



Music and Motherhood

Group singing to support new mothers with symptoms of postpartum depression

**Ilaria Lega, Ilaria Luzi, Simona Mastroeni, Claudia Ferraro, Silvia Andreozzi,
Filippo Alicandro, Serena Donati, Giovanni Capelli**

National Center for Disease Prevention and Health Promotion
Italian National Institute of Health, Istituto Superiore di Sanità (ISS)



THE MUSIC AND MOTHERHOOD ITALY GROUP

ASL Città di Torino

Cristina Biglia, Maria Crisetti, Giulia Maurino, Daniela Morero, Giulia Mortara, Silvio Saccani, Maria Clara Zanotto, Paola Matossi, Rossana Oreggia, Catterina Seia, Giuseppina Viola

ULSS 6 Euganea

Pietro Grussu, Emanuela Tezzon, Valentina Cavazzana

ASL Roma 2

Patrizia Proietti, Daniela Aiello, Emanuela Menichelli, Alessandra Maria Monti, Erika Natale, Chiara Monaldi, Patrizia Magliocchetti

***Gruppo di implementazione di musica e maternità**

Centro Nazionale per la Prevenzione delle malattie e la Promozione della salute, Istituto Superiore di Sanità, Roma: Ilaria Lega, Ilaria Luzi, Simona Mastroeni, Claudia Ferraro, Silvia Andreozzi, Serena Donati, Giovanni Capelli; **Cultural Welfare Center, Torino:** Catterina Seia; **Associazione Leone Sinigaglia, Chivasso (TO):** Rossana Oreggia; **ASL TO3, Collegno:** Antonia Giordano, Sonia Scarponi, Elisa Badino, Martina Franceschinis, Romina Farina, Susanna Donzino, Elena Serra, Anna Rudino, Maura Peruzzi, Annaviola Viaggi, Ethel Onnis; **Regione Emilia-Romagna, Bologna:** Simona Di Mario; **AUSL della Romagna, Cesena:** Antonella Brunelli, Antonietta Bastoni, Angela di Ianni; **Università degli Studi di Bologna, Bologna:** Sara Pasqualoni; **ASP Cesena Valle Savio, Cesena:** Roberta Presepi; **Conservatorio Steffani, Castelfranco Veneto (TV):** Jenny Burnazzi; **AUSL Bologna, Bologna:** Stefania Guidomei, Maria Nobile, Maria Elena Montenegro, Laura Montelpare, Federica Putzolu; **Associazione Italiana Professionisti della Musicoterapia, Bologna:** Margherita Valtorta; **AUSL di Reggio Emilia, Reggio Emilia:** Daniela Bertani, Maria Concetta La Mantia, Marcella Vida, Giulia Provenzano; **Conservatorio di Reggio Emilia e Castelnovo ne' Monti, Reggio Emilia:** Ilaria Cavalca; **ASL Lecce, Lecce:** Tatiana Bisanti, Muriel Frascella, Anna Lubelli, Luciana Baglivo, Virginia Colella, Silvia Casalino; **Junior Band APS, Melissano (LE):** Lucia Melgiovanni.

AOU SS. Antonio e Biagio e Cesare Arrigo, Alessandria: Patrizia Santinon, Elisabetta Raho, Carla Pisani, Michela Testa, Selena Bricco

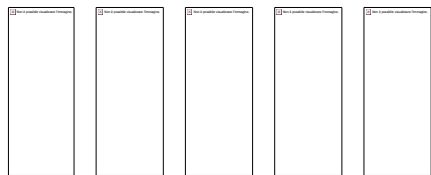
AOU S. Anna, Torino : Emilie Marion Canuto, Linda Selvestrel, Arianna Virano, Laura Gallardi, Federica Fiorello, Elodie Abram, Luca Marozio, Chiara Benedetto, Rossana Oreggia, Vittorina Buttafuoco, Elena Baldo

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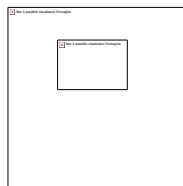
THE PROBLEM OF POSTPARTUM DEPRESSION (PPD)



One in seven women experiences PPD in high income, one in five in low- and middle-income countries



Inadequate health services



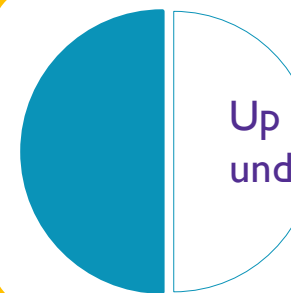
Stigma



Fear of losing child custody



Breastfeeding concerns

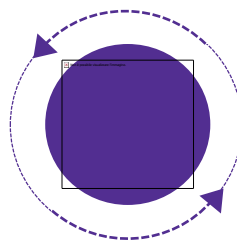


Up to 50% of PPD cases remain undiagnosed or untreated

UNTREATED PPD: WIDE-RANGING CONSEQUENCES

MOTHERS

- ↑ Risk of physical health conditions and mortality
- ↑ Health service use
- ↑ Psychiatric admissions



