., 2021), and interventions addressing depression and burnout (Gander et al., 2016; Slater et al., 2018), and the impact of Covid-19 (Carreno et al., 2021; Cohen and Ginsborg, 2021; Wasowicz et al., 2021).

The next section discusses how PERMA has been used in the field of music and wellbeing and illustrates the reasons why it was employed in this thesis.

3.3 USE OF THE PERMA MODEL IN THE FIELD OF MUSIC AND ITS RELEVANCE FOR THE PRESENT RESEARCH

Cromm (2015) highlighted that the PERMA model is not widely used in the field of music and wellbeing, and on the basis of a literature review, he pointed out a number of links between the five dimensions described above and the results of previous studies that had not specifically used the PERMA model. It emerged from studies focusing on music and emotions (Juslin, 2013; Koelsch, 2010; Krueger, 2014; van Goethem and Sloboda, 2011), music therapy interventions (DeMarco et al., 2012; Hwang and

Oh, 2013), everyday uses of music (Laukka, 2007) and music listening (Sergeant and Mongrain, 2011) that music can play a significant role in terms of *positive emotions*; that the *engagement* with music can play a crucial role in improving wellbeing (Bakker, 2005; De Manzano et al., 2010; Hymer, 1984; Pates et al., 2003); that both making music and attending festivals and concerts can promote *relationships* (Ballantyne et al., 2014; Koelsch, 2010; Packer and Ballantyne, 2011); that music can foster a sense of *meaningfulness* in many dimensions (DeNora, 2000; Frith, 1996; Hays, 2005; Hays and Minichiello, 2005; Karlsen and Brandstrom, 2008; Lamont, 2011; Packer and Ballantyne, 2011; Sirgy and Wu, 2011); and that choral singing in high school, music therapy interventions and occupational therapy interventions involving music can provide or support a sense of *achievement* (Cromm, 2012; Edgerton, 1994; Hiscock et al., 2013; Hylton, 1981; Klaphajone et al., 2013; Lee and Nantais, 1996).

The PERMA model thus appears to be a relevant lens through which to assess the potential of music for affecting wellbeing, but the fact that it has not yet found widespread use in music research is also demonstrated by the literature review carried out for this thesis. As shown in Chapter 1 and Chapter 2, only one study focusing on older adults (Lamont et al., 2017) and two studies dedicated to professional musicians (Ascenso et al., 2017; Ascenso et al., 2018) were specifically guided by this model. However, these studies offer some important insights: Lamont and colleagues, focusing on a population aged 52-82, used the PERMA model as “an analytic guide to interpret participants’ experiences of the benefits of singing in a choir” (Lamont et al., 2017, p. 3). By using it, the authors were able to detect that interpersonal relationships and a sense of achievement can be significantly enhanced through a prolonged involvement in the choir and that the opportunity to take responsibilities can be valuable for the participants. Regarding musicians, a qualitative study mentioned in Chapter 2 involved six professionals and, through the lens of PERMA, focused on the “rich subjective meanings and complexity that experiencing wellbeing as a professional musician may imply” (Ascenso et al., 2017, p. 68). A more recent survey study (Ascenso et al., 2018), measured the five dimensions of the PERMA model for 601 professional musicians using the PERMA-Profiler (Butler and Kern, 2016). Considering the lack of a general consensus regarding the definition of wellbeing and the propensity of the literature to focus on problematic aspects such as performance anxiety and performance-related injuries, the authors underlined the necessity “to re-examine musicians’ wellbeing through a new lens, focusing on positive elements and incorporating wellbeing’s multidimensionality”

(Ascenso et al., 2018, p.4). By using the PERMA model, these studies have offered new perspectives in the context of a body of literature mainly focused on problems around musicians' health and wellbeing, and they shed light on encouraging aspects that it are important to investigate further.

Besides these considerations and the benefits highlighted by the study by Lamont and colleagues (2017), the PERMA model seems particularly suitable for investigating the effects of music on the wellbeing of older people. The literature devoted to the benefits offered by the engagement with music and with other art forms to older adults is rich and describes a wide range of positive effects. However, within this literature there remains a lack of conceptually clear and fully agreed definitions of the concepts of health, wellbeing and quality of life. One of the reasons for this may be the complexity of the reported positive effects of the arts on health and wellbeing. This is summarised by the report commissioned by the WHO in 2019, which, as already cited in Chapter 1, underlines the uniqueness of arts-based health interventions to “operate simultaneously on the individual and social, as well as physical and mental, levels” and their consequent ability “to address the full complexity of the challenges that being healthy and well are increasingly recognised to present” (Fancourt and Finn, 2019, p. 6). A similar point was made in another literature review published around twenty years earlier which focused on the contribution of music to positive ageing (Hays et al., 2002). The authors, commenting on what emerged from a number of studies (Clair, 1996; Merritt, 1990; Ortiz, 1997; Rider, 1987) stressed that “One of the most important benefits of music on personal health is that it simultaneously affects the biomedical and psychosocial aspects of treatment” (Hays et al., 2002, p. 167). A further study focusing on the literature on the benefits of music participation for older people (Lehmberg and Fung, 2010), offered even more explicit reflections on this complexity, the authors pointing out that “at times, it is difficult to clearly divide physical benefits and psychological benefits because one type of benefit is often attached to the other” (p. 21). They go on to state:

In the areas explored in this review (physical, psychological, and social), it is apparent that not only do benefits exist for senior citizens in each area, but also that numerous benefits exist in each area. These benefits can be placed on a continuum from being merely an enhancement of life (fun, enjoyable), to serving as a medium through which senior citizens construct and maintain self-identity and coherence in life, and to “keep life going”. Secondly, the benefits of music participation for senior citizens are compounded

by interaction with each other and length of participation. As was stated earlier, many benefits apply to more than one of the areas examined in this review. For example, the benefit “lessens stress” can be considered to be both a physical and psychological benefit. The benefit “provides sense of community and belonging” falls under both the categories of psychological and social benefits. Benefits that apply to more than one area or several areas could be considered to be heightened or magnified benefits, because they overlap or triangulate to positively affect the overall well-being of senior citizens. (p.26)

In order to inform the theoretical perspectives and the methodology of the present project, the literature discussed in Chapter 1 was also considered with regard to the paradigms used to define the concept of wellbeing and the findings related to the benefits associated with music. Clift and Hancox (2010) highlighted that “shortcomings in the literature are the lack of a common understanding of wellbeing and health, and the absence of a theoretical model of the causal mechanisms linking singing with wellbeing” (p. 76). They used a mixed methods approach combining a battery of questionnaires with participants’ written accounts addressing open questions. The authors found from the analysis of these accounts “six ‘generative mechanisms’ by which singing may impact on wellbeing and health: positive affect; focused attention; deep breathing; social support; cognitive stimulation and regular commitment” (Clift and Hancox, 2010, p. 76). In fact, most of these themes could be linked to some dimensions of the PERMA model. “Positive affect” may be related to *positive emotion*, “focused attention” and “regular commitment” to *engagement* and “social support” to *relationships*.

A similar method based on questionnaires and self-report measures was employed in another study investigating the effects of choral singing on older adults (Cohen et al., 2006). In this case the theoretical background was based on “two major bodies of gerontological research: (a) sense of control and (b) social engagement” (p. 727). Cohen and colleagues justified this choice on the basis of literature suggesting that sense of control and mastery (Rodin, 1986, 1989) and meaningful interactions with others (Avlund et al., 1998; Glass et al., 1999) can offer health benefits. This approach can be related to the *achievement* and *relationship* dimensions included in the PERMA model. Crucially, in defining the theoretical background of their study Cohen and colleagues (2006) also seemed to consider, at least to some extent, the dimensions of *positive emotion*, *engagement* and *meaningfulness* when they stated:

Because all of the art programs involved participation and interpersonal interaction with others, social engagement was enhanced. The significance of the art programs is that they foster sustained involvement because of their beauty and productivity. They keep the participants involved week after week, compounding the positive effects being achieved. Many general activities do not have this highly engaging and sustaining quality. (p. 727)

A further theoretical approach can be found in the project *Music for life*, which investigated the effects of different types of engagement with music on older people using a mixed methods approach (Creech et al., 2013, 2014). In the context of this project, the authors highlighted the need to identify theoretical frameworks that could adequately capture changes due to longer life expectancy and differences between the third and fourth age (Higgs et al., 2003; Hodge, 1990). After pointing out that wellbeing is a multidimensional concept and is significantly determined by subjective elements, Creech and colleagues clarified that they had used “a needs satisfaction approach perspective” in which “quality of life and subjective wellbeing are thought to reflect the extent to which basic human needs are perceived to be met by the individual” (Creech et al., 2014, p. 7-8). On the basis of previous studies (Doyal and Gough, 1991; Gallacher et al., 2012; Lang and Heckhausen, 2001), Creech and colleagues (2014) stressed the importance in this theoretical framework of “autonomy and social participation”, “positive affect and personal control beliefs” (p. 8) and also the importance of self-esteem in improving resilience. The results of this project, already summarised in Chapter 1 section 1.11.2, indicated “a range of perceived benefits of active musical engagement including those related to social activity, cognition, emotional and mental health and physical health” (Creech et al., 2013, p.96). Once again, it seems that the benefits resulting from engagement with music could be interpreted in terms of the dimensions of the PERMA model, in particular with regard to *positive emotions, relationships, and engagement*.

The studies reported so far have used methodologies combining quantitative and qualitative approaches. Hays and Minichiello’s (2005) study was based entirely on qualitative data and focused on the use of music in the widest possible sense, not only the effects of music making programmes but also the effects of listening to music or of taking part regularly in musical practices. The theoretical framework used by the authors to analyse the interviews and focus group sessions “is based on the self as an acting agent capable of using symbols to help define his or her experiences” (Hays and Minichiello,

2005, p. 440). Although the focus of their research is not strictly related to health and wellbeing, themes related to these dimensions emerged significantly, and Hays (2005) summarises the results of this study by stating:

The results reveal that some older people use music in many different ways and that music for them can be a way of measuring and maintaining a sense of well-being. Music can provide people with alternative solutions to everyday problems of stress, maintaining physical and cognitive functioning, finding ways to continue to contribute to society, and feeling less isolated. Being engaged in music activities can help a person to connect with their life experiences, other people and to be more stimulated. (p. 31)

It seems reasonable, therefore, to assume on the basis of the results of this study that music can offer older people a way to enhance all dimensions of the PERMA model.

A more recent study focusing on individual music lessons (Perkins and Williamon, 2014) also shows results related to the dimensions of PERMA. This study was part of the *Rhythm for Life* project, a programme already discussed in Chapter 1 and Chapter 2 and carefully considered in the design of this project. This study explored the “links between older adulthood, wellbeing, lifelong learning and music, positing that learning to make music has important implications for healthy ageing” (Perkins and Williamon, 2014, p. 550). In line with previous literature (Murcia et al., 2010; WHO, 1948), health in this study was defined as a state that goes beyond the mere absence of disease. The authors were also inspired by the concept of *healthy ageing* defined as “the process of optimising opportunities for physical, social and mental health to enable older people to take an active part in society without discrimination and to enjoy an independent and good quality of life” (Swedish National Institute of Public Health, 2007, p. 200). With regards to wellbeing, the authors started from the idea that it can be defined as “optimal psychological functioning and experience” (Ryan and Deci, 2001, p. 142) then further defined it as “a subjective phenomenon, which reflects how people think about, feel about and generally assess their lives” (Perkins and Williamon, 2014, p. 551). The authors collected two kinds of data, the first from a battery of questionnaires and the second from semi-structured interviews. The analysis of the latter was conducted with an approach inspired by Interpretative Phenomenological Analysis (Smith and Osborn, 2008) in order to clarify “the mechanisms underlying music’s potential impact on older adults, exploring the phenomenon of wellbeing as it is experienced by learners” (Perkins

and Williamon, 2014, p. 563). In this way, the authors identified the following themes: “musically-nuanced engagement in day-to-day life, enhanced social interactions through music, a fulfilment of musical ambition and desire, the ability to produce and make music and self-satisfaction through musical progress” (Perkins and Williamon, 2014, p. 563). The results of this study, therefore, are also aligned with the dimensions of the PERMA model in terms of *engagement*, *relationships* and *achievement*.

On this basis, the PERMA model was considered to offer the possibility of a deep understanding of the perceived effects of group music making on the wellbeing of residents in nursing homes. As discussed earlier, the PERMA model has also shown promise in the investigation of the wellbeing of musicians, and thus was considered suitable for the study on the higher education music students involved in this thesis. However, to better understand the students’ overall experience as providers of music-based interventions in nursing homes, and to explore their encounter with residents more deeply, the theoretical framework of this thesis also included the paradigm of mutual recovery, which will be discussed in the next section.

3.4 MUTUAL RECOVERY AND ITS RELEVANCE FOR THE PRESENT RESEARCH

The concept of “mutual recovery” was introduced by Crawford and colleagues (2013) and is defined as “the potential for creative art therapies to positively contribute to the well-being of not only the client, but also the mental health caregiver” (Callahan et al., 2017, p.3). In this context, recovery is defined as “the possibility of achieving a meaningful and more resilient life irrespective of mental health ‘symptoms’ or ‘disabilities’” (Crawford et al. 2013, p.55). The idea of mutual recovery arose from the context of the mental health and aims to overcome the widespread view that considers the “patient” and the “carer” as two distinct individuals belonging to different categories, where the former is not seen as “anything other than recipient of professional care” and the latter simply as “solution provider” (Crawford et al., 2015, p. 138-139). Mutual recovery proposes a radically different vision of these two figures and of the possible interactions between them. In fact, it stresses the need to reconsider the figure of the patient, recognising and enhancing the potential that he or she can offer in terms of social and cultural capital. At the same time, mutual recovery aims not to underestimate the stress, burnout and

mental illnesses that could afflict carers, and their consequent need also to recover. From these assumptions, Crawford and colleagues (2013) hypothesised that including creative practices in care contexts might prove to be

a powerful tool for bringing together a range of social actors and communities of practice in the field of mental health, encompassing a diversity of people with mental health needs, informal carers and health, social care and education personnel, to establish and connect communities in a mutual or reciprocal fashion to enhance mental health and well-being. (p. 55)

In this way, social and cultural connections could be created or strengthened for the benefit of all actors involved in the care process, including those outside the patient-carer dyad. In particular, in terms of social connections, “trust, networks and relationships” could be favoured “while cultural connections include shared understandings, experiences and ideas - or learning. The connections achieved in these ‘compassionate spaces’ may then provide a springboard into other collective or ‘community oriented’ activities” (p. 59).

The context of the present project is clearly very different from the mental health context, and it has significantly different characteristics to those from which the notion of mutual recovery originates. In the context of nursing homes, it is improper to speak of “patients”, just as it is improper to consider the students involved to be “carers,” and the “creative practices” carried out for the studies reported in this thesis were based exclusively on group music making. Despite these important differences, the concept of mutual recovery seems nevertheless to be relevant to the present study.

Crawford and colleagues (2013) suggest in fact the possibility of considering the potential of creative practices in terms of mutual recovery in other professional contexts. As was discussed in Chapter 1 sections 1.2.2, 1.3.1 and 1.6, good levels of resilience are crucial in coping with ageing, and in light of the processes of change associated with this phase of life and with moving into nursing homes in particular, it is imperative to consider properly the human and social capital of residents. At the same time, in Chapter 2 sections 2.2 and 2.3 the stressors that can afflict musicians and higher education music students were discussed on the basis of a wide literature, highlighting how the mental health and wellbeing of these populations is often compromised. Positive aspects of

the music profession were also discussed as well as the encouraging results related to musicians' participation in community-based activities. Consequently, it seems appropriate to explore the impact of music-based interventions in this context in terms of mutual recovery.

The literature offers only two studies using mutual recovery as a lens to investigate the effects of group music making (Callahan et al., 2017; Perkins et al., 2016). Both studies focused on the field of mental health and addressed recipients significantly younger than those involved in this thesis. There is also only one research programme in the literature that has investigated both recipients' and providers' perspectives (Perkins and Williamon, 2014), but the older adults involved were community-dwelling and, crucially, mutual recovery was not used. On this basis, and considering that mutual recovery "instigates a more fully social and deeper understanding of mental health recovery processes, encompasses diverse actors in the field of mental health and attends to the need to track signs of well-being and improvement across this field" (Crawford et al., 2013, p. 57), including this paradigm in a study focusing on group music making in nursing homes can allow a deeper understanding of the impact of this activity.

3.5 CONCLUSIONS

This chapter discussed theoretical perspectives related to health and wellbeing used in this thesis. In doing so, it has been made clear that this study is based on the well-established idea that the concept of health implies a state that goes beyond the absence of disease and dysfunction. Within the framework of positive psychology and inspired by the complete model of mental health (Keyes, 2005), the research questions were investigated by focusing on positive indicators. In order to assess the impact of the group music making experience on the participants, the PERMA model (Seligman, 2011) was used as a lens for the resident and student data to be reported in later chapters. This model was chosen based on the study of the literature devoted to the effects of music on these two populations. Although the population of nursing home residents is still under researched, it was pointed out that numerous studies focusing on music and older adults have used theoretical frameworks or interpreted their results in ways which could be related to the component dimensions of the PERMA model. In order to understand better the dynamics following the encounter between residents and students, the

investigation carried out in this thesis has also been based on the concept of mutual recovery (Crawford et al., 2013) in order to observe whether the encounter between the two groups and the interactions that took place in the context of group music making resulted in mutual benefits.

CHAPTER 4

METHODOLOGY**INTRODUCTION**

This chapter provides an overview of the research questions which includes a consideration of some of their implications and the potential complexities of the investigation. Following this, sections 3.2 and 3.3 are devoted to epistemology and the chosen research approach. The musical programmes carried out in the nursing homes involved are then described, clarifying in particular the format of the sessions, the musical contents and the role of the students. Section 3.5 focuses on the design of the whole thesis, which consists of four separate studies. In sections 3.6.1 and 3.6.2 the choices related to data collection are described and discussed on the basis of the existing research literature, while section 3.6.3 focuses on the approach adopted for data analysis. The chapter ends discussing the strategies used to ensure the validity of the results.

4.1 OVERVIEW OF RESEARCH QUESTIONS

As discussed in previous chapters, the aims of this thesis are to investigate how residents in nursing homes and higher education music students experienced their group music making and what effects they perceived on their health and wellbeing. Since this thesis examines the perspectives of two groups of participants about the same activity, it was considered appropriate to collect data in a way which allowed a comparison of the experiences and perceived effects of the members of both groups. This made it necessary to identify a methodological approach capable of investigating a series of sub-questions, which can be summarised in the following points:

1. To understand the extent to which the encounter and interactions between the two groups influenced the experience of each participant and the impact perceived by each. In other words, data were collected with the aim of considering the role played by the presence of the students in the experience of the residents and vice versa.

2. To understand the extent to which the presence of peers influenced the individual experience. The investigation therefore aimed to clarify whether it was meaningful for each student to have this experience with other students and whether it was meaningful for each resident to have this experience with other residents.
3. To assess the overall relevance of this type of music-based intervention on the basis of two distinct perspectives. One is concerned with understanding the relevance of the programme from the perspective of those who actually took part in it, the other is intended to assess the relevance of the programme in relation to paradigms and theoretical frameworks related to the health and wellbeing of older adults and musicians (see Chapter 3).
4. To identify approaches and contents that can make this kind of music intervention more effective in terms of perceived benefits, aiming to understand the reasons for appreciation and/or dissatisfaction of the residents and the students involved.

Although residents and students were involved in the same programme, it is reasonable to assume that the starting point and the role of each member of each group were so different that the two groups were confronted with two substantially different phenomena. This statement is based on the following assumptions:

- The programmes took place in an environment where residents live and where the students were entering for the first time.
- The focus of the activity, i.e. group music making, is an area in which it is reasonable to assume a high level of mastery and interest on the part of the students but not on the part of the residents. Rather, a great heterogeneity of interest and musical background can be expected from the latter.
- The residents involved voluntarily chose to participate in an activity designed to provide entertainment, while the students voluntarily chose to participate in a higher education music seminar. For this reason, it seems reasonable to assume significantly different expectations in terms of learning and enjoyment between the two groups.
- In principle, i.e. without considering a priori the complexity and variability over time of the possible relationships between the people involved, residents and students played two clearly distinct roles in the programme: recipients for the former and providers for the latter.

This thesis did not include a systematic comparison between residents and students. Nonetheless, an attempt was made to determine a methodological approach that

would make it possible, albeit with the limitations discussed in Chapter 9 section 9.2, to compare the experiences and perceived effects for the two groups. On this basis, the present project used a qualitative approach based on the epistemology of social constructionism.

4.2 SOCIAL CONSTRUCTIONISM

Social constructionism assumes that “Everyday life presents itself as a reality interpreted by men and subjectively meaningful to them as a coherent world” (Berger and Luckmann, 1966, p. 33). Although it is possible for individual consciousness to move through different “spheres of reality”, thus making the world composed of a set of “multiple realities” (p.35), the reality we experience in everyday life is a social construct, shared with other members of our community and defined through interactions with them. Subjective perceptions play a decisive role in defining reality and its meanings, but it is precisely through social interactions and the sharing and comparison of these subjective experiences that we arrive at the definition of “an intersubjective world” and a “common-sense knowledge”, which is shared with others “in the normal, self-evident routines of everyday life” (Berger and Luckmann, 1966, p. 37). Gergen (1973) argues that it is impossible to describe people and society in a definitive way, since knowledge is determined by the social and historical context, and therefore it is constantly evolving. In this way, social constructionism distances itself from positivism. In fact, it does not recognise the possibility that researchers can detach themselves from their own background and their own representation of reality, since it questions the possibility of observing phenomena without bias and some degree of personal involvement. The possibility of achieving objectivity through experimental methods is thus denied. At the same time, since reality is subjectively constructed through social relations, social constructionism distances itself from realism, which assumes the existence of an external world that exists independently of our representations of it and can be described unambiguously and objectively. According to Burr (2019), social constructionism is rather in the area of relativism, and it assumes that

all knowledge is derived from looking at the world from some perspective or other and is in the service of some interests rather than others. This means that there can never be objective facts, things that are simply true for all people regardless of their time and place.

Relativism, in contrast to realism, argues that the only things we have access to are our various perceptions and representations of the world, and these cannot be judged against some assumed reality for their truthfulness or accuracy. Relativists, therefore, cannot prefer one account to another on the basis of its apparent truthfulness. (p. 125)

In describing the epistemological approaches of social constructionists, Burr (2019) also clarified that:

The taken-for-granted topics of mainstream psychology and social psychology, such as attitudes, motivation, personality, and emotion, were brought into question as structural features of the human psyche and instead seen as social constructions achieved through social interaction and language. (p. 118)

Language, that in line with the ideas of Mead (1934) can be considered “as a system of socially shared symbolic meanings” (Burr 2019, p.119), plays a key role in social constructionism. It is seen as the main element of communication, and therefore of the sharing of experiences and meanings, between members of society. For this reason, language plays a key role in the definition of reality. According to Berger and Luckmann (1966) it “originates in and has its primary reference to everyday life; it refers above all to the reality I experience in wide-awake consciousness” and provides “a ready-made possibility for the ongoing objectification of my unfolding experience” (p. 53). Burr (2019) highlighted that the role attributed to language distinguishes social constructionism from “mainstream psychology” as it focuses on

how and why people become constructed in the way that they do, whether through our active discourse with each other, through the small-scale linguistic turns of individual social interactions, or through the myriad linguistic and symbolic representations or “discourses” that abound in our cultural life. (p. 124)

In social constructionism then, knowledge is generated taking into account the “social process of meaning making, including individual perspectives, within its wider social context” (Williamson et al., 2021, p.18). This epistemology is thus considered appropriate to investigate such a complex activity as group music making involving two populations that are likely to be very different: residents in nursing homes and higher education music students. In fact, this epistemological approach focuses on the complexity of the

relationships between individuals and their social world. The researcher thus assumes an active role and, through a bottom-up approach, focuses on “interpreting the data to draw conclusions that aim to represent and do justice to the richness” of the experience of participants by mediating “knowledge with and through the participants, presenting conclusions that were true to those involved and that represented their account of a particular social reality” (Williamon et al., 2021, p. 19).

On the basis of the characteristics of language just discussed and considering that “social interaction and language are of great interest to social constructionists, since it is in the course of these practices that our shared versions of knowledge are constructed” (Burr, 2019, p. 122), the research questions of the present study were addressed using semi-structured interviews and oral diaries. The methodological approach employed was therefore qualitative and was based on thematic analysis.

4.3 QUALITATIVE RESEARCH

According to Williamon and colleagues, “qualitative approaches enable researchers to see the world from the participant’s point of view and therefore rely on techniques that capture the nuances and individuality of their experiences” (Williamon et al., 2021, p.32). Qualitative approaches can thus be appropriate when the focus is on the meanings constructed by individuals (Denzin and Lincoln, 2018; Hesse-Biber, 2017; Taylor et al., 2016) and when the researcher aims to understand “how people make sense of their world and the experiences they have in the world” (Merriam and Tisdell, 2016, p. 15). According to Rossman and Rallis (2017) qualitative research is based on the philosophical tradition of empiricism, as it presupposes that knowledge can be obtained by experiencing the world through the physical senses. Gubrium (1992) stressed that qualitative research should be considered as distinct from quantitative research as it “systematically and carefully attends to the organization of meaning in its various guises and venues, in relation to meaning’s manifold contingencies” (p. 581). Qualitative research is normally inductive (Liamputtong, 2019) but it is possible to endorse a preliminary conceptual framework, which can then be modified and adjusted by the researcher in the course of the investigation (Rossman and Rallis, 2017). In this way, researchers can “develop a general conceptual understanding of the issue they examine” (Liamputtong, 2019, p. 15). The adaptable design and the inductive, bottom-up approach

are features also acknowledged by Williamon and colleagues (2021), who additionally point out that qualitative research generally focuses on idiosyncratic experiences and real-life contexts by collecting detailed descriptions from participants. On the basis of the research questions addressed in this thesis and the epistemology used, the qualitative approach is considered the most suitable. This choice is also based on the importance that this approach has gained in recent years in research fields relevant to residents in nursing homes. According to Liamputtong (2019), “qualitative data or interpretive information has been gradually accepted as a crucial component in our understanding of health” (p. 11), as these approaches can help to understand the behaviours, attitudes and beliefs of people with health problems (Baum, 2016; Liamputtong, 2013, 2016, 2017; Olson et al., 2016; Thirsk and Clark, 2017); facilitate patient-centred and evidence-based approaches in healthcare (Olson et al., 2016; Yardley et al., 2015); design clinical trials (Duggleby and Williams, 2016; Russell et al., 2016; Toye et al., 2016); and evaluate trial interventions (Toye et al., 2016). Qualitative research is also considered relevant in the field of gerontology. According to Gubrium (1992) it can represent a valuable “way of documenting the aging experience” and help to “understand what it means to grow or be older, how that varies in time and place, and what is particular and general about the process” (p. 582). Meanwhile Phoenix (2018) pointed out that studies based on qualitative research allow “rich understanding of older people’s perspectives of their care, medicine use, and neighbourhoods, foregrounding voices which are often absent from what gets reproduced within the evidence base” (p. 81).

4.4 PROCEDURE

This thesis is based on *Art for Ages (A4A)*, a project funded by the Gebert R f Stiftung and conducted in Southern Switzerland between 2015 and 2017 by a team of researchers from the Centre for Performance Science, Royal College of Music (RCM, London), the Conservatorio della Svizzera italiana (CSI, Lugano), and the Centre of Competence on Ageing, Department of Business Economics, Health and Social Care, SUPSI (Manno). To conduct this investigation, a 10-week programme of group music making was carried out in four nursing homes in Southern Switzerland. The residents had the opportunity to make music together with CSI students. Each session was designed and led by a CSI teacher with extensive experience in pedagogy and group music activities (Silvia Klemm), and the students received specific training which will be described in Appendix A4.1. In

each nursing home the music team also included myself, who took part in the project as a coordinator, researcher and double bass player.

Initially, two separate music programmes were designed as part of A4A: one focusing on singing, the other on drumming using small percussion instruments. The initial goal was to observe the effects of two distinct musical activities, comparing an activity based on the use of the voice and melodic components of music with one based on the rhythmic components of music and including motor elements. Each programme consisted of ten sessions lasting 45-minutes (plus approximately 15 minutes of greetings and ritual songs) and was carried out in two nursing homes in Southern Switzerland, thus involving four institutions in total. During the musical sessions in all four institutions, it quickly became clear that the residents enjoyed combining singing and rhythmic activities. A spontaneous tendency to sing while drumming was observed in the participants of the percussion-based programmes while many of the residents involved in the singing group spontaneously accompanied themselves by clapping their hands or feet and showed a strong interest and curiosity in the possibility of making music using percussion. Consequently, as our protocol included the negotiation of the musical contents with the participants, the programme in each nursing home was modified to combine singing and drumming activities.

4.4.1 THE MUSICAL ACTIVITIES: THE CONTENTS OF A TYPICAL SESSION

As the population involved in this project included frail participants, the nursing home infrastructure provided important support, including having at least one staff member present in every session. The overriding goal of each session was to make the participants' experience as enjoyable and engaging as possible. To achieve this goal, particular attention was paid to offering residents an adequate level of agency and autonomy. As for the first aspect, it was considered important to design a varied repertoire and to offer residents room for negotiation. This meant that beyond a small set of works prepared in advance, the repertoire performed in each institution was developed throughout the course of the programme with pieces proposed by some residents or by members of the music team. In fact, the workshop leader, the students and myself made proposals based on the impressions gathered from interactions with

the residents. The balance between activities focusing on singing or drumming was also agreed session by session with the residents of each nursing home. Similarly, although the workshop leader specified in her weekly schedule sheet the time to be allocated to each activity and song for the next session, any requests or reactions from the residents could influence the actual use of the available time and the planning of the next session. All this allowed us to adjust the balance between novel and familiar content, as well as between challenging and relaxing activities in each session. Furthermore, this approach made it possible for individual residents to propose to use specific instruments or rhythms for a particular work.

Overall, the repertoire offered in each nursing home included a wide range of genres, including folk songs, classical music, Italian songs, jazz standards and Latin American music. The choice of songs included texts in different languages (Italian, German, Spanish and local dialect), taking into account the different areas of origin of the participants. In this way, the repertoire was to a significant extent negotiated with the residents. With regard to the percussion instruments used, the choice took into account the possible motor difficulties of the participants and the need not to disturb the other guests in the facilities. It was therefore necessary to include only instruments that were handy, easy to use, and of limited loudness. To engage residents with severe motor impairments, several one-handed instruments were included. Thus, small instruments such as tambourines, maracas, rattles, triangles and boomwackers (i.e. lightweight plastic tubes capable of emitting tuneful sounds) were used. Everyday objects such as baskets, graters, spoons and so on were also used. In this way, residents were offered the opportunity to play “actual” instruments and, at the same time, the availability of familiar objects of very modest value encouraged even the shiest people to take part in the music making. Even though the workshop leader invited residents to use specific instruments for each work, they had the choice of what instrument to use. In addition, at any time each resident could decide whether to use a percussion instrument, to sing or simply to listen to the music performed by the group. To increase the engagement of residents, special care was also taken to prepare the students to play different roles. Each member of the music team, including myself, could therefore be asked to play our own instrument, to use a percussion instrument, to sing or to conduct a small group of residents. Although the schedule for each session precisely indicated the role each member was asked to take in each activity, the workshop leader could ask each member to take on a different task based on unexpected requests or reactions from the residents.

This approach made it possible to deal with a variable number of residents and students involved per session without any significant problems.

4.4.2 THE ROLE OF THE STUDENTS

The total number of music students involved was 9, with 4–5 per team and some, on a voluntary basis, involved in more than one nursing home. Students, who already possessed skills in advanced instrumental performance, took part in an elective seminar offered by CSI. It offered 2 to 5 ECTS (European Credit Transfer and Accumulation System) and included 6 hours of training delivered before the presentation events described in the previous section. This training involved a multidisciplinary teaching team. In a 2-hour lecture a sociologist with expertise in ageing (Stefano Cavalli) and a lecturer in nursing sciences (Carla Pedrazzani), conveyed information on ageing processes from medical and sociological perspectives. By engaging students with open questions, both lecturers aimed to increase awareness of the heterogeneity of older populations, on the complexity of ageing processes and on the diversity of cognitive, sensory and motor impairments that may affect fourth age people. Furthermore, they provided information about the everyday life in nursing home and offered suggestions to collaborate effectively with members of nursing homes. After this session, the workshop leader (Silvia Klemm) spent 4 hours focusing on the musical content of the programme. She introduced to students a wide range of percussion instruments and common objects, illustrating the multiple possibilities to use them and the musical potential of each. Students were also instructed on how create and conduct simple rhythms with these instruments. Several works and arrangements were also rehearsed. In addition, the workshop leader provided basic training related to singing, focusing on repertoires, arrangements and warming up activities. As well as participating in the actual sessions, students were also regularly engaged in providing short performances before the start of each session. The repertoire changed each week and the works to perform were agreed with the workshop leader. In this way, each student had the opportunity both to perform works familiar to them and to approach unfamiliar repertoires and genres. As anticipated, to clarify the musical contents and the role of each member of the music team, the workshop leader sent students an email in advance of each session including the schedule of the activities and the scores. The music team also met for an hour before each session to define the role of each student and to rehearse the pieces to be

performed. Finally, at the end of each session students had a debriefing session with the workshop leader aiming to discuss each stage of the session and to collect ideas about the contents of the next sessions. The small amount of time between the end of the first edition of A4A (June 2016) and the beginning of the second (October 2016) did not allow to change significantly the programme on the basis of the data collected up to that point. However, a novelty was introduced in the second year, as students were asked to take a chair and to chat informally with residents who arrived before the beginning of the session. Further information about the training offered to students is provided in Appendix A4.1.

4.5 THE STUDIES CARRIED OUT FOR THIS THESIS

The effects of A4A on the health and wellbeing of the residents involved was investigated by the research team both qualitatively and quantitatively. This thesis focuses on the qualitative investigation and, as it also aims to consider the perspectives of the students, it is based on four studies, which can be summarised as follows:

Study 1: This study aimed to shed light, through a preliminary investigation at A4A, on the role of music in the lives of residents of elderly homes in Southern Switzerland. See Chapter 5.

Study 2: The experience of the residents involved in the musical sessions of A4A was placed at the centre of the investigation of this study. See Chapter 6.

Study 3: The experience of the students involved in the musical sessions of A4A was central to this study. See Chapter 7.

Study 4: The challenges experienced by the students and their ideas on how to improve the elective seminar linked to A4A informed this study. See Chapter 8.

In the next sections, the design of each of these four studies is discussed in more detail.

4.5.1 STUDY 1 (REPORTED IN CHAPTER 5)

This study constituted a preliminary phase of A4A and was therefore carried out before the start of the music programmes. By means of an exploratory investigation in

nursing homes, the aim was to clarify to what extent and in what ways the residents of the facilities in the geographical area in which A4A was carried out access music, and their degree of satisfaction with it. It also sought to clarify residents' preferences in terms of repertoire and musical activities, including tastes in musical genres and artists and also interest and motivation with respect to different forms of active music making. All this information was useful to define aspects of A4A related to the choice of repertoires to be included in the music sessions.

Secondly, this study investigated the role and importance attributed to music by residents throughout their lives. As discussed in Chapter 1, the literature in this field offers relatively few contributions which report on how older people describe particularly intense musical experiences which have occurred in their lives (Gabrielsson, 2002) and the education and preferences of older populations (Flowers and Murphy, 2001). Thus, the musical experiences and preferences of older adults living in nursing homes remain unexplored and it is unclear whether and to what extent the importance they attribute to music changes over different life stages. The research questions addressed in study 1 were therefore:

RQ1: How and to what extent do residents in nursing home access music in their daily lives?

RQ2: What function and role does engagement with music play in their lives?

For this study 20 residents were involved (13 women and 7 men, aged 71-99 years, mean = 84.6, SD \pm 7.3). They were identified by the staff of each institution involved, and maximum attention was paid to providing a diversified range of profiles in terms of socio-economic, educational and musical experience. Staff members also introduced myself to residents and clarified the purpose of the interview and my role as interviewer. The recruitment criteria included the absence of severe cognitive impairments and the ability to take part in an interview in Italian. This study involved six nursing homes located in Southern Switzerland, which are affiliated to Lugano Istituti Sociali (formerly Istituti Sociali di Lugano). Three of them hosted the A4A 10-week programme.

4.5.2 STUDY 2 (REPORTED IN CHAPTER 6)

This study focuses on the 10-week programmes of group music making carried out in A4A. As discussed above, the methodological approach used for this study was qualitative. This choice was determined by the fact that the objective was to investigate how the residents experienced the programme and what effects they subjectively perceived. The perspective of each resident was therefore placed at the centre of the research, and an attempt was made to give voice to each of them with respect to how this particular type of engagement with music was experienced in the context of this specific programme. For these reasons, an attempt was made to keep the research approach as open as possible with respect to the type of impact perceived and the meaning attributed to the experience of the programme. At the same time, as anticipated in Chapter 3, the investigation sought to clarify whether and to what extent participants perceived effects on their health and wellbeing. In this way, significant gaps in the literature were addressed. Although many qualitative studies focusing on older adults involved in music making have reported encouraging findings, the populations involved were mostly younger than that involved in A4A and were community dwelling (Creech et al., 2013; Lamont et al., 2017; Perkins and Williamon, 2014; Seinfeld et al., 2013).

In addition, the specific context of nursing homes has primarily been investigated using quantitative approaches, often focusing on subjects with severe cognitive impairments by examining music therapy interventions (Biasutti and Mangiacotti, 2018, 2019; Ing-Randolph et al., 2015; van der Steen et al., 2017; Vanderark et al., 1983; Zhang et al., 2017). The research questions for this study were therefore:

RQ3: How do residents in nursing homes experience group music making activities?

RQ4: What effects on their health and wellbeing do they perceive as a result of doing these activities?

I collected data through individual semi-structured interviews at the end of each 10-week programme carried out in three of the four nursing homes involved. The residents of one institution had to be excluded because an outbreak of flu resulted in the building being quarantined and a long break before the 10 planned sessions were completed. Given the qualitative approach of this study and the consequent need to limit the number of participants, not all A4A participants were included. This choice was also

dictated by the method used for data collection, which assumes very low or null levels of cognitive impairment on the part of the participants. Consequently, 22 residents (16 women and 6 men, aged 72–95 years, mean = 83.6, SD ± 6.9) took part in this study. They were recruited by the staff of each nursing home on the basis of their ability to be interviewed.

4.5.3 STUDY 3 (REPORTED IN CHAPTER 7)

The population addressed in this study was the CSI students involved in A4A. The aim was to shed light on the perspective of each participant and to understand if and to what extent effects in terms of health and wellbeing were perceived by taking part in A4A. Apart from these common elements, the research carried out on the students has important differences from the studies involving the residents. Firstly, in attempting to reconstruct the students' overall experience of the programme, it was considered appropriate to take into account that it was in fact the result of two distinct experiences. Both their experience of group music making with residents in the nursing home and their experience of a specific seminar were therefore considered. Another important difference from study 2 is that study 3 took into account the impact perceived by the students in terms of their career preparation.

On this basis, this study aims to offer contributions concerning different literature gaps. Firstly, based on the literature discussed in Chapter 2 regarding stressors for higher education music students (Demirbatir, 2015; Dobson, 2010; Kenny, 2015; Vaag et al., 2014; Pecen et al., 2018), the aim is to investigate whether this particular kind of group music making can help reduce stressors and amplify the benefits associated with higher education music study (Ascenso et al., 2017; Perkins et al., 2017). Secondly, this study aims to observe whether the involvement in community-based activities in nursing homes can impact higher education music students' professional expectations. As discussed in Chapter 2, recent studies have focused on music students' encounters with diverse population groups, including immigrants, drug addicted people and healthy older adults (Gande and Kruse-Weber, 2017; Perkins et al., 2015; Triantafyllaki et al., 2012), but the context of nursing homes is still under investigated. Therefore, the research questions raised in this study were:

RQ5: How do higher education music students experience group music making activities in nursing homes?

RQ6: What effects on their health, wellbeing and career preparation do they perceive as a result of doing these activities?

This study involved 9 participants (7 women and 2 men, aged 19-26 years, mean = 23.1, SD \pm 1.9). They chose to take part in A4A, which was offered as an elective seminar, and agreed to take part in this study. Data collection was based on semi-structured interviews and oral diaries. Each student was interviewed by me twice, namely before the beginning of the seminar and once the 10-week programme he or she was involved in was ended. As three students took part in A4A both in the academic year 2015-2016 and 2016-2017, they were interviewed three times (before the beginning of the 2015-2016, after the end of 2015-2016 seminar and after the end of 2016-2017 seminar). Regarding the diaries, at the end of each session in the nursing home students were expected to answer a set of seven questions by sending me a WhatsApp vocal message.

4.5.4 STUDY 4 (REPORTED IN CHAPTER 8)

This study involved the same population as study 3. Using thematic analysis on the same data set, it focused on the challenges and concerns perceived by students in carrying out the music sessions and on the shortcomings they perceived in terms of their preparation. The following research questions were thus addressed:

RQ7: In what situations and performing what tasks did the students involved in A4A perceive their preparation as insufficient?

RQ8: What changes to their preparation could make the training offered to students more comprehensive?

By identifying the situations and the tasks considered concerning by the students and by examining their training needs, this study aimed to provide insights to improve the elective seminar linked to A4A.

4.6 DATA COLLECTION AND ANALYSIS

In the next two sections the reasons why interviews and diaries were chosen for data collection are clarified. Finally, section 3.6.2 focuses on the characteristics of thematic analysis and the reasons why it was chosen.

4.6.1 SEMI-STRUCTURED INTERVIEWS

In the four studies that make up this project the data collection was based exclusively or significantly (studies 3 and 4) on interviews conducted by me. Kvale and Birkmann (2009) define interviews as “an active process where interviewer and interviewee through their relationship produce knowledge” (p. 17) and specify that the knowledge produced through this method is “produced, relational, conversational, contextual, linguistic, narrative, and pragmatic” (p. 53). Discussing each of these points in depth and analysing their complexity is beyond the scope of this thesis, so it will be briefly highlighted how these characteristics have informed this project. The knowledge generated by the four studies was created through active interactions between myself and all the residents and students interviewed, investigating, through conversation, the descriptions and narratives of the participants’ lived experiences and the meanings they attributed to them. Language played a central role: I focused my attention on the oral statements and the transcribed texts derived from them, and the stories the residents and students told about their lives played an important role in addressing the research questions.

Study 1 and study 2 are entirely based on semi-structured interviews and this type of data collection, along with oral diaries (see section 3.6.2), was also used in study 3 and study 4. The main characteristic of this type of interview is flexibility. The researcher has a clearly structured question list in terms of concepts and topics to be addressed but is free to organise the order of the questions based on the information offered by the interviewee. Kvale and Birkmann (2009) point out that semi-structured interviews are indicated when the objective is “to obtain descriptions of the interviewees’ lived world with respect to interpretation of the meaning of the described phenomena” and that the procedure is similar to that of an informal conversation “but as a professional interview it has a purpose and involves a specific approach and technique” (p. 27). This type of interview is among the most popular in qualitative music research (Williamon

et al., 2021) and this popularity is probably due to the flexibility with which the dialogue between researcher and interviewee can be conducted, and to the possibility of combining formality and informality it offers. According to Smith and Osborn (2008) “this form of interviewing allows the researcher and participant to engage in a dialogue whereby initial questions are modified in the light of the participants’ responses and the investigator is able to probe interesting and important areas which arise” (p. 57). This approach can offer the experienced researcher several significant advantages. One of these is that he or she can remain open to unanticipated digressions or items of interest, asking for clarification or raising sub-questions that may encourage each respondent to offer further details. In addition, the phrasing of the questions does not have to be strictly adhered to and the researcher can, based on his or her sensitivity, adapt the vocabulary to be used for each question on the basis of the attitudes and vocabulary used by each respondent. This method, besides facilitating the collection of rich and detailed answers, can increase the level of empathy and spontaneity during the interview (Smith and Osborn, 2008; Williamon et al., 2021). On the basis of the populations involved in this project, these characteristics were considered to be very important. The possibility of modifying the phrasing of the questions was indeed of great help both in facilitating my communication with the residents and reducing their possible fatigue, and in ensuring complete understanding between me and the foreign students, whose command of Italian was in every case extremely high. Moreover, the possibility of not strictly respecting the order of the questions facilitated the fluidity and spontaneity of the interviews in important respects. For example, in study 1 it was possible for the residents to move freely between present- and past-related information, while in study 3 and study 4 the students were able to reflect relatively freely on the interactions between their professional activity, their status as students, and specific aspects of A4A.

In designing the question lists for the four studies reported in this thesis, the recommendations given by Kvale and Birkmann (2009) in terms of the “twelve aspects of qualitative research” (p. 28) were carefully considered. These aspects are grouped by Kvale and Birkmann into a list of twelve items: Life world, Meaning, Qualitative, Descriptive, Specificity, Deliberate Naiveté, Focused, Ambiguity, Change, Sensitivity, Interpersonal Situation, Positive Experience. Taking inspiration from this source, the focus of question lists created for this thesis has always been on the lived experiences of the respondents and on the meaning of those experiences to them. I tried therefore to focus the interviews on specific situations rather than generic opinions, aiming to collect

detailed descriptions based on the subjectivity of the interviewee. Although I constantly took the question list, the research questions, and the object of the investigation into account, I used deliberate naiveté to a significant extent, keeping myself open to unexpected content and possible rethinking on the part of the interviewee. I also tried to act as sensitively as possible, being aware that in the context of any interview the quality of interpersonal interactions is of crucial importance. For this reason, I took great care to make the interview experience comfortable for each informant involved. Emphasising the great individual responsibility of the researcher and his or her attitudes and skills, Kvale and Birkmann (2009) identify a series of qualities according to which “the interviewer craftsman is knowledgeable, structuring, clear, gentle, sensitive, open, steering, critical, remembering and interpreting” (p. 167). In this thesis, I drew on my background as a musician, lecturer and researcher at a music college during the interviews with students, and I drew on my study of the literature on gerontology and qualitative research in the interviews with residents. For each study, I tried to mentally master the structure of each interview as precisely as possible, aiming to smoothly and efficiently manage the necessary changes in the order of the questions without ever losing sight of the objective of the interviews, and to devote maximum attention to remembering and interpreting as faithfully as possible what each interviewee said.

