

RESEARCH | PEER REVIEWED

Collaboration Between Social Workers and Music Therapists in a Child Welfare Context for Unaccompanied Refugee Children: A Focus Group Study

Ole Kristian Einarsen ^{1*}, Viggo Krüger ^{1,2}, Ingunn M. S. Engebretsen ³, Brynjulf Stige ^{1,4}

¹ The Grieg Academy Music Therapy Research Centre (GAMUT), University of Bergen, Bergen, Norway

² NORCE (Norwegian Research Center), Bergen, Norway

³ Centre for International Health, Department of Global Public Health and Primary Care (IGS), University of Bergen, Bergen, Norway

⁴ Polyfon Knowledge Cluster for Music Therapy, Bergen, Norway

* ole.einarsen@uib.no

Received 4 December 2023; Accepted 6 September 2024; Published 1 November 2024

Editor: Helen Brenda Oosthuizen

Reviewers: Nsamu Urgent Moonga, Philippa Derrington

Abstract

Migration poses a complex global challenge, particularly for unaccompanied refugee children. In Norway, almost all of these children suffer from mental health issues and face settlement challenges. These young people are placed in care homes within the child welfare system, where they have the right to participate in cultural activities, in accordance with the United Nations Convention on the Rights of the Child. Research indicates that cultural activities, such as music, are beneficial for their well-being, yet access is often limited. Social workers play a crucial role in addressing these needs. This study explores how social workers reflect on the role of music in their work with unaccompanied refugee children, and the implications of this role for music therapy. We conducted semi-structured focus group interviews with eight social workers experienced in child welfare services. Thematic analysis, using the Stepwise Deductive-Inductive method, was applied. Social workers noted that music helps young people cope with emotions and facilitates dialogue. Organised cultural initiatives provide non-confrontational spaces promoting safety and belonging. However, social workers highlighted the need for knowledge, resources and competences linking music and health. The findings are discussed in the context of community music therapy, emphasising the role of music therapists as catalysts and supervisors in integrating cultural activities within child welfare.

VOICES: A WORLD FORUM FOR MUSIC THERAPY | VOL 24 | NO 3 | 2024

Publisher: GAMUT - Grieg Academy Music Therapy Research Centre (NORCE & University of Bergen)

Copyright: 2024 The Author(s). This is an open-access article distributed under the terms of the <http://creativecommons.org/licenses/by/4.0/>, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

DOI: <https://doi.org/10.15845/voices.v24i3.4071>

Keywords: unaccompanied refugee children; community music therapy; social work; interdisciplinarity; sustainability; task-shifting/task-sharing, children's rights

Introduction

Migration is a global challenge, and there is a need for sustainable solutions to meet the demands of a growing worldwide population. Because migration is linked to challenges in health and society, we will argue in this paper that music, which is a cultural phenomenon, can be part of the solution to meet the future needs of unaccompanied refugee children. The focus of this paper is to use interdisciplinary perspectives to explore unaccompanied refugee children's various possible uses of music activities, such as listening to music, playing instruments, and participating in music groups. In this semi-structured focus group study, we therefore aim to explore the reflections of social workers (SWs) on the use of music and music-related activities in Norwegian child welfare services for unaccompanied refugee children. When we refer to the use of music activities, we have three main focal points: 1) young people's everyday use of music, 2) shared use of music between the young people and the SWs, and 3) young people's use of music for participation in organised activities. As authors, we are interested in how music may or may not function as a resource for social work, in informal settings, such as everyday life at the child welfare institution, or in more formal settings, such as decision-making processes. In the text, we will from here on refer to unaccompanied refugee children as *young people*. We do this to avoid contributing to stigmatising and marginalising language use. This does not, however, mean that we do not recognise that young people face personal and sociopolitical challenges. Rather, we want to contribute to child-friendly and child-focused language, inspired by the United Nations Convention on the Rights of Children (1989). Our study addresses the demands set in the abovementioned convention concerning access to cultural- and arts-based experiences for children. The study also addresses UN Sustainable Development Goal number 17, which highlights the importance of partnerships for achieving the goals for 2030, with a united effort, stating that "it requires that different sectors and actors work together in an integrated manner by pooling financial resources, knowledge and expertise" (United Nations, 2015).

There has been increased interest in the connection between health and the arts. In 2019, the World Health Organization (WHO) published a scoping review synthesising global evidence concerning the impact of creative arts and music activities on health and well-being. The report concluded that the arts could play a role in encouraging health promotion, preventing the onset of mental illness, as well as supporting the treatment of mental illness (Fancourt & Finn, 2019, p. 57). In a Norwegian context, several single studies based on data from the longitudinal population health study (HUNT) are aligned with the WHO report. For example, findings from Hansen et al. (2015) indicate that participation in cultural activities may be positively associated with health, life satisfaction and self-esteem. Additionally, in a doctoral thesis, Løkken (2023) has suggested that cultural participation can foster health promotion and disease prevention, and that cultural activities should be embedded in public health policies (p. 65). From an educational standpoint, formal and informal use of creative arts, such as music and dance, can empower and support young refugees and newly arrived immigrants in a school setting (Marsh, 2012, p. 70). Further, Marsh (2017) emphasises that participation in music activities can positively impact the well-being of refugee children and young refugees. The same author presents a paper based on her previous studies discussing music as a foundation for a dialogic space where shared meanings can be co-created, and where peacebuilding and empathy can be facilitated (Marsh, 2019).

However, available evidence suggests that not all young people have the same

opportunities to take part in such activities (Bakken, 2022). There are differences in who participates, which activities they participate in, and how often they participate. These differences have been explained by what is often called low socio-economic status (Jacobsen et al., 2021). The sociologist Pierre Bourdieu's concept of cultural capital underscores the presence of a covert hierarchy and the unequal and unjust distribution of cultural resources within society (Bourdieu, 2002). The distribution of cultural resources in society may simply be performed on an unfair basis, and there is a need for solutions that prevent inequality, especially for populations such as unaccompanied refugee children (Andersson et al., 2021). Moreover, in a single study about social inequality in arts and cultural participation, based on a nationally representative sample involving 30,695 people, Mak et al. (2020) highlighted the importance of working systematically and consistently towards equality in the distribution of music activities, to prevent socio-demographic gaps. According to Krüger and Stige (2014), there is a disparity between the rights outlined in the Convention on the Rights of the Child and the daily realities faced by refugee children. This gap must be addressed through the development of knowledge, strategies, techniques, and practical measures.

