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ARTICLE

Nurture and play for foster families with young children: Foster-parents' reflections on attachment-focused group intervention

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ABSTRACT

An insecure attachment history puts foster children at risk for many kinds of difficulties, which may include psychopathology. Nurture and Play (NaP) for foster families—intervention for children aged one to five years of age aims to help the new attachment relationship between foster parents and their young children develop in a secure direction. The aim of this study is to gain deeper understanding on how foster parents use their mentalization skills to reflect the different meanings of the NaP for foster families—intervention. A stimulated recall method was chosen to correspond to these research targets. It was revealed that parents' reflections were evidently focused on the child, the importance of safety and the meaning of change during the process. Emotional qualities concerning both the child and the adult were also emphasised. The foster parents were able to utilise their reflections within a wider context of place, relationships, and time. The results of the study and the core concepts of attachment theory are strongly related to each other. Furthermore, the study and its outcomes offer suggested priorities and suggestions for future research.

KEYWORDS

foster children,
young children,
family centred music
therapy,
Theraplay,
mentalisation,
stimulated recall

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INTRODUCTION

Foster children have, in almost every case, been exposed to neglect, abuse, trauma, emotional and/or physical violence, and abnormality in close relationships. Insecure attachment histories with developmental trauma put children at risk for psychopathology, which may include difficulties with social relationships, anxiety disorders, challenges in coping with stress, depression, controlling behaviour, personality disorders or developmental problems (McDonald et al., 2008; Prior & Glaser, 2006; Putnam, 2005; Rubin et al., 2010; Schofield & Beek, 2006; Weinfield et al., 2008).

When the child is placed outside the biological home the remedial experiences in a new family are of crucial importance. Fortunately, neurological research has demonstrated that the brain is “plastic” and mouldable (Siegel & Bryson, 2012). Further, nurturing, warm and non-defensive caregivers are often able to develop trusting, secure attachments (Baylin, 2015; Dozier et al., 2001).

The Nurture and Play (NaP) for foster families–intervention (Salo & Tuomi, 2008; Tuomi, 2018) is preventive and guiding as well as a rehabilitative group approach. Its aim is to help the new attachment relationship between foster parents and children aged one to five years old develop toward a secure direction. The group’s target is to promote joyful engagement and trust between the foster parent and the child. In addition, the goal is to increase parental sensitivity, mentalization capacity and emotional availability as well as empower the parents (Tuomi, 2017, 2018).

This research is focusing on how foster parents reflect different meanings of the NaP–intervention, emphasising both child and parent’s perspectives, thoughts, and feelings. Meaning making is a goal for the parents who participate in the intervention. Stimulated recall method is used to achieve the aforementioned goals.

THEORETICAL BASIS FOR THE INTERVENTION

The first author who developed the Nurture and Play (NaP) intervention together with Saara Salo who in cooperation published a workbook for families (Salo & Tuomi, 2008). NaP–intervention combines three approaches: 1) Theraplay, 2) music therapy and 3) mentalization based techniques.

Theraplay is an evidence-based model which is supported by current research and theory (Booth et al., 2014; Wardrop & Meyer, 2009). Theraplay recreates the early attachment process for the child and parent with its emphasis on the child’s emotionally younger needs (Finnell, 2013; Mroz Miller et al., 2010) and helps the child to feel safe and develop trust (Booth et al., 2014; Lindaman & Lender, 2009; Rubin et al., 2010). Theraplay helps the child to accept the care provided from the foster or adoptive parent by offering concrete physical care (Booth et al., 2014; Finnell, 2013; Mroz Miller et al., 2010; Rubin et al., 2010). In order to develop feelings of being competent and valued, Theraplay accepts the child as she/he is in a warm, caring, attentive manner (Mroz Miller et al., 2010). In summary, Theraplay aims to reduce behavioural, externalising problems with children (Booth et al., 2014; Finnell, 2013; Mäkelä & Vierikko, 2004).

Music therapy’s techniques and methods, especially singing, are used in the intervention (Tuomi 2017; 2018). Because of the non-verbal nature of music, the use of music in therapy presents as a non-threatening and inviting medium for children with a history of neglect and abuse (Burkhardt-Mramor, 1996; Drake, 2011; Hong et al., 1998; Layman et al., 2002; Robarts, 2014). Music is also seen as a possible way to connect family members with a new and encouraging way of engagement

(Salkeld, 2008) and in that way increases the generalisation of the benefits of music therapy to other environments (Layman et al., 2002). Music therapy can provide an environment for the children to explore positive and creative connections with others (Drake, 2011; Hong et al., 1998; Layman et al., 2002; Salkeld, 2008). Music can facilitate a well-attuned, contained mother-infant interaction even at later stages of development (Drake, 2011; Salkeld, 2008). Further, the nurturing and self-soothing aspects of music are mentioned in literature (Herman, 1996; Hong et al., 1998). Music, with its therapeutic qualities, is considered as a secure base or safe haven from which a child is able to explore (Drake, 2011) and regulate emotions (Hasler, 2008; Robarts, 2014). The music therapist is seen as a facilitator in building healthy relationships within the family (Salkeld, 2008) and being present (Hasler, 2008; Robarts, 2014).

A well-developed capacity to mentalize is critically connected to the capacity to create safe attachment relationships (Fonagy & Target, 1997; Fonagy et al., 2012; Pajulo et al., 2015; Slade et al., 2005). Mentalisation is described as understanding one's own and others' behaviour in terms of underlying mental states and intentions (Fonagy et al., 2012; Slade, 2005). This understanding not only helps a person to regulate emotions but also promotes communication between family members and creates stability in relationships (Pajulo et al., 2015; Slade, 2005). The concept of reflective function (RF) is used in conjunction with the concept of mentalization especially when it comes to research studies (Kalland, 2014, 2017; Slade, 2005). Reflective function, RF, is a conscious act based on conscious cognitive processes and efforts. Parental reflective function refers to the parent's capacity to represent and understand the breadth of his/her child's internal experience and is intrinsic to sensitive parenting (Slade, 2005). Parental embodied mentalizing (PEM) refers to parenting which is not only verbalising but also a bi-directional communicative channel of desires, feelings, or thoughts, based on nonverbal, and often unconscious, body movements of the entire body (Shai et al., 2011).

Reflective functioning is especially central when it comes to foster parenting. The ability to handle negative emotions of the child and the ability to "step back" when parent's own negative emotions arise are key elements when attuning sensitively to the child's emotions and understanding the motivational factors behind the behaviour. In this way the reflective functioning, RF, helps the foster parent to maintain a holistic, many-sided, and integrated image of the child in a positive manner of engagement (Baylin, 2015).

NURTURE AND PLAY FOR FOSTER FAMILIES: INTERVENTION PROTOCOL

NaP for foster families is provided in a group setting consisting of 4-6 foster children with their foster parent(s). Altogether, the intervention consists of 15 sessions, divided into two periods, an intensive period, and a follow-up period (Table 1). The intensive period takes place over the course of one term (August-December or January-May) and includes seven weekly or bi-weekly sessions led by two tutors. For the first 45 minutes, children and their foster parent(s) are together for the intervention, followed by another 45-minute discussion group for the parents while the children may play in another room. Four additional meetings with the parents are provided, two in the beginning, one in the middle, and one at the end of the process. After the intensive period, there are three follow-up sessions, one every other month during the following term. During the follow-up, families also receive individual meetings with their social worker to discuss their child's unique situation (Tuomi, 2018).

Session	Nurture and play process
1	Meeting with the parents, information about the intervention and the process (90 mins)
2	Meeting with the parents, reflective questions about the arrival of the child (120 mins)
3	1 st session with children and parents together, focus on child (45 + 45 mins)
4	2 nd session with children and parents together, focus on child (45 + 45 mins)
5	3 rd session with children and parents together, focus on dyads, lyrics of plays and songs given to take home (45 + 45 mins)
6	Meeting with the parents, feedback with the help of video excerpts of positive episodes in interaction from session 1-3, reflective questions about good and challenging situations and moments with child, "observe the child" – homework (120 mins)
7	4 th session with children and parents together, focus on dyads (45 + 45 mins)
8	5 th session with children and parents together, focus on peers (45 + 45 mins)
9	6 th session with children and parents together, focus on peers (45 + 45 mins)
10	Meeting with the parents, video feedback from sessions 7-9, reflecting "observe the child" – homework, reflective questions about parents' coping and their own strengths, feedback from the tutors – two standpoints of strengths and progression of dyad and one point for future pondering (120 mins)
11	7 th session with children and parents together, intensive period ends, diploma for participating, extra sweets, dyad gets NaP – bag to be taken home (45 + 45 mins)
12	1 st follow-up session (45 + 45 mins)
13	2 nd follow-up session (45 + 45 mins)
14	Individual meetings with the parent(s) and the social worker of the child (45 mins)
15	3 rd follow-up session, the whole intervention ends (45 + 45 mins)

Table 1: Nurture and Play (NaP) for foster families–intervention manual (Tuomi et al., under preparation)

The structure of the sessions includes familiar and foreseeable elements but, at the same time, always introduces something new (Table 2). The two tutors must be sensitive in situations and capable to attune to each dyad and the group as a whole. This also means a capacity to make quick changes to the plan and react to the here and now situation in a responsive and yet safe manner.

Arrival and departure songs provide exact frames for the meetings. The chairs are placed in a circle in a sparsely furnished room. There is one chair for every dyad and the child sits on his or her parent's lap. This is to maximise the physical time together. The caring activities are included in every session in at least three different activities by stroking, applying lotion, and feeding. In addition, parents are asked to find two lovely features of the child with the help of which the lyrics of the song "Twinkle, twinkle little star" are rewritten and the child's "own song" created. The play activities are chosen to support the positive interaction between the child and the parent. Mutual and shared joy and the experiences of success are in focus and therefore the activities must be challenging but not too hard to achieve. The regulation of emotions is important during play activities by both stimulating and calming down. The small accessories (i.e., lotion, cotton ball, soap bubbles, egg maracas) are

collected in little paper bags. Bags are waiting for the dyads after every session and after the last session the bag may be taken home. The purpose of the take home bag is to enhance the transfer effect from therapy session to everyday life.

