

A Study to Assess the Effectiveness of Music Therapy on Level of Stress among Elderly People in Selected Old Age Home at Meerut

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ABSTRACT

Background of the study: Ageing is coming up as one of the biggest challenge age the world over. At any age, stress is faced difficult situations and overcome obstacles with increasing age, people are more susceptible to physical, psychological, social and emotional problem.

Aim: The main aim of the study was to evaluate the effectiveness of music therapy on level of stress among elderly people in selected old age home at Meerut.

Methodology: Evaluative study was conducted using quasi-experimental (non randomized control group design) conceptual framework utilized for study was General system theory. Total 40 samples (20 experimental group+ 20 control group) were selected. Before conducting the study written consent were obtained from samples. Non probability convenient sampling was used. The demographic data were collected 15 minutes prior to pre test. Pre test was taken by using Sheldon Cohen Perceived stress scale Next is subjects was instructed to listen to 20 min interrupted recording Classical Period instrumental Music played via CD Player in experimental group. Finally post test was taken by measuring stress level of elderly people after 7 days of Music therapy.

Results: The mean pre test score on level of stress among experimental group was 30.97 & control group was 29.45 respectively. The mean post test score on level of stress among experimental group was 23.43 respectively & the mean post test score on level of stress among control group was 28.66 respectively. This shows that when comparing the experimental

and control group the stress level has been reduced in experimental group not in control group. So music therapy is highly effective in reducing stress among elderly people.

Conclusion: This study concludes that music therapy was definitely effective in reducing level of Stress among elderly people in selected old age homes

Keywords: Effectiveness, Music therapy, level of Stress, elderly people

INTRODUCTION

Ageing is the accumulation of changes in a person over time. Ageing in humans refers to a multidimensional process of physical, psychological and social change. Some dimensions of ageing grow and expand over time, while others decline. Reaction time, for example, may slow with age, while knowledge of world events and wisdom may expand. Ageing is among the largest known risk factors for most human diseases. Roughly 100,000 people worldwide die each day of age-related causes. For older adults, stress can come from chronic illness, disability, loss of spouse, worries for being dependent and due to institutionalization. These types of depression are long term and can be difficult to deal with.

Stress and stress related problem have various effects on old age, their care giver and also in society. It may cause physical, mental, emotional and behavior

problems. This type of tension in older adults has unique contributing factors such as the loss of the elderly spouse or friends living alone can increase the sense of isolation sometimes the simple tasks of everyday life can cause stress in those who experience physical or medical limitations the effect of stress.

Geetha Mani et al (2014) conducted a research study on Perceived levels of stress and its correlates among residents of old age home in Kanchipuram District, Tamil Nadu aim of the study was carried out to assess the perceived stress among inmates of an old age home in Kanchipuram District, Tamil Nadu. Materials and Methods: A descriptive, cross-sectional study was conducted among 100 inmates of an old age home in Kanchipuram District, Tamil Nadu between May and July 2012, using a semi-structured questionnaire. Perceived levels of Stress among elderly were assessed using the perceived stress scale-10. Results: Nearly 18% of the participants had high stress scores and 60% had moderate stress scores. Gender, co-living status with spouse was found to be significantly associated with stress scores. Conclusion: The perceived stress was high among inmates of old age homes. There is a need for organized family and social support to improve the physical and psychological health of elderly. Exploratory research studies are necessary to identify the problems among elderly, especially those in old age homes.

Danalarsen(2012) says Music therapy can have a powerful impact on anyone, but it releases a tripwire of powerful memories for the elderly. This is why music therapy is one of the most effective treatments for senior citizens. Music therapy provides opportunities for memory recall which contributes to reminiscence and satisfaction with life. It brings positive changes in mood and emotional states. it also brings awareness of self and the environment which accompanies increased attention to music.

REVIEW OF LITERATURE

Almira Osmanonic et al (2015) conducted a study on do level of perceived stress increase with increasing age after age 65. A population based study. A dementia free cohort of 1656 adult aged 66 to 97 years living at home or in institutions, participating in the Swedish National Aging and Care study Kungsholemen (SNAC-K) was assessed for level of perceived stress scale (PSS) result is prevalence of high stress according to the top title of the population (PSS score 20+) was 7.8% in adults aged 72 to 78 and 6.2% in adults aged 66 years (P= 0.001) level of stress increased with increasing age (p=0.001) in the linear regression model. This association remained after adjustment for demographic and psychosocial factor but no longer was present after adjusting for health- related factors.