Apart from the attention paid to my own behaviour and preparation, I made sure that all interviews took place in a context which was comfortable in every respect. This means that for study 1 I was introduced to each resident by a member of the nursing home staff. As I acted as double bass player in the A4A sessions, I was already familiar to the residents involved in study 2. However, to ensure maximum serenity and comfort for the interviewees, the residents were always notified by the staff in advance of my arrival for the interviews. In this way, the meeting with me was mediated by a trusted figure, who also reassured each interviewee and appropriately anticipated the objectives of the meeting. In these two studies the majority of interviews took place in the residents’ private rooms, thus offering ideal conditions in terms of silence, tranquillity and familiarity of the interviewee with the environment. In some cases, however, the interviews took place in the nursing homes’ common areas such as the hall, garden or activity room, and the characteristics of the environment, together with the choice of the time of day, guaranteed an adequate level of silence and tranquillity.

In the case of the students involved in study 3 and study 4, the interviews took place in my office, located in one of the areas of the music college where I am employed. Aware of the risks of bias and power asymmetry that can occur in interview-based data collection (Williamon et al., 2021), I made every effort to establish a friendly and welcoming atmosphere. In all cases, after obtaining consent from each informant, the interviews were recorded. For security purposes two devices were used (a professional recorder, a smartphone and a tablet, depending on the case) and these were placed in a non-invasive place.

For all the interviews carried out, I followed the six-step structure suggested by Williamon et al. (2021). The first stage was introductory, thus I introduced myself and summarised the objectives of the interview and the related research project, showing myself open to any questions and trying to establish a climate of trust and hospitality. The second stage was devoted to ethical aspects, clarifying that the interviewee had the right to stop the interview at any time without giving reasons, that the interview would be recorded while maintaining anonymity, and obtaining informed consent. The third and fourth stages provided space for the actual interview, which opened with a “starter question” followed by the “main section” (p. 140) in which I asked the questions included in the question list according to the dynamics described above. In the fifth stage I invited each respondent to add whatever information he or she considered relevant, asking for confirmation that each aspect had been satisfactorily covered and that there was nothing to add. The last phase was devoted to greetings and thanks.

With regard to the design of each question list, a number of recommendations specific to this type of data collection were carefully considered (Kvale and Birkmann, 2009; Smith and Osborn, 2008; Williamon et al., 2021). Particular care was taken to formulate questions in neutral terms so as to minimise the bias that I could provoke being involved as interviewer. This was considered as a sensitive point in all studies. In study 1 particular care was taken to enable and welcome responses of indifference or rejection in relation to access and engagement with music. In studies 2, 3 and 4, being aware that I was well known to both residents and students as a member of the A4A research team, I openly invited everyone to discuss disappointing, improvable or neutral aspects of the proposed activities. In addition, open-ended questions were included in all the question lists used, in order to avoid “yes/no” answers and to encourage rich and detailed reporting. Due to the practical impossibility of conducting test interviews, for all studies the question lists

were carefully discussed with the A4A research team and external researchers before the actual data collection.

4.6.2 ORAL DIARIES

As discussed above, in study 3 and study 4 the students were invited to semi-structured interviews and the data collection was supplemented by a diary which they were asked to update at the end of each session in the nursing home. The diary as a method for data collection can be considered a “self-report instrument used repeatedly to examine ongoing experiences” and can be used “to investigate social, psychological, and physiological processes, within everyday situations” (Bolger et al., 2003, p. 580). It has often been used in sociology and health care (Cockrill et al., 2011). Wisemann and colleagues (2005) pointed out that diaries are widely used in the fields of nutrition and sleep research as well as in research focusing on behaviour and groups considered to be high risk. In recent years, however, this type of data collection has also been used in music research (Perkins et al., 2015; Wright and Kanellopoulos, 2010).

There are three types of diary use: interval contingent, signal-contingent and event-contingent (Wheeler and Reis, 1991). In the first case, the participant is asked to update the diary regularly at set intervals; in the second case, the participant updates the diary in response to signals agreed with the researcher; in the third case, the participant updates the diary whenever a certain behaviour or event takes place. The method used in study 3 and study 4 is aligned with the first type, in that students were asked to update the diary at the end of each A4A session. According to Bolger and colleagues, the use of diaries can be effective for three main purposes: “(a) obtaining reliable person-level information; (b) obtaining estimates of within-person change over time, as well as individual differences in such change; and (c) conducting a causal analysis of within-person changes and individual differences in these changes” (p. 581). Study 3 and study 4 belong to the second type, as the aim of the diaries was to integrate the information collected through the interviews before and after the involvement in A4A by observing the possible evolution of some aspects related to their experience of the programme week after week.

Literature suggests various ways of devising the structure of the diaries (Wiseman et al., 2005), ranging from models that offer ample freedom to participants, to formats organised in ways similar to questionnaires (Wiseman et al., 2005). Study 3 and study 4 were inspired by a previous study involving students and alumni of a music college teaching adults with an average age of 68 years (Perkins et al., 2015). For both studies a set of 7 open-ended questions was thus created which aimed to clarify students' feelings, actions and reflections experienced before, during and after each session of A4A. Another important point of contact with the study run by Perkins and colleagues (2014) was the mode of data collection. In fact, information was not written down by the participants but was collected through oral diaries, namely through voice recordings. The students sent me vocal messages using WhatsApp on their smart phones. This choice was based on the aim of using a method that was not too time-consuming, that was free of charge and that did not require specific tools or training. The use of complex protocols or sophisticated tools has in some cases been seen as a serious limitation in diary-based studies (Bolger et al., 2003). At the same time, the practicality of this system (which can also be used while travelling or in the intervals between activities planned by the music college) can contribute to speeding up the procedure and reducing the risks linked to the time required by the participants and the repetitiveness of the procedure (Bolger et al., 2003). Another aspect of diaries considered beneficial, and probably enhanced by the use of an immediate mode such as voice messages via smartphones, is that collecting data in this way probably reduces the risk of recall bias (Wiseman et al., 2005).

However, the researcher who uses diaries must be aware of the possible limitations of this method. Bolger and colleagues (2003) pointed out a number of critical issues in this regard. The repetitiveness of the procedures and the potentially high number of occasions on which the participant has to update the diary can make this method significantly more cumbersome than other possible methods. This problem can be significantly reduced by designing the diary in such a way that it allows the collection of as much detailed information as possible through a procedure that takes as little time as possible. However, this does not entirely exclude the risk of habit and boredom on the part of participants, which could generate superficiality in the answers.

4.6.3 THEMATIC ANALYSIS

Thematic analysis, as described in a fundamental contribution by Virginia Braun and Victoria Clarke (2006), seemed to be the best choice to address the aims of this thesis. It can be defined as “a method for identifying, analysing, and reporting patterns (themes) within data” with high degrees of detail without prescribing rigid predetermined procedures (Braun and Clarke, 2006, p. 6). In the same paper, the authors clarified that

thematic analysis can be an essentialist or realist method, which reports experiences, meanings and the reality of participants, or it can be a constructionist method, which examines the ways in which events, realities, meanings, experiences and so on are the effects of a range of discourses operating within society. It can also be a “contextualist” method, sitting between the two poles of essentialism and constructionism. (Braun and Clarke, 2006, p. 9)

Furthermore, Braun and colleagues (2019) pointed out that thematic analysis “is indeed often used to describe or summarize participants’ experiences, rather than do more interpretative or conceptual work [...] it works well with many different interpretative frameworks, ranging from phenomenological ones to critical constructionist interrogations of meaning” (p. 850).

Fundamentally, thematic analysis can be applied according to three different schools: coding reliability, codebook thematic analysis, and reflexive thematic analysis, and this thesis is based on the latter. Reflexive thematic analysis “emphasizes meaning as contextual or situated, reality or realities as multiple, and researcher subjectivity as not just valid but a resource” and it presupposes a “considerable analytic work on the part of the researcher to explore and develop an understanding of patterned meaning across the dataset” (Braun et al., 2019, p.848). Moreover, the authors describe the role of the researcher, stating that in this school the focus

is not to “accurately” summarize the data, nor to minimize the influence of researcher subjectivity on the analytic process, because neither is seen as possible nor indeed desirable. The aim is to provide a coherent and compelling interpretation of the data, grounded in the data. The researcher is a storyteller, actively engaged in interpreting data through the lens of their own cultural membership and social positionings,

their theoretical assumptions and ideological commitments, as well as their scholarly knowledge. (pp. 848-849)

The researcher's responsibility is such that even the codes, and consequently the themes, are determined by the choices he makes along the stages of analysis on the basis of his sensitivity, background and creativity, as

Themes do not passively emerge from either data or coding; they are not "in" the data, waiting to be identified and retrieved by the researcher. Themes are creative and interpretive stories about the data, produced at the intersection of the researcher's theoretical assumptions, their analytic resources and skill, and the data themselves. Quality reflexive TA is not about following procedures "correctly" (or about "accurate" and "reliable" coding, or achieving consensus between coders), but about the researcher's reflective and thoughtful engagement with their data and their reflexive and thoughtful engagement with the analytic process. (Braun and Clarke, 2019, p. 594)

In reflexive thematic analysis reflexivity is thus crucial and my position is discussed in section 4.7.

4.6.4 ANALYTICAL PROCEDURE

According to Braun and Clarke (2006), thematic analysis is fundamentally based on six stages: 1) familiarising yourself with your data; 2) generating initial codes; 3) searching for themes; 4) reviewing themes; 5) defining and naming themes and 6) producing the report. In the following section, each of these steps will be described and discussed in relation to this project.

The first step, *familiarising yourself with your data*, is aimed at acquiring a first, overall familiarity with the data. This phase is considered indispensable and Braun and Clarke (2006) recommended that it is carried out scrupulously and without shortcuts, stressing that the time spent in this way can be a useful investment. The initial immersion in the data may actually consist of several steps. The very first step occurs when the researcher is actively involved in data collection. This, in fact, occurred in all studies undertaken for this thesis, as all interviews were carried out by myself. In study 1, in which I and

interviewees did not know each other beforehand and saw each other only once, it was possible for me to capture the heterogeneity of socio-economic profiles, access to music and music preferences during the data collection. In study 2 my contact with the interviewed residents was almost equivalent, with the important difference that I and the interviewees knew each other because we took part together in the group music making sessions. This element may have had consequences for the data collected, and this will be discussed in detail in Chapter 5 section 5.3, Chapter 6 section 6.3, and Chapter 9 section 2. In the case of study 3 and study 4, the situation presents further elements of complexity. Here too, I, who am employed as a researcher and lecturer at the music college involved, personally interviewed all the students, both before the start of the programme and after its end. In the first interview, I and each interviewee met for the first time, although in one case I had met previously in the context of other activities at the conservatory. The second interview, on the other hand, had a dynamic comparable to that of study 2. The data collection of study 3 and study 4, however, also involved the use of oral diaries, and therefore in this case I was only partially present while data were generated.

Another aspect that is considered crucial for the first data immersion concerns the transcription of the audio recordings. According to some scholars, transcribing one's own research data offers the researcher a valuable opportunity not only to effectively immerse oneself in the data (Riessman, 1993) but also to derive useful elements for interpreting it (Bird, 2005; Lapadat and Lindsay, 1999). Furthermore, it is important to emphasise that transcribing interviews is not just a mechanical task, as it requires attention to non-verbal elements (e.g. laughter, smiles, coughs) and to the use of punctuation, which can significantly alter the meaning of statements (Poland, 2002). The importance of transcriptions was taken into account in this thesis, as I manually transcribed all audio recordings for studies 2, 3 and 4. In the case of study 1, due to time constraints, 6 out of 20 interviews were transcribed by a colleague of mine. Aiming to reconstruct to the fullest extent possible the chronemics and paralinguistic contents (Gorden, 1980) of each interview, and being aware of the possible limitations of transcripts in terms of reliability (Kvale and Brinkmann, 2009; Poland, 1995), I constantly referred to my audio recordings throughout my data analysis. A further useful activity to immerse oneself in the data concerns reading the data "in an active way - searching for meanings, patterns and so on" (Braun and Clarke, 2006, p. 16), collecting notes and ideas potentially useful for the following phases of the analysis, and I carried out regularly this procedure too.

The second phase, *generating initial codes*, occurs when the researcher starts to produce codes. Boyatzis (1998) defines a code as “the most basic segment, or element, of the raw data or information that can be assessed in a meaningful way regarding the phenomenon” (p. 63). At this stage, the responsibility and interpretive skills of the researcher begin to be crucial, as the coding activity is significantly influenced by what he considers interesting and how he relates the data to the research questions. According to Braun and colleagues (2019), there are two possible approaches to conducting the coding phase. One is deductive, which means that from the very beginning of the analysis the data is approached on the basis of pre-established theoretical elements. The other approach, that is the one used in this thesis, is inductive and presupposes a bottom-up process, in which the researcher approaches the data without starting from pre-established ideas and theories.

Crucially, reflexive thematic analysis acknowledges that even in inductive-based research, inevitably “any researcher will approach the data with preconceived ideas based on their existing knowledge and viewpoints” (Braun et al., 2019, p. 853). Moreover, the researcher has the responsibility to decide whether to apply codes to the whole data set or to focus only on the parts of it he considers relevant to the research questions. Braun and Clarke (2006) recommend using the first approach and it was used for all four studies in this project. Another important choice to be made concerns the coding procedure, which can be manual or assisted by specific software. The coding for the studies reported in this thesis was carried out manually, the comment and copy-paste functions of Microsoft Word being used to encode the transcriptions and create additional files that grouped the data in ways considered appropriate during the analysis. Braun and Clarke (2006) offer four practical suggestions regarding this phase of analysis, which were followed closely in all four studies. The first refers to the usefulness of “coding for as many potential themes/patterns as possible” (p.19) since at this early stage it is not possible to have a clear idea of the data as a whole and thus which elements are actually most relevant. The second recommendation is to “code extracts of data inclusively” (p. 19) in order to keep the context from which each of them emerges sufficiently clear throughout the analysis. The third recommendation is that it is useful to code certain extracts of transcripts more than once, but to decide which is the most appropriate code in the subsequent stages of analysis. Finally, the authors emphasise the importance of recognising and adequately considering the contradictions and conflicts between codes that are likely to arise as this phase progresses.

Once the above procedure has been completed, the third phase, *searching for themes*, can take place. Here the attention of the researcher shifts to more general and abstract levels. The codes are analysed in order to identify possible combinations that can generate overarching themes and subthemes. In this phase it is also possible to start deciding if some codes can be eliminated because they are considered irrelevant in the overall context. During this phase it may be useful to use various graphic devices to visualise and elaborate the positions of the various codes, and in the present project tables were used for this purpose. Although a considerable degree of clarity can already be achieved at this stage, Braun and Clarke (2006) recommend that nothing of the previous work should be eliminated, as the results achieved in this way are still to be considered provisional and their validity has yet to be verified.

For each study in this project, every time I completed this phase I planned meetings with supervisors and co-authors to obtain external feedback and validate the work done.

In the fourth phase, *reviewing themes*, the researcher is ready to evaluate and finalise the set of themes generated in the previous phases. The work consists essentially of synthesis and clarification activities, and can be achieved by eliminating certain themes or creating further subdivisions between those identified. The aim should be to achieve a level of clarity and synthesis such that “data within themes should cohere together meaningfully, while there should be clear and identifiable distinctions between themes” (Braun and Clarke, 2006, p. 19). To achieve this, it is necessary to work on two levels in a recursive manner. Firstly, the researcher has to work on the themes, reconsidering all the collated extracts for each theme to make sure that they constitute “a coherent pattern” as a whole. Until this is convincingly achieved, it will be necessary to work recursively on the themes, renaming or generating others, and on the extracts, considering a different placement or exclusion. Once the result is considered satisfactory the researcher is ready to tackle the second level of this phase.

It is very similar to the first one, but rather than considering the coded extracts in relation to the themes, it considers the overall set of themes in relation to the whole dataset. By re-reading the entire dataset from scratch, the researcher has the opportunity to verify that the entire set of themes adequately represents the data and to possibly code or re-code missing portions of the data. Once again, therefore, the researcher carries out his work by alternately focusing on the codes and the themes and, according to

Braun and Clarke (2006), at the end of this stage it will be possible to have a sufficiently clear idea of the content of all the themes, “how they fit together, and the overall story they tell about the data” (p. 21).

At this point the fifth stage, *defining and naming themes*, can take place. Here the researcher focuses on clarifying the relationship between the collated data and the corresponding theme by creating an account that clarifies these relationships and thus the “essence” of each theme and any sub-themes. Each of these reports should represent an analysis that clarifies the hierarchical relationships between the themes and sub-themes and their relevance to the research questions. Braun and colleagues (2019) recommend constructing the account of each theme as a “story” and making sure that the overall set of accounts and the sequence in which they are presented also constitutes a “story”. An important aspect of this is that the end result is coherent and clear. In terms of clarity, another important aspect is the naming of each theme and sub-theme, looking for formulas that express the content of each of them in a concise and relevant way. For all the studies of this thesis, I verified the clarity of my work by collecting feedback from my supervisors.

The final stage, *producing the report*, is the writing up of the final text. Again, conciseness, coherence and clarity of content and links are crucial aspects of the overall quality of the work. The aim should be to present the complexity of the topic investigated and the data collected in a way that makes clear the quality and validity of the analysis carried out. The text should avoid redundancies and unnecessary complications, and again emphasising the importance of presenting the results by telling a “story”, Braun and Clarke (2006) stress the need “to go beyond description of the data, and make an argument in relation to your research question” (p. 23). In this thesis, the results of studies 1, 2, 3 and 4 are presented in Chapters 5, 6, 7 and 8, together with more detailed information regarding the specific analysis procedure for each of them.

4.6.5 OVERVIEW OF ETHICS ASPECTS OF THE PRESENT STUDY

A4A was granted ethical approval by the Ethical Committee of Canton Ticino (CE 3030-2016-00193). This section details the ethical aspects of the project.

With regard to the recruitment of participants, the procedures used for residents and students were different. The older adults of Study 1 and Study 2 were recruited directly from the nursing home partners of the project. The staff played a key role in identifying participants with mental health adequate to take part in the project. In addition, staff members well known to the residents communicated to each the objectives of the research, making it clear that participation was completely free and voluntary, that it would be possible to withdraw from the interview at any time without having to offer reasons, that all data collected would be treated confidentially, and that their anonymity would be guaranteed. Before each interview, a staff member introduced me to the resident and reminded each of them of the research objectives. These steps ensured that participants were fully aware of the conditions for taking part in the research and their rights. The staff of each institution took care to collect informed consent. The recruitment procedures for Study 2 were to a large extent equivalent, with the important difference that a presentation event was carried out in each nursing home involved. At this event, the members of the music team performed a few songs by playing their instruments, singing or introducing percussion instruments. Before each song, the workshop leader and a staff member invited eager residents to try out the instruments or sing along with the music team. The staff of each institution also undertook to describe A4A to residents who, due to visits or other reasons, were unable to attend this presentation event. Besides the recruitment procedure undertaken for this research, all residents willing to join the music sessions were welcomed.

As for the students, in both academic years the recruitment took place by enrolling in the elective seminar offered by the music university. The description of this seminar was included in the booklet that the university distributes to students each year presenting the entire programmed of seminars offered. Once enrolled by the secretary of the music university, the students were in direct contact with me. In the first meeting with each of them, I clarified the objectives of the research and the conditions of participation, presenting the informed consent and answering any questions they may have had. This allowed me to clarify that each student had the possibility of withdrawing at any time, that all their data would be treated confidentially, and that their anonymity would be guaranteed. The foreign students involved were fluent in Italian, and no significant language barriers were encountered either at the recruitment stage or subsequently. Informed consent concerning the students were collected directly by me.

Each student was aware of my employment as a researcher in the music university and my multiple roles within A4A, including that of coordinator and that of double bass player. As I was myself interviewing them and collecting their oral diaries, my position may have caused perceptions of power asymmetry between myself and the students, thus influencing data collection. My multiple duties may also have influenced the data collected for Study 2, as I was already known to the residents involved in the music programme. The implications of these aspects are discussed in section 4.7 and in Chapters 6, 7 and 9.

Transcribing and analysing the data collected for the four studies of this thesis took an amount of time that made it impractical to involve the participants in the approval of these steps. However, I had important support from my Italian-speaking supervisors, who ensured the validity of my transcriptions by comparing a sample of them with the respective audio recordings.

4.7 CRITERIA FOR ENSURING THE RELIABILITY OF THE RESULTS

In the field of qualitative research the criteria for assessing the reliability of the results obtained are much debated. Malterud (2001) has pointed out that qualitative approaches have often met with scepticism in the medical field and that this may be due to a large extent to the “its subjective nature and the absence of facts” (p. 483). Morse (2015) suggests that in addition to the nature of the data, qualitative research is often perceived as lacking in validity due to unsystematic data collection methods based on verbal interaction and observation, and analytical procedures which are likely to be significantly based on the interpretations of the researcher.

The literature on qualitative research offers numerous approaches to addressing these critiques and there are a variety of perspectives, depending on the different epistemologies and methodologies that the researcher might use. It is beyond the scope of this thesis to discuss all the literature around this topic in detail. Reflexive thematic analysis (Braun et al., 2019) was deemed the most suitable method for the research questions addressed in this thesis, and the strategies used with the aim of achieving rigour in the studies carried out were reflexivity, internal validity and attention to negative cases.

Darawsheh (2014) defines reflexivity as “the continuous process of self-reflection that researchers engage in to generate awareness about their actions, feelings and perceptions” (p. 561) and affirms that it constitutes “a strategy to attain rigour in qualitative research” (p. 562). Reflexivity, therefore, can play an important role in limiting researchers’ bias and making them more aware of the possible impact of their subjectivity throughout the research (Jootun et al., 2009; Lambert et al., 2010; McCabe and Holmes, 2009), allowing them at the same time to use their “personal characteristics for further exploration of participants’ accounts” (Darawsheh, 2014, p 562). According to Mays and Pope (2000)

reflexivity means sensitivity to the ways in which the researcher and the research process have shaped the collected data, including the role of prior assumptions and experience, which can influence even the most avowedly inductive inquiries. Personal and intellectual biases need to be made plain at the outset of any research reports to enhance the credibility of the findings. The effects of personal characteristics such as age, sex, social class, and professional status (doctor, nurse, physiotherapist, sociologist, etc.) on the data collected and on the “distance” between the researcher and those researched also needs to be discussed. (p. 51)

Malterud (2001) seems very close to this position as she states that reflexivity

starts by identifying preconceptions brought into the project by the researcher, representing previous personal and professional experiences, prestudy beliefs about how things are and what is to be investigated, motivation and qualifications for exploration of the field, and perspectives and theoretical foundations related to education and interests. (p.484)

With regards to the present thesis, I have a background as a double bass and electric bass player (MA in music performance and music pedagogy) and have been involved for around 25 years in classical music, jazz and teaching. In 2013 I obtained a MAS in Research Methods in the Arts with a dissertation focusing on the perception of metaphorical contents in music. I have carried out teaching activities including one-to-one lessons, jazz band workshops, music history courses and several seminars, including one, launched in 2018-2019, on community music in nursing homes. Prior to starting my doctoral programme, from 2012 to 2014 I carried out music-based interventions focusing

on receptive engagement in a nursing home and in other contexts (a music shop, a small village and an amateur choir) where the presence of people over 65 was predominant.

I carried out these interventions in the context of my part-time employment as a scientific collaborator in the research and development division of the Conservatorio della Svizzera italiana (CSI, Lugano, Switzerland). The feedback I received in doing this activity, along with my interest in community music and my desire to bring music outside of concert halls and music academies, led me to undertake doctoral research. In 2014, I was offered the opportunity to collaborate with the interdisciplinary research team working on A4A. My tasks in this regard included both the role of associate researcher and that of double bass player within the music team involved in each nursing home. This represented an opportunity for me to deepen my knowledge about the effects of music on the older population and to improve my research skills. Consequently, I decided to increase my commitment to research by embarking on this doctoral programme.

Working with the A4A research team, as well as with a researcher external to this project (Michele Biasutti), made me more aware of some of my preconceptions and stimulated my reflection on epistemological aspects. In particular, working with a sociologist (Stefano Cavalli) and a philosopher (Hubert Eiholzer, head of the research and development department where I am employed) made me aware of my a priori belief in the ability of music to benefit people. While this view was based on my own experiences in carrying out music-based interventions and on the study of the literature discussed in Chapter 1, the continuous dialogue with these two researchers stimulated my critical reflection on that literature. In addition, I was stimulated to be aware of the risk of confirmation bias which could influence both my view of reality and my study of the literature. This has increased my awareness of the complexity of the key concepts of my research field. For example, working with the researchers mentioned above caused me to reflect that, to demonstrate the ability of music to offer benefits to people, it is necessary to clarify what is meant by “music”, what are the characteristics of the people considered and on what basis the possible effects, which need to be observed in a systematic way, can be considered as benefits. In fact the whole supervisory team played a key role in this regard. The plurality of their areas of expertise and methodological approaches, including music, sociology, gerontology, psychology and pedagogy, using quantitative, qualitative and mixed approaches, offered me significant support in determining my

epistemological position and in being reflexive about the validity and coherence of my choices. The epistemological position taken (that of social constructionism, as discussed in section 4.2), along with my role as the double bass player of the music team involved in each nursing home, required a particularly significant commitment to reflexivity. My personal involvement in the sessions and the fact of being known to both the students and the residents brought with it a potential risk of bias in relation to both myself and the participants. Consequently, the members of the supervisory team, together with external researchers with backgrounds in music, health care and gerontology, were consulted at all stages of the research, including the design of the question lists, the elaboration of the coding schemes, data analysis and report writing.

Indeed, maintaining a reflexive approach throughout this research was considered important on the basis of some characteristics of the data analysis employed in this thesis. In section 4.6.4 it was clarified that Braun and colleagues (2019) consider subjectivity as a key asset in reflexive thematic analysis. The key role of subjectivity in qualitative research is also advocated by other authors.

Malterud (2001) pointed out that through a continuous and conscious use of reflexivity, “personal issues can be valuable sources for relevant and specific research” (p. 484). Furthermore, the researcher’s intuition, creativity and imagination should be seen not as an unresolvable weakness or as a component to be confined as much as possible, but rather as a resource (Darawsheh, 2014; Finlay and Ballinger, 2006; Jootun et al., 2009; Lambert et al., 2010; McCabe and Holmes, 2009; Ritchie and Spencer, 1994). As my subjectivity and my interpretations played a significant role in this thesis, to achieve rigour throughout it I applied two further strategies: validity and negative case analysis.

Internal validity refers to the quality and clarity of the inferences made by the researcher (Miller, 2008; Polit and Beck, 2012). According to Morse (2015) the researcher can achieve internal validity by considering the following questions throughout his or her work:

Is the resemblance accurate? Does the description of the essence actually match the essence of the phenomenon? Ask: Can the description be recognized by others who have had the experience, or appreciated by those who have not had the experience? Is the description detailed? Decontextualized? Abstracted? Expressed logically? (p. 1213)

Dialogue with senior colleagues can be relevant in this respect (Mauthner and Doucet, 2003), and the presence of an interdisciplinary supervisory team and the collaboration of external researchers was also crucial to increase the reliability of the results of this thesis. The group of researchers involved included both members who regularly attended the A4A sessions and members who followed each stage of the analysis and read the corresponding reports without having attended the sessions. Moreover, the group of researchers involved had diverse geographical origins, being composed of teachers and researchers based in Switzerland, Italy and the UK.

Negative case analysis is recommended by many scholars (Creswell and Poth, 2018; Malterud, 2001; Mays and Pope, 2000; Morse, 2015). It involves the researcher devoting maximum attention to those cases that for some reason may be considered isolated or which contrast with the emerging picture. According to Morse (2015)

Comparison of the negative cases with the more commonly occurring cases will reveal important differences, and it is the developing understanding of these differences that is often critical to understanding the process as a whole. Therefore, this is a critical analytic strategy for the development of validity. (p. 1215)

As will be made clear in Chapters 5, 6, 7 and 8, each research question in this thesis was addressed by carefully considering responses that for whatever reason seemed isolated or conflicted with what was emerging from the majority of residents' and students' accounts. This made it possible not only to give voice to the plurality of perspectives offered by the participants, but also to obtain insights into the complexity and heterogeneity of the context under investigation.

4.8 CONCLUSIONS

At the beginning of this chapter various aspects of the research questions addressed in this thesis were discussed. The main elements of complexity were related to the fact that this investigation involved two distinct groups, with very different characteristics, in the context of a group music making programme. The description of this programme highlighted the variety of activities included in the music sessions and the diversity of roles played by the residents and the students. A further element of complexity is linked to the need to investigate the interactions of each participant with the other participants,

thus considering both the interactions between members of the same group (e.g. a resident with the other residents) and with members of the other group (e.g. a resident with the students). The previous chapter having described the theoretical paradigms to be used in this investigation, this chapter explained why social constructionism was chosen as the epistemology and the project was carried out using a qualitative approach. This thesis has as its epistemological premise the idea that reality is socially constructed on the basis of subjective interpretations and interpersonal interactions. Given that in social constructionism crucial importance is attached to individual perspectives, language and the interpretive abilities of the researcher, and taking into account that this epistemology is based on relativism, the research questions in this thesis were addressed using a qualitative approach.

This choice was based on the fact that qualitative research is considered to be indicated in cases where the researcher places the individual perspectives of the participants at the centre of the investigation. Furthermore, this approach was considered appropriate on the basis of literature that highlights the potential of qualitative approaches in research focusing on health and on older populations.

It was then clarified that this thesis is based on four separate studies carried out in Southern Switzerland. In this way, the thesis aims to offer an insight into the access to music of residents in Southern Switzerland's nursing homes in the past and in the present (study 1); to investigate how residents in nursing homes experienced a group music making programme with CSI students and the effects they perceived on their health and wellbeing as a result of taking part in it (study 2); to investigate how the students involved experienced the programme and the effects they in turn perceived on their health and wellbeing (study 3); to identify shortcomings perceived by students in terms of their preparation and their thoughts about how to improve the seminar (study 4). For each of these studies, information about recruitment and data collection were provided.

Data collection and analysis were subsequently discussed in detail. Firstly, it was explained that all four studies in this thesis were based on semi-structured interviews. The characteristics of this method were described and the reasons why it was chosen were discussed. This method was considered appropriate due to its flexibility which, while maintaining rigour and systematicity, allows for a series of advantages considered

important in relation to the research questions and the characteristics of the participants involved in all studies. As such, the participants had the opportunity to express their thoughts without having to rigidly follow a pre-established scheme and were free to open digressions, while the author was able to adapt the language of the questions according to the background and language skills of each interviewee. Considering the importance of the interpersonal relationship between the interviewer and the interviewee, further information was offered regarding the precautions used by the author to collect as rich and detailed data as possible and to make the experience of each participant as positive and comfortable as possible.

Secondly, it was clarified that in Study 3 and in Study 4 oral diaries were used along with semi-structured interviews. On the basis of the literature, the advantages and limitations of diaries as a method of data collection were discussed and it was pointed out that they have been used in the field of music and wellbeing. The choices I made to optimise participant collaboration were described and it was highlighted that the use of voice recordings, rather than writing, was the chosen method for diary compilation.

The last section of this chapter was devoted to data analysis, clarifying that reflexive thematic analysis was used. This approach is considered appropriate for research based on social constructionism. In line with this epistemology, reflexive thematic analysis distances itself from positivism and recognises the importance of the background and sensitivity of the researcher, who has a crucial responsibility in interpreting the data collected. Reflexive thematic analysis is considered a very flexible approach and this feature was considered valuable to maintain a consistent approach throughout the studies that make up this thesis. An overall description of the analytical procedure is provided and the chapter concluded by discussing the strategies used to ensure the validity of the results.

CHAPTER 5

STUDY 1: MUSIC IN THE LIFE OF NURSING HOME RESIDENTS ¹**INTRODUCTION**

Notwithstanding the significant number of studies on the benefits of music for older adults (see Chapter 1), as well as significant literature on the wide-ranging impact of music therapy, comparatively little is understood about the role and importance of music in the lives of those in nursing homes, in particular residents' deliberate use of music and their access to musical activities outside of therapeutic contexts. The study reported in this chapter aims to address this gap by investigating the following research questions:

RQ1: How and to what extent do residents in nursing home access music in their daily lives?

RQ2: What function and role does engagement with music play in their lives?

By means of an exploratory investigation, the aim was to understand how and to what extent older adults who live in nursing homes access music in their daily lives, considering both listening to and making music. Moreover, this study aimed to clarify the motivation of residents to be engaged with music and the importance they attribute to it, considering both their daily lives in nursing home and their life courses.

Clarifying these points is important for several reasons. Firstly, on the basis of the literature suggesting that the engagement with music can be beneficial for the older population, this study can offer a contribution to understanding if and to what extent music can also be accessible and relevant for nursing home residents.

Secondly, clarifying the extent and motivation of residents to access music can offer a better understanding of the potential impact of a group music making programme such as *Art for Ages* (A4A), which is the aim of the next chapter.

¹ This chapter is largely based on the following paper: Paolantonio, P., Pedrazzani, C., Cavalli, S., & Williamon, A. (2021). Music in the life of nursing home residents. *Arts & Health*, 1–17. — <https://doi.org/10.1080/17533015.2021.1942938>

Thirdly, through the interviews carried out in this study it was possible to get an initial idea of the residents' musical preferences and relationship with music making. In this way, information was gathered that supported the design of the musical content of A4A.

The method used in this study is described in section 5.1, which reports the recruitment and profile of participants, the procedure and the data analysis. Section 5.2 reports the results, which are then discussed in section 5.3.

5.1 METHOD

5.1.1 PARTICIPANTS RECRUITMENT

The study involved 20 residents (13 women and 7 men, aged 71-99 years, mean = 84.6, SD \pm 7.3) of six nursing homes in Southern Switzerland. The convenience sample included residents without severe cognitive impairments and able to take part in an interview in Italian. Participants were identified by the staff of each nursing home, who carefully acted to ensure diversity in terms of socio-economic profiles, education and musical experience. The selected residents were then invited to take part by staff who briefly introduced them to the purpose of the study. Table 1 shows the characteristics of the participants.

TABLE 1. PARTICIPANT CHARACTERISTICS.

NURSING HOME	PARTICIPANTS (PSEUDONYMS) (N=20)	AGE (71-99 YEARS, M=84.6 SD ± 7.3)	GENDER (13 F, 7 M)
1 (n=3)	Simona Sonia Sandra	91 86 74	Female Female Female
2 (n=3)	Paolo Paola Pietro	82 99 91	Male Female Male
3 (n=5)	Gina Giovanni Giovanna Grazia Ginevra	85 88 94 83 95	Female Male Female Female Female
4 (n=4)	Maria Michela Matteo Mario	71 82 93 84	Female Female Male Male
5 (n=2)	Carlo Candido	82 79	Male Male
6 (n=3)	Olga Oriana Ornella	79 82 73	Female Female Female

5.1.2 PROCEDURE

Data were collected through individual semi-structured interviews, each lasting approximately 30 minutes (range 16-41 minutes). I conducted the interviews and audio recorded them with the permission of the participants. In most cases, the interviews took place in private rooms, but in some cases where no other options were available, they were held in quiet communal spaces in the nursing homes; in such cases, I did my best to ensure that residents could hear the questions being asked and could be heard when responding, and the respondents confirmed that they felt free to speak their minds. Chapter 4 section 4.6.1 describes my approach to conducting interviews with the residents in more detail.

In this first stage of the A4A project, I designed an interview schedule aiming to explore how listening to music was embedded in participants' lives as they aged and how this interacted with their life course, experiences and memories. The aim was to explore and understand the lived everyday world from the residents' own perspectives, encouraging interviewees to provide descriptions of experiences and specific situations, focusing on specific themes while avoiding preset categories and maintaining an openness to unexpected content and digressions (Kvale and Brinkmann, 2009).

At the same time, attention was given to avoiding participant fatigue. The complete set of questions included twelve items on how, how often and with whom older adults experienced and consumed music, their motivations for doing so, any personal benefits they perceived to derive from music, and their past habits relating to music. The interview schedule is provided in Appendix A1.2.

5.1.3. DATA ANALYSIS

After verbatim transcriptions of each audio recorded interview (in Italian), the analysis followed six stages: repeated reading for familiarisation with the data; generation of initial codes; search for themes; review of the themes; definition and labelling of themes and subthemes; and producing the report. The analysis was conducted independently by me and another member of the research team (Carla Pedrazzani) and we cross-checked our work at each stage.

The ethics committee (Ethical Committee of Canton Ticino) agreed that express ethical approval for this phase of the project was unnecessary because of the study design and participants' voluntary participation. The research team nonetheless carried out due diligence checks to confirm that the procedures for participant recruitment, data collection, data analysis, data storage and dissemination all met current standards for research ethics (cf. Guidelines of the Conservatoires UK Research Ethics Committee, www.conservatoiresuk.ac.uk). Pseudonyms are used for participants where quotations from their interviews are given in the results section below.

5.2 RESULTS

SAMPLE CHARACTERISTICS

Eight participants reported prior, significant involvement in music: one was a pianist at professional level, two had studied piano for some years, one studied singing and played recorder as an amateur, one played drums as an amateur, two sang in church choirs and one in a choir as a child. Four participants regularly took part in singing activities organised by their nursing home. As shown in Table 2, four themes emerged from the analysis: (1) music, identity and life stories; (2) music, emotions and wellbeing; (3) individual and social engagement with music; (4) music, habits and agency in nursing homes.

The analysis revealed that these themes relate, to some extent, both to listening to music and to singing. Furthermore, with the exception of the fourth theme, each refers both to past and present experiences.

TABLE 2. THEMES AND SUBTHEMES ARISING FROM THE ANALYSIS OF THE NURSING HOME RESIDENTS' INTERVIEWS.

THEMES	SUBTHEMES
Music, identity and life stories	Music triggering autobiographical memories Music maintaining continuity with the past Music as a link to past people and experiences Musical preferences within individuals' life stories
Music, emotions and wellbeing	Positive emotions and musical engagement Functions of music
Individual and social engagement with music	Individual and group perspectives on music activities Singing as a means to social interaction
Music, habits and agency in nursing home	Decrease of use of music/music engagement Agency in nursing home Variety of appreciated genres and interest in unfamiliar repertoires

MUSIC, IDENTITY AND LIFE STORIES

Music played an important role in the life stories of many residents. This was expressed in their statements of the present value music had for them. Music was important in each stage of life, and encounters with it could take on great significance. Giovanna, who played the piano when she was young, stated:

I grew up in a family who considered music very important. And this still remains the case.

Paola too, who had never played an instrument, highlighted the significance of her past musical experiences:

Music was very present in my life. [...] I could give up everything, renounce everything, but I couldn't give up music.

Music was something intimate, which was found to be helpful in the retrieval and rediscovery of one's own personal dimension and to maintain continuity with the past. Music had an important role especially in triggering memories and in making links within one's own life story, even when memory or cognitive abilities had decreased. Sonia, who played the piano, expressed the intensity of these memories:

For me music is a pleasure, really a pleasure. It brings back many memories of my childhood and family [...] the first time they took me to the opera, I was four years old, and I attended Aida [...] my grandfather took me there [...] and I cried. I have to admit that 90 years afterwards...when I listen to that music I still find myself in tears (laughing).

Paolo stressed that music can also help people with cognitive impairments to feel alive and engaged:

Music can also help those who do not understand. It can help them feel alive.

Listening to music can spark recall of memories and significant periods of life very intensely. This may also provoke melancholy, and in these cases, residents preferred not to listen to certain music:

That Neapolitan song reminds me of my boyfriend [...] When I listen to it, I have goose bumps [...] because a song can remind me of my whole lifespan; it can trigger a memory of certain periods of life [...] I have a lot of memories – a lot of memories of nice music I liked – that I used to listen to at home [...] Because of this, I don't want to put myself through that, sitting there, listening to the radio. I can't do it. (Grazia)

In some cases, childhood experiences related to music seemed fundamental to lifelong memories. In this way, music was for some residents one of their main interests and passions. Parents and families had a crucial role in promoting this encounter, and thanks to them, music was still very important for these residents:

My father was a very good guide [...] and I have to say thank you to him because music is for me the most intimate thing [...] My father took me to concerts, even when I was a little girl. For me, music is the most beautiful thing. (Gina)

I had an aunt [...] who played Chopin [...] and thanks to her I discovered many of those pianists. (Sonia)

Some interviewees had in turn an important role in facilitating the encounter with music for their children, as with Carlo, who had a strong commitment to music as a concertgoer, amateur singer and recorder player, or with Simona, who sang in a church choir:

Once, I saw Mozart's Magic Flute in Zurich. It was the first opera I attended, when I was 12 years old. My son was 12 too and I took him to Zurich to attend a performance of that work, and he is still enthusiastic!

When nice songs of the Sanremo Festival were broadcast, I used to call my daughters: "Listen to this song!"

Some residents referred to specific episodes when music had a central role in making a moment unforgettable. In some cases, music was associated with a particularly happy period of life or a situation where the music itself was central:

I just happened to be there. I don't remember why, and...just that day they reopened the Jesuit

church. They performed a Mozart mass! Thirty years have passed, and I never forgot that, really. These things just hit you, and there is nothing you can do about it. (Sonia)

I was walking one evening, and I heard that music. I stopped. There was a beautiful woman who asked me if I liked that music, and I replied: "Yes, because it has the color of infinity". (Pietro)

Even the activities of music making were linked to the residents' life stories. The habit and the availability of singing and dancing in particular were linked not only to the collective dimension of nursing homes, but also to life experiences, especially those related to family and childhood. Olga, who sang in a church choir when she was young, stated:

I always sing. In my family all of us do the same [...] I always sang. In my home, we were always singing [...] At school we learned [an excerpt from Giuseppe Verdi's] Nabucco [...] Every time they sing it, I sing too.

Mario, who was a professional pianist, reported:

Some melodies just come to mind, from afar. A melody can come to me from my father or my sister.

Nevertheless, many residents were reluctant to sing or to undertake other music making activities because they felt that they did not have the ability or skills to do so. Harsh criticism of their singing during childhood had left an indelible mark which still undermined their willingness to sing:

I never sing, even when I am alone, no! I am off-pitch...I will not take part in singing or instrumental lessons because I do not have the sensitivity, the talent, the pitch, nor the musical inclination to learn. (Pietro)

I don't like [to sing]. I like to listen to others sing, but I don't sing. Many times they told me: "Don't come to sing with us because you bother us."...I am out of tune... (Giovanni)

Individual life stories also influenced musical tastes, which ranged from classical music to folk songs, including pop music and classical art songs. Musical tastes were

rooted in the life stories of everyone: they remained constant, but in many cases, they evolved and were broadened over the lifespan. In many cases, modern music was perceived as something very different than music of the past.

Consequently, it was not appreciated, it was deemed poor in conveying emotions, and it was frankly difficult to understand. The elements determining appreciation were very diverse and personal. Many residents referred to specific melodies and to the meaning of works that could reach the mind and the heart, or to situations and contexts in which their favorite works were heard, or to the beauty that engaged them and penetrated their experiences:

My tastes have not changed, but they carry on. The old song whistled by a student to his girlfriend belongs to me, is inside me, just as Beethoven's Fifth Symphony. I don't mean that I understand one better than the other, but one integrates the other [...] Sometimes you are too engaged, you are even overturned by music. (Pietro)

Yes, I listen to music. I like the songs...I like to listen to [music because of the] songs I was introduced to many years ago. (Olga)

I like songs of the past because I think they are more meaningful than modern ones. (Oriana)

It irritates my nerves to hear today's songs because there is no feeling, there is no heart, there is nothing. They do not tell you anything. Past songs conveyed [something], like [those of] Claudio Villa, Johnny Dorelli, Little Tony, Gianni Morandi. There were a lot of songs that really struck the heart. The words themselves struck the heart. Today's songs don't say anything anymore. (Simona)

We are attracted by music because it is melodious, beautiful and also very intimate! Not everybody appreciates a work in the same way. Everybody has his own good moment with music. (Gina)

MUSIC, EMOTIONS AND WELLBEING

The emotions aroused by music, especially a resident's favorite music, were very intense and generally positive. Music provided pleasure and often joy, penetrated

intimate moments and affected residents deeply. Emotions had an important role in the ongoing singing activities offered by the nursing homes. Gina, Pietro and Giovanni strongly expressed this point:

Listening to music provides me with the most beautiful emotions, the most inner and deep emotions, that sometimes almost make me cry [...] there is just an emotion in the heart. [...] The tears arrive when there is something beautiful! [...] It also depends on the context in which I listened to certain works for the first time. [...] [These works] arouse images of something that give me pleasure.

Music is the heartbeat. We are not aware of our heartbeat, but it is a sort of continuous concert in every day in our lifespan. When I listen to [some] rhythms, they bring me to tears.

When I listen to music I have a lot of joy in hearing something new. For me, it is always something new.

Music helped people living in the nursing home and had positive effects on mood. It offered relief in sad moments and also cheered up residents. Music was seen as a companion and for some residents this importance increased over time.

Now I am no longer able to write as in the past, and so I am happy to be able to listen to music. Music is a part of my life, just as designing and writing. [...] It is something fundamental. [...] Perhaps this link grew even more while ageing. (Carlo)

Music helps me a lot to live here. [...] I listen to my music, and then I am peaceful. I don't bother anyone because living here is not easy. [...] We don't exist anymore! I lost my memory, but I still remember music. [...] Music keeps me company. [...] I like it very much because it is an enrichment [...] it is an intimate thing [...] but not sad [...] for me music is life. I listen to a piece of music [...] perhaps I am tired or I am sad, but my mood then rises up. (Giovanna)

"Spazzacamino", "Vecchio scarpono", they all are old songs that bring us back in time. I think that an hour spent singing is beneficial for everybody. (Giuseppina)

INDIVIDUAL AND SOCIAL ENGAGEMENT WITH MUSIC

The nursing homes offered several opportunities to listen to music collectively, which replaced private listening to music, which in many cases decreased when residents moved in. These opportunities were seen as important for meeting other residents and for accessing music in general. Some residents preferred this social listening to listening alone. Giuseppina and Sandra reported:

I listen to music [seldomly] but I am used to going to the music sessions. I go to chat there. [...] They provide nice concerts, which I like. [...] I need that music [...] and could spend hours listening because that really engages me.

I find myself in listening to music with others, always. I don't miss listening to music alone.

Other residents preferred listening to music alone, as this activity required a significant degree of attention and involvement. Maria for instance states:

I prefer to listen to music alone because in company I get distracted with all the talking

Singing was the most common music making activity in the nursing homes. It represented an important opportunity for coming together and sharing experiences of pleasure. Often this collective dimension encouraged the older adults to sing and to feel able to do so:

[In the music sessions] we all sing. [...] I am happy because I have a nice afternoon. [...] Close to me, on the right side, there is a 90-year-old man who has a beautiful voice. On the left side, there is the only person I knew before moving here and she has a beautiful voice too. So, we join each other and we sing together. (Giovanna)

I go downstairs to sing [...] but I need the company because I can't sing alone. (Simona)

I sing because it is nice. Music provides joy, and it is good for my heart. [...] Even though I am a little bit out of tune, when there is something to sing I sing too [...] for the sake of having company. (Sandra)

MUSIC, HABITS AND AGENCY IN NURSING HOMES

Unlike the previous themes, this one refers specifically to the present and to everyday life in the institution. The frequency of listening to music in nursing homes was variable, but in general, residents experienced a decrease of this activity after their arrival, and they reported wanting more opportunities to hear music. In some cases they did not have a radio or similar devices in their private room, while in other cases they did not want their music to bother the other residents, and indeed, the environment and the context, compared with their original homes, were sometimes not suitable for listening to music. Even sensorial and motor impairments were obstacles. Finally, some residents complained that the television broadcasts interesting music programmes too late in the evening.