Session plan
Arrival song
Hello song
Taking care of little hurts with gentle massage with body lotion (including a song)
Three-four play activities (e.g. blowing bubbles or cotton balls, playing with balloons, playing with egg shakers, engaging in action songs including clapping and other motions)
Calming down (stroking with a cotton ball/ feather/ by hand while singing gently)
Nurture by feeding with little delicacies and child's own song (child is settled down in the lap and suitable treats are provided by the parents while singing gently)
Goodbye song
Departure song (same as in the beginning but with different words)

Table 2: Nurture and Play (NaP) for foster families—intervention protocol

DEVELOPMENT AND PRELIMINARY FINDINGS OF THE NAP–INTERVENTION FOR FOSTER FAMILIES

Because the NaP–intervention for foster families was new, an ongoing assessment was needed. The purpose of the questionnaire (Tuomi et al., under preparation) was to redefine the methods of the intervention to support the new attachment relationship in the best way possible. In addition to the intervention development, the idea was to provide a framework for forthcoming research.

The questionnaires, created by the authors, were based on attachment focused interviews such as Parent Developmental Interview (PDI) (Aber et al., 1999) and Working Model of the Child Interview (WMCI) (Zeanah et al., 1994). The intention was to map parents' subjective experiences of the intervention with a numeral one to five scale. The viewpoints of mental coping of the child and parent, attachment between the child and parent regarding both standpoints, the capacity of parenting with this child, and the amount of play and sing activities used at home were considered. In addition, some questions were focused on the parent's view on how much she or he felt that the child was a source of joy and how they estimated the child's social abilities. Five groups of children aged one to five years completed the NaP for foster families—intervention prior to this research; 21 foster parent participants from these groups returned both pre- and post- questionnaires which served as a starting point for the actual research project. Simple quantitative analysis was completed by counting average values from the questionnaire answers and comparing the pre- and post-figures with each other. The intention was to provide descriptive statistics for the overview purposes.

Based on the average values of the parental feedback ($N = 21$), the NaP for foster families—intervention had effects on the qualities detailed in Figure 1. The use of play activities and songs used

at home showed the greatest positive change from before and after intervention; a +0.66 increase in mean value indicates that the NaP–intervention can be implemented in the family’s everyday life. According to the questionnaires the results concerning the child’s attachment to the parent and the parent’s attachment to the child showed improvement as well. The child’s attachment to the parent increased by +0.61 and the parents’ attachment to the child increased by +0.57 after the intervention. The child’s social abilities as well as the child’s engagement with the parent also showed some improvement, at an increase of +0.38. Other measured areas, such as the child’s social abilities and parental capacity, showed some improvement as well but the difference between pre- and post-responses to the questionnaire items were minor.

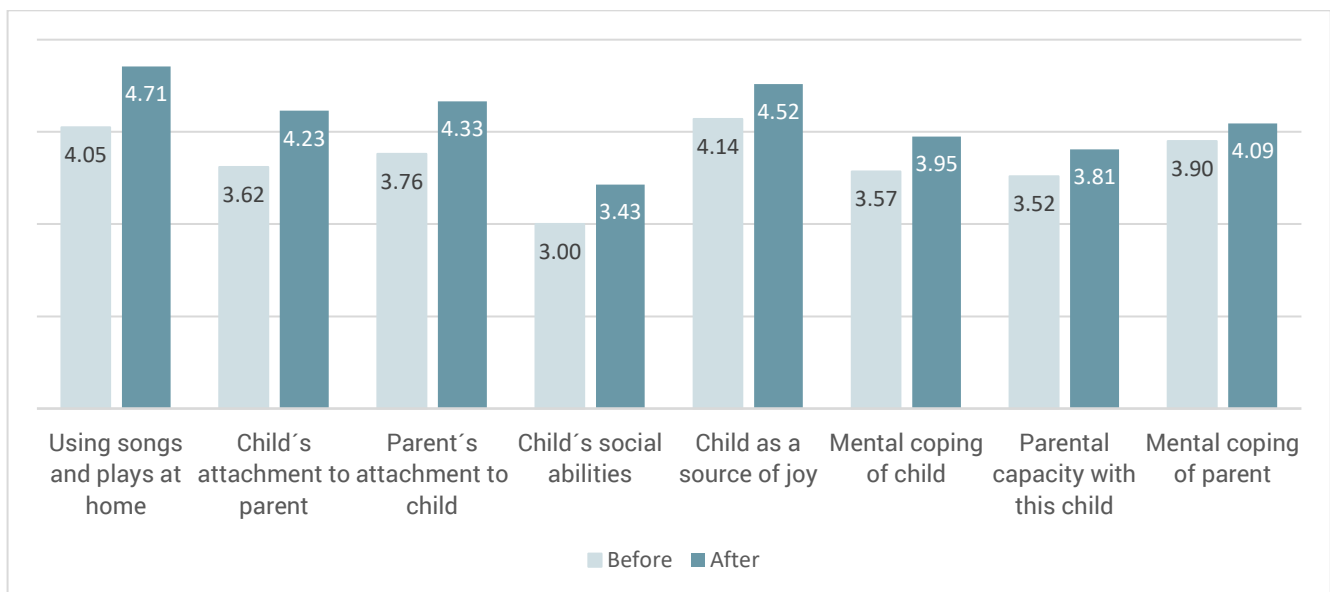


Figure 1: Average results from pre- and post-intervention questionnaires (scale 1-5, $N = 21$)

These results encouraged further and deeper study of what subjective meanings foster parents offer to the NaP–intervention. NaP–intervention has been studied as a group intervention for prenatally depressed mothers in a randomised controlled trial (Salo et al., 2019). The results showed that the intervention group displayed higher maternal sensitivity and RF and more reduction in depressive symptoms than the control group. However, the research concerning children from age one to five is lacking and the context of foster families is new.

RATIONALE FOR THE SELECTION OF THE RESEARCH METHOD

A client’s subjective viewpoint serves as a valuable standpoint for the evaluation of a therapeutic process and its meanings. In recent music therapy literature, the parent’s viewpoint has been taken widely into consideration (i.e., Flower, 2014; Kehl et al., 2021; Lindenfelser et al., 2008; Oldfield et al., 2003; Oldfield, 2011; Savage et al., 2020; Thompson & McFerran, 2015; Thompson et al., 2019). Videos have been used as a tool in music therapy research interviews to help informants memorise past situations more accurately. Video recall was used with music therapy and art therapy students to map out how learning occurs in different domains of knowledge (Langan & Athanasou, 2002). An unusual

perspective was utilised in a participatory action research project where the child client joined as a co-researcher (Hakomäki, 2013). Video elicitation interviews were used with a target to explore the ways in which the parent and therapist describe their experiences of music therapy (Flower, 2014).

Stimulated recall interview, SRI, method has been used in the therapy research context for almost 60 years (Kagan et al., 1963). SRI offers a good and inbuilt resource for practice-oriented research by promoting meaningful, flexible interplay between clinical practice and scientific research (Vall et al., 2018). It provides participants with maximum cues for reliving the therapeutic experience by means of video-tape playback and may therefore be used as an arena to gain new insights about clients themselves or for therapists to find new ideas about how to proceed in therapy (Kagan et al., 1963; Vall et al. 2018). In addition, the researchers may tap into underlying processes that may not be accessible otherwise (Huang, 2014). Stimulated recall allows the families to become analysts of their own activity (Carayon et al., 2014). In music therapy, stimulated recall method has been used in research with music therapists when the focus was to detect which elements of music therapy are responsible for its positive effects (Pater et al., 2019).

The stimulated recall method was selected for this study for several reasons:

1. The time between the intervention and interview was over two years which would have made remembering detailed information from the sessions challenging.
2. Supporting parents' ability of mentalization is one key target in NaP-intervention. Stimulated recall method highly supports this goal.
3. It may be difficult to translate the process into words since a large part of the intervention occurs on an experiential level (Pater et al., 2019). Videos may assist in verbalising thoughts and feelings of the intervention.
4. Honouring and respecting the clients' subjective perspectives when evaluating meanings of an intervention is the therapist-researcher's leading clinical guideline. Therefore, accomplishing research in the same way was ethically sustainable and without contradictions.
5. Music therapy research contains a limited amount of literature concerning video recall. With the population in question (foster parents) this approach was possible and the opportunity unique especially within social and child protective services.

Study design and ethical considerations

The research process and study design were multi-dimensional and included several phases (Figure 2). The recruiting of the informants was strongly based on voluntary undertakings. Participation in the study did not influence receiving the NaP-intervention. Also, the informants had a right to withdraw from participating in the study at any time throughout the research process. The overall intention was to avoid any kind of power dynamics caused by the fact that the researcher was also the therapist.

Data gathering was completed in six months, after which the data rested for one year. During that time the original idea of doing qualitative video analysis to develop client centered evaluation and meaning making was changed; the STR method was selected as the actual research method. At this

point the final aim of the study was developed: to gain a deeper understanding on how foster parents use their mentalization skills to reflect the different meanings of the NaP for foster families–intervention. The preliminary findings were delivered to the participants before this paper was submitted for publication.

The study design strictly follows the ethical instructions of the University of Jyväskylä. Receiving compulsory consent forms from different parties, including biological and foster parents and the authorities, was a long but essential process both ethically and legally. The anonymity of the children and parents has been strictly protected. This had an effect on both the process of analysis and the presentation of the results since the data was not analysed on a case-based manner.