Maddepalli Usha Rani et al (2016) conduct a research study on level of stress among elderly at selected old age in Nellore. A total of 100 sample were include in this study by using Non probability convenience sampling techniques. Result shows that 3% have mild stress 86% have moderate stress and 11% have severe stress. The result reveal that mean score of stress scale of stress is 152.1 was standard deviation of 21.8 stress or mean is 19.44 with standard deviation of 7.50 and life events mean is 32.6 with standard deviation of 11.15 elderly people residing at old age home experiences moderate to severe level of stress.

Padmapriya et al (2016) conducted A Study to Assess the Effectiveness of Music Therapy on the Level of Depression among Elderly in Volontariat Home The main aim of the present study was to assess the effectiveness of Music Therapy on level of depression among elderly in Volontariat Home, Oupalam, Puducherry. Materials and Methods:A Quantitative Quasi Experimental study (Pre-experimental- one group pre and posttest design) done among 40 elderly in Volontariat Home, Oupalam, Puducherry with Depression. Data were

collected using Hamilton Depression Scale. Data analysis was done using inferential and descriptive statistics. Results: Totally 40 Elderly were participated in the study. It was observed that Majority of subjects resided for 3-5 years at the old-age home. Majority of the samples had Normal and Mild level of Depression. The mean pretest values of Depression score had significant difference during posttest measurement of mean Depression score which proved that there was significant reduction in the level of Depression among Elderly due to Music therapy. The obtained 't' value 7.5287 was highly statistically significant (0.0001) at $p < 0.001$ level.

S. Wattanasoei et al (2017) conducted a research study on Quality Of Life Through Listening Music Among Elderly People. METHODS: A cross-sectional study was conducted by interviewing 353 elderly individuals living in the semiurban area of Thailand. A validated, reliable world health organization quality of life (WHOQOLOLD) tool was adapted for this study. Logistic regression analysis was performed to identify the factors associated with QOL and its six domains with adjusted covariates, and the potential factors including chronic disease, community participation, traditional event participation, the experiences of music listening, and the types of music preference were entered in the model. RESULTS: Findings revealed that more than half of respondents were married female with an average age of 68.92 ± 6.99 . Around (80.7%) suffered from chronic diseases and the hypertension was found the highest (66.32%). The quality of life among the elderly was found at the moderate level with the total QOL score of $83.41 \pm SD=10.32$. Respondents with chronic diseases have the total QOL score (OR=0.95, 95% CI 0.930.98). Respondents who preferred to listen to Look Krung (Thai popular classic music) type have the total QOL score (OR=1.03, 95% CI 1.011.05), Autonomy Facet(AUT) score (OR=1.11, 95% CI 1.021.21), and Intimacy facet(INT) score

(OR=1.14, 95% CI 1.051.24) as compared to those who did not listen the music.

Daniel Leubner et al (2017) conducted a research study on reviewing the Effectiveness of Music Interventions in Treating Depression goal was to differentiate the impact of certain therapeutic uses of music used in the various experiments. Randomized controlled study designs were preferred but also longitudinal studies were chosen to be included. 28 studies with a total number of 1,810 participants met our inclusion criteria and were finally selected. We distinguished between passive listening to music (record from a CD or live music) (79%), and active singing, playing, or improvising with instruments (46%). Within certain boundaries of variance an analysis of similar studies was attempted. Critical parameters were for example length of trial, number of sessions, participants' age, kind of music, active or passive participation and single- or group setting. In 26 studies, a statistically significant reduction in depression levels was found over time in the experimental (music intervention) group compared to a control ($n = 25$) or comparison group ($n = 2$). In particular, elderly participants showed impressive improvements when they listened to music or participated in music therapy projects.

STATEMENT OF THE PROBLEM

“A study to assess the effectiveness of music therapy on level of stress among elderly people in selected old age home at Meerut.”

OBJECTIVE

1. To assess the pre-test level of stress among elderly people in selected old age home.
2. To evaluate the effectiveness of music therapy on level of stress among experimental group
3. To compare the effectiveness of music therapy on level of stress among experimental & control group.

4. To find out the association between post-test level of stress among experimental group with their selected demographic variable.

