





Shared Empowerment







"Musicoterapia Migrante (Migrant Music Therapy)": pilot project of integration between music therapy and ethnopsychiatry

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ABSTRACT

Migration phenomena pose the need for music therapists to use integrated methodologies that allow a sensitive approach to cultural differences.

The interaction among music therapy, child neuropsychiatry and ethnopsychoanalysis, which share a psychodynamic approach, has been of fundamental importance in a seven-year project of San Paolo Hospital in Milan, aimed to the treatment of neuropsychia development disorders linked to migration trauma.

The collaboration in the project of the CMT School of Music Therapy of Milan has guaranteed the availability of music therapy, who are able to operate with flexibility through different music therapy psychodynamic and relational approaches (intersubjective approach, Benenzon model, etc.) and to adapt the music therapy component of the treatment settings in relation to the interventions of the other treatment disciplines involved.

The presentation illustrates the integration of different disciplinary contributions: cultural mediation based on the ethnopsychoanalytic model (Moro, 1994), the involvement of parents in observation sessions (Vallino, 2009), and the balance, in the setting, between the neuropsychiatric and music-therapeutic approaches of the therapeutic couple. This equilibrium has reinforced the function of containment, has expanded the identification models offered to the patient and has encouraged the mutual translation from verbal to non-verbal, supporting the development of language and thought. This has been a model of intervention that turned out to be functional in the treatment of children and adolescents (with autism, selective mutism, ADHD, conduct disorders) and an application of Music Therapy in a "transdisciplinary" perspective.

Short history of the project

The project was born in 2006 in the Territorial Service of Child Neuropsychiatry of San Paolo The prize, was both 1200 inter lemborated Service or fund recompany or same and the MHO, with the aim of improving reception and clinical work for migrant children and their parents. Of fundamental importance for the innovation of the diagnosis and therapy settings, was the entry into the multidisciplinary team of the Cultural Mediator, trained in clinical work in the maternal-child area according to the ethnopsychoanalytical model of the M.R.Moro School

- This professional figure, in fact:

 has made it possible to understand each other with the patient of a different language, to
- nas made it possible both understand each norther with the patient or a different singulage, to the benefit of the working alliance has favoured the recognision of cultural difference and its distinction from the condition of disorder, to the advantage of the correctness of the diagnostic work it has promoted the use of traditional medical remodels, to reinforce the effectiveness of therapies, according to the principles of transcultural clinics ("complementarism" of

In 2009, the collaboration of the CMT School of Music Therapy in Milan enriched the project with new theoretical-methodological references for the innovation of clinical work, provided the human resources to carry out the interventions (trainees, tutor teachers and music therapy supervisors) and opened new perspectives for clinical research, important for the development of the discipline

Thus, a constant synergy between clinical, teaching and research activities was established from the beginning, which is still a distinctive feature and a line of strength of the project.

The first theoretical-methodological reference for the improvement of prevention, diagnosis and treatment of growth disorders in migration was the ethno-psychoanalytical model of the French

school (M.R.Moro).
We owe to this model the knowledge, on the one hand, of specific risk factors for development.

We over to this model the knowledge, on the one hand, of specific risk factors for development. sented by the transmission of migratory suffering from parents to children (migratory trauma) that prevents the expression of developmental potential - and, on the other, of protective factors for the development of migrant children - consisting of integration mechanisms and resilience processes, which can lead to happy outcomes of growth in migration ("beau metissage") -, summarised in the following picture



Given the common focus on parental suffering, M.R. Moro's ethnopsychoanalytic model was easily integrated with the psychoanalytic model of Dina Vallino Macciò, which broadens the

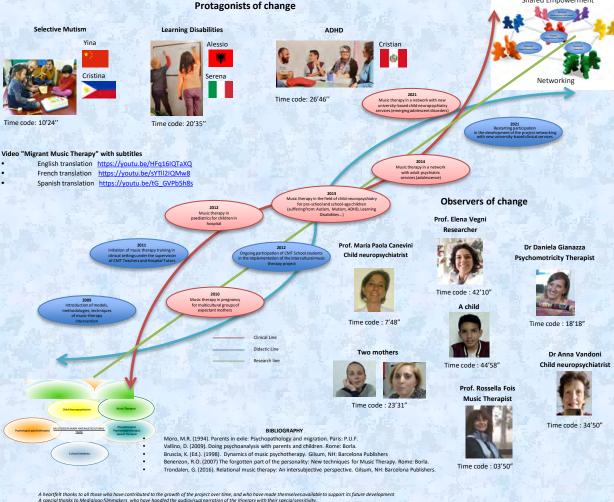
The music-therapy models taught by the CMT school also took part in this 'dialogue', thanks to their psychodynamic orientation and the attention to the relationship that the school teaches. The result was an exchange between different perspectives, but complementary and synergistic respect to the treatment objectives, able to integrate validity, according to the "variable geometry" model of the school of M.R.Moro, and able to allow a flexible therapeutic approach, modulable on the different configurations of the disorder in the phases of greater risk of growth in migration.