Political Context of the Norwegian Child Welfare System

To further contextualise the background to the study, we will explain some characteristics of the Norwegian child welfare system. Norwegian child welfare is under the authority of the Directorate of Children, Youth and Families (in Norwegian: *Bufdir*). In Norway, municipalities are obliged to provide childcare services in accordance with the Childcare Act (in Norwegian: *Barnevernloven*). Articles 1-3 uphold children's right to participate in all matters concerning the child and to be included in decision-making processes. Under Article 15-8, according to the law, providers such as child welfare services are required to collaborate with public agencies and other service providers to supply a comprehensive and coordinated service for the child involved (Barnevernsloven §1-3, 15-8). The child welfare service in the municipalities needs to accommodate unaccompanied refugee children under the age of 15 in care home facilities. The child welfare service is entitled to facilitate the necessary safety and care, and to follow up on schooling, health issues, and leisure activities. The Norwegian Directorate for Immigration (Utlendingsdirektoratet) is responsible for offering children above the age of 15 placement at a reception centre for young people, and Bufdir has the administrative responsibility for these reception centres (Regjeringen, 2023).

Moreover, research highlights the importance of policies and interventions that prioritise improving the contextual factors involved in the asylum-seeking process to reduce stress and enable coping (Solberg et al., 2021, p. 1). Education and training are especially important, and as Fyhn et al. (2021) demonstrate, young refugees face a greater risk of becoming part of the NEET-population (Not in Education, Employment or Training). In building trust and space for dialogue, the role of social support comes to the forefront (Oppedal & Idsoe, 2015). According to Andersson et al. (2021), young people need to experience safety, love, and independence to become well-integrated in society. These elements are regarded as crucial in providing the foundation for personal development and social connections. The quality of the relationships between SWs and young people is crucial for building trust and safety (Kohli, 2007). The importance of taking relationships seriously is supported by research documenting that young people who have a refugee background commonly distrust adults to a greater extent than others (Eide et al., 2020). However, there seems to be a constant challenge of creating good enough structures for these elements.

Music Therapy in the Norwegian Child Welfare System

We find the perspective of community music therapy (CoMT) relevant for our study. CoMT reflects how music therapists can utilise cultural communities as a resource for health-promoting cultural engagement (Pavlicevic & Ansdell, 2004; Stige & Aarø 2012). Bruscia (2014) defines CoMT, among other practices, within the framework of ecological music therapy. Perspectives on CoMT as an ecological system-oriented discourse are particularly relevant in settings where the SWs and music therapists collaborate. Stige and Aarø (2012) propose partnership and collaboration as a possibility within an ecological understanding of music therapy in line with an ecological model of human development promoted by Bronfenbrenner (1979). For example, in a CoMT project in South Africa, relationships among children, teachers and parents were fostered to empower ecological processes to promote and support resilience and provide spaces to strengthen and support the individual children involved in the project (Fouche & Stevens, 2018, p. 7).

Most of the research that has been conducted in child welfare settings in Norway can be described as community music therapy (CoMT) (see, for example, Krüger & Stige, 2014). Drawing on experience from community music therapy research in child welfare contexts, we find literature emphasising the role of music in establishing trust and relationships. For example, Krüger et al. (2017) and Krüger and Stige (2014) have elaborated on how cultural initiatives can be a valuable resource when creating practices in such a setting. Also, McFerran (2010) reflects on how music participation for adolescents can serve as a tapestry to form identity, and build resilience, competence, and connectedness. Cultural participation among adolescents can play a significant role in ensuring both protection and participation, as emphasised by Krüger (2020). Likewise, music activities can create a sense of belonging and shared experiences with staff and peers (Wilhelmsen & Fuhr, 2019). Krüger and Diaz (2023) point to how participation in music activities can potentially have a positive impact on the lives of young migrants.

Most of the research involving children with a refugee background has focused on school-based settings (Enge, 2024; Enge & Stige, 2021; Marsh, 2012). For example, Heynen et al. (2022) evaluated a music therapy intervention designed for refugee children and adolescents in school settings. Using a mixed-method design, they conducted interviews with teachers and music therapists and collected data through questionnaires and visual analogue scales. The findings indicated that music therapy fostered social connectedness and a sense of belonging among the participants (p. 9). Moreover, studies indicate that participation in music groups can help participants with a refugee background learn coping strategies for everyday challenges, such as attending school or engaging in leisure activities (Ahonen & Mongillo Desideri, 2014; Zharinova-Sanderson, 2004). Furthermore, Gulbay (2021) examined a seven-month music therapy intervention with unaccompanied refugee children and young refugees, using hip-hop as the intervention tool. Gulbay's paper highlighted the importance of aligning with the preferences of the young people themselves.

CoMT for children with a refugee background is described in a Norwegian context by Enge (2015, 2024). Enge and Stige (2021) discuss the role of music therapy in schools as a support for refugee children. They highlight how music therapy supports the development of emotional resilience and social integration, aligning with international children's rights frameworks (United Nations Convention on the Rights of Children, 1989). This emphasises music therapy's value in enhancing the well-being and development of children within educational settings. Moreover, Roaldsnes (2017) highlights how music activities can foster self-efficacy, self-confidence, and a sense of peer-community for young people with a refugee background.

Drawing on the above, in this paper, skill-sharing and collaborative approaches in interdisciplinary teams are examined. In a CoMT context, Stige (2002) focuses on

consultation-collaboration work within music therapy. According to this view, the music therapist could take on various roles, such as being a consultant or coordinator (p. 328). Skill sharing and collaborative approaches between music therapists and others are also discussed in the context of dementia, involving the client's family or other health workers (Baker et al., 2012; Kristiansen et al., 2023; McMahon et al., 2023; Stedje et al., 2023). However, the amount of research of skill sharing and collaborative approaches in child welfare contexts, and especially in populations including unaccompanied refugee children, is limited. In a CoMT perspective, the role of the music therapist in child welfare work is not limited to providing therapy on an individual basis (Stige & Aarø, 2012). The role of the music therapist also encompasses a broader focus on collaborating with professionals within the system, in the child welfare service, in the community, and in the environment surrounding the young people (Krüger, 2020). We believe that the present study will fill a knowledge gap in the context described, as a context in which music therapists must work in collaboration with other professions to meet the needs of the young people.

Research Question

Based on the aforementioned description, we ask the following research question:

How do social workers reflect on the role of music activities in their work with young people (unaccompanied refugee children) in a Norwegian child welfare setting, and how can their experiences inform music therapy in child welfare work?

The study is contextualised within the field of music therapy. We are interested in evaluating how SWs reflect on the value of young people's everyday use of music and their participation in music activities, such as listening to music, going to concerts, or playing instruments. This interest is informed by ecological perspectives on music therapy, as described above. Additionally, we examine the benefits of sharing knowledge and skills between these two disciplines to enhance caregiving for young people in child welfare settings.

Method

To answer the research question, we selected a qualitative research approach with semi-structured focus group interviews (Krueger & Casey, 2015). We believe this method was suitable for our purpose because it allowed us to be explorative with the data material in a structured manner. The research process followed a reflexive and interpretive methodology (Alvesson & Sköldberg, 2018). During this process, we adhered to a hermeneutical perspective, emphasising the importance of reflexivity concerning our pre-existing understanding (Gadamer, 1994). According to a hermeneutic tradition as utilised in this paper, preunderstanding is not only impossible to avoid, but also absolutely necessary to understand any phenomenon. The research process involves constructing and contextualising themes and selecting theories to discuss them. In this way, data were not collected to focus on all facets of the material; but rather, the data focused on themes and subjects that were relevant to the theoretical discussion. Findings and discussion were based on context-dependent data. To ensure a comprehensive analysis, the research team was inspired by EPICURE (Stige et al., 2009), which highlights the importance of a reflexive process when conducting qualitative research.

