

# “METODO ALLA SALUTE” CENTRE FOR SOCIAL MEDICINE, FOGGIA

**Report of visit by Professor Alain Goussot, lecturer in Special Education at the Faculty of Psychology (Cesena), University of Bologna – 28-31 July 2009**

**Translation by Althea Muirhead**

This report concerns my four-day visit to the Centre for Social Medicine during an “intensive week” where Doctor Mariano Loiacono uses the *Metodo alla Salute* Method with groups of people from all over Italy. These people come with a variety of problems that can be placed in the general category of ‘*disagio diffuso*’\*: forms of depression, neurosis, psychosis – including severe cases – substance addiction, or, quite simply, existential malaise.

First of all, I should state that I do not diagnose or treat malaise; I am an education theorist and have for years, since before my university teaching experience, always dealt with human suffering and malaise in various forms, be it within the school context, social learning with the disabled, young offenders, substance addicts, people with deep psychic disorders, immigrants facing considerable difficulties. This, I believe, has helped me understand and formulate an approach in which individuals, along with their personal backgrounds, experiences and feelings, are placed at the centre of relationships. Thanks to my philosophical and pedagogical training I have always focused on people’s potential, their vital abilities rather than symptoms or pathologies (which does not mean ignoring them). The aim of this positive, dynamic and open approach to the other person is to build learning contexts and paths that can reactivate and mobilise the person’s vital energy in order to get them back on the path of life and thereby build their own life project. I am also unconvinced by those approaches that medicalize the human condition and formulate diagnoses based on rigid categories which leave no room for relations or the emergence of the individual’s subjectivity.

I took part in the activities of the intensive week from 28 to 31 July, during which I became fully immersed in the various stages of the group sessions and I was able to get an idea of the overall effectiveness of the method; however, my doubts on a few aspects went unexpressed during the final day’s session.

I was particularly struck by the simultaneous use of a multiplicity of forms of mediation and language to create a vital contact between people. Despite using different terminology, I am fairly in tune with the idea developed by Dr Loiacono in his epistemology of the existence of a common ground between all human beings linking them to the cycle of life: these things are found in the philosophy of Henri Bergson who talks about ‘*élan vital*’, in education theory in the experience of educationalists such as the Belgian Ovide Decroly, with his global method for learning and growth, and in the experience of the French educationalist Célestin Freinet, who talks about experimenting in and with life. We also find links with the humanist psychology and psychotherapy of Maslow and Rogers, as well as the anthropological approach of psychiatrist Ludwig Binswanger, who sees the individual as a global process related to his or her background. Another important aspect seems to be the importance given to building an affective space where contact can take place: a concept long developed by the great French phenomenologist psychiatrist E. Minkowski.

But let’s look at what I consider to be the valid aspects of the *Metodo alla Salute* Method:

- 1) A global, and I would say, almost ecological approach to human development: the idea that

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\* **Translator’s Note:** The Italian term “*disagio diffuso*” roughly translates as “widespread malaise” or “pervasive discomfort” and refers to an ever-increasing phenomenon affecting all sectors of today’s society and all aspects of life, and which is now reaching epidemic proportions.

every human being is connected to others, but also to the cycle of life (on both the biological and eco-systemic levels). This approach deals with more or less all aspects of a person's life: the person, as opposed to the pathology or disorder. The person is involved and accompanied along this journey and is seen as someone who cannot be reduced or limited merely to the manifestations of malaise that he or she is experiencing, with the aim of reactivating his or her vital energy. This technique has similarities with the resilience approach, which draws on the individual's ability to bounce back.