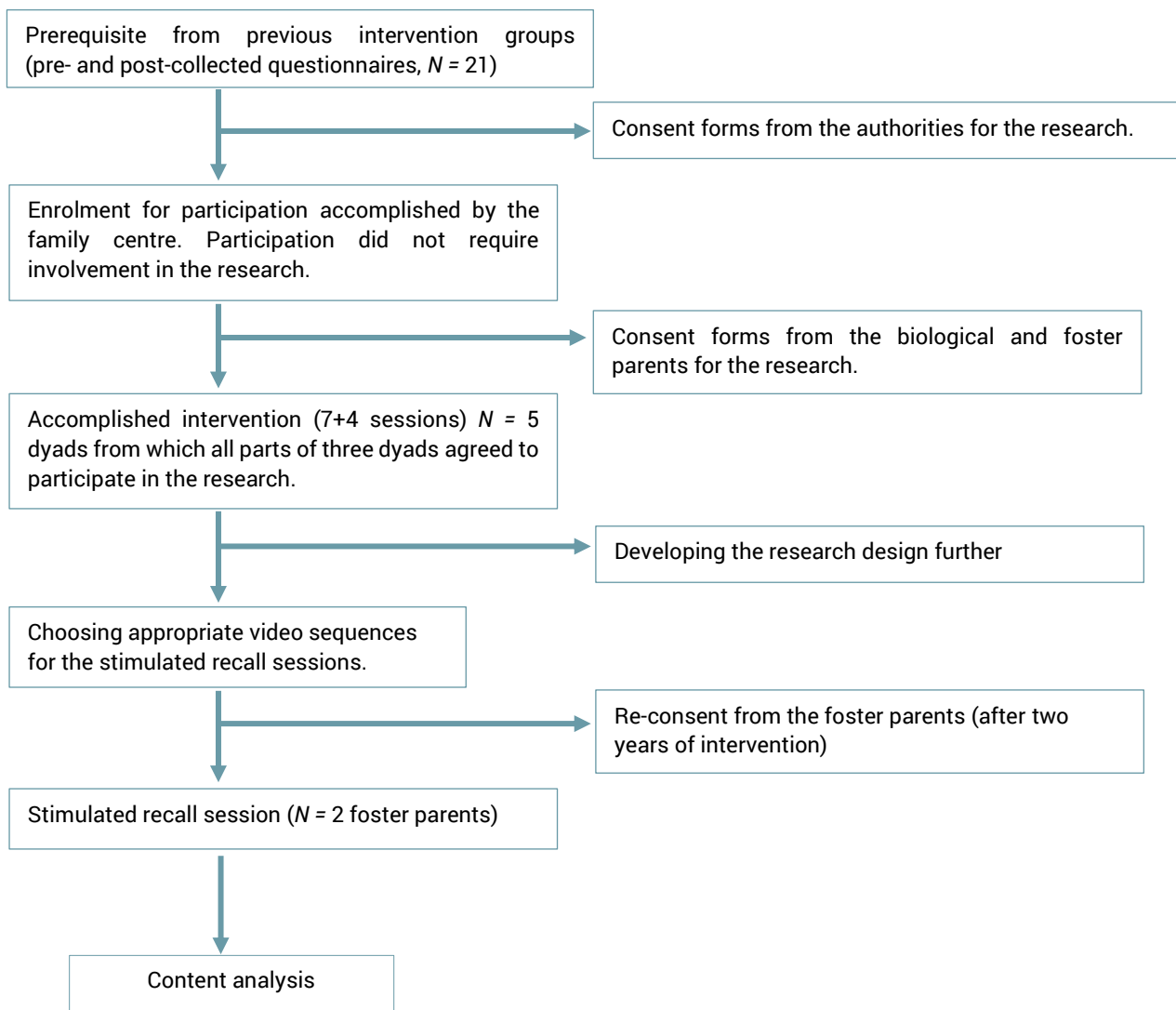


Figure 2: Study design

DATA ANALYSIS

The secondary data of this research were the video recordings from the group sessions. There were two different cameras in the room, each placed accordingly to record from opposite sides of the room. The cameras were standing alone which meant that there were no cameramen shooting or moving the

cameras. There were five dyads in this group and the authorisation from all parties involved in the intervention (biological parents, foster parents, and the social authorities) was finally received for two children.

Initially, the researcher became familiar with the reflective notes made by the two instructors of the group. However, since the reflective notes did not seem sufficiently detailed for sampling purposes, the video data was also utilised to stimulate recall. The video recordings of the whole process were watched two times (one time per child) providing detailed transcriptions from the video material. With the help of these transcriptions the video clips for the stimulated recall session were identified. The researcher looked carefully over different criteria for sampling the data (Plahl, 2007; Scholtz et al., 2007). The sequences chosen had to fulfil the following criteria:

1. The child and the parent were fully visible and could be seen with a direct facial view.
2. Something happened for the first time – the event was somehow meaningful and unique and the integrity of the NaP process as many-sided as possible.

The duration of each chosen video clip was two to six minutes and altogether six to seven excerpts were chosen for the purposes of the two SRI sessions.

The primary data of the research included recordings from the stimulated recall interview sessions which took place after two years and three months of the end of the actual intervention. One separate stimulated recall session was actualised for both parents with the duration of 120 minutes each. The preliminary findings were sent to the parents, and they were able to comment, add and/or remove the material as they wanted. In this way the parents' opinions and viewpoints were highly valued through the whole research process and the co-researcher partnership was emphasised.

The following instructions were given in the beginning of the SRI sessions:

The reflections may be focused on *what the child thinks or feels* during the NaP sessions and *why might that be*. In addition, the reflection might be focusing on *what do you think and feel* during those sessions and *why might that be*. You may also reflect *what do you think about all that now*, after two years of the intervention. If something else comes into your mind, please feel free to share that. There is no right or wrong way to reflect – just do it in your own way. The most important thing is that you are able to share all the essential matters which you think are relevant.

The role of the interviewer in the sessions was to keep the focus of the discussion in alignment with the above-mentioned instructions. The instructions were repeated as necessary but otherwise the target was to give as much space for a free reflective talk as possible.

The stimulated recall sessions were audio and video recorded and transcribed by the first author. Video recordings were not used in transcribing because the audio recordings were detailed and unambiguous enough. The phenomenological paradigm's intention was to examine the data as openly and fairly as possible by considering what the data reflected about the phenomena on hand. The qualitative and inductive content analysis took place with the help of Atlas.ti program (<https://atlasti.com/product/what-is-atlas-ti/>). First the irrelevant data was removed including the

notifications of other children or the overall remarks of the current situation (i.e. weather or covid-19). The systematic coding was carried out in an inductive way in order to identify meaningful themes that addressed the research questions (Bengtsson, 2016). The first round of coding was broad and aimed to stay faithful to the original text and expressions of the participant. Codes were grouped by moving back and forth between grouping the codes and the original text and the expressions. Next, the codes were categorised by grouping related codes together (Tuomi et al., 2021). Finally, categories were formed and translated to English for categories, subcategories, and descriptive comments.

Conceptualising took place when the results were compared with the attachment theory. These considerations are reflected in the Discussion. The presented quantitative figures demonstrate the volumes of the appearance and may be classified as descriptive statistics.

RESULTS

The presentation of the results has been divided so that tables which summarize the results are placed in the middle of the explanatory text.

The thorough content analysis of interviews resulted in 218 codes from which seven categories were developed. The categories reflect the main themes around which the foster parents' interviews were constructed. The categories are: 1) Emotions of child; 2) Emotions of parent; 3) Actions of child; 4) Actions of parent; 5) Relationship between child and parent; 6) Group functioning and activities; and 7) Benefits of NaP-intervention. In the categories, the word "parent" refers to the foster parents.

When observing the categories with simple quantitative analysis it seems that the child is the focus of the parents' reflections (Figure 3). The *Emotions of child* ($N = 61$) and *Actions of child* ($N = 47$) categories are most often presented. Further, the category of *Emotions of parent* ($N = 40$) is prominent whereas the rest of the categories are clearly of minor importance.

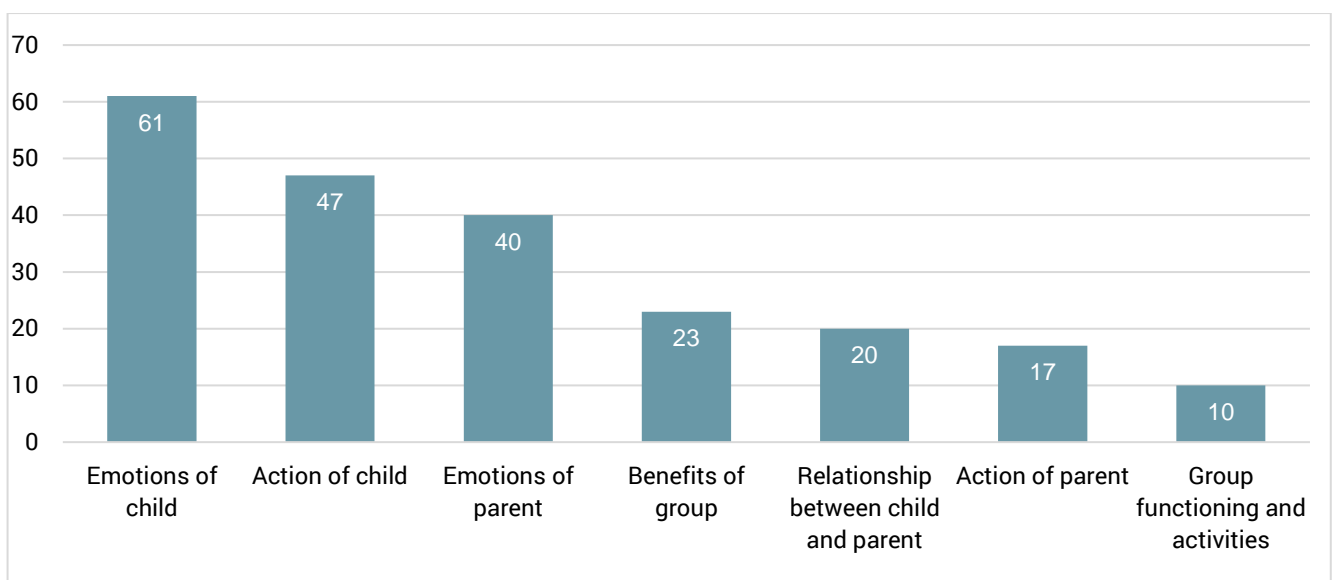


Figure 3: Quantitative appearance of categories

Next the categories are represented, focusing first on the child, then the parent, the relationships between them and finally the NaP–intervention.

Emotions and actions of child

According to the findings, the category Emotions of child ($N = 61$) is displayed in multifaceted ways (Table 3). Again, if we look at the results with simple numbers the most often mentioned features of emotions are concerning Safety and trust ($N = 12$), in addition to Cheeriness and fun ($N = 10$), Relaxation and good feeling ($N = 8$), Interested and expectant ($N = 6$) and, Satisfied and pleased ($N = 6$). The Safety and trust subcategory may be seen as a head category for the others. The feeling of safety is required in order that the child can be cheerful and relaxed, interested in the environment and feeling satisfied (Ainsworth, 1974; Bowlby, 1988). Categorising was helpful to maintain sufficient detail and to present data as authentically as possible without moving to meta levels (Tuomi et al. 2021).