The 'heart' of the experiment

The presence of the new figure of the **Music Therapist** in the multidisciplinary team, and of the Music Therapy among the offers of care of the Service, has regimed a constant commitment of comparison and mustual translation of languages and different cognitive and operative perspectives, but the therapeutic approach integrated in the verbal and in the non verbal, realized by the couple formed by the Music Therapist and the Therapist to the team, has been a factor of therapeutic

- It increased the possibilities of holding during the session and of planning activities after
- the session it widened the possibilities of identification for patients, in the presence of the therapeutic puple with parental value
- it operated a reciprocal reinforcement, on the one hand, of the communication through It operated a reciprocal reiniocenties, or are our many, or are cummination manager the word, which music made more "evocative", and, on the other hand, of the communication through the sound-musical dialogue, which the word allowed to lead back to a meaning that could be verified and shared within the worf keam (M. Pavlicevic, Music Therapy in context: Music, Meaning and Relationship, 1997).



A special thanks to Medialogo filmmokers, who have handled the audiovisual narration of the linerary with their special sensitivity.

A big thank you to: Prof. Renata Nacinovich, Professor of NPI at the University of Milan Bicocca, Head of the UOC of NPI Asst Monza; Dr. Anna Riva, Head of DH DCA, NPI Clinic of San Gerardo Hospital, Monza; Dr. Maria Pia Ferrari, neuropsychiatrist, psychotherapist. NPI Clinic of San Gerardo Hospital, Monza, for making the encounter between words and music possible in the care of the patients they follow

These are the links for watching the video "Migrant Music Therapy", documenting the activities carried out so far, available online with subtitles in French, English, Spanish;

- English translation https://youtu.be/HFq16IQTaXQ
 French translation https://youtu.be/sYTII2IQMw8
- Spanish translation https://woutu.be/tG_GVPhS

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The project was carried out in a network with the maternal-child and adult psychiatric services, with shared objectives of prevention and continuity of care.

rea objectives or prevention and continuity of care. Culded prevention interventions in the phases of greatest risk for growth in migration (birth, beginning boding, adolescence) and treatment of the main Neurodevelopmental Disorders (autistic syndron the-intellectual retardation, specific learning disorders, ADHB, ODD, psychosis beginning

- desorders)

 Music therapy in school age (musical sound dialogue and songwriting to support the elaboration of the migration trauma and the recovery of the functions inindered by the cultural conflict, in the artset of language and learning).

 Music therapy in adollsering in the sound dialogue and songwriting to support the recovery of the continuation of communication that the greatered of initial signs of severe communication-relational withdrawal.

In general, the results of music therapy treatments appeared positive from the point of view of complementarity, indicated by the compatibility and reciprocal integration between Music Therapy and the specific treatments of the Child Neuropsychiatric Clinic. al results have shown the importance of combining music therapy with the usual rehabilitation and seutic treatments in the presence of a wide range of internalising, dysfunctional or externalising lens, such as anxiety disorders, SLD and ADVI.

- disorders, such as arrively disorders, S.D and API/O.

 This was perticularly vielder in the following clinical situations, whose resumesh history we have told in a video / histociteopia flagratism by / Arra / Nanton, flastiopic, fillant, Bay, 2017.

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- curions, desire to learn and distinctions, was previously, desire to learn and distinctions, and the physical distinctions of the distinctions of the distinctions of the distinctions of the distinction o

methodology followed in the process of evaluating treatment outcomes: session data were systematically collected, through analytical (Benenzon model) and narrative (infant observation model) rotocols

- the change promoted by the treatment was monitored on the basis of clinical objectivity and feedback from the child's reference adults (family members, teachers)
- the analytical and observational protocols and the audiovisual recordings were re-examined on the basis of parameters deduced from the model that has been a constant reference in our treatment work, represented by the "Reneazonian musicings-between".

g and demanding treatment, carried out in the presence of a severe ADHD picture, in comorbidity D and undestand by migration y teams, at the improvement obtained with the introduction of much as a supplement to the psychotherapy started previously, was related to the changes observed go to the 3 main reference parameters of the model, represented by:

- the child's relationship with the two figures of the therapeutic couple, initially conflictual and asymmetrical and then progressively more servere and "triangular"
- asymmetrical unterprogressively more sceneral and valagual .

 the gestatic ISO (musical sound identity of the individual, as defined by the Benenzon model) that, marked at the beginning by the migratory suffering, could become more harmonic and integrated during the treatment

The elaboration of the Protocols: indicators of change

		ISO (Benenzon)_ areas of conflict - levels of	Use of tools_ Verbal/non-verbal relationship (V = verbol; NV = non-verbol)
First months			Avoided_ V>>NV
First year			Experimental_ V=NV
Second year	Approach to PT; playful rivalry vs MT		Intermediary (playful)_ NV >V

Results achieved and future prospects

- The balance of the first 10 years of the project's life is positive, as it has enabled us: to treat a greater number of minor. Oil years old; with major neurodevelopmental disorders (usulam, numely disorders, SLD, AMPO, OOD, addesored-most psycholos), to set up integrated disbeds and filed training courses for fluxes Therapy students, which has the following the description of the displant of th
- collaboration with the School's Teachers and Supervisors to start a collaboration with the University Services with res

In the very difficult period of the pandemic we are going through, the memory of the shared achievements in the Migrant Friendly services network, supported by the documentation work of the Medialogo audiovisual production centre, was a realience factor for the project.

important was the acceptance of the project by the University Child Neuropsychiat (Gerardo Mospital in Monza which, in 2021, included music therapy among the trea sand pathologies emerging in the post-pandemic period (EBD. Eating Behaviour Dis-serce), and made available a new area of excelence where to continue, in a dimensional memerit, the path or integration of clinical teaching and research activets, fundamentar projects of the project o