By referring to EPICURE we wanted to particularly highlight the qualities of Usefulness, Relevance, and Ethics. The usefulness of our research can be understood in terms of its practical applications and contributions to knowledge, in our case music therapy and child welfare work. According to Stige et al. (2009), research should aim to solve real-world problems, provide insights that advance knowledge in a field, or offer innovations that

improve the quality of professional working life. Relevance refers to how closely the study aligns with current societal issues within a particular field or society. We regard research as relevant when it addresses significant questions in society or fills gaps in existing knowledge. The overarching aim of this study was to contribute to solving issues related to participation and inequality in cultural participation. As such, we believe that the findings from this study can shed light on contemporary challenges in child welfare work. Ethics in research involves conducting studies in a manner that is respectful of all participants and stakeholders. To uphold the ethical integrity of our research, we obtained informed consent, ensured confidentiality, and maintained integrity in data collection and reporting.

In total, three semi-structured focus group interviews were conducted by the first and the second author, following an interview guide. Interviews were conducted and transcribed in Norwegian and translated into English after the themes had been constructed. The interviews were held on the premises of the specified child welfare institution. After transcribing the data material and suggested themes, we invited all participants to comment on proposed themes, and the proposed themes became discussion subjects in the second and third focus groups. As such, the SWs could comment on the themes and help develop these further.

Stepwise Deductive-Inductive Method

The data were analysed using an adapted version of the stepwise deductive-inductive (SDI) method, in line with Tjora (2023). The SDI method is a dynamic two-way process between inductive and deductive levels, where empirical data is extracted from raw material into themes, which are then evaluated against the original raw empirical material (p. 20). The analysis was conducted following six steps. Each step was evaluated during the process before continuing to the next.

1. The first step concerned generating data using focus group interviews.
2. During the second step, data were transcribed by two research assistants, using offline computers and Microsoft Word.
3. During the third step, data from each interview were coded by the first and second authors.
4. Step four involved grouping codes, and the first and second authors conducted this process using colour codes. Similarities and patterns in the data material across the interviews were identified.
5. Step five consisted of developing themes and sub-themes based on the codes. The first and second authors wrote an initial draft, which they presented to and evaluated together with the third and fourth authors.
6. Step six involved evaluating the themes against the raw data material, and the first and second authors completed this evaluation process. Suggested themes were sent to participants for member check.

Population

The SWs interviewed for this paper hold positions within the Norwegian Child Welfare Service (In Norwegian: *Barnevernet*). This service provides protection for children who arrive in Norway without guardians, parents, or relatives. The municipal child welfare service is assisted by the Office for Children, Youth and Family Affairs (*Bufetat*). The main goal of the child welfare service is to ensure that children and young people live under safe caring conditions (Barne-, ungdoms- og familiedirektoratet, 2023). In Norway, SWs' roles are distributed among people with varied backgrounds and educational levels. All SWs within the child welfare service are required to have at least a bachelor's degree. SWs

within the child welfare service hold degrees qualifying them in the following professional roles: social worker (in Norwegian: *sosionom*), social educator (*vernepleier*), and child protection educator (*barnevernspedagog*). Some hold a master's degree, and most SWs pursue further education.

Participants and Selection

A total of eight SWs from two different child welfare institutions were interviewed. The focus groups were conducted with five, four, and three participants, respectively. All SWs had experience working with young people. Six of the SWs were employed as social educators, and two held administrative positions within the child welfare centres: one was head of the childcare institution, and the other was department head for shared housing. The rest of the SWs worked as contact persons and had experience with how the young people used music in their everyday lives. The selection was made strategically; we selected SWs with experience and roles that we assumed could shed light on the relevance of music activities in the everyday lives of young people connected to the child welfare service. All the participants engaged regularly with the young people in their everyday lives by providing care, safety, conversations, help with paperwork, assistance in applying for work, and so forth. In total, the participants informed us of activities taking place in seven residential care units. Each unit had four to five young people living there, with around six SWs connected to each unit. The care home facility was always supported by one or two SWs. None of the participants were trained music therapists or experienced musicians.

The Young People

In the interviews, the children's experience of engagement with music was filtered through the interpretations and observations of the adult SWs. Therefore, the voices of the young people in this paper are represented by the voices of the SWs. Our positioning does not mean that we disclaim the importance of listening to the voice of the children. Rather, leaning towards article 3 of the United Nations Convention on the Rights of Children (1989), to understand the best interest of the child, in addition to listening to the children's voices, we must also create practices where we pay attention to the voices of the adults working with the children.

To contextualise the setting of this study, we provide some background information about *young people* (unaccompanied refugee children) in Norway. Over the past ten years, the highest numbers of children arriving in Norway have come from Afghanistan (46%), Eritrea (15%), Somalia (12%), and Syria (6%), and 84 % were boys. Between 1996 and 2020, a total of 10,000 children with experience of seeking asylum were placed within the Norwegian child welfare service (Statistisk sentralbyrå, 2023). According to the Norwegian Directorate of Immigration, young people are defined as persons under the age of 18 who come to Norway without parents or other guardians, and apply for protection (Utlendingsdirektoratet, 2022, October). Studies show that there is a greater prevalence of mental health challenges, such as PTSD (post-traumatic stress disorder), stress, anxiety, and depression, among young refugees (El Baba & Colucci, 2018; Jakobsen et al., 2014; Seglem et al., 2011; Solberg et al., 2020; Vervliet et al., 2013). Further, Fazel et al. (2012) point to how the resettlement phase of the migration process can have negative effects on children, causing mental health issues (p. 280). Jensen et al. (2019) emphasise that support may be needed after resettlement, as a wide range of young people still experience mental health problems five years after arrival in a new country. Given the information presented above, the situation of the young people is deeply concerning. However, in our view, the young people of concern for this paper are first and foremost children, and their

migration or refugee story is only one part of this picture (Kohli, 2006, p. 49).

Ethical Considerations

The research process was informed by the Guidelines for Research Ethics in the Social Sciences and the Humanities (The Norwegian National Research Ethics Committees, 2022). Throughout the research process, reflexive practices were implemented to situate the researchers' own positionality, anonymity, and integrity, and address the protection of children and participants involved in this research, in line with the aforementioned guidelines. This paper includes interviews with SWs talking about music activities and situations involving young people. The social workers did not provide any confidential information about the children. All participants signed informed consent forms. This project involved data of health relevance, and ethical approval was confirmed by the Regional Committees for Medical and Health Research Ethics (REK). The interviews were recorded on an offline computer using Logic Pro. The sound files were then transcribed and thereafter analysed. All data were stored and safely secured on a locked server accessed through the Secure Access to Research data and E-infrastructure (SAFE) system at the University of Bergen.