Category ($N =$ number of codes)	Subcategory	Description of subcategory (direct quotes from interviews)
Emotions of child ($N = 61$)	Safety and trust ($N = 12$)	Feeling of safety; Familiar structure because of which more trusting; Situation is familiar, and child is accustomed to it
	Cheeriness and fun ($N = 10$)	Child is cheerful; Joyful; Looks like child is having fun
	Relaxation and good feeling ($N = 8$)	Feeling nice and comfortable; Seems to be relaxed; Calms down
	Interested and expectant ($N = 6$)	Interested and curious; Excited and expectant
	Satisfied and pleased ($N = 6$)	Child is satisfied and enjoys; Child is delighted and pleased
	Feeling of mastery and capability ($N = 6$)	I can, and I am able; I can decide and manage; Boldness to try
	Uncertainty and confusion ($N = 6$)	Face looks serious; Confusion and uncertainty in the beginning of the process
	Shyness and foreignness ($N = 3$)	Shy towards new people; The foreignness of the situation
	Stressed and doubtful ($N = 3$)	Doubtful about what is going to happen; Stress of the first meeting
	Turmoil caused by placement ($N = 1$)	Placement to our family happened just 1.5 months ago

Table 3: Emotions of child

When looking at the timeline, the parents' reflections of the above-mentioned emotions are present in the later phases of the process. Earlier phases of the process are evident with the following subcategories: *Uncertainty and confusion* ($N = 6$), *Shyness and foreignness* ($N = 3$), *Stressed and doubtful* ($N = 3$), and *Turmoil caused by placement* ($N = 1$). These emotions, mostly present in reflections of the beginning of the process, might even be connected to insecure emotions. The main category for these subcategories would be more difficult to determine since, for example, uncertainty and doubtfulness is also a normative demonstration of secure behaviour in new situations (Ainsworth, 1974; Bowlby, 1988) in addition to which shyness might relate to the personality of the child.

One important task of the NaP for foster families–intervention is to create experiences of success for the child which are connected to positive self-esteem and self-image. Parents bring this viewpoint up in the subcategory of *Feeling of mastery and capability* ($N = 6$). They refer to these kinds of emotions in a positive manner like “I can, and I am able” and can detect pride in their child's appearance.

The *Actions of child* category ($N = 47$) seems to be quite many-sided as well. The parents suggested that the children are *Interested and willing to explore* ($N = 13$) and, on the other hand, *Settled down and focused* ($N = 9$). The categories might be even seen as opposite to each other but also reflect and support the NaP for foster families–intervention's important task of regulating the emotions through exploratory and calming functions (Schore 1994, 2001). In addition, the content of both categories appears to be positively displayed (i.e., “Open to explore” and “Settles down peacefully”) which might refer to the foster parent's feeling of success with this target. It should be noted that these subcategories are not present in parents' reflections until later phases of the NaP process.

Category ($N =$ number of codes)	Subcategory	Description of subcategory (direct quotes from interviews)
Actions of child ($N = 61$)	Interested and willing to explore ($N = 13$)	Interested in the environment and other people; Alertness in the situation; Wants to try things eagerly; Open to explore
	Settled down and focused ($N = 9$)	Child can focus and concentrate; Settles down peacefully; Behaviour is nice and smooth
	Behaviour in NaP and elsewhere ($N = 9$)	Behaviour is different than at home / at this moment; Behaviour is the same as at this moment
	Personality of child ($N = 7$)	Child makes jokes and has good sense of humour; Good memory; Vigilant; Temperamental
	Contact and touch ($N = 3$)	Child is satisfied and enjoys; Child is delighted and pleased
	Meaning of situation familiarity ($N = 3$)	Child holds my hand; More daring to be in contact with the instructor
	Behaviour changes during NaP–intervention ($N = 3$)	Child's behaviour has changed positively

Table 4: Actions of child

The subcategory *Behaviour in NaP and elsewhere* ($N = 9$) reveals that foster parents' can see both similarities and differences in a child's behaviour compared to other situations. Parents reflect on past and present times as well as different environments and can, in this way, link the behaviour in NaP both by timeline and context.

The parents' reflections reveal that the most important component in the categories *Emotions of child* and *Actions of child* are issues around safety. This is apparent while cross analysing the categories with each other. Actually, *Emotions of child* category's subcategory *Safety and trust* ($N = 12$) may be linked to every subcategory under the *Action of child* category. The same phenomena may be seen with the subcategory *Meaning of situation familiarity* ($N = 3$) which could be connected to every subcategory concerning *Emotions of child*. This reveals the importance of safety within this context and this population according to foster parents themselves.

Another central issue seems to be the change from category to category. The *Behaviour changes during NaP-intervention* subcategory may be combined with every subcategory concerning the *Emotions of child* as well. Though, the actual change is not mentioned so often by parents since the number of codes is quite low ($N = 3$).

Emotions and actions of parents

When looking at the category *Emotions of parent* ($N = 40$), it seems that many kinds of feelings are related to participating in the NaP-intervention (Table 5). Parents describe that their emotions are connected to *Relaxed and peaceful* ($N = 11$) emotions which include a natural and easy-going way of being. Parents describe that the feeling is nice and calm which help them to be relaxed. The link between the aforementioned feelings and the subcategory of *Trust to people and environment* ($N = 5$) may be seen quite clearly. In order to be relaxed and peaceful one has to be able to trust and feel secure. According to parents this is possible because the environment and situation gets more familiar over time. Trusting refers both to the child and other adults, i.e., trusting that the child will manage or trusting that other adults are on the same wavelength and "on the same boat". *Comfortable, and intimate feeling* ($N = 4$) is referred to in connection to nurturing activities during which the intimacy and warm and gentle touch appeared. On the other hand, finding one's own inner child and laughing freely is important to adults as well; this is apparent in the subcategory of *Fun and excitement* ($N = 4$). All the above-mentioned subcategories are present at the later stages of the NaP process.

According to the parents, participating in the NaP-intervention is not always easy or fun. This is evident in the subcategories *Mixed feelings, and tired* ($N = 7$) in addition to the *Tensed and suspect* ($N = 5$). Attending the group is considered compulsory, viewed both negatively and positively. It is good to be forced to step outside the home and meet other people but sometimes it feels very tiring. The parents sometimes feel overloaded, and this causes mixed feelings concerning the NaP group. Further, meeting new people in a new situation might be stressful and cause tension and even a feeling of panic. It appears that these reflections take place with respect to the beginning of the process.

Memory is different from video ($N = 4$) subcategory refers both to the child's feelings and parents' own feelings. Parents' reflections reveal that the memory of the situation is more negative than emotions observed on the video. *Experience of success* ($N = 1$) is something which is brought up only

once concerning parents themselves. This notion is connected to a situation where the child's strong reaction did not change the parent's way of being or doing things.

When it comes to the category *Actions of parent* ($N = 17$) it seems that parents' reflections are concerned with power related issues (Table 6). Related to the subcategory *Adult / child directed action* ($N = 5$) the foster parents are consciously both directive and non-directive in their actions toward the child. The subcategory of *Changing way of doing* ($N = 1$) is related to this because reflections include the consideration of what would have happened if the adult had behaved differently.

Different perspectives around *Foster parenting* ($N = 4$) are also discussed. In this subcategory parents reflect on the differences between foster and biological parenting and discuss foster parenting from the perspective of a work role. Further, the *Future* ($N = 3$) of the child and child-adult relationship is considered in terms of the child's life path (i.e., is the child's life path going to be different from her/his parents) as well as future emotional and therapeutic support the child will be needing.

When cross analysing the categories of *Emotions of parent* and *Actions of parent* it seems that connections between them are quite hard to find. The *Actions of parent* subcategories are not so tightly connected to emotions but merely more meta-reflective considerations. *Actions of child* subcategories are connected more directly to the child's behaviour whereas *Actions of parent* subcategories are more widely examined through causal connections which expanded the discussion into a meta-level. Actually, only the subcategories *Adult / child directed action* and *Difficult to concentrate* are connected with the actual action in the groups.

Category ($N =$ number of codes)	Subcategory	Description of subcategory (direct quotes from interviews)
Emotions of parents ($N = 40$)	Relaxed and peaceful ($N = 11$)	Feels relaxed and peaceful; Looks easy-going
	Mixed feelings, and tired ($N = 7$)	Semi-forced to attend (both good and bad thing); Mixed feelings; Feeling tired and overloaded
	Trust to people and environment ($N = 5$)	Others at the same level; Environment and people have become familiar; Feeling more confident
	Tensed and suspect ($N = 5$)	New situation and meeting new people caused tension and suspense; I was a bit panicky
	Comfortable, and intimate feeling ($N = 4$)	Warm and comfortable; Gentle, and intimate feeling
	Memory is different from video ($N = 4$)	Nice to watch afterwards; Memory was more negative than how it looks in video
	Fun and excitement ($N = 4$)	Playful and fun, one gets excited herself; It's aloud to laugh and be emancipated
	Experience of success ($N = 1$)	Feeling that we did the right thing at that point was an experience of success

Table 5: Emotions of parents

Category (<i>N</i> = number of codes)	Subcategory	Description of subcategory (direct quotes from interviews)
Actions of parents (<i>N</i> = 17)	Adult / child directed action (<i>N</i> = 5)	Now we just do like this and don't ask any questions; I give freedom to the child and do not guide so much
	Foster parenting (<i>N</i> = 4)	It's different to be in a work role than as a foster parent; Foster parenting is different compared to biological parenting
	Future (<i>N</i> = 3)	In this relationship the conflicts will be continuing; Hopefully the life of the child will be different from the biological parents; What kind of treatment will the child need in the future?
	Changing way of doing (<i>N</i> = 1)	How would the child had reacted if I had done something differently.
	Difficult to concentrate (<i>N</i> = 1)	Strong reactions of the child caused me difficulties in concentration
	Expectations (<i>N</i> = 1)	I didn't come to look for the answers.

Table 6: Actions of parents

RELATIONSHIP BETWEEN CHILD AND PARENT

The category of *Relationship between child and parent* (*N* = 20) is built depending on two main themes: Contact and attachment.