CHILDREN

- ↑ Risk of infant mortality
- ↑ Emotional, cognitive and behavioural problems
- ↑ Poor school performance

£ 74,000
(~ € 86,000)



The average cost to society (health and social care, QALYs and productivity losses) of a case of PPD
Two-thirds of which is attributable to the impact on the child

Bauer et al, London School of Economics 2014





PPD IN ITALY: BURDEN AND RESPONSE

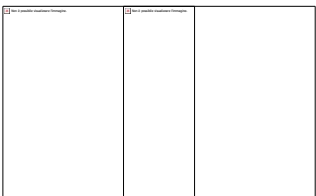


PPD affects **~13%** of mothers
impacting **~49,000** women annually

SUICIDE first cause
of maternal deaths up to 1 year

Are our health services able to identify and address the problem?

GAPS IN CARE REMAIN SIGNIFICANT:



Only **~60%** of the primary care
health services are staffed to
provide on-site treatment



Only **~20%** of the specialist
mental health services offer
dedicated care pathways

Lega et al, Eur Psychiatry 2024

What action can we take to help bridge this gap?

Initiatives enabling access to effective, innovative and low-resource PPD treatments





A PROVEN SOLUTION



A group singing intervention for mothers with PPD symptoms has been shown to significantly reduce depression severity. The intervention demonstrated strong engagement and cost-effectiveness, with substantially lower dropout rates vs controls (23% vs 43% at 10 weeks).

Fancourt et al, Br J Psychiatry 2018; Bind et al., Br J Psychiatry 2025

SCALING IMPACT

Since 2017, **Breathe Melodies for Mums** has supported more than **2,100 mothers and babies** across the UK and has been **commissioned by over 15 NHS and local government organisations**

<https://breatheahr.org/research/melodies-for-mums/>



European Region

**WHO EUROPE
INITIATIVE**

In 2021, the **WHO Regional Office for Europe** launched the “Globus: Music and Motherhood” project to **assess the feasibility** of implementing the intervention in Denmark, **Italy** and Romania

<https://www.jameelartshealthlab.org/research/research-projects/music-and-motherhood-ucl>





GLOBUS MUSIC AND MOTHERHOOD

DESIGN

Multicentre single-arm implementation study

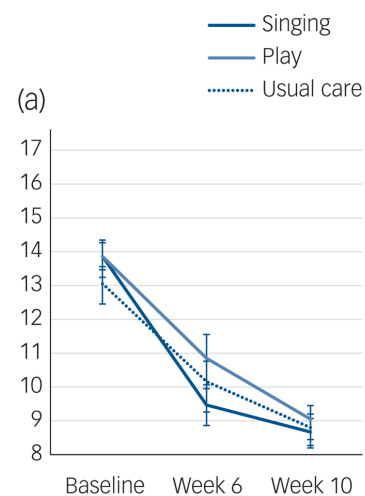
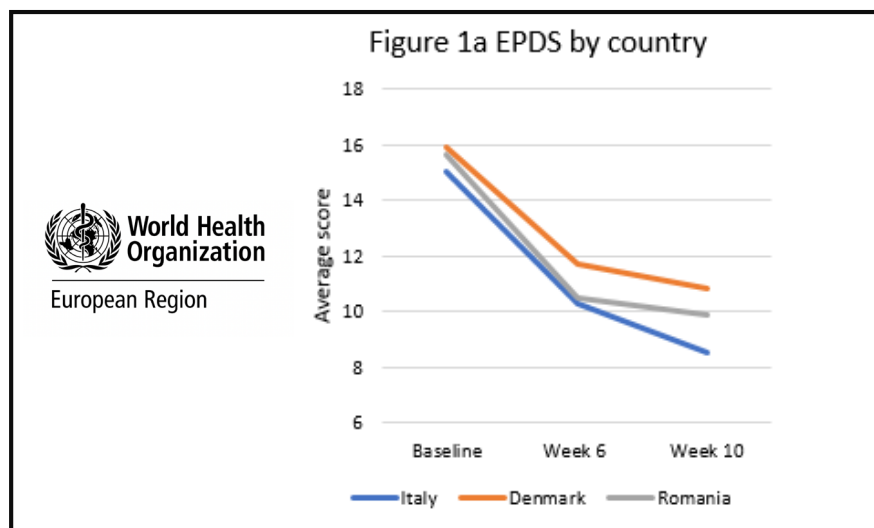
METHODS

Mixed, qualitative and quantitative

- Feasibility of implementing
- Perceived impact

PERCEIVED IMPACT FINDINGS

47 participant mothers (Italy N=23; Denmark N=11; Romania N=13)



Fancourt D, Perkins R. Br J Psychiatry. 2018;212(2):119-121.





