

## “A HOUSE AND AN ACCORDION TO DREAM”: MULTIFAMILY MUSIC THERAPY GROUP IN A COMMUNITY

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**ABSTRACT.** This research aims to investigate the use of Multi-family Music Therapy Group (MMG) with socially vulnerable families. This is an intervention research carried out in an Administrative Region in the Federal District of Brazil. The study included 30 families enrolled in the Federal Government's Single Registry and assisted at the Social Assistance Reference Center. The data collection instruments were: home visits, semi-structured interviews, and records of meetings and supervisions. The MMG was carried out in six meetings, lasting three hours each, every two weeks, interspersed with the supervision of the team, which was formed by 15 professionals from the fields of psychology, pedagogy, social assistance, and music therapy. After the thematic analysis, two themes were identified: 1) music, affections, and reminiscences; and 2) music and dreams. It was noticed that the musical experiences helped the families in the awareness of violent forms of communication and in the transformation through expressions of affection mediated by music and its potential to evoke memories and dreams. The families imaginative capacity was a strategy to face adversities and constitutes a bridge between the real and the imaginary, nurturing the hope of a better life. The value of music is highlighted, which quickly and emotionally accesses and communicates with that audience, favoring community music therapy interventions.

**Keywords:** Music therapy; family relations; vulnerability.

## “UMA CASA E UMA SANFONA PARA SONHAR”: GRUPO MULTIFAMILIAR MUSICOTERAPÊUTICO NA COMUNIDADE

**RESUMO.** Esta pesquisa tem por objetivo investigar o uso do Grupo Multifamiliar Musicoterapêutico (GMM) junto a famílias socialmente vulneráveis. Trata-se de uma pesquisa-intervenção realizada em uma região administrativa do Distrito Federal.

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Participaram do estudo 30 famílias inscritas no Cadastro Único do governo federal e atendidas no Centro de Referência em Assistência Social. Os instrumentos de coleta de dados foram as visitas domiciliares, as entrevistas semiestruturadas e os registros dos encontros e das supervisões. O GMM foi realizado em seis encontros, com duração de 03 horas cada, com periodicidade quinzenal, intercalados com as supervisões da equipe, formada por 15 profissionais das áreas de psicologia, pedagogia, assistência social e musicoterapia. Após a análise foram identificados dois temas: 1) música, afetos e reminiscências; 2) e música e sonhos. Percebeu-se que as experiências musicais auxiliaram as famílias na conscientização das formas violentas de comunicação e na transformação por meio de expressões afetuosas mediadas pela música e seu potencial de evocar memórias e sonhos. A capacidade imaginativa das famílias foi uma estratégia de enfrentamento às adversidades e se constituiu como ponte entre o real e o imaginário, nutrindo a esperança de uma vida melhor. Destaca-se o valor da música que, com rapidez e emocionalidade, acessa e comunica com o tal público, por favorecer intervenções musicoterapêuticas comunitárias.

**Palavras-chave:** Musicoterapia; relações familiares; vulnerabilidade.

## **“UNA CASA Y UN ACORDEÓN PARA SOÑAR”: GRUPO DE MUSICOTERAPIA MULTIFAMILIAR EN LA COMUNIDAD**

**RESUMEN.** Este trabajo tiene como objetivo investigar el uso del Grupo Musicoterapéutico Multifamiliar (GMM) con familias socialmente vulnerables. Se trata de una intervención-investigación realizada en una Región Administrativa del Distrito Federal. Participaron del estudio 30 familias que se encuentran inscritas en el Registro Único del Gobierno Federal y que son atendidas en el Centro de Referencia de Asistencia Social. Los instrumentos de recolección de datos fueron: visitas domiciliarias, entrevistas semiestructuradas y registros de reuniones y supervisiones. El GMM fue realizado en seis encuentros, con una duración de tres horas cada uno. Los encuentros se realizaron cada dos semanas, intercalados con la supervisión del equipo, formado por 15 profesionales en las áreas de psicología, pedagogía, asistencia social y musicoterapia. Después del análisis temático, se identificaron dos temas: 1) música, afectos y reminiscencias; 2) y música y sueños. Se observó que las experiencias musicales ayudaron a las familias en la concientización de las formas violentas de comunicación y en la transformación por medio de expresiones afectuosas mediadas por la música y su potencial para evocar recuerdos y sueños. La capacidad imaginativa de las familias fue una estrategia para enfrentar las adversidades y se constituye como un puente entre lo real y lo imaginario, alimentando la esperanza de una vida mejor. Se destaca el valor de la música que, con rapidez y emotividad, accede en y se comunica con esa población, favoreciendo las intervenciones de musicoterapia comunitaria.