Findings

In this section, we will present three themes with underlying sub-themes. The first theme is directed towards young people's use of music in everyday life. The second theme concerns the use of organised music activities, as well as the establishment of such activities. The third theme points to barriers when it comes to enabling young people's access to music activities in child welfare settings.

1. Music in the Everyday Lives of Young People

The first main theme refers to how the SWs experienced young people's own use of music in their everyday lives. We chose to include this as a main theme because all the SWs, in one way or another, emphasised music as a crucial part of the young people's routines, either at the institution or in leisure activities outside the institution. The SWs explained that the young people listened to music in a variety of genres, such as music from their home countries, and modern Western pop music such as hip hop and modern RnB. Most of the SWs explained that music was a positive resource for the young people. In this section, we will not focus on the music itself, but rather on how the SWs reflected on music as a resource for young people to regulate emotions, establish dialogue and ensure a sense of belonging.

1.1 Music as an integral part of everyday life at the institution

All the SWs expressed that music was an integral part of the young people's everyday life at the institution, accompanying different life situations, as described according to P1:

P1: They (the young people) listen to music on the bus, they have music on all the time.

The young people usually listened to music both before and after meetings with the staff:

P2: They have music on when they arrive for a conversation and when they leave.

P4 also explained that music was an integral part of the young people's living environment:

P4: In the care home facilities, the music is on all the time, round the clock, which again

accompanies different moods.

1.2 Music as a resource to cope with feelings and establish a dialogue

Most of the social workers reflected on how music was used by the young people to regulate, process and cope with feelings, as noted by P1:

P1: Today, there are several young people using music as a help to regulate emotions, get motivation and process sorrow.

One of the SWs described how music was used as an enabler for conversations about sensitive content:

P3: He (the young person) is using it (the music), at least as the way I have experienced it, as an introduction to the staff and others to open up and talk about longing and everything that was fine, but has now gone.

Most of the SWs explained that music was an important part of the young people's lives, but they also expressed that they, as SWs, did not actively incorporate music into their work, as articulated by P1:

P1: We don't actively go in and work with music, but of course, we have a lot of everyday situations where you pick up on the atmosphere and talk further about it.

2. Using Organised Music Initiatives for Young Migrants

The second main theme describes how the SWs considered the use of organised music initiatives and the factors important for establishing such initiatives. By using the term organised music initiatives, we refer here to music cafés, dance groups, drama groups or performances provided in the local community. The initiatives that the SWs refer to were led by music therapists, social workers and community musicians.

2.1 Establishing a safe space for young people with music activities

Most of the SWs had various experience with organising activities for the young people. One of the SWs explained that continuity and stability were important factors when facilitating low threshold activities, such as a music café:

P2: You must work consistently, repetitively (to make it work).

In meeting the young people, taking time to build relationships was described by P1 as important:

P1: We know that it takes time to build relationships and connections with these adolescents.

Some of the participants explained the importance of paying attention to the individual person when meeting the young people. P2 highlighted the simple, yet important, need to maintain a focus on young people:

P2: It is very simple and very important; you need to focus on the young people, and not the adults.

On establishing the space for music activities, it is important to let the young people decide on their aims and focus. As articulated by P7, the young people might have different visions or commitments when participating in the music activities:

P7: Maybe they're there for the social part or for a desire to play music.

2.2 Creating a non-confrontational space for the promotion of agency

All of the SWs explained that the music activities gave the young people an opportunity for a life outside the institution, creating a space for agency beyond the institutional framework. As an example, P3 highlighted that participation in cultural activities could continue even when complicated situations occurred between the SWs and the young people:

P3: It happens that you have conflicts with some of the young people in everyday situations, but still, the young person manages to get to music rehearsals on Tuesday.

One of the SWs highlighted the importance of establishing a non-confrontational zone for the adolescents:

P2: The fact that the cultural initiatives and those who worked there had a neutral role was very important. That they had the opportunity to go down there (to the activity), as an arena that they knew was non-confrontational.

3. Structural Barriers to Enabling Young People's Access to Music Initiatives

The third main theme concerns structural barriers when implementing cultural activities for the young people. By structural barriers we mean structures in the service such as competence, finances, and the individual SW's own knowledge when it comes to using music and health.

3.1 There is a need for knowledge and competences in the child welfare service

All the participants expressed a need for knowledge of music's role as a resource within the child welfare service, as noted by P1:

P1: We need structures, a place where we can go, where there are competent people who can give advice and training. For it (the use of music) to be part of everyday life in child welfare services, efforts are needed at several levels.

There is a need for competences that can be integrated into the service, as described by P1:

P1: Perhaps it's a good idea to have the competence in music and health integrated into the service, or dedicated persons, I think that would have been wise.

One of the participants highlighted a need for a system that informs the young people of the possibilities:

P8: For young people coming straight from another culture, and then placed in a random apartment in Norway, that person knows nothing about music therapy or cultural initiatives, and someone must tell them about it. They don't have a chance to ask for or demand it (music).

Establishing music activities for young people in child welfare work is a matter of listening to the voices of the young people, and doing what is in their best interest:

P1: It must be obvious that it is important for the young people. We will let ourselves be guided by their wishes, what is in their interest and what is effective, and is interesting.

3.2 The use of music in child welfare work is distributed on an arbitrary basis

A second barrier described by the SWs is that the use of music in child welfare work for young people is person dependent. According to P3, music and organised cultural

initiatives could be used by those who had a strong interest in music; for others, music could be recognised as noisy or disturbing:

P3: We do have social workers who are musicians and who use music in the service. Others aren't aware of the possibilities of music and can experience music as noise.

The individual SW's interests, resources and capacity define how music is used or not used, as highlighted by P4:

P4: It depends on the social worker, and like everything else, some of us are good at physical activity, and some of us use culture and take that with us into our work.

3.3 Financial barriers

The last barrier concerns the financial situation. Most of the SWs described how a lack of money hindered participation in ordinary cultural activities. For example, P4 describes finances as a big barrier:

P4: Finances are a big barrier. Very few of our young people want to spend their own money on this type of activity (music activities such as concert tickets). If the activity is not free, it is very difficult to make it a priority (for the young people).

Ordering external services, such as music therapy or music teachers, is very expensive and difficult to achieve, as expressed by P1:

P1: It's not just for us to buy a certain activity for 15k for all our adolescents. It wouldn't be a legal purchase for us.

Procurement laws and regulations make it complicated to buy in external projects, and projects cannot be initiated financially without complicated public processes:

P1: If we purchase something for more than NOK 10,000, according to law we are required to put the contract out for (public) tendering.

One solution to resolve the financial barrier can be to apply external funding, as outlined by P1:

P1: It is easier for us if there is another financial organisation running the cultural activities.

Discussion

The findings convey narratives that shed light on the role of music activities in a Norwegian child welfare setting. In this discussion we will explore how this can inform music therapy in child welfare work.