Since moving here, I don't listen to music. At home, instead, I had more opportunities [...] you have to know that I had more than 70 albums of old songs. Then, I gave all of them away because here I can do nothing. (Simona)

I used to listen to much, much music, but now it's a little bit less. Unfortunately, there is very little music broadcast on TV. [...] It's a big mistake broadcasting the most beautiful cultural and musical programmes after 11PM. At that hour, I have already been asleep for two hours. (Pietro)

I listen to music less than before [...] because you know, you can't make noise, this is the problem: we have to be careful not to bother other residents. They are neighbors... (Candido)

I listen to radio very little because my hands hurt. I can't work the device [...] and in the evening, I can't see the display properly. (Paola)

Listening to more music would help me [...] especially at my age. (Paolo)

In a similar fashion, ageing processes, illnesses and motor impairments were obstacles to making music.

I played piano. Now my hands are destroyed. [...] I can't do it anymore. [...] Now I have a strong arthrosis, and it is very tough for me. I can't sing as long as I would, I am 94, but I sing on my own. (Giovanna)

I danced until I was 60. When I listen to music, I begin to tap my feet, I find it natural. [...] Sadly, I can't stand up. (Paolo)

I sang very well. Until last year, I could sing. Now I don't have the voice anymore [...] and I always have catarrh. [...] I want to sing. Even though I can't, I sing, because I need it. (Paola)

Although a widespread reduction in listening to music emerged, many residents declared with satisfaction that they were able to choose when and whether to engage with music. Carlo and Sonia, who studied music when they were young, stressed this point:

Fortunately, I am totally free currently to listen to music.

It happens that I listen to music. I still have some albums [...] if [the staff] provide something nice, I prefer to go and watch it on the big screen. [...] Yes, I feel free to choose when to listen to music, if I want more.

It also emerged that residents appreciated a wide range of musical genres and many of them were interested in approaching those they have not listened to in the past. In some cases, a strong desire to discover unfamiliar repertoire emerged, and residents considered that an enriching learning opportunity, not only with regards to listening but also to singing.

Yes, I am interested also in discovering new things. Often the radio plays tunes I don't have in my collection, then I listen to them. I am happy to listen to them. [...] As long it is something that engages me deeply! Something able to talk to my heart. [...] It would be nice to sing in a choir, but here they sing Ticino [regional] songs: folk music that I don't like. (Gina)

I like everything in music. I am very curious. (Paola)

I like to listen also to music I don't understand, which I try to understand because it is difficult. (Mario)

5.3 DISCUSSION

The findings of this study indicate that music is important for nursing home residents and that it is more than simply a pleasurable activity. Music was indeed strongly connected to individuals' identities and life stories, playing an important role in shaping their moods and promoting interpersonal relationships. Furthermore, despite some difficulties with living in the nursing home environment, it was generally possible for residents to engage with music in several ways.

These results align with those of previous studies. Many studies indeed suggest that music is, in many cases, used as a tool to obtain certain psychological and social benefits (Crozier, 1997; DeNora, 2000; Juslin and Sloboda, 2001; North et al., 2004; Sloboda, 1999), and this applies to older adults just as much as to others in society (Laukka, 2007). Through music, the residents involved in this study maintained a sense of feeling alive, with intense links to the past and with relevant people, periods and contexts recalled with pleasure. At the same time, a wide range of positive emotions were reported. As suggested by other studies (Cohen et al., 2002; Hays, 2005; Hays and Minichiello, 2005; Laukka, 2007), these effects of music were intense regardless of individual musical competences, and they also affected residents who experienced considerable health difficulties. This overall picture suggests facilitating access to music can play an important role in enhancing the wellbeing of residents, providing pleasure, joy, relief and other emotions.

These results also reveal that both individual and social engagement with music have a relevant role in nursing homes. On the one hand, a considerable interest and appreciation of listening to music on the radio and through other private devices emerged. It became clear that for some residents it was very important to maintain this kind of engagement as it allowed them to listen to music attentively and without distraction from the presence of other people. On the other hand, many residents welcomed musical activities offered by their nursing homes and were motivated to access music in social contexts as this facilitated interpersonal relationships.

The interviews revealed that singing sessions, in particular, took a prominent place among the initiatives offered by their homes, with associated experiences of happiness, engagement and commitment to others. These results resonate with those of studies

focusing on younger elders (Joseph and Southcott, 2018; Lally, 2009; Lamont et al., 2017, McLean et al., 2011; Pearce et al., 2016; Southcott, 2009) and suggests that nursing homes should be encouraged to offer such musical activity regularly.

The interviews revealed that access to music could sometimes be lacking, and due to health problems or to cohabitation arrangements in the home, many residents reported a decrease in their access to music and that their desire for it was often left unfulfilled. Responding to this need is crucial in at least two respects. Firstly, maintaining activities and habits as long as possible through ageing is extremely important for psychological, cognitive and physical wellbeing (Rowe and Kahn, 1997; WHO, 2002). Secondly, while many residents expressed a strong preference for repertoire in vogue during their youth, in line with research showing that one's strongest memories are generally linked to the timespan of between 10 and 30 years of age (Janssen et al., 2007; Rubin et al., 1998; Zimprich and Wolf, 2016), some interviewees were curious to approach unfamiliar music and to hear performances by musicians previously unknown to them. This suggests that musical activities can enhance the quality of life in nursing homes by providing learning opportunities and elements of novelty in daily life. However, considering the full breadth of these results, it seems that residents' abilities to make decisions about how, when and what music to consume is wide and that they appreciate this opportunity regardless of their musical knowledge and background. Such agency contributes to maintaining their sense of autonomy and control over their own lives (Creech et al., 2013), and it is aligned with the idea that "selecting and listening to one's chosen music may facilitate a sense of increased control in unfamiliar or threatening situations" (MacDonald, 2013, p. 7).

The results of the present research reinforce the idea that music can improve wellbeing in later stages of life. In particular, the themes which emerged here were close to the dimensions of the PERMA model (Seligman, 2011), a paradigm combining hedonic and eudemonic dimensions of wellbeing employed across numerous studies focusing on the effects of music making (Ascenso et al, 2017; Cromm, 2015; Lamont et al., 2017). As anticipated in Chapter 3 section 3.2, this model suggests that wellbeing is determined by the co-existence of five elements: *positive emotion* (i.e. optimism, serenity, and other pleasant feelings), *engagement* (i.e. feelings related to a strong commitment and interest toward what one is doing), *relationships* (referring to interpersonal relationships), *meaning* (related to the feeling that one's own life is important and has a deep meaning) and *achievement* (related to seeking and achieving goals considered relevant by the

individual) (Ascenso et al., 2017). Apart from the last, these dimensions are all reflected in the results of this study. Music, both through listening and making, can indeed stimulate the attention and the interest of nursing home residents and induce *positive emotions* which can improve mood. Furthermore, the music listening and making opportunities offered by nursing homes promoted interpersonal *relationships*, motivating residents to use common spaces and facilitating encounters with other residents and with the nursing home staff. Finally, connections between music consumption and identity emerged through the dimension of *meaning*.

Some limitations of the present study need to be acknowledged. Firstly, this investigation was confined to a small geographical area (Southern Switzerland), and the six nursing homes included in the research were comparable in terms of size and resident profile. It would be instructive to widen the diversity of partner facilities in subsequent research. Secondly, due to the exploratory nature of this study, a methodological approach was used which aimed to identify potentially significant themes and elements in an area that is still under-explored, rather than seeking causal relationships or establishing generalisable results. Many questions still remain unaddressed, and further research, using appropriate methodologies, should be directed towards observing the precise connections between music, the wellbeing of residents and their identities even more closely.

5.4 CONCLUSIONS

This study aimed to investigate how and to what extent residents in nursing homes have access to music, and what function and role engagement with music plays in their lives. The findings of this study suggest that music is important to residents in nursing homes, regardless of their musical competence. It is strongly linked to their life stories and plays an important role in improving mood and in facilitating and supporting interpersonal relationships. Nevertheless, listening to specific songs can provoke melancholy, and past criticism of singing ability can have indelible effects in terms of motivation toward this kind of engagement with music.

Notwithstanding good levels of agency reported by many participants, access to music can be problematic or unsatisfactory for some residents, given the constraints on

health and communal living that they face. Considering the benefits that both listening to and making music can clearly offer, it is important to invest in planning and carrying out initiatives to facilitate access to high quality musical experiences for residents in nursing homes.

CHAPTER 6

STUDY 2: ART FOR AGES: THE EFFECTS OF GROUP MUSIC MAKING ON THE WELLBEING OF NURSING HOME RESIDENTS ²**INTRODUCTION**

From the literature discussed in Chapter 1 (from section 1.7 to section 1.11) it emerged that engagement with music, in its different forms, can offer a wide range of benefits to older adults. However, in most cases the average age considered has been around 70 years old and the population involved was community-dwelling, while the literature addressing residents in nursing homes focuses mostly on the effects of therapeutic music interventions. As a consequence, the potential of music-based interventions aiming to facilitate access to artistic products and processes, without explicit therapeutic objectives, is still under-researched in the context of nursing homes.

The study reported in this chapter aims to address this gap by addressing research questions 3 and 4 of this thesis, which are:

RQ3: How do residents in nursing homes experience group music making activities?

RQ4: What effects on their health and wellbeing do they perceive as a result of doing these activities?

This study focused on residents' perspectives and aimed to clarify the meaning of a specific music-based intervention for them and the effects they perceived, if any, by participating in it. Clarifying these points can offer a contribution to improving the health and wellbeing of this population. This research is inspired by the concept of active ageing (WHO, 2002) and embraces the ideas promoted by the World Health Organization to move from a "needs-based" approach to a "rights-based" approach in the context of long term care, defined as a "the system of activities" aiming to promote "independence, autonomy, participation, personal fulfilment and human dignity" of frail people. (WHO,

² This chapter is largely based on the following paper: Paolantonio, P., Cavalli, S., Biasutti M., Pedrazzani, C., & Williamon, A. (2020). Art for Ages: The effects of group music making on the wellbeing of nursing home residents. *Frontiers in Psychology*, 11, Article 575161. — <https://doi.org/10.3389/fpsyg.2020.575161>

2002, p. 22; see also Chapter 1 section 1.3.2). This study attempts to ensure the highest quality of life possible for nursing home residents, who are seen as citizens whose rights should be preserved and whose social participation, and thus also access to art, should be encouraged. The method used in this study is described in section 6.1, which reports the study design, the recruitment procedure, the data collection and the data analysis. Section 6.2 reports the results, which are discussed in section 6.3.

6.1 METHOD

6.1.1 STUDY DESIGN

As anticipated in Chapter 4 sections 4.4 and 4.5, this investigation was based on *Art for Ages (A4A)*, a 10-week programme focusing on group music making. Four teams of musicians delivered a 10-week programme of group music making in four nursing homes, one per home, each session including singing, rhythm-based activities, and listening to short live performances. An experienced workshop leader (Silvia Klemm) and myself acting as double bass player were part of all four teams to ensure consistency of delivery and interaction with participants. Each music team also included 4-5 university music students. The students, who already possessed skills of advanced instrumental performance, were specifically trained to act as facilitators of music workshops in nursing homes (see Chapter 4 section 4.4.2 and Appendix A4.1). Due to a quarantine for a serious influenza outbreak, the 10-week programme was interrupted for seven weeks in one nursing home. As a consequence, this study considered only the residents of the three nursing homes where the programme was carried out without interruption.

6.1.2 PARTICIPANT RECRUITMENT

Each music team delivered a public event in their assigned nursing home to introduce the musical activities proposed to residents. Each resident was offered the opportunity to participate in the programme, and at the end of each session, the number of participants was noted by the nursing home staff.

The inclusion criteria for this study considered only residents who attended at least 8 sessions and who were able (in terms of their health) to be interviewed. Forty-one residents (34 women, aged 72-100 years, mean = 86.5, SD \pm 7.5) met the first requirement and between them 22 (16 women and 6 men, aged 72-95 years, mean = 83.6, SD \pm 6.9) met both criteria. Table 3 reports the characteristics of the participants.

TABLE 3. PARTICIPANT CHARACTERISTICS.

NURSING HOME	PARTICIPANTS (PSEUDONYMS) (N=22)	AGE (72-95 YEARS, M=83.6, SD \pm 6.9)	GENDER (16 F, 6 M)
1 (n=10)	Carol Kate Helen Peter Robert Paul Amy Jane Lucy Maria	75 75 87 95 85 72 79 81 75 77	Female Female Female Male Male Male Female Female Female Female
2 (n=6)	Ingrid Frank Rosie Tina Dawn Elisabeth	95 91 83 86 83 80	Female Male Female Female Female Female
3 (n=6)	Jane Emily Sarah Miles Fiona Alfred	94 88 90 92 78 80	Female Female Female Male Female Male

6.1.3 DATA COLLECTION

Data were collected through semi-structured, individual interviews (Kvale and Brinkmann, 2009), conducted by me. The interviews took place in Italian either in residents' private rooms or in communal spaces in the nursing home during the week following the last music session. The questions invited interviewees to evaluate the programme, to talk about its effects on themselves and on their relationships with other people involved in the sessions, and to provide a self-evaluation of their musical abilities. The full list of questions is provided in Appendix A2.3. As a consequence of being involved as a musician throughout the programme, I was sensitive to the possibility of influence over participants' answers and I did my best to encourage each person to

express their ideas and opinions freely, inviting them to describe specific situations in depth and offering space for unexpected content and digressions (Kvale and Brinkmann, 2009). Further details about my approach to conducting the interviews are provided in Chapter 4 section 4.6.1. The interviews were audio recorded with permission of the participants.

The study was granted ethical approval by the Ethical Committee of Canton Ticino (CE 3030-2016-00193).

6.1.4 DATA ANALYSIS

I transcribed the interviews verbatim, and then thematic analysis (Braun and Clarke, 2006) was applied in collaboration with a member of my supervisory team not involved in A4A (Michele Biasutti). All the transcripts were considered and manually coded with the aim of answering the research questions. The codes were organised into categories, themes and sub-themes. I submitted the resulting coding scheme to the other members of my supervisory team (Aaron Williamon and Stefano Cavalli) and all the elements considered ambiguous or redundant were discussed and modified accordingly. At the end of this stage, each interview was re-analysed and annotated by me and discussed with the researcher external to the project according to the following criteria, determined by the coding scheme:

- role attributed to music
- changes in the role of music due to the programme
- nature, intensity and duration of the effects of the sessions
- overall evaluation of the programme
- interpersonal relationships
- experience of making versus experience of listening to music during the sessions
- peculiarities (e.g. relevant exceptions, individual differences, critical issues)

Grouping rich accounts of data in this way allowed for a deeper and more detailed understanding of the complexity and the nuances implied by each criterion. In order to reconstruct individual experiences of the programme, I then analysed each interview

again, observing the interactions of these criteria for each participant. This analysis was discussed within the research team and led to the elaboration of a summary of the results.

6.2 RESULTS

As shown in Table 4, six themes and twenty-three sub-themes emerged from the analysis. To protect the anonymity of the participants, pseudonyms are used.

TABLE 4. OVERARCHING GROUPS, THEMES, AND SUBTHEMES ARISING FROM THE ANALYSIS OF RESIDENTS' INTERVIEWS FOLLOWING THE 10-WEEK GROUP MUSIC MAKING PROGRAMME.

OVERARCHING GROUPS	THEMES	SUBTHEMES
Effects of the programme	Positive effects	Happiness Fulfilment of the need for novelty and engagement Activation of autobiographical connections Anticipation of the session
	Negative effects	Melancholy provoked by music Disappointment based on expectations
Experience of the programme	Role of music in residents' lives	Interest in music and its positive effects Ability to listen to music autonomously Relationship with people who were active in music Relationship with singing Relationship with instruments
	Learning and discovery	Pleasure in producing sound Enlargement of musical knowledge Enhancement of engagement in music listening
	Interpersonal relationships related to the participation in the programme	<i>With other residents</i> Opportunities to meet Mutual support <i>With the music team</i> Gratitude Familiarity Intergenerational encounters Encounters with new people
	Recurring concerns in residents' daily lives	Feelings of isolation Doubts about cognitive abilities Lack of novelty and engagement

EFFECTS OF THE PROGRAMME

The effects described by participants belong to the dimension of mood and emotions and taking part in the programme provoked happiness and other positive feelings. It emerged from interviews that this is mostly due to how the overall programme was carried out, rather than to its specific aspects:

[The programme] had very positive effects on me because I liked very much everything you did. [...] I was very happy! I was really happy! [Every time] I spent a lovely lovely lovely hour. (Sarah)

These positive feelings may be linked to the novelty introduced by the programme into the everyday lives of the residents or to the activation of ties with their own life experiences:

You came here and made us spend an hour in happiness, with something different from what we do every day. It is a wonderful thing to have something engaging us and able to change our day. (Rosie)

I have been happy because [the programme] is something enabling me to be myself again, namely to listen again to music that I did not listen to for a long time. (Tina)

Every time I saw you [the interviewer] coming with your double bass...I liked it! I was seeing my father [who was double bass player]! (Peter)

For these reasons, the session day was anticipated with happiness:

I was always waiting for [...] Wednesdays, then I was waiting for 10.30. It was almost a sort of romantic relationship. (Miles)

We were looking forward only to Fridays because it was the lesson day! It was something enjoyable for us, and when you like something, you are looking forward to that day. (Lucy)

In only two cases, the effects on mood were not positive. It emerged that memories recalled by music provoked melancholy for a participant, while another participant reported that its expectations were not met because the goals of the programme were unclear:

My character is a little melancholic. If I listen to music, or maybe if you get out unintentionally some music related to my youth, this makes me sad. (Maria)

I found [the programme] almost pointless...because it left me indifferent. I just laughed while we were using the basket making “tac tac, tic tic”. And I was wondering “What is the point?”. (Robert)

EXPERIENCE OF THE PROGRAMME

The analysis revealed that the aforementioned effects are related to four themes. The first is connected to the importance of music in the life of residents, the second with the learning opportunities offered by the sessions, the third with the interpersonal relations experienced during the programme, and the fourth to the usefulness of the programme in coping with recurrent feelings and concerns.

ROLE OF MUSIC IN RESIDENTS’ LIVES

Although the interviews revealed diversity among residents regarding their musical backgrounds and their involvement in music, it emerged almost unanimously that music was an important and valued art form, able to induce emotions and affect mood:

I like everything related to music and to musical instruments. It makes me happy! I think it benefits the spirit. For me, music is life! (Ingrid)

I think music is very important for elderly people. If you listen to a song or sing, you feel younger, you feel more alive. (Dawn)

For me music is art, so I feel grateful when it is available. Everything related to art and able to reach your hearth is always welcome... If we take art away from life, what’s left? I could say music is a relevant part of my life, definitely, even though I never played an instrument. (Tina)

Music tells me something! It really does that! I am not indifferent to music, but I am not used to sitting down just to listen to music. (Robert)

This interest in music manifested itself through the regular use of radio and similar devices. However, listening to music autonomously was not always completely satisfying because the impact on mood may have been negative:

Every night I am always listening to Rete2, always hoping to listen to good music to take me to sleep. Music gave a lot to me! And it still does! I can't read anymore, and often I don't like television broadcasting. (Ingrid)

There are songs that give me joy and songs that give me sadness. (Rosie)

Beside the benefits associated with music listening, music was relevant because someone important in their life was actively involved in music, or because they themselves used to sing:

My brother worked in an orchestra... In Switzerland we have the Suisse Romande Orchestra, which broadcasted concerts on the radio, and I worked there. Consequently, some interest in music remains. (Maria)

I still remember singing with my husband, when travelling by car. When leaving for holidays, we would sing mountain songs along with our children. (Lucy)

Beyond that, singing was still an important resource and residents who used to sing maintained their music making because they were, to some extent, aware that it was beneficial and kept negative feelings away. It emerged that some residents accessed these benefits irrespective of their abilities, while others, concerned about their limits in singing, sang only in specific conditions:

For me, music is a great support for the spirit! Because while you are singing you don't have sad thoughts, or perhaps you do, because you remember someone you loved. Singing is good for me, I sing gladly. (Ingrid)

When you sing a song, even though you didn't compose it, you sing it gladly because it is something that awakens you. It wakes the body and soul. Furthermore, it keeps away some thoughts like: "Now I just have to wait to die" ...no! (Dawn)

If there is a singing group, I also sing, because I still have the voice to sing. But I don't sing alone!

(Fiona)

I always sang at home. But now I don't anymore have my past voice, and this make me laugh because I think: "Gosh, if someone heard me singing he would throttle me!". But I sing anyway!

(Amy)

Cases reflecting active involvement with musical instruments referred only to the distant past. Nevertheless, it emerged from the interviews that this kind of musical activity, no matter whether actual or contemplated, was still in the thoughts and desires of residents:

I began to play piano in early childhood. My sister played violin, and we performed duets. [...] Now I can't play because my hands don't work anymore. Furthermore, here it is impossible to play piano. (Ingrid)

I always liked music. Sadly, I wasn't able to study it. I liked the piano, but I could not afford to study it. [...] In my village a guy owned an accordion, and sometimes he allowed me to play, and I quickly I learned to play the melody by ear. Afterwards, you know, you leave [the village] for work, and you don't stay in touch anymore. (Dawn)

After all, I miss an instrument. My mother was right: "You could at least study piano!". Now it is too late (smiling). (Miles)

LEARNING AND DISCOVERY

The positive emotions reported by participants were also related to the numerous learning opportunities offered by the programme.

Taking part allowed residents both to receive information and instructions from musicians and to manipulate the instruments used. With reference to the latter point, the opportunity to play percussion instruments, exploring the diverse sounds in a friendly and playful environment, provoked curiosity and fun:

Well, I liked the triangle very much, I really liked having that small object to beat! I also liked the small drums and the bells. [...] We wanted to try them, and we really liked it! [...] Playing those small instruments was really nice and enjoyable. (Sarah)

We had fun, like a child provided with sticks and allowed to play... (Robert)

The musical interaction within the group had a central role in providing the pleasure of producing sounds during the sessions. That was engaging because, on the one hand, this interaction required attention and, on the other hand, the mistakes and the musical imperfections were funny and intriguing:

I also had laughs, when someone made this and another made that [he mimes two uneven gestures]... It happens when one gets old, but it was funny for me. (Paul)

Having to concentrate was lovely too, whether we were playing drums or whatever else. It was also funny. (Jane)

Musical activities were experienced with happiness and engagement especially because they were considered “proper” learning opportunities, relating to very diverse aspects connected to music. The interviews revealed positive thoughts about the overall design of the programme and the progress made session after session. A resident expressed disappointment as the programme ended without any special activity:

For us it was a sort of learning through playing. I mean: as you teach children how to play, you also teach the elderly how to play. [...] At the beginning we took it [the programme] as a joke, as a way to have laughs. But, little by little, we understood that while having fun, we were learning something. (Lucy)

At the beginning we did our tasks poorly, while now, at the end, we do them much better! I just observed that. [...] I was used to chatting a little with all of you [members of the music team], and I felt gradually more secure. Yes...making music together reduced the awe I felt, definitely [...] and it made everybody happier! (Carol)

I expected who knows what! It was the same from the beginning to the end. [...] We wanted something for the conclusion! But it was good to deliver this programme. (Robert)

The combination of musical instruments and playing music with common objects was especially appreciated and represented a surprising revelation and discovery:

I didn't believe one could make music using those [objects and small instruments], but it is possible. I heard, and I am happy for having observed and learned that. (Emily)

You taught us that actually there are situations where one can make music even with simple objects. [...] Let's consider the grater, for instance: who knew that with such a tool you could make music? Nobody! And then we learned also that. (Lucy)

Considering the musical aspects more closely, participants refer to their improved ability to keep rhythm, their understanding of processes related to music creation, and their new capacity to approach and appreciate unknown repertoires. The time devoted to anecdotes and information related to the biography of famous musicians was, in turn, appreciated:

Now I would evaluate 8 [grade 1 to 10, related to the ability to keep rhythm] because I just learned what it means to keep rhythm. (Carol)

It was really very interesting! [A way to] discover that music is something different to what I believed. I could not understand how you musicians do it...and then, I learned how one can make music! (Amy)

Russian music, in particular, was unfamiliar for me, and I liked it very much. (Peter)

Every time we discussed something about the life of Mozart or somebody else, that was nice too! (Elisabeth)

In the rhythm-based activities, the learning opportunities were generally welcomed regardless of familiarity with the songs and activities proposed. However, the inclusion of unfamiliar songs in the singing-based activities required some effort for participants:

Dealing with the songs you know is simpler. You go in effortlessly. [...] It is a little more tough to deal with learning new songs because you have to study, you have to read... (Dawn)

I preferred the songs I already knew. To sing the other [unfamiliar] songs, you have to learn them. [...] When they [the musical team] teach you, when they engage you in singing German songs, you never learn them completely, and this is a problem. I know, they give you also the sheet (with lyrics), but it becomes a little difficult! You have trouble. (Frank)

Taking part in the programme had effects also on listening to music, making this activity more engaging:

Before, I was used to listening to music “en passant”. Now, I listen to it differently...with more attention. Now I try to listen a little more deeply, and I find again information I was taught at school. (Paul)

I think that, now, I listen more to the music than to the lyrics. I mean, before, I was focused mostly on lyrics, now instead I am almost more focused on music than on lyrics. Before I listened to lyrics but not to the music! These days I think: “Gosh, this music is wonderful!” (Lucy)

INTERPERSONAL RELATIONSHIPS

The effects reported by participants were related to interpersonal relationships in two respects: relationships with other residents and with members of the music team.

RELATIONSHIPS WITH OTHER RESIDENTS

In the context of nursing homes, the programme constituted an opportunity to meet, consolidating relationships between residents and offering conversation starters, particularly about musical topics:

I talked with other residents! Even last Friday, with the lady close to me. We talked about music and operatic arias. (Amy)

I talked mostly with my friend Lucy. Yes, we talked a lot, and we are very happy about the whole programme. I would not say I previously had a direct relationship with other [residents]. But everybody knows each other better through making music! Definitely! (Carol)

In some cases the programme promoted the mutual support and the sharing of impromptu and spontaneous musical activities:

A person I became friends with, who also participated in the programme, liked it too. She has some problems with memory, and she asked me: "Please remind me when the music session is so I can join you", and last time she went before me and kept the place for me. She liked the programme a lot and taking part in it together made her happy. (Sarah)

We all felt well, and sometimes, in the evening, we sang that ritual opening song "siamo qui... siamo tutti qui" (singing). (Dawn)

Nevertheless, the data also reveal that, due to individual attitudes or to the recent relocation to the nursing home, taking part did not affect some participants' relationships with other residents:

The relationships [with other residents] remained the same. After all, I am not a chatterbox. When I come across somebody I salute them; I chat with them. (Miles)

Well, it's not been that long that I moved here, barely a year. Then I talked very little with other residents (with a sad tone). (Maria)

The interactions which occurred during the sessions, and the concentration demands of the activities also brought small frictions between residents to the surface:

There was a lady in the group, odious and even ugly, who was always out of time. And when I looked at her, I went out of time too.... When one makes music and brings the time, you can't go out against the time! (Miles)

I don't like people who always want to prevail. Unfortunately [in our group], there was a lady with this flaw, and this gets me nervous. She always prevails, always! Now I let go. Why should I get nervous? (Rosie)

RELATIONSHIPS WITH THE MUSIC TEAM

The encounter and the interactions with the music team were positive. The interviews often reveal feelings of warmth and gratitude:

I bonded with each of you (smiling); you were lovely and kind. Did you notice I came to greet you at the end of each session? Honestly I felt very well with you. (Sarah)

First of all I was delighted to be acquainted with you, people taking care of me and my peers. (Emily)

Students avoided a formal and detached approach with the residents, and this was unanimously appreciated. The friendly, serene atmosphere established throughout the programme promoted empathy and triggered ties with residents' life experiences. The encounter between different generations had an important role in this sense:

I liked [the relation with musicians]! That reminds me of the time when my son was in high school, and I felt as if I could feel their problems and share with them my problems. Do you know what I mean? (Maria)

The guys were very, very nice! They made themselves available to make us able to do good work, and they achieved that! They were very lovely, yes – wonderful and lovely. The flower of youth! (Elisabeth)

Due to personal habits or individual character, a few residents taking part in the programme did not experience meaningful interactions with the music team:

I am not very sociable...I made my music, I followed the instructions, and that's all. (Paul)

Besides personal interactions, the arrival at each nursing home of the music team offered an opportunity to see new faces and figures. Residents found it interesting to observe the personal and musical interactions within the team and appreciated the students' commitment and energy in doing their work:

I liked it very much because it was clear that there was a strong chemistry between you musicians and that you enjoyed making music together. (Sarah)

I liked that opening ritual song because I thought: "It also is a sort of welcome". [It expressed] your pleasure, the pleasure perhaps you had in the same way we had. (Elisabeth)

RECURRING CONCERNS IN RESIDENTS' DAILY LIVES

The interviews offered room for thoughts related to everyday life in the nursing homes and to the meaning of musical activities within this context. In this regard three subthemes emerged. First of all, the opportunity to take part in the programme represented a valuable opportunity to limit the feelings of isolation perceived when living in a nursing home:

Your idea is very good, in that way we don't feel completely lost, we [see] more people and [we have] more interactions. [...] Here many [residents] cannot even move from their chairs. (Emily)

In my opinion music is extremely important for the elderly. If you listen to a song, or if you sing it, you feel younger, you feel more alive [...] do you know what I mean? Because in being just nothing, one regresses. (Dawn)

For residents strongly interested in specific music genres, the feeling of isolation is explicitly related also to their musical tastes, as it may not be possible to share with anyone their passion for specific repertoires:

I like very much classical music too, but it's not easy! Because...not everybody is used [to that]. I am talking about people living here...Here we are all old! Senile! (She laughs)...Believe me, it's not easy to live here. (Ingrid)

I think people living here are not very musically cultivated. The only music they enjoy are the ditties, "La bella lavanderina" [a folk song], and that's all. [...] I like any kind of music, but to listen to a recording it's not the same. With you musicians one can talk and share impressions about music and about the feelings it provokes. (Tina)

As already discussed, the programme was to a significant extent experienced as a

learning opportunity. Nevertheless, some residents revealed doubts about their own cognitive abilities:

I would like to study, but perhaps the brain regresses. (Dawn)

[With regards to the possible changes and improvements of the programme] I would not change it so much, no. We are quite limited, in the truest sense of the word. (Carol)

Beside the thoughts related to learning, the interviews reflected thoughts related to novelty and engagement, and in particular attention and imagination which were considered under-stimulated by some.

[The programme] was positive mainly because one learns to pay attention, which is not something we have to do so much here. (Carol)

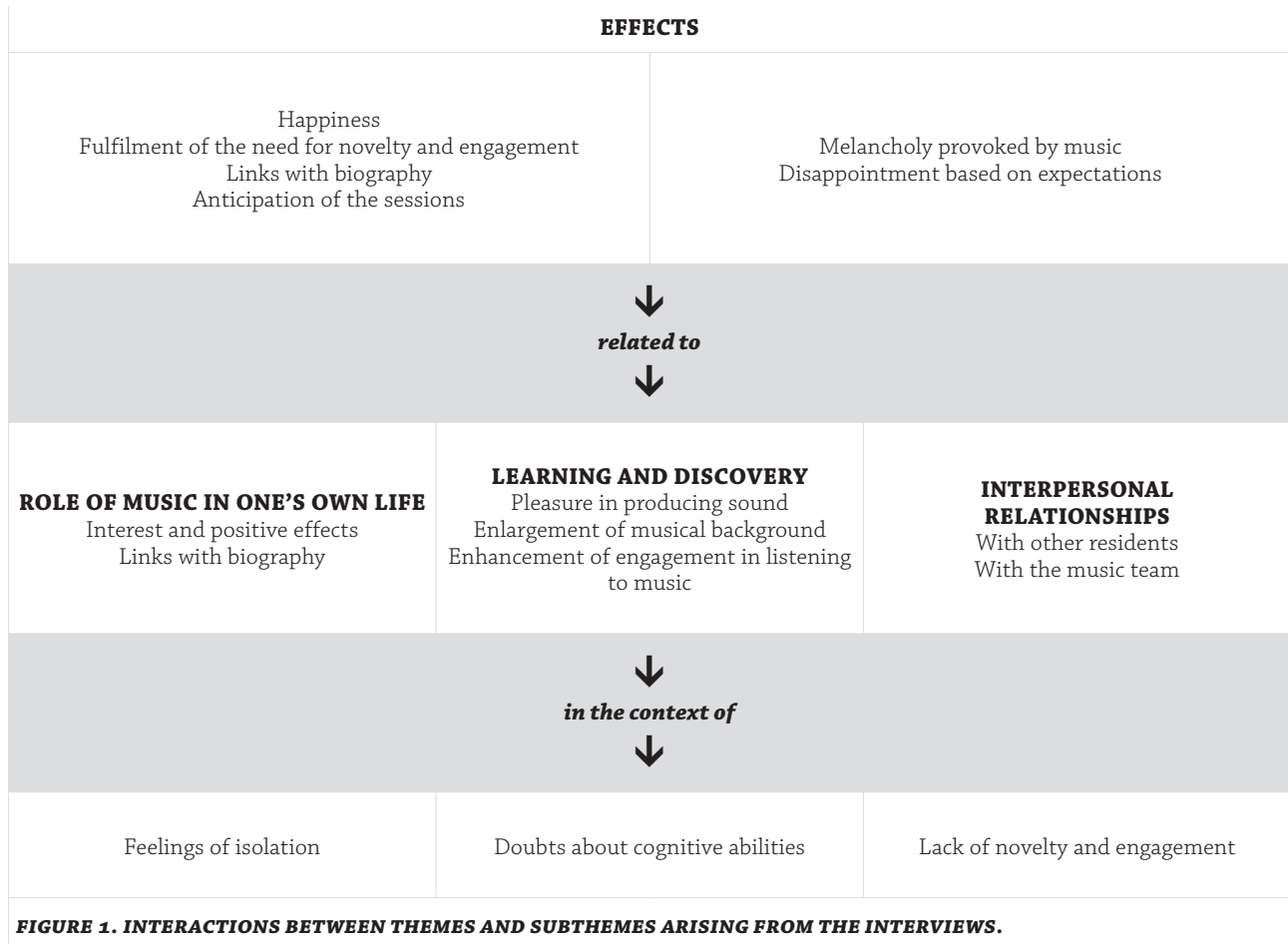
I think that [during the sessions] our imagination is very stimulated. The programme supports our imagination. (Miles)

6.3 DISCUSSION

This study suggests that the programme of group music making had effects on the mood and emotions of participants and, to some extent, enhanced autobiographical memories. These effects were related to three elements: participants' interest in music, their appreciation for the learning opportunities included in the programme, and the interpersonal relationships promoted by it. The results are aligned with those of other studies (Creech et al., 2014; Hays and Minichiello, 2005; Perkins and Williamon, 2014) and are novel as they reflect the context of nursing homes, as participants reported also feelings of isolation, doubts about their own cognitive abilities, and a lack of novelty and engagement.

The overall picture emerging confirms the idea that the benefits perceived from the engagement with music derive from complex processes, which include diverse dimensions largely influenced by idiosyncratic needs and circumstances (Perkins et al., 2020). In this case, as illustrated in Figure 1, the results suggest that this programme has

had mainly positive effects as it facilitated access to something considered important, offering learning opportunities and promoting interpersonal relationships in a context where novelty and engagement are sometimes missing.



Residents reported mostly positive effects, and this seems due to the fact that the programme offered, in an environment where they sometimes lack a sense of novelty, a combination of receptive and active engagement with something they considered important. Thanks to the ability of music to trigger memories and to strengthen links with one's identity and biography, taking part in the programme represented a valuable opportunity for residents to stimulate and to value their cognitive abilities. Furthermore, the collective dimension of the programme facilitated interpersonal relationships. This element seems particularly important considering the feelings of isolation reported by interviewees and often experienced in the context of nursing homes (Costa et al., 2018a, 2018b). In this regard, it emerged that the presence of students, who were seen as young yet highly skilled people, both as artists and music facilitators, had a crucial

role. This overall picture seems in line with the recommendations of the World Health Organization related to the quality of life in long term care, which stress the need “to ensure that a person who is not fully capable of self-care can maintain the highest possible quality of life, according to his or her individual preferences, with the greatest possible degree of independence, autonomy, participation, personal fulfilment and human dignity” (WHO, 2002, p.22).

A deeper analysis suggests that each of the three components of *group*, *music*, and *making* had an important role in the residents’ experiences, and the majority of themes and sub-themes to emerge were related to a combination of at least two of them.

The relevance of *music* was crucial: participants were delighted to take part in the musical activities. In some cases, they waited the whole week for the session, and by attending it they strengthened links to their memories and identities. Both listening to and making music improved mood and stimulated attention and imagination, in agreement with other studies (Costa et al. 2018a, 2018b; Hays and Minichiello, 2005; Lally, 2009; Laukka, 2007) which also show that music is often considered beneficial to wellbeing (Perkins et al., 2020). In addition, the programme elicited positive emotions and represented a pleasant novelty because it offered the opportunity to listen closely to high quality live musical performances and to approach music making supported by and interacting with professional musicians.

In this context, residents appreciated the opportunity to discover works and composers previously unknown, satisfying their curiosity and evoking experiences from their school days. Consequently, and in line with previous studies (Costa and Ockelford, 2019; Hays and Minichiello, 2005; Perkins and Williamon, 2014), music was seen as something engaging and understandable, and from the interviews it emerged that the opportunity to increase one’s cultural background and to acquire new knowledge was greatly appreciated. While the positive effects of familiar or preferred music on older adults are well documented (Costa et al., 2018a; Southcott and Nethsinghe, 2019) as well as the tendency to determine musical tastes in earlier stages of life (Zimprich and Wolf, 2016), these findings related to the curiosity and the enjoyment in discovering new repertoires invites a deeper consideration of the role and the possible benefits of music in the latest stages of life.

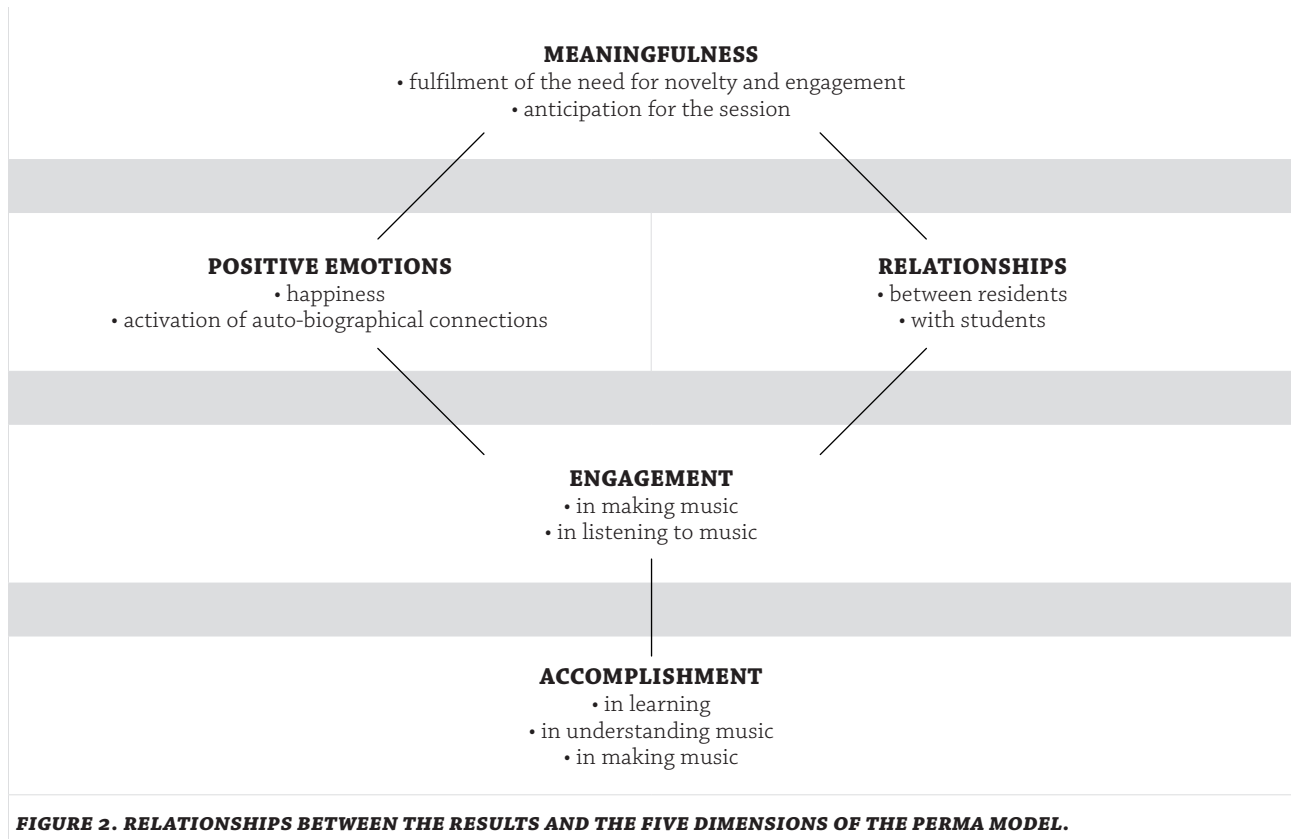
The dimension of *making* had an important role too, as residents were able to “make” for themselves, having fun in experimenting and being allowed to explore in a friendly, informal and non-judgmental environment. That seems to confirm the relevance of learning opportunities for older adults (Formosa, 2002, 2012) and the crucial role of facilitators (Hallam et al., 2015) in a context that may be perceived as lacking in stimuli and where individuals may doubt their own abilities. Considering more closely how singing and drumming were experienced, it emerged that learning new lyrics can in some cases be challenging and demotivating, especially with songs in foreign languages. At the same time, singing popular songs linked to participants’ childhood or youth was particularly engaging, and residents born in Spain or in the German-speaking regions of Switzerland appreciated the inclusion in the repertoire of some songs in their mother tongues. With regard to percussion instruments used, interviews revealed that the opportunity to use common objects rather than proper instruments stimulated the curiosity and imagination of residents, both in terms of achievable sounds and of the atmosphere and moods evoked. Furthermore, coupling common objects with proper musical instruments contributed to creating a cheerful and informal environment, encouraging some participants to overcome their shyness.

The dimension of *group* was, in turn, essential, and this programme made it possible to promote two distinct kinds of social relationships. Firstly, the encounter with the music team and its individual members, who brought with them a strong element of novelty and excitement into the context of the nursing home and stimulated feelings of gratitude and familiarity. Secondly, in many cases the dimension of *group* contributed to strengthening the relationships between residents themselves, as the programme offered opportunities to meet, chat and offer mutual support in a fashion similar to that highlighted in the literature on community music and participatory arts (Lally, 2009; Lamont et al., 2017; Varvarigou et al., 2013).

Negative effects occurred in only a few cases. The ability of *music* to modify the mood and elicit emotions can provoke feelings of melancholy or enhance depression. These effects, while confirming the importance of allowing individual choice in selecting music (Costa and Ockelford, 2019; MacDonald, 2013), point to the importance of including a wide range of musical styles, genres and repertoire in such programmes. With regards to the combination of *making* plus *music*, a participant clearly expressed disappointment as the programme did not include an overt climax or a special event at its end. This is a

clear suggestion about how to improve such an intervention, and in recent years, several studies have indeed included performances (e.g. the *Rhythm for life* and *Music for life* programmes).

Considering this overall picture through the lens of the PERMA model (Seligman, 2011), the findings can be summarised as illustrated in Figure 2.



These results resonate with the idea proposed in previous studies (Costa and Ockelford, 2019; Hays and Minichiello, 2005; Lamont et al., 2017; Southcott, 2009) that music has a *meaningful* role even in the late stages of life, as in its different forms of consumption it can trigger autobiographical memories, reinforce identity, and stimulate the most intimate and spiritual dimensions of individuals. In line with earlier studies (Laukka, 2007; Varvarigou et al., 2012), the interviews also suggest that taking part in a music programme provided *positive emotions* in the nursing home context, and that the collective dimension of the activities proposed increased in significant and valuable ways the interpersonal *relationships* of residents. Considering in detail how interviewees described their experience of the programme, it emerged that the combination of musical content and interpersonal interactions made residents motivated and interested

throughout the programme, of which both the active and receptive components were considered *engaging*. Finally, due in particular to the active component of the programme and to the supportive approach of the music team, it emerged that this kind of experience provided a sense of *achievement*, as residents reported improvements in their singing and rhythmic skills as well as in their ability to understand and appreciate music. The overall picture indicates that both making and listening to music can be engaging activities for nursing home residents, capable of enhancing wellbeing regardless of the frailty and multimorbidity that can affect people in the fourth age.

Furthermore, it emerged that the music students play a key role in these effects, as their participation provided both social interactions and aesthetic experiences considered *meaningful* by residents. These results are encouraging for further work of this type, with three notable avenues for future initiatives. Firstly, it is important to invest in training programmes for musicians that combine high competences both as music performers and as music facilitators. As shown here, this can help satisfy residents' desires for music and to facilitate their access to and participation in artistic content and processes. Secondly, this study was confined to 10 sessions behind closed doors; carrying out longer programmes, including some public events, may shed more light on the potential long-term effects of group music making as well as the impact on individual wellbeing in terms of the *achievement* and *relationships* dimensions of the PERMA model. Finally, further research is needed to explore the effects of music activities on the wellbeing of carers. Previous studies focusing on hospital settings have highlighted benefits to healthcare professionals in terms of compassion, empathy, wellbeing, and reduction of stress (Crawford et al., 2015; Smilde et al., 2019), and such effects would be pertinent for those working in nursing home environments.

Some limitations of the present study should be acknowledged. Firstly, participation in the programme was on a voluntary basis and this could suggest that the investigation included mostly those individuals who were particularly enthusiastic about social activities and about music in general. However, not all participants in the study felt that the musical activities, in their entirety, provided wholly meaningful experiences, as reflected in the remarks quoted in this article. Secondly, it is important to mention that the study did not compare group music making with other participatory activities; consequently, it remains unclear whether the effects reported could be achieved through other pursuits delivered in a similar fashion. Nonetheless, music making is physically,

cognitively, emotionally and socially engaging and is typically present throughout the course of people's lives. While this is not unique among interventions that could be employed in nursing home contexts, research suggests that music indeed plays a powerful role in life (Cohen et al., 2002; Hays and Minichiello, 2005), is a cost effective mode of engaging people (Fancourt et al., 2016), and is well suited to engage across the full spectrum of health states, including those faced with impairments that may accompany the ageing process (McLean et al., 2011). Thirdly, only individuals able to speak, and with unimpaired cognitive functioning, were recruited by nursing home staff for this study. Consequently, further research should be carried out that includes people with cognitive impairments associated with ageing, such as dementia.