RESEARCH HYPOTHESIS (0.5 level of significance)

- 1) H1: There will be a significant reduction in level of stress after music therapy among elderly people.
- 2) H2: There will be a significant association between reduction of stress among the elderly peoples with selected demographic variable

ASSUMPTIONS

1. There will be effect of the music therapy to reduce the stress level among the elderly.
2. There will be stress in elderly peoples in old age homes.
3. Music Relaxation Technique is a non pharmacological treatment and it is simple measure to reduce stress.
4. Practicing of progressive Music relaxation technique enhances sense of well being among elderly persons.

CONCEPTUAL FRAME WORK BASED ON GENERAL SYSTEM THEORY

The conceptual framework of the present study is based on General Systems Theory with input, process, output and feedback. This model was first introduced by Ludwig Von Bertalanffy and later modified by J.W Kenny (1999)

OPERATIONAL DEFINITION

- 1) **Assess-** It refers to determine (or evaluate) the level of stress after music therapy.
- 2) **Effectiveness-** it refers to degree to Effectiveness is the capability of producing a desired result. In this study after getting the music therapy elderly people got relieve from stress that was evaluated by taking posttest by Sheldon Cohen perceived stress scale.

3) Music therapy- music therapy is the controlled use of music and its influence on the human being to aid in physiologic, psychologic, and emotional integration of the individual during treatment of an illness or disability. In this study Pleasant, soothing effect of classical period instrumental music therapy was provided in order to reduce the stress level among elderly people.

4) Level of stress- Stress is the response of the participants of the study towards the demands of the environment that are perceived as threatening their well-being or beyond their capabilities.

5) Elderly people: People who are aged over 60 years whose psychological, physical and social functioning may be diminished as a result of aging process.

6) Old Age Home: It is an institution approved by the government for providing care for the institutionalized older adults which includes food, shelter, meeting the physical, social and psychological needs.

RESEARCH METHODOLOGY

RESEARCH APPROACH- An evaluative approach was considered to be the most appropriate for this study keeping in view the nature of problem and objectives of the study.

RESEARCH DESIGN- QUASI – EXPERIMENTAL (NON RANDOMIZED CONTROL GROUP

SETTING- The present study was conducted in selected old age Homes in Sri Swami Satyanand Vradhaashram, Sri Sai Seva Sansthan Vradhaashram, Abha Manav Vradhaashram, at Meerut.

VARIABLE

Independent variable:

In this study, the independent variable is the Music therapy which is given twice a day for seven consecutive days for 20 minutes each time.

Dependent variable:

In this study, dependant variable is stress level of elderly People.

Extraneous variable

Any uncontrolled variable that greatly influences the result of the study is called as

extraneous variable. The extraneous variable under study are –Age, Gender, Marital status, Educational status, Type of

family, Stress occur by, Type of old age home, Type of admission, Source of income, Medical illness.

RESULT AND DISCUSSION

Table 1- Distribution of subjects according to demographic characteristics of the subjects by frequency and percentage N= 40(20 exp+20 control)

Demographic variables		Experimental		Control	
S.No		Frequency	Percentage	Frequency	Percentage
1	Age (yrs) <input type="checkbox"/> 60 -69 <input type="checkbox"/> 70-79 <input type="checkbox"/> 80- & above	0 5 15	0% 25% 75%	0 5 15	0% 25% 75%
2	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	9 11	45% 55%	7 13	35% 65%
3	Type of family <input type="checkbox"/> Nuclear <input type="checkbox"/> Joint <input type="checkbox"/> Extended	11 4 5	55% 20% 25%	5 9 6	25% 45% 30%
4	Marital status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Widow	14 2 4	70% 10% 20%	7 6 7	35% 30% 35%
5	Educational status <input type="checkbox"/> No formal education <input type="checkbox"/> Primary education <input type="checkbox"/> Secondary education <input type="checkbox"/> Degree & above	1 1 0 18	5% 5% 0% 90%	6 10 3 1	30% 50% 15% 5%
6	Stress occur by <input type="checkbox"/> Family problem <input type="checkbox"/> Behavioral problem <input type="checkbox"/> Occupational problem <input type="checkbox"/> Any other	6 0 0 14	30% 0% 0% 70%	14 2 1 3	70% 10% 5% 15%
7	Type of Old Age Home <input type="checkbox"/> Paid <input type="checkbox"/> Unpaid	20 0	100% 0%	0 20	0% 100%
8	Type of Admission <input type="checkbox"/> Voluntarily <input type="checkbox"/> By family circumstances	19 1	95% 5%	10 10	50% 50%
9	Source of Income <input type="checkbox"/> Private <input type="checkbox"/> Pension <input type="checkbox"/> Family support	11 3 6	55% 15% 30%	7 9 4	35% 45% 20%
10	Medical Illness <input type="checkbox"/> Yes <input type="checkbox"/> No	11 9	55% 45%	11 9	55% 45%

Table 1: shows that 75% of the elderly people are in the age group 70-79yrs years for both experimental and control group. Most of the elderly people (55%) were females in experimental group and (65%) in control group.