Firstly, according to the SWs, the young people listened to music in their everyday lives. Some listened to music in their rooms, while others used ear pods during their commute to school or appointments. Music was used to share emotional content in a conversation, and it could help the young people regulate their moods. Music was conveyed as an important part of the lives of the young people, but the SWs did not systematically use music in their work at the institution.

Secondly, the SWs highlighted the importance of organised low-threshold music initiatives, planned and organised externally to the institution. In the descriptions of such initiatives, findings indicate the importance of working consistently over time to provide stability and to build relationships and connections with and among young people. The SWs also highlighted the importance of focusing on and listening to the young people's

own voices. Organised music initiatives external to the institution made a difference in terms of agency for the young people.

Thirdly, findings indicate that there are barriers to enabling young people's access to music activities. Whether or not music activities are offered to the young people is person dependent and arbitrary. To prevent inequality and unfair practices, there is a need for competences, structures, and efforts at several levels, both bottom-up and top-down. The SWs also highlighted that it could be helpful to have dedicated persons for music activities in the services.

Lastly, the SWs pointed to financial barriers from both the perspective of the young people and the system. It was described as challenging for the institution to spend and use resources, due to a lack of funding, laws and regulations.

The Findings Viewed in Relation to Existing Research

Our findings are in several ways consistent with those of previous studies of young refugees, which have highlighted the importance of using music to create trust, safety and relationships (see, for example, Krüger et al., 2017; Krüger & Stige, 2014; Marsh, 2019; Wilhelmsen & Fuhr, 2019). Moreover, the use of music to engage in emotional conversations, as described by the SWs, is supported by research indicating that music, especially for adolescents, can be a way to negotiate and navigate identity, competence, and connectedness (McFerran, 2010). As mentioned in the introduction, the quality of the relationship between SWs and young people is crucial to establishing safety and trust (Kohli, 2007; Oppedal & Idsoe, 2015). According to the findings, building trust and quality relationships takes time and needs to be facilitated by continuity and stability (Fazel et al., 2012; Jensen et al., 2019). Furthermore, the findings align with research indicating that there are many challenges in the child welfare system regarding how to build structures for trust, relationships with peers and adults, and participation in the community (Andersson, 2021). A hindrance described in the research literature is that young people have less trust towards adults than others (Eide et al., 2020).

The findings in this paper point to a lack of structure and competence within the service on the utilisation of music and health, a finding that aligns with Krüger and Stige's (2014) study. In their study, they demonstrate a lack of dialogue in the child welfare system on how to build structures for participation to meet the needs of young people and their use of music (p. 17). One of the hindrances to using music to support the health and well-being of young people seems to be that practice is based on a person-dependent and arbitrary approach. Unfortunately, it is a well-known feature of Norwegian society that cultural participation is unequally distributed (Bakken, 2022; Jacobsen et al., 2021). As mentioned in the introduction, Bourdieu's (2002) principle of cultural capital reminds us that there is a hierarchical and unequal distribution of cultural resources among the members of society (p. 284). In social work, one of the main goals is therefore to ensure that the needs and demands of young migrants are met, in accordance with the United Nations Convention on the Rights of Children (1989). Our position is that since music plays a profound role in the lives of young people, there is a need for structures that facilitate participation and prevent social inequalities. Echoing Bourdieu (2002), we argue that opportunities for young people to participate in music are distributed unequally. This is problematic, since the right to music is based on values from the Convention on the Rights of Children (1989), which states that all children have the right to participation. Following this, and based on our findings and previous research, there is a need to develop structures to ensure the equal distribution of music activities for young people within the child welfare system.

Bottom-up Initiatives Depend upon Top-down Participatory Structures

According to the SWs in this study, there is a need for knowledge and systematic implementation of the use of music within the service. This should be informed by dedicated people with expertise, as well as by the young people themselves. This can be understood as a practice that should be informed and utilised from both bottom-up and top-down perspectives (Solberg et al., 2021). A bottom-up perspective indicates that the need for initiatives is best expressed by the young people and their carers (Wilhelmsen & Fuhr, 2019). Following a bottom-up perspective, SWs should listen to the voices of the young people and let the young people's perspectives guide how practice is formed (Kohli, 2007). It is also crucial to include the voices of the SWs and their leaders (Oppedal & Idsoe, 2015).

The SWs in our study expressed that they needed more knowledge of how to utilise music in their work, and this knowledge should be provided from an institutional level. As we understand it, the SWs felt that they did not have to be experts in music, but rather, they needed information on how to help the young people and collaborate with potential community partners. The findings indicate that SWs request structures and competent people with knowledge of how to utilise music as a resource within the child welfare service. In our view, there is reason to believe that the right to participate is best realised if bottom-up initiatives are combined with top-down, institutionally-anchored responsibility to prevent adolescents and youths from being denied the opportunity to participate in cultural activities, as indicated in the introduction (Bakken, 2022). Our findings in this paper suggest that young people who have just arrived in Norway have limited knowledge of access to music activities or music therapy. Based on this, we will argue that the SWs have a responsibility to ensure access to music, and also, to individually adapt how music is offered, for each person or social context. This may involve guiding young people towards the possibilities and benefits of taking part in cultural activities, and, for example, informing them about the health benefits of music (Hansen et al., 2015; Løkken, 2023). Research highlights that institutions such as the child welfare service and schools play an important role in facilitating cultural participation (Mak & Fancourt, 2021, p. 1). Drawing on the findings in this paper, participation in, for example, low-threshold activities can be important for the establishment of relationships and networks, and participation can be part of an everyday integration perspective, where the young people are offered opportunities to meet others.

Towards Sustainable and Interdisciplinary Use of Music

Following the above, one interpretation of the findings is that the SWs expressed a need for interdisciplinary approaches to make music and music therapy more accessible to young people within the child welfare system. In the following section, we will discuss the role of music therapy from a perspective inspired by community music therapy (CoMT). To promote music as a health resource within the context of child welfare work for young people who have a background as unaccompanied refugee children, we believe that the CoMT perspective offers a suitable theoretical framework (Pavlicevic & Ansdell, 2004; Stige & Aarø, 2012). This perspective emphasizes interdisciplinary collaboration among professions such as social workers, music teachers, and music therapists, along with their broader communities. Additionally, in CoMT, the role of the music therapist can encompass a wide range of responsibilities, from actively participating in music therapy activities to serving as a supervisor, educator, or project leader. As mentioned in the introduction, some music therapists already employ consultant and collaborative approaches in dementia care, working with health workers and relatives (Baker et al., 2012; Kristiansen et al., 2023; McMahan et al., 2023; Stedje et al., 2023).