The subcategory *Contact and position* (*N* = 8) include different kinds of remarks concerning both the adult's and child's way to be with each other. Parents pay attention to the child's eye contact both by consciously seeking it and, on the other hand, giving the child the freedom to look at the other. These positions are noticed in the same way; all the positions are interpreted to reflect that the child felt good. *Contact and position* subcategory seems to be linked with the earlier subcategory of *Adult / Child directed action* in addition to the *Power* (*N* = 2) subcategory which points out that this theme is somewhat present within this kind of setting and with this population. In addition, it should be noticed that these reflections are present throughout the NaP process.

The *Attachment and trust* subcategory's comments are related to the later phases of the NaP process. Foster parents note that the relationship has changed during the NaP process; the familiarity, feeling of security and trust has grown. In addition, matching moments could be detected, and the relationship is brought up in terms of novelty. The placement was very recent (approximately 1-2 months) which the parents reflect on. This subcategory is strongly connected to the earlier mentioned *Turmoil caused by placement* concerning child's emotions. One note is made about *How other person's emotions affect the other* (*N* = 1); in this case, how the child's negative emotions effect the adult's emotions.

Category (<i>N</i> = number of codes)	Subcategory	Description of subcategory (direct quotes from interviews)
Relationship between child and adult (<i>N</i> = 20)	Contact and position (<i>N</i> = 8)	Child approaches the face of parent and seeks eye contact; Did not consciously try to turn the child towards myself; Position shows that child feels comfortable
	Attachment and trust (<i>N</i> = 7)	The chemistry between us seems to have matched; Attachment and smooth proximity; Familiarity and trust towards child
	Power (<i>N</i> = 2)	Who is in charge; Flexibility in guiding
	New relationship (<i>N</i> = 2)	We are new for each other; Fresh relationship
	How other person's emotions affects the other (<i>N</i> = 1)	Emotions of child affects adult

Table 7: Relationship between child and parent

Comments concerning NaP–intervention

The parents articulate different kinds of remarks concerning NaP–intervention's special features (*N* = 10) (Table 8). They point out that NaP is a *Different kind of group* (*N* = 2) compared to other groups targeted to families. NaP is more participatory with children than just talk between adults. Two basic components of the intervention are also brought up by parents: *Structure and predictability* (*N* = 3) and *Playful and cheerful atmosphere* (*N* = 2). Directed situations are seen as positive since the predictability increases the feeling of safety. Both the playful way of doing and the cheerful ambiance help the child and the parent to join the activities.

Category (<i>N</i> = number of codes)	Subcategory	Description of subcategory (direct quotes from interviews)
Functioning and activities of NaP (<i>N</i> = 10)	Structure, and predictability (<i>N</i> = 3)	Structured, and directed situation; Predictability in proceeding with functions; Doing things not just being
	Activities did not transfer to everyday life (<i>N</i> = 3)	I couldn't use the methods directly at home; At home there is more freedom and less structure
	Playful and cheerful atmosphere (<i>N</i> = 2)	Easy to go with the playfulness; Cheerful being
	Different kind of group (<i>N</i> = 2)	More child-adult and adult-child guiding and doing than just chatting in coffee table

Table 8: Functioning and activities of NaP

Benefits of NaP–intervention category ($N = 23$) was developed because the parents seem to enjoy several advantages while attending the group (Table 9). Parents feel that participating in the group makes the attachment bond develop faster and has a positive effect on the interaction of the child and parent compared to just being at home. In addition, *Attachment, connection, and interaction* subcategory ($N = 6$) includes the ideas of deepening the connection and helping the child to “find” a new adult (parent) in his or her life. This is somewhat connected to the subcategory of *Being and doing together* ($N = 5$) which is considered positive. NaP meetings “forces” the adult to be present for the child and enables an intimate connection. Even if coming to the group is sometimes hard (compared to the earlier subcategory of *Mixed feelings, and tired* in the category of *Emotions of parent*) it is perceived as important to be alone with the child, be focused on him/her and leave the house.

Two subcategories were formed based on the meaning of the NaP: *Important for parent* ($N = 6$) and *Important for child* ($N = 2$). The parents emphasise the importance of the group more for themselves than for the children. Peer support is considered meaningful as a means of shared experience in life. Further, the new placement and therefore a fresh relationship is supported in NaP. When it comes to children, the parents are not so specific but overall point out that attending the group is important and positive effects can be detected. Connection between these subcategories and the subcategory of *Being and doing together* (5) is quite clear. Parents feel that the group gives them important time and space to be with this child, concentrating just on him or her and being close to each other.

Category ($N =$ number of codes)	Subcategory	Description of subcategory (direct quotes from interviews)
Benefits of NaP– intervention ($N = 23$)	Attachment, connection, and interaction ($N = 6$)	NaP helped to build connection and attachment; Interaction got better; Child “found” a new adult
	Important for parent ($N = 6$)	Support for functioning with an unfamiliar child; Peer support from other parents; Helpful for adult
	Being and doing together ($N = 5$)	Being just the two of us; Doing together: Being present and near each other
	Adult directedness ($N = 3$)	Adult doesn’t get startled about child’s strong reactions; Child cannot define situations by shouting and raging but situations are led to end
	Important for child ($N = 2$)	Positive influence; Important for child
	Rhythm to everyday life ($N = 1$)	NaP gives structure and rhythm to everyday life

Table 9: Benefits of NaP–intervention

Structure is brought up in two other subcategories: *Adult directedness* ($N = 3$) and *Rhythm to everyday life* ($N = 1$). Parents’ sentiment include the concept of who is in charge. Can the child define how situations continue? Can the adult be secure and stable even if the child’s reactions are very strong? On the other hand, one comment concerns the perception that NaP gives additional structure to their everyday life because of regularly occurring group meetings.

DISCUSSION

Parental attendance has increased in recent years within the music therapy service (Flower, 2019). The growing amount of literature published since 1990 (Tuomi et al., 2017) indicates that music therapy with families may now be considered a field of its own (Tuomi et al., 2021). NaP for foster families supports this ecological thinking and the importance of including family in the intervention.

When re-examining the selected research method in this study, it seems that stimulated recall interview (SRI) holds its place as a relevant method for evaluating the meanings of this intervention. There were several points in reflections where parents were repeatedly able to combine the emotions or actions of the child within a wider context with respect to place (i.e., this group, home, daycare, earlier placement homes), relationships (biological parents, foster parents, siblings, ex foster parents), and time (before and after this situation, historical and new perspectives). In these ways the reflection about various situations seemed to rise to a new level where the meanings were explored in a wider context of the child's life, not just in the group.

In addition, the use of videos seems to have served the parents well. In this study it appeared that the memory of the situation was more negatively loaded than it was in the SRI interview. Looking at the videos later seemed to bring up more positive views of the intervention. Therefore, this kind of study design might be seen as a therapeutic intervention with families.

However, there were occasions in the SRI interview where the interpretation of the child's way of being was contradictory between the foster parent and therapist-researcher. The parent might interpret the child's behaviour as if the child was tired or bored whereas the therapist-researcher's viewpoint might have been related to, for example, some defensive kind of avoidance. There is no right or wrong answer here, but the link with mentalizing capacity comes to mind. Our reactions to other's actions (i.e., turning the head away and not being in eye contact) are very different if we think that the child is bored or if we think that it might be hard for the child to look at your face because of his or her earlier trauma history. From the child's viewpoint, the "wrong" interpretations might cause serious challenges in the family's everyday life. In therapeutic situations these kinds of contradictions might play a key role and would be important to detect for open discussion.

One core of reflective functioning is in evaluating one's own behaviour and how it affects others (Fonagy et al., 2012; Slade, 2005). There were several subcategories developed based on this viewpoint in this study. The reflections highlighted the *Experience of success* when being firm with the child despite the child's strong reactions and, on the other hand, considerations about what would have happened if the parent would have done differently (*Changing way of doing*). Similarly, we see the pondering about the Foster parenting when comparing it to other roles and on *How other person's emotion effects the way the parent is feeling or behaving*. However, the number of these considerations was not large enough to emphasise in this writing.

Instead, according to this study, the parents' reflections focused very clearly on children. Looking at the results by numbers, we see that from 218 codes, 108 were directly related to the child. It might be relevant to compare this phenomenon to "primary maternal preoccupation" (Winnicott, 1958) even though the concept originally refers to the first weeks of the child's life and the parent's mental preoccupation during that time; it may be also seen as the primary caregiver's emotional state to adapt to the child's needs in a 'good enough' way.

Another forthcoming concept of parenting is emotional availability which is known to be one of the most important capacities of parenting (Biringen et al., 2014; Salo et al., 2019). The core of this availability lays on reading the infant's emotional cues and the child's reciprocity of emotional responding. Therefore, it was important that most of the foster parents' reflections focused on the child's emotions ($N = 61$) and, on the other hand, on the parent's own emotions ($N = 40$). It might be right to state that according to the parents, NaP for foster families–intervention may be called an emotion focused intervention. However, this conclusion must also take into account that the instructions in the beginning of the SRI sessions might also have led to this kind of thinking.

Though not particularly instructed, parents evaluated the NaP for foster families–intervention quite widely in the interviews. *Activities did not transfer to everyday life* ($N = 3$) subcategory was formed by comments which stated that the NaP activities did not directly transfer into the home environment. Parents felt that the way of being at home was so different from group situations that the activities as such could not be used at home. This outcome is different compared to the pilot information from the questionnaires. According to the pilot study, Play activities and songs used at home showed the greatest improvement indicating that the NaP–intervention can be implemented in the family's everyday life (Figure 3). There might be several explanations for this including individual differences and preferences. The everyday life in foster families may be quite demanding because of both internal and external factors including the complex networks. On the other hand, it might be challenging to evaluate one's behaviour at home after two years of the intervention.

Despite this outcome it seems that the overall results support the findings from the pilot study. Pilot results articulated that both the child's attachment to the parent and the parents' attachment to the child were considered to be higher after the intervention. In the study on hand these entities were brought up in several categories when evaluating the NaP–intervention. *Attachment, connection, and interaction* and *Being and doing together* subcategories relate to this. In addition, the parents brought up the importance of the intervention to both the parent and child.