In order to overcome difficulties related to cognitive impairments, ethnographic-informed approaches seem particularly promising (Perkins et al., 2020; Smilde et al., 2019; Toye et al. 2014), and future research may involve nursing home staff in the collection of both qualitative and quantitative data. Fourthly, the nursing homes involved in this research were in close geographical proximity (located within and overseen by the same Swiss cantonal institution) and regularly work in close partnership. It would be instructive for future research to reach across a wider range of homes, covering different geographical, socioeconomic and cultural spheres.

Finally, a further point to consider is the risk of bias due to the fact that I was involved both as a member of the music team and as an interviewer. This point, as discussed in Chapter 4 sections 4.6 and 4.7, was carefully addressed both during data collection and analysis, and interviewees were invited to provide detailed descriptions of their experience while unexpected content and digressions were welcomed and supported (Kvale and Brinkmann, 2009). This approach created an atmosphere of respect and trust which allowed residents to openly express critical remarks and perplexities related to specific aspects of the programme, for instance about the schedule of activities or personal musical tastes. On the other hand, the results presented here have been evaluated, with caution, through a reflexive lens (see Chapter 4 section 4.7) and the collaboration within the research team and with other researchers external to the project was extremely important throughout the data collection and analysis.

6.4 CONCLUSIONS

This study aimed to investigate how residents in nursing homes experienced their participation in a group music making programme and what effects they perceived on their health and wellbeing. The findings show that group music making was beneficial for participating residents and impactful across the wider nursing home contexts. Taking part in this activity was greatly appreciated and offered novelty and engagement. It emerged that music played an important role in the life of the residents, and the sessions were considered beneficial as they elicited positive emotions, provided learning opportunities and facilitated interpersonal relationships.

The respondents reported meaningful interactions both with other residents and with students and appreciated the opportunity to listen to live performances as part of the sessions. Offering opportunities to make or listen to music in nursing homes can thus provide significant benefits for residents, and the involvement of higher education music students in this context can play a key role.

CHAPTER 7

**STUDY 3: GROUP MUSIC MAKING IN NURSING HOMES:
INVESTIGATING THE EXPERIENCE OF HIGHER EDUCATION
MUSIC STUDENTS ³****INTRODUCTION**

As discussed in Chapters 1 and 2, in recent years the number of music-based interventions has increased in many countries, reinforcing the idea that both active and receptive engagement with music can improve socio-emotional, cognitive and physical wellbeing in later life. Nevertheless, research documenting the perspective of the musicians involved in this field is at an early stage.

The study reported in this chapter aims to address this gap by addressing research questions 5 and 6 of this thesis, which are:

RQ5: How do higher education music students experience group music making activities in nursing homes?

RQ6: What effects on their health, wellbeing and career preparation do they perceive as a result of doing these activities?

Shedding more light on these aspects is urgent for many reasons. As discussed in Chapter 2, making music at a high level can affect health and wellbeing in several ways. Furthermore, as the music labour market is complex and constantly evolving, it seems paramount to explore how students experience the opportunity to employ their musical skills in innovative ways outside long-established practices such as giving concerts in traditional venues and music lessons. Finally, on the basis of the literature discussed in Chapter 1 highlighting the increase in the number of older adults in many countries and the benefits engagement with music can provide for them, it is crucial to understand if and to what extent engagement in music-based programmes in nursing home can be meaningful for higher education music students.

³ This chapter is largely based on the following paper: Paolantonio, P., Cavalli, S., Biasutti, M., & Williamon, A. (2022). Group music making in nursing homes: investigating experiences of higher education music students. *International Journal of Community Music*, 15 (1), 113–140. — https://doi.org/10.1386/ijcm_00054_1

Clarifying the effects perceived by taking part in this kind of activity could play a key role in improving the quality of life and professional prospects of higher education music students, enhancing the benefits that music can bring to wider communities.

The method used in this study is described in section 7.1, which reports the study design, recruitment procedure, data collection and data analysis. Section 7.2 reports the results, which are discussed in section 7.3.

7.1 METHOD

7.1.1 STUDY DESIGN AND RECRUITMENT

This study is based on *Art for Ages* (A4A) and involved four teams of musicians delivering a 10-week programme of group music making in four nursing homes, one per home. As anticipated in Chapter 4 section 4.4, the total number of music students involved was 9, with 4–5 per team and some, on a voluntary basis, involved in more than one nursing home. A4A was proposed as an elective seminar, thus participants were recruited on a voluntary basis. A4A was run across two academic years (Y1 and Y2), thus students could take part twice in the programme. Table 5 shows the characteristics of the participants.

TABLE 5. PARTICIPANT CHARACTERISTICS.

PSEUDONYMS	GENDER (7 F, 2M)	AGE (19-26, M=23.1, SD ± 1.9)	COURSE ATTENDED	INSTRUMENT LEARNING	ACADEMIC YEAR
Lisa	Female	24	MA in performance (1 year)	Flute	Y1
Karen	Female	24	MA in pedagogy (2 year)	Viola	Y1
Miriam	Female	24	MA in performance (1 year)	Cello	Y1
Ellen	Female	22	MA in pedagogy (1 and 2 year)	Guitar	Y1 + Y2
Herbert	Male	26	MA in performance (1 year) then MA in pedagogy	Piano	Y1 + Y2
Carol	Female	24	MAS in advanced studies (1 year)	Piano	Y1
Natasha	Female	24	MA in performance (1 and 2 year)	Flute	Y1 + Y2
Emma	Female	19	MA in performance (1 year)	Flute	Y2
Mark	Male	21	BA in music (3 year)	Cello	Y2

7.1.2 PROCEDURE

Each nursing home music session lasted 45 minutes. Each week the workshop leader (Silvia Klemm) sent students via email a sheet outlining the contents of the next session and the material (scores, lyrics, mp3 or YouTube links) related to the works to be performed. The repertoire included classical, jazz, folk, pop and world music and requests from residents were welcomed. Students were also expected to perform some live music both at the beginning of and during the sessions: in these cases, they performed works arranged for the ensemble, solo pieces or duets proposed by students themselves. For each session, a meeting was scheduled one hour before to rehearse and to discuss details and individual tasks, as well as a debriefing of variable duration.

7.1.3 DATA COLLECTION

Data were collected through two semi-structured interviews and an oral diary. The interviews took place before the beginning (interview 1) and after the end of the programme (interview 2). The set of questions included three sections: Self-concept and personal well-functioning; Career expectations; and *Art for Ages* related questions (see Appendices A3.3.1 and A3.3.2). The students participating both in Y1 and Y2 were interviewed three times (see Appendix A3.3.3). The oral diary consisted of a set of seven questions related to their experience and their feelings before, during and after the session (see Appendix A3.3.4). Students were asked to update the oral diary by sending a WhatsApp vocal message at the end of each session. The use of diaries is well-established in qualitative research (Hewitt, 2017) as, by facilitating the retrospective reconstruction of practice by participants, it supports researchers in understanding how events are perceived and understood (Kenten, 2010). The breadth of the topics raised and the amount of data collected in this way offered the research team the possibility of reconstructing a rich and articulated picture for each student. I conducted each interview, and transcribed both the interviews and oral diaries verbatim. As I was known by the students and was involved throughout the programme as coordinator and bass player, I was sensitive to the possibility of influence over participants' answers. To ensure the validity of the data collected, I encouraged each person to express their ideas and opinions freely allowing them to describe specific situations in detail and giving space for digressions and unexpected discussion points (Kvale and Brinkmann, 2009). Further details about my approach to data collection are provided in Chapter 4 section 4.6. The interviews were recorded with the permission of participants, and to protect their anonymity, pseudonyms are used in this thesis. The study was granted ethical approval by the Ethical Committee of Canton Ticino, Switzerland - CE 3030-2016-00193.

7.1.4 DATA ANALYSIS

The whole data set was analysed using thematic analysis (Braun and Clarke, 2006). I analysed the first and second interviews and oral diaries coding every element considered potentially relevant to addressing the research questions. This procedure generated three coding schemes, which were compared and discussed within the research team to create a single list of themes and subthemes. Once this stage was concluded, I

analysed the data set for each student again through the lens of this list. At this stage I used an essentialist approach with the aim of understanding the “experiences, meanings and the reality” of each participant (Braun and Clarke, 2006). Particular attention was paid to reconstructing, to the fullest extent possible, the mutual relationships between subthemes, their evolution throughout the programme and their impact on students’ wellbeing. To ensure validity, data emerging from interviews and diaries were constantly compared to detect confirmations and contradictions, and each step of the analysis was discussed with two researchers external to the project.

7.2 RESULTS

As shown in Table 6, a total of 13 subthemes linked to 5 overarching themes emerged from the data analysis: (1) Appreciation of the programme, (2) Acquisition of competences, (3) Meaningful interactions with older adults, (4) Benefits in psychophysical dimensions, and (5) Reassessment of assumptions. The statements extrapolated from the first set of interviews are labelled pre, those extrapolated from the second set of interviews are labelled post and those extrapolated from the diaries are tagged as D.

TABLE 6. THEMES AND SUBTHEMES ARISING FROM THE ANALYSIS OF INTERVIEWS AND DIARIES.

THEMES	SUBTHEMES
Appreciation of the programme	Engagement in a humanitarian activity Engagement in an innovative programme
Acquisition of competences	Competences related to teaching Competences related to teamwork
Meaningful interactions with older adults	With the group of residents With specific residents
Benefits in psychological and physical dimensions	Perceived decrease of physical pain and sickness Energy Sense of gratification
Reassessment of assumptions	Thoughts about the reasons for making music Questioning of perfectionism Discovery of new professional opportunities Thoughts about personal dimensions

APPRECIATION OF THE PROGRAMME

The interviews highlighted that students enthusiastically appreciated the idea of offering music making programmes to residents in nursing homes in a way that combined research and teaching components. Data revealed that the students experienced strong engagement from their participation in the project for two reasons in particular. Firstly, A4A represented an initiative with strong social and humanitarian value; secondly, it was seen as an innovative project deserving to be repeated in the future and further developed.

ENGAGEMENT IN A HUMANITARIAN ACTIVITY

Many students were immediately interested in this programme because they saw in it the opportunity to do something useful for the community. The interviews revealed that it was important for them to find alternative spaces to the stage and concert halls to offer something valuable, including to those who cannot easily access music.

Thus, being involved in group music making in a nursing home was seen as something interesting and rewarding:

We, as musicians, are not in a separate sphere. We are in a society, and we have to give back something of what we do, not only through concerts but also to children, and maybe the older adults are [in their turn a group] that we leave aside a bit. (Natasha, pre)

[Working with the elderly] is something that makes me feel good. It stimulates me and I like it. Doing good for others and making people feel less lonely makes me feel good too. (Miriam, pre)

ENGAGEMENT IN AN INNOVATIVE PROGRAMME

Students highlighted the originality and novelty of the programme in many ways. For Mark this was one of the greatest reasons for his interest in the programme:

It's a new thing and I think it's very interesting, because [...] you bring music to people you don't usually bring it to. (Mark, post)

In my opinion, this activity should be done much more assiduously. It should be almost normal in nursing homes. [...] When you proposed this seminar I was immediately intrigued, because it seemed like a good idea. (Herbert, post)

Carol, who had previous experiences in solidarity activities, reflected on the novelty of an initiative that combines academic training with volunteering:

I experienced [the programme] as being a bit like volunteer work: [...] an environment of higher music education allowed me to do this experience [...] and for me it was a wonderful experience. (Carol, D)

ACQUISITION OF COMPETENCES

Interviews and diaries offered room for reflections on the competences acquired by taking part in A4A and their relations in the context of the Masters in Performance or Instrumental Pedagogy taken by the students. In this regard, it emerged that, regardless of the Masters programme attended, students considered the teaching and teamwork-related competences offered by the seminar to be particularly relevant.

COMPETENCES RELATED TO TEACHING

Data analysis revealed that, regardless of individual aptitude and aspirations, every student included teaching as a possible career option, as making a living through performing alone was perceived as difficult to achieve. In this sense, A4A had a significant impact for each of them, including those who felt more reluctant about teaching. Miriam, for instance, who had had negative experiences as a teacher and whose main aim was to pursue a career as chamber musician, enrolled in the seminar associated with A4A also because she wanted to approach teaching-related issues from a novel perspective:

First of all [I expect to] learn to relate to this reality that is unknown, because it is more likely [...] to find a child who starts playing than an old man who starts taking his first steps [with music]. Therefore, I expect to learn to relate to this reality [...] and understand what the teaching mechanisms are. (Miriam, pre)

Her second interview confirms both her expectation to attain those competences and her reluctance for teaching:

I never had any experience with older adults. I'd had some traumatic experiences teaching children (laughs) but it wasn't for me. Therefore, I was a bit afraid of not succeeding, of not feeling up to it, of not having the patience, of not being able to coordinate. Conversely, incredibly, every time we went there in the two nursing homes, there was always something new that I could learn or understand. [...] I had no prior experience of this, so I was absolutely absorbed by all that, so it was very interesting also to understand through which means, which games, which instruments, I could capture the interest of older people in music. (Miriam, post)

Considering the perspective of students strongly oriented towards teaching, it emerged that A4A provided further ideas about repertoires and musical activities, and it encouraged them to consider novel approaches and contexts:

It opened up another aspect of music to me [...] it gave me ideas for group teaching [...] it gave me the possibility to know new games in a different context because [in the Masters programme in] pedagogy, they make you do it entirely with children. (Karen, post)

Making music in a different way, namely not with the usual instruments and trying to use more imagination to bring music to everyone's level, [...] is something that I learned. And then the fact of leading a group: [...] it never happened to me before and it was a good experience, where I acquired skills. (Herbert, post)

COMPETENCES RELATED TO TEAMWORK

Data analysis revealed that A4A represented an opportunity to develop teamwork skills. Students expected that the seminar implied working on teamwork skills, and this perspective was welcomed both by those drawn to it and by those who had had negative experiences in this sense.

The idea of working with a group of people committing together to something is definitely a very nice idea (Carol, pre)

It seems interesting to me. I'm not so used to working in groups, and sometimes in the past, when it happened to me, I found groups where I didn't feel good. (Natasha, pre)

It emerged that students had had little training aimed at improving teamwork skills, which they considered very important to develop. For some of them, this was one of the main reasons for their interest in A4A, as can be seen from the expectations of Karen and Miriam and their considerations in their second interview:

Teamwork also means learning to be in the group, and that is not an easy thing at all. (Karen, pre)

There was this team spirit which gave space to criticise each other in saying: “This is fine in my opinion, this is not fine” and to work in an inclusive environment, which is something that does not happen very often. (Karen, post)

I also hope that [my participation in A4A] will help me [...] to learn how to act in a group, and [...] this is something that I think will be very useful because I do not have much experience in this sense. Maybe it will also smooth out my persecution complex! (laughs) (Miriam, pre)

[My] general judgment is absolutely positive, even with regard to teamwork. [...] It’s not a trivial thing, and it’s something you have to learn how to do. [...] You should also be educated to work in a team, it’s not something that comes by itself. (Miriam, post)

Mark, who described himself as a shy person, reflected in the second interview on the fact that the support of the team allowed him to be “daring” and thus to discover and to learn, fully benefiting in that way from participating in the programme:

At the beginning I was very hesitant and also frightened by many things I had to do and that I’ve never done before, like singing songs [...], but [...] among us there was a nice working atmosphere, very quiet, even relaxing. [...] So, when [the workshop leader] asked me to dance, I said: “Ok, I’ll dance, no problem” [because] I didn’t feel judged [...], because with the other students we had a good relationship. [...] There was mutual support such as: “You don’t know how to do this thing, so I’ll do it...”. [...] So it was nice to work. (Mark, post)

MEANINGFUL INTERACTIONS WITH OLDER ADULTS

By taking part in the A4A programme the students had the opportunity to get to know and socialise with each other, and thanks to the teamwork component, they were able to support each other and, in some cases, make close friendships. However, from the interviews it emerged that contact with the residents was something even more significant for them and fostered feelings of affection and gratitude. Some students stated that they had had previous contacts with people of the fourth age, while for others this population was distant and little known. In any case, meetings with the residents were rewarding, and the analysis revealed cases of personal contact between students and residents.

Meaningful interactions with the group of residents

Besides the specific competences acquired throughout the seminar, students had the opportunity to receive teaching directly from residents, who were seen as people of resilience, wisdom and valuable life experience:

It was also very nice when [the residents] came, at the end of the session, to thank us for the work we had done. I would say: "Thank you for being here, and for giving us the opportunity to learn something as well". (Miriam, D)

Diaries gave an idea of the evolution of these relationships and revealed that they reached levels of intensity capable of instilling sadness at the end of the programme. The cases of Carol and Natasha are particularly eloquent, as it can be seen from their diaries near to the end the programme:

When I saw the faces of the residents again it was nice to recognise some that I had already memorised quite well and to meet them again. [...] At the beginning I didn't think it would be like this [...] but it was really nice. (Carol, D, 6 May)

With regards to today's session, [the last of the programme], I have to say that after all I was sad. [...] I'm not used to displaying my feelings [...], but in the end, when I shook hands with almost all of them to wish them a good holiday, it was touching. (Carol, D, 1 July)

At this point, when we get to the nursing homes, I feel very energetic and willing to carry out an enjoyable session for them. [...] Just the fact of seeing the faces we now know is very emotional for me. (Natasha, D, 27 May)

I had so much fun today, [and] I was so happy at the end of the session. I was a bit sad too because we only have one session left, so I think it's going to be hard for me [he smiles] not to come back anymore [...] because I know them all and I saw how they changed, how they developed their rhythm, their attitude. (Natasha, D, 17 June)

Meaningful interactions with specific residents

The diaries revealed that, in some cases, the context of the sessions allowed closer and individual interactions between individual students and residents:

At the end of the session we were able to talk a little bit with them [...], and I think this is interesting because in this way we created a good relationship. [...] This time I talked a lot with A., who is a very nice woman, very smart and mentally healthy, and I liked this, also [because] she gave me something back. (Lisa, D)

I've seen that there is an old lady, one of the most active, who, poor thing, struggles to move, but she is always smiling. She reminds me a lot of my grandmother, and this makes me feel better. I mean, seeing her happy after every session makes me really happy too. (Ellen, D)

BENEFITS IN PSYCHOLOGICAL AND PHYSICAL DIMENSIONS

Data analysis revealed that taking part in this programme provided positive effects in psychological and physical dimensions. This seemed to be due mostly to two elements. Firstly, the signs of enthusiasm received, and the detection of the increasing engagement of the residents and their musical progress, provided a sense of gratification and increased students' energy, motivation and self-esteem. Secondly, the concentration and commitment required during the sessions to engage and entertain the residents caused some students to perceive improvements in their physical health.

Perceived decrease of physical pain and sickness

In some cases, being engaged in music making had a positive impact on students' physical conditions, relieving pain or sickness. Students were surprised by this and associated these effects with their contact with the residents: making music with older adults and devoting attention and energy to improving their wellbeing promoted mutual benefits and, in turn, improved students' wellbeing:

When I started the session [...] physically I didn't feel very well because I had back pain and I thought it would be a problem because it really hurt me. [...] When I finished, one thing that surprised me was that I realised during the session my back didn't hurt at all. [...]

I was happy because it's a personal physical thing of mine, but working with them, it disappeared. (Lisa, D)

I was feeling very tired and not physically well, [...] I had fluctuating fever for a week, so it was a bit difficult, and now, despite having the flu and other illnesses, I feel much better because every time I completed the session, in which we gave them smiles and we were together, I felt better. I felt like a better person. (Ellen, D)

Energy

The commitment required by the sessions, probably combined with the sense of fulfilment just described, offered in some cases a long-lasting energy boost, even when stress and fatigue accumulated over the previous days were heavy:

I was rather sleepy before I started, and during the whole session I felt very well and very awake, [and this] even later: [...] I could study well, and I didn't think I could do it because all morning I didn't feel physically well, and I thought I should stay home and rest. Instead, after the session I felt so much energy, I felt much better physically and mentally, very active and happy. [...] I think that these activities not only improve the wellbeing of the residents but also our wellbeing. (Natasha, D)

When we finished the session, I was definitely more attentive and more alert, but [also] calm, relaxed. I felt I had done something I like, something beautiful. (Lisa, D)

Sense of gratification

Diaries highlighted that the joy and the engagement expressed by residents throughout the programme had a strong impact on students that lasted long after the end of each session. Observing these signs after playing, conducting and interacting with them, and being aware that this was appreciated, provided students with positive feelings and a sense of achievement:

Seeing that our music was appreciated [...] makes me feel good because I feel part of this project, and [...] as a general feeling, I feel euphoric. (Carol, D)

After the session I was physically tired because today I had a busy day [...], but anyway I felt happy. [...] I saw happy faces, [signs of] thanks, and I liked these gestures. For example, a woman who [usually has the same expression], at the end, when I said to everyone: "Goodbye, see you next week", she smiled at me and said: "Goodbye, bye", with a nice smile! [...] These things remain with me a lot. (Natasha, D)

REASSESSMENT OF ASSUMPTIONS

The participation in this programme represented an important life experience for students and promoted profound reflections. Being committed to a project focusing on the wellbeing of a vulnerable group of people motivated students to reconsider the ultimate value of making music and their tendency towards perfectionism. At the same time, the opportunity to make music in an unfamiliar context and the interactions with older adults invited them to contemplate new professional opportunities and offered life lessons in a broad sense.

Thoughts about the ultimate sense of music

The intensity of the reactions of residents, combined with the lack of competitiveness and the enjoyable atmosphere created in each session, reminded students that making music can and should first and foremost be a joyful activity aiming to offer rewarding emotions both to them and their audiences:

[A4A] woke me up. It led me to remember why I make music [...]: it's to be in front of other people who are looking at you, and you have to give them a glimpse of something beautiful. (Ellen, post)

[A4A] showed me that music is not only what we see in the conservatory, which is to some extent a very limited environment. [...] We didn't perform virtuoso pieces in a perfect way [...], and yet I saw much more joy in that room than in a conservatory room when there is an exam and people play very well. [...] In the past I thought I'd stop playing, even taking other paths, but also thanks to this experience I understood that music [...] is part of everyone. [...] We musicians have the luck of deepening this thing so much, and it's sad to keep it only for oneself, to do concerts and relate only with people who understand music. (Mark, post)

Questioning of perfectionism

Inclusiveness was one of the main features of A4A, and for students it was clear that achieving perfect musical results was not the principal goal of the sessions. This encouraged some students to question the tendency towards perfectionism to which they were accustomed and to consider that technically impeccable performances may not always be necessary to communicate with their audiences:

Many times when we are practicing, we are only focused on the difficulties and on the huge pressure we have. [...] I used to go [into the nursing home] and would feel more relaxed at the end as I saw that I did something useful with music. (Lisa, post)

As a musician, I think I've grasped a little the ability to bring music closer to the listener. [...] I remember one day I was playing there, and I really thought: "You're playing for them. It's not important if you're wrong or if you're perfect, [...] You're playing for them, to make them happy and that must be your thought, don't be worried about the technique, [...] you can give something". (Natasha, post)

Discovery of new professional opportunities

The interviews and the diaries also offered room for thoughts related to professional opportunities once academic studies were completed. These were among the motivations that prompted Lisa to participate in A4A activities:

I expect to see that what I do every day, [namely] practicing to be a flautist, [...] is useful for someone, and that we are not only musicians suitable to play in the most famous concert halls in the world, but also to work with other people, who can give you another reaction that maybe you don't have with the normal audience of a concert hall. (Lisa, pre)

In her second interview, she spoke explicitly about a widening of perspective:

I must say that [A4A] changed my vision of my future because I discovered an activity that I like and that I would like to do again. (Lisa, post)

This vision was shared by Karen and Herbert too, who hoped that group music making would become a consolidated practice in nursing homes. They declared being open to integrating their future professional activities also in this sense:

I think it's a very beautiful and creative project, and it opened a new path for me. [...] In the future, if there was the possibility, I could also choose such a path. (Karen, post)

Talking about job opportunities [...] if in the future I have the chance to work in this kind of field, I will do it because I like it. (Herbert, post)

The 19-year-old Emma did not talk specifically about nursing homes but stated at the end of the programme that she had discovered an interest in teaching which previously was completely suppressed by her desire to work only as a performer:

Before, I was more [the kind of musician saying]: "I do want to play!". Now, I think that it would be a great thing to teach too because I liked to take care of [the residents'] needs, and so I realised that [teaching] would be [...] something that would give me satisfaction anyway. (Emma, post)

Thoughts about personal dimensions

In some cases, the involvement in A4A led to a reconsideration of general elements outside the musical activity. Miriam revealed in the first interview that she expected the project to have an impact on the personal sphere too:

Definitely [A4A] will give me something [...] not only in the professional field, but also, obviously, as a life experience: it can teach me to have more patience, for example. [...] So [I expect that it will help me to] mature aspects of my personality, to increase awareness of my abilities and limitations, then apply them in daily life. (Miriam, pre)

At the end of the programme, that expectation seemed to be somehow satisfied:

Being always so oppressed by the idea of "What will I do tomorrow?" or: "What will become of me?" or: "Will I find a job?" does not help me to live well today. [...] [A4A] has helped me a lot in this. [...] I realised that, after all, to be stressed daily for things that do not depend on us, is basically pointless. It also gave me some serenity, I mean, being in contact with these people who

were enthusiastic about even small things [...] [pushed] me to try to be a little more relaxed, to be a little calmer, a little more positive too (laughs). [...] In my opinion [it] will help me a lot in life in general. (Miriam, post)

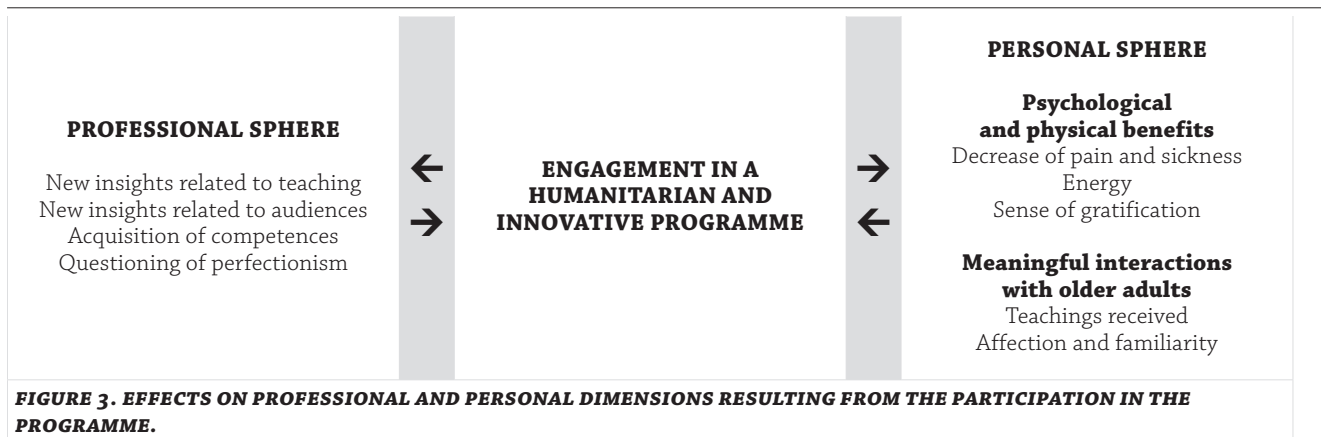
With regards to interpersonal relationships in a broad sense, Lisa and Emma revealed that they have learned to manage relationships with people who were, in some ways, different from themselves:

I'm very happy to have participated, and I think I've learned a lot of things, for example how to deal with people, to establish relationships, to be close to someone you haven't known for a long time but that you can still make happy. [...] You can give them something of yourself [...], and that energy comes somehow back to you. (Lisa, D)

I have a greater awareness of myself in dealing with a larger group of people. I've learned to have a relationship with a group of people I never knew before, so in the case that this happens again, I'll know how to deal with them. (Emma, post)

7.3 DISCUSSION

The results of this study showed that being involved in a programme of group music making in nursing homes was something significant and engaging. Students reported benefits in psychological and physical dimensions, meaningful interactions with residents and acquisition of competences considered relevant. From the data a strong appreciation for the humanitarian value of the programme emerged and for the innovative component of this educational offer. This stimulated students to reflect on the meaning of making music and on their role in society. In this way, as reported in Figure 3, the overall experience had effects on both professional and personal dimensions.



With regards to the professional dimension, the analysis revealed that students considered it very likely that they would be involved in teaching in the future, regardless of their attitudes towards this activity and of the Master they were attending. This is due to the difficulties related to the profession of musician and the fear of not being able to make a living by working only as a performer. These results are in line with those of studies investigating the entry of musicians into the world of work (Bennett, 2009) and are novel in highlighting students' interest in alternative teaching contexts to traditional ones. The interest shown by residents, their appreciation of music and their potential in terms of learning has been very surprising for the students, and the dynamics of the programme have stimulated reflections on engaging a wider population through their musical competences. These aspects highlight the need to consider more carefully both the interest of older adults in listening to music (Costa and Ockelford, 2019; Hays and Minichiello, 2005) and their abilities to improve their musical competences (Dabback and Smith, 2012; Gembris, 2008; Prickett, 2003; Salmon and Meyer, 1998). At the same time, it seems important to increase students' awareness of the potential of their skills in the contexts of community music (Higgins, 2008, 2018; Langston and Barrett, 2008; Li and Southcott, 2012; Veblen and Waldron, 2018), arts-based interventions (Fancourt and Finn, 2019) and arts-based prescriptions (Poulos et al., 2018; Thomson et al., 2017). A further aspect linked to the professional dimension is related to the skills acquired by students. Although it could be expected that students enrolled in a Master of Pedagogy course would be interested in acquiring competences related to teaching, interestingly the other students considered these competences particularly relevant. These results, while suggesting possible links with the notion of transformative learning (Mezirow, 2000) highlighted in a previous study (Perkins and Williamon, 2014), call for further research. The potential of community-based music activities in terms of music students' career perspectives should be investigated.

With regards to learning opportunities, students greatly appreciated the possibility of acquiring teamwork competences, which were considered very important and lacking in their backgrounds. For developing teamwork competences it is relevant to consider not only the importance of the quality of relationships between fellow musicians (Dobson and Gaunt, 2015; Ginsborg et al., 2012; Lim, 2014), but also the need to interact with other professionals in the context of arts-based interventions (Smilde et al., 2019). The interviews highlighted that students found themselves reflecting on their own perfectionism, an aspect that can have relevant consequences on musicians career sustainability and which often causes problems such as stage fright, anxiety and depression (Kenny, 2011; Langendörfer et al., 2006; Steptoe, 1989; Wesner et al., 1990).

Considering the personal sphere, the results highlighted a number of benefits in psychological and physical dimensions, revealing that the encounter with the older adults was particularly significant for the students. The sense of energy and gratitude, along with the perceived decrease of pain and sickness, seems to derive from the commitment and the concentration required during the sessions. This hypothesis is also based on the humanitarian value the students found in this programme, and interviews revealed that the possibility of giving something back to society was one of the reasons for participating in the seminar. This element, in line with studies focusing on professionals involved in community-based activities (Ascenso, 2016; Preti and Welch, 2013), deserves further research and suggests that dynamics referable to mutual recovery (Crawford et al., 2015) occurred between students and residents. It emerged from diaries and interviews that being involved in group music making in an inclusive and cheerful environment, where the distance between musicians and audience was eliminated, was engaging and rewarding. Students had the opportunity to observe closely how their musical skills can be beneficial for other people, and the positive reactions of residents in terms of participation, appreciation and gratitude created a virtuous circle where both providers and recipients experienced positive effects.

Furthermore, students reported that they have received teachings and points of reflection from their encounters with older adults. These insights were not confined to professional practice and were expected to have wide and long-lasting effects. Finally, session after session students developed a sense of familiarity or even feelings of affection towards residents. In this way, the idea that creative practices can reduce social barriers and strengthen identities and communities for the benefit of all actors involved

(Crawford et al., 2015) seems to be reflected also in group music making involving both young musicians and older adults. These positive effects encourage an increase in this kind of offer in higher education music institutions. The literature indeed suggests that higher education students are in many cases immersed in a phase of life that presents challenges in personal and economic dimensions (Stallman, 2010). Furthermore, those involved in music are used to studying in an environment largely based on one-to-one lessons (Perkins et al., 2017), where individual talent occupies a central position (Kingsbury, 2001) and competition is very high (Demirbatir, 2015; Pecen et al., 2018).

Considering this overall picture through the lens of the PERMA model, these findings highlighted that this experience had a relevant impact on students, in particular in terms of *meaningfulness*, *relationships* and *engagement*. The opportunity to use their musical skills in the context of nursing homes gave students new insights about the power and the meaningfulness of music, and the opportunity to interact with a new kind of audience invited them to reconsider their role in society. The encounter with older adults was rewarding in terms of social *relationships* and *positive emotions*, as it provided valuable teachings and at the same time increased social bonding. Moreover, the importance attributed to teamwork suggests that this component may have positive effects also in terms of *relationships* and mutual support between peers (Crawford et al., 2015; Smilde et al. 2019). Diaries and interviews revealed that the *engagement* experienced in terms of concentration and commitment during the sessions provided long lasting psychological and physical benefits. Finally, the signs of gratitude received, the musical progress of residents and the fulfilment of the need to give to others provided students with a sense of *achievement*, which in turn promoted awareness about the relevance and the potential of their competences.

Some limitations of the present study should be acknowledged. Firstly, this study did not observed systematically the interactions between students and the staff of the nursing homes. Ethnographic investigations of interactions could be relevant both in terms of wellbeing and of learning opportunities. Secondly, the recruitment procedure was carried out on the basis of students' participation in an elective seminar. Consequently, the positive effects reported by students should be considered with caution, as the methodology used in this study did not observe in depth their individual predispositions towards this kind of commitment with music. Finally, the programme carried out in each nursing home lasted ten weeks.

As a consequence, the effects in terms of wellbeing, workload, and learning opportunities of a longer commitment in nursing home still requires further investigation.

7.4 CONCLUSIONS

This study aimed to investigate how higher education music students experienced their involvement in group music making programmes in nursing homes and the perceived effects of this activity on their wellbeing. The results suggested that students reported benefits in professional and personal spheres, and it emerged that this experience had significant effects in terms of wellbeing. Developing curricula which facilitate the commitment of higher education music students to community-based interventions is important not only because arts-based interventions can provide benefits to large and diversified segments of populations, but also because the music professionals involved can benefit in terms of skills and wellbeing, at the same time reinforcing their role in the community.

CHAPTER 8

STUDY 4: THE SHORTCOMINGS AND NEEDS PERCEIVED BY STUDENTS IN TERMS OF TRAINING**INTRODUCTION**

As discussed in Chapter 2, this thesis has as one of its aims to clarify the shortcomings perceived by students in terms of the training they received for acting as music facilitators in nursing homes. Consequently, this thesis was designed to include identification and consideration of the challenges experienced by the students in relation to their preparation. In particular, the question lists used for the interviews and oral diaries (see Appendix A3.3) were designed also to identify the drawbacks of the seminar related to *Art for Ages* (A4A) as perceived by the students involved, and to explore their ideas on how to improve it. The study reported in the present chapter therefore addresses the following research questions:

RQ7: In what situations and performing what tasks did the students involved in A4A perceive their preparation as insufficient?

RQ8: What changes to their preparation could make the training offered to students more comprehensive?

Both questions aim to investigate the students' experience in order to gather ideas on how to improve the training for subsequent student cohorts in future academic years. RQ7 sought to clarify the tasks and situations in which the students felt they were experiencing difficulties and considered the musical, interpersonal and organisational aspects experienced during the sessions. RQ8 focused on the students' thoughts and suggestions about how to improve the seminar and how to resolve any shortcomings in terms of content and structure.

The overall results of this study will provide a basis for reflection on how to strengthen the next iterations of A4A and how to make the curriculum more comprehensive for students interested in working in the context of music-based interventions in nursing homes.

Thematic analysis was also used in this study, following the same procedure described in Chapter 4 section 4.6.4. The results are presented in section 8.1 and discussed in section 8.2.

8.1 RESULTS

The analysis of the interviews and the oral diaries collected as described in Chapter 4 section 4.6 revealed two overarching groups of themes: “Interactions with residents” and “Preparation and performance of the sessions”. Each in turn generated two themes, which are summarised in Table 7 and discussed in the next sub-sections. In the same fashion as the previous chapter, the statements extrapolated from the transcriptions of the first set of interviews are labelled pre, those from the transcriptions of the second set of interviews are labelled post and those from the transcriptions of the oral diaries are labelled as D. The diaries of the students who participated twice in A4A (Ellen, Herbert and Natasha) are labelled D 1 or D 2 based on the corresponding academic year.

TABLE 7. OVERARCHING GROUPS, THEMES AND SUBTHEMES ARISING FROM THE ANALYSIS OF INTERVIEWS AND DIARIES

OVERARCHING GROUPS	THEMES	SUBTHEMES
Interactions with residents	Inadequate knowledge of the older population	Encountering a population perceived as unfamiliar
		Dealing with residents’ individual diversity
	Interactions with unknown people	Interacting directly with individual residents
		Engaging seriously impaired residents
Preparation and performance of music sessions	Optimising the team	Adherence to the agreed schedule
		Composition of each team
	Use and development of one’s own musical competences	Singing
		Opportunities to act as conductor

INTERACTIONS WITH RESIDENTS

This overarching group includes two themes and four subthemes. The first theme, “Inadequate knowledge of the older population” refers to students’ general views about the older population and about the group of residents involved in the musical sessions as a whole.

The second theme, “Interactions with unknown people”, refers to actual interactions with the residents who took part in the musical sessions.

Inadequate knowledge of the older population

This theme includes two subthemes, from which emerged the concern about not being able to relate to older adults in an appropriate way. Some reflections focused on the older population in general, others to the group of residents involved in the music programme.

Encountering a population perceived as unfamiliar

Students saw A4A as an opportunity to approach and get to know the older population, who were perceived, for various reasons, as different from their own or others considered more familiar. Carol and Emma in their pre-interviews spoke openly about their concern over these differences:

It's a little bit scary, I must say (Laughs), because...on the one hand I'm curious. On the other hand there's the fear of maybe not having the right skills to deal [with older adults] because it's the first time. [...] I always tend to adapt pretty well to situations, so I'm not afraid of not being able to adapt to this one. But it's a world I don't know that well. [...] The idea is very interesting, yet a little bit scary in that sense (laughs). (Carol, pre)

[I expect] also learn to relate to people (Pauses) who have a completely different reality from mine – that is, who are far away in age, far away in habits, in mentality, in anything, so [I also expect to] find in myself the way to approach them, the right way to approach them. (Emma, pre)

Carol's diary offered thoughts on how her relationship with the residents involved in the programme had evolved over time. While the residents had become more familiar with her session after session, it remained difficult to imagine some aspects of the lives of people of an age so far from her own. Even in this case, her desire to bridge the distance to the older population emerged clearly:

I looked at all of them and thought: “Damn, even though I know them now, their names, their faces, their reactions to various songs, [and I know now that] there is the one who prefers the

popular song, the one who goes into ecstasy when she hears the instrumental music performed by us” and so on, actually I do not know [...] anything about their stories, I do not know where they come from, I do not know how old they are, I do not know if they had children, in short. That was kind of the feeling I had at the beginning of the session today. And I was a little bit sorry, I was almost curious to go and ask questions at the end [of the session] of some people with whom I have more or less established a little bit of confidence, but obviously I didn’t want to be too intrusive, and above all it is a thing that if it is done should be done within the group, not privately, because anyway it would be a thing more for sharing. (Carol, D)

In her final interview she seemed to have overcome her uncertainties in this regard and to feel ready to be involved in further activities with older adults:

Before I had no idea what I could expect, now that I more or less know, I think it’s something I would consider, in the sense that I really liked how this turned out. (Carol, post)

Emma’s diary revealed that the overall A4A experience was considered sufficient to overcome the perceived distance between herself and older adults and to relate satisfactorily to them. Moreover, it reports moments of learning and enjoyment:

The biggest challenges have always been the same, that of really being able to find a way to approach people who are older than you, who have more experience than you and who see life in a different way from you. So you have to have a certain tact in dealing with them. But it has been a really formative experience for me and I hope to do it again next year, because I really...besides having a lot of fun [...] it has helped me a lot. (Emma, D)

This idea seemed to be confirmed in her final interview:

I have more self-awareness [while relating with] a larger range of people, so I’ve learned how to relate to another category of people as well, which I had never encountered. So, if it happens to me again [being involved in this kind of activity], I will know how to deal with it. (Emma, post)

For Ellen, the encounter with the population of residents remained difficult even after participating twice in A4A:

I [usually] try to calibrate myself according to the people, but with these very extreme age groups I struggle, I struggle a lot, because I am never too extreme, I always try to be very diplomatic, and it scares me a little bit. It's really a personal trait of mine, but from a professional point of view, I think I can manage (smiles). (Ellen, post 2)

This may have been due to difficulty in managing her own emotionality, which had already emerged in the interview conducted before her first participation in A4A:

The thing that maybe worries me a little bit is the fact that I don't know how to explain myself. With the elderly people especially, [and in particular with] those who have problems, I feel that I am too emotional. I can hardly empathise with those who have serious mental or health problems, and. [...] I am afraid that I pull back [...] when I see people with serious problems because sometimes these situations make me a little bit worried. [...] Seeing an elderly person who has psychological problems is very worrying for me, but not because it's scary, no. Maybe because I identify myself too much in that person, I'm afraid of not being able to sustain this kind of situation because I'm particularly emotional. (Ellen, pre)

DEALING WITH RESIDENTS' INDIVIDUAL DIFFERENCES

Besides the reflections on the perceived sense of distance between themselves and the older population as a whole, students also reflected on the individual differences among the residents involved in A4A and how to manage them so that the proposed activities proved engaging for all:

The challenge is always to be able to be tactful and also try to understand what the needs and reasons are for a behaviour, for an interest, [and] to be able to understand the different reasons motivating the people who participate. [For instance] on any given day, not [everyone] might have that much desire to participate, and so it's hard to always get them to participate at a high level anyway. (Emma, D)

In the case of Lisa the concerns about the heterogeneity of the group of participants emerged from the early sessions:

The biggest challenge was to get everyone involved, to really get everyone's attention, and get everyone to participate in the activities. And also, the second challenge in my opinion, was to

propose activities that they liked [...] to make something that everyone liked, because there are different people, with different ages, with different interests, and in my opinion this will also be a little bit of a challenge for the next sessions. (Lisa, D)

INTERACTIONS WITH UNKNOWN PEOPLE

Beyond the perceived distance between themselves and the older population, students also reflected on their own role as musical facilitators and the resulting interactions in direct contact with individuals they did not know.

Interacting directly with individual residents

Direct contact with individual residents could be challenging for students. Along with numerous accounts that describe these relationships in very positive terms, it emerged from the first-year diaries that relating directly to residents could be a cause of apprehension. After a session during the first year of her participation in A4A, Natasha reflected on the need to approach individual residents to involve them in musical activities:

What I did most willingly, but which was also a challenge, was to engage them, [namely] to go and move where they were, [rather than] sit [in close proximity to the workshop leader]: to go there and try to talk to them, to be, I mean, closer to them. (Natasha, D 1)

At one point, although she was afraid of acting inappropriately and triggering unwanted reactions, she tried to take the initiative in involving a resident who seemed reluctant to join the group:

Today there was a situation that I liked, because when we did the activity with the boomwackers, singing “Vieni anche tu”, I had a group who were, let’s say, pretty efficient, but there was a lady who didn’t move the boomwackers. I was looking at her and thinking. “If I go up and play with her, if I ask her [to try] or explain how to do it. [...] I don’t know, maybe she won’t react well.” I didn’t know what her reaction would be. But then I was like: “I’m going to try anyway”, so I went over to her while we were playing and played my boomwacker against hers. That way she produced the sound too, and she understood right away (smiles), she looked at me and smiled and started moving the boomwacker too, she understood right away what she had to

do. Actually, afterwards, when I got back in my place within the music team, she stopped again (smiles) but I liked her reaction. When you go next to them and they feel you there, they feel your presence. (Natasha, D 1)

About a month before that episode, Natasha reflected in her diary on these aspects of her role as facilitator, which she evidently considered relevant:

For me the main challenge today was to get them involved, all of them [I mean]: [finding a way to] make what we were doing interesting and attractive to them and convey the desire to play and participate actively. I think in most cases we managed to do that, but at the same time in the future I'd like to feel more comfortable in doing that, in approaching them and working directly with them. I would like to lose this fear and my worries about their reactions. In fact, if we are open and supportive, and if we offer something of ourselves, I think in most cases their reactions will be very good. Actually, we saw today that it was very interesting how they all responded, how they were thanking us at the end, and telling us that they enjoyed the session. (Natasha, D 1).