We aim to contribute to this discussion by introducing the concept of Task

Shifting/Sharing (TS/S) (Orkin et al., 2021). TS/S is a tool that equips workforce teams with a better understanding of cultural sensitivity and context-specific topics related to the distribution of music. It is an emerging concept in public health that has garnered attention from the World Health Organization (WHO) and health professionals for its potential to enhance accessible healthcare in resource-limited settings, such as in child welfare work (World Health Organization, 2024). Task shifting refers to the delegation or transfer of specific tasks, such as music activities or arranging cultural initiatives, while task sharing involves collaborative task completion among providers with varying levels of training (Orkin et al., 2021). For example, task shifting might include educational activities, workshops, or presentations, while task sharing could involve interdisciplinary teams working together to apply tools, skills, and approaches in new domains or contexts.

In relation to the subject of this paper, the current number of trained music therapists in Norway is insufficient to meet the needs for providing music activities within the child welfare system. We argue that implementing strategies such as Task Shifting/Sharing (TS/S) in music therapy could be beneficial, leading to a more comprehensive and sustainable use of music and music therapy for young people. We propose applying TS/S on two levels.

Firstly, on an individual level, the music therapist can engage in task sharing among workforce teams in local settings, such as care home facilities or local child welfare centres. This could involve knowledge sharing to equip colleagues with skills on how to use music personally with young people, such as fostering reflexivity toward one's emotions during these interactions. Knowledge sharing can also be reciprocal, requiring the music therapist to learn from the social workers' expertise.

Secondly, TS/S in music therapy can be implemented at a systemic level, where the music therapist addresses systemic factors such as networks, knowledge development, and the establishment of projects and programs. This level of TS/S might involve engaging leadership and other key stakeholders by organizing seminars, inviting leadership to concerts, or arranging meetings between young people and leadership to meet the demands of the United Nation Convention on the Rights of Children.

Building on this, we argue that music therapists can be integral members of an interdisciplinary team, bringing their expertise in using music to address health challenges. For example, rather than having a single music therapist conduct individual sessions, several social workers could be trained to lead ongoing weekly programs, making music activities accessible to a much larger number of young people. This collaboration could foster the exchange of knowledge about music and health among social workers and others, ensuring a sustainable process and avoiding simple short-term solutions.

Implications for Practice

Based on the findings from this study, and the investigation of available theory and research, we propose the following implications for the use of music therapy practice and knowledge in child welfare work with young people (unaccompanied refugee children). Firstly, the use of music therapy knowledge should be anchored at a top level within the institution. Leaders should be involved in creating structures for collaboration, supervision, and sharing, for example, using routines for TS/S. Secondly, as we have seen narrated by the participants in this study, social workers highlight the importance of listening to the voices of the young people in creating structures for practice. The establishment of music therapy-related initiatives should be built on democratic principles, ensuring that the voices of children and young people are safeguarded, for example, by letting young people have a voice in how structures for TS/S are made. Thirdly, it is important to integrate knowledge about music therapy into courses and educational programmes for social

workers working with young people (unaccompanied refugee children). Lastly, we recommend including knowledge of music therapy as a form of consultation and/or interdisciplinary work in music therapy education programmes. By including music therapy as a form of consultation work, inspired by principles of TS/S, students can engage in developing strategies for further work in interdisciplinary teams. For example, by finding their professional identity in the spectrum between being active participants in music therapy activities and contributing to the facilitation of initiatives implemented by other professions, such as social workers.

Limitations of the Study and Further Research

This study has some limitations worth mentioning. Firstly, this study is context-specific with a small number of participants. It is situated within a local Norwegian context in a municipality in Norway. The child welfare service has a vast number of employees working with young people and providing services in other municipalities. These contexts may differ in terms of the use of music and health within the service. Secondly, it is important to acknowledge that the chosen analytical approach does not comprehensively encompass all aspects of the context investigated. The omission of children's own voices in this study is a deliberate choice, but we recommend that future research should involve them. Although this study illuminates the potential of TS/S, further research is needed on the theme of sharing/shifting tasks in a child welfare context, particularly in the field of music therapy. Additionally, research on consultation music therapy work that integrates the voices of young people and the perspectives of adult social workers is necessary.

About the Authors

Ole Kristian Einarsen is a PhD candidate at The University of Bergen. He is connected to the Grieg Academy Music Therapy Research Centre (GAMUT), where he is currently working on the project: Music, Health and Policy—a qualitative music therapy project related to unaccompanied refugee/migrant children.

Viggo Krüger works as research leader and associate professor at the Grieg Academy Music Therapy Research Centre, University of Bergen, and NORCE (Norwegian Research Center). Krüger has published books, book chapters and articles on topics such as child welfare, education and mental health.

Ingunn M. S. Engebretsen, Professor at the Centre for International Health (CIH), Department of Global Public Health and Primary Care (IGS), University of Bergen has done extensive health research with partners in low- and middle-income countries focusing on child health, nutrition and development. She leads the Global Mental health research group.

Brynjulf Stige, Professor of Music Therapy at the University of Bergen and Head of Polyfon Knowledge Cluster for Music Therapy, Norway. Main interests of research include music therapy theory and philosophy, mental health, and community music therapy.

References

- Ahonen, H., & Mongillo Desideri, A. (2014). -Heroines' Journey- Emerging story by refugee women during group analytic music therapy. *Voices: A World Forum for Music Therapy*, 14(1). <https://doi.org/10.15845/voices.v14i1.686>
- Alvesson, M., & Sköldberg, K. (2018). *Reflexive methodology: New vistas for qualitative research* (3rd ed.). SAGE.
- Andersson, E. S., Skar, A. M. S., & Jensen, T. K. (2021). Unaccompanied refugee minors and resettlement: Turning points towards integration. *European Journal of Social Psychology*, 51(3), 572–584. <https://doi.org/10.1002/ejsp.2761>
- Baker, F. A., Grocke, D., & Pachana, N. A. (2012). Connecting through music: A study of a spousal caregiver-directed music intervention designed to prolong fulfilling relationships in couples where one person has dementia. *Australian Journal of Music Therapy*, 23(2012), 4–19. <https://www.proquest.com/scholarly-journals/connecting-through-music-study-spousal-caregiver/docview/1112922988/se-2>
- Bakken, A. (2022). *Ungdata 2022. Nasjonale resultater* [Ungdata 2022. National results]. (NOVA-rapport 5). NOVA. <https://hdl.handle.net/11250/3011548>
- Barne-, ungdoms- og familiedirektoratet. (2023). *Hva gjør barnevernet?* [What does the child welfare service do?]. Barne- ungdoms- og familiedirektoratet, Bufdir. <https://www.bufdir.no/barnevern/hva-gjor-barnevernet/>
- Barnevernsloven. (1997). *Lov om barnevern* [The child welfare act]. (LOV-2023-06-16-42). Lovdata. <https://lovdata.no/dokument/NL/lov/2021-06-18-97>
- Bourdieu, P. (2002). The Forms of capital. In N. W. Biggart (Ed.), *Readings in economic sociology* (pp. 280–291). Blackwell Publishers Ltd. <https://doi.org/10.1002/9780470755679.ch15>
- Bronfenbrenner, U. (1979). *The Ecology of human development: Experiments by nature and design*. Harvard University Press.
- Eide, K., Lidén, H., Haugland, B., Fladstad, T., & Hauge, H. A. (2020). Trajectories of ambivalence and trust: Experiences of unaccompanied refugee minors resettling in Norway. *European Journal of Social Work*, 23(4), 554–565. <https://doi.org/10.1080/13691457.2018.1504752>
- El Baba, R., & Colucci, E. (2018). Post-traumatic stress disorders, depression, and anxiety in unaccompanied refugee minors exposed to war-related trauma: A systematic review. *International Journal of Culture and Mental Health*, 11(2), 194–207. <https://doi.org/10.1080/17542863.2017.1355929>
- Enge, K. E. A. (2015). Community music therapy with asylum-seeking and refugee children in Norway. *Journal of Applied Arts & Health*, 6(2), 205–215. https://doi.org/10.1386/jaah.6.2.205_1
- Enge, K. E. A. (2024). *Being with friends and having fun!: Music therapy with refugee children in a Norwegian primary school context*. [Doctoral dissertation, University of Bergen]. <https://hdl.handle.net/11250/3137938>
- Enge, K. E. A., & Stige, B. (2021). Musical pathways to the peer community: A collective case study of refugee children's use of music therapy. *Nordic Journal of Music Therapy*, 1–18. <https://doi.org/10.1080/08098131.2021.1891130>
- Fancourt, D., & Finn, S. (2019). *What is the evidence on the role of the arts in improving health and well-being? A scoping review*. World Health Organization. <https://www.who.int/europe/publications/i/item/9789289054553>
- Fazel, M. D., Reed, R. V., Panter-Brick, C., & Stein, A. P. (2012). Mental health of displaced and refugee children resettled in high-income countries: Risk and protective

