

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.



### Availability and Deposit of Thesis Form

Author's Name	RUTH ELIZABETH ARMSTRONG
Thesis Title	THE EFFECT OF MUSIC THERAPY ON SELF-REPORTED AFFECT IN HOSPITALISED PAEDIATRIC PATIENTS
Degree Name	MASTER OF MUSIC THERAPY
Discipline	MUSIC THERAPY
School	DEPARTMENT OF MUSIC THERAPY
Supervisor(s)	DAPHNE RICKSON
Year	2009
Keywords (3)	
Research Code	
Availability Statement	I hereby consent to the above thesis being consulted, borrowed, copied or reproduced in accordance with the provisions of the Library Regulations from time to time made by the Academic Board.
Signature	<i>Ruth Armstrong</i>
Date	30 <sup>th</sup> September 2009
Deposit Statements	<p>I agree to Victoria University of Wellington and Massey University having the non-exclusive right to archive digitally and make publicly accessible this thesis.</p> <p>Creator/Contributor(s)</p> <p>I am the sole creator of this work as a whole and can archive digitally and make accessible the work. I own the intellectual property rights inherent in the work as a whole. I have explicitly acknowledged in the work any significant contribution made to the work by others and the sources that I have used.</p> <p>Third Party Content</p> <p>I declare that if this work is archived digitally and made accessible, it will not be in breach of any agreement with a third party that has or is entitled to publish this work.</p> <p>Verification</p> <p>I am supplying the digital file that is a direct equivalent of the work which is described and referred to in this declaration.</p> <p>Preservation and Distribution</p> <p>I agree to Victoria University of Wellington and Massey University having the right to keep this work in any file format and copy the thesis and transfer it to any file format for the purposes of preservation and distribution.</p>
Signature	<i>Ruth Armstrong</i>
Date	30 <sup>th</sup> September 2009

The Effect of Music Therapy on Self-Reported Affect in Hospitalised  
Paediatric Patients

By

Ruth Elizabeth Armstrong

A Thesis

Submitted to the New Zealand School of Music  
in Partial Fulfilment of the Requirements for the Degree of  
Master of Music Therapy

New Zealand School of Music

2009

**Abstract**

The present research examines the effect of music therapy on the affect of hospitalised children. It took place on a paediatric ward of a New Zealand public hospital. This study aimed to investigate the role of music therapy in addressing patients' psychosocial needs. Literature on the impact of hospitalisation, and on the use of music therapy in hospitals and paediatrics was reviewed. The research involved an audit of the therapist's clinical notes from music therapy sessions over the course of seven months. The clinical notes included measurements of children's mood from the beginning and end of sessions, using McGrath's (1990) Affective Facial Scale. It was hypothesised that mood measures following music therapy would be higher than pre-music therapy scores. Statistical analysis of the facial scale data did not show a significant difference between 'before' and 'after' measures. These results were discussed with regard to a ceiling effect (this is, the measurements indicated patients were at the happy end of the scale before the music therapy session, so there was little room on the scale for mood to improve following music therapy). The measurement of emotion did not prove to be straightforward. The hospital environment may have influenced the patients' responses in a number of ways. These environmental influences are discussed with reference to examples from the clinical notes. The usefulness of facial scales in this context is discussed, as well as other limitations of the research. Suggestions for future research include the use of other mood measures, and the inclusion of measurements of parental mood and how this affects the child.