In regards to type of family, in the experimental group 11 (55%) elderly people belongs to Nuclear family, 4 (20%) elderly people belongs to Joint family, 5 (25%) elderly people were from Extended family. In control group 5 (25%) elderly people were from Nuclear family, 9 (45%) elderly people were from Joint family and 6 (30%) elderly people were from Extended family.

In regards to Marital status in the experimental group 14 (70%) elderly people were married, 2 (10%) were unmarried and 4 (20%) were widow. In the control group 7 (35%) elderly people were married, 6 (30%) were unmarried and 7 (35%) were widow.

With regards to Educational status among experimental group 18 (90%) majority of the elderly people were in degree and above. In control group 6 (30%) elderly people were having no formal education, 10 (50%) elderly people were having primary education, 3 (15%) elderly people were having secondary education, 1

(5%) elderly people were having degree and above.

With regards to Stress among elderly people in experimental group 6 (30%) were having stress related to family problems, and 14 (70%) elderly people were having stress related to other problems. In control group 14 (70%) elderly people were having stress related to family problem, 2 (10%) were having stress related to behavioral problem, 1 (5%) were having stress related to occupational problem, 3 (15%) were having stress related to other problems.

With regards to type of old age home, in experimental group 20 (100%) elderly people in paid old age home. In control group 20 (100%) elderly people in unpaid old age home.

With regards to type of admission, in experimental group 19 (95%) elderly people

voluntarily in old age home, 1 (5%) were due to family circumstances in old age home. In control group 10 (50%) elderly people voluntarily in old age home, 10 (50%) elderly people due to family circumstances.

With regards to source of income, in experimental group 11 (55%) elderly people were having private support, 3 (15%) were getting their pension and 6 (30%) were having family support. In control group 7 (35%) elderly people were having private support, 9 (45 %) were getting their pension, 4 (20%) were having family support.

With regards to medical illness, 11 (55%) were medically ill and 9 (45%) were having no medical illness in experimental group & control group.

Table 2: Mean and Standard Deviation of pre test and Posttest level of stress among elderly people in experimental and control group. (N = 20 + 20)

PRETEST				POSTTEST			
EXPERIMENTAL GROUP (n=20)		CONTROL GROUP (n=20)		EXPERIMENTAL GROUP (n=20)		CONTROL GROUP (n=20)	
MEAN	S.D.	MEAN	S.D.	MEAN	S.D.	MEAN	S.D.
30.97	1.2343	30.97	1.2343	23.43	2.28208	28.66	2.3141

In experimental group the mean pre test score of stress among experimental group was 30.97 with S.D. 1.2343 & in control group the mean pre test score of stress among was 29.45 with S.D. 2.1878. In experimental group the mean post test score of stress 23.43 with S.D. 2.28208. In control group the mean post test score of stress was 28.66 with SD 2.3141.

Table 3: Effectiveness of music therapy on level of stress among elderly people in selected old age home in experimental group. (n=20)

Effective score (n=20)		Paired t test and P value
Mean difference	Standard deviation (SD)	
7.54	2.43872	t= 13.754 p = < 0.001

Table 3- shows the effectiveness of music therapy on level of stress which indicates the difference in pre and post test level of stress scores.

The obtained 't' value was t = 13.754 respectively which was significant at P <0.001 level.

This shows that Music Therapy was effective in reducing the level of stress among elderly people in selected old age home in experimental group.

Table 4: Comparison of level of stress score among elderly people in selected old age home in experimental and control group. (n=20+20)

Experimental group (n=20)		Control group (n=20)		Independent t test and P value
Mean difference	S.D.	Mean difference	S.D.	
7.54	2.28208	0.79	2.3141	t = 8.783 p = <0.001 (significant)

Table 4- shows that comparing the experimental group mean difference 7.54, SD 2.28208 and control group mean difference 0.79, SD 2.3141, in effectiveness of music therapy is highly significant in experimental group, the obtained 't' value was 8.783 respectively, which was significant at $P < 0.001$ with 7.54 mean.

