

**LEARNING MORE THAN MUSIC: A COMMUNITY-BASED MUSIC  
PROGRAM'S IMPACT ON WELL-BEING IN YOUTH**

**by © Brittany Howell**

A thesis submitted to the School of Graduate Studies in partial fulfillment  
of the requirements for the degree of

**Master of Science in Pharmacy**

Memorial University of Newfoundland

**October 2020**

St. John's, Newfoundland and Labrador

## Abstract

Participating in the arts has shown promise in improving physical, mental, and spiritual well-being. Adverse mental health is one of the leading causes of disability and lowered quality of life worldwide and often begins at young ages. Since early life experiences have a strong influence on youth, it is vital to identify potential prevention methods that promote mental health and wellness in youth populations. Participation in community music programs may be one possible way to promote well-being in youth.

My thesis consisted of two separate but connected studies, a systematic review, and a qualitative study. The systematic review summarized relevant literature to explore the impact of community music instruction on social and emotional well-being in children and young adults aged 25 and under. The findings revealed that community-based music programs show potential in promoting social and emotional well-being outcomes. This review helped inform the qualitative study, which consisted of semi-structured interviews with students and their caregivers, and a focus group of instructors in a community-based music program. This study explored the perception of participation in the music program and its impact on students' well-being. The interviews and focus group were analyzed for themes and the results were broken down into two categories: impact of the music program and environment of the music program. These categories include six broad themes: impact on feeling, impact on learning, opportunities for engagement, importance of accessibility, accepting and positive space, instructor influence. Overall, the community-based music program was perceived as beneficial to youth well-being.

*Keywords:* Community health, well-being, youth, music program, arts, and health.

## Acknowledgements

I would like to express gratitude and appreciation for the many people who supported me and made this thesis journey possible. Firstly, I would like to thank my co-supervisors, Dr. Lisa Bishop, and Dr. Stephen Darcy, for their endless support and guidance throughout this program. I am incredibly grateful to have supervisors who care deeply about the success and well-being of their students and the community around them. I truly appreciate you both for being there whenever I needed academic and at times, emotional guidance. I could not have asked for a better pair of supervisors!

I would also like to extend thanks to my supervisory committee members, Dr. Natalie Beausoleil, and Dr. David Buley. Thank you for your continued guidance, sharing your insights, and helping to complete the research team. Your knowledge and qualitative expertise were incredibly helpful, and your passion for the arts was inspiring. I appreciate all suggestions and constructive criticism that helped me push past mental barriers and improve my writing and understanding of concepts.

This project would not be possible without the help of Carole Bestvater and all members of Strong Harbour Strings. I am blessed to have been welcomed by such an enthusiastic and caring community. I want to thank all of the instructors, parents, and students for welcoming me into your community, giving me your time, and ensuring my research ran as smoothly as possible. The passion, compassion, and dedication of the instructors was contagious. Like the students, I felt comfortable, accepted, and welcome during my time at Strong Harbour Strings.

I am also incredibly thankful for the funding I received throughout this project. Thank you to School of Graduate Studies and NL Support for funding my master's. NL Support provided many unforgettable opportunities to share my research in creative ways and opened my eyes to the importance of patient-oriented research. I want to extend a special thank you to Kate Hogan and Dale Humphries of NL Support for always being there and encouraging me. Your energy, optimism, and empathy made every interaction something I enjoyed. I would also like to thank the School of Pharmacy for this opportunity for their support throughout this journey.

Finally, I would like to extend gratitude to my family and friends who have offered their endless love and support over the past few years. To my parents, Brenda and Glen Howell, who are quintessential examples of unconditional love and support, for always being there for me, despite any challenges life threw our way. My brother Brandon, who provided moral support and many laughs. My friends and loved ones, who at times knew me better than I knew myself, for motivating me, encouraging me to take necessary breaks and showing such interest and support in my studies. I would also like to extend a special thanks to my cat, Zulu, who's therapeutic presence, purrs, and head nudges got me through many late nights. There are not enough words for how much I have appreciated all of your patience, support, and care throughout my thesis journey.