ITALIAN PILOT AT A GLANCE

First pilot edition, led by the Italian National Institute of Health, ISS within the international project (2022-2023)



- **Significant reduction in PPD symptoms** among participants mothers
- **9 out of 10 sessions attended**
- 90% of professionals liked the intervention

The first Italian multicenter study to have applied a **social prescribing approach**

The project's international partnerships have positioned the **ISS** as a **national leader in the promotion and implementation of social prescribing**.

Lega et al, Front Med 2024

1. Clinical Referral

Healthcare professionals in primary care services identify mothers with PPD symptoms during routine postnatal visits

2. Community Bridge

Through intersectoral collaboration, health professionals and/or link workers connect the mothers with local community resources

3. Artistic Prescription

Mothers receive active “prescriptions” to participate in 10-week singing groups promoting wellness and peer-support networks

De-medicalizing Maternal Care

By blending primary care services with group-singing, the study demonstrated how health systems can maximize community resources to deliver holistic, low-cost mental health support

ISS has recently completed a second edition on 6 new sites (2024-2026)

Key priorities for scale-up:

- Adapt training for healthcare & music professionals
- Identify sustainable funding sources
- Strengthen collaboration between health services and cultural/music sector

9 groups implemented

4 regions reached

74 mothers and babies supported

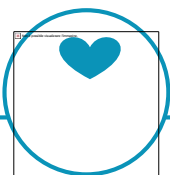
80 professionals trained





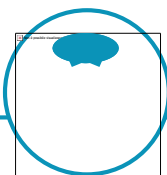
THE IMPACT

Evidence-based and hypothesized effects



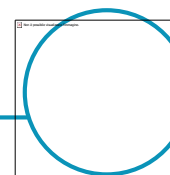
HEALTH GAIN

- Improved maternal quality of life and wellbeing
- Improved mother-infant bonding
- Improved maternal social connectedness



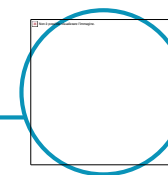
VALUE IN USE

- Access to information on targeted health and community services available to mothers
- Greater professional trust in referring to non-medical interventions and social prescribing
- Integration of arts interventions into health care pathways



EFFICIENCY & LONG-TERM IMPACT

- Enhanced use of local non-clinical resources
- Reduced pressure on primary and secondary care
- Cost-sharing among different institutions and sectors



SCALABILITY & SUSTAINABILITY

- Proven implementation across diverse settings
- Central institutional support fosters local adaptation and tailored data collection
- Contained and well-defined costs





THE VOICES OF THE PARTICIPATING MOTHERS

*“ After giving birth, I kind of withdrew into myself.
I didn't really want to interact with other people ”*

“ For me, it was a breath of fresh air, a weekly break. [...] It was impossible to feel sad during that hour ”

“ Since I started coming here and these sessions, I've actually felt like a mum ”

“ I needed help, and I found it here ”





COSTS: NATIONAL SCALING OPPORTUNITY

Costs of the first implementation at the level of a **primary care service** for mothers, children and families:
1 cycle of 10 sessions, 10 mothers

Budget item	Total value (€)	In-kind contribution (€)	Requested funding (€)
ISS research staff	990	990	0
National health service professionals	3,448	3,448	0
Music professionals	1,188	0	1,188
Materials and consumables	600	0	600
TOTAL	6,226	4,438	1,788

- **71% of the total value covered** through in-kind contributions **from ISS and the National health service**
- Intervention designed for implementation through a national network of 1,012 primary care services already collaborating with ISS
- Contained costs present an opportunity for **nationwide expansion** over a two-year period





LIMITATIONS AND NEXT STEPS

LIMITATIONS

- Limited sample size across the two editions of the Italian project
- Need for longer-term follow-up data, both for mothers and implementing organisations
- Limited evidence on cost-effectiveness in the Italian context
- Limited evidence on scalability and implementation across different settings

NEXT STEPS

- Expanding the programme across Italian regions, alongside existing care pathways
- Generating evidence on cost-effectiveness and feasibility, including comparisons with standard care/control conditions
- Generating evidence on implementation and scalability across different healthcare and community settings
- Informing the development of future social prescribing initiatives within the Italian National Health Service



www.epicentro.iss.it/materno/music-and-motherhood-seconda-edizione