**Palabras clave:** Musicoterapia; relaciones familiares; vulnerabilidad.

### **Introduction**

People, families and communities are socially vulnerable when they do not have material and immaterial resources to face the risks to which they are exposed. Social vulnerability is also present in the unfeasibility of developing strategies that allow people to

achieve personal and collective security, such as exclusion or instability in the labor market, the fragility of social relations and irregular and/or precarious access to public services of social protection (Carmo & Guizzardi, 2018; Silva, Costa, & Nascimento, 2019).

In public policies, the term vulnerability is used to express the different situations not only of poverty, but other forms of social disadvantage, which contribute to the promotion or deterioration of health (Carmo & Guizzardi, 2018). From this perspective, it is essential to transcend the understanding of the term vulnerability, considering the specificities of each community, aiming to renew intervention methodologies to meet the needs of the individual and the collective (Musial & Marcolino-Galli, 2019).

Poor families live particular experiences beyond economic deprivation, which greatly impact their functioning (Minuchin, Colapinto, & Minuchin, 2011). The more arduous the living conditions and the limited possibilities and means of survival of the family group, the more rigid the division of roles and the smaller the space for individuation. There is the confrontation of successive crises that, despite acquiring a chaotic or unstable appearance, reveal the ability to solve problems (Goulart, Wagner, Barbosa, & Mosmann, 2015). Studies on the factors that protect and threaten family relationships in vulnerable situations show that poverty is not associated with the breaking of bonds, as families maintain a strong filial bond, mutual help in daily tasks and affection as important resources available to them (Ramires & Falcke, 2018; Silva et al., 2019).

Considering these factors, social work with vulnerable families requires methods such as the MMTG, which offers a multidimensional look at relational conflicts, which are crossed by social, economic and gender issues (Costa, Penso, Santos, & Moura, 2020). Music therapy has proven to be an important intervention modality in the care of vulnerable families (Nagel & Silverman, 2017; Nemesh, 2017; Pasiali, 2017).

The music therapist can assist individually or in groups, in health promotion, using musical experiences and the relationships that develop through them. There is no requirement that participants have prior musical knowledge, as it is understood that everyone has their own musicality, constituted beyond conventionally established musical standards (Bruscia, 2016). The music therapist's intervention transcends the prescription of music and involves the experiences of the person/group with music, classified into listening, composition, improvisation and musical recreation. The practice areas of music therapy are divided into didactic, medical, curative, psychotherapeutic, recreational and ecological (Bruscia, 2016). The present study approached the ecological area, which includes the applications of music therapy in promoting the health of families and communities.

Community music therapy develops, as in psychology, through a call to expand the clinical setting. Practices of care, reception and assistance to people in their social and cultural contexts are carried out (Cunha, 2016). The word community awakens feelings of comfort, warmth and security. In general, when stating that a person is socially included, expressions such as 'having a community', 'being in a community' are used and, on the other hand, if someone is deprived of a dignified life, society, its way of functioning and organization, is accused (Perez, 2018). Community music therapy performs systemic interventions focused on how music can build networks, provide symbolic means for underprivileged people and contribute to strengthen vulnerable groups through musical resources (Stige, 2017).

As an example of community music therapy experiences in the world, according to Stige (2017), the following stand out: the Norwegian project aimed at including people with intellectual disabilities in community music groups; the English project Scrap Metal, which involved adults with neurological impairment, their caregivers and family members, through

individual music therapy sessions, teaching of musical instruments and cultural performances; and the South African project Music for Life which includes a choir, a marimba band with local police, a percussion group, a rap group and an annual weekend music camp in preparation for a community concert.

In Buenos Aires, the participation of the elderly in popular and carnival celebrations, especially the murga (street band), is a powerful means of transforming marginalized spaces. By working with the elements of culture, through music therapy interventions, creative and expressive processes can be developed, rescuing the history of the community, body freedom and humor, which strongly appear as forms of resilience (Fideleff, 2016).

As for the experiences of community music therapy in Brazil, in a group of self-declared black women in Goiânia, Peixoto (2011) reported that making music contributed to the strengthening of ethnic-racial identity and expanded the social network of the participants. The collective musical experiences made possible the coexistence of religious and popular themes, past and present, and typical aspects of their places of origin and the current place of residence. In this study, the ability of music to evoke memories and how these memories are associated with intergenerational experiences was evidenced.

