



# Hymns and Ministry to Those with Dementia

## Short Guide No 27: Hymns and Ministry to Those with Dementia

*Ministering to people who have reached that stage of life when 'mind and memory flee'<sup>1</sup> presents serious challenges which cannot be ignored.*

This short paper draws on the author's experiences as a part-time Chaplain to a local hospital in which worship amongst geriatric patients (many of whom suffered from dementia) was conducted regularly (but informally) by clergy and volunteers from local churches. In such circumstances it was vitally important to 'sing something simple' which even the most confused of elderly patients could still understand, and to which some at least could actually respond.

*The patients* fell broadly into the following categories:

- those disabled by strokes, and who had serious problems with mobility (because of paralysis) and communication (because of aphasia<sup>2</sup>);
- those suffering from progressive degenerative diseases such as Alzheimer's,<sup>3</sup> and whose decline into mental confusion was gradual but inevitable and, sadly, irreversible, even though they still retained some periods of lucidity, but with a seriously limited attention span;
- those with unimpaired intellectual facilities but whose additional serious disabilities (e.g. multiple sclerosis) prevented them from speaking – leading to the wrong assumption that they had lost all intelligence;
- those so heavily sedated by drugs designed to curb aggression and / or relieve pain, that they appeared to be in a persistent vegetative state, in which they remained until death.

With all but that final group, it was possible to have some meaningful contact, and to build up relationships. Many were still aware of their spiritual needs, and continued to appreciate the simple services of worship conducted in the hospital wards. Some, when taken to worship alongside the regular congregation in the local parish church, found the experience tremendously enriching and rewarding, and would talk about it for days afterwards. What invariably made the greatest impact on them was the singing of familiar hymns.

**The impact of hymn singing** It is too easy in a 'post-Christian' society to underestimate the extent of residual faith among elderly people, who may have subconsciously learned by heart a core repertoire of hymns (and songs) in childhood. When patients sang these again, confusion seemed to disappear, and it was as if they were part of the 'real' world of lucidity and comprehension once more. Their moments of transcendence were, however, transitory. Experience came to suggest the following possible reasons as to why hymn singing seems to cause people (at least temporarily) to 'blossom and flourish'<sup>4</sup>:

- **Nostalgia** is a good servant but a bad master. While 'nostalgia therapy' can successfully re-awaken dormant feelings of comfort, security, and stability, such as (rightly or wrongly) were associated with a happier bygone age, it should be used with caution, as its misuse can obstruct and hinder real spiritual growth.
- **Residual memory**: The most precious values of any religious community which are taught with diligence and enthusiasm tend to become so over-familiar in one's formative years that they are virtually impossible to erase. Hymns can make their way into our minds because of the frequency with which they are sung, to the extent that they are not easily disentangled from our beings. Whatever else is lost from memory, hymn lyrics (and their accompanying tunes) somehow contrive to remain there.
- **The role of familiarity**: People tend to recognise familiar things most readily – even when they encounter them 'out of context'. One is almost instinctively comfortable in familiar surroundings, in which familiar sights, sounds, and phrases are instantly recognisable. But when the familiar words of traditional hymns are changed or updated, or they are sung to the 'wrong' tune, feelings of disorientation, distress, and even alienation can result.

<sup>1</sup> From the last verse of James Montgomery's hymn, 'According to Thy gracious word'.

<sup>2</sup> It may be necessary to explain that 'aphasia' has been defined as the partial or total loss of the normal ability to produce and understand speech as a result of brain damage caused by injury or disease.

<sup>3</sup> Alzheimer's disease is but one of several conditions commonly understood as 'dementia'.

<sup>4</sup> From the third verse of Walter Chalmers Smith's hymn, 'Immortal, invisible God only wise'.