A similar situation, including the desire to learn how to manage this type of relationship and the willingness to challenge oneself in this regard, was also highlighted by Ellen in her first year of participation in A4A:

In my opinion it's always very difficult when we get into the sphere closest to them. When we were handing out the instruments, for example, or when we were giving a demonstration of the piece to be done, they sometimes tried to play and sometimes we felt the instinct to go not to correct them, but to help them do better, right? But sometimes I had the doubt that this would not be taken too well. I mean: I personally was afraid to do that, while I saw that some of my colleagues threw themselves into it more. I personally was afraid to do it, I don't know, maybe because I felt I was too intrusive, but maybe we can discuss this point. (Ellen, D 1)

During the second academic year in which A4A was offered to students, the students were asked to sit and talk with the first residents who arrived in the room, in order to occupy them while waiting for everyone to be present before the beginning of the session. Natasha and Ellen, who participated in both iterations of A4A, offered further reflections on this point, expressing that they experienced this part of the sessions differently. Natasha expressed satisfaction with the introduction of this novelty:

We realised that if we talk to them before the beginning of the session, while they are coming and they are not all present yet, this creates a good atmosphere, because you start talking to someone, after that someone else joins, and at the end they want to tell you something, or just to talk, to know a little bit about you too, who you are, why you are here in Lugano... so I think it was a good idea. (Natasha, D 2)

Conversely Ellen, who as reported in the previous section had to some extent a problematic relationship with the older adults, states:

Certainly, the best moment, the one I liked the most this time, was when each of us got close to the residents, as difficult as it may have been, because for me it is not easy or immediate to talk to them. I was a bit scared when it was suggested to us, but it was nice, because we really interacted with them, so that was a very nice moment because everyone shared something about themselves exposed themselves. [...] I also liked it because I sat next to the lady who reminded me a lot of my grandmother, so this thing moved me a lot, I was really very happy, that is if we could do it, to find a way to interact more with them [...] in my opinion it would be nice. (Ellen, D 2)

Moreover, she reflected on how to handle this problem:

I realise that from a relationship standpoint with older adults I struggle more, I should definitely address it. However, I like to contribute according to how I feel about myself and by playing [my guitar] I really enjoy that. So...for me that's the thing I enjoyed doing and I enjoy doing the most. (Ellen, D 2)

Mark, who in his interviews described himself as a shy and reserved person, admitted that this activity challenged him throughout the programme:

The biggest challenge was when we decided to sit among the elders and talk before the beginning of each session. [...] It was very difficult. It could happen that one time I sat next to a lady who was willing to talk, and she would chat more, while other times I sat next to someone who was very shy, and I couldn't [converse with her]. I was almost a little embarrassed, then the session started with singing and so on, and it was a different context. Maybe the biggest challenge, which I may not have gotten over much, is just that, of being able to relate one-on-one and converse with them. [...] This one made me a little...let's say...not worried but it was difficult, it was still the most difficult of things. [...] Maybe, with more time, I would have understood where

to take the conversation, what to ask and what not to ask, but I always felt very alert [...] [and] in my opinion it would take much more time. (Mark, post)

Engaging seriously impaired residents

Beyond the more general interactions with the residents that took place during the sessions, students did not always feel confident to act appropriately in situations of direct contact with severely impaired residents:

I was a little bit scared because I didn't know who I was going to meet, as I was talking to a person who wasn't able to answer me, and so I was afraid that it might be a little bit of a challenge. So yes, that's one of the challenges, one of the main challenges. (Emma, D)

Herbert, in the interview at the end of his second year, stated that he had gained awareness of how to deal with these types of situations:

You know more or less how an elderly person moves, what movements he can make, or you are careful from the beginning, because there have been problems in previous situations, and you consider the situation: "I see that this gentleman has a problem with his hand and so I don't give him instrument X, but rather I give him the bell, or another little instrument". I mean: you're already a little more careful about these things. (Herbert, post 2)

Mark, rather than raising the problematic aspects specific to these situations, expressed joy in discovering the resources and involvement unexpectedly manifested even by residents with more obvious impairments:

It was also very nice to hear everyone's experiences and to realise that even though [some residents] sometimes seem almost mute and give the impression that they don't get what we do, they get everything. They just don't manifest it like I would expect, so it was very touching. (Mark, D)

In her interview at the end of her second year of participation, Natasha spoke with emotion and transportation about a specific situation:

This year for me the most important difficulty was [involving] the two blind ladies. How to do the same activities proposed to the other residents with them, and involve them in spite of their

blindness? I felt very responsible, I don't know if this was because my grandmother was blind too, and so [because] it's something I know closely, and [I know] how [blind people] try to manage those difficulties and how they use their other senses. [This situation] fascinated me, I was really amazed at how they both managed to be involved anyway. [...] I remember this lady who impressed me so much, I don't remember her name, but she was singing! Whatever [we proposed] she sang it immediately, she learned it immediately [...] or she made rhythms...you sat there next to her and "said: "One - two" and she said: "One - two"! She followed the rhythm perfectly, even if she couldn't see anything at all, and this struck me so much, so much. (Natasha, post 2)

PREPARATION AND PERFORMANCE OF THE SESSIONS

This overarching group includes two themes and four subthemes. The first theme, "Optimising the team", refers to organizational issues and to interactions within the music team, while the second, "Use and development of one's own musical competences", refers to musical aspects.

Optimising the team

The diaries and the final interviews gave space for reflections on situations in which the teamwork was not as efficient as expected. The main difficulties in this respect arose when the activities carried out in the session did not correspond to those planned, or were due to the variability of the composition of the music team.

Adherence to the agreed schedule

Over the course of their participation in A4A the students developed some thoughts about how to arrive at the sessions as well prepared as possible regarding the repertoire to be played with the residents. Lisa, starting with the difficulties involved in learning and memorising a song, reflected more broadly on how to make the most of the time available for rehearsals:

For example, when we were working on "Ah Robin", of which we had to learn the text, I thought that we should already know it from the beginning, because there [were] moments [when] we didn't know it well either, and then it's a bit difficult to make them learn it, if we don't know it. I think that we need...maybe a little more organisation, and also organisation let's say in spending

the [rehearsal] time, because [...] the session was over and we still had a lot of [planned] things to do. In my opinion this is not a bad thing, because I prefer to do less things but do them well, but [it would be better to have] a little more organisation. (Lisa, D)

Carol seemed to be of the same opinion, as she pointed out the occasional discrepancies between the songs agreed for a specific session and the actual songs performed with residents:

I think that a fundamental point is to adhere to the set list that has been established before entering the room, because if I made an effort to learn [...] in the days before and especially in the hour before the session a song that was totally new to me, and I made an effort to learn it so that I could [...] teach it or sing it all together, and then nothing is done with this song, [and rather] other songs are done that have never been reviewed, never been mentioned, or have only been mentioned once. [...] I will never know personally, and I think it applies to everyone, how to be and how to make myself useful, because if we arrive there with an idea of a programme that we think works, in my opinion it is right to respect it. (Carol, D)

In fact, for some students the need to clarify or adhere to the session schedule as much as possible was very strong. Karen, who was absent in several sessions, reports that she perceived confusion and lack of consistency in the way some sessions were prepared and actually performed:

To improve the programme...I would make a programme. I mean: we have a programme, but we rarely follow it. For me it is fine to improvise, but as we are a team, let's say that things get complicated. I mean: if we all know exactly what we have to do and how we have to do it, everything could take place in a much more linear way, both for us and for the residents. [...] For example: we rehearsed "La bella lavanderina" and then we didn't do it, and we did things that we never rehearsed. It is OK to improvise, but [...] as we are a team, maybe it is better to have a clear programme to be respected as much as possible. Then, you can improvise on the basis of that programme, but...to improvise the whole programme...I don't know...it seems to me excessive, let's say it gives a certain instability. (Karen, D)

The statements collected in the second iteration of A4A seem to indicate that these occasional difficulties had been resolved over time. In this regard, the idea of systematically organising a debriefing at the end of each session seems to have been useful:

Let's say I wouldn't change anything [with respect to the question about improvements to the programme] because by now everything is very broken in and we know how to work. Also this thing of planning the next session at the end of the session is a very smart move. (Herbert, D 2)

Besides this change, some of Ellen and Herbert's thoughts regarding their second year of participation revealed the idea that the first year of the programme was to some extent a sort of running-in phase, because A4A was a very complex and novel programme for all the people involved:

Definitely this year the programme was strengthened, namely we already knew what to do, so even the workshop leader already knew better where to go with it and everything, so...definitely it was strengthened compared to that of last year (smiles). (Ellen, post 2)

It seems that we are getting better and better (Pauses). We have also improved in the way we propose activities. I remember that even at the beginning of last year it was good, but now we succeed more because we already know how the residents may react. [...] This year we have more competences. (Herbert, D 2)

Composition of each team

During the first year of A4A, it was particularly difficult to manage students scheduling conflicts in terms of the school calendar. Moreover, to resolve calendar conflicts, in both academic years students were offered the possibility of choosing which nursing home they wanted to work in each week. The diaries showed that this flexibility and the consequent variability of students involved in each session created some difficulties:

The only thing that is a bit of a pity is that there was not a team that was always the same each time. In my opinion this is a pity, even if the faces were after all always the same. But if once we were five people, and the following week there were two of the same five people and three different ones, those three people didn't have the same experiences, and it was a bit different. Instead, if there had been the same five people, we would have worked better in my opinion. So having a fixed group would be ideal in my opinion. Because you live better the overall programme, you know each other better, also. (Carol, post)

In the second year, the number of students decreased from 7 to 5. At the same time, scheduling problems were to a significant extent resolved. In her interview at the end of the second year, Natasha reflected on how the work proved easier and more effective than in the previous year as a result of this:

Let's say this year it was very nice because there were few of us, but we were always the same. [...] It was also different because I had already shared a lot with Ellen and Herbert. But also with Emma and Mark it was very...I felt them always close, always ready to do something. So, I felt very good this year. Even last year [it was good], but you could feel more that this year there was a group. (Natasha, post)

Lisa, who participated in A4A only in the first year, expressed views in her final interview which were close to those just reported, and she went so far as to hypothesise that this element probably also made the workshop leader's job particularly difficult:

Maybe when we were less people, but we were more prepared and more ready, [...] everything worked [better]. And there were some other times where I didn't feel this team. They were cases where the workshop leader just led, and we were there just to listen or support her without involving ourselves so much, or other times that everyone was doing things, but it wasn't a team, I don't know how to say. Surely because it was different people, because the people are not the same every week. (Lisa, post)

USE AND DEVELOPMENT OF ONE'S OWN MUSICAL COMPETENCES

The diaries and the interviews also made it possible to observe some of the students' reflections regarding the use and development of their musical skills throughout their participation in A4A. In particular, occasional difficulties with singing emerged, as well as the desire to have more opportunity to act as a conductor.

Singing

The singing activities included in the programme have in some cases given rise to difficulties of various kinds. None of the students involved in A4A studied singing as their principal subject, and this resulted in occasional dissatisfaction or concern about their abilities:

The challenges of this session were the songs. [...] I found myself in difficulty when singing some songs. I listened to them, I already knew some of them, but, at the time of singing them, I don't know: I felt unstable, unable to sing those songs there. I don't know why...I mean, it bothered me that...I felt too out of tune, I don't know. I didn't understand why some songs didn't work when we sung them. (Karen, D)

In this session the challenges were basically just those parts where I had to sing. I'm not so used to singing. I mean, I regularly sing in the university choir, but singing like this is a new context anyway, and it was a challenge, but in the end it was positive. (Mark, D)

Participation in the programme actually seemed to have supported Mark in managing his difficulties in singing. In fact, in another of his diaries it emerged that, on the one hand, these problems were partly related to his temperament and, on the other hand, that he perceived his problems in singing as gradually diminishing:

I feel more and more comfortable in singing, which is something I'm developing especially thanks to this project, because at the beginning I was very ashamed to sing, now I do it without problems. Even if I think I don't have a great voice and I'm not in tune, it's a nice way of expressing enthusiasm for music, which is after all what we have to bring, and so I have to say that by now I'm more willing to do the task of singing. (Mark, D)

This theme emerged in his final interview too, which revealed that a key element in overcoming this problem was the collaborative atmosphere within the music team and the inclusive and constructive approach of the workshop leader:

At the beginning I was very hesitant, and also frightened by many things that I had to do and that I had never done before, like singing songs...that I was learning an hour before to memorise them. But at the end I saw that in the latest sessions it was almost natural to do it, because there was a nice working atmosphere among us, very quiet and relaxing. [...] Ironically, A4A helped me to sing. Before I was always ashamed, while now I'm not so ashamed anymore. (Mark, post)

Besides the technical issues related to singing, the inclusion of songs in languages other than one's own could be an obstacle in terms of memorisation and correct pronunciation of lyrics:

I think the challenge of this session was [the song by] Mozart. I personally am not very good with German, and I think singing this song in this way is very complicated for [the residents] as well. Maybe I see it that way because I don't feel up to the task of singing it. (Karen, D)

Let's say a challenge was to try to learn the dialect and sing it without too much trouble. (Miriam, D)

However, the inclusion of songs in dialects linked to the residents' own life histories offered opportunities for mutual teaching, as Miriam remarks:

The challenge is always the same (laughs)! Trying to learn the songs in dialect! That's a challenge...however, maybe when there's a lady or gentleman who offers to speak the words to teach us it's nice. (Miriam, D)

Conversely, Carol reflects on the need to master the lyrics of each song from the very first time it is introduced to residents:

After today's session I realised that we can't go there and learn the songs too. The residents look at us like masters, they look for the words in our lips as they don't have the lyrics [printed], they look for a melodic support that is as reliable as possible. In my opinion, it would be better for us to learn the songs and lyrics by heart as well, so that we can also observe what they do. (Carol, D)

Opportunities to act as conductor

The seminar related to A4A did not aim to develop students' skills systematically in conducting small instrumental ensembles. As a consequence, over the two years only a few students occasionally found themselves taking on the responsibility of performing this task. From some diaries it emerged that this opportunity was welcomed and some students would have been glad if everybody could have had regular opportunities to act as conductor:

The task I enjoyed the most was the "Ah robin" song because, since we were divided into groups, it was nice to take care of just one group. It also involved establishing a closer relationship with a few people, thus increasing our focus on the residents and vice versa. (Karen, D)

If I had the chance to change anything, I think I would make it so that it wasn't just one person conducting, [rather allowing] everyone to play that role a little bit. [...] I think a little bit about last week: it worked so well, when more than one person was directing, because everyone has a special thing they can give. Maybe one [of us] speaks and communicates with [the residents] better, one sings better, another has clearer gestures and another one knows the lyrics and the music better, I don't know. I think it would be better if everyone had some space to conduct.
(Lisa, D)

Natasha had several opportunities to conduct in her second year of participation, and two diary recordings a week apart show very clear thoughts on specific aspects of conducting, both in general terms and in the context of group music making with residents in nursing homes:

For me, the biggest challenge was being able to conduct the residents without performing their part myself and rather making signs like a real conductor would do. [...] So it was very interesting to look for signs to do that. I think it's a step forward, because it wasn't [like] in previous sessions, where everyone had their own group and so the one playing the drum was conducting those with drums, another one with maracas [was doing the same] and so on. [...] I really liked it today because through the use of signs one can manage to conduct the whole orchestra of residents. (Natasha, D 2)

The tasks you most enjoyed doing? Broadly speaking all of them, [and] today I had so much fun while conducting. I don't know, I think I'd like to learn how to do it a little better, maybe make clearer signs, because in the end I don't know exactly what signs I should do to make [music] clearer. Because everyone has their own rhythm, so it's not like I can only do one rhythm, and at the end I was looking at one group, and another, and each time I was doing the rhythm of the group I was looking at, so that they would understand what theirs was, at the end it's hard, anyway I would like to learn how to do it better. (Natasha, D 2)

8.2 DISCUSSION

The aim of this study was to identify the situations students involved in A4A considered demanding, and tasks for which they considered themselves not fully prepared. Consequently, in this study the thematic analysis focused only on the aspects

that those students described as problematic in terms of their preparation. The findings invite consideration of some aspects related to encounters with the residents and to the competences considered relevant to engage them in group music making successfully. However, from the whole data set collected over two academic years it emerged that students often perceived improvements in their ability to deal with situations initially perceived as problematic.

A point emerging clearly from this study relates to the difficulties and concerns that students expressed around interacting with residents. This theme has various dimensions. First, it emerged that almost unanimously the students perceived older adults as a population different from their own and from others considered more familiar. The idea of performing musical activities in a nursing home may therefore arouse feelings of uncertainty or concern. At the same time, the possibility of acting as a music facilitator in nursing homes by attending a higher music college seminar was viewed with interest by all of the students involved. Participation in A4A took place on a voluntary basis, and students showed interest and motivation to better understand the older population and to overcome the sense of distance and incomprehension that they perceived towards them. However, the heterogeneity of residents involved in the sessions carried out in the four host nursing homes was considered challenging by several students. Their thoughts about the difficulties in effectively and appropriately engaging residents who were very diverse in terms of health, socio-economic profile and musical background align with the rich literature highlighting the considerable heterogeneity of the over-65 population (Dannefer, 1987; 2003; Ferraro and Kelley-Moore, 2003; O'Rand, 2003), including dimensions related to musical preferences and skills (Flowers and Murphy, 2001; Gabrielsson, 2002). Students' reflections emphasised the difficulties of identifying musical contents appealing to all residents as well as approaches that could be effective in engaging a heterogeneous group.

However, while these thoughts focus on general perspectives, the diaries and interviews also offered interesting insights with respect to the actual interactions which occurred with residents during the music sessions. The main perceived difficulties in this regard were due to interacting with people one does not know or people with serious health impairments. In these contexts, the personality of each student played an important role, making these aspects problematic especially for those who described themselves as shy or emotional.

From this overall picture, some relevant elements emerge. In many cases, especially with regard to managing close individual relationships with residents, students reported that the difficulties they perceived were overcome session after session. At the same time the students manifested, especially in their diaries, awareness of the importance of being physically close to the residents and of relating directly to each of them in order to facilitate their involvement in group music making. It is crucial to highlight how, in line with the literature discussed in Chapter 2 (Ascenso, 2016; Gande and Kruse-Weber, 2017; Smilde et al., 2019) and the results of study 3 of this thesis (see Chapter 7), the students manifested positive feelings about their progress in this regard, supporting the idea that community-based programmes can provide mutual benefits for recipients and providers (Crawford et al., 2013). It therefore seems crucial to offer a seminar that can provide the best conditions to support all students to competently and calmly approach their interactions with older adults in the context of music-based interventions in nursing homes. This idea is supported by the interest and motivation unanimously expressed by the students with respect to overcoming the perceived distance between themselves and the older population.

At the same time, some data suggest that the A4A experience was not sufficient for the students to gain an in depth understanding of the salient features of a complex population such as older adults. Consequently, in order to offer students solid competences in the field of music-based interventions in nursing homes, it would seem essential to involve a multi-disciplinary team of teachers. The contributions of experts in sociology, nursing and gerontology would be necessary to provide students with the theoretical knowledge required to develop effective relationships with residents. At the same time, the involvement of staff members from each nursing home in this kind of seminar could be crucial in facilitating the knowledge of, and the interactions with, both the group of residents and the individual members who comprise it. In this way, the situated learning (Renshaw, 2010; Smilde, 2018) component of this type of seminar would likely be strengthened and students would be in the best position to relate to even the most severely compromised residents. As highlighted in Chapter 4 section 4.4.2 and in Appendix A4.1, A4A included in its faculty team a professor of sociology (Stefano Cavalli) and a lecturer in nursing (Carla Pedrazzani). They participated in the training offered at the beginning of the seminar and, having been present alternately in the sessions, had the opportunity to monitor the entire programme and to support the staff of each nursing home. Providing them the opportunity to interact regularly

with students, for example attending the rehearsals and the debriefing sessions, could improve the seminar and make the training offered to students more comprehensive. Sections 4.5.1 and 4.5.2 of this thesis also briefly described the collaboration with staff of the four nursing homes hosting A4A. The support provided by each member of the partner institutions was invaluable, but their direct contact with students was nevertheless occasional and very informal. Designing the seminar so that these figures are involved on a regular yet sustainable basis could be beneficial not only in improving the training of the musicians, but also in enhancing the engagement and overall experience of the residents.

With regard to the preparation and performance of each session, concerns emerged from students' data around the optimisation of teamwork and the need to use or develop specific musical skills. The difficulties related to the first point referred to occasional discrepancies between the repertoire planned and that which was actually used during specific sessions, or to the fact that, due to the variable presence and absence of individual students, the music team involved in each session was not consistent. The diaries and the final interviews clarified that these two points provoked feelings of insecurity and made it difficult for students to provide a meaningful contribution in each session. These issues are not directly linked to the competences to be transferred to students as part of the seminar, as they are related rather to organisational aspects of the A4A project as a whole. The data collected in the second academic year show a significantly higher level of satisfaction with these issues on the part of students, and this is likely due to the experience gained by everyone involved in A4A over the two academic years. Due to the overall complexity of the programme, in order to optimise the many pedagogical and organisational aspects of A4A it was necessary for all the actors involved in the project to gain experience in the field session after session.

The introduction in the second year of systematic debriefing at the end of each session, along with the placement of A4A at a time in the school calendar which was not excessively burdensome for students, to a large extent solved organisational problems reported by students primarily at the beginning of the programme. The experience gained in the first year also provided a solid basis for observing residents' reactions to a wide range of songs and activities, making it possible to offer residents involved in the second year of A4A a largely proven repertoire. Finally, the fact that fewer students were involved in the second year, and that three out of five had also participated in the first

edition of A4A, played a significant part in making the team more compact and making it easier to prepare for sessions and manage possible changes of schedule.

In addition, regardless of aspects that are specifically related to the context in which the first two editions of the specific A4A program took place, the themes which emerged from the data invite reflection in general terms on the competences that a seminar focusing on community-based music interventions should offer to students. The literature suggests that the skills needed to perform community-based interventions go beyond musical competences, and include the ability to negotiate, flexibility, an open attitude to inter-professional collaborations, empathy and reflexivity (Hallam et al., 2015; Higgins, 2008; Hogan, 2002; Renshaw, 2010; Smilde, 2012; Smilde et al., 2019). These elements have not been addressed systematically in the two years that A4A has been offered to students.

The second theme related to conducting music sessions has to do with two particular aspects of group music making, namely singing and conducting. With respect to the former, students reported occasional difficulties related to learning lyrics and to singing with adequate confidence and quality. With respect to the latter, there was a widespread desire to develop the ability to conduct through participation in A4A. In fact, the difficulties reported in memorising lyrics, especially in foreign languages, seem to be in line with those reported by the residents involved in study 2 of this thesis and invites consideration of the advantages and disadvantages of singing and drumming. At the same time, the literature focusing on community music highlights the need for a music facilitator to develop skills in singing, arranging, and conducting (Renshaw, 1986; 2010; Smilde, 2012; 2018; Triantafyllaki and Anagnostopoulou, 2013). In the two editions of A4A there were no lessons in vocal technique and only a few students, occasionally, directed the entire group of participants. What emerged from the diaries and interviews represents a clear invitation to offer the possibility of acquiring or advancing these competences. Therefore, it is fundamental to design a seminar that in a gradual and systematic way can satisfy this need. In this way, while maintaining the focus on the elderly population and nursing home residents in particular, students could acquire basic skills that would also be useful for conducting music-based interventions in different types of communities.

8.3 CONCLUSIONS

This study aimed to shed light on the situations and tasks where students did not feel adequately prepared, and to explore their ideas on how to improve the training they received. The findings highlight that the students involved in A4A occasionally experienced some concerns and a lack of preparation during their interactions with the residents participating in the music sessions. At the same time, their statements invite consideration of the need to improve some specific musical skills. In general, the problems and the drawbacks reported by students decreased significantly over time. This may be due to a number of reasons. Firstly, students became more and more familiar with the residents and their task just by participating in the sessions week after week, thereby enhancing their confidence and capabilities. Secondly, in the second year some significant changes were made to the programme on the basis of the experience previously gained, and the data clearly suggest that some of the drawbacks perceived in the first year had been addressed. Finally, some students took part twice in A4A, and this contributed to a significant extent to enhancing their confidence in acting as music facilitators. While this overall picture is encouraging, it is imperative to ensure a learning environment which is able to provide the necessary confidence and ability to act as music facilitator in nursing homes from the outset. At the same time, as suggested by the literature, as pointed out in Chapter 2, it is crucial to provide students with the musical competences required to act successfully in community-based music interventions.

CHAPTER 9

DISCUSSION AND CONCLUSIONS**INTRODUCTION**

This chapter discusses the overall results of the studies reported in this thesis and is divided into four sections. The first focuses on the findings of the four studies conducted to address the research questions and discusses four points: the mutual benefits that residents and students perceived by participating in *Art for Ages* (A4A); the importance of the participative component of A4A in the residents' and students' experiences; the impact of this programme in terms of interpersonal relationships; and the potential of this type of intervention in terms of learning opportunities.

The second section addresses the limitations of the thesis, discussing four factors that suggest the need for a cautious interpretation of the overall results. These relate to the recruitment criteria used for residents and students; my involvement in data collection; the limited duration of the programmes carried out in the nursing homes; and the lack of diversity, in geographical and organisational terms, between the four institutions involved. The third section then offers three recommendations for the development of effective music-based interventions for nursing home residents and for music students. These recommendations stress the need to develop receptive as well as participative music engagement programmes in nursing homes involving higher education music students; the need to involve students in music-based interventions addressing third age and community-dwelling populations; and the need to increase opportunities offered by conservatoires for acquiring the skills needed to engage older adults with music.

The fourth section indicates some avenues for future research, focusing not only on the older population and conservatoire students but also on nursing home staff and the informal carers of residents. The chapter ends with a summary of the main points of the whole thesis.

9.1 DISCUSSION OF THE RESULTS

9.1.1 THE MUTUAL BENEFITS PERCEIVED BY RESIDENTS IN NURSING HOMES AND HIGHER EDUCATION MUSIC STUDENTS INVOLVED IN GROUP MUSIC MAKING

Considering the four studies that make up this thesis as a whole, the results align with those of previous studies and go on to provide new insight into the effects of engagement with music on older populations and on the effects on musicians involved in community-based activities. One main new finding of this thesis is that the encounter between nursing home residents and conservatoire students in the context of music-based interventions can be meaningful for both populations and can generate mutual benefits. Moreover, this thesis provides further insight into the role of music in older adult's life, focusing on fourth age and in particular on residents in nursing homes. The effects of music making on this population has been not adequately investigated so far, and the findings of this thesis highlight a wide range of benefits in terms of health, wellbeing and social connectedness, calling attention at the same time on the potential of receptive engagement with music.

Study 1 (reported in Chapter 5) revealed numerous reasons why residents considered music as something important and valuable. This related to different forms of engagement with music, was nearly constant throughout the lifespan of the participants, and was common to people with very diverse socio-economic profiles and musical backgrounds. At the same time, study 2 (reported in Chapter 6) revealed that, among the reasons why participation in A4A was considered positive and beneficial, was the fact that this programme offered an opportunity to access and be engaged with music in various forms. Both studies highlighted that music was considered important for three main reasons. Music was considered to be a means of keeping ties with one's biography and identity alive; to be something that could be used to improve mood and provoke pleasant feelings; and to be something that could elicit intense emotions. With respect to the first point, music had a strong power to evoke residents' memories. This may relate to specific episodes or to phases of life, which in turn were linked to events or people considered important. At the same time, music could maintain or reactivate connections to one's identity for residents who had played an instrument in their childhood or

adulthood, who were used to singing in informal settings, or who had regularly attended concerts, dance halls, or listened regularly to music on the radio and on records.

A further element to emerge from studies 1 and 2 related to the capacity for music to improve mood and cause pleasant feelings. The possible nuances in this sense are manifold: music offered company to residents, cheered them up, communicated vitality and energy and made them feel younger. In this way, as also suggested by previous studies on older adults (Cohen et al., 2002; Hays and Minichiello, 2005; Laukka, 2007), music could be a support for coping with negative moods. At the same time, the studies in this thesis found that listening to particular songs could have negative effects. Music's ability to evoke events and people from the past could also give rise to feelings of melancholy and lead some residents to prefer not to listen to music. This point indicates the need to negotiate the musical content of music-based interventions, to be able to offer a diversified repertoire and to master a wide range of approaches to engage residents. Moreover, this requires the providers to pay close attention to participants' reactions and to possess good communication skills.

Apart from its impact on mood, studies 1 and 2 showed that music can arouse intense emotions. For this reason, it was considered as an art form of great aesthetic value by the residents. Thus, the possibility of participating in a group music making programme was viewed with interest, enthusiasm and gratitude. For some residents, the passion for music had been cultivated throughout their lives, while other respondents, describing very intense reactions to the beauty of music, stated that they did not have adequate skills in repertoire and music theory to discuss these topics in depth. Despite these differences, music was commonly seen as a precious resource, capable of touching deeply and elevating spiritually. These aspects, which are aligned with previous studies focusing on the "young old" or community-dwelling older people (Creech et al., 2014; Hays and Minichiello, 2005; Lamont et al., 2017; Southcott and Nethsinghe, 2019; Varvarigou et al., 2012), emerged not only from the interviews focusing on the residents' relationship with music and musical preferences (study 1), but also on the reasons for appreciation and benefits associated with the A4A music making programme (study 2).

These overall results seem to be significantly aligned with the PERMA model (Seligman, 2011) and in particular with the dimensions of *positive emotion*, *meaning* and *engagement*. As noted above, music can be seen as something capable of improving mood

and provoking pleasant feelings, being at the same time capable of keeping links with fundamental biographical elements alive. Listening to specific masterpieces or high-level performances can also offer rewarding and transcendental experiences for residents. In both concentrated and more casual types of listening, as well as in active forms of music making, music can therefore have a strong engagement component as it can offer both a sense of deep absorption and pleasant enjoyment. The residents' interviews revealed a widespread appreciation for the musical skills of the musicians involved in A4A and this confirms the idea expressed by the authors of previous studies (Costa and Ockelford, 2019; Dabback, 2008) that it is essential to guarantee a high level of musical quality in musical activities and programmes addressing the older population. The regular involvement of higher education music students in nursing home music programmes therefore seems both promising and desirable, as it would make the regular presence of high-level musicians in this type of facility sustainable.

Considering the perspectives of the students (study 3 reported in Chapter 7), further reasons emerge that stress the need to facilitate encounters between these two groups of people. The interviews and diaries made it clear that the students felt the need to do something positive for the community, and it was also clear that A4A was seen by them as a project of great humanitarian value and as an opportunity to use music to improve the wellbeing of people considered disadvantaged or suffering. However, considering the results of the studies discussed in Chapter 2 section 2.3 referring to musicians' risk of isolation (Creech et al., 2008; López-Íñiguez and Bennett, 2020; Perkins, 2017), and those discussed in section 2.5 referring to the benefits reported by musicians engaged in programmes addressing disadvantaged communities (Campbell, 2010; Gande and Kruse-Weber, 2017; Perkins et al., 2015; Triantafyllaki and Anagnostopoulou, 2013; Smilde et al., 2019), further research is needed to understand the desires and attitudes of students with respect to this type of activity.

Considering the specific context of A4A, the students' diaries and final interviews show a wide range of perceived benefits in being involved in group music making in nursing homes. Students found themselves reconsidering some assumptions about their musical vocations. In particular, A4A offered the stimulus to question their tendency towards perfectionism and led some students to rediscover the reasons why they decided to take up music. This suggests that participating in group music making in nursing homes can have a strong impact in terms of the PERMA dimension of *meaning*.

Moreover, taking part in the sessions provided some students with psychological and physical benefits, described in terms of energy, concentration and decrease of perceived pain and sickness. These elements suggest that group music making also has had a strong impact on the PERMA dimension of *engagement*. These effects, in fact, seem to be attributable to the concentration and commitment experienced by students in making music with and for the residents. Beyond the perceived effects of taking part in the programme, the final interviews and diaries suggest that increasing the offer of programmes similar to A4A could be beneficial in the context of both nursing homes and music colleges. Most of the students also expressed the desire to continue being involved in this kind of activity.

These overall findings suggest that the encounter between residents and musicians in music making sessions can offer benefits for both groups. Consequently, it can be argued that this activity also has potential in terms of mutual recovery (Crawford et al., 2013), namely that it can improve the wellbeing not only of recipients but also of providers.

9.1.2 THE ROLE OF ACTIVE ENGAGEMENT WITH MUSIC IN THE ENCOUNTER BETWEEN NURSING HOME RESIDENTS AND HIGHER EDUCATION MUSIC STUDENTS

Considering the findings of this thesis stressing the need to facilitate the encounter between nursing home residents and music students, one element emerged with clarity concerns the importance attributed by the residents to music making. Study 2 focused strictly on this kind of engagement with music, but relevant points in this sense also emerged clearly from study 1. It in fact provided insights with respect to the relationship with singing and the reasons why the study or use of musical instruments, if any, was interrupted by the interviewees. Regarding the first point, it emerged that, at least in the case of the six institutions involved in the study, residents had relatively easy and regular access to collective singing activities. The motivations and degree of involvement in taking part in this activity were diverse and some of them are discussed in the next section. What is important to emphasise here is that these singing opportunities were considered accessible and relevant even by people with more or less severe voice impairments or by those who believed themselves lacking in adequate musical and vocal skills. Crucially, regardless of the presence and degree of these limitations, residents

reported perceived benefits from this activity, as it was considered fun and could increase happiness and vitality. Furthermore, in line with what has been discussed in the previous section, the singing sessions offered in nursing homes fostered connections with residents' own experiences because the repertoire often included songs that were meaningful to them or because they used to sing in the family or other informal contexts. With regard to the use of musical instruments, this type of engagement concerned a minority of residents. With the exception of one former professional pianist who had an electric piano in his room, they all stated that they no longer had the physical condition to make music.

The results of study 2 showed that the residents strongly appreciated the opportunity to use instruments that were playable despite very serious physical impairments. This made it possible for them to try out different instruments, discovering their sound and their expressive possibilities, while feeling themselves to be part of a musical ensemble. This aspect is also significant considering that studies 1 and 2 showed that for some residents playing an instrument was a desire that remained unfulfilled. The opportunity to use the instruments included in A4A, besides offering learning opportunities that are discussed in section 9.1.4, provided joy, fun and other positive feelings by stimulating the creativity and imagination of the residents. The inclusion in the toolkit of the common objects described in Chapter 4 section 4.4.1 and in Appendix A4.3 seems to have played an important role not only in this respect but also in creating an inclusive atmosphere that facilitated the involvement of shy or fearful residents. This is particularly relevant given that, as highlighted in study 1, harsh criticism of one's singing and musical abilities in childhood or youth can have long-lasting negative consequences. These overall findings suggest that music making programmes can have a significant impact on the PERMA dimensions of *positive emotion* and *engagement*. At the same time, one of the residents involved in study 2 raised a critical issue that is important to consider carefully. In his interview he expressed disappointment as A4A just ended at the end of the tenth scheduled session, without any special closing activity or celebration. Therefore, the programme as a whole and the activities proposed during the sessions were perceived by him as an end in itself. This reaction, although manifested by only one respondent, confirms the idea that it is appropriate to include in community-based programmes public performances or some form of celebration (Creech et al., 2014; Lamont et al., 2017; Southcott, 2009) and suggests that this is also important in the context of nursing homes.

Considering the students' perspective, the active music making component of A4A led them to interact directly with the residents and to use their musical skills in different ways from those they are used to while performing or teaching in traditional venues. For these reasons, some students were able to discover professional opportunities that they had not previously considered. This aspect, related to what has been discussed in the previous section with respect to the reassessment of assumptions stimulated by participation in A4A, seems to confirm the idea that the involvement in community-based activities can contribute to increasing the employability of higher education music students (Renshaw, 1986; Smilde, 2012). Furthermore, the dimension of being involved in group music making had a positive impact for students in terms of interpersonal relationships and learning. These aspects are discussed in sections 9.3 and 9.4.

9.1.3 THE POTENTIAL OF GROUP MUSIC MAKING IN NURSING HOMES IN TERMS OF RELATIONSHIPS FOR RESIDENTS AND HIGHER EDUCATION MUSIC STUDENTS

The PERMA dimension referring to *relationships* seems to have been particularly enhanced by the participation in A4A, both for residents and students. As highlighted in Chapter 1, the idea that involvement with music can foster relationships among older adults is supported by a significant number of studies focusing on singing and other forms of music making (Creech et al., 2014; Lamont et al., 2017; Perkins and Williamon, 2014) as well as attending live music performances (Costa and Ockelford, 2019).

The results of this thesis suggest that music-based interventions can support relationships even in the context of nursing homes. In fact, from the interviews collected in study 2 it emerged that the involvement in group music making can support the initiation or consolidation of relationships among the residents. The enthusiasm for the A4A programme as a whole, along with the anticipation reported by some interviewees, offered residents opportunities for conversation about the proposed activities and the repertoire for several days before and after each session. Participation in the programme also fostered mutual support in some cases, while the collective dimension of the programme contributed to creating an inclusive and playful atmosphere, where making mistakes was acceptable and where there was room for laughter.

Besides the specific elements of A4A, the idea that the collective dimension of music-based interventions is relevant in nursing homes is also supported by study 1. The singing opportunities already offered by the nursing homes involved in the study were generally very much appreciated. Many respondents reported appreciating them not only for the reasons discussed in section 9.1.1, but also because singing offers opportunities to meet other residents. For the residents who, due to health problems or lack of musical education, considered their singing abilities to be poor, singing in a group is a necessary condition for them to enjoy the pleasures of this activity without being too constrained by their own limitations. Study 1 also provided some indication of how the activities focusing on listening to music offered in the common spaces of nursing homes were perceived. The emerging picture is rather diversified. For some, such initiatives were valuable precisely because they focused on music, while other residents, who preferred to listen to music with attention and concentration, preferred not to participate because they were distracted or disturbed by the presence of other people. There were also cases in which participation in these activities was motivated by the desire to meet other people rather than by a specific interest in the musical content offered. Overall, these results underline the need to consider carefully the potential of activities focusing on receptive engagement with music. To provide programmes combining live music and appropriate interactions between musicians and residents could significantly facilitate the access to music in nursing homes.

Moreover, the findings of study 2 revealed that the A4A experience was significant for the residents because it represented a response to problems often perceived in terms of feelings of isolation, doubts about cognitive abilities and lack of novelty in daily life. Regarding these points, the encounter with the students played a crucial role. Their regular arrival in the nursing homes gave residents a welcome opportunity to meet new people. On the one hand, the students were seen as highly skilled professionals engaged in taking care of the residents. On the other, while being involved in an engaging activity with the students, residents had the opportunity to develop familiarity with them week after week. Furthermore, the young age of the students made possible an intergenerational meeting which played an important role in the residents' experiences. Residents appreciated the enthusiasm and the energy of such young people who were committed to an activity considered valuable and beneficial. In addition, the spontaneous and informal approach used by the musicians contributed to making the sessions pleasant and inclusive, providing fun and even encouraging the shyer

residents. Some residents also reported feelings of empathy and links with their own autobiography, as the encounter with the young musicians brought back feelings and memories from their own or their children's time as university students.

As mentioned above, the PERMA dimension of *relationships* also seems to have been enhanced for the students, who were very impressed by the signs of gratitude, admiration and affection they received from the residents. The weekly pace of the programme allowed students to familiarise themselves with the faces, names and attitudes of some of the residents, and during the sessions the students were able to talk to or have non-verbal interactions with some of them. This provoked feelings of affection, and at the end of the programme some students reported feelings of sadness. Considering the literature discussed in Chapter 2, these findings invite consideration of the potential of community-based activities for students' wellbeing. At the same time, these results point to the need for further research to observe the impact of programmes of longer duration compared with A4A. However, the diaries and interviews show that participation in the programme also resulted in significant relationships between peers. In fact, as is discussed in more detail in the next section, students had a positive experience of their own engagement in group music making in nursing homes because they experienced mutual support. In some cases, the participation in A4A allowed them to initiate or consolidate friendships between themselves. As discussed in Chapter 2 section 2.3, many studies stress the high risk of isolation for professional musicians and music students (Creech et al., 2008; López-Íñiguez and Bennett, 2020; Perkins, 2017). In light of this literature, it is important to note that in some cases the choice to participate in A4A was also motivated by the fact of having the opportunity to meet and collaborate with other students.

9.1.4 THE LEARNING OPPORTUNITIES OFFERED BY GROUP MUSIC MAKING TO RESIDENTS IN NURSING HOMES AND HIGHER EDUCATION MUSIC STUDENTS

The findings of this thesis suggest that being involved in group music making in nursing homes can have significant effects on residents and higher education music students in terms of learning. Regarding the residents, studies 1 and 2 showed widespread curiosity and interest in music. Beyond the benefits attributed to music

discussed in section 9.1.1, in many cases the respondents revealed a desire to increase their musical knowledge or their ability to understand and appreciate music. Some residents expressed this interest in general terms, stating that they had little or no background in music, while others, based on a background of listening or musical competences, showed a desire to deepen what they already knew and to be able to appreciate unfamiliar genres and composers. In both cases the participation in a group music programme together with higher education music students was seen as interesting and fulfilling for several reasons. Some residents reported that participation in A4A allowed them to make progress in music making session by session, perceiving improvements in their sense of rhythm and their ability to perform their part correctly, to follow the instructions of the music team and to be coordinated with the other members of the ensemble. A4A also promoted a better understanding of some aspects related to the creation and performance of music, and some residents reported listening to music more consciously as a result of their experience of group music making. These overall results are close to the *accomplishment* dimension of the PERMA model (Seligman, 2011) and are relevant in terms of wellbeing. Furthermore, they are aligned with those of previous studies focusing on third age or community-dwelling populations, which suggest that improving one's musical skills is possible and also rewarding in old age (Dabback and Smith, 2012; Gembris, 2008; Prickett, 2003) and can provide benefits in psychological terms (Creech et al., 2014; Perkins and Williamon, 2014).

Moreover, it emerged from study 2 that the repertoire performed and the short live performances offered by the students represented a welcome opportunity to approach unknown genres and composers. This result is in turn aligned with the statements of some residents involved in study 1, from which it emerged that they were curious and interested in approaching unknown composers, works and genres. Consequently, the results of this thesis highlight the need to increase music-based interventions in nursing homes including programmes focusing on receptive engagement. As discussed in Chapter 6, to engage higher education music students in these activities is particularly promising, as the high standard of the performances played an important role in making the residents' experience rewarding.

The results of study 3 and study 4 (which is reported in Chapter 8) also showed that the involvement in A4A offered numerous learning opportunities for the students. The interviews and diaries revealed that residents in nursing homes, and the older

population in general, were considered as an unknown population. Beyond relationships with grandparents and other episodic relationships reported by some respondents, the students' data revealed that the older population was perceived by them as different from other populations and therefore as unfamiliar. From the interviews conducted before the beginning of A4A it emerged that this programme was seen as an interesting opportunity which made it possible, in the context of college studies, to approach this population through musical activities and thus to get to know it better. From the oral diaries and the interviews at the end of A4A it emerged that, thanks to this experience, the students had opportunities to discover the interest and the potential of the residents with respect to musical learning. The enthusiasm for the content of the programme and the appreciation of the live performances expressed by the residents, together with their progress in singing and drumming manifested throughout the programme, offered the students a greater awareness of the resources of a population considered fragile and severely cognitively and physically impaired. As discussed in Chapter 7, for some students, participation in A4A stimulated reflection on possible professional outlets. Consequently, making students aware of the importance attributed to music by older people (Flowers and Murphy, 2001; Gabrielsson, 2002; Hays and Minichiello, 2005) and the ability to learn music in later stages of life (Dabback and Smith, 2012; Gembris, 2008; Prickett, 2003) could be significant for their professional future. Besides the aspects related to their careers, some students reported that their participation in A4A also had an impact on personal dimensions. Through the encounter and the interactions with residents, students received valuable life lessons.

A further aspect of learning concerns the acquisition of specific skills considered professionally relevant. Study 3 clarified that the involvement in group music making in the context of a university seminar, under the guidance of a workshop leader and the research team, enabled students to acquire skills useful for teamwork and teaching. The former point echoes the idea that involvement in community-based activities can contribute to enhancing personal skills such as patience, flexibility and negotiation skills (Smilde, 2012; Triantafyllaki and Anagnostopoulou, 2013). Moreover, on the basis of what has been discussed in the previous section, it could be hypothesised that cultivating team working skills can also have positive effects in the PERMA dimension of *relationships* and thus on wellbeing. With regard to teaching skills, students reported that they learned useful techniques for group music lessons as well as songs, arrangements and musical exercises that could be transferred to other teaching contexts, especially to children, who

represent the main population involved in their teaching activity. Considering that their interviews were virtually unanimous in stating that teaching is considered as one of their most likely career paths, the fact that the students acquired these kinds of competences highlights the need to include opportunities for community-based activities in music universities' curricula. At the same time, study 4 brought to light the students' desire to deepen their singing and conducting skills through this type of seminar, confirming the idea put forward by other authors that to act effectively as a music facilitator one needs a range of musical skills that go beyond the mastery of one's instrument (Hallam et al., 2015; Renshaw, 1986; 2010; Smilde et al., 2019).

A final aspect to highlight, concerning both students and residents, is the difficulties encountered in learning the lyrics of the songs. This result invites careful consideration of the advantages and disadvantages that singing and drumming can offer and to negotiate with participants the balance of these two activities. Furthermore, considering the specific context of A4A, which involved students from Italy and Spain as well as residents from the Italian and German-speaking areas of Switzerland, an additional challenge was the occasional need to learn texts in languages other than one's own. The implications of this point are not to be underestimated, as to ensure maximum inclusiveness and participation of residents it may be very important to negotiate a repertoire of songs representing the different backgrounds of residents.

9.1.5 AVENUES TO IMPROVE THE MUSICAL PROGRAMME

Beyond the effects perceived by participants by participating in A4A, the overall results of this thesis offer useful insights to improve future iterations of the programme. From the four studies carried out, several suggestions emerged relating both to the improvement of the artistic content of the music programme and to the role of participants in terms of leaderships and co-creation.

With regard to the first point, the programme can be considerably strengthened by considering, in a more bespoke way, the desires of the residents and by enhancing the musicians' skills. Although room to negotiate the repertoire with the residents was included from the beginning, the results of studies 1 and 2 offers ideas to improve this point. Collecting in advance, in cooperation with the staff of each nursing home,

information about the musical tastes and background of participants could be useful for defining the contents of the earlier sessions. For example, including beloved songs from the very beginning could make the residents' motivation high from the beginning, while the inclusion of songs well known could help the participants to achieve good musical results from the very first sessions. This could also prove helpful for singing activities, which, as Study 2 showed, can be difficult due to the occasional difficulty found in memorising lyrics. Having precise information in advance would also offer valuable help to include in a more targeted and structured manner songs of unfamiliar authors, genres and geographical areas. This could make the discovery of new works, an important point emerging from Study 1 and Study 2, more straightforward and engaging. Operating in this way would also offer the advantage of giving the music team more time to arrange the works of the repertoire, with the possible involvement in the teaching team a specialist in arrangement or orchestration. In this way, the artistic quality of the programme could increase significantly, and students would be offered additional competences relevant for their careers.

With regard to the students, some changes could be made in future iterations of A4A to further enhance their musical skills. Study 2 and Study 3 suggested that the scope offered to showcase students' expertise as performers played an important role in both the residents' and the students' experiences. At the same time, in the first two editions of A4A, it was not possible to reflect adequately on how best to value this resource. Collecting information about residents before the start of the programme could be useful in this respect too. Part of the students' performances could in fact be organised in advance, following a coherent thread week after week. The choice of repertoire could be more targeted and conscious, seeking for each nursing home an appropriate balance of familiar and unfamiliar pieces. By identifying the pieces to be performed in advance, the students would also have more time to rehearse them, and this could further increase the sense of teamwork that emerged in Study 3. Furthermore, students could be supported in providing brief presentations of the works they perform. This could improve their public speaking skills and increase their ease in front of the audience, enhancing abilities useful not only in the context of community-based activities but for their professional careers in a broader sense. At the same time, appropriate presentations could increase the receptive engagement of the residents and enhance their appreciation of the performances.