In a group of women victims of domestic violence, assisted at a shelter in the interior of the state of Paraná, it was found that making music helped them to express their emotions and difficulties in everyday relationships in the shelter. The collective musical experiences enabled reports of overcoming violence against women, the coexistence of religious themes, past and present, and aspects related to the shelter as a current place of residence. In this study, the ability of music to elucidate difficulties in interpersonal relationships is evidenced, highlighting community music therapy as knowledge accumulated in collective memory, capable of promoting humanization and mutual support (Santos, 2019).

From the framework of community music therapy, music is understood not as universal or natural, but as a phenomenon established within and through locally defined contexts. Music, in addition to art, constitutes a language specific to each territory, each social group, each person (Pellizzari & Rodríguez, 2019). Collective musical experiences are one of the most important dynamic forces for the integration and formation of the subjectivity of members of a community (Bruscia, 2016).

In music therapy with families, the music therapist uses musical experiences to improve family relationships, as music offers a context with which relationships can be evaluated. Singing and playing musical instruments together lead the family members to a symbolic level that circumvents the usual resistances in language forms and ingrained communication patterns, and allows the family to become more attuned and revive an intersubjective connection (Nemesh, 2017).

The music therapist must consider the different risks in the life of each family to assess how a musical experience shared between parents and children can generate transformation. Musical experiences work as a protective factor and music therapy as a care system that favors the assisted families to maintain and generalize the therapeutic results achieved (Pasiali, 2017).

Music therapy with socially vulnerable families is able to facilitate the development of positive parenting skills, building a healthy attachment through education and interaction (Nagel & Silverman, 2017). Music contributes to a structured and comfortable environment for such learning. As a collaborative therapy, music therapy is easily integrated with other practices such as physical therapy, speech therapy, occupational therapy and social work due to the inherent flexibility of music, filling the gaps between professionals (Nagel &

Silverman, 2017). Thus, this research aimed to investigate the use of the Multifamily Music Therapy Group (MMTG) with socially vulnerable families.

## Method

This qualitative intervention research considered the subjectivity of family relationships and music. This research is involved with processes of emancipation and protagonism, with intervention in social reality, providing participants with a space for discussion so that changes can happen (Amado & Cardoso, 2017).

Thus, the MMTG methodology, developed by Valentin (2018), was used, a new form of intervention capable of serving large groups of families, in an open modality, using musical resources as a preponderant form of bonding and communication. Inspired by Multifamily Group (Costa, Penso, & Conceição, 2015), MMTG is based on the idea that families in groups learn from each other by witnessing their conflicts or by sharing solutions already found (Costa et al., 2020).

The MMTG methodology proposes five to seven fortnightly meetings, lasting 03 hours each. The choice for this interval stems from the understanding that families need some time to put into action the reflections made during the meetings. Supervision with the team is also carried out during this interval. Each meeting is divided into three stages: warm-up, discussion and conclusion. For each context, specific themes are chosen linked to the complexity of the circumstances experienced by the participants.

It is recommended that meetings take place in an airy space where everyone can see, hear and move around. It is important that this space also offers conditions for carrying out activities in subgroups.

## Ethical aspects

After approval by the Human Research Ethics Committee of the School of Health Sciences, University of Brasília, CAAE 55935016.7.0000.0030, the participants were invited to the MMTG by the researcher at the Reference Center for Social Assistance (CRAS), during the individual and group consultations and on the visits she accompanied. As it was an open group, new participants were informed at each meeting about the research and invited to sign the IC. The names of the participants presented in the results and the discussion are fictitious to protect their identities and maintain the confidentiality of the information.

## Research location and participants

The research was carried out in an irregular occupation of an administrative region of the Federal District (FD) close to Brasília, which is invisible and is configured as a pocket of poverty. The study included 30 families represented by women enrolled in the federal government's Single Registry (CadÚnico). This is a database that gathers information on Brazilian families living in poverty and extreme poverty. Its parameters include families with per capita income of up to half a minimum wage; or up to three minimum wages of total monthly income, who seek the municipal CRAS to be able to receive social benefits (Paiva, Souza, Bartholo, & Soares, 2020). These women received the Bolsa Família benefit.