**Stages in remembering** At the risk of over-simplification, it is claimed that there are three stages in the process of committing information to memory:

- **Registration:** It is this first stage which causes most problems for confused elderly people; and this is clearly linked to the proverbial difficulty of attempting to teach an old dog new tricks. Since learning ‘new’ hymns is equally difficult, pastoral sensitivity dictates that, more often than not, worship leaders are constrained to select only familiar, tried and tested texts in order to communicate effectively.
- **Retention:** Only that which has initially registered can be retained (and retrieved). The more frequently memories are re-lived, repeated, and rehearsed, the more likely it is that they will remain for life. The process is often aided by some of the most obvious features of both poetry and hymnody, such as rhythm, repetition, and rhyme; of these it is generally agreed that rhythm is the most important therapeutic factor, while rhyme (far from being frivolous) is a particularly potent aide-memoire. Thus older people can often vividly recollect memories from their earliest days (when things like multiplication tables were almost ritually and rhythmically ‘drummed’ into them), because these have been lodged in their psyche for so much longer. Even those memories that may be lost temporarily can prove to be recoverable.

What is not possible, however, is to retrieve or recall memories that have neither registered successfully in the first place, nor have been retained.

- **Retrieval:** Even in cases of total amnesia (one of the most famous being that of the musician Clive Wearing (b.1938), who suffered a catastrophic loss of brain function as a result of a virus that attacked his central nervous system), music can still communicate. Wearing could still sight-read music, play piano and organ, and conduct a choir perfectly – but could not recall having done so. Similarly with the Russian composer Shchedrin (1902-1963), who suffered a severe stroke which deprived him of his ability to speak, yet was still able to compose brilliant musical works, and correct the compositions of his students. One patient I encountered could sing perfectly and very loudly in tune, but since he could reproduce no words he was thought by others to be disruptive – but he was probably making his own distinctive contribution to the kind of service of worship with which he had once been so familiar. Clearly it still resonated powerfully with him (although it is difficult to say with certainty what it actually meant to him).

‘Retirement’ from regular and active participation in the Church’s worship because of the enforced ‘exile’ of being housebound, hospitalised, or institutionalised means that many of the elderly population are effectively marginalised. They have no real say in the preparation or publication of new liturgical materials, and very few have the opportunity to contribute to a ministry of writing or composing ‘in age and feebleness extreme’.<sup>5</sup>

**Resources** The following material may prove helpful:

- [http://www.mha.org.uk/files/2314/1105/5961/17578\\_Dementia\\_Worship\\_NEW\\_2014\\_v2\\_12.09.pdf](http://www.mha.org.uk/files/2314/1105/5961/17578_Dementia_Worship_NEW_2014_v2_12.09.pdf): from Methodist Homes together with the Christian Council on Ageing; includes worship and some hymn suggestions
- <http://www.calvin.edu/cicw/resources/pdf/Dementia-HandbookforWorship.pdf>: an older (2002) American resource which contains useful, general background with much that is transferable

Those who care for people with dementia may be helped by the inclusion of suitably supportive hymns in regular congregational worship; examples include ‘When our caring love wears thin’ (Marjorie Dobson), ‘When memory fades and recognition falters’ (Mary Louise Bringle), ‘When our confidence is shaken’ (Fred Pratt Green) and ‘The one who longs to make us whole’ (Edith Sinclair Downing).<sup>6</sup>

**Conclusions** The words and the music of Christian hymns are often far more potent than may be first apparent. As such, they are singularly under-rated vehicles of grace. Words absorbed (even ‘over-learned’) in one’s formative years are strangely comforting when the end of life approaches – especially if this proves to be a time when people seek to return to the familiar surroundings of the faith of their forebears, and find themselves ‘in quires and places where they sing’. The music of hymnody is also a powerful means of non-verbal communication, which can help an otherwise confused worshipper to achieve brief, but priceless moments of transcendence. Thus the sensitive and judicious use of appropriate hymns can prove highly effective in contributing towards satisfying the immortal longings of even the most disturbed of human souls.

Graham D S Deans – March 2017 – © The Hymn Society of Great Britain and Ireland

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<sup>5</sup> Charles Wesley was a notable exception: this is a quotation from his last hymn, dictated to his wife shortly before he died in 1788.

<sup>6</sup> All four, along with the two hymns quoted earlier in the paper, can be found in either *Singing the Faith* (Trustees for Methodist Church Purposes, 2011) or *Church Hymnary: Fourth Edition* (Canterbury Press, 2005), among other sources.

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