- factors. *Lancet*, 379(9812), 266–282. [https://doi.org/10.1016/S0140-6736\(11\)60051-2](https://doi.org/10.1016/S0140-6736(11)60051-2)
- Fouche, S., & Stevens, M. (2018). Co-creating spaces for resilience to flourish: A community music therapy project in Cape Town, South Africa. *Voices: A World Forum for Music Therapy*, 18(4), 1. <https://doi.org/https://doi.org/10.15845/voices.v18i4.2592>
- Fyhn, T., Radlick, R., & Sveinsdottir, V. (2021). *Unge som står utenfor arbeid, opplæring og utdanning (NEET). En analyse av unge i NEET-kategorien* [Young people who are outside of work, education, and training (NEET). An analysis of young people in the NEET category]. (Rapport 2–2021), NORCE Helse. <https://hdl.handle.net/11250/2770190>
- Gadamer, H.-G. (1994). *Truth and method* (2nd, rev. ed.). Sheed & Ward.
- Gulbay, S. (2021). Exploring the use of hip hop-based music therapy to address trauma in asylum seeker and unaccompanied minor migrant youth. *Voices: A World Forum for Music Therapy*, 21(3). <https://doi.org/10.15845/voices.v21i3.3192>
- Hansen, E., Sund, E., Knudtsen, M. S., Krokstad, S., & Holmen, T. L. (2015). Cultural activity participation and associations with self-perceived health, life-satisfaction and mental health: The Young HUNT Study, Norway. *BMC Public Health*, 15(1), 1–8. <https://doi.org/10.1186/s12889-015-1873-4>
- Heynen, E., Bruls, V., van Goor, S., Pat-El, R., Schoot, T., & van Hooren, S. (2022). A Music therapy intervention for refugee children and adolescents in schools: A process evaluation using a mixed method design. *Children*, 9(10), Article 1434. <https://doi.org/10.3390/children9101434>
- Jacobsen, S. E., Andersen, P. L., Nordø, Å. D., Sletten, M. A., & Arnesen, D. (2021). *Sosial ulikhet i barn og unges deltakelse i organiserte fritidsaktiviteter* [Social inequality in children and young people's participation in organized leisure activities]. Senter for forskning på sivilsamfunn og frivillig sektor. <https://hdl.handle.net/11250/2729185>
- Jakobsen, M., Demott, M. A., & Heir, T. (2014). Prevalence of psychiatric disorders among unaccompanied asylum-seeking adolescents in Norway. *Clinical Practice & Epidemiology in Mental Health*, 10, 53–58. <https://doi.org/10.2174/1745017901410010053>
- Jensen, T. K., Skar, A.-M. S., Andersson, E. S., & Birkeland, M. S. (2019). Long-term mental health in unaccompanied refugee minors: Pre- and post-flight predictors. *European Child and Adolescent Psychiatry*, 28(12), 1671–1682. <https://doi.org/10.1007/s00787-019-01340-6>
- Kohli, R. K. S. (2006). The comfort of strangers: Social work practice with unaccompanied asylum-seeking children and young people in the UK. *European Child & Adolescent Psychiatry*, 11(1), 1–10. <https://doi.org/10.1111/j.1365-2206.2006.00393.x>
- Kohli, R. K. S. (2007). *Social work with unaccompanied asylum seeking children*. Palgrave Macmillan.
- Kristiansen, F. A., Stige, B., & Helle-Valle, A. (2023). Characteristics of music therapy with beneficial impacts on agitation in dementia. *Voices: A World Forum for Music Therapy*, 23(2). <https://doi.org/10.15845/voices.v23i2.3851>
- Krueger, R. A., & Casey, M. A. (2015). *Focus groups: A practical guide for applied research* (5th ed.). Sage Publications Inc.
- Krüger, V. (2020). *Music therapy in child welfare: Bridging provision, protection, and participation*. Barcelona Publishers.
- Krüger, V., & Diaz, E. (2023). The potential to meet the needs of refugees and other migrants through music therapy. *The Lancet Regional Health - Europe*, 29, 100637. <https://doi.org/10.1016/j.lanepe.2023.100637>

