



Recorded music in the mental health waiting room: A music medicine investigation



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ABSTRACT

The impact of music on ameliorating anxiety, improving mood, and enhancing patient satisfaction has been previously established. Given the heightened importance of mental health services in recent years and the perceived stigma associated with seeking psychiatric treatment, music may play an important role in mitigating negative affective states that would otherwise prevent patients from accessing care. The purpose of the current investigation was to examine the effects of recorded music on patient satisfaction and anxiety among adult consumers awaiting a mental health evaluation. This study employed a two-group, cluster-randomized design to investigate the effects of recorded music on adults in an outpatient mental health clinic. Participants in the experimental condition were exposed to a recorded music program for up to 30 min while completing clinical background paperwork. Those in the control condition completed their paperwork without the recorded music program. Two instruments, a researcher-designed Satisfaction Questionnaire and the Generalized Anxiety Disorder 7-Item Scale, served as the dependent measures. There was a significant effect suggesting that participants in the music group were more satisfied than those in the control condition. There was no such finding for anxiety. This study may provide some empirical support for, and encourage wider spread adoption of, the cost efficient use of music in mental health settings.

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Systematic and scientific approaches have been applied to the study of music on physical and emotional health. For example, the application of music to address anxiety and distress is well-documented in both the music therapy and music medicine literature (Standley, 2000). In studies using experimentally-induced anxiety and stress, Fukui and Yamashita (2003), Jurcãu and Jurcãu, 2013, and Khalfa, Bella, Roy, Peretz, and Lupien (2003) found that salivary cortisol (a stress-related hormone) levels were reduced among those listening to recorded music compared to those in silent control conditions. Among a sample of college students, Linnemann, Ditzen, Strahler, Doerr, and Nater (2015) found a relationship between listening to relaxing music and reduced concentration of salivary cortisol. In the clinical setting, Miluk-Kolasa, Obminski, Stupnicki, and Golec (1994) found that among patients awaiting surgical procedures, music listening was associated with

gradual decreases in salivary cortisol compared to matched controls.

With regard to other physiological measures, Chen, Wang, Shih, and Wu (2013) studied the anxiety-reducing effects of a 15-min music listening intervention among adult oncology patients awaiting radiation treatment. Compared to those in a no-music control condition, patients receiving the listening program evidenced significantly decreased systolic blood pressure, respiration rate, and heart rate which coincided with self-reported reductions in anxiety. In the surgical arena, Miluk-Kolasa, Matejek, and Stupnicki (1996) reported significant changes in blood pressure, heart rate, peripheral finger temperature, and blood glucose suggesting that recorded music listening had an anxiolytic effect. In a more recent study, Vaajoki, Kankkunen, Pietilä, and Vehviläinen-Julkunen (2011) found that systolic blood pressure and respiratory rate were significantly reduced post-operatively for patients allowed to select their own music for listening.

Effects of recorded music listening on mood

Others have examined the impact of music on mood. Using a randomized control trial, Boothby and Robbins (2011) compared the

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effects of group music listening combined with and without visual arts activities on mood states among a group of healthy community participants. Results from the Profile of Mood States indicated that those participating in one of the music conditions reported significantly improved mood compared to those in the no music (visual arts only) conditions. [Castillo-Pérez, Gómez-Pérez, Calvillo Velasco, Pérez-Campos, and Mayoral \(2010\)](#) examined the effects of music listening (individual and group) on depressive symptomatology among a convenience sample of 79 medical patients aged 26 to 70 years. Scores from the Zung Depression Scale suggested that those randomly assigned to the music listening condition evidenced less depression compared to those in a cognitive behavior therapy condition.

Effect of music listening in waiting rooms

With regard to waiting rooms, music has been investigated as a way of improving subjective ratings of anxiety, patient satisfaction, and service quality. [Routhieaux and Tansik \(1997\)](#) studied the impact of recorded music on those awaiting a loved-one's surgical procedure. They found that using music was related to improved relaxation and decreased stress compared to those occasions during which no music was played. In another study, [Tansik and Routhieaux \(1999\)](#) found similar positive effects for mood and relaxation, but no effect on customer satisfaction for hospital services. Studying the effects of live music in a university health clinic, [Silverman, Christenson, Golden, and Chaput-McGovern \(2012\)](#) found that participants in the music condition reported more satisfaction with registration and were more likely to refer others to the clinic. Additionally, Silverman and colleagues found that clinic staff reported positive perceptions of the live music and that the music did not interfere with job responsibilities, a finding supported elsewhere in an urban medical setting ([Silverman & Hallberg, 2014](#)).