## **Acknowledgements**

I would like to sincerely thank the following people for their support, guidance and encouragement during the course of my research and throughout my Masters study:

- **My family** – for the multitude of things you have done to enable me to make it through this degree
- **Daphne Rickson**, my research supervisor – for your guidance, experience, wisdom, support and faith in me, and for organising my clinical placement where the research was conducted
- **Sarah Hoskyns**, Director of the Music Therapy Programme – for encouraging me to apply for the Masters course, for your knowledge imparted in lectures, and for your tireless advocacy for your students
- **Carolyn Ayson** – for your huge amount of support and encouragement, and for all the clinical advice and feedback
- **The children's ward staff**, in particular Maria Eneliko, Tania Pitama, Valerie Fitzgerald and Sue Rowell – for their support and oversight of my clinical work at the hospital
- **My fellow classmates** – for your friendship and for sharing the journey with me over the past few years
- **My second 'family', Ian, Sally and Sarah Hughes** – for welcoming me wholeheartedly into your lives while I completed the clinical work for this research, and for your emotional support throughout the year

This research received ethical approval from the Health and Disability Central Regional Ethics Committee (Ref No: CEN/08/21/EXP).

**Table of Contents**

**Abstract.....i**

**Acknowledgements.....ii**

**List of Tables and Figures.....vi**

**Introduction.....1**

    Personal Stance of the Researcher.....2

**Literature Review.....4**

    The Impact of Hospitalisation: Coping with Stress, Anxiety and Pain..4

        The Stress of Hospitalisation.....4

        Physiological and Behavioural Effects of Stress and Anxiety...6

        Coping with Stress.....7

        Child Development and Coping.....9

        The Parents’ Role in Child Coping.....9

        Facilitating Coping.....11

    Music Therapy in Hospitals..... 12

        History of Music in Hospital Settings.....12

        Research on the Use of Music Therapy in Hospitals.....13

    Music Therapy in Paediatric Care.....13

        Music Therapy as a Brief Intervention.....13

        Models of Paediatric Music Therapy.....14

        Supporting Development.....16

        Providing Opportunities for Choice and Control.....17

        Distraction.....18

        Other Forms of Pain Management.....20

        Facilitating Emotional Expression.....24

Addressing Anxiety and Fear.....	29
Facial Scales.....	35
The Present Research.....	39
Hypothesis.....	40
<b>Method.....</b>	<b>41</b>
Design.....	41
Sample.....	42
Participants.....	42
Ethical Considerations.....	43
Apparatus and Materials.....	43
Music Therapy Sessions.....	43
Affective Facial Scale.....	45
Clinical Notes.....	46
Procedure and Data Collection.....	46
Affective Facial Scale.....	47
Clinical Notes.....	48
<b>Results.....</b>	<b>49</b>
Statistical Tests.....	49
Presentation of Results.....	50
<b>Discussion.....</b>	<b>56</b>
Affective Facial Scale Data Interpretation.....	56
Complexities of Measuring Emotion.....	57
Environmental Influences on Children’s Facial Scale Ratings.....	59
The Impact of Hospitalisation.....	69
Music Therapy in Paediatric Care.....	71

Facial Scales.....	72
Limitations of the Present Research.....	75
Personal Researcher Learning.....	77
Suggestions for Future Research.....	78
<b>Conclusion.....</b>	<b>81</b>
<b>References.....</b>	<b>83</b>
<b>Appendix A: McGrath's (1990) Affective Facial Scale.....</b>	<b>93</b>
<b>Appendix B: Example of Music Therapy Clinical Notes.....</b>	<b>94</b>

### List of Tables and Figures

Table 1: Mean, standard deviation, median and mode responses on McGrath's (1990) Affective Facial Scale before and after the music therapy session.....	51
Table 2: Frequency of responses for each face on McGrath's (1990) Affective Facial Scale before music therapy.....	52
Table 3: Frequency of responses for each face on McGrath's (1990) Affective Facial Scale after music therapy.....	52
Table 4: Direction of change in responses on McGrath's (1990) Affective Facial Scale before and after music therapy.....	54
Figure 1: Bar graph depicting frequency of response for each face on McGrath's (1990) Affective Facial Scale before the music therapy session where 1 = saddest face, 6 = happiest face.....	53
Figure 2: Bar graph depicting frequency of response for each face on McGrath's (1990) Affective Facial Scale after the music therapy session where 1 = saddest face, 6 = happiest face.....	53