## Table of Contents

Abstract .....	ii
Acknowledgements .....	iii
Table of Contents .....	v
List of Tables .....	xi
List of Figures .....	xii
List of Abbreviations and Symbols.....	xiii
List of Appendices .....	xiv
<b>Chapter One: Introduction and Overview .....</b>	<b>1</b>
Introduction.....	1
Defining Health and Well-Being .....	3
Community Spaces for Health and Wellness.....	7
Social Determinants of Health .....	8
Need for Research.....	9
Literature Review.....	14
Arts and Health .....	14
Music and Health .....	17
Music Interventions .....	19
Systematic Reviews Exploring Music Interventions and Well-Being.....	23
Why Explore Community-Based Music? .....	25
Why Focus on Youth? .....	27
Instrumental Community Music Programs and Well-Being .....	28
Self-Esteem, Confidence and Competence.....	29

Prosocial Outcomes .....	31
Positive Emotions .....	33
The Current Study .....	35
Statement of the Problem .....	35
Environment.....	35
Objective of the Thesis .....	37
Research Questions.....	38
Methodology .....	38
Chapter Two: Systematic Review.....	38
Methods.....	38
Quality Assessment.....	39
Chapter Three: Qualitative Study .....	40
Community Engagement .....	40
Participant Recruitment .....	40
Data Collection and Analysis.....	41
Research Paradigm, Ontology and Epistemology .....	42
Methodology .....	45
Methods.....	45
Quality.....	47
Reflexivity.....	48
Ethics statement .....	54
Overview of Thesis Structure .....	54
References.....	56

Co-authorship Statement.....	74
<b>Chapter Two: The social and emotional influence of community music programs on youth well-being: A systematic review .....</b>	<b>75</b>
Abstract .....	76
Introduction.....	77
Determinants of Mental Health.....	77
Arts and Youth Wellness .....	79
Music and Youth Wellness .....	80
Methods.....	82
Search Strategy .....	82
Selection criteria .....	82
Study Selection .....	83
Data Extraction and Analysis.....	83
Quality Assessment.....	84
Results.....	84
Study Selection .....	84
Quality Assessment.....	85
Descriptive Findings .....	85
Intervention Explored .....	86
Music and Social Well-Being .....	87
Supporting Self-Esteem .....	88
Emotional Well-being.....	90
Discussion .....	91

Limitations .....	95
Conclusion .....	96
Declarations .....	96
Conflict of Interest .....	96
Funding .....	96
Acknowledgements.....	97
References.....	98
<b>Chapter Three: Exploring the Impact of a Community-Based Music Program on Youth Well-Being.....</b>	<b>119</b>
Abstract.....	120
Introduction.....	121
Methods.....	123
Participants and Setting.....	124
Recruitment and Ethics .....	125
Data Collection and Analysis.....	126
Positionality of Researcher .....	126
Results.....	127
Participants.....	127
Themes .....	128
Impact of the Music Program.....	129
Theme 1: Impact on Feeling .....	129
Theme 2: Impact on Learning.....	133
Theme 3: Opportunities for Engaging .....	136



Environment of the Music Program.....	141
Theme 4: Importance of Accessibility .....	141
Theme 5: Accepting and Positive Space.....	143
Theme 6: Instructor Influence.....	144
Discussion .....	146
Strengths and Limitations .....	149
Conclusion .....	150
References .....	151
<b>Chapter Four: Summary</b> .....	157
Overview of Chapter.....	157
Background of Studies .....	157
Development of Research Questions and Objectives .....	157
General Approach and Methods .....	158
Summary of Findings.....	160
General Findings .....	160
Detailed Findings .....	162
Impact on Emotion.....	162
Enjoyment of Performance .....	164
Self-Esteem and Confidence.....	166
Impact on Learning .....	167
More than Music .....	168
The Social Impact of Community Music Programs .....	170
Forming Connections .....	171

A Sense of Community .....	172
The Environment of the Music Program.....	174
Instructor Influence .....	175
Instructor Values .....	176
Expanding Minds Through Music and the 12+ Club.....	177
Positive Growth: The community-based music ecosystem for youth well-being.....	178
What Do These Findings Mean?.....	180
Strengths .....	181
Limitations .....	182
Implications and Recommendations .....	184
Conclusion .....	186
Final Reflection.....	187
References.....	192

## List of Tables

Table 1.0	Table 1.0 Constructivist (Interpretivist) Paradigm Positions on Selected Issues.....	43
Table 2.0	Example Search Strategy as Performed in MEDLINE.....	107
Table 2.1	Characteristics of All Included Studies.....	108
Table 2.2	Review of Quantitative Studies .....	112
Table 2.3	Review of Qualitative Studies .....	114
Table 2.4	Review of Mixed Methods Studies .....	117
Table 2.5	Article Quality