- 2) Loiacono's approach towards health-wholeness draws on the common ground that exists between all human beings: a common ground made up of emotions, feelings and the need to find an affective dimension. This anthropological and transcultural dimension actually transcends the origins of the individual and also what is classically known as the psychiatric diagnosis: thus, in the same space we find people with 'bipolar' disorder, schizophrenia, depression, substance addiction and existential malaise. They defy the classical boundaries and a space is created in which everyone relates to everyone else thanks to mediators, or rather, the mediation of operators, whose task it is during the various stages of the activities to encourage contact on the basis of this common ground.
- 3) In this, we can say that the common space, the space in which the emotional and affective experience is shared – defined by Loiacono as the 'womb-space' – works as a transactional space where a communicative transaction takes place between the various group participants, and this transaction favours the reprocessing of experiences through comparison with other people's experiences. The group is the setting in which individuals are accompanied through this reprocessing; it acts as a transitional space, i.e. (to return to D. Winnicott's formulation) as a transitional experience towards the reconstruction of affective relationships, beginning with the subjective processing of the personal stories shared with and listened to by the other members of the group. The other members act as transactional objects and provide the emotional containment which allows everyone to mature.
- 4) The group space is an emotional place where it is possible to meet otherness, which also means meeting others who are different from us but who, at the same time, are reflected within us. Here we see what the French philosopher Jean Jacques Rousseau defines as "others": others are other people who are different from me. The possibility of recognising one's own feelings in the emotions expressed by others is an opportunity for growth for everyone.
- 5) The use of different codes of communication is also important: speech is used, but so are gestural expression and the body, with its rhythms and timing. The language of the body is important during the session in which what is defined as the 'ritual' takes place, where participants abandon themselves to the rhythm of drums, their eyes closed. This frees up energy and also dissolves the relational atmosphere, lowering defensive barriers.
- 6) One important aspect is that nothing is left to pure emotional expression; the events taking place during the different stages are discussed and reflected upon in epistemological terms, with the aim of building a new theory of knowledge to enable everyone to grow.
- 7) As an educationalist, I also look at things through from the point of view of what is being learnt. We can say that here we find a few of the key concepts of active learning in which the learner is the active protagonist in his or her own self-learning and hence growth. We find cooperative education (self-help, c.f. Freinet ), autonomous learning and liberating education theory (awareness, c.f. Freire), mediation (different places, spaces, forms of language, and hence mediations and mediators are used to encourage the development of the capacity for understanding – Vygotsky and Feuerstein's mediated learning), community learning (the shared experience is an experience of new social expression which produces a sense and meaning)
- 8) The last, extremely positive point is the human experience, the human experience of relations: in a world where there are no more relations, where there is a deficit in

communication, the *Metodo alla Salute* Method provides the chance to experience what it means to be a relational being, a meaningful individual. We might say that there is a basic, existential dimension that favours the creation of human values, in that people rediscover their own humanity (a very similar approach to the existentialism of Kierkegaard and Sartre).

- 9) In wider epistemological terms, we are close to the positions of phenomenology and criticism of any transformation of relationships into forms of domination. The experience is certainly transgressive and far different from the dominating medical-psychiatric model whose scientific bible and diagnostic instrument is the DSM-IV with all of its classifications. This model observes in order to catalogue and classify, rather than understand, meet, know and guide.
- 10) The *Metodo alla Salute* Method also proposes itself as being totally alternative to the use of psychiatric drugs. In their day, the anti-psychiatry movement and Franco Basaglia himself already criticised the heavy use of drugs, emphasising the fact that talk of therapy cannot be limited to the use and administration of psychotropic and neuroleptic drugs. The *Metodo alla Salute* Method aims to go further, completely eliminating the use of drugs even during the therapeutic process. Although I am not qualified to evaluate, from my direct experience and from what I saw in Foggia I believe that it is possible to drastically reduce if not completely eliminate the use of psychiatric drugs in the therapeutic process.
- 11) There is no doubt that a more human and relational approach such as Loiacono's introduces a new dimension to the very concept of health: a concept which aims to show how we are all potentially sick and how we rapidly cross the line between well-being and malaise.

We would also like to point out the aspects which, in our opinion, should be taken into careful consideration: the preparation and training of operators and greater decentralisation of therapy management.

There should perhaps be more networking with other experiences, in the awareness that the Method is an important aspect of a therapeutic process, but cannot be absolutized, since other players should be involved, who are capable of reinforcing the progress that people make.

Nevertheless, my experience of the Centre run by Dr Loiacono is positive and holds much potential for further development and even innovation for those who work with people's suffering and *disagio diffuso*.

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