

Essay/Personal Reflection


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Integration between humor and music therapy to increase spirituality and meaning in palliative and supportive care

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Palliative and supportive care is a form of service to patients whose disease has not reacted to curative treatment or cannot be cured medically (Hui et al. 2013). So, it is necessary to provide special interventions so that patients can continue to have enthusiasm in life and can achieve satisfaction or happiness in the rest of their lives (Xiao et al. 2019). To be able to realize this, patients need to be given assistance so that they can improve their spirituality and can find meaning in their lives, even in their suffering (Breitbart 2002; Breitbart et al. 2010; McClain et al. 2003; Nelson et al. 2002). In this context, the patient is invited to get closer to his/her God inwardly, and cognitively the patient can interpret the life he/she that has lived as a gift given by God to him/her (Breitbart 2002; Breitbart et al. 2010).

Based on evidence from several articles that have been published in this journal, it is proven that humor (Clayton and Marczak 2022) and music therapy (Nyashanu et al. 2021) are quite interesting discussion topics. Caregivers and mental health professionals who work in this field can provide interventions through humor (Dean and Gregory 2004, 2005) and music therapy (Gallagher 2011; Gallagher et al. 2001, 2006) in order to increase spirituality and meaning in life for the patients. It is evident that several research results state that humor (Pinna et al. 2018) and music therapy (McConnell and Porter 2017) are separately effective in palliative and supportive care services. Furthermore, the combination of humor and music therapy has also been shown to be effective (Haire and MacDonald 2019; Lister 1994).

In retrospect, Freud (1928, 1961, 2014) has long described that his psychoanalytic theory of jokes or humor has a relationship with unconscious processes (Christoff and Dauphin 2017). In the process of the human subconscious are stored all experiences, whether pleasant or not, dreams, or hopes that have not been realized, and if examined more deeply, there can be found about spirituality and meaning in life (Frankl 2011; Jastrzębski 2021). Through this humor, patients can be helped to realize all experiences of spirituality and search for meaning in life through laughing activities (Johnson 2002; Mackinlay 2014). With this experience of laughter, patients can be more grateful for their life as a gift from God (Dean 2021) so that they have high well-being (Martin et al. 1993; Papousek 2018).

Furthermore, through music, patients can be invited to get closer to God and find meaning in their lives (Lipe 2002; Moss 2019), for example, by giving spiritual music or songs to patients, inviting them to sing spiritual songs together, watching spiritual music videos together, and even inviting patients to create spiritual songs together (Situmorang 2021). In addition to increasing the patient's spirituality, it can also help them to find more meaning in life through the lyrics of songs sung and/or composed by themselves (Baker and Ballantyne 2013; Baker et al. 2015).

In its application, humor and music therapy can be carried out together (Haire and MacDonald 2019; Lister 1994) so that their effectiveness is higher in helping patients improve their spirituality and search for meaning in life. I suggest that the steps described in the theory of "rapid tele-psychotherapy" (Situmorang 2022a, 2022b, 2022c, 2022d) can also be integrated with the provision of humor therapy interventions, especially in the working stage. Patients can be invited to watch their favorite humor videos or even patients can be invited to joke together to create humor that makes them happy.

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