The results of the four studies also offer insights for improving the music programme in terms of shared leadership and co-creation. Study 4 clarified that systematically providing to students opportunities to take the role of workshop leader could improve their training experience. This implies that students are prepared for this and that receive adequate feedback. These changes could easily be integrated into the programme by slightly increasing the hours of the preliminary training and by including this aspect in the briefing and debriefing of each music session. The students' leadership and co-creation spaces could also be increased by systematically involving them in defining the content of the sessions. In fact, this aspect has also been present since the beginning of A4A, and in the second year a clear increase in student engagement in this respect was observed. However, regularly handing out assignments in this sense and offering adequate feedback could improve the students' learning experience, offering at the same time insights and ideas to adapt the programme for each nursing home. As for the residents, including a final event in the programme could be useful to strengthen their role in terms of co-creation. Preparing for a celebration event could in fact offer additional room for negotiation and could stimulate residents to propose ideas. The event could also be developed on a specific theme proposed by residents and include some extra-musical contents, such as video projections or poetry readings relevant for them.

9.2 LIMITATIONS OF THIS WORK

Some important points emerge that apply to the research carried out with the residents and with the music students. The first concerns the recruitment of participants. As described in Chapter 4 section 4.5.2, each participant was asked to attend a minimum of eight sessions to be included in this research and, in the case of the residents, to possess adequate health to sustain an interview. Beyond these criteria, the recruitment of students and residents involved in A4A was voluntary. This aspect also applies to study 1, as the residents involved in this study also voluntarily decided to take part in an interview and were informed that the focus was on music. This makes it necessary to interpret the results with caution, as the interest and importance attributed to different types of engagement with music in the present and in the past could have been due to the fact that study 1 involved people who had a particularly strong connection to music. At the same time, the positive results from study 2 with respect to the benefits attributed to group music making sessions may be influenced by the fact that only people who were particularly interested in music took part in A4A.

However, looking closely at the data collected in the two studies, it seems safe to conclude that this limitation did not significantly affect the reliability of the results. In both studies 1 and 2, people with very different musical backgrounds and profiles were involved and the interviews revealed great diversity in terms of participants' abilities to discuss and comment on their favourite works, their evaluations of their own musical abilities, the contexts in which they had accessed music prior to moving to the nursing home and their levels of interest and involvement in singing and music making.

At the same time, both studies offered a rather articulated view about the collective dimension of engagement with music and its possible effects in terms of social relationships. Apart from these aspects, the research questions, methodology and recruitment criteria used for the studies reported in this thesis only considered residents with moderate or no cognitive impairments. The A4A sessions were, however, open to all interested residents, and the staff at each facility, as well as the students and the A4A research team, observed numerous behaviours suggesting that group music making was engaging and meaningful even for cognitively impaired residents. In particular, improvements in their musical abilities and mood were noted during and after the sessions. These observations, however, were episodic and not systematic. Research questions regarding the effects of group music making on a large proportion of nursing home residents therefore remain unanswered.

Considering the students' perspectives, their voluntary participation makes it necessary to interpret the interest shown in the humanitarian component of the programme and the benefits perceived by taking part in A4A with caution. However, studies 3 and 4 revealed great diversity in personal and attitudinal terms. For example, there were considerable differences in the way students described themselves, revealing either sunny and expansive dispositions or shy and introverted characters. Moreover, some students declared a strong motivation towards teaching, while others were only interested in teaching as a backup career. Although questions regarding the impact of a programme such as A4A on students who did not deliberately choose a university seminar based on it remain open, the diversity just described suggests that the recruitment criteria used in this study did not seriously compromise the reliability of the results.

A further limitation common to almost all the studies reported in this thesis concerns my involvement in the data collection. I carried out all the interviews conducted in

this research. The impact of this choice on the residents involved in study 1 could be considered insignificant, as I was not known to the interviewees and only met them during the interview. Conversely, the residents involved in study 2 knew me relatively well, due to my involvement as a bass player in the music sessions. This may have conditioned the respondents by limiting their sincerity and willingness to express critical views about their experience. However, the criticisms that emerged regarding the melancholy aroused by some songs, the disappointment over the lack of a final celebration element, and the low impact of A4A in terms of interpersonal relationships for some residents, suggest that the individuals involved felt able to participate in their interviews with an adequate level of sincerity and spontaneity.

My involvement in the data collection may have had an even more significant impact on the students, as I conducted both of the interviews with them (three interviews in the case of the three students who participated in A4A for two years) and I was also the recipient of the WhatsApp vocal messages containing the oral diaries of students. Furthermore, the students were aware of my employment as a researcher at the university where they were studying. Consequently, it cannot be excluded that they perceived power asymmetry in addressing the questions included in the semi-structured interviews and in the structure of the oral diary. Involving an external collaborator in the data collection could have increased the reliability of the results of this thesis. At the same time, the criticisms of A4A expressed by the students in study 4 suggest that the data collection procedure had ensured a significant amount of sincerity and spontaneity on their part.

A further limitation is related to the duration of the group music making programmes. A4A included 10 weekly sessions in the two years it was carried out, thus involving residents and students for a period of about two and a half months. Consequently, important questions remain about how participants might experience a longer programme. It could be suggested, for example, that by increasing the duration of the programme, residents may perceive more significant benefits in terms of learning, social relationships and health and wellbeing. Conversely, it could also be hypothesised that after a certain number of sessions there could be a decline in residents' interest and motivation. Questions regarding an effective implementation of this type of music-based intervention in nursing homes therefore remain open. This also applies to the perspectives of the students. On the one hand, the interviews and diaries were almost

unanimous in pointing out that a certain number of sessions were necessary to become fully acclimatised and to achieve satisfactory results. This suggests that a longer duration could have been beneficial for the students in terms of health and wellbeing and for their learning. On the other hand, the students' participation in A4A was in the context of an elective seminar as part of their undergraduate education.

Consequently, a longer involvement in this seminar could have negative consequences in terms of workload or comprehensiveness of their curriculum. However, the fact that three students chose to attend this seminar twice, and that the two students entering their second year also expressed interest in the possibility of repeating this experience is encouraging. Nevertheless, questions about the optimal duration of this type of training for students remain open, and further research is needed to identify the most effective ways to incorporate community-based activities into the curriculum of higher education music students.

A final aspect that suggests the need to read the results of this thesis with caution concerns the specific context in which A4A was carried out. Conducting this research was possible thanks to the institutions that chose to collaborate on the project, which were all located in the same geographical area. As described in Chapter 4 section 4.5.1, study 1 involved residents of six institutions, and three of them hosted the group music making programmes investigated in study 2. These nursing homes all belong to the same municipal institution in Lugano. Therefore, they share to a significant extent important elements in terms of internal organisation and approaches towards residents. In fact, study 3 also involved a fourth institution, which was excluded from the investigation carried out in study 2 due to a long interruption caused by an influenza epidemic. This nursing home, although not belonging to the same municipal institution, is located a few kilometres from Lugano and cannot be considered significantly different from the others. Consequently, the reliability of the results of this thesis could be significantly limited to a specific geographical and social context. The results of study 1 could therefore apply only to a small part of Southern Switzerland, while the implementation of A4A in other countries or in structures organised in a significantly different way from those involved in this thesis could give rise to different experiences from those reported here.

9.3 RECOMMENDATIONS FOR PRACTICE

This section sets out some proposed recommendations for increasing the implementation and effectiveness of music-based interventions involving older adults and higher education music students. Based on the results of the studies reported in this thesis and considering some gaps that have not been addressed in this research, some elements seem particularly worthy of consideration as next steps. They concern the development of (1) programmes focusing on receptive engagement with music; (2) programmes involving higher education music students and addressing third age and community-dwelling populations; (3) a seminar that offer students the basic competences needed to work in music-based interventions of different kinds oriented towards different types of elderly people.

9.3.1 THE NEED TO INVOLVE HIGHER EDUCATION MUSIC STUDENTS IN RECEPTIVE MUSIC-BASED INTERVENTIONS FOR OLDER ADULTS

Considering the themes that emerged from studies 1 and 2, an important point to consider concerns the potential of music-based interventions focusing on receptive engagement in nursing homes. From this thesis it emerged that listening to music through the most common devices such as radio, audio recordings and television can be difficult for nursing home residents. In addition, residents' perceptions of events focusing on listening to music organised by the nursing homes presented a complex picture. For some respondents in study 1, such events were of interest because they represented an opportunity to socialise and to meet other residents. Conversely, for respondents who wished to listen to music with attention, the collective dimension was a deterrent. At the same time, study 2 revealed that the moments in the sessions when students gave short live performances were greatly appreciated. This was the case even though they were given in situations not favourable to careful listening, such as before the beginning of the actual A4A sessions, while waiting for all residents to reach their seats in the room. This suggests that it is important to find ways to facilitate access to live music in nursing homes. It also aligns with the literature discussed in Chapter 1. The study conducted by Gabrielsson (2002) showed that listening to live music can offer rewarding experiences that can have a positive impact in the physical, emotional, cognitive and spiritual dimensions. The memory of such experiences can in turn be

very intense and could represent something precious. Crucially, the intensity of these experiences is not always linked to the repertoire performed. It may also be due to specific qualities of the performer(s) or to the proximity between listener and performer. More in-depth investigation into the involvement of higher education music students in programmes focusing on receptive engagement in nursing homes would therefore be relevant. These musicians generally possess a very high level of musical and artistic skill, and in collaboration with the staff of the nursing homes it would be possible to identify spaces that can facilitate direct interactions and contacts between performers and audience. Facilitating this kind of contact seems crucial also considering the results of study 2, which highlighted the centrality of relationships with students in the residents' experience. Moreover, the positive impact on older people of extra-musical interactions between performers and audience is also underlined by a previous study.

Costa and Ockelford (2019), investigating the effects of concert programmes designed to overcome some barriers to attendance perceived by older adults, found that performers' expressive abilities and charisma were highly appreciated by the audience. The authors linked their findings to the literature suggesting that the visual element has an important role in the evaluation of music (Platz and Kopiez, 2011) and that attention and response to live music tend to be higher compared with recorded music (Skoda et al., 2016; Vuoskoski, 2016).

The results of study 3 also invite to consider the possible benefits that higher education music students might gain from performing live music in nursing homes. This study highlighted the students' interest in using their musical skills for activities of humanitarian value. Moreover, for some students, having direct contact with residents was extremely significant in terms of motivation and gratification, and several statements reveal that in this context they rediscovered or better understood their ultimate reasons for being a musician. Considering the interest in live music shown by the elderly population (Flowers and Murphy, 2001) and the benefits perceived by them in terms of happiness, relaxation, inspiration and gratitude as a result of attending concerts (Costa and Ockelford, 2019), involving students in live performances in nursing homes could give rise to mutual recovery (Crawford et al., 2013) in a similar way to that shown in study 3. Considering the nursing home environment in terms of spaces and interactions between the different actors living or working there, it would be necessary to offer students training in facilitating receptive engagement with music in this particular context. In this way musicians may find new professional possibilities.

9.3.2 THE NEED TO INVOLVE HIGHER EDUCATION MUSIC STUDENTS IN MUSIC-BASED INTERVENTIONS ADDRESSING THIRD AGE AND COMMUNITY-DWELLING POPULATIONS

The second recommendation emerging from this thesis concerns the need to investigate the potential of involving higher education music students in music-based interventions addressing third age and community-dwelling populations. The literature reviewed in Chapter 1 discussed a significant number of studies suggesting that this population can derive a wide range of benefits by being engaged both actively and receptively with music (Costa and Ockelford, 2019; Creech et al., 2014; Smilde et al., 2019; Varvarigou et al., 2012; 2013). Chapter 1 also highlighted that only a few of the previous studies carried out in this area involved students (Campbell, 2010; Gande and Kruse-Weber, 2017; Perkins et al., 2015; Triantafyllaki and Anagnostopoulou, 2013). These studies, together with those in which the providers were professional musicians, were discussed in Chapter 2, where it was pointed out that they present very encouraging results but also that there are gaps in the literature. Investigating the encounter between music students and third age populations in more depth is therefore important. Identifying the most appropriate ways to prepare the musicians of the future to work with this population could offer a significant contribution to the sustainability and dissemination of interventions whose usefulness is becoming increasingly clear.

On the one hand, Chapter 1 made it clear that the older population has significant resources in terms of musical learning (Dabback and Smith, 2012; Gembris, 2008; Gibbons, 1982; Myers, 1998; Prickett, 2003) and that music represents an important resource in fostering interpersonal relationships and maintaining a good mood (Hays and Minichiello, 2005; Lamont et al., 2017; Perkins and Williamon, 2014; Varvarigou et al., 2012, 2013). On the other hand, financial concerns, unsuitable transport schedules, physical impairments or reluctance to leave the house in the evening may act as barriers for older people wishing to attend concerts (Costa and Ockelford, 2019). In addition, many older adults wish to improve their instrumental skills or would have liked to have the opportunity to play an instrument (Flowers and Murphy, 2001).

Identifying sustainable strategies to meet these needs and consolidating the implementation of music-based interventions addressing older adults is important for several reasons. Chapter 1 pointed out the dramatic demographic growth of this

population. The statistics concerning Southern Switzerland (Ufficio Federale di Statistica, 2008) make it particularly urgent to identify effective strategies to promote an adequate level of wellbeing throughout the ageing process. This demographic trend goes far beyond the Swiss borders and concerns many nations (WHO, 2014), and to face the challenges linked to this, it is crucial to delay the loss of autonomy and the physical and cognitive decline related to the fourth age for as long as possible (WHO, 2002). Considering the recommendations expressed by the paradigms of successful ageing (Rowe and Kahn, 1997) and of active ageing (WHO, 2002), the results of studies 2 and 3 suggest that higher education music students could offer an important contribution. Training students to facilitate the engagement of the older population with music can help reduce older adults' isolation and increase their access to leisure activities, supporting them "to realise their potential for physical, social, and mental wellbeing" (WHO, 2002, p. 12).

It seems plausible to hypothesise that the "young old" could significantly appreciate the intergenerational exchange, the musical qualities of the students and the learning opportunities highlighted by study 2. This kind of encounter could also be significant for the students with regard to their desire to give something back to society.

Consequently, it could enhance the wellbeing of students in terms of the *meaning*, *relationships* and *engagement* dimensions of the PERMA model. Moreover, it would be interesting to observe whether and to what extent the difficulties and concerns highlighted by study 4 with regards to the encounter with the older population might be experienced by students meeting the "young old". Considering the points discussed in the previous section, it would be desirable also to consider music-based interventions focusing on receptive engagement in future research. A final point encouraging the development of music-based interventions addressing the "young old" and community-dwelling populations has to do with the geographical context in which this thesis was carried out. Although Southern Switzerland is a relatively small area, it comprises numerous villages isolated by the mountainous terrain, and this can clearly increase problems of isolation for the older adults living in those areas.

Developing a network that allows the music university to develop a widespread offering of music-based interventions involving its students could be a sustainable solution for the benefit of providers and recipients. It is reasonable to assume that this

kind of mutual benefit could also take place in large metropolitan areas, where a high number of older adults are also significantly exposed to isolation.

9.3.3 THE NEED TO INCLUDE COMPETENCES RELEVANT TO ENGAGING OLDER ADULTS WITH MUSIC IN CONSERVATOIRE CURRICULA

The third recommendation that emerges from this thesis concerns the importance of further developing the training of students to work in community-based programmes. This recommendation has two aspects: training the competences specific to engaging older populations with music, and the possible benefits that this kind of training could offer to the learning environment of music universities.

Concerning the first point, students' interviews and oral diaries showed a strong interest in A4A and this seminar was considered innovative. Moreover, many students expressed their desire to repeat their participation or suggested extending the duration of the programmes. These results encourage the continuation of this type of elective seminar, and study 4, which discussed students' criticisms of the programme, offered some indications of how to improve the content, organisation and interdisciplinary component of A4A. Furthermore, the previous sections stressed the need to prepare students to participate in music-based interventions focusing on receptive engagement as well as in programmes addressing the "young old" and community-dwelling populations. On the basis of the literature discussed in Chapter 1, it became clear that to engage older adults it is not enough to offer concerts and recitals in traditional formats. In addition to the mastery of one's instrument, it is necessary to cultivate the communicative qualities of the students and their abilities to act appropriately in a complex context. It is also clear that due to the differences between the third and fourth ages (discussed in Chapter 1), and to the characteristics of the specific contexts in which music-based interventions might take place (discussed in Chapter 2), it would be necessary to integrate the training offered by A4A so far. Consequently, the seminar considered in this thesis represents only a first step in the creation of a didactic offer that is important to repeat and implement more widely. At the same time, as is discussed in the next section, the seminar proposed in A4A needs further research to be developed and implemented effectively.

The need to further develop this type of training in music universities also emerges from some of the points discussed in Chapter 2. In addition to elements related to health and wellbeing that are discussed in the next section, the literature review highlighted three possible directions that music universities should develop to facilitate students' entry into a sustainable musical career. These directions refer to increasing the provision of mentoring and broadening the curricula; reconsidering the idea of "success" within the music profession; and offering environments and learning experiences which enable students to develop their interpersonal and intrapersonal abilities. The overall results of this thesis suggest that each of these three aspects has been addressed to some extent by A4A. Therefore, preparing students for group music making with residents in nursing homes may play a decisive role in facilitating their transition into the profession.

Regarding the first direction, study 3 showed that by taking part in this seminar the students acquired competences considered relevant, and study 4 offered useful indications on how to make this training more complete. However, it must be acknowledged that some of the skills considered crucial for acting as a music facilitator in community-based programmes, such as improvisation and arrangement (Renshaw, 1986; 2010; Smilde, 2012; 2018; Triantafyllaki and Anagnostopoulou, 2013) have not been included systematically in A4A. Continuing to develop this type of training is therefore very important, and involving students in music-based interventions addressing the "young old" and community-dwelling populations is also promising in this regard. Involving students in programmes addressing these people could broaden the repertoires of songs and musical activities learnt by the students, making it possible to include more complex musical aspects compared to those appropriate for nursing home residents.

With regard to the need to reconsider the notion of "success" in the culture of music universities, some findings of this thesis may offer food for thought. The literature review carried out in Chapter 2 highlighted the need to reconsider some assumptions which are deeply rooted in the culture of conservatoires and music universities. These refer in particular to the idea that a significant amount of talent is necessary to have a fulfilling musical career and that the ultimate goal for a musician is a solo career (Ascenso et al., 2017; Bennett, 2013; Juuti and Littleton, 2010; Kingsbury, 2001; Nettle, 1995; Smith, 2013). The results of studies 2 and 3 reveal elements that invite to question these beliefs. The residents involved in A4A showed great appreciation for the music performed by the students and for their abilities as performers, although the repertoire performed and

the context in which it was performed were not appropriate to fully appreciate the actual abilities of the musicians. At the same time, it was very rewarding for the musicians to perform for the residents. The signs of appreciation and gratitude students received seem to have had a clear effect on the PERMA dimensions of *meaning* and *engagement*. Furthermore, as emerged in Chapter 7, the participation in A4A encouraged some students to reconsider their perfectionism and to assume that the ultimate purpose of music goes beyond the demonstration of outstanding artistic and technical qualities. These elements suggest that fostering encounters between the older population and students could promote paradigm shifts in conservatoire culture, helping to overcome attitudes now considered obsolete (López-Íñiguez and Bennett, 2020; Renshaw, 1986) and preparing future musicians to make significant contributions to a changing labour market (Beeching, 2010; Burns, 2007; López-Íñiguez and Bennett, 2020; Perkins, 2012). The relevance of these points and the need to reconsider the pedagogical approaches used in music universities also emerged from the literature suggesting that music students often do not have a clear vision of the professional opportunities available to them (López-Íñiguez and Bennett, 2020). Moreover, these findings suggest that group music making in nursing homes, or the involvement in similar community-based programmes, could also have beneficial effects in terms of performance anxiety, self-esteem and other performance-related stressors.

With regard to the need for music universities to reconsider the learning environment offered to students in order to foster the acquisition of relevant interpersonal and intrapersonal skills, this thesis can offer a contribution in supporting the idea that offering training in community-based programmes can be useful. In fact, this thesis focused on a programme that, in an academic context where one-to-one teaching still occupies a central space (Perkins et al., 2017), provided an opportunity to get out of the conservatoire and experience situated learning (Renshaw, 2010), which in turn seems to have provoked transformative learning dynamics (Mezirow, 2000). This statement is based on several findings presented in the previous chapters. For example, comparison between the interviews before the start of A4A and those conducted after the end of the programme shows changes in views towards and an increase in interest in teaching. For some students, the possibility of becoming professionally involved in teaching had not been considered, or it was seen as a fall-back option to a career as a performer. The analysis carried out for study 4 also suggests that participation in A4A had an effect on students' metacognition and reflexivity. On the one hand, they actively reflected on their

interactions with the residents and the older population in general, finding changes and evolutions both in themselves and in the reactions of the residents. On the other hand, thoughts emerged from the diaries regarding the possible evolution of their own abilities and their commitment as music facilitators. Further evidence in terms of reflexivity and changes in terms of musical self-concept are given by the already mentioned reassessment of assumptions on perfectionism and on the overriding motivations behind their involvement with music.

The methodology employed in this thesis allowed only for partial illustration of students' changes in terms of metacognition, reflexivity, self-concept and other important concepts discussed in Chapter 2 such as community of practice (Burland and Davidson, 2002; Creech et al., 2008), lifelong learning (Jarvis, 2002; Smilde, 2012) and employability (Bennett, 2019). It emerged from study 3 that the students felt that they had improved their networking skills and that they considered this to be important, for example in their relationships with colleagues in the orchestra or in schools. Therefore, it seems reasonable to assume that this type of seminar could also have positive effects on interpersonal and intrapersonal skills. Thus, the overall results of this thesis support the implementation in music universities of seminars or similar pedagogical activities aimed at transferring the skills required to act as music facilitators with older people.

9.4 AREAS FOR FURTHER RESEARCH

This section suggests some avenues for further research, aiming to address gaps in the literature and to increase the effectiveness and implementation of music-based programmes involving both older populations and higher education music students. Many avenues for further research emerge from the findings of the thesis. They refer to the older population, higher education music students and other populations not included in this research.

With regard to the older population in general and to nursing home residents in particular, section 9.2 highlighted among the limitations of this thesis the circumscribed geographical context in which this research was conducted. Investigating access to music by nursing home residents and the role of music in their lives on a broader scale, involving institutions located in other areas of Switzerland as well as in other countries,

would offer a more complete picture on a national and international level. Moreover, widening this investigation to nursing homes and other institutions administered in different ways, namely involving public and private ones, could provide more detailed knowledge and may support the identification and dissemination of good practice.

A further research possibility concerns the regular repetition of the investigation carried out in study 1. Investigating such research questions at regular intervals (for instance every five to ten years) could offer a more informed and detailed insight into possible changes between different generations of nursing home residents in terms of past access to music, music preferences and music literacy. Thus, the reiteration of this study could offer important indications for developing music-based interventions in step with the times.

Findings from study 2 also offer numerous suggestions for further research. First of all, despite the extensive literature focusing on music therapy interventions on people with dementia (Zhang et al., 2017), the present thesis does not address questions regarding the potential of group music making with higher education music students for residents with serious cognitive impairment. In conducting A4A, the students, research team and facility staff found innumerable signs suggesting that this activity may be beneficial for cognitively impaired individuals, but these observations were not systematic. Considering the significant percentage of people with more or less severe dementia in nursing homes, it is crucial to carry out further research in this regard, and ethnography-informed approaches could be particularly promising (Smilde et al., 2019). It is also important to investigate comprehensively the potential of music-based programmes involving third age populations and music university students. This is stated not only on the basis of the encouraging findings of studies 2 and 3, but also taking into account the high number of people over 65 in many countries (WHO, 2015). Furthermore, as pointed out in Chapter 1 and Chapter 2, although the literature focusing on the benefits of community-based music programmes is very encouraging with regard to both older adults and the providers involved, there are very few studies that simultaneously consider music students and “young old”/community dwelling populations (Perkins et al., 2015, Smilde et al., 2019). Furthermore, studies 2 and 3 suggest insights for further research on interventions focusing on receptive engagement. Considering the importance attached by the older population to listening to music not only from study 1 but also from previous studies (Costa and Ockelford, 2019; Flowers and

Murphy, 2001; Hays and Minichiello, 2005), it seems crucial to observe whether and to what extent the preparation and involvement of higher education music students can offer mutual benefits.

In light of the encouraging results of this thesis in terms of mutual recovery (Crawford et al., 2013) a further important research direction to follow concerns the involvement in group music making activities in nursing homes of two further populations. One concerns staff members of the institutions. Previous studies in the contexts of developmental disabilities and schizophrenia (Callahan et al., 2017), mental health (Perkins et al., 2016) and hospital wards (Smilde et al., 2019) showed that medical staff can in turn experience significant health and wellbeing benefits by taking part in creative practices. The second category worth investigating is that of relatives of residents in nursing homes. Again, previous studies focusing on mental health (Perkins et al., 2016) and dementia (Särkämö et al., 2014) highlighted the possible benefits of involvement with music for informal carers of people with serious health problems. Observing whether positive dynamics in this sense can also arise from group music making in nursing homes could be highly relevant and could also offer an important contribution to strengthen, in line with the WHO recommendations on active ageing (2002), the presence of nursing home residents in the community.

9.5 KEY RECENT DEVELOPMENTS IN THE FIELD AND THEIR IMPLICATIONS FOR THIS STUDY

While working on the writing up and editing of this thesis, I observed that the growing literature on music and older adults showed a diversity of approaches in terms of research questions, methods and types of engagement with music. In this section I consider briefly some of the recent studies particularly relevant for this thesis.

The importance of facilitating access to music in nursing home was highlighted by Garrido and colleagues (2018) who involved care workers to help understand how music is implemented in nursing homes in Australia. According to the authors, musical practices were common in the institutions considered. At the same time, several critical issues emerged from their study. While listening to recorded music is a common practice, it was considered ineffective and could generate agitation. Individual listening to music

was not widespread as not all residents had the necessary devices, and for financial reasons, the institutions cannot accommodate them in this respect. As for the access to live music, it emerged that the concerts offered in nursing homes were financially demanding, that they seldom provided meaningful interactions and that repertoires tended to be repetitive. Singing activities were largely implemented, and the costs for them were often managed by engaging volunteers or staff members having some musical skills. Crucially, despite significant problems reported in terms of loudness of the music, repetitiveness of the proposed content and distressing memories triggered by music in some cases, practitioners recognised great potential in facilitating access to music. In fact, they tended to emphasise its positive effects and stated that, in cases where residents' reactions are negative, it is often sufficient to offer music in a different moment or to provide residents opportunities for catharsis and emotional arousal. Overall, the themes to emerge support investment in the training of higher education music students to act as facilitators in nursing homes. The results of this thesis offer encouraging perspectives regarding the variety of repertoires, the value of interpersonal relationships and the possibility to engage residents in fulfilling activities. Moving forward in this direction and developing training in a broad sense could also make a significant contribution in terms of disseminating best-practices and training facilitators in the possible uses of music.

Considering receptive engagement with music, Krause and Davidson (2021) investigated questions very close to those addressed in Study 1 of this thesis. By interviewing 32 residents in two nursing homes in Australia, the authors explored how residents experience their music listening and how this may enhance their wellbeing. Results showed benefits in terms of entertainment, enjoyment, relaxation, and mood regulation. At the same time, the authors invite reflection on three barriers perceived by the interviewees. The first relates to the use of the devices, which can be difficult because, depending on the case, residents do not have them, perceive them as difficult to use, or cannot use because of physical impairments. The second barrier refers to noises in the environment, which undermine residents' motivation to listen. Finally, it emerged that the initiatives offered by the facility may not be adapted to the cognitive level of the residents and that the musical contents do not always meet their tastes.

As for the last point, three recent studies focused on the effects of listening to preferred music on health and wellbeing of residents. Perez-Ros et al. (2019) investigated

the effects on cognitive function, memory, agitation, depression, or anxiety of a group music listening programme lasting 8 weeks. This study involved 119 residents affected by diverse degrees of dementia and divided into experimental and control groups. Both groups took part in occupational therapy sessions, and music was used only for the former group. The results showed improvements in functional and emotional dimensions. Costa and colleagues (2018) involved 117 residents in 9 nursing homes in United Kingdom. Participants had good cognitive function and were invited to listen daily to their preferred music for 30 minutes per day for 3 weeks. This study used mixed-methods and involved a control group. The results showed improvements in several dimensions including anxiety, depression, and relaxation. According to Costa and colleagues (2018) preferred music has a crucial role in terms of health and wellbeing; however, this view is to some extent questioned by another study involving 99 residents with probable dementia. Garrido and colleagues (2019) measured galvanic skin response and activation of facial action in residents invited to listen to several music works, ranging from fast to slow tempo, in major or minor keys and with or without lyrics. Concerning the latter point, it emerged that its impact was essentially nil, which could have been due to the limited ability of participants in comprehending linguistic meaning. Fast tempos provoked peaks in activation that may be disagreeable, while slow tempos were more likely to provoke pleasant stimulation. Listening to works in a minor mode, compared with those in major, seemed to provoke greater sadness. On this basis, Garrido and colleagues (2019) affirm that “regardless of whether or not the music is familiar, particular musical features have specific effects on mood and arousal” and that using “familiar or favorite music without regard for musical features may not be sufficient to achieve a particular affective state in a listener with dementia” (p. 251).

Before considering studies focusing on active engagement with music, I also consider here a study involving community-dwelling. Krause (2020) recruited 25 older adults and explored the impacts of their radio listening practices on everyday life. Benefits in terms of enjoyment, relaxation, comfort and sense of belonging were reported as effects of regular listening. In line with what also emerged from Study 1 and Study 2 of this thesis, it also emerged that listening to certain songs can trigger memories impacting negatively on mood.

Considering the literature focusing on making music, some studies targeted the role of technology and digital platforms aimed at facilitating active engagement of

older adults with music. According to Creech (2019), this trend is linked to the field of gerontechnology, which considers the potential of technological devices specific for older adults focusing on “connection with the outside world, ambient-assisted living, e-health, home-monitoring, robotics for independent living, and digital games” (p. 2). In this area, a study particularly close to the issues addressed in this thesis is offered by Taylor and colleagues (2021), who involved 20 residents in nursing homes in a 10-week group music-making programme using a prototype digital musical instrument. The study included processes of user-centred design with residents and is still ongoing. Preliminary results revealed that residents are interested in the use of technological instruments and that these interfaces can facilitate the participation in group music making for older adults with very different impairments. Another ongoing study involved 68 people in a community-dwelling setting in a 12-month collective music instrumental lessons programme. The programme was delivered both in-person and online using both digital keyboards and the iPad app Thumbjam (MacRitchie et al., 2021). The authors aim to explore with mixed methods the impact of the programme on cognitive skills, motor abilities, and musical aptitude. From preliminary results it has emerged that participants showed interest and motivation towards the musical contents as well as to the opportunities to become familiar with technology and online platforms. The importance of exploring the potential of music technologies in general is emphasised by Creech (2019), who points out that older adults are often interested in and capable of using and that “there is limited research concerned with what inclusive practices using music technologies in the community, with intergenerational or later-life groups, might entail” (p. 11). According to Creech, a deeper understanding of this field could open many relevant avenues, facilitating the access to favourite music and offering benefits in terms of health and wellbeing. Furthermore, Creech emphasises the need to develop effective user co-design processes stating that the “evidence that different groups of older people can and do engage with music technologies may thus encourage designers to reflect upon their own underlying assumptions about older people” (Creech, 2019, p. 11).

Considering the literature focusing on community-dwelling and music making with traditional approaches, three recent studies present insights relevant to the issues addressed in this thesis. MacRitchie and colleagues (2020) involved a group of 15 healthy community-dwelling people in a piano training programme lasting 10 weeks. With a mixed methods approach, the authors observed the effects of this activity on enhancing cognitive and motor skills. The collective dimension of the programme played a

significant role in establishing these effects, as the results highlighted increases in social relationships and enjoyment in creating something beautiful to share with relatives and friends. This last point suggests a significant impact also in terms of self-esteem and self-efficacy, and the authors report that “participants stated that they felt able to play the musical instrument (music-specific self-efficacy), but also made statements regarding their general ability to learn new skills” (MacRitchie et al., 2020, pp. 11-12). Another recent study, involving 34 healthy older adults, aimed to assess the effects of group piano lessons on executive functions (Bugos and Kochar, 2017). A salient feature of this study is that the aim was specifically to assess the effectiveness of a short-term intense teaching programme, namely a 30-hour programme including music theory, finger dexterity exercises, bimanual coordination exercises, technical exercises, performance duets, and standard piano repertoire.

The results revealed improvements in processing speed and verbal fluency, and the authors hypothesized that group music lessons are more effective than individual ones. Bugos and Cooper (2019) investigated the effects of music making on psychosocial and cognitive dimensions by involving 20 community-dwelling participants in a training programme focusing on mallets, while a control group was involved in autobiographical writing. The authors detected significant improvements in self-efficacy and on this basis proposed some thoughts relevant to this thesis. Firstly, they stressed the importance of creating groups with participants with similar musical abilities as, for older adults, it may be frustrating to be involved in musical activities with more advanced peers. Secondly, to improve self-efficacy it is important that music facilitators are able to provide adequate assignments and appropriate feedback. Finally, offering room for social interactions before, during and after the sessions can improve significantly the learning and engagement of older adults (Bugos and Cooper, 2019, p. 29).

This brief overview of contemporary studies provides points of reflections relevant for the aims of the present thesis. Firstly, it seems to confirm the importance of increasing receptive engagement with music in nursing homes. On the one hand, a study developed in Australia (Krause and Davidson, 2021) on listening practices showed benefits aligned with those emerged from Study 1 of this thesis. Furthermore, listening to music can also be beneficial for people with dementia (Garrido et al., 2019; Perez-Ros et al., 2019) and through the use of radio (Krause, 2020). At the same time, reconciling the tastes of all residents can be very difficult (Krause and Davidson, 2021), and as emerged also

from Study 1 and Study 2, listening to music can have counterproductive effects in terms of inducing states of melancholy (Costa et al., 2018; Garrido et al., 2019, Krause, 2020). Furthermore, while some studies suggest that listening to preferred music can be particularly beneficial (Costa et al., 2018; Perez-Ros et al., 2019), Garrido and colleagues (2019) invite us to pay special attention to musical features related to tempo and mode. In relation to the aims of this thesis, these overall findings underline the importance of facilitating different types of engagement with music in nursing homes, given that the resident populations can be heterogeneous, that the desire for access to music is not always fulfilled, and that the residents involved in Study 1 and Study 2 showed considerable curiosity towards unfamiliar genres and authors. Investing in the training of pre-professional musicians, preparing them to act as music facilitators for older adults, seems a promising avenue. It could be argued, in fact, that higher education music students, if adequately prepared, may even be in the best position to select and perform effective repertoire for interventions focusing on receptive engagement (see Chapter 6).

With regard to active engagement with music, it emerged almost unanimously that it plays a significant role in promoting older adults' interpersonal relationships. Furthermore, this review highlighted a considerable interest in the ability of music making to increase the self-efficacy of older people (Bugos and Cooper, 2019; Bugos and Kochar, 2017; MacRitchie et al., 2020). The first aspect seems to be in line with the results of Study 2, as well as the findings of Study 1 referring to the singing activities offered by nursing home staff. As for self-efficacy, the methodology of the present thesis did not consider the impact of A4A on this dimension, but the results emerging from Study 2 in terms of achievement (Seligman, 2011) suggest positive effects in this respect as well.

A further point emerging from recent literature highlighted the potential of technology. Many older adults express curiosity and interest in this regard (Creech et al., 2019; MacRitchie et al., 2021; Taylor et al., 2021). A4A was designed and carried out between 2015 and 2016, and besides the occasional use of pre-recorded backing tracks, the use of technology was not considered at all. Exploring this field seems now crucial, not only in light of the encouraging results of the aforementioned studies, but also as a consequence of the restrictions imposed by the Covid-19 pandemic. Investing in the training of higher education music students seems promising, as young musicians may be in a good position to combine advanced musical skills in conjunction with digital platforms and online resources.

9.6 CONCLUSIONS

This thesis aimed to investigate how residents in nursing homes and music university students experienced a programme of group music making and the effects on health and wellbeing they perceived by taking part in it. The motivations for carrying out this investigation are manifold. From the literature reviewed in Chapter 1 it emerged that the global demographic growth of the older population makes it crucial to find sustainable ways of ensuring the best possible level of health and wellbeing throughout the ageing process. A large number of studies show that engaging with music, including group music making, can offer a wide range of benefits for the older population, but most of these studies focus on the third age or those who are community-dwelling. Conversely, the population of residents in nursing homes is little investigated, and consequently, neither the benefits that this population perceives by group music making nor the ways that they may have in accessing to music are clear.

At the same time, as discussed in Chapter 2, a growing body of evidence suggests that community-based musical activities may offer benefits not only to recipients but also to providers. However, the literature focusing on the impact of these activities on higher education music students is still at an early stage. Considering the widely documented stressors on physical and psychological dimensions perceived by this population, and the difficulties that characterize the transition into the music profession, clarifying the potential of community-based activities is also relevant in the context of music universities. Indeed, they are called by many scholars to rethink their learning paradigms in order to train musicians capable of playing an important role and have a sustainable career in a complex and ever-changing society.

To clarify these points, four studies were carried out in this thesis (Chapters 5, 6, 7 and 8), which are globally discussed as a whole in this chapter. The study 1 aimed to clarify how and to what extent do older adults access music in their daily lives, and the function music plays in their lives. Studies 2, 3 and 4 focused on *Art for Ages* (A4A) a programme of group music making lasting 10 weeks and carried out in four nursing homes in Southern Switzerland. As discussed in Chapter 4, this research did not aim to test preconceived theories but rather to investigate the perspective of the participants. The methodology employed was based on thematic analysis and the interpretation of the data collected through semi-structured interviews and oral diaries. In order to understand the effects

perceived by A4A participants in terms of wellbeing, the PERMA model (Seligman, 2011) was considered, while health was conceptualized considering the definition provided by the WHO in 1948 and the complete model of mental health (Keyes, 2005).

The overall results suggest that music is important for residents in nursing homes and that group music making programmes involving higher education music students can provide mutual benefits for both groups. For the residents, regardless of their socio-economic profile and musical background, music represents more than just a leisure activity and can be an important resource. There are many reasons for that. Listening to music or singing helps to keep in touch with one's identity and can improve mood. Moreover, engagement with music can promote interpersonal relationships, and listening to music can provoke very intense and rewarding emotions. From the investigation focusing on the access to music in the present, an ambivalent picture emerged. For some residents it was diminished compared with the past, and this can be due to the difficulty of going to concerts or using radios, recordings and television autonomously and satisfactorily in terms of repertoires.

Conversely, other residents, as a consequence of their free time and the opportunities offered by the institution, are satisfied in this respect. In both cases, while there seems to be a rejection of modern pop music, there is a widespread curiosity to approach unfamiliar genres and artists. Considering music making, it emerged that playing an instrument was discontinued by almost all respondents involved in this study. At the same time, the habit of singing is still widespread and satisfactorily supported by the activities organised in the nursing homes.

In this context, the opportunity to take part in a group music making programme was welcome with interest, enthusiasm and gratitude. Residents reported feelings of joy, enjoyment and anticipation for the sessions. This seems to be due mostly to three reasons. One has to do with the already mentioned importance attributed to music. In this sense, the possibility of approaching and using intuitive percussion instruments, despite physical impairments that for some residents were considerable, was very much appreciated. In this way, the residents were able to feel a sense of belonging to a group, and for some of them A4A represented an opportunity to fulfil a long unfulfilled desire to try music. The second reason is linked to the learning opportunities offered by A4A. This component of the programme stimulated the interest of the residents and caused

feelings of satisfaction for the improvements achieved, which were perceived both in terms of music making and music appreciation. Finally, participating in a group music making programme represented an important element of novelty that stimulated the imagination of residents, alleviating their negative feelings and doubts about one's cognitive abilities.

Taking part in A4A provided positive experiences for the students too, and they showed a lot of interest and appreciation for the programme. The idea of including in their curriculum a seminar focusing on group music making with residents was seen as something innovative and of great humanitarian value. It offered students the opportunity to fulfil their desire to give back something to society and to commit themselves to contribute to the wellbeing of a population who they considered disadvantaged. In this way, the participation in A4A had effects on both their professional and personal spheres. Regarding the first point, the students received new insights about teaching and reaching new audiences, acquired skills considered important and were encouraged to question their perfectionism. Regarding the second point, they perceived benefits on psychological and physical dimensions, in terms of energy and decreases in the perception of sickness and pain. Moreover, the encounter with the residents was perceived as something meaningful, which allowed them to receive valuable teachings and generated feelings of affection and familiarity in the students. These last results are particularly relevant as the interviews and the oral diaries also showed that the fourth age people are seen as a different population from those considered familiar and that in some cases the idea of relating to the residents was experienced with concern and apprehension.

The overall results of this thesis show that the encounter between the two specific groups of residents and students was a key element in participants' experience and in generating the benefits they attributed to it. Considering the perspective of the residents, the presence of the students in the nursing home was very significant. The musical standard of those young musicians, combined with their inclusive and friendly approach, were highly appreciated by the residents and represented an additional element of novelty and engagement. This helped to alleviate the feelings of isolation occasionally felt by some of them. In addition, doing group music making with a much younger generation stimulated residents' empathy and reactivated some links with their own lives. At the same time, the encounter with the residents was very important for

the students. Acting as a music facilitator, performing music for them and receiving signals of gratitude had very positive effects on the students, providing gratification and increasing their motivation towards their musical activity.

The collective component of A4A was also relevant in the relationships between peers. The weekly group music making sessions provided an opportunity for residents to meet each other. This offered opportunities for conversation and mutual support, limiting the feelings of isolation mentioned above. The students in turn received support and cooperation from their peers, and A4A offered an opportunity to acquire or improve their teamwork skills.

As discussed in Chapter 3, the PERMA model (Seligman, 2011) has been employed throughout this thesis as a framework for defining the concept of wellbeing. This model consists of five dimensions: Positive emotions, Engagement, Relationships, Meaning and Achievement. Studies 1 and 2 highlighted the links between each of these dimensions and the findings for the residents, while study 3 showed a significant impact for the students in particular for the dimensions of *meaning*, *engagement* and *relationships*. Moreover, on the basis of the perceived benefits of both groups involved, this thesis suggests that group music making programmes in nursing homes can promote mutual recovery (Crawford et al., 2013) between residents and higher education music students. The results of this research are also relevant in the context of other paradigms.

The effects of group music making on residents seem to be aligned with the concepts of successful ageing (Rowe and Kahn, 1997) and active ageing (WHO, 2002). Facilitating engagement with music, in fact, can contribute to maintaining some usual activities despite age-related impairments and to realise residents' potential in terms of social, mental and physical wellbeing. At the same time, from students' interviews and oral diaries emerged numerous elements inviting the argument that including community-based activities within the music university curriculum can represent an effective example of situated learning (Renshaw, 2010) able to favour transformative learning (Mezirow, 2000) with possible positive effects in terms of employability (Bennett, 2019b) and musical self-concept. The methodology used in this thesis did not include the systematic observation of the impact of A4A on these dimensions and on other relevant paradigms such as lifelong learning (Smilde, 2012) and community of practice (Wenger, 1998). Carrying out further research in this field is thus important, and the results of

this thesis offer several indications for increasing the appreciation and the perceived benefits of participants in A4A. With regard to the residents, it emerged the importance of offering a diverse repertoire and negotiating it, as this may reduce the possible risk that listening to certain pieces related to the participants' youth could arouse melancholy in some of them. Furthermore, a celebration event at the end of the programme could make participation in the programme more meaningful. Considering the perspective of the students, study 4 focused on the difficulties and challenges experience by them, clarifying that the senses of uncertainty, and insecurity significantly decreased over time. Minor changes in the schedule of the sessions, increasing the involvement of the whole teaching team and the time devoted in singing and conducting activities, might strengthen the training offered to students.

The present chapter discussed the overall results and highlighted several limitations of this thesis. The first one concerns the recruitment criteria, which make still unclear the impact of A4A on both residents with severe cognitive problems and on students who did not include this seminar on their curriculum. The second limitation is related to my involvement in the data collection, which could have caused bias on the respondents. The third limitation refers to the duration of the programme. In all the nursing homes involved, A4A lasted 10 weeks, and therefore it is unclear what effects a longer duration of the programme might have on residents and students. Finally, since this research was conducted in a limited geographical area, it remains to investigate the impact of group music making in nursing homes located in other countries and in areas different to the one considered here.

In light of the positive results of this thesis and the limitations just discussed, several recommendations for practice and avenues for further research are available. Concerning the former, it is suggested to develop in nursing homes, along with programmes focusing on active engagement, music-based interventions focusing on receptive involvement. Furthermore, it is important to involve higher education music students in programmes addressing those of the third age and who are community-dwelling, in addition to working with the oldest in society. Considering the key role played by students in A4A and the benefits that they in turn perceived, a further recommendation is that music universities seek ways to include in their curricula relevant competences to act as music facilitators. With regard to the next steps to be taken in the research, it is important to conduct this investigation over a larger geographical area and to investigate study 1 at

regular intervals, in order to observe any changes between the different generations of nursing home residents. Furthermore, in line with the recommendations expressed, it is important to investigate the encounter between the population of conservatory students and third age, as well as the effects of programmes focusing on receptive engagement involving students and older adults. Finally, considering the encouraging results of this thesis in terms of mutual recovery (Crawford et al., 2013), it seems important to research the effects of music-based interventions on people with dementia, nursing home staff and residents' relatives. These three groups were not considered in this thesis, although they represent distinctly important portions of the context examined. These next steps represent important developments in contributing to the ongoing wellbeing of both individuals and groups within society, as well as to the wider health of society as a whole.

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APPENDIX 1

STUDY 1: MATERIAL USED FOR DATA COLLECTION AND EXTRACTS OF TRANSCRIPTIONS

A1.1 CONSENT FORM FOR AUDIO RECORDING OF INTERVIEWS

Progetto Art for Ages

Modulo di autorizzazione per la registrazione audio delle interviste

Lugano, 2 luglio 2015

Il/la sottoscritto/a _____

nella sua qualità di intervistato/a all'interno del progetto Art for Ages (fase 1A), autorizza a registrare l'audio dell'intervista svolta da Paolo Paolantonio (Divisione Ricerca e Sviluppo del Conservatorio della Svizzera Italiana) in data 2 luglio 2015.

L'intervista verrà trattata in forma anonima, e le informazioni registrate verranno utilizzate in maniera confidenziale esclusivamente dai ricercatori coinvolti nel progetto stesso.

Lo staff di Art for Ages si impegna a consegnare ad ogni partecipante interessato una copia registrata della propria intervista.