Participants had a history of difficulties in family relationships and expressed a desire to obtain guidance on raising their children. Aged between 23 and 64 years old, they were

in different stages of the family life cycle, with 19 being single, seven in a stable relationship and four married. Most are of northeastern origin, especially Bahia, Ceará and Pernambuco. Of the 30 participants, 12 were illiterate, nine had incomplete primary education, three had completed primary education, one had incomplete high school and five had complete high school.

As for their profession, 16 were unemployed, nine worked as collectors of recyclable material, three as housekeepers, one as a salesperson and one as a clerk. Regarding the family monthly income of the participants, 25 of them lived with an income of less than BRL 500.00 (approximately \$100 US dollars). When we consider the number of children per family, in general more than two, added to the care of nephews and grandchildren, the income per person is lower. All families lived in areas of irregular occupation, in houses of up to two rooms. The surroundings of the houses did not have paving, with the presence of a lot of solid waste, without basic sanitation and unhealthy environments.

At each MMTG meeting, in addition to these women, adolescents and children from their families, as well as professional educators, psychologists, social workers and music therapists, participated. Attendance at the meetings ranged from six to 21 adult participants, zero to nine adolescents, six to 23 children, and eight to 12 professionals, with an average of 40 people each.

## **Instruments**

Home visits were made to the participating families, with records in a field diary, and semi-structured interviews with questions that investigated the qualitative and quantitative participation in the MMTG. The interviews were conducted before and after the intervention, recorded in audio and transcribed.

In the six MMTG meetings, dramatic games and musical experiences were used. Dramatic games are instruments that allow exploring the dynamics of different roles based on symbolic elements. The musical experiences of improvisation, recreation, composition and musical listening have specific objectives, with different applications, in addition to having their variations and being able to be used in combination (Bruscia, 2016). For these experiments, mostly simple percussive instruments were selected, due to their ease of execution, and diversity of timbres, formats, colors, materials and sound power, such as timba, triangle, tambourine, drum, bell, maracas and caxixis. For each meeting, a report was prepared describing the activities carried out and the main topics addressed by the family members.

## **Procedures**

The first contact with CRAS was through the manager who agreed and supported the project, integrating the MMTG team. Several meetings between the team and the researchers were held with the aim of establishing the actions that would be developed to implement the proposal.

A meeting was held with families interested in participating in the MMTG, in order to clarify the proposal and raise the most relevant topics to be worked on in the meetings. Eleven families were present, represented by 13 mothers, one father, three teenagers and three children. Two psychologists, a pedagogue and a music therapist conducted this meeting, in which the main points brought up by the families were identified: the difficulty of communication; difficulty in establishing limits in the education of children; conflicts arising

from the difference in the model of education between generations; violence in intrafamily relationships; child custody dispute and lack of vacancies in day care centers.

After training, lasting 08 hours, 15 professional psychologists, social workers, pedagogues and music therapists presented the MMTG methodology, the context in which the intervention would be carried out, as well as providing integration into the team. As for the meeting place, proximity to the community was sought, allowing families to go on foot. The space had a large hall for approximately one hundred people, with adequate infrastructure to serve the subgroups. Six meetings were held with the themes: family; rules and organization; communication; transgenerationality; relationship, gender and sexuality; and life project. Such meetings were recorded on video and transcribed verbatim. For data analysis, thematic analysis was used in six stages: familiarization of the data, production of initial codes, search for themes, revision of themes, definition and naming of themes, and production of report (Braun, Clarke, & Rance 2014).

## Results and discussion

From the analysis of the MMTG, it was possible to construct two categories: affectionate music and reminiscences: “Dance a little more so we can leave!”, and music and dreams: “A house and an accordion for me to dream”. They were described and exemplified with excerpts extracted from the participants speeches. The discussion was based on the assumptions of systemic family therapy, community music therapy and other studies that contribute to the understanding of the phenomenon.

### Music, affection and reminiscences: “Dance a little more so we can leave!”

In this category, situations of violence were identified in the participants’ family relationships, with physical, psychological and sexual abuse. These situations of violence occurred in the relationships between mother and daughter, father and daughter, including gender aspects associated with violence against women, such as “I was raped when I was twelve and my father, when he found out, made me marry him [...]” (Maura), “[...] when I did something wrong, my mother got angry and I got hit on the head” (Mônica).