Results in context of attachment theory

The NaP for foster families–intervention's main target is to enhance and strengthen a healthy and secure attachment relationship between child and adult (Tuomi, 2018). Having this goal in mind, it is relevant to focus on the relationship between the tenets of attachment theory and the results of the study on hand. However, it has to be noted that this contextualisation is only directional and gives merely an idea of the link. Interpretation of the meanings behind the formulated subcategories and their connection to the attachment theory are intended to provide insight and therefore engage practice with theory and vice versa.

The basic and core concepts of the attachment theory may be defined as: 1) Secure base; 2) Safe haven; 3) Internal working model; 4) Separation distress; and 5) Proximity maintenance (i.e., Ainsworth, 1974; Bowlby, 1988; Bretherton & Munholland, 2008; Pally, 2005; Schofield & Beek, 2006). Every child needs a person who is the child's secure base (Bowlby, 1988). This person can be any gender and does not need to be biologically related to the child. In times of stress or danger, the child knows he or she can return to this person, where he or she is nourished physically and

emotionally, comforted, and reassured if distressed or frightened (Bowlby, 1988; Schofield and Beek, 2006).

When comparing the concept of secure base and the subcategories of this research it seems that the link between them is strong (Table 10). Direct notions of security and trust are easily traceable, including both the child's and parent's viewpoints. In addition, there are emotion regulation-based entities associated with secure base (Ainsworth, 1974; Bowlby, 1988; Hughes, 2009; Hughes & Baylin, 2012; Prior & Glaser, 2006). Those include the capability to freely express emotions and the capability to calm down and relax. Naturally attachment figure availability and the activated care giving system is also required for the feeling of secure base (Prior & Glaser, 2006) which was brought up in several subcategories of this research.

When the child has an experience of a secure base, it is possible for him or her to have an experience of a safe haven as well. Safe haven gives the child the space and possibility to explore the world and then return to a secure base (Bowlby, 1988; Schofield and Beek, 2006). When looking at the results of this study it seems that the explorative function is also somewhat forthcoming (Table 11). The parents notice this kind of behaviour several times both in terms of their child's emotions and actions related to that are children's positive conceptions of themselves. For example, experiencing mastery and success for the children are important achievements. Further, experiencing capability is not possible without being first interested and willing to try and explore (Prior & Glaser, 2006; Thompson, 2008).

Core concept Secure base (<i>N</i> = 96)	Concepts associated with core concept
Secure base (<i>N</i> = 35) <ul style="list-style-type: none"> • Safety and trust (E of C) • Meaning of situation familiarity (A of C) • Trust to people and environment (E of P) • Attachment and trust (R) • Contact and position (R) 	Capability to freely express emotions (<i>N</i> = 20) <ul style="list-style-type: none"> • Cheeriness and fun (E of C) • Satisfied and pleased (E of C) • Fun and excitement (E of P) Capability to calm down and relax (<i>N</i> = 32) <ul style="list-style-type: none"> • Relaxation and good feeling (E of C) • Settled down and focused (A of C) • Relaxed and peaceful (E of P) • Comfortable, and intimate feeling (E of P) Attachment figure availability (<i>N</i> = 9) <ul style="list-style-type: none"> • Contact and touch (A of C) • New relationship (R) • Foster parenting (A of P)

Table 10: Secure base compared with subcategories (*N* = number of codes)

A developing child learns patterns when being in contact with his or her primary caregiver. The child learns to predict how to best engage the parent in responding to his or her needs and what he or she needs to do to keep connected, be soothed, or avoid being overstimulated. This learning activates neurotransmitters that lead to growth of neural circuitry, which forms the basis for how these events

are represented in the brain (Pally, 2005). These expectations are called ‘internal working models’ (Bowlby, 1988; Bretherton & Munholland, 2008).

Core concept Safe haven (<i>N</i> = 26)	Concepts associated with core concept
Safe haven (<i>N</i> = 19) <ul style="list-style-type: none"> Interested and expectant (E of C) Interested, and willing to explore (A of C) 	Experiencing mastery and success (<i>N</i> = 7) <ul style="list-style-type: none"> Feeling of mastery and capability (E of C) Experience of success (E of P)

Table 11: Safe haven compared with subcategories (*N* = number of codes)

According to the results of this study it seems that internal working models are mostly traced concerning the child. The parents state that the situation familiarity and the structure of the sessions help the child to predict what is going to happen next which make it possible for the child to be interested and open for the activities. Related to expectations for the accessibility and responsiveness of the care giver, there are considerations about “reciprocal dance” of power relations, i.e., how the child has learned to trust that the adult is going to lead the situation safely through (Hughes, 2009; Thompson, 2008). In addition, parents themselves seem to consider their internal working models in context of the foster parenting.

Core concept Internal working model (<i>N</i> = 42)	Concepts associated with core concept
Internal working model (<i>N</i> = 27) <ul style="list-style-type: none"> Interested and expectant (E of C) Meaning of situation familiarity (A of C) Uncertainty and confusion (E of C) Stressed and doubtful (E of C) Behaviour changes during NaP Intervention (A of C) 	Power relations (<i>N</i> = 7) <ul style="list-style-type: none"> Adult / child directed action (A of P) Power (R) Parent’s reflections on their behaviour (<i>N</i> = 5) <ul style="list-style-type: none"> Foster parenting (A of P) Changing way of doing (A of P) New attachment relationship <ul style="list-style-type: none"> Shyness and foreignness (E of C) 3 Turmoil caused by placement (E of C) 1 New relationship (R) Tensed and suspense (E of P)

Table 12: Internal working model compared with subcategories (*N* = number of codes)

Internal working models may be of an optimistic and trusting nature but also suspiciously or pessimistically coloured. This might be related to both secure and insecure attachment (Ainsworth, 1974). This study revealed that these kinds of subcategories were present at the beginning of the intervention. Children seemed to be uncertain and stressed which might refer that their internal working models had not yet formulated toward a secure direction. The new attachment relationship, discussed both in terms of child and parent, support this assumption. Further, it is remarkable that parents notice the change in children during the NaP–intervention which indicates that children’s

internal working models seem to have changed to become more secure.

Humans have a biological drive to seek proximity to a protective adult to survive danger (Ainsworth, 1974; Bowlby, 1982). Separation distress emerges if this need is somehow hindered, and the child is incapable of sustaining proximity maintenance (Ainsworth, 1974). This includes the idea of discriminating different potential attachment figures to the familiar and secure and to unfamiliar and insecure figures.

Comparing the results of this study and the concepts of separation distress and proximity maintenance is somewhat ambivalent. The NaP for foster families–intervention’s target is to maximise the physical time together, to pass on the information to the child that she or he is not alone. Therefore, there should not be any subcategories related to these concepts. However, the foster placement and the relationship between the child and the parents was new and indicated that some insecure behaviour might be visible. For example, *Emotion of child* category’s following subcategories could be related to this phenomenon: *Uncertainty and confusion*, *Shyness and foreignness*, *Stressed and doubtful*, and *Turmoil caused by placement*. In addition, some of the *Emotion of adult* category’s subcategories might be part of this phenomena: *Mixed feelings*, and *tired*, in addition to *Tensed and suspense*.

LIMITATIONS AND FUTURE DIRECTIONS

Though careful considerations and choices were made concerning the study design, the research on hand also includes limitations. A small number of informants made it possible to explore the data quite deeply, but a larger extent of participants would have given a broader and more solid view for the subject. Therefore, this research may be seen as a pilot study for a forthcoming, larger study.

When it comes to the gathering of data, it would have been important to have a separate person taking care of the video cameras in order to provide better visibility. Furthermore, foster parents’ views may be influenced by the researcher’s choices of video excerpts and probing which could have affected the parents’ view of the “reality”. In terms of validity concerns, the time lapse between the recorded event and the recall session may have affected the accuracy of recall (Huang, 2014). The power-relations and conflicting positions were taken into consideration but those could still have affected the informants.

When analysing the data, the categorising is always somewhat challenging. It may help us to explore some quantities closer and more deeply and may give cognitive structure for the phenomena we are exploring. However, categories are overlapping and, for example, emotions and actions may be strongly connected and hard to divide from each other. Also, the author’s preunderstanding may have influenced the analysis especially when the first author was also the therapist. In addition, the translating of categories, subcategories, and descriptive comments to English complicates the analysis and the presentation of the results. Small vignettes may have been hard to translate in a detailed and delicate enough way.

This research clearly focused mostly on children since the parents’ reflections were naturally targeted on them. In the future, it would be interesting and important to focus on parents themselves since the change in parental internal working models and changing parenting behaviours are core key aspects when enhancing early attachments (i.e., Ainsworth 1974; Berlin 2005; Bowlby 1988; Prior &

Glaser 2006). This would be most relevant also from the viewpoint of mentalization (i.e., Alper & Howe 2015) which is a rarely studied area within music therapy and would strongly support the goals of the NaP for foster families–intervention.

CONCLUSION

According to this study, Nurture and Play intervention, NaP, seems to be a many-sided, relevant, and meaningful group intervention for foster families with young children. The research gives new insights for professionals within the field of music therapy, mental health, wellbeing and child welfare. Also, it is an opening toward family centred, attachment focused, and mentalization based music therapy practices. The concepts of attachment theory communicate well with the context of NaP for foster families which brings forth the importance of family centred work with this population. In the future, parent focused research is suggested to more intensively focus on the parent's part in interaction and attachment.

