

Article: Karaoke Therapy in the Rehabilitation of Mental Patients

(SMJ Vol 43 Issue 12 December 2002)

Dear Sir,

I found the article "Karaoke Therapy in the Rehabilitation of Mental Patients" extremely interesting in its very Freudian perspective.

Karaoke may be beneficial to the patients as described by having positive effects on self-esteem, social skills training and social phobias. However, it seemed surprising that music therapy was not mentioned as a treatment option in the rehabilitation of mental patients. Music therapy is a fast growing field in the health services sector in the States as well as in many other countries such as Korea, Cuba and Taiwan.

Your sincerely,

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Reply From Author

Dear Editor,

Music therapy has been recognised as a powerful and important therapeutic modality in the treatment and rehabilitation of a broad variety of mental patients, an experience that has been replicated and reported in many countries in Europe and the States. In this brief reply I aim to capitulate on a few important aspects of the application of music therapy in mental patients, before reiteration some important points in our previous study on "Karaoke in Rehabilitation of Mental Patients."

The range of music therapeutic techniques used in mental disorders runs the gamut of:

1) Music performance, which may be process- or product- oriented, and involves performance of either finished pieces of music or music improvisation. Process-oriented performance enables observation and promotion of social interaction, while product-oriented performance promotes self-esteem and sense of accomplishment through presenting finished musical products.

2) Music psychotherapy, in which, through active music-making or listening, clients are helped to promote re-educative, insight-oriented activities or listening, clients are helped to promote re-educative, insight-oriented activities or reconstructive work, in addition to promoting social participation.

3) Music and movement are combined to promote physical exercise where music acts as a stimulus to movement as an insight-oriented activity.

4) Music as recreation, which serves to encourage group interaction when presented in the form of games, and provide enjoyment and occupation for low-functioning psychotic individuals as well as chemically-dependent clients after detoxification.

5) Music may help relaxation as an integral part of relaxation training.

6) Through guided imagery, subjects can be helped to reduce tension and focus on positive thoughts and feelings.

Music therapy has been applied to a wide range of psychiatric conditions, including learning disabilities, schizophrenia, eating disorders, neurosis, chemical dependence, dementia and in forensic settings. A review of the literature showed a paucity of controlled trials on the clinical efficacy of music therapy.

More prominently existing in the literature of studies on clinical experience and outcome of music therapy are, apart from numerous discourses, case reports and cohort studies. Music has been shown to reduce agitated behaviour in demented elderly. Two reports in the Cochrane database are related to the use of music in therapy of patients with dementia, namely Reminiscence Therapy and Snoezelen. Systematic research is called for in the reports for valid extrapolation of results in these areas.

Encouraging it may seem from the accumulation of clinical experience world-wide, development of broad-ranged and well-organised music therapy has been met with great difficulty due to the extremely limited availability of trained music therapists and a variety of administrative reasons. On the other hand, music, but for the very few enthusiasts, exists in the experience of Hong Kong people as a concurrent entity of other more preferred loci of attention, such as movies, idols, fashion, and shopping malls, and its intrinsic content is less commonly is brought to the focus of attention of the local audience.

The use of Karaoke as a form of music therapy appealed to us, thus, in a number of ways. In a practical sense, conducting proper Karaoke sessions as it is commonly experienced requires less on training on the part of the therapist, such that it can be administrated by any medical or paramedical staff. At the same time, being fashionable, Karaoke is a welcomed activity amongst most local mental patients. It is thought that Karaoke, under social circumstances of friendly gatherings, places the participant in a uniquely active role in music perception and performance. In contrast to other common local listening activities where music is more cast in the background than the forefront, I argue that Karaoke provides a unique opportunity where the common local citizen is placed in the closest and most autonomous relationship to music as it is performed. It is also observed that participants of Karaoke are less likely to be affected by social anxiety compared to other forms of music performance, and usually expresses their feelings more easily.

From a theoretical standpoint, the experience of Karaoke echoes psychodynamic processes that have been observed in music therapy sessions, in that the participants identify themselves variously with characters and moods pictured and described in the songs they perform, and conversely may project their own feelings to songs they perform, thus expressing their feelings in their performance.

It is hoped that via further studies with detailed ethnography, more systematic planning and organisation of performed materials, use of larger patient groups and different types of instruments of measurement, more can be learnt about the application of Karaoke therapy, and hopefully, music therapy in psychiatric patients in Hong Kong.

Yours sincerely,

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