Through musical experiences, it can be seen that the form of communication of the assisted families was marked by violence, and it was necessary to experience non-violent forms of communication. Studies show a strong relationship between violence and family mental health, with emphasis on MG as a psychosocial intervention method that contributes to changing the way people communicate, making the family environment a learning context (Goulart et al., 2015; Tavares & Montenegro, 2019).

In the second meeting, it was proposed by the group coordinators that the participants perform a dramatization based on the situation ‘my teenage daughter went to school and came home late at night without notifying me’. The group engaged in the activity, defining characters, giving ideas, debating and smiling at the spontaneity of the participants as they played their roles. The scene begins with the mother going to the school, who looks for the principal to find out about her daughter’s whereabouts, Ana Laura, name chosen by the participants, who should have arrived home at that time, but had not contacted or given no notice.

Mother (Maura): Where is Ana Laura? (Ask the principal)

Principal (psychologist): She didn’t show up here. I haven’t seen her for a week [...]

Mother (Maura): Gee? And how do you [...]?

Principal (psychologist): What happened? Do you want help finding her? Let's go to the police station [...]

The principal accompanies the mother to the police station. Once there, the mother asks about her daughter, shyly and in a low voice.

The delegate (social worker) replies: We don't handle any occurrences of teenagers here at the police station [...] But further ahead there's a forró<sup>9</sup> party [...] Who knows, she's not there?!

At that moment, the music therapists improvised a rhythmic base typical of forró, with a timba and a ganzá instruments. Participants began to dance, and even those outside the scene moved closer and moved to the music. The atmosphere was filled with rhythm and dance. When the mother arrives at the forró party and meets her daughter, they hug and the mother (Maura) says: "Dance a little more so we can leave".

It is believed that the warm-up, the verbal discussion and the dramatic game were elements that contributed to the outcome of the scene. However, the experience of listening to music with body movements the participants experienced is especially noteworthy. This experience enhanced the reversal of roles, in which mothers put themselves in their children's shoes and remembered their own experiences as teenagers, awakening empathy and affective memory, generating a new outcome with a loving response.

During the discussion, the protagonist of the scene, Maura, briefly tells the group that forró reminded her of her teenage years. Other participants in the group commented on how they wanted to go out dancing more in their teens, but the family did not allow it. Early sexual initiation and pregnancy were described by them as ways they found to leave home and not have to submit to the rules of the family of origin. In this way, they formed their families early. However, when they became mothers and wives while still teenagers, they were faced with an overload of responsibility, aggravated by the context of poverty. This situation meant that the participants lost the possibility of engaging in leisure, fun and socializing activities, typical of this phase, and important at any stage of the life cycle, such as 'forró parties'.

Music is able to lead the individual to feel more intensely as it escapes rationality and enters other domains of the unspeakable, of sensitivity, of the unconscious. Musical interventions can create a context that promotes attachment and favors the ability of family members to restore their relationships. Musical stimulation can access reminiscences and revive life (Ridder, 2017).

Such ability to access reminiscences is correlated with the selection of songs that have meaning for the individual. Popular songs learned from the family or community group provide the individual with a sense of belonging to the community in which they participate. These songs are transmitted, most of the time, orally and, despite undergoing changes, they cross borders. It is an artistic creation by the people for the people and with a strong social character. The hallmark of popular music is that there are no records about it, not knowing for sure who the authors are and, even so, surviving time (Trotta, 2014). One might think that forró, in this musical experience lived in the MMTG, acquires such characteristics for these families and, therefore, is capable of awakening important resonances.

Thinking about forró in a Northeastern context, the origin of many of the MMTG participants, is to perceive it as an identity hallmark, a space for sharing ideas and festive interaction. Songs, hymns and repertoires affectively populate the spaces of individual and collective experiences and imprint on individuals a sense of collectivity and belonging, reinforcing affective and symbolic bonds (Trotta, 2014). With the migration of northeastern workers in search of economic opportunities, forró contributed to the maintenance of strong psychological ties with the homeland, expressing and emphasizing the diasporic effect of

<sup>9</sup> Forró is a style of very popular music and dance created by the population of the Brazilian Northeast.



these migrants (Draper, 2011).