L'intervistato desidera ricevere una copia audio dell'intervista SI NO

Firma dell'intervistato _____

Firma del responsabile di reparto _____

Firma del ricercatore _____

A1.2 INTERVIEW SCHEDULE

SECTION 1. QUESTIONS CONCERNING MUSIC AND THE PRESENT DAY.	
INTRODUCTORY QUESTIONS	FOLLOW-UP QUESTIONS
1. Do you listen to music?	1A. what kind of music do you like?
2. Do you have a favourite piece of music?	2A. Why is this your favourite piece? 2B. When did you hear this piece for the first time? 2C. What kind of emotions does this music elicit in you? 2D. Are there any specific memories attached to this piece?
3. Is there any kind of music you dislike?	3A. Why?
4. Why do you listen to music these days?	4A. Does the music elicit strong emotions or memories in you? 4B. How often and for how long do you listen to music? 4C. Do you listen to music at specific times of day (or days of the week)? 4D. Are you able to choose when and where listen to music? 4E. Do you like to listen to unfamiliar kinds of music or do you prefer to listen to music to which you are already accustomed?
5. These days, do you listen to music more or less than in the past?	5A. Why? 5B. Has aging (or the aging process) impacted on your habits of listening to music? 5C. These days, is music more or less meaningful than in the past? 5D. Would you like to have the opportunity to listen to music more?
6. How much do you like listening to music? (1=not at all, 100=very much)	

SECTION 2. QUESTIONS CONCERNING MUSIC AND THE PAST.	
INTRODUCTORY QUESTIONS	FOLLOW-UP QUESTIONS
7. Did you like to listen to music in the past?	
8. In what period of your life did you listen to music most?	<p>8A. Why?</p> <p>8B. At that time, how often and for how long did you listen to music?</p> <p>8C. Did you normally choose the music that you listened? Or did someone/ something else choose it (e.g. radio, television)?</p> <p>8D. Did you primarily listen to music alone or with other people?</p> <p>8E. Was the music primarily in the background or did you explicitly listen to it with full attention?</p> <p>8F. Where did you primarily listen to music (e.g. at home, while driving, in public places)?</p> <p>8G. Did you listen to live music, and if so, how often?</p>
9. Did your musical preferences change over your life course?	<p>9A. What kinds of music did you most appreciate during each stage of your life?</p> <ul style="list-style-type: none"> • When you were a child? • When you were a teenager? • When you were about 20 years old? • When you were about 50 years old? <p>9B. Why did you like these kinds of music?</p>
10. How much did you like listening to music during the time you were listening to it most? (1=not at all, 100=very much)	
11. Have you ever played a musical instrument or sing? <i>If no:</i> Would you like to do so?	<p>11A. What instrument?</p> <p>11B. Do you still play?</p> <p><i>If no:</i></p> <p>11B.1 Why did you quit?</p> <p>11B.2 When did you quit?</p> <p>11C. Did you have musical training in your school years?</p> <p><i>If yes:</i></p> <p>11C.1 Did you like it?</p>
12. Would you like to sing these days?	<p><i>If yes:</i></p> <p>12A. Would you prefer to sing in a choir or alone?</p> <p>12B. Do you think that singing or playing an instrument could impact your appreciation of music?</p>

A1.3 INTERVIEW EXTRACTS

To give an idea of the data collected, two extracts of the interviews are provided in the original language. They refer to two respondents of different genders.

Interview 1: Paola, 99 years old

D. Innanzitutto sarei curioso di sapere se lei ascolta musica in questa fase della sua vita, in questo periodo.

R. Io ascolto molto tanta musica, mi piace tutta la musica. (breve silenzio) Tutta la musica e... come si chiamano?...e...walter...[sic]...Schumann...tutte quelle cose lì. Mi piacciono tutte, le musiche. Che...come si dice...mmm...quelle cose lì, come si dicono...quella che canta "Blu blu"... Beniamino Gigli, che cantava Beniamino Gigli, che cantava...

D. Sì, ha fatto tante canzoni Beniamino Gigli...

R. Ecco! Quelle canzoni lì che cantava...tante mi piacciono molto!

D. Capisco

R. Weiman e...come si chiama...eh, le canzoni di Weiman mi piacciono mi piacciono tanto... adesso non so...

D. Ok, ok...Sì, se non le vengono in mente i titoli, non è un problema per noi...

R. Ecco

D. Mi interessa appunto capire un po'...

R. Sì, mi piacciono tutte le musiche! ...tutte le musiche mi piacciono!

D. E c'è, magari anche senza pensare al titolo per forza, un brano che...

R. No, adesso non mi ricordo più, ormai...ho cent'anni, signore!

D. (sorridente) Accidenti, sì!

R. Ho cent'anni, adesso non mi ricordo più! Una volta cantavo tutte quelle canzoni e le sapevo tutti, adesso quanto sento dico: "Che cosa sarà, questo qui?". Non mi ricordo più adesso, ormai... non mi ricordo più

D. Certo! Comunque, mi sembra di capire che la musica è stata molto presente nella sua vita, e...

R. Molto! Per me è stata...(si interrompe senza aggiungere altro)

D. E non le viene in mente niente che non le piaccia musicalmente? Qualche cosa, qualche genere, qualche tipo di musica...che magari le dà fastidio...

R. Guardi, adesso al momento non mi viene in mente niente

D. Certo

R. Però...penso che ci sia, perché Beniamino Gigli...mi piaceva molto quello che cantava, era

una meraviglia. Poi...quello come si chiama...tutte quelle canzoni di tutti questi uomini che cantavano bene: Beniamino Gigli, poi quell'altro, come si chiamava?

D. Non so...mi viene in mente Domenico Modugno, forse?

R. Ecco!..Domenico Modugno, tre o quattro che si somigliano proprio, che cantavano una meraviglia

D. Eh sì

R. Io ascoltavo sempre quelle canzoni lì

D. Sì. E..posso chiederle come mai le piacevano così tanto queste canzoni?...Cioè...cosa ci trovava di così speciale?

R. Mah, non so...(prende tempo per riflettere)..a dire la verità, io quando la smettevo di lavorare alla sera, anche alle 10 smettevo di lavorare, perché io ho sempre fatto la donna di servizio, sono sempre andata a servizio della gente, e mia mamma mi ha sempre...mi ha sempre mandato in quelle case di servire la gente. E allora la sera alle 10, quando andavo a letto che ero stanca morta, accendevo la radio e sentivo tutte le musiche...belle e brutte, e per me erano tutte belle!

D. Sì

R. Erano tutte belle! E sapevo: "questo è questo, questo è quell'altro"...

D. Chiaro, chiaro

R. Adesso oramai non so più niente

D. Mi sembra quindi di potermi immaginare...

R. Io sento le canzoni, ma non so il titolo, ecco

D. Certo, no, no, i titoli non sono così importanti per noi, oggi. Dicevo [che] mi sembra di immaginare che alla fine di una giornata pesante...

R. Sì!

D. Lei accendeva la sua radio...

R. La radio!

D. ...e la musica le dava..forse...non so...

R. (senza nessuna esitazione) Sollievo! Mi dava sollievo...mi faceva...star zitta. Invece di dormire, stavo lì...ferma lì...e sentivo: "Oh che bella musica, oh che bella musica!". Quando poi sentivo Beniamino Gigli, Claudio Villa e tutta questa gente qui, mi sembrava addirittura di nascere [sic]

D. Certo

R. [pensavo]: "Guarda, guarda questi qui che voce che c'hanno!". E io avevo una gran voce anch'io

D. Sì.

R. Perché una volta...quando ero bambina, andavo a scuola, mi portavano alla sera a cantare in chiesa

D. Sì?

R. *E cantavo molto bene. Fino all'anno scorso ho continuato a cantare, adesso ormai non ho più voce, perché ormai...ma fino all'anno scorso continuavo a cantare. (con ancora più energia nella voce) Adesso canto ugualmente, neh? Però non è più la voce di prima, insomma (quasi ridendo, dice tutto questo senza tristezza)...Però canto sempre ugualmente. Quando son sola io canto. Poi mi dicono: "Quella lì è matta!"*

D. *(sorridente) Ma no! Perché?*

R. *Ma io canto, non son capace di star ferma! ...Anche adagio adagio, ma canto! Non son capace di star lì ferma.*

D. *Eh sì! Mi sembra di capire che comunque, la musica è stata molto presente...*

R. *Per niente, per niente dico: "Son arrivata a 100 anni" [evidentemente intende dire "non a caso.."]...ancora che...(in tono ironico e quasi ridendo) c'ho una vita davanti, c'ho una cosa che.. ammazzerei anche...poi..è forte, eh! Una fortezza addosso che bisogna vedere*

D. Sì

R. *E allora è per quello che...io da giovane ho lavorato tutta la vita, e poi la sera mi divertivo a suonare questo, quest'altro...e la sera mi divertivo un mondo a cant...suonava lui (evidentemente si riferisce alla radio) e cantavo io.*

D. *Certo, certo. Quanti anni aveva quando ha iniziato...quando ha scoperto Beniamino Gigli, Claudio Villa...che...*

R. *(senza esitazioni) Avevo 18/19 anni.*

D. *18/19 anni...*

R. *Sì sì sì. Poi c'erano tanti...adesso non mi ricordo più, erano tanti...erano tanti che cantavano proprio bene.*

D. *Certo. E se ci immaginiamo qualcosa dell'infanzia, quando era proprio una bambina, ha avuto modo di ascoltare musica in qualche modo, si ricorda qualcosa?*

R. *No, (usato come intercalare, non per dare una risposta negativa) la sera! Alla sera quando andavo a letto.*

D. Sì.

R. *...perché nessuno. (interrompe questa frase e continua con la seguente quasi senza soluzione di continuità) Dopo quando sono andata...perché fino a 49 (si corregge velocemente) 39 anni ho fatto la serva, faccio per dire*

D. Sì sì sì

R. *Dopo 39 anni ho detto: "Adesso sono stufa", e allora sono andata all'"Innovazione", ho lavorato per tanti anni all'"Innovazione"*

D. *L'"Innovazione"?*

R. E lì lavoravo e sentiv-ascoltavo la musica. Si poteva lavorare e ascoltare la musica. Non sempre, perché tante volte c'era il lavoro e non si poteva ascoltare, e scrivere, e controllare il lavoro. Però ogni tanto accendevo la radio, e sentivo la musica. Mi piaceva un mondo.

Interview 2: Carlo, 82 years old

D. Possiamo cominciare, e innanzitutto vorrei sapere se lei ascolta musica in questo periodo.

R. Sì, sempre! Io non posso...senza musica non posso vivere!

D. Capisco, capisco. Che tipo di musica le piace?

R. Mah, praticamente solo classica, solo classica. E poi qualche volta un po' jazz, vecchio jazz... così...vecchio, proprio!

D. Sì, sì! La seguo, la seguo

R. O moderno...musica anche moderna. Moderna e classica diciamo. Cosa devo dire? Fino a... (cercando di offrire esempi) Gershwin, ecco. Sì, via. Questo mi piace molto

D. Benissimo. Le viene in mente qualche autore speciale, qualche brano che lei ama in maniera particolare?

R. Mah...(ride)...io dico sempre...già prima (intende dire prima di incontrare l'intervistatore) l'ho detto una volta...mi piacciono i tre grandi B: Bier Bach und Beethoven! (ride)

D. (ridendo)...allora..ho capito [solo] il primo e l'ultimo!

R. (scandendo e sempre ridendo) Bier...Bach...e Beethoven! ...e io devo dire...(dopo un attimo di silenzio e con un tono di voce diverso, più serio) io devo proprio dire che i miei preferiti sono da Händel a Bach, poi...naturalmente...Mozart, perché è geniale, e uno che mi piace molto a me, questo è una cosa un po' speciale, è Rossini!

D. (annuisce)

R. Perché lo trovo un uomo così pieno di fantasia, no? Ho anche letto una sua...diverse delle sue... biografie che sono in giro così. Anche quelle che raccontano solo della cucina, ma è pieno (ridendo) anche di musica! È molto bello, non so se lo conosce. È una catena di libri, si chiama, io avevo quasi tutti...più o meno...(si sforza di ricordare) "Zu gast bei". (si rende conto che l'intervistatore non capisce il tedesco e cerca di tradurre) "Ospite da"

D. Ah! Sì, sì

R. Sono tutti cose su artisti, pittori, scultori, che amavano anche la...(si interrompe) e musicisti, naturalmente...[e c'era] uno molto bello su Rossini. (con tono divertito, quasi ridendo) C'è anche Verdi per esempio!

D. Sì!

R. La sua...libro di cucina, di Verdi...

- D. *Se ho capito bene, Rossini è speciale per lei perché ha molta fantasia. Giusto? Capisco bene?*
- R. *Sì! E l'umorismo!*
- D. *Lei apprezza l'umorismo in musica?*
- R. *Ah sì! (Ridendo e con convinzione) In quel senso sì!*
- D. *E invece, se io le chiedessi se ci sono dei tipi di musica che non le piacciono...c'è qualcosa che le viene in mente?*
- R. *Sì! Strauss! (ride) Strauss...*
- D. *Parla della dinastia? O di Richard?*
- R. *Il vecchio...Joseph! (poi dubitando) Joseph è il vecchio, no?*
- D. *Sì (in realtà Joseph è figlio di Johann, e sembra indubbio che l'intervistato si riferisca proprio a Johann)*
- R. *Il "Re dei Valzer", no? Non mi piace! (ridendo e con tono divertito) Non posso più sentire valzer in quel senso...di Vienna!*
- D. *Ma perché proprio non le piace, o perché l'ha sentito talmente tante volte che...*
- R. *L'ho sentito troppo, magari, o troppo...sempre dove non volevo. Perché normalmente appunto, io mai, quasi mai, ho musica come...come [sotto]fondo, anche quando (interrompe la frase)... adesso non posso più scrivere come una volta, e allora sono contento che ho la musica*
- D. *Sì, sì*
- R. *Cantavo, anche. Quando sono stato più giovane. Volevo fare canto...ho cominciato, e avevo anche bravi maestri, e così via...Allora posso...dopo...dopo sono stato anche nel teatro, sono stato diverse volte anche assistente di regia di diversi grandi registi, anche dell'opera*
- D. *Capisco, capisco. E al giorno d'oggi, quanto tempo dedica all'ascolto della musica, più meno? ... in una giornata, nell'arco della settimana...non so*
- R. *(dopo averci pensato) Mah, 2-3 ore al giorno...*
- D. *2-3 ore al giorno!*
- R. *Sì, sì! Minimo.*
- D. *E come fa? Ha un impianto in camera...*
- R. *Sì sì sì sì. Ho portato una parte dei miei dischi*
- D. *(annuisce) Una parte dei suoi dischi lei la ha qui con sé, quindi*
- R. *Sì sì sì sì*
- D. *E devo immaginarmi questi autori che mi ha nominato prima...*
- R. *Sì! Ho tanto Bach (ride) e anche, appunto, da Bach anche Händel, ho diverse cose. Poi, mi piacevano sempre un po' delle cose che soprattutto gli ultimi anni sono venute tante cose...ho per esempio l'ultimo, l'ultimo grande cosa che ha fatto il nostro luganese, il...il...Fasolis...*
- D. *Ah sì, sì*

- R. Anzi, è lui che mi ha dato ancora, quando sono stato all'Hildenbrand, c'era la sua mamma lì...e mi ha regalato una delle sue ultime opere che ha fatto con la...con la...Cecilia Bartoli
- D. E lei ha apprezzato questo...
- R. Favoloso!
- D. ...apprezza questa musica?
- R. ...Favoloso!
- D. ...favoloso, sì. Nell'arco della giornata, mi ha parlato di due-tre ore mediamente, che lei dedica...
- R. Sì!
- D. ...ci sono dei momenti specifici? Che ne so, dopo pranzo, quando...prima di andare a letto...
- R. No, proprio quando mi alzo, subito
- D. (annuisce)
- R. Ma lì, metto sempre la radio, quella classica no?
- D. Ok
- R. Cosa è...la rete...[rete]3?
- D. [rete]2 forse...
- R. Che ha solo classico tutto il giorno, no?
- D. ...e lascia che sia qualcun altro a scegliere l'autore, evidentemente, in questo caso
- R. (con entusiasmo) Sì, sì! Prendo quello che c'è, la mattina mi piace di sentirlo un poco, sì. È un modo di fare colazione
- D. Capisco, capisco. E...prima mi ha parlato un po' di certe scoperte che ha fatto negli ultimi anni. Lei è interessato quindi ad ascoltare musica che non conosce, ad ascoltare...
- R. Sì sì!
- D. ...c'è un grosso interesse insomma, da parte sua...ad ampliare il suo repertorio di ascolti
- R. Sì, sì! Poi...ehm...ascolto anche...sono ancora lì, adesso meno, ma mi interessava anche sempre la musica classica moderna, no? Conosco anche diversi compositori personalmente... conoscevo molto bene Boulez...
- D. (annuisce con stupore)
- R. (dopo un silenzio piuttosto lungo) L'ho conosciuto a Bayreuth...(ridendo di cuore) [e] abbiamo litigato, così abbiamo fatto la conoscenza, perché io sono un antiwagneriano! Non mi piace Wagner!
- D. Lei è un antiwagneriano...ok
- R. (sempre ridendo) Non mi piace Wagner!
- D. Quindi diciamo...oltre a Strauss dobbiamo forse...
- R. Sì!! Wagner! Qualche volta, no...non so...per esempio la...sì, trovo bella la...la...l'ouverture

del "Lohengrin" per esempio, ma il "Lohengrin" no, non posso, è così...e poi ho fatto molto anti-wagner film (scoppia a ridere) mi sono fatto tantissimi nemici, anche in televisione, perché mi hanno chiesto di fare un reportage, quando c'era il bicentenario...no! Il centenario...della morte di Wagner...o era...non mi ricordo più...c'era la grande festa...

APPENDIX 2

STUDY 2: MATERIAL USED FOR DATA COLLECTION AND EXTRACTS OF TRANSCRIPTIONS

A2.1 PARTICIPANT INFORMATION SHEET

Foglio informativo per i partecipanti

Titolo del progetto

Music in the community: Investigating the effects of a music participation programme on older adults and higher education music students

Invito

Lei è stato/a invitato/a a prendere parte ad un progetto di ricerca. Prima che lei decida, è importante per lei capire i motivi per cui la ricerca è stata intrapresa e cosa essa comporterà. Dedichi per favore un po' di tempo a leggere attentamente le seguenti informazioni, e le discuta con altre persone se vuole. Mi chiedo senza esitazioni se c'è qualcosa che non è chiaro o se desidera avere maggiori informazioni. Grazie della lettura!

Qual è lo scopo dello studio?

Il presente studio intende analizzare il tipo di esperienza che i residenti delle case anziani e i giovani professionisti della musica vivono durante il loro coinvolgimento in un programma di attività musicali chiamato *Art for Ages*.

Perché sono stato scelto/a?

Lei è stato/a scelto/a perché lo studio si pone di investigare come i partecipanti del programma *Art for Ages* vivono l'esperienza di far parte di tale programma. Questa parte dello studio coinvolgerà circa 40 residenti.

Sono obbligato a prendere parte a questo studio?

Lei è libero/a di scegliere se far parte di questo studio oppure no. Il suo rifiuto a partecipare non comporterà nessun tipo di penalità da parte sua. Se decide di partecipare, le verrà consegnato questo foglio informativo affinché possa conservarlo, e le verrà chiesto di firmare due copie del documento di consenso (una delle quali sarà consegnata a lei). Se decide di partecipare, sarà comunque libero/a di ritirarsi in qualsiasi momento, senza nessun tipo di penalità e senza essere tenuto/a a motivare la sua scelta.

Cosa accadrà se decido di prendere parte al progetto?

Durante lo studio, i partecipanti saranno coinvolti in diversi tipi di indagine. Nella sua qualità di residente, le verrà chiesto di prendere parte ad un'intervista semi-strutturata dopo l'ultima sessione di *Art for Ages*, che verrà audio-registrata.

Cosa devo fare?

La partecipazione a questo studio non comporta nessun tipo di restrizione al suo stile di vita. Ai partecipanti è semplicemente richiesto di prendere parte ad almeno otto sessioni del programma *Art for Ages*.

Quali sono i possibili rischi dovuti alla partecipazione a questo studio? E quali sono i possibili benefici?

Non è previsto nessun rischio né a livello fisico né psicologico per i partecipanti che prenderanno parte a questo studio. Allo stesso tempo, non sono previsti immediati benefici per le persone che prenderanno parte a questo specifico progetto di ricerca.

Cosa accade se il progetto di ricerca dovrà essere interrotto?

In questo caso le saranno spiegati i motivi dell'interruzione.

La mia partecipazione a questo programma sarà mantenuta confidenziale?

Tutte le informazioni che la riguardano e che emergeranno nel corso dello studio verranno mantenute strettamente confidenziali. Ogni informazione riguardante lei che verrà disseminata non presenterà né il suo nome né il suo indirizzo, in modo che non sarà possibile identificarla.

Cosa accadrà subito dopo la raccolta dei dati?

Verrà congedato/a con ogni informazione aggiuntiva che potrebbe esserle utile allo scopo di comprendere in pieno lo scopo e la natura dello studio.

Cosa accadrà ai risultati di questo studio?

I dati raccolti verranno utilizzati nel contesto di una tesi di dottorato. I dati potrebbero anche essere usati per ulteriori ricerche o sviluppi della stessa ricerca. In ogni caso, i partecipanti non verranno identificati in nessun rapporto. Può ottenere una copia dei suoi risultati chiedendo direttamente al ricercatore (veda più avanti).

Chi ha riesaminato questo studio?

Questo studio è stato riesaminato dal mio team di supervisor e approvato dai membri del Centro per Performance Science del Royal College of Music di Londra a nome del presidente del CUK Research Ethics Committee (REC).

Per ulteriori informazioni contattare:

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Grazie per la sua partecipazione a questo progetto!

A2.2 CONSENT FORM FOR AUDIO RECORDING OF INTERVIEWS**Dichiarazione di consenso**

Data di nascita: __ / __ / ____

Email: _____

Numero di telefono: _____

Ho preso atto che la mia partecipazione è spontanea e sono libero/a di abbandonare lo studio in ogni momento, senza dare alcuna spiegazione.

Ho preso atto che i dati raccolti saranno trattati in maniera strettamente confidenziale. Essi potranno essere utilizzati a scopo di divulgazione scientifica, in forme che non consentono l'identificazione dei partecipanti.

Sono d'accordo nel prendere parte al progetto di ricerca, e do il mio permesso alla registrazione audio delle interviste a cui prenderò parte.

Nome del/la partecipante_____
Data_____
Firma_____
Ricercatore_____
Data_____
Firma

A2.3 INTERVIEW SCHEDULE

1. How would you describe your overall experience of the programme?
2. How would you describe your relationship with the residents who also took part in the programme?
3. How would you describe your relationship with staff members?
4. Did this programme have some effect on your feelings while listening to music?
5. Using a 1-10 scale, how would you evaluate your singing ability? Could you explain the reasons for that evaluation?
6. Using a 1-10 scale, how would you evaluate your ability to keep a steady rhythm? Could you explain the reasons for that evaluation?

A2.4 INTERVIEW EXTRACTS

To give an idea of the data collected, two extracts of the interviews are provided in the original language. They refer to two respondents of different genders.

Interview 1: Elisabeth, 80 years old

D. Innanzitutto le vorrei chiedere di descrivermi che effetti ha avuto questo programma musicale che abbiamo fatto insieme, che effetti ha avuto su di lei...come li descriverebbe?

R. Io li descriverei da ripetere! Ma forse non solo qua, anche in altri posti come questi, o anche diversi, come a scuola. Perché sono stati molto molto interessanti, voi li avete anche posti [in modo efficace/piacevole]...il modo il fare...perché voi vi avvicinate ad un gruppo – non so se avevate già esperienza di persone anziane o meno – e voi siete...così con gioia, anche! Avete reso...contenti tutti, e infatti tutti dicono: “Speriamo che li facciano ancora”. Io sono stata molto contenta, dico la verità

D. Grazie! E quindi è stata un'esperienza felice, insomma...

R. È stata un'esperienza felice, positiva...un'idea ottima di venire anche qui da noi, a portare...io sono qui da pochi mesi.... Ha fatto piacere, guardi, a tutti

D. Capisco. E sono anche un po' curioso di capire un pochettino meglio – ho già fatto tante interviste – alcuni mi dicevano: “Ho imparato qualcosa”, altri mi dicevano: “Ho riso tanto”, (l'intervistata ride), mi è stato detto anche: “È stato un modo anche per stare più vicino tra di noi”, “Ho conosciuto meglio i miei vicini” ...lei, se posso chiedere, come...cosa mi direbbe? È stato per lei un momento per imparare, per divertirsi...

R. Allora...per imparare, sempre...io non sono diplomata in conservatorio, e quindi di lacune ce ne sono tante. Però, la musica mi è sempre piaciuta! Un po' anche in casa mia la musica è girata, perché ho un fratello che è stato diplomato in conservatorio a Milano, oboe. Di modo che insomma 'sto ragazzino ha fatto anni e anni a studiare, studiare, poi a quei tempi qui non c'era il conservatorio a Lugano, quindi dovevano studiare come privatisti, con i professori della radio-orchestra, e vedevo anche le fatiche. E dopo, quando vi ho visto, ho visto voi - è stata una cosa anche umana – ho visto voi così...dico voi, ma intendo i giovanissimi che avevate, e dico: “Però, sono fortunati 'sti figlioli che possono fare musica di ogni tipo, sempre seguiti” ...sa, non è come uno che deve prendere su il suo oboe, andare a Milano perché nel frattempo il maestro è morto... capisce? L'è mica...però...mio fratello pure, ha sempre avuto la passione per la musica, che...dopo lui il suo lavoro l'ha fatto in banca perché aveva fatto il commercio prima. Sa com'è, nessuno è profeta in patria. Allora quando venivano i corsi [intende dire concorsi di assunzione] di...per un oboista..[bisbiglia qualcosa di incomprensibile] e allora lui andava, sì, lo chiamavano, quando era in banca, lo chiamavano quando avevano bisogno del terzo oboe o del corno inglese, neh? Ecco, e il suo direttore della banca diceva: “Sì, sì, ti lascio andare, non voglio...magari imbrogliare se ti dico di no” però, dopo quando la terza volta non l'hanno ancora preso l'ha dit: “Adesso però non ti lascio più andare, perché se non ti prendono...”. Sa, sono stati cattivi, ci sono state anche delle cattiverie...

D. E poi come risposta non è facile da accettare...mi sembra...cioè, già è dura accettare che non va bene nemmeno la terza volta, e se qualcuno te lo fa notare così...

R. Comunque, di modo che la musica è sempre girata ecco, perché dopo lui...ha insegnato nelle scuole, al ginnasio, alle magistrali...sa, prima di andare alla televisione sempre, no? Ha fatto tante scuole, ha insegnato, e allora di musica si parlava. Mio padre ha suonato il trombone nella Civica, sa, era tutta una famiglia che (ridendo e alludendo all'importanza della musica in casa). Invece io ero proprio una negazione. Mio papà mi ha fatto prendere delle lezioni di pianoforte, non studiavo niente! (Ride)...

D. Non aveva voglia, non aveva piacere?

R. No! Non studiavo niente e poi dicevo: “Lo so! Io so già tutto! So già la lezione!” ...niente sapevo! L'unica lezione che io non studiavo, perché altrimenti ero un po' secchiona! Si vede che proprio non mi piaceva...

D. E sì, non deve piacere a tutti, magari. È bello da sentire...

R. (convinta) Ecco!!

D. ...ma non è detto che piaccia anche farlo!

R. ...eh, farlo! Perché è un grande impegno, eh! È un grande sacrificio...non è mica uno scherzo!
(in dialetto)

D. E invece adesso mi piacerebbe chiederle cosa le è piaciuto di più, di quello che abbiamo fatto insieme

R. (senza esitazioni) A me è piaciuto tutto quello che avete fatto insieme! Anche...quelle canzoni lì all'inizio, alla fine...sa...avvicinavano tanto. Dopo, anche le altre, sì...poi, voi dicevate sempre qualcosa della vita di Mozart, della vita di un altro, anche quello è bello, eh!

D. Ha anche qualche ricordo dei brani che abbiamo suonato noi per voi? Si ricorda, soprattutto all'inizio...

R. Eh, sì, lo so...adesso, non mi ricordo mica bene (in dialetto)...so che mi piaceva questo, perché dicevo: "È anche un benvenuto", un piacere che avete, che avete forse avuto anche voi come lo abbiamo avuto noi no? Magari voi avete pensato: "Stiamo perdendo tempo", (in dialetto) invece forse il tempo non l'avete perso, se noi siamo tutti così contenti!

D. Ma infatti, assolutamente! Diciamo che c'è un grosso investimento e c'è un grosso desiderio di sviluppare [A4A]...questo da parte nostra. Le studentesse che hanno fatto parte del progetto sono contente e anche loro vorrebbero ripetere, e si spera di andare avanti insomma

R. Eh sì, perché anche le giovani lì...Partecipavano con noi, ci incitavano, no? Perché poi noi con i bastoncini e quelle cose lì...tante volte pensavo che non ero neanche in tempo, però...(ride)... invece...pum...ehm sì, ma pum bisogna farlo bene, eh?

D. Eh sì, e appunto: abbiamo avuto 10 settimane...10 settimane sono due mesi e mezzo, non è tanto poco...lei ha visto...che ne so? Che è cambiato qualcosa in questi 10 mesi [sic]? Per esempio il discorso di usare le bacchette...chiaramente non è facile per nessuno!

R. (sorridente) Non è facile! Le bacchette non le ho mai usate in vita mia, ecco. Ma niente...forse anche...ci siamo trovati lì, a far qualcosa – io parlo al plurale perché penso che vale anche per gli altri – a far qualcosa che non conoscevamo, diciamo pure. O che conoscevamo poco. Io l'ho vissuto proprio, un po', lì per lì, di persone che frequentavano un corso, non così: "Vado a cantare per passare il tempo"

D. Questo è molto bello, sì

R. Poi vede, ho messo su la pallina [il ricordino regalato alla fine del programma] la chiamo, la chiamo il mio diploma del conservatorio! (sorridente)

D. (ridendo) Giusto! Giustissimo!

R. Si fa presto a guadagnarlo! (mormora qualcosa di incomprensibile) è già lì!

D. E pensando un po' alle canzoni che abbiamo cantato insieme...io mi ricordo che ci sono state canzoni in italiano, in spagnolo, in tedesco, in dialetto ticinese...e...forse anche non mi ricordo se ho già detto tedesco o no...lei ha avuto preferenze in questo senso?

R. Mah, io devo dire tutte, perché le ho tenute, no? E...e...insomma, ci sono di quelle che si capivano subito e quelle dove mi dovevo un po' più concentrare, però andava bene. Andava bene, poi c'erano anche le signore di lingua tedesca che sono sempre felici quando si fa qualcosa mettendo un po' anche la loro lingua, e quello è stato bello, poi. È vero che la...la...(cerca le parole)...penso ad una signora, una signora che ha composto la vita..la vida è...

D. Ah, la canzone che abbiamo portato! A "Gracias à la vida" forse pensa, sì!

R. Ecco...è vero che quella signora lì ha composto quella canzone, e dopo si è suicidata?

D. Devo essere sincero: io non conosco bene la storia di quella canzone. Mi verrebbe da dire che lei ha continuato l'attività, dopo, ma non sono sicuro, dovrei documentarmi, sì [l'intervistata ha ragione, Violeta Parra soffriva di depressione e si tolse la vita nel 1967, l'anno dopo aver composto "Gracias a la vida"]. Però se fosse così...accidenti!

R. Appunto! Lei continua a dire: "Bella la vita, bella la vita! ...tutto bello..." però dopo ha questo...se è così...

D. Sì, a volte quello che c'è dietro, alle opere d'arte, è molto forte...

R. Eh, sì...è bella la musica, bello un po' anche spiegare la storia della musica, in breve già, per noi...però è bello conoscere qualcosina dei musicisti, no? La signora diceva che Mozart è un po'... (ride)...però, non sarà stato l'unico, eh? Però, ecco, vede: conoscere un pochino anche la persona... ecco. No, è stato...l'avete proprio messo insieme bene!

D. Grazie! E tra l'altro adesso, nella mia lista di domande, dovrei chiederle: cosa le è piaciuto di meno, di quello che abbiamo fatto? Non so se le viene in mente...(l'intervistata sembra non sapere come rispondere)...10 settimane sono anche tante, se vogliamo...

R. Sì, è vero!

D. ...qualche momento, qualche canzone, uno strumento scomodo da suonare...non lo so se le viene in mente qualcosa...

R. No...perché adesso...(sembra in difficoltà) strumenti da suonare per noi?

D. Sì, sì, penso adesso ai tamburi. Si ricorda quella volta che abbiamo usato le pentole, che abbiamo usato gli strumenti...gli oggetti da cucina?

R. Sa che non so? Perché io una volta sono mancata perché non stavo bene...

D. Ah, chissà se è stato proprio quello!

R. Io sono stata malata due/tre giorni e non sono scesa, ma altrimenti c'ero sempre. Sì...che non mi è piaciuto, non posso dire perché dovrei inventare qualcosa (sorridente)

D. (ride)

R. Ecco, veramente, solo complimenti...a voi che avete presentato la vostra arte, e a chi ha permesso di farlo

Interview 2: Peter, 95 years old

D. Volevo chiederle come descriverebbe gli effetti che questo programma di musica ha avuto su di lei...questo programma di attività musicali...

R. Quelle attività musicali, specialmente dopo le prime due volte, che erano di preparazione, mi hanno... divertito e nello stesso tempo mi hanno rallegrato. Mi piaceva! Specialmente quei suoni...fatti con oggetti di nessun valore mi sono molto piaciuti, e la persona che animava...quella signora (fa fatica a completare la frase).

D. La signora Silvia?

R. Sì! Era molto divertente e molto...molto simpatica, molto alla mano. Non era complicata. Ci trattava un po' come bambini, ma è quello che ci voleva! (sorridendo)

D. Capisco. E lei, se capisco bene, ha visto proprio che c'è stato un cambiamento: le prime due sessioni sono state in un certo modo, e poi, dopo ha iniziato a divertirsi di più, a sentirsi più coinvolto.

R. A misura che si andava avanti con le settimane, si sentiva la differenza! E le ultime 3...3 o 4 volte, tranne una in cui la signora Silvia non c'era, erano veramente molto simpatiche. E quando vedevo lei (rivolto all'intervistatore) che arrivava col contrabbasso...mi piaceva! Vedevo mio padre!

D. Bello questo!

R. Mio padre è lì! (l'intervistato mostra una foto del padre)

D. Complimenti! Che eleganza!

R. 100 anni! (correggendosi immediatamente) 99 anni! Lì aveva...lì era giovane, era quando si è sposato.

D. Certo, e ora dovrei chiederle...un po' me l'ha già detto forse...che cosa le è piaciuto di più di queste settimane in cui abbiamo suonato insieme? Quali sono stati gli aspetti più belli, più interessanti...

R. Più bello era quando, quando suonavano e specialmente mi piaceva il flauto. C'erano due ragazze che suonavano, e una specialmente...suonavano bene tutte e due e quello mi piaceva molto. Ma il complesso, senz'altro!

D. Capisco. E per quanto riguarda le attività che abbiamo fatto tutti insieme...si ricorda i bastoni colorati, gli oggetti di poco conto che mi ha descritto, le bacchette abbiamo usato...c'è stato qualcosa che...

R. [completando l'elenco] I tamburelli...

D. Esatto, esatto! Mi può dire qualcosa che le è piaciuto di più, che si ricorda più volentieri...

R. Mi piacevano tutte. Anche il triangolo aveva un suono molto dolce e...e...le bacchette...i tamburelli...ma tutto! Quando si suonava, quando facevano la rappresentazione con la musica... era molto bello!

D. Mi ricordo! Lei per esempio pensa al Carnevale degli Animali? Si ricorda i leoni, le tartarughe?...

R. Sì, sì! Era molto bello. E non avrei mai pensato di arrivare con oggetti di poco o di nessun valore, di arrivare a rappresentare una...un pezzo di musica.

D. Certo, certo

R. Era molto bello!

D. E invece adesso le chiedo cosa le è piaciuto di meno! Per fortuna mi ha detto tante cose belle, ma ci sono degli aspetti in generale che non tanto gli sono piaciuti, in qualche modo, di quello che abbiamo fatto?

R. Di quello che abbiamo fatto? No! La prima volta, mi sono detto: "Non capisco cosa possiamo..." mi pareva di avere 6 anni e star dietro...e invece, col passare del tempo, si vedeva veramente che non erano bambini, erano adulti, che cercavano di interpretare...e specialmente le ultime 3 o 4 erano belle!

D. Chissà cosa è successo in queste ultime sessioni! Se è stato solo un discorso di abitudine, di conoscersi...o se proprio c'è stato qualche cambiamento che abbiamo proposto, e che lei ha apprezzato tanto.

R. Mah, io ho sempre apprezzato il conservatorio, perché è di lì che escono [non specifica ma parla con ammirazione] e siccome mio padre aveva un'orchestra formata tutta di allievi di qualsiasi età e formati da lui: gente che non aveva mai suonato e che...li istruiva ed entravano nell'orchestra. Tra l'altro un bambino...un bambino...è diventato...un solista di pianoforte, è uscito dalle mani di mio padre. E la chiamavano quando a Milano – perché abitavamo a Domodossola – quando facevano un concerto grande giù alla Scala di Milano lo chiamavano per ...non solo lui...chiamavano magari una cinquantina [di altri musicisti] che non facevano parte dell'orchestra ma che erano lì solo per quello spettacolo, e lui era col violino.

D. Bello, bello. E invece se io le chiedessi di descrivermi il suo rapporto con gli altri residenti che hanno partecipato a queste sessioni di musica, che tipo di rapporto ha avuto con chi era seduto vicino a lei? O con altri signori con i quali magari...

R. Con quelli vicino a me, un bel contatto!

D. Un bel contatto!

R. Molto bello, sì. Eravamo...lo facevamo...lo facevamo con piacere, non per farlo. Ci divertiva.

Erano...c'era un signore e 3 o 4...dame, e...lo facevamo volentieri.

D. Quindi, insomma, un po' avete anche...che ne so, fatto più amicizia...cerco di immaginare, avete avuto modo di parlare tra di voi?

R. Ne parlo ancora adesso, quando incontro la signora che era a fianco a me. Ne parlavo con lei e mi diceva: "Com'era bello al venerdì pomeriggio, quell'oretta insieme al Conservatorio!"

D. Quindi, insomma, si suonava insieme, ma mi sembra di capire che finita l'ora di musica insieme, c'è anche qualcosa di cui parlare dopo

R. (convinto) Ma certo! Ma certo!

D. C'è stato anche questo effetto, se capisco bene

R. Gli ho raccontato anche una mia azione che ho fatto per il conservatorio, che poi è andata in fumo ma non per colpa mia, dopo gliela racconterò, quando abbiamo finito [si era interessato ad alcuni lasciti e donazioni a favore del conservatorio]

D. Va benissimo. E...invece, come descriverebbe il suo rapporto con i membri del Conservatorio? Quindi: si ricorda queste ragazze che portavano gli strumenti, oppure il ragazzo siciliano che suona il pianoforte, il rapporto che ha avuto con me, con Silvia...

R. (convinto e senza esitazioni) Mi è piaciuta la semplicità.

D. La semplicità...

R. Arrivavano semplici, si direbbe che arrivavano da un paesetto! Non da...non da..non dall'università! Dall'università musicale...

D. Sì! (ridendo) Ha visto anche la laurea..[si riferisce ad una signora che con l'aiuto della figlia ha stampato un simpatico attestato di laurea per il gruppo dei partecipanti]

R. No, non l'ho vista! Perché la...la R. [membro dello staff] è partita in vacanza e io appunto non l'ho vista quando è partita...però, ho conservato il regalo [che la workshop leader ha realizzato per ogni partecipante], e quello l'ho dato alla R. quando è partita, che è la nostra...[animatrice]

D. E quindi, insomma, se capisco bene, la semplicità è stata un po' la parola chiave del rapporto con noi del Conservatorio...

R – Non solo la semplicità! Ma la bravura, anche!...perché non è da tutti di...di...di improvvisare un pezzo così

D. Certo. E lei ha avuto anche modo di parlare con qualcuno di noi, di conoscere un po' più da vicino alcuni di noi...io mi ricordo che io e lei abbiamo fatto due parole ogni tanto, e mi chiedo se lo stesso è successo con qualche ragazza, o con il pianista, o con Silvia...

R. No, ho parlato con la signora, con la Silvia, di quel caso che ho...che ho fatto nascere e che purtroppo per causa del municipio è fallito, che era veramente un caso...parlare di milioni...se adesso vuole che gliela racconto...

APPENDIX 3

STUDIES 3 AND 4: MATERIAL USED FOR DATA COLLECTION AND EXTRACTS OF TRANSCRIPTIONS

A3.1 PARTICIPANT INFORMATION SHEET

Foglio informativo per i partecipanti

Titolo del progetto

Investigating the effects of a music participation programme on older adults and higher education music students

Invito

Sei stato/a invitato a prendere parte ad un progetto di ricerca. Prima che tu decida, è importante per te di capire i motivi per cui la ricerca è stata intrapresa e cosa essa comporterà. Dedica per favore un po' di tempo a leggere attentamente le seguenti informazioni e discutile con altre persone se vuoi. Chiedimi senza esitazioni se c'è qualcosa che non è chiaro o se desideri avere maggiori informazioni. Grazie della tua lettura!

Qual è lo scopo dello studio?

Il presente studio intende analizzare il tipo di esperienza che i residenti delle case anziani e i giovani professionisti della musica vivono durante il loro coinvolgimento in un programma di attività musicali chiamato *Art for Ages*.

Perché sono stato scelto/a?

Sei stato scelto/a perché lo studio si pone di investigare come i partecipanti del programma *Art for Ages* vivono l'esperienza di far parte di tale programma. Questa parte dello studio coinvolgerà circa 12 studenti.

Sono obbligato a prendere parte a questo studio?

Sei libero/a di scegliere se far parte di questo studio oppure no. Il tuo rifiuto a partecipare non comporterà nessun tipo penalità da parte tua. Se decidi di partecipare, ti verrà consegnato questo foglio informativo affinché tu possa conservarlo, e ti verrà chiesto di firmare due copie del documento di consenso (una delle quali sarà consegnata a te). Se decidi di partecipare, sarai comunque libero/a di ritirarti in qualsiasi momento, senza nessun tipo di penalità e senza essere tenuto/a motivare la tua scelta.

Cosa accadrà se decido di prendere parte al progetto?

Durante lo studio, i partecipanti saranno coinvolti in diversi tipi di indagine. Nella tua qualità di studente/essa, ti verrà chiesto di:

- Redigere un diario orale da aggiornare al termine di ogni sessione di *Art for Ages*
- Completare due questionari (prima della prima sessione e dopo la decima sessione di *Art for Ages*)
- Partecipare a due interviste (prima della prima sessione e dopo la decima sessione di *Art for Ages*)

Cosa devo fare?

La partecipazione a questo studio non comporta nessun tipo di restrizione al tuo stile di vita. Ai partecipanti è semplicemente richiesto di prendere parte ad ogni sessione del programma *Art for Ages*.

Quali sono i possibili rischi dovuti alla partecipazione a questo studio? E quali sono i possibili benefici?

Non è previsto nessun rischio per i partecipanti che prenderanno parte a questo studio. Il tuo coinvolgimento fornirà preziose informazioni riguardo ai benefici per gli studenti derivanti dallo sviluppo di programmi musicali per la comunità. Se sei interessato/a, potremo condividere con te i risultati al termine dello studio.

La mia partecipazione a questo programma sarà confidenziale?

Tutte le informazioni che ti riguardano e che emergeranno nel corso dello studio verranno mantenute strettamente confidenziali. Ogni informazione riguardante te che verrà disseminata non presenterà né il tuo nome né il tuo indirizzo, in modo che non sarà possibile identificarti.

Cosa accadrà subito dopo la raccolta dei dati?

Verrai congedato/a con ogni informazione aggiuntiva che potrebbe esserti utile allo scopo di comprendere in pieno lo scopo e la natura dello studio.

Cosa accadrà ai risultati di questo studio?

I dati raccolti verranno utilizzati nel contesto di una tesi di dottorato. I dati potrebbero anche essere usati per ulteriori ricerche o sviluppi della stessa ricerca. In ogni caso, i partecipanti non verranno identificati in nessun rapporto. Puoi ottenere una copia dei tuoi risultati chiedendo direttamente al ricercatore (vedi più avanti).

Chi ha riesaminato questo studio?

Questo studio è stato riesaminato dal CUK Research Ethics Committee (REC).

Per ulteriori informazioni contattare:

Paolo Paolantonio
c/o Conservatorio della Svizzera italiana
Via Soldino 9, 6900 Lugano
Email: paolo.paolantonio@conservatorio.ch
Phone: 091.9602363

Grazie per la tua partecipazione a questo progetto!

A3.2 CONSENT FORM FOR AUDIO RECORDING OF INTERVIEWS

Dichiarazione di consenso

Data di nascita: __ / __ / ____

Email: _____

Numero di telefono: _____

Ho preso atto che la mia partecipazione è spontanea e sono libero/a di abbandonare lo studio in ogni momento, senza dare alcuna spiegazione.

Ho preso atto che i dati raccolti saranno trattati in maniera strettamente confidenziale. Essi potranno essere utilizzati a scopo di divulgazione scientifica, in forme che non consentono l'identificazione dei partecipanti.

Sono d'accordo nel prendere parte al progetto di ricerca, e do il mio permesso alla registrazione audio delle interviste a cui prenderò parte.

Nome del/la partecipante

Data

Firma

Ricercatore

Data

Firma

A3.3 INTERVIEW AND DIARY SCHEDULES

Studies 3 and 4 involved the students recruited into A4A, and data collection was based on oral diaries including 7 questions, and semi-structured interviews. Each student was interviewed before the start of the programme and after the last session, thus participating in two interviews. This research was conducted over two academic years and three students participated twice. They took part in a third interview after the last session of the second year.

A3.3.1 INTERVIEW SCHEDULE USED BEFORE THE BEGINNING OF THE PROGRAMME

Self-concept and functioning well personally

1. Imagine you had to describe yourself to someone that had just met you, what would you say?
2. In general, to what extent do you feel that what you do in your life is valuable and worthwhile?

Career expectations

3. How would you describe your musical activity?
4. How would you describe the career you expect to have?
5. What do you consider to be the greatest benefits from having this kind of career?
6. What are your greatest concerns about embarking on this kind of career?

Art for Ages related questions

7. What benefits do you think the older adults will have by taking part in the programme?
 8. What kind of competences do you think you will develop by taking part in this project?
 9. How do you feel about doing musical activities with older adults?
 10. How do you feel about working in a team?
 11. What do you think will be the challenges of the programme?
 12. To what extent will what you expect to learn be relevant for your career?
-

**A3.3.2 INTERVIEW SCHEDULE USED AFTER THE LAST SESSION
OF THE PROGRAMME**

Self-concept and functioning well personally

1. Imagine you had to describe yourself to someone that had just met you, what would you say?
2. In general, to what extent do you feel that what you do in your life is valuable and worthwhile?