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REFERENCES

- Aber, J. L., Belsky, J., Slade, A., & Crnic, K. (1999). Stability and change in maternal representations of their relationship with their toddlers. *Developmental Psychology, 35*, 1038–1048.
- Ainsworth, M. S. (1974). *The development of infant-mother attachment: A final report of the office of child development*. <https://eric.ed.gov/?id=ED122924>
- Alper, J., & Howe, D. (2015). *Assessing adoptive and foster parents*. Jessica Kingsley Publishers.
- Baylin, J. (2015). Reflective functioning and parenting. In J. Alper & D. Howe (Eds.), *Assessing adoptive and foster parent: Improving analysis and understanding of parenting capacity* (pp. 149–166). Jessica Kingsley Publishers.
- Bengtsson, M. (2016). How to plan and perform a qualitative study using content analysis. *NursingPlus Open, 2*, 8–14. <https://doi.org.ezproxy.jyu.fi/10.1016/j.npls.2016.01.001>
- Berlin, L. J. (2007). Interventions to enhance early attachments. In L. J. Berlin, Y. Ziv, L. Amaya-Jackson, & M. T. Greenberg (Eds.), *Enhancing early attachments: Theory, research, intervention, and policy* (Paperback, pp. 3–33). Guilford press.
- Biringen, Z., Derscheid, D., Vliegen, N., Closson, L., & Easterbrooks, M. A. (2014). Emotional availability (EA): Theoretical background, empirical research using the EA Scales, and clinical applications. *Developmental Review, 34*(2), 114–167. <https://doi.org/10.1016/j.dr.2014.01.002>
- Booth, P. B., Lindaman, S., & Winstead, M. L.-R. (2014). Theraplay in reunification following relational trauma. In C. A. Malchiodi & D. A. Crenshaw (Eds.), *Creative arts and play therapy for attachment problems* (pp. 139–158). Guilford Press.
- Bowlby, J. (1988). *A secure base: Parent-child attachment and healthy human development*. Basic Books.
- Bretherton, I., & Munholland, K. A. (2008). Internal working models in attachment relationships: Elaborating a central construct in attachment theory. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment. Theory, research, and clinical applications* (2nd ed., pp. 102–127). Guilford Press.
- Bruscia, K. (1998). *Defining music therapy* (2nd ed.). Barcelona Publishers.
- Burkhardt-Mramor, K. M. (1996). Music therapy and attachment disorder: A case study. *Music Therapy Perspectives, 14*, 77–82. <https://doi.org/http://dx.doi.org/10.1093/mtp/14.2.77>
- Carayon, P., Li, Y., Kelly, M. M., DuBenske, L. L., Xie, A., McCabe, B., ... Cox, E. D. (2014). Stimulated recall methodology for assessing work system barriers and facilitators in family-centered rounds in a pediatric hospital. *Applied Ergonomics, 45*, 1540–1546. <https://doi.org/10.1016/j.apergo.2014.05.001>
- Castonguay, L., & Muran, J. C. (2015). Fostering collaboration between researchers and clinicians through building practice-oriented research: An introduction. *Psychotherapy Research, 25*(1), 1–5. <https://doi.org/http://dx.doi.org/10.1080/10503307.2014.966348>

- Dozier, M., Stovall, C., Albus, K. E., & Bates, B. (2001). Attachment for infants in foster care: The role of caregiver state of mind. *Child Development, 72*(5), 1467–1477. <https://doi.org/0009-3920/2001/7205-0013>
- Drake, T. (2011). Becoming in tune: The use of music therapy to assist the developing bond between traumatized children and their new adoptive parents. In J. Edwards (Ed.), *Music therapy and parent-infant bonding* (pp. 101–114). Oxford University Press.
- Finnell, N. (2013). Theraplay innovations with adoptive families. In E. Munns (Ed.), *Theraplay: Innovations in attachment-enhancing play therapy* (pp. 235–256). Rowman & Littlefield Publishers.
- Flower, C. (2014). Music therapy trios with child, parent, and therapist: A preliminary qualitative single case study. *Psychology of Music, 42*(6), 839–845. <https://doi.org/10.1177/0305735614547065>
- Flower, C. (2019). *Music therapy with children and parents: Toward an ecological attitude*. <https://doi.org/10.25602/GOLD.00026132>
- Fonagy, P., Bateman, A., & Luyten, P. (2012). Introduction and overview. In A. Bateman & P. Fonagy (Eds.), *Handbook of mentalizing in mental health practice* (pp. 3–42). American Psychiatric Association.
- Fonagy, P., & Target, M. (1997). Attachment and reflective function: Their role in self-organization. *Development and Psychopathology, 9*(4), 679–700.
- Goldberg, S. (2000). *Attachment and development*. Arnold Publishers.
- Hakomäki, H. (2013). *Storycomposing as a path to a child's inner world: A collaborative music therapy experiment with a child co-researcher*. University of Jyväskylä.
- Hasler, J. (2008). A piece of the puzzle: Music therapy with looked-after teenagers and their carers. In A. Oldfield & C. Flower (Eds.), *Music therapy with children and their families* (pp. 159–175). Jessica Kingsley Publishers.
- Herman, F. (1996). The boy that nobody wanted: Creative experience for a boy with severe emotional problems. In K. Bruscia (Ed.), *Case studies in music therapy* (2nd ed., pp. 99–108). Barcelona Publishers.
- Hong, M., Hussey, D., & Heng, M. (1998). Music therapy with children with severe emotional disturbances in a residential treatment setting. *Music Therapy Perspectives, 16*(2), 61–66. <https://doi.org/http://dx.doi.org/10.1093/mtp/16.2.61>
- Huang, L-S. (2014). Video-stimulated verbal recall: A method for researching cognitive processes and strategic behaviors. SAGE Research Methods Cases.
- Hughes, D. (2009). *Attachment-focused parenting*. W. W. Norton & Company.
- Hughes, D., & Baylin, J. (2012). *Brain-based parenting: The neuroscience of caregiving for healthy attachment*. W. W. Norton & Company.
- Kagan, N., Krathwohl, D. R., & Miller, R. (1963). Stimulated recall in therapy using video tape: A case study. *Journal of Counseling Psychology, 10*(3), 237–243. <https://doi.org/10.1037/h0045497>
- Kalland, M. (2014). Vanhemman mentalisaatiokyky. In A. Viinikka (Ed.), *Mentalisaatio perheiden kohtaamisessa* (pp. 26–38). Mannerheimin lastensuojeluliitto.
- Kalland, M. (2017). Mentalisaatiokyky vanhemmuudessa. In I. Laitinen & S. Ollikainen (Eds.), *Mentalisaatio. Teoriasta käytäntöön* (pp. 131–150). Therapie-säätiö.
- Kehl, S. M., La Marca-Ghaemmaghami, P., Haller, M., Pichler-Stachl, E., Bucher, H. U., Bassler, D., & Haslbeck, F. (2021). Creative music therapy with premature infants and their parents: A mixed-method pilot study on parents' anxiety, stress and depressive symptoms and parent–infant attachment. *International Journal of Environmental Research and Public Health, 18*(1), 265. <https://doi.org/https://doi.org/10.3390/ijerph18010265>
- Kruger, V., & Stige, B. (2015). 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>
- Langan, D., & Athanasou, J. A. (2002). A comparison of video recall responses between music therapy, music, and other therapy students. *Australian Journal of Music Therapy, 13*(2002), 28–37. <https://doi.org/10.1093/jmt/46.4.287>
- Layman, D. L., Hussey, D. L., & Laing, S. J. (2002). Music therapy assessment for severely emotionally disturbed children: A pilot study. *Journal of Music Therapy, 39*(3), 164–187. <https://doi.org/http://dx.doi.org/10.1093/jmt/39.3.164>
- Lindaman, S., & Lender, D. (2009). Theraplay with adopted children. In E. Munns (Ed.), *Applications of family and group Theraplay* (pp. 57–68). Rowman & Littlefield Publishers.
- Lindenfelser, K.J. & Grocke, D. & McFerran, K. (2008). Bereaved parents' experiences of music therapy with their terminally ill child. *Journal of Music Therapy, 45*(3), 330–348. <https://doi.org/10.1093/jmt/45.3.330>
- Logis, M. (2011). Facing the dread and desolation of cancer through music therapy: A client's perspective. *Music and Medicine, 3*(1), 27–30. <https://doi.org/10.1177/1943862110382000>
- McDonald, H. Z., Beeghly, M., Grant-Knight, W., Augustyn, M., Woods, R. W., Cabral, H., ... Frank, D. A. (2008). Longitudinal association between infant disorganized attachment and childhood posttraumatic stress symptoms. *Development and Psychopathology, 20*, 493–508. <https://doi.org/10.1017/S0954579408000242>
- Mroz Miller, J., Lender, D., Rubin, P. B., & Lindaman, S. (2010). Theraplay for children who are adopted or in foster care. In P. B. Booth & A. M. Jernberg (Eds.), *Theraplay: Helping parents and children build better relationships through attachment-based play* (3rd ed., pp. 405–448). Jossey-Bass.
- Mäkelä, J., & Vierikko, I. (2004). *From heart to heart: Interactive therapy for children in care. Report on the therapy project in SOS Children's Villages in Finland*. SOS Villages Finland Association.
- Oldfield, A. (2011). Parents' perceptions of being in music therapy sessions with their children: What is our role as music therapists with parents? In J. Edwards (Ed.), *Music therapy and parent-infant bonding* (pp. 58–72). Jessica Kingsley Publishers.
- Oldfield, A., Adams, M., & Bunce, L. (2003). An investigation into short-term music therapy with mothers and young children. *British Journal of Music Therapy, 17*(1), 26–45. <https://doi.org/http://dx.doi.org/10.1177/135945750301700105>
- Pajulo, M., Salo, S., & Pyykkönen, M. (2015). Mentalisaatio ihmistä suojaavana tekijänä. *Duodecim, 131*, 1050–1057.
- Pally, R. (2005). A neuroscience perspective on forms of intersubjectivity in infant research and adult treatment. In B. Beebe, S. Knoblauch, J. Rustin, & D. Sorter (Eds.), *Forms of intersubjectivity in infant research and adult treatment*. Other Press.
- Pater, M., de Graaf, P., & van Yperen, T. (2019). Working elements of music therapy for children and young people with autism. *Open Journal of Medical Psychology, 8*, 78–96. <https://doi.org/https://doi.org/10.4236/ojmp.2019.84008>