The outcome of the scene, starring Maura, moved the group and surprised the team, for presenting a different behavior than the usual one manifested by mothers in this context. The violent expression, with little patience and hardness, the rigid body, gave way to a loving, empathetic expression, capable of becoming flexible in the face of the broken rule and showing affection, recognizing that the value of finding her daughter alive was greater than punishing her for disobedience. In this way, Maura, who was an introverted woman, of little speech and who always presented her head down, in this meeting, participated as the protagonist of the scene. Upon arriving at the forró party, seeing her daughter dancing and being taken by the rhythm, Maura gave her daughter a hug, allowing her to enjoy the moment of fun a little more. At the end of the meeting, it is clear that the group, through this scene, experienced a process of re-signification of the mother-daughter relationship.

The establishment of a field of dynamic interactions is identified there, an affective atmosphere favorable to relational changes in families. As Andolfi (1996) points out in systemic family therapy, the problem that is located in family relationships is expanded to the relationships of the context in which it occurs and, from this, new proposals are built, thus promoting interactional changes.

### **Music and dreams: “A house and an accordion for me to dream about”**

Families' ability to dream appears as a strategy for coping with adversity and traces correlations with music as they constitute a bridge between the real and fantasy worlds, nurturing the hope for a better life. Therefore, in MMTG, music is configured as a bridge between the real, concrete world and the world of fantasy, of desire, which holds the hope for a better life.

At the sixth meeting of the MMTG, the group of adults was asked to create a parody of the song *Asa Branca* thinking about their life projects. Parody is the replacement of words, phrases or the entire lyrics of an existing song, while maintaining the original melody and accompaniment (Bruscia, 2016). Written by Luiz Gonzaga and Humberto Teixeira, in a typical language of the northeastern people, this song portrays a bird symbol of migration, which, when sensing the arrival of drought, flies away from the caatinga in search of survival in other places. At the same time that it refers to feelings of sadness and loneliness, it is also linked to the idea of resistance and hope, elements identified in the group. Such a bird is a metaphor for the Northeastern people, who leave for unknown places, withdrawing from their land and their people in the hope for a better life (Pereira, Araújo, & Pereira, 2017).

The lyrics created by the group emphasize both the desire to obtain material goods, such as a new house, a car, a yacht and a farm, as well as non-material goods, such as the conquest of these goods through one's own work and not through donations, a union that is blessed by God, the possibility to walk, travel and also to rest, enjoying these goods.

|                                      |                                  |
|--------------------------------------|----------------------------------|
| 'White Wing Parody'                  | ['Paródia Asa Branca']           |
| 'I will marry in the blessing of God | ['Vou casar na benção de Deus]   |
| To live in the new house             | [Para morar na casa nova]        |
| With my work money                   | [Com o dinheiro do meu trabalho] |
| Buying a car for a ride              | [Comprar um carro para passear]  |
| And the yacht to travel, see?        | [E o iate para viajar, viu?]     |
| And rest on my farm                  | [E descansar na minha fazenda]   |
| The important thing is to dream,     | [O importante é sonhar,]         |
| because time didn't stop here        | [porque o tempo não parou aqui]  |

Don't give up, I'll have a home  
and an accordion for me to dream'

[Não desistir, vou ter uma casa]  
[e uma sanfona para eu sonhar']

In the parody, the value of the dream is seen as a way to stand firm in the face of adversity. The dream of getting married represents, in this context, an idea of transition from the family environment of origin, as a way of changing one's life. The dream of owning a home is not a new topic, as it is recognized as an ideal for almost every Brazilian, especially for socially vulnerable populations. This ideology gained strength between the 1960s and 1980s, with the creation of the National Housing System (SNH), the National Housing Bank (BNH), home ownership policies and, more recently, the Minha Casa Minha Vida (My House My Life) Housing Program, in 2009. Having a home represents protection and security for oneself and one's family and, often, the achievement of a higher social position. It involves sleeping peacefully, offering a place for the children to live, feeling valued, having peace of mind and also the feeling of having something in life (Guimarães & Pinto, 2014).

However, the reference to the accordion draws attention. This word was suggested by a member of the group, since, in the Northeastern culture, this instrument tends to be a family heritage and a resource for social mobility, leading to other physical and symbolic spaces (Trotta, 2014). The accordion, in this group context, can be seen as the element that symbolizes the fun, pleasure and socialization that music is capable of providing to people. It is also a symbol of family and cultural belonging, in which an inheritance is passed on through practice, whose rite produces a feeling of family unity.

The accordion player is an important character in the life of the *sertão* (hinterland of Brazil): he is the one who, at the same time, knows the histories and traditions of his people in depth, travels and has several stories to tell. For him, there is no lack of work that is normally performed by men (Barbalho & Calixto, 2013). Thus, the instrument can also approach the idea of protagonism, recognition, social ascension and the desire of women to assume other naturalized roles like men.

