

Could Religious Hymns be the “New Medication” for Dementia? Procedural and Emotional Religious Activity Therapy (PERAT) Affirms This.

Dementia-friendly church services and Hymn Sings

Memory Lane Home Living Inc. recently collaborated with a nearby church in Richmond Hill to set up weekly dementia-friendly church services (see Events on our website’s main menu bar) that encourage caregivers and their loved ones to: meet in community, connect with others, as well as connect with their own spirituality. We launched this initiative because we believe that, based on studies that are subsequently cited in this post, spirituality—and notably *spiritual music*, in this case old, Christian hymns—on the dementia journey helps all those whose lives are touched by dementia cope with losses they experience and reduces problematic behavior. Furthermore, healthy spirituality is part of a balanced human being.

It has been interesting to hear the varied response to our services. Most government organizations refuse to advertise dementia-friendly church services because they categorize such activities as “religious.” This is quite unfortunate because, according to statistics from the regional Alzheimer’s Society, **15,000 individuals in York Region have a dementia diagnosis; 70% are cared for in their homes and/or by family; and 55% of York Region’s population affiliates with Christianity.** The latter figure is certainly higher in older populations.

Spirituality is an integral dimension of being human; focusing on the meaning of life; fostering hope and purpose, in ‘covenant community’ *with others*; and connecting with the *Transcendent*. According to the American philosopher, Joseph Campbell, the word *religion* comes from the Latin *re-ligio*, which means re-connecting—with oneself and divinity. A spiritually reconnected society is a healthier society.

My experience with music and dementia is “textbook” for the most part. Music for many with dementia touches their emotional being particularly in early to mid-stage dementia. I have witnessed this on many occasions. However, I was astounded by what Hymn Sings elicit for individuals at all levels of dementia. To see individuals who are predominantly non-verbal start to sing and talk is simply amazing! Please watch Gladys Wilson and Naomi Feil on YouTube (<https://youtu.be/CCRDzRd8kgQ>) and the TedX presentation, *Validation, communication through empathy* featuring Naomi Feil (https://youtu.be/ESqfW_kyZq8).

Procedural and Emotional Religious Activity Therapy (PERAT)

We now have a scientific name and study for this miraculous engagement in Hymn Sing music. We call it Procedural and Emotional Religious Activity Therapy (PERAT). It is a new approach which engages adults with Alzheimer’s disease—and related dementias—in spiritually-rich activities. This therapy incorporates religious activities that are both *emotionally* significant as well as having a *procedural* memory component. What I find amazing is that the “procedural memory component” is **resilient** to neurological damage caused by Alzheimer’s disease, even in late stages.

Procedural memory refers to long-term memory that is subconscious such as riding a bike and walking. Well-rehearsed spiritual and religious activities that are practiced during one's lifetime are stored as procedural memory. **PERAT** therapy seeks to find meaningful or spiritual activities that have low cognitive demand and high **emotional** content. Emotional processing and attachments, as in early childhood, are the last components to "vacate or leave" those with Alzheimer's disease. (Yet sadly, I experience caregivers who erroneously think that just because their loved one with dementia does not remember, they don't feel and therefore don't need relationships.) People with dementia are emotional beings who need fulfillment—*not* neglect—otherwise behavioral problems will arise.

Religious activities such as a Hymn Sing and simple recitation of prayers have been observed to reduce behavioral problems and increase participation levels in adults with Alzheimer's disease. (Khouzam, Smith and Bissett, 1994.) Another study found that an environment that stimulated all of the senses through *spiritual music* successfully decreased wandering in adults with Alzheimer's disease in a nursing home (Cohen-Mansfield and Werner, 1998).

It is only recently that behavioral and cognitive therapists have offered a perspective on this subject. These therapists agree that negative behavior in dementia can result from *frustration* on the part of those with dementia to not being able to match their ability level with an activity level. 'Bad' behavior may be a reason, to list one example, that caregivers stop taking their loved ones to church. Their dementia loved ones may no longer have the executive functions they once had to find and read Bible passages or sit through an entire sermon. A repertoire of well rehearsed *spiritual hymns*—emotionally and procedurally stored in long-term memory—is more meaningful and more appropriate, however, for persons with dementia.

Familiar hymns reduce negative behavior displayed by people with Alzheimer's or other dementias

We witness this regularly at our Friday Hymn Sings where caregivers and their loved ones come together. It might not be uncommon for a loved one with dementia to become agitated outside their home environment and ask, 'Why are we leaving home?' as they travel to the new environment of our dementia-friendly church service. This uneasiness, however, stops once the old, familiar, Christian hymns are heard and sung.

When my mother was in long-term care, in a lock down unit, residents were provided with 45 minutes of Hymn Sing a week. When I saw the impact this had on residents, I started playing a Tennessee Ernie Ford music CD for my mother in her room during visits. Within minutes, I had residents coming into the room to listen and sing Mr. Ford's old hymns. I felt like the Pied Piper of hymns!

Are we mistaken, in our 'politically correct' world, to put religion on the 'back burner' when in fact it might be one of the clues to understanding the needs of those with dementia? In our current health care system, where our loved ones are cared for in large, impersonal day programs with no spiritual component—or even worse 'locked down' institutional settings—are we not aggravating disease symptoms instead of reducing them?

With our fast-aging population, the so-called "gray tsunami," and the continued diagnosis of dementia in our elderly, we ought to **stop thinking medically about a highly spiritual malady**: lack of emotional stimulation and attachment. What if all this time we have been trying to medicate the core needs of a human being with dementia?

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