- Krüger, V., Nordanger, D. Ø., & Stige, B. (2017). Musikterapi og traumebevisst omsorg i barnevernet [Music therapy and trauma-informed care in child welfare]. *Tidsskrift for Norsk Psykologforening*, 54(10), 999–1008.
- Krüger, V., & Stige, B. (2014). Between rights and realities – music as a structuring resource in child welfare everyday life: A qualitative study. *Nordic Journal of Music Therapy*, 24(2), 99–122. <https://doi.org/10.1080/08098131.2014.890242>
- Løkken, B. I. (2023). *Engagement in cultural activity and public health: The HUNT Study, Norway* [Doctoral dissertation, Norwegian University of Science and Technology]. <https://ntnuopen.ntnu.no/ntnu-xmlui/handle/11250/3064857>
- Mak, H. W., Coulter, R., & Fancourt, D. (2020). Patterns of social inequality in arts and cultural participation: Findings from a nationally representative sample of adults living in the United Kingdom of Great Britain and Northern Ireland. *Public Health Panorama*, 6(1), 55–68. <https://iris.who.int/handle/10665/331566>
- Mak, H. W., & Fancourt, D. (2021). Do socio-demographic factors predict children's engagement in arts and culture? Comparisons of in-school and out-of-school participation in the Taking Part Survey. *Plos One*, 16(2), Article e0246936. <https://doi.org/10.1371/journal.pone.0246936>
- Marsh, K. (2012). “The beat will make you be courage”: The role of a secondary school music program in supporting young refugees and newly arrived immigrants in Australia. *Research Studies in Music Education*, 34(2), 93–111. <https://doi.org/10.1177/1321103X12466138>
- Marsh, K. (2017). Creating bridges: Music, play and well-being in the lives of refugee and immigrant children and young people. *Music Education Research*, 19(1), 60–73. <https://doi.org/10.1080/14613808.2016.1189525>
- Marsh, K. (2019). Music as dialogic space in the promotion of peace, empathy and social inclusion. *International Journal of Community Music*, 12(3), 301–316. https://doi.org/10.1386/ijcm_00002_1
- McFerran, K. (2010). *Adolescents, music and music therapy: Methods and techniques for clinicians, educators and students*. Jessica Kingsley Publishers.
- McMahon, K., McFerran, K., Clark, I. N., Odell-Miller, H., Stensæth, K., Tamplin, J., & Baker, F. A. (2023). Learning to use music as a resource: The experiences of people with dementia and their family care partners participating in a home-based skill-sharing music intervention: A HOMESIDE sub-study. *Frontiers in Medicine (Lausanne)*, 10, Article e1205784. <https://doi.org/10.3389/fmed.2023.1205784>
- The Norwegian National Research Ethics Committees. (2022). *Guidelines for Research Ethics in the Social Sciences, Humanities, Law and Theology*. <https://www.forskningsetikk.no/en/guidelines/social-sciences-and-humanities/guidelines-for-research-ethics-in-the-social-sciences-and-the-humanities/>
- Oppedal, B., & Idsoe, T. (2015). The role of social support in the acculturation and mental health of unaccompanied minor asylum seekers. *Scandinavian Journal of Psychology*, 56(2), 203–211. <https://doi.org/10.1111/sjop.12194>
- Orkin, A. M., Rao, S., Venugopal, J., Kithulegoda, N., Wegier, P., Ritchie, S. D., Vanderburgh, D., Martiniuk, A., Salamanca-Buentello, F., & Upshur, R. (2021). Conceptual framework for task shifting and task sharing: An international Delphi study. *Human Resources for Health*, 19(1), 61–61. <https://doi.org/10.1186/s12960-021-00605-z>
- Pavlicevic, M., & Ansdell, G. (2004). *Community music therapy*. Jessica Kingsley Publishers.
- Regjeringen. (2023). *Enslig mindreårige flyktninger* [Unaccompanied refugee children].

- Regjeringen. <https://www.regjeringen.no/no/tema/familie-og-barn/barnevern/enslige-mindrearige-asylsokere/id2465298/>
- Roaldsnes, M. H. (2017). *Music in health-promoting work with unaccompanied minor refugees. A qualitative study of a music group for youth with a background as unaccompanied refugee children* [Doctoral dissertation, Norwegian Academy of Music]. <http://hdl.handle.net/11250/2469525>
- Seglem, K. B., Oppedal, B., & Raeder, S. (2011). Predictors of depressive symptoms among resettled unaccompanied refugee minors. *Scandinavian Journal of Psychology*, 52(5), 457–464. <https://doi.org/10.1111/j.1467-9450.2011.00883.x>
- Solberg, Ø., Sengoelge, M., Nissen, A., & Saboonchi, F. (2021). Coping in limbo? The Moderating role of coping strategies in the relationship between post-migration stress and well-being during the asylum-seeking process. *International Journal of Environmental Research and Public Health*, 18(3), 1004. <https://doi.org/10.3390/ijerph18031004>
- Solberg, Ø., Vaez, M., Johnson-Singh, C. M., & Saboonchi, F. (2020). Asylum-seekers' psychosocial situation: A diathesis for post-migratory stress and mental health disorders? *Journal of Psychosomatic Research*, 130, Article e109914. <https://doi.org/10.1016/j.jpsychores.2019.109914>
- Statistisk sentralbyrå (2023). *Enslige mindreårige flyktninger 1996-2020* [Unaccompanied refugee children 1996-2020] (SSB Publikasjon). Statistisk sentralbyrå, SSB. <https://www.ssb.no/befolkning/innvandrere/artikler/enslige-mindrearige-flyktninger-1996-2020>
- Stedje, K., Kvamme, T. S., Johansson, K., Sousa, T. V., Odell-Miller, H., Stensæth, K. A., Bukowska, A. A., Tamplin, J., Wosch, T., & Baker, F. A. (2023). The Influence of home-based music therapy interventions on relationship quality in couples living with dementia—An adapted convergent mixed methods study. *International Journal of Environmental Research and Public Health*, 20(4), 2863. <https://doi.org/10.3390/ijerph20042863>
- Stige, B. (2002). *Culture-centered music therapy*. Barcelona Publishers.
- Stige, B., & Aarø, L. E. (2012). *Invitation to community music therapy* (1st ed.). Routledge.
- Stige, B., Malterud, K., & Midtgarden, T. (2009). Toward an agenda for evaluation of qualitative research. *Qualitative Health Research*, 19(10), 1504–1516. <https://doi.org/10.1177/1049732309348501>
- Tjora, A. H. (2023). *Kvalitative forskningsmetoder i praksis* (4th ed.) [Qualitative research methods in practice (4th ed.)]. Gyldendal.
- Utlendingsdirektoratet. (2022). *Unaccompanied minor asylum seekers*. The Norwegian Directorate of Immigration. <https://www.udi.no/en/word-definitions/unaccompanied-minor-asylum-seekers/>
- United Nations Convention on the Rights of Children. (1989). *Convention on the Rights of the Children*. United Nations. <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>
- United Nations. (2015). *Sustainable Development Goals*. Department of Economic and Social Affairs, United Nations. <https://sdgs.un.org/goals>
- Vervliet, M., Lammertyn, J., Broekaert, E., & Derluyn, I. (2013). Longitudinal follow-up of the mental health of unaccompanied refugee minors. *European Child & Adolescent Psychiatry*, 23(5), 337–346. <https://doi.org/10.1007/s00787-013-0463-1>
- World Health Organization. (2024). Adolescent health. World Health Organization. https://www.who.int/health-topics/adolescent-health-tab=tab_1

- Wilhelmsen, C., & Fuhr, G. (2019). Musikkterapi som relasjonsarbeid med ungdommer i barnevernet [Music therapy as relational work with adolescents in child welfare]. *Tidsskriftet Norges Barnevern*, 96(1–02), 22–38. <https://doi.org/10.18261/ISSN.1891-1838-2019-01-02-03>
- Zharinova-Sanderson, O. (2004). Promoting integration and socio-cultural change: Community music therapy with traumatised refugees in Berlin. In G. Ansdell & M. Pavlicevic (Eds.), *Community music therapy* (pp. 233–248). Jessica Kingsley Publishers.