If the original lyrics of *Asa Branca* refer to the lack of minimum living conditions, the lyrics created by the group emphasize a life full of comfort and luxury. The two, however, keep in themselves the hope for better times. "The important thing is to dream, because time has not stopped here [...]" seems to emphasize a future perspective and an appreciation of the present, of the daily struggle to stay alive. It can be said that the dream presents itself as a resilience strategy. It is questioned whether the phrase "[...] time has not stopped here [...]" could be linked to the idea that what we are experiencing is a phase, something transitory, a matter of time. It is concerned, however, with the lack of reflection on the responsibility for this scenario to undergo changes. Awareness of the need for individual effort to change reality.

At the end of this meeting, the women presented the parody and sang accompanied by the guitar. Then, each participant spoke about their impressions about the life project theme. The group was agitated, and the women were excited to talk about their dreams and also about the end of their work. Many lines of thanks to the team and CRAS were expressed. And then, Mônica's phrase marked this moment: "It's not because I'm poor that I can't dream". Mônica claimed her right to dream even in a condition of vulnerability and poverty. The dream is something that cannot be considered as a privilege of some classes, but as a right of those who, even in a precarious reality, often without promising perspectives, believe in changes and use the dream as a driving force.

When working with families in situations of social vulnerability, professionals tend not to consider some existential and profound aspects of this audience, as they advocate that, due to their low level of formal education, they do not have such demands. As the poet and

writer Mia Couto (2011, p. 12) considers, “[...] dreams speak in us what no words can say”. Like music, dreams can enable the expression of contents that would not be possible through verbal language. Music and dream allow rise “[...] what is not speakable, that blind language in which all things can have all names” (Couto, 2011, p. 12). Artistic languages, therefore, give space to sensitivities, contradictions and uncertainties, allowing not only to have dreams, but to be dreamable (Couto, 2011).

## Final considerations

In this study, we investigated the use of musical experiences in the MMTG, with socially vulnerable families in a community in the Federal District. It was noticed that the families presented important changes regarding affectivity, the way they communicate with their family members and the ability to dream.

Carrying out the research with a socially vulnerable community showed how social inequality generates an abysmal distance that separates universes of privileges from harsh realities and creates bubbles that sustain discourses of disengagement from commitment to the other. When intervening in a community, professionals who work in this context need to recognize their lack of knowledge: it is learning another language to communicate; it is to feel outside and use that place to your advantage, without losing sight of the fact that your place of speech (social position, gender, age) produces different effects in this intersubjective communication.

In the MMTG, families realized that they communicated violently. They understood that, although such communication was learned in their families of origin, that is, in a transgenerational legacy, they were able to break with this communicational pattern, giving way to dialogue and expressions of affection. Some families progressively showed, during the meetings, more demonstrations of affection with their loved ones. It was found that music, by triggering memories and emotions, contributed for these expressions to be manifested.

The ability to dream was already characteristic of the group and that, in the MMG, these dreams were welcomed and valued, favoring their sharing in the group. Through the meetings, in a playful and experiential way, some mothers emphasized they learned about how to deal with their children in a more affectionate and friendly way and that they became less rebellious.

The contribution of the MMTG in the community is to value the musicality and autonomy of the participants in such a way that the repertoire of resources of socially vulnerable families is expanded, especially those who are illiterate, as they are guided more by sound than by visuality.

As for the scope of the MMTG, its ability to provide spontaneous and committed participation, and the reduction of shyness on the part of families, stands out. By bringing together children, adolescents and adults in the same space, the meeting of generations is fostered, in which participants can express their sufferings directly to each other, with the mediation of coordinators. There was the construction of a listening space marked by trust and solidarity, in which families were able to form support networks and reduce isolation. Because it was a brief intervention, it was a low-cost investment for public policy. The short-term group interventions were a positive factor, which encouraged families to solve their problems. It should be noted that, more than time, it is emotion that changes people. Therapeutic time is timeless and something that is experienced in a group intervention produces resonances and extends to other spaces and times.

As limitations of the MMTG, it is noteworthy that the coordinators do not focus on the demands of a family, but on those of the group, which may require a new MMTG or other referrals to meet the specificities of the families, identified in the MMTG itself. Another limitation is the need for a number of professionals proportional to the number of subgroups, who are qualified and willing to work in groups.

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