

**Exploring the experience of delirium in hospital,
and how music might expand our insight into this phenomenon.**

Victoria Jane Hume

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ABSTRACT

This dissertation synthesises the fields of narrative medicine and music composition to address the experience of delirium, and to learn whether music has a role to play in understanding and communicating its nature.

My submission takes the form of a written dissertation accompanied by a new musical composition, *Delirium Part II*. Both written and composed texts are based on interviews and small discussion groups with people who have experienced delirium, their families, and healthcare professionals who are familiar with delirium in people under their care – as well as observation and recording from a hospital intensive care unit (ICU). The composition incorporates both interviews and ambient hospital sounds as audio components, and was performed first on 2 March 2017 at the Music Room, University Corner, University of the Witwatersrand.

The study addresses significant gaps in our understanding of delirium, from its definition to the qualities of the experience for all those affected by it. Violence is shown to be inherent to the experience, driven by a cycle that imposes it by turns on HCPs and patients. Delirium is, moreover, characterised by losses of numerous kinds: orientation, dignity, control, and ultimately personhood. This study suggests, however, that it is within our grasp to limit significantly the impacts of these losses through re-evaluating our interactions with patients and families and challenging the dehumanising aspects of care. The music of *Delirium Part II*, moreover, is shown to have the capacity to contribute to this re-evaluation. There are clear indications here of the potential for music and the arts more broadly to convey complex health experiences, and to be of use in training and education.

Music contributes centrally to the development of this research, as a tool both for data analysis and for provoking discussion of a complex, emotive topic. The possibilities for creative practice in narrative medicine are illuminated by this cross-disciplinary study, which demonstrates both that narrative-based musical composition can teach us much about delirium; and that delirium can teach us much about care.

PLAGIARISM DECLARATION

I know that plagiarism is wrong. Plagiarism is to use another's work and pretend as if it were my own.

I have used the author date convention for citation and referencing. Each significant contribution to and quotation in this dissertation from the work/s of other people has been acknowledged through citation and reference.

I declare that this dissertation is my own unaided work. It is submitted for the degree of Master of Speech Pathology at the University of the Witwatersrand, Johannesburg. It has not been submitted before for any other degree or examination in any other university.

Victoria Jane Hume, 14 March 2017