- Plahl, C. (2007). Microanalysis of preverbal communication in music therapy. In T. Wosch & T. Wigram (Eds.), *Microanalysis in music therapy: Methods, techniques and applications for clinicians, researchers, educators, and students* (pp. 41–53). Jessica Kingsley Publishers.
- Prior, V., & Glaser, D. (2006). *Understanding attachment and attachment disorders: Theory, evidence, and practice*. Jessica Kingsley Publishers.
- Putnam, F. (2005). The developmental neurobiology of disrupted attachment: Lessons from animal models and child abuse research. In L. J. Berlin, Y. Ziv, L. Amaya-Jackson, & M. T. Greenberg (Eds.), *Enhancing early attachments: Theory, research, intervention, and policy* (Paperback, pp. 79–99). Guilford Press.
- Robarts, J. (2014). Music therapy with children with developmental trauma disorder. In C. A. Malchiodi & D. A. Crenshaw (Eds.), *Creative arts and play therapy for attachment problems* (pp. 67–83). Guilford Press.
- Rolvjord, R. (2015). What clients do to make music therapy work: A qualitative multiple case study in adult mental health care. *Nordic Journal of Music Therapy*, 24(4), 296–321. <https://doi.org/https://doi-org.ezproxy.jyu.fi/10.1080/08098131.2014.964753>
- Rubin, P. B., Ledner, D., & Mroz Miller, J. (2010). Theraplay for children with histories of complex trauma. In P. B. Booth & A. M. Jernberg (Eds.), *Theraplay: Helping parents and children build better relationships through attachment-based play* (3rd ed., pp. 359–403). Jossey-Bass A Wiley Imprint.
- Salkeld, C. E. (2008). Music therapy after adoption: The role of family music therapy in developing secure attachment in adopted children. In A. Oldfield & C. Flower (Eds.), *Music therapy with children and their families* (pp. 141–157). Jessica Kingsley Publishers.
- Salo, S. J., Flykt, M., Mäkelä, J., Biringen, Z., Kalland, M., Pajulo, M., & Punamäki, R. L. (2019). The effectiveness of Nurture and Play: A mentalization-based parenting group intervention for prenatally depressed mothers. *Primary Health Care Research & Development*, 20(e157), 1–11. <https://doi.org/10.1017/S1463423619000914>
- Salo, S., & Tuomi, K. (2008). *Hoivaa ja leiki. Vauvan ja vanhemman vuorovaikutus (Nurture and play. Early interaction between infant and parent)*. Psykologien kustannus.
- Savage, S., Williams, K., Berry, L., & Oreopoulos, J. (2020). Parental perceptions of the Sing&Grow programme: Group music therapy building knowledge, confidence, and social support. *Journal of Family Studies*. <https://doi.org/10.1080/13229400.2020.1776755>
- Schofield, G., & Beek, M. (2006). *Attachment handbook for foster care and adoption*. British Association for Adoption & Fostering.
- Scholtz, J. (2007). Microanalysis of interaction in music therapy (MIMT) with children with developmental disorders. In T. Wosch & T. Wigram (Eds.), *Microanalysis in music therapy: Methods, techniques and applications for clinicians, researchers, educators and students* (pp. 67–78). Jessica Kingsley Publishers.
- Schore, A. N. (1994). *Affect regulation and the origin of the self: The neurobiology of emotional development*. Lawrence Erlbaum Associates, Inc.
- Schore, A. N. (2001). Effects of a secure attachment relationship on right brain development, affect regulation, and infant mental health. *Infant Mental Health Journal*, 22(1–2), 7–66. [https://doi.org/10.1002/1097-0355\(200101/04\)22:1<7::AID-IMHJ2>3.0.CO;2-N](https://doi.org/10.1002/1097-0355(200101/04)22:1<7::AID-IMHJ2>3.0.CO;2-N)
- Shai, D., & Belsky, J. (2011). When words just won't do: Introducing parental embodied mentalizing. *Child Development Perspectives*, 5(3), 173–180. <https://doi.org/10.1111/j.1750-8606.2011.00181.x>
- Siegel, D. J., & Bryson, T. P. (2012). *The whole-brain child: 12 revolutionary strategies to nurture your child's developing mind* (Paperback). Bantam Books.
- Slade, A. (2005). Parental reflective functioning: An introduction. *Attachment and Human Development*, 7(3), 269–281. <https://doi.org/10.1080/14616730500245906>
- Slade, A., Grienenberger, J., Bernbach, E., Levy, D., & Locker, A. (2005). Maternal reflective functioning, attachment and the transmission gap: A preliminary study. *Attachment and Human Development*, 7(3), 283–298. <https://doi.org/10.1080/14616730500245880>
- Thompson, G., & McFerran, K. (2015). "We've got a special connection": Qualitative analysis of descriptions of change in the parent-child relationship by mothers of young children with autism spectrum disorder. *Nordic Journal of Music Therapy*, 24(1), 3–26. <https://doi.org/https://doi-org.ezproxy.jyu.fi/10.1080/08098131.2013.858762>
- Thompson, G., Shanahan, E., & Gordon, I. (2019). The role of music-based parent-child play activities in supporting social engagement with children on the autism spectrum: A content analysis of parent interviews. *Nordic Journal of Music Therapy*, 28(2), 108–130. <https://doi.org/https://doi-org.ezproxy.jyu.fi/10.1080/08098131.2018.1509107>
- Thompson, R. A. (2008). Early attachment and later development. In J. Cassidy & P. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (2nd ed., pp. 348–365). Guilford Press.
- Tronick, E. Z. (1989). Emotions and emotional communications in infants. *American Psychologist*, 44(2), 112–119. <https://doi.org/http://dx.doi.org/10.1037/0003-066X.44.2.112>
- Tuomi, K. (2018). Intervention for foster families with young children. *Imagine – Early childhood music therapy online magazine*, 9(1), 66–68. www.imagine.musictherapy.biz
- Tuomi, K. (2017). Music therapy and theraplay; Creating, repairing, and strengthening the attachment bond in foster and adoptive families. In S. Lindahl Jacobsen & G. Thompson (Eds.), *Music Therapy with Families: Therapeutic Approaches and Theoretical Perspectives* (pp. 173–198). Jessica Kingsley Publishers.
- Tuomi, K., Ala-Ruona, E., & Oldfield, A. (2017). Literature review of early childhood music therapy between 1990-2012. *Voices: A World Forum for Music Therapy*, 17(2). <https://doi.org/https://doi.org/10.15845/voices.v17i2>
- Tuomi, K., Thompson, G., Gottfried, T., & Ala-Ruona, E. (2021). Theoretical perspectives and therapeutic approaches in music therapy with families. *Voices: A World Forum for Music Therapy*, 21(2). <https://doi.org/10.15845/voices.v21i2.2952>
- Tuomi, K., Lampi, H. & Salo, S. (under preparation). Nurture and play for foster families manual.
- Vall, B., Laitila, A., Borcsa, M., Kykyri, V.L., Karvonen, A., Kaartinen, J., Seikkula, J. (2018). Stimulated recall interviews: How can the research interview contribute to new therapeutic practices? *Revista Argentina de Clínica Psicológica*, 27(2), 274–283. <https://doi.org/10.24205/03276716.2018.1065>
- Van der Kolk, B. A. (2005). Developmental trauma disorder: Towards a rational diagnosis for children with complex trauma histories. *Psychiatric Annals*, 35(5), 401–408. <https://doi.org/http://dx.doi.org/10.3928/00485713-20050501-06>
- Weinfeld, N. S., Sroufe, L. A., Egeland, B., & Carlsson, E. (2008). Individual differences in infant-caregiver attachment. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research and clinical applications* (2nd ed., pp. 78–101). Guilford Press.

- Wheeler, B. (2014). The importance of research in educating about music therapy. *Voices: A World Forum for Music Therapy*, 14(2).
<https://doi.org/https://doi.org/10.15845/voices.v14i2.746>
- Wigram, T., Nygaard Pedersen, I., & Bonde, L. O. (2002). *A comprehensive guide to music therapy: Theory, clinical practice, research, and training*. Jessica Kingsley Publishers.
- Winnicott, D. W. (1958). Primary maternal preoccupation. In *Collected papers: Through paediatrics to psycho-analysis*. (2nd ed., pp. 300-305). Tavistock.
- Zeanah, C. H., Benoit, D., Hirshberg, L., Barton, M. L., & Regan, C. (1994). Mothers' representations of their infants are concordant with infant attachment classifications. *Developmental Issues in Psychiatry and Psychology*, (1), 1-14.

Ελληνική περίληψη | Greek abstract

Ανατροφή και παιχνίδι για ανάδοχες οικογένειες με μικρά παιδιά: Αναστοχασμοί ανάδοχων γονέων για μία ομαδική παρέμβαση με επίκεντρο την προσκόλληση

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ΠΕΡΙΛΗΨΗ

Ένα ιστορικό ανασφαλών δεσμών θέτει τα θετά παιδιά σε κίνδυνο για πολλών ειδών δυσκολίες που μπορεί να συμπεριλαμβάνουν και ψυχοπαθολογία. Η Ανατροφή και το Παιχνίδι (Nurture and Play, NaP) για ανάδοχες οικογένειες είναι μία παρέμβαση για παιδιά ηλικίας από ενός έως πέντε ετών που στοχεύει στην υποστήριξη δημιουργίας ισχυρών νέων δεσμών ανάμεσα στους θετούς γονείς και τα μικρά παιδιά τους. Στόχος της μελέτης είναι η βαθύτερη κατανόηση του πώς οι ανάδοχοι γονείς χρησιμοποιούν δεξιότητες νοητικής αναπαράστασης ως εργαλείο αναστοχασμού των ποικίλων νοηματοδοτήσεων της παρέμβασης NaP για ανάδοχες οικογένειες. Επιλέχθηκε μία μέθοδος διέγερσης της μνήμης για να επιτευχθούν οι ερευνητικοί στόχοι. Ήταν εμφανές ότι οι γονεϊκοί αναστοχασμοί ήταν επικεντρωμένοι στο παιδί, στη σημασία της ασφάλειας και στο νόημα της αλλαγής κατά τη διαδικασία. Δόθηκε έμφαση και σε συναισθηματικές ποιότητες που αφορούσαν και το παιδί και τον ενήλικα. Οι ανάδοχοι γονείς μπόρεσαν να χρησιμοποιήσουν τους αναστοχασμούς τους εντός ενός ευρύτερου πλαισίου χώρου, σχέσης και χρόνου. Υπήρξε ισχυρή συσχέτιση των αποτελεσμάτων της μελέτης με τις βασικές έννοιες της θεωρίας δεσμών. Επιπρόσθετα, από τη μελέτη και τα συμπεράσματα προκύπτουν προτεινόμενες προτεραιότητες καθώς και προτάσεις για περαιτέρω έρευνα.

ΛΕΞΕΙΣ ΚΛΕΙΔΙΑ

θετά παιδιά, μικρά παιδιά, οικογενειακά επικεντρωμένη μουσικοθεραπεία, Theraplay, νοητική αναπαράσταση, διέγερση της μνήμης