In one of the few articles in the mental health literature, [Miller and Spence \(2013\)](#) compared "stress level" changes following breathing and music listening interventions among those awaiting evaluation in a psychiatric diagnostic center. The breathing intervention involved a deep breathing exercise led by a yoga instructor while the music listening intervention consisted of a program of eight, researcher-selected music tracks played free-field on a CD player. Using a cluster-randomized method, participants (patients and visitors) completed a researcher-designed survey assessing pre- and post-intervention stress and whether they would use the technique (either breathing or music) in the future to assist with relaxation. Both interventions were related to significant, self-reported decreases in stress and neither intervention was superior to the other. However, 61% of those surveyed indicated that they would use breathing in the future to relax compared to only 48% of those in the music condition.

Rationale for the current study

Given the existing body of literature, it would seem advantageous for healthcare organizations to incorporate a carefully-prescribed program of music (either through a music therapy or music medicine program) to bring about desired changes in anxiety, mood, and patient satisfaction. Further, the use of music to increase sense of well-being and decrease stress among consumers waiting to engage in psychiatric treatment would appear to be a particularly helpful application. Few studies to date, however, have focused on using research-based music programming in an outpatient psychiatry clinic and most trials involving music made no attempt to blind participants to the experimental condition. In response, the present study sought to: (a) examine the effects of a research-supported program of recorded music on anxiety and

Table 1
Participant characteristics.

	Mo music condition (n = 82)	Music condition (n = 81)
Gender		
Male	31	28
Female	51	53
Previous MH history		
Yes	38	39
No	44	42
Mean Age (in years)	41.5	42.6

Note: No significant between group (condition) differences, $p > .05$.

satisfaction among adult consumers awaiting an initial mental health evaluation; and (b) study the effects of a recorded music program on participants who were blinded to the presence of the experimental variable (i.e., the music).

Research purposes

The specific research questions were as follows:

- (1) Compared to a no music condition, to what extent does free-field recorded music listening impact satisfaction among adults awaiting an evaluation in an outpatient mental health clinic?
- (2) When compared to a no music condition, does recorded music listening have an effect on self-reported anxiety among adults awaiting a mental health evaluation in an outpatient clinic?

Method

Participants

The investigators drew the sample from an available population of patients who were members of a large, comprehensive medical group in Northern California. Specifically, the investigators recruited participants from adult patients scheduled to attend a new patient orientation session prior to an initial evaluation at a mental health clinic. The purpose of the orientation was to familiarize new patients with procedures and available services in the clinic. Per clinic routine, new patients were scheduled for the orientation session and evaluation following a referral from an attending physician or after a telephone screening by a mental health professional. Typical reasons for referral included: adjustment problems, anxiety, depressed mood, life stress, and relationship problems. In most cases, those with more serious mental health concerns (e.g., psychotic disorders or neurocognitive disorders) were scheduled with a psychiatrist and bypassed the orientation; thus, members with these disorders were systematically excluded from this study.

A total of 164 participants were recruited for the study with an age range of 18 to 81 years ($M = 42.05$, $SD = 15.21$). One participant was excluded from the analysis because of a subsequent diagnosis of a neurocognitive disorder. Of the 59 male and 104 female participants, 77 (47% of the sample) had reportedly received some form of mental health treatment in another clinic (e.g., individual counseling, group therapy, psychiatric medication) prior to attending the adult orientation. [Table 1](#) displays a summary of participant characteristics.

Research design and randomization procedure

This study employed a two-group, posttest-only, parallel cluster-randomized clinical trial to investigate the effects of recorded music listening on satisfaction and anxiety among new patients attending an outpatient mental health clinic. As all participants were from the same clinic, the unit of randomization was the clinic day: On music condition days all participants received the

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