Career expectations

3. How would you describe your musical activity?
4. How would you describe the career you expect to have?
5. What do you consider to be the greatest benefits from having this kind of career?
6. What are your greatest concerns about embarking on this kind of career?
 - a. Did the programme change your attitude towards your career?

Art for Ages related questions

7. What is your general evaluation of the experience?
 8. What benefits do you think the older adults will have had by taking part in the programme?
 9. What kind of competences did you develop by taking part in this project?
 10. How do you feel about doing musical activities with older adults?
 - a. Specifically, has this been influenced by Art for Ages?
 11. How do you feel about working in a team?
 12. What, if any, were the challenges of the programme?
 13. To what extent was what you learned relevant for your career?
-

A3.3.3 INTERVIEW SCHEDULE USED AT THE END OF THE PROGRAMME WITH STUDENTS WHO ATTENDED TWICE

Career expectations

1. How would you describe your musical activity? Has it somehow changed in the last few months?
2. How would you describe the career you expect to have? Did it somehow change in the last few months?
3. What do you consider the greatest benefits from having such a career? Did your thoughts about that somehow change in the last few months?
4. What are your greatest concerns about embarking on such a career? Did your thoughts about that somehow change in the last few months?
5. Has the programme changed your attitude towards your planned career? If yes, in what sense?

Art for Ages-related questions

6. What differences, if any, did you see between the first and the second year of the programme?
 - a. Differences regarding yourself
 - i. What kind of competences did you develop by taking part twice in this project?
 - ii. How do you feel about doing musical activities with older adults?
 - iii. How do you feel about working in a team?
 - b. Differences regarding participants' experience
 - i. What benefits do you think the older adults will have had by taking part in the programme?
 - ii. Did you see relevant differences between this year's programme and the previous one?
 - c. Thoughts about the overall programme
 - i. How would you describe the overall programme? What are, if any, the differences between this year's programme and the previous one?
 - ii. How would you describe the contents of the programme? What are, if any, the differences between this year's programme and the previous one?
 - iii. How would you describe your experience of working in a team? What are, if

any, the differences between this year's programme and the previous one?

7. What did you like most about the programme?
8. What did you like least about the programme?
9. How would you change the programme?
10. Would you like to be the leader of a project similar to this programme?
 - a. How would you arrange it?
 - b. What would be your needs?
11. To what extent was what you learned relevant for your career?
12. What is your evaluation of the overall experience?
13. Is there something you would like to add?

A3.3.4 SCHEDULE USED IN THE ORAL DIARIES

1. How would you describe your experience of today's session?
2. What were the greatest moments?
3. What were the most enjoyable task?
4. What, if any, were the challenges of this programme?
5. Suppose that you were in charge and could make one change that would make the programme better. What would you do?
6. How did you feel when you started today's intervention?
7. How do you feel now?

A3.4 INTERVIEW AND DIARY EXTRACTS

To give an idea of the data collected, two extracts from the interviews (after the last session of the programme) and two extracts from the oral diaries are provided in the original language. They refer to two respondents of different genders.

Mark: Extract of the semi-structured interview after the last session of the programme

D. Allora la prima domanda è come quella che ti ricorderai forse dal primo incontro, cioè devo chiederti di immaginarti di descrivere te stesso a qualcuno che ti ha appena incontrato. Che cosa ti viene da dire in una situazione del genere?

R. Ok. Allora direi che sono una persona abbastanza timida però comunque dopo un po' riesco

a essere molto simpatico in un certo senso, metto a proprio agio le persone e questo mi viene detto spesso, poi sono una persona abbastanza tenace diciamo, anche se va tutto un po' male alla fine alla fine cerco di tenere fissi i miei obiettivi nonostante sia difficile, però diciamo (ride) riesco a stare abbastanza stabile. Cambio idea continuamente, però, diciamo che cerco di avere un obiettivo, anche se ho imparato che oscillo molto da un polo all'altro, però comunque cerco di avere i miei obiettivi e portarli avanti, anche diciamo nelle relazioni con le persone, di non farmi prendere troppo dai miei umori (ride) e di stare molto...cerco, diciamo, sto cercando di diventare una persona stabile...sì, penso che si veda anche, quando mi relaziono con le persone, che cerco di essere, di pormi in modo tranquillo. Quindi direi per chi mi conosce, chi mi sta conoscendo, di stare tranquillo (ridono entrambi)

D. Quindi posso stare tranquillo! (ride) Grazie! E andando avanti come descriveresti in generale il tuo benessere in questo periodo della tua vita?

R. Diciamo che sto finendo il mio Bachelor, e quindi comincio a pensare anche a quello che vorrò fare nel mio futuro, però cerco sempre di farlo in modo calmo. Tipo, un po' tempo fa ero molto preso dall'ansia per le scelte che devo prendere, mentre adesso cerco comunque di vederle in modo comunque positivo. Cioè, in realtà, penso che ci sono tante strade e qualsiasi prenderò, se riesco a prenderla come dire bene, sarà comunque un successo. Quindi diciamo, è un periodo in cui sono abbastanza equilibrato in un certo senso, ed è proprio per questa diciamo voglia del futuro, e anche abbastanza fiducia, forse un po' ingenua, però... diciamo... il fatto di cercare di capire cosa voglio fare, cercare varie strade, è una cosa che come dire, che mi fa avere un obiettivo senza stress, senza ansia, quindi il mio equilibrio in questo momento è proprio la voglia di andare avanti, di fare qualcosa, di cambiare ambiente, di fare nuove esperienze, diciamo

D. Chiarissimo. Sembra veramente in qualche modo un processo, rispetto appunto a qualche mese fa. Forse qualcosa è cambiato o sta cambiando...

R. Sì. Anche in realtà il progetto con gli anziani diciamo è stato molto utile, perché mi ha fatto vedere che la musica non è solo quella che vediamo in conservatorio, che è un ambiente molto limitato, in un certo senso, perché bisogna passare gli esami, studiamo tutti per fare bene, che poi in realtà si perde un po' quel lato semplice della musica, che è quello autentico alla fine, che portavamo agli anziani. Non portavamo chissà quali pezzi in maniera perfetta, non è che pretendevamo da loro... eppure ho visto molta più gioia in quella stanza che magari in una sala di un Conservatorio quando c'è un esame e la gente suona benissimo. Quindi alla fine la musica è anche quello, un po' - come dire? - un tempo pensavo di smettere di suonare, anche di prendere altre strade, però penso che anche grazie a questa esperienza ho capito che in realtà la musica è anche altre cose, non è il saper suonare bene, fare il bel concerto, fare il saggio fatto bene, ma c'è un motivo... no, c'è una cosa che si può condividere che è un motivo di gioia per gli altri. Uno ci

lavora tanto però è anche giusto portarla a tutti, quindi è stato molto...è stato molto positivo, in realtà non me l'aspettavo così tanto

D. Addirittura?

R. Sì, è stato proprio... e poi mi ha fatto bene proprio l'esperienza...di musica in altri contesti, quest'anno, sempre grazie al conservatorio...

D. Intendi al di fuori del solito contesto? Il solito contesto accademico?

R. Sì, sì, sì...anche quando abbiamo suonato a Bellinzona per i malati del centro diurno, insomma malati psichici

D. Forse il progetto con N.?

R. Sì, esatto quello è stato... è stato molto bello, perché anche lì partiamo...sì la gente non pretende che sia perfetta ma si emoziona solo per perché suoni, fai una cosa bella, ed è quello di cui ci si dimentica, in conservatorio. e questa esperienza mi ha ricordato questo, ed è stato bello

D. Bello, bello! E adesso devo chiederti: e dopo questa risposta così bella devo chiederti: in che misura pensi che ciò da fare la tua vita ha un valore ed è significativo?

R. (sorridente) Mah, un po' già ho risposto

D. Esatto, sì, io seguo un po' la traccia, tu sentiti libero di dirmi: "Aspetta, questo l'ho già detto!", facciamo anche una chiacchierata, fermo restando che io seguo un po' un binario, quindi possiamo avere già risposto a questa domanda...

R. Sì

D. Te la rileggo: in generale in che misura pensi che ciò che fai nella tua vita ha valore ed è significativo?

R. Sì, come appunto ho detto, uno fa musica per suonare bene ovviamente, e fare i concerti... anche l'idea di entrare in orchestra e di fare carriera...però forse è un po'...limitante in un certo senso, manca un po' un aspetto umano che nella musica fondamentale, e se io penso ai miei studi, diciamo le lezioni più belle erano quelle collettive di orchestra, quando si lavorava tutte le settimane insieme e si trovano rapporti, anche con insegnanti, e quindi alla fine la parte della musica più bella, cioè penso al di là del insegnamento, è portare da musica anche in altri contesti perché è più soddisfacente, è più vero, secondo me, ormai

D. Sì. Adesso devo proprio chiederti qualcosa su... sulla tua attività musicale, e quindi semplicemente la domanda sarebbe: come descriveresti adesso la tua attività musicale? In cosa consiste? A livello di studi, di concerti, di insegnamento...

R. Diciamo che adesso sono molto concentrato sugli esami finali del Bachelor, sugli esami di ammissione ai vari Master e quindi diciamo quello è un po' il mio pensiero principale. Poi insegno, anche, per ora ho solo un'allieva, ora in questo momento, solo una signora però è sempre...come dire: bello, è una cosa che mi piace e...poi appunto, anche grazie al conservatorio,

sto suonando in tanti contesti nuovi, è molto piacevole. Anche per esempio ieri sera (ride) sono andato a casa di amici, ho portato il violoncello e ho suonato un po' e poi l'ho usato come una chitarra facendo accordi e cantavano tutti insieme, ed è stata una cosa che non avevo mai fatto prima, e ho pensato che quello è alla fine la musica. Sì, è anche preparare l'esame fatto bene, però diciamo, sto cercando in un certo senso in questo momento, di sperimentare nuovi contesti. Perché penso che la musica, ormai, come è pensata in conservatorio, è un po' utopistica, che uno finisce in orchestra, che fai concerti...è un po'...rispetto alle cose che ti piovono addosso, un pochino sbagliato, perché comunque penso di volere vivere di musica, però non sono uno schizzinoso, in un certo senso. Voglio cercare di vedere il più possibile il mondo di tutta la musica. [Quindi] la mia attività musicale in questo momento è quella anche un po' di ricerca, cerco di fare il più possibile.

D. Chiaro, bello. E anche qui, ho un po' di domande che nascono direttamente dalla tua risposta. Una è anche piuttosto banale, semplice: l'allieva che hai, da quanto tempo ce l'hai? È qualcosa che c'era già da tempo?

R. Sì, da tre anni

D. Ah, ok. Personalmente non mi ricordavo e quindi mi è venuto di chiederti se era una cosa recente, invece no non è così

R. No no, ci conosciamo, è una signora di 40 anni che è anche dislessica, quindi a volte è difficile. Però è sempre bello, perché finiamo la lezione e lei è contenta e io sono contento, anche se non ha fatto bene i pezzi, però è una che so che studia, che ci tiene e che fa bene, quindi da questo punto di vista sono anche fortunato. Però, comunque, c'è anche un bel rapporto umano, che penso si costruisca quasi sempre tra allievo e insegnante, e soprattutto in musica, in cui rapporto è uno a uno, è più facile creare un rapporto.

D. Sì. E l'altra domanda: hai parlato prima di esami che ovviamente sono quelli conclusivi, ma hai parlato anche di esami di ammissione...quindi anche un discorso un po' di percorsi da seguire e non vuole essere indiscreta, ma stai pensando a dei Master? Hai più o meno le idee chiare?

R. Sì. Diciamo che ho un po' sbattuto la testa di qua e di là, mi sono fermato in vari conservatori in giro, ma alla fine ho deciso che appunto vorrei fare un Master in pedagogia per aprirmi più strade, diciamo, anche cercare di insegnare, però vorrei andare dal conservatorio di Lugano perché studio qui da 5 anni ormai, e quindi... non sapendo il tedesco e piacendomi il Master in pedagogia in Svizzera come è fatto, farò l'ammissione nei conservatori francofoni, quindi Ginevra e Losanna alla fine è stata un po' ragionata, ma sono convinto ora e spero che vada tutto bene (ride)

Mark: Extract from the oral diary

10 October — Cigno Bianco

1 — *L'esperienza di oggi, che è il 10 ottobre, la descriverei come positiva, e comunque stato anche molto più facile, in un certo senso, del previsto, quindi comunque penso sia stata positiva.*

2 — *I momenti migliori: vabbè sono stati secondo me il canto delle rime, perché comunque è molto divertente, e anche ho visto gli anziani che comunque partecipavano. Una signora che si chiamava B. subito intervenuta bene cantando anche, e quello è stato molto bello. E sempre, anche, pure quando abbiamo usato i tubi con Natasha che dirigeva tutto è stato molto molto divertente, anche perché mi sembrava che si divertissero tutti.*

3 — *Le mansioni che ho svolto più volentieri: innanzitutto è stato suonare, perché comunque diciamo mi sento a casa suonando, quindi è la cosa che faccio più volentieri. Però in realtà anche cantare, mi sono divertito e non me lo aspettavo...*

4 — *...infatti le sfide di questa sezione fundamentalmente sono state proprio quello in cui dovevo cantare. A cantare non sono così abituato, cioè canto sempre nel coro, In conservatorio, però cantare così è un contesto comunque nuovo ed era una sfida, però alla fine è stato positivo.*

5 — *Per quanto riguarda il programma mi è sembrato molto efficace, anche perché appunto i canti popolari sono stati molto apprezzati, hanno già fatto altre richieste, quindi mi sembra che sia andato tutto molto molto bene.*

6 — *Quando ho iniziato la sessione oggi mi sentivo abbastanza...cioè, non agitato, però comunque è una cosa nuova è avevo un po' paura di non essere in grado. Quindi da una parte comunque ero tranquillo perché so che è una bella cosa, però dall'altro c'era un po' di agitazione.*

7 — *Adesso invece sono molto contento, sono sereno, perché comunque è stato divertente, ho visto che tutti comunque erano contenti, entusiasti e anche nel contesto non mi sono sentito a disagio, anzi è stato molto bello partecipare e quindi sono contento adesso.*

17 October — Cigno Bianco

1 — *Allora l'esperienza della sessione di oggi, che è il 17 ottobre, la descriverei come positiva, come anche la settimana scorsa.*

2 — *I momenti migliori: secondo me il momento migliore è la canzone delle rime, perché si vede che comunque si divertono tutti e anche...sinceramente anche io mi diverto, quindi è sempre piacevole. Oppure anche quando abbiamo cantato "Vecchio scarpone" che tutti la conoscevano già, e comunque vedi che c'è molta partecipazione.*

3 — *Le mansioni che ho svolto più volentieri: in realtà oggi ho fatto volentieri tutto. Sia a cantare che distribuire i tubi e suonare quelle poche cose che dovevo suonare, e quindi è stato bello.*

4 — *La sfida è stata imparare “Vecchio scarpone” che era una canzone che avevo ascoltato pochissimo prima della sessione e che non conoscevo, quindi comunque è stata una sfida imparare un canto così in fretta, era una cosa che non avevo mai fatto prima.*

5 — *Il programma devo dire che è molto bello così, anche perché il gruppo è molto reattivo.*

6 + 7 — *In realtà da prima di iniziare la sessione di oggi ero comunque positivo perché sapevo come era andata settimana scorsa e quindi anche dopo è stato bello.*

24 October — Cigno Bianco

1 — *La sessione del 24 ottobre è stata un po' più stancante delle altre secondo me, perché non so, eravamo tutti più stanchi ed è stato anche un po' più difficile imparare la canzone nuova, e quindi è stata appunto un pochino più stancante.*

2 — *I momenti migliori... diciamo che è stato il momento conclusivo, quando abbiamo suonato e cantato “Canario” e vedi sempre gli anziani che si animano perché si balla, è una musica quando li facciamo suonare è sempre una cosa bella. Però oggi avevo io il tamburo e quindi dovevo farli suonare, e loro dovevano seguire me con il tamburo ed è stato bello...*

3 — *...infatti è questa forse la mansione che ho svolto più volentieri, questa proprio di suonare il tamburo per far suonare loro.*

4 — *La sfida è stata, al solito imparare, diciamo, una nuova canzone subito, però poi alla fine è andata bene, anche perché sono canzoni che loro conoscono, e quindi comunque le sanno ed è più facile, non è che è una cosa totalmente nuova per loro e ti senti appoggiato.*

5 — *Forse abbiamo perso molto tempo sulle rime secondo me, questa volta, però hanno detto tutti che comunque loro erano divertiti, che è stato bello. Però secondo me è stato veramente un po' eccessivo quella volta, quindi magari...però già la prossima volta faremo meno cioè staremo meno tempo sulle rime.*

6 + 7 — *Diciamo che mi sentivo stanco anche all'inizio della sessione di lunedì...però poi è stata comunque sempre una bella esperienza, anche perché prepariamo tanto materiale che non usiamo tutto, quindi è una cosa buona, perché così abbiamo sempre tante cose da riprendere, che è meglio che mettere e montare cose nuove.*

Natasha: Extract from the semi-structured interview after the last session of the programme

D. Allora, innanzitutto ti volevo chiedere di immaginare di descrivere te stessa ad una persona che ti conosce, che ti vede per la prima volta. Cosa ti viene da dire?

R. mmm...(ci pensa)...Allora...descrivermi, me stessa, mm...non so, almeno in questo punto della mia vita sono una persona molta allegra e che cerco sempre di...di essere contenta facendo qualsiasi cosa che faccio. Dopo, sì, potrei dire che sono una persona abbastanza responsabile, che mi preoccupa di ... mmm...di fare quello che si deve fare, no? Diciamo. Ma anche sempre di... di cercare il divertimento in quello che faccio, non lo so. Sono una persona tranquilla, non mi piacciono i litigi per niente, li evito tante volte. E...non so! più o meno questo

D. Va benissimo. Adesso dovrei chiederti in quale misura pensi che quello che fai nella tua vita in generale ha un valore e ha un significato

R. mmm...Allora, per me ha un significato, quindi sono contenta, no? Quello che faccio, sia dedicare il mio tempo alla musica, a studiare...anche se studio durante tante ore per me ha un valore, ha un'importanza, e quindi sono contenta di farlo, no? Di...di...sì, di dedicare il mio tempo a fare queste cose

D. Sì, è qualcosa...come dire, non è una perdita di tempo, non è una cosa che fai per abitudine, che fai per forza...

R. No, per me non è una perdita di tempo

D. È importante, insomma

R. Sì!

D. E posso provare a chiederti in cosa consiste questa importanza? Se è importante perché ti piace, se è importante perché ti costruisci un futuro, perché è importante per qualcun altro...

R. mmm (sembra in difficoltà)

D. Se ci hai mai pensato, insomma

R. Sì, sì, ci ho pensato...innanzitutto è importante per me perché mi diverto, perché è qualcosa con cui godo con cui...sì. Qualcosa che mi fa stare bene, no? Dopo...sì, certo...però...mmm...mi piacerebbe che fosse qualcosa che aiuterebbe anche nel mio futuro, no? E penso di sì, anche se...se io investo il mio tempo in fare certe cose, alla fine sarà...sarà quello che mi...dove guiderò la mia vita no? In questa direzione penso (sembra un po' insicura, come se temesse di non aver saputo rispondere alla domanda)

D. Va benissimo, grazie. Adesso parliamo un po' più da vicino della musica, proprio, del lavoro, della carriera eccetera. Tu come descriveresti la tua attività musicale? Al di là di quello che io so perché ci conosciamo, in generale in cosa consiste il tuo essere musicista, essere flautista,

eccetera? Cosa fai di preciso? Come ti vivi la tua attività di musicista?

R. Allora...(ci pensa su)...Da un lato è un'attività personale, nel senso come ho già detto, qualcosa che a me piace e quindi la faccio perché sto meglio se la faccio, e dall'altra parte, anche, è un'attività che mi permette di avere un rapporto con un gran numero di persone che mi fa anche stare bene, no? E al di là di quello, è un qualcosa cui vorrei dedicarmi perché...sono contenta di farlo, è qualcosa che mi fa stare bene, quindi...è qualcosa a cui vorrei dedicare il mio tempo

D. In realtà, forse ho posto male io la domanda...era molto più semplice la domanda...

R. (ride imbarazzata)

D. Non ti preoccupare! Ho sbagliato io...attività musicale nel senso che potresti dirmi ad esempio: "Per adesso studio e non faccio concerti" oppure: "Suono in orchestra, insegno"...era un pochino quello il senso...

R. Ok! (scoppia a ridere)

D. (ride) Non ti preoccupare, è compito mio essere chiaro!

R. Quindi...adesso come adesso...mmm...studio, faccio anche dei concerti, di musica da camera anche, qualcuno di orchestra, e...e insegno. Quindi un po' di tutto

D. E come descriveresti la carriera che ti aspetti di avere tra qualche anno, quando il percorso di studi, almeno quello ufficiale accademico sarà finito?

R. Diciamo cosa vorrei? Come vorrei che fosse?

D. Sì!

R. Penso che l'ho già detto l'altra volta, mi piacerebbe avere sia la strada da insegnante sia la strada da musicista.

D. Ho capito. E...ti avevo chiesto quali sono i benefici che tu ti aspetti da questa carriera. Voglio dire: vorrei che mi spiegassi cosa c'è che rende questa carriera interessante, che ti fa desiderare questa carriera

R. Alla fine le emozioni che mi fa provare, sì. Perché diciamo, quando suono...quando suono, quando insegno, io mi sento davvero felice. mi sento con energia, sento che il mio tempo ha un senso, no? Quello mi piace.

R. E invece, quali sono le preoccupazioni che tu associ a questo tipo di carriera, se ci sono preoccupazioni...

D. (ride) Sì, certo che ci sono! Alla fine, sono preoccupazioni del...mmm...ci sarà abbastanza lavoro? Se ci sarà un posto fisso, qualcosa che mi dia una stabilità. Questa è soprattutto la preoccupazione. Perché al momento non ho preoccupazioni del tipo: "Mi annoierò dopo un po'?", oppure... "È qualcosa che adesso mi piace, ma magari tra qualche anno non mi piacerà più?". Adesso non ho queste preoccupazioni, ma quell'altra. Anche perché penso adesso sto studiando, ma potrei anche stare lavorando, quindi...

R. Certo. E in qualche modo, l'esperienza che hai fatto con A4A ti ha un po'..influenzato in qualche maniera, riguardo a quello che ti immagini di fare dopo?

R. Penso mi ha aperto un'altra porta, nel senso...mm...mi ha fatto vedere che potrei anche fare qualcosa di questo tipo, che sono pronta per farlo, no?

D. Sì, ottimo. Adesso ci sono un po' di domande che riguardano proprio A4A in generale, e devo chiederti come valuteresti questa esperienza che tu hai fatto in generale...di tutto il seminario, quindi partendo proprio dall'inizio, dal seminario, fino ad ora, insomma

R. Per me è stata bellissima, davvero. Molto molto interessante, e soprattutto non so, molto energetica molto...sì. Non so...Davvero! Ogni sessione...finiva la sessione e io ero, non so, molto carica, molto felice, no?

D. Sì, questa è una cosa interessantissima. Energetica nel senso...ora hai detto energetica e hai detto felice, quindi vorrei capire meglio se sono due cose diverse, quindi che ne so se energia in senso fisico, nell'essere più motivata, però poi parli anche di felicità e quindi non so...se...come dire...se era l'uscire contenta dalla sessione che ti dava questo tipo di energia...mi piacerebbe prenderci un attimo di tempo, so che non è facile [parlare di queste cose], però proviamoci!

R. Allora, diciamo io avevo più energia anche nel senso fisico, provavo più energia alla fine della sessione che quando arrivavo, che magari erano...

D. Le nove di mattina...

R. Le tre?..

D. ..all'una e mezza mi pare...per poi iniziare alle tre..

R. Sì, sì sì! Quindi per me era un orario abbastanza tranquillo, no? Diciamo così presto la mattina e così presto il pomeriggio, per noi spagnoli è un po' l'orario del pranzo, del dopopranzo (scoppia a ridere)...normalmente sono un po' "tranquilla" diciamo. E dopo invece, siccome dovevamo essere lì presenti per lavorare con loro, dopo mi sentivo molto sveglia, molto...non mi sentivo stanca!...e voglio dire felice nel senso...quando vedevo che loro avevano capito qualcosa, che...giocavano, che sorridevano, che si divertivano, non lo so...è come se questo si trasmette e a me arriva tantissimo, no? È quello che mi rende felice. Io se vedo che qualcuno si diverte, anche io mi diverto

D. Sì, è qualcosa di reciproco, in qualche modo. È anche un po' un meccanismo a specchio forse...

R. Sì! Sì, sì. Si crea un'empatia anche

D. È chiaro, grazie, sì. E ora, un pochino l'hai anche accennato ma devo un po' seguire una traccia...secondo te, quali benefici hanno avuto gli anziani da A4A? In che cosa è consistito il benessere, il beneficio che gli abbiamo portato?

R. mmm...Penso innanzitutto il beneficio di sentirsi...di sentirsi importanti, nel senso che gli abbiamo dedicato un tempo, e penso che soltanto questo è già importante per loro, no? Dopo,

sì, potremmo dire che tecnicamente hanno migliorato...hanno migliorato il senso del ritmo, la capacità da rispondere, la velocità...e...ma per me soprattutto, penso che si siano divertiti, [ad] ogni sessione. E ancora di più...no?

D. (non è sicuro di capire) Ancora di più nel senso di sessione dopo sessione?

R. Sì! Penso di sì...non so...il fatto di vederli lì, concentrati, attenti...anche questo si è sviluppato sessione dopo sessione

D. Sì. mi interessa vedere come hai associato il concetto di divertimento, di divertirsi e il concetto di concentrazione. Sembrerebbe quasi che sono due cose opposte, e invece...

R. No, no per me è chiarissimo!

D. Cioè dove ci si concentra, quindi dove si fa attenzione, dove si fa uno sforzo, ci si diverte anche, se capisco bene.

Natasha: Extract from the oral diary (first academic year)

15 April — Casa Serena

1 — Allora, per me la sessione di oggi è stata molto interessante, divertente anche, soprattutto per vedere come è stato questo primo approccio con gli anziani, come...come hanno reagito a tutto quello che gli chiedevamo, e...non so, mi è piaciuto...mmm...provare a coinvolgerli e anche vedere che subito reagivano, e volevano fare delle cose...non so, implicarsi, no? Ed essere dentro nella sessione di quello che facevamo. Quindi mi è sembrata un'esperienza molto bella, di...di vedere le sue reazioni soprattutto, sì sì. E alla fine di farli, di farli essere...non so, stare meglio, anche se forse per...per quell'oretta, no?

2 — Per me i momenti migliori sono stati quelli in cui vedevo un atteggiamento, una risposta positiva dalla loro parte, no? Quando vedevo che...volevano scegliere uno strumento, che volevano partecipare, che cantavano, si presentavano, che...mmm...non so, queste cose...mi ha colpito tanto, ad esempio...un anziano che era praticamente verso un lato...sembrava che stava facendo le sue cose, non so...giocava con qualche carta. E...quando ha preso uno strumento, ha iniziato proprio ad essere più dritto, alzava la testa, ci guardava, seguiva il ritmo così bene. Non so. Quello mi...mi rendeva felice, mi rendeva...non so, mi faceva sentirmi utile in quel momento. [qualche secondo di pausa] Anche quando sorrideva, non so, non soltanto, no? Non so, quando...li vedevi che stavano bene, quello mi fa sentire molto bene anche a me.

3 — mmm...oggi soprattutto quello che mi è piaciuto di più è stato suonare con il mio flauto, suonare per loro. Anche perché è con quello che mi sento...più...confidente, più...che ho più fiducia con me stessa. E...non so, penso che gli sia piaciuto, e...dopo...quello che ho svolto

più volentieri, ma che è stato anche una sfida, è stato coinvolgerli, diciamo...mm...andare e muovermi dove erano loro, non...non rimanere seduta facendo le cose, no. Anzi: andare lì e... provare a parlare con loro, a essere, non so, più vicina...a loro.

4 — Allora, come ho già detto prima, per me la principale sfida di oggi è stata come coinvolgerli, tutti, soprattutto, no? Come...rendere interessante ciò che facevamo, come...farlo attrattivo per loro, no? che avessero voglia di suonare, di...di essere lì, no? E penso che nella maggior parte dei casi siamo riusciti a farlo, e...dall'altro lato...mm...in avanti mi piacerebbe di sentirmi più comoda, con questo atteggiamento, no? Di approccio, di essere vicino a loro, di lavorare, no? Di lavorare con loro. Mi piacerebbe perdere questa paura, questo rispetto alla sua reazione, no? Infatti se noi siamo aperti e...e vogliamo aiutare, vogliamo...mm...non so, dare qualcosa di noi, penso che la sua risposta, nella maggior parte dei casi, sarà molto buona. Infatti oggi abbiamo visto che è stato molto interessante come hanno risposto tutti, come ci ringraziavano alla fine, e...ci dicevano che...si erano divertiti. Non so, queste cose sono piaciute.

5 — Allora...questo, ne abbiamo già parlato dopo la sessione. Soprattutto poterli tenerli, metterli in cerchio, mmm...faciliterebbe un po'...mm...coinvolgerli, poterli coinvolgere tutti. Che siano tutti nella stessa...nella stessa situazione, nello stesso marco, diciamo. Non siano alcuni davanti e altri dietro. Anche per noi sarebbe più facile, così, stargli vicino. E...mmm...dall'altro lato...io personalmente...mi piacerebbe lavorare più dove sono loro. Forse non tutti dobbiamo essere lì, ma che non fosse...mm...qua davanti siamo noi, e di fronte ci sono loro, no? Non so. Essere noi più vicini, poterci muoverci, mmm...essere seduti in modo da poter andare con loro, suonare lì, fare dei gruppi, no? E quello infatti sarebbe più facile se...se nelle prossime sessioni fossero in cerchio, sì.

6 — mmm..prima di iniziare, quando siamo arrivati lì e li ho visti...mi sono resa conto che quello iniziava e dovevamo...gestire la situazione, diciamo, no? Alla fine, il nostro compito oggi non è stato così..mmm...grande, diciamo, anche perché Silvia ha condotto un po' tutta la sessione, quindi quello ci facilita tantissimo molto le cose. E...sentivo un po' il dubbio, diciamo, non dubbio ma...mmm...non so, l'aspettativa di sapere come, come...come sarebbe la sua [loro] reazione, sarebbe stata la sua reazione, e...mmm...sì, forse un po' nervosa, ma...mmm...nervosa nel senso che non...mmm...non ho ancora la sufficiente..fiducia o...abitudine di...poter relazionarmi con loro, no? Di come interagire con loro, quindi è questo che...penso che devo lavorare un poco, ma...mmm..sono sicura che nelle prossime sessioni, anche perché li conosceremo meglio, e non so, ho un interesse abbastanza grande a lavorare su questo punto.

7 — Dopo la sessione, dopo che abbiamo finito, mm...mi sentivo contenta, mi sentivo felice per...tutti quelli che avevano reagito bene. Alla fine mm....abbiamo visto che...il coinvolgimento è stato buono, le sue reazioni anche. Erano tutti più o meno interessati, e ridevano, sorridevano,

e...tutto quello, vederli così, a me, a me rende più felice, più soddisfatta, anche, con il lavoro che si è fatto. Mm... Dopo, l'altro lato, con quelli con cui non abbiamo avuto tantissimo successo, credo che siano stati 2 o 3, no? Ma rimane questo pochino di...mmm...non saprei come dirlo...non tristezza, ma...è alla fine una sfida, no?, a lungo termine di come, come riuscire a coinvolgerli anche loro. So che...in questa età ci sono dei, dei giorni migliori, dei giorni peggiori in cui non puoi fare rispondere la persona come tu vorresti, e infatti quello alla fine si deve anche accettare. Mmm...E forse soltanto...di farli ascoltare musica, o di fargli essere dentro nel gruppo..mm..è già un aiuto.

22 April — Casa Serena

1 — Allora, la sessione di oggi era un po' dall'inizio una sfida perché non c'era Silvia per coordinarci e dirigerci, ma penso che sia andata molto bene anche...mi è piaciuto abbastanza che abbiamo lavorato tra di loro, non eravamo tutto il tempo seduti, invece ci muovevamo di più, parlavamo addirittura con loro e queste cose, no? E penso che si inizi a creare un po' più, non so...siamo più vicini, e questo mi piace. Tra l'altro...per me è un po' difficile come coordinare o cosa fare tra un'attività e l'altra, come potremmo...collegarle, diciamo. Non perché ci sia troppo tempo, ma perché sento che in quei momenti, non so, personalmente io non so cosa fare, non so neanche come si sentono loro, se in quel momento si annoiano o se gli serve per riposarsi un pochino, quindi è quello che mi fa non essere troppo sicura. Ma penso che sia stata interessante la sessione e anche loro ci hanno ringraziato dopo, e comunque è per quello che penso che si divertono, anche se non hanno un atteggiamento così...alcuni diciamo...non hanno un atteggiamento molto estroverso, non so se si dice così, più o meno quello.

2 — Allora, per me oggi i momenti migliori sono stati due. Prima quando abbiamo fatto il... la Promenade, ma loro lo facevano con gli strumenti e noi anche facevamo il ritmo con gli strumenti. Non so se è diventato troppo lungo, ma penso di no. E...mi è piaciuto perché loro ci guardavano e...sembravano contenti di poter seguire questo ritmo per riuscire a farlo. E dopo mi è piaciuto tantissimo il momento finale in cui Lisa e io abbiamo suonato Rossini, Il barbiere di Siviglia, e...loro hanno mosso questi fazzoletti, e non so: mi è sembrato molto molto bello questa situazione, mi è sembrata molto carina e anche loro penso...era qualcosa di diverso, semplice, ma...anche...non so, qualcosa che potevano fare tutti, no? Anche conoscevano la musica, non so, mi è piaciuto questo.

3 — Per me suonare per loro, con il flauto, è sempre un piacere, perché mi sento bene, sento che posso fargli anche bene, fare qualcosa che li faccia stare bene, quindi le volte che ho suonato, ho suonato molto molto volentieri. Dall'altro lato, anche tutti i momenti in cui potevo aiutarli

in qualche modo, diciamo, quando abbiamo dato gli strumenti, quando dovevano soltanto metterli sul pavimento ad esempio, dovevamo aiutarli...queste cose. Anche chiedere a qualcuno: "Questo strumento è troppo pesante per lei?", non so, sentire che posso avere un diciamo...un atteggiamento più vicino, una relazione più vicina diciamo.

4 — *Come ho detto nel primo audio penso, la prima sfida era che non c'era Silvia, ma alla fine penso che non è stata...è stata una sfida all'inizio ma per niente è stato un problema e sono contenta di questo. E...tra l'altro, come ho detto prima, questi momenti tra un'attività e l'altra, almeno oggi sentivo che non sapevo esattamente come erano per loro, se erano troppo lunghi, se stava bene così, e quindi non so, mi è venuto il dubbio. E...ma soprattutto quello, oggi mi sentivo più comoda nella relazione con loro, e quindi diciamo la sfida...della settimana scorsa, questa settimana non c'era.*

5 — *...allora in questa sessione non so, eravamo più vicini a loro perché loro erano più o meno in cerchio, c'erano 4 o 5 che erano in una seconda fila diciamo, e questo sì...disturbava un pochino, mi piacerebbe avere tutti in un solo cerchio, ma ne abbiamo parlato anche di questo. Dall'altro lato, non so, qualche volta ho la sensazione che l'attività dovrebbe essere più lenta, o svolta più lentamente, perché così loro abbiano il tempo di agire, di capire di cosa stiamo parlando...queste cose, no? Ma altre volte, si qualche altra volta ho la sensazione al contrario, che non sappiamo, che non so se è troppo lento o se magari stiamo ripetendo troppe volte lo stesso esercizio, ad esempio. Alla fine è un po' difficile capire, sono cose che forse si devono...ti devi accorgere in quel momento che accade e agire subito, per provare a sistemarlo, no?*

6 — *Allora, prima di iniziare mi sentivo meglio della settimana scorsa, nel senso che avevo più fiducia in me stessa, nella relazione che potrei avere con loro, infatti dopo, quando siamo entrati...abbiamo salutato, non so, abbiamo potuto anche parlare, scambiare qualche parola...anche dopo, quando...prima di andare via, e quello mi è piaciuto.*

7 — *Allora...prima, nella domanda...scorsa ho dimenticato di dire che ero abbastanza addormentata prima di iniziare, e durante tutta la sessione mi sono sentita molto bene e molto sveglia, anche dopo. Ero molto sveglia, infatti ho potuto studiare, ho studiato bene, e non pensavo di riuscire a farlo perché tutta la mattina non mi sono sentita così bene, diciamo fisicamente, e pensavo che forse sarei dovuta andare a casa e riposarmi. E invece no, dopo...dopo diciamo la sessione mi sentivo con tanta energia, mi sentivo fisicamente molto meglio e anche mentalmente molto attiva e contenta, di vedere le loro reazioni...sì, infatti penso che queste attività non migliorano soltanto il loro benessere ma anche il nostro. Anche le attività con i bambini...sono...dei tipi di relazione che si produce uno scambio tra una parte e l'altra, no? Perché noi, è vero che dobbiamo dargli tantissima energia, ma il risultato, quando loro hanno un atteggiamento, una risposta positiva, qualcosa che noi vediamo che stanno meglio, che hanno*

migliorato qualcosa, a me personalmente fa sentire molto molto bene. Penso che è quello che... ieri, almeno, ha aiutato anche me.

APPENDIX 4

DESCRIPTION OF THE SEMINAR RELATED TO ART FOR AGES AND OF THE MUSICAL SESSIONS

INTRODUCTION

The research programme *Art for Ages* included a newly developed seminar offered by the Conservatory of Southern Switzerland (Lugano, Switzerland) in 2015-16 and in 2016-17. This appendix describes the structure and the contents of this seminar.

Section A4.1 offers information about the activities planned for the seminar, while section A4.2 describes the format of each session carried out in the nursing homes. Section A4.3 focuses on the equipment used in the drumming activities. Section A4.4 describes the tasks involving the students during each session. Finally, section A4.5 discusses the criteria used to define the repertoire performed in each nursing home.

A4.1 STRUCTURE AND FORMAT OF THE SEMINAR

The seminar was divided into two stages, as reported in Table 8.

Preliminary training	<p>First part (2 hours): understanding the ageing processes from sociological and medical points of view</p> <p>Second part (4 hours): introduction to repertoires and instruments for group music making in nursing homes</p>
Interventions in nursing homes	<p>10 weekly group music making sessions, with each session structured as follows:</p> <ul style="list-style-type: none"> — Rehearsal (60') — Session (45') — Debriefing (30'-60')

The preliminary training was divided into two parts. The first was led by two lecturers from the Department of Business Economics, Health and Social Care, University of Applied Sciences and Arts of Southern Switzerland (Manno, Switzerland). They have

expertise in sociology (Stefano Cavalli) and nursing sciences (Carla Pedrazzani). In a 2-hour lecture they conveyed information on ageing processes from medical and sociological perspectives. The second part involved the workshop leader (Silvia Klemm), who is a Conservatorio della Svizzera italiana teacher with extensive experience in pedagogy and musical ensembles. In four hours, she introduced students to the percussion instruments to be played with the residents, as well as several works and exercises to be played or sung.

Once the interventions in each nursing home began, the workshop leader provided students (via a weekly email) with a sheet outlining the schedule of the next session and the scores and further material such as lyrics, YouTube links or mp3 files related to the works to be performed. Before each session, a meeting lasting one hour was scheduled to listen again to the repertoire and to define the roles within the music team (see section A4.4). In academic year 2016-2017 a debriefing lasting 30 to 60 minutes at the end of each musical session was introduced, aimed at discussing the work just done and the contents of the next session. Throughout the programme carried out in each nursing home, the workshop leader negotiated the repertoire with the residents, making the objectives of each activity clear to them and offering constructive feedback in an appropriate manner. She discussed the importance of these aspects with the students in the preparation and debriefing stages of each session, to make the students aware of her techniques and enable them to interact effectively with the residents.

To make students aware of the flexibility and adaptability required in such a complex environment, she highlighted throughout the programme the importance of planning activities in advance while being prepared for possible changes of schedule due to unforeseen reactions from the residents.

A4.2 FORMAT OF EACH GROUP MUSIC MAKING SESSION

Throughout the programme in each nursing home, the sessions were divided into four stages:

- 1 — *Welcoming performance. In this stage, students were involved in short live performances before the start of the group music making activities.*
 - 2 — *Opening ritual song. Each week, the same song was sung in this stage. The lyrics included*
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pairs of verses featuring the name of each participant and a rhyme with it. In this way, each resident and student was greeted and welcomed by the whole group.

3 — The group music making session, which combined singing and drumming. The songs and the vocal works were arranged in a canon, unison or simple harmonisations, depending on the genre and the desires of the residents. Residents were provided with the instruments described in section A4.3.

4 — Closing ritual song. The same song was sung each week. In the institutions where the residents clearly showed a strong preference for a specific song throughout the programme, the favourite song was performed as a final activity before this ritual song.

In the second academic year a new element was introduced into A4A. In order to entertain the residents who were the first to reach the room, each student took a seat next to two of them and had a brief conversation while waiting for the others to arrive and take their places in the room.

The overriding goal was to make the participants' experiences as enjoyable and engaging as possible. For this reason, the following points were considered carefully when preparing each session:

- Optimal balance between novelty and routine/confirmatory elements. To achieve this, each session included at least one new piece or arrangement as well as slots to consolidate previous songs or re-play songs on request.
- Alternation between physically or cognitively demanding tasks and active rest or easy tasks. Each session included slots where students performed the next pieces to be played together, where the whole group performed simple exercises or where anecdotes about music were told by the workshop leader.
- Development of a repertoire balancing familiar and unfamiliar pieces. Particular care was taken to identify and adapt extremely well-known songs, or some requested by the participants. At the same time, the programme offered residents the opportunity to approach unfamiliar genres and composers.

To clarify the content of the programme and arouse the interest of the residents, a short event was organised in each nursing home before the start of the programme. At this event, which also involved members of staff known by the residents, the students performed pieces from the singing or drumming repertoire along with the workshop

leader. Residents were encouraged to join the group by singing or by testing the percussion instruments.

A4.3 THE PERCUSSION INSTRUMENTS USED DURING THE SESSIONS

With regard to the percussion instruments used, the choice took into account the possible motor difficulties of the participants and the need to avoid disturbing other residents in the nursing home facilities. It was therefore necessary to include only instruments that were handy, easy to use, and of limited loudness. Drumsticks were used extensively, because they have a considerable potential in musical and motor terms even when used alone or on surfaces such as chairs or plastic baskets. To engage residents with severe motor impairments, one-handed instruments were included. The set of instruments used in the sessions also included everyday objects. In this way, residents were offered the opportunity to play “actual” instruments; at the same time, the availability of familiar objects of very modest value helped to create a relaxed, familiar and fun atmosphere, encouraging even the shiest people to take part in the music making. Table 9 reports the whole set of percussion instruments included in A4A.

PROPER INSTRUMENTS	COMMON OBJECTS
<p>Usable with one or two hands</p> <p>Bells Boomwackers Cymbals Drumsticks Egg shakers Maracas Rattles Small drums Tambourines</p>	<p>Usable with one or two hands</p> <p>Baskets Chairs</p>
<p>Usable only with two hands</p> <p>Guiros Triangles</p>	<p>Usable only with two hands</p> <p>Graters Spoons</p>

A4.4 TASKS CARRIED OUT BY STUDENTS DURING THE SESSIONS

During the sessions, each student was involved in several ways, playing his or her own instruments, singing, drumming or conducting small groups of residents.

Depending on the pieces and the musical activities planned by the workshop leader, each student was expected:

- to play his or her own instruments
- making music for residents. This happened in the “welcoming performance” or to introduce new songs to be played or sung by the whole group. In the first case, students selected and arranged pieces along with the workshop leader. Occasionally, students performed solo, duo or trio pieces they were preparing for specific exams or recitals
- making music with residents. To do that, they were trained to interact musically with the workshop leader and to adapt tempi and phrasing to the playing of the ensemble of residents
- to sing or drum along with residents. To do this, they were expected to know the form and arrangement of each work included in the repertoire and to interact verbally and non-verbally with residents in appropriate ways. In cases where iconic symphonic pieces were performed, students and residents did their group music making playing along with pre-recorded backing tracks
- to conduct small groups of residents. The workshop leader provided instructions to conduct a section of the whole ensemble as well as to communicate with residents in appropriate ways

Along with these tasks, students were expected to distribute the percussion instruments according to the required arrangement. Finally, students were supported by the teaching team and the carers in dealing with logistical and relational aspects that could affect the musical activities. Examples of this are collaborating to facilitate the displacement of mobility-impaired residents before and after sessions and preparing the room efficiently and without interfering with other activities and people in the building.

A4.5 REPERTOIRE PERFORMED IN THE PROGRAMME

The repertoire included a wide range of genres, including folk songs, classical music, Italian songs, jazz tunes and Latin American music. The choice of songs included texts in different languages (Italian, German, Spanish and local dialect), considering the different areas of origin of the participants. Local songs requested by residents were also included. In these cases, they were expressly invited to act as “teachers”, instructing the music teams in the pronunciation of the Ticino dialect or defining the structure and

arrangement of these songs. Occasionally, a rhythmic or melodic pattern suggested by a participant was accepted by the group and elaborated on collectively. Throughout each session, the workshop leader paid particular attention to making the musical objectives of the proposed activities clear to the participants. In most cases, she proposed several arrangements and variations for each song.

The choice of repertoire proposed to each nursing home therefore required flexibility throughout the programme. The contents were negotiated with the residents to a significant extent, and, in general, three criteria were considered:

1. To include famous songs likely to be known by all residents. This criterion was applied to many different genres and eras. Some examples of pieces chosen were:
 - a. Classical music and opera:
 - i. Ravel: Bolero
 - ii. Tchaikovsky: Dance of the Sugar Plum Fairy
 - iii. Verdi: Libiamo ne' lieti calici (from "Traviata")
 - b. Pop songs in different languages, published when the residents were aged approximately between 20 and 40:
 - i. Paolo Conte: Azzurro
 - ii. Parra: Gracias a la vida
 - c. Famous soundtracks and songs for special recurrences
 - i. Mancini: Breakfast at Tiffany's
 - ii. Pierpont: Jingle bells
 2. Songs that were probably being discovered by residents for the first time. Again, the choice ranged across very different genres, for example:
 - a. Classical music:
 - i. Cornish: "Ah Robin"
 - ii. Mussorgsky-Ravel: The great gate of Kiev (from "Pictures at an Exhibition")
 - iii. Saint-Saens: Tortues (from "The Carnival of the Animals")
 - b. World music
 - i. Traditional Spanish song: Las mananitas
 - ii. Traditional Iranian song: Tzadik Katamar
 3. Songs requested by residents
 - a. Traditional Italian song: Aveva gli occhi neri
 - b. Calibi-Domida: Vecchio scarpone
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