Table 5: Find out the Association between demographic variables and post test level of stress among elderly people in experimental group. (n=20)

Demographic variables	Moderate stress (frequency)	High stress (frequency)	Chi square value & P value
Age (yrs) □ 60 -69 □ 70-79 □ 80- & above	0 5 14	0 0 1	X2= .351 df = 1 P= .554 (Not significant)
Gender □ Male □ Female	8 11	1 0	X2= 1.287 df = 1 P = .257 (Not significant)
Type of family □ Nuclear □ Joint □ Extended	10 4 5	1 0 0	X2 = .861 df = 2 P= .650 (Not significant)
Marital status □ Married □ Unmarried □ Widow	13 2 4	1 0 0	X2 =.451 df = 2 P= .798 (Not significant)
Educational status □ No formal education □ Primary education □ Secondary education □ Degree & above	0 1 0 18	1 0 0 0	X2= 20.00 df =2 P= 0.001 (Significant)
Stress occur by □ Family problem □ Behavioral problem □ Occupational problem □ Any other	6 0 0 13	0 0 0 1	X2= .451 df = 1 P= .502 (Not significant)
Type of Old Age Home □ Paid □ Unpaid	Constant	Constant	-
Type of Admission □ Voluntarily □ By family circumstances	18 1	1 0	X2= .055 df = 1 P= .814 (Not significant)

Table 5-shows:

In Educational Status x2 value was 20.0 with P value < 0.001 which is lower than calculated value which is 0.005. This shows that educational status was significant with post test level of stress among elderly people in experimental group. Hence the research hypothesis H2 is accepted while H02 is rejected.

The association between demographic variables and post test level of stress among elderly people in experimental group age, gender, type of family, marital status, educational status, stress occur by, type of old age home, type of admission, source of income, and medical illness shows that there was significant association in educational status only.

In age, gender, type of family, marital status, stress occur by, type of old age home, type of admission, source of income, and medical illness x2 value was .351, 1.287, .861, .451, .451, constant, 0.55, .861, 1.287 which is higher than the calculated value. So there was no significant found in the age, gender, type of family, marital status, stress occur by, type of old age home, type of admission, source of income, and medical illness. Hence the Null hypothesis H₀ is accepted while research hypothesis H₁ is rejected.

CONCLUSION

According the findings of the study We can conclude that Music therapy was significantly effective in reducing the level of stress among the elderly people in

selected old age homes. It is also effective, non-pharmacological, accessible and cost-effective.

NURSING IMPLICATION

The findings of the present study have implication for Nursing Education, Nursing Administration, Nursing Practice, and Nursing Research.

NURSING EDUCATION

This is a model for nursing educator, nursing lecturer, and clinical instructor to teach the student in the classroom as well to promote learning and provide the environment conducive to learning. This study will help the student nurses to explore new strategies for effective reduction of stress.

NURSING ADMINISTRATION

A nurse administrator should facilitate the development and implementation of strategies to reduce the level of stress among elderly people. By utilizing the study result, the nurse administrator can facilitate an environment for the elderly people to cope with their stressful situations. The nurse administrator can organize in service education programme regarding the effectiveness of music therapy on stress for staff nurses. This would enable the health personnel in updating their knowledge and acquire skills to reduce the level of stress. More over increased knowledge improves the clinical performance of the nurses and this would provide the reinforcement to the nurses.

NURSING PRACTICE

Music therapy is an effective measure to reduce the stress. Nurses can make this music therapy as an effective measure to enhance the coping strategies of elderly people. Administration of music therapy is a safe and better modality. Research can fruitfully be used by nurses in planning care and providing nursing intervention (music therapy) that are beneficial for elderly people with stress.

NURSING RESEARCH

This study will be a benchmark in the nursing profession and nursing research. It

took great challenges in conducting the study by using the various methods and techniques. There is need to conduct further research on music therapy on level of stress among elderly people. Similar study can be replicated in large population, with completely new samples, to generate more valid and reliable data. In the field of research this study can be conducted for the advantage of elderly people in old age homes and living with family.

RECOMMENDATIONS

Based on the findings of the study, the following recommendations are offered for future research:

- The study can be replicated on larger samples to validate the findings and make generalizations.
- The similar study can be conducted as comparative between old age male client and female client in different settings.
- Similar study can be conducted as comparative study between the old age people in old age homes and old age people residents with their family.
- The study can be carried out for a longer period of time.
- The study can be done using other alternative methods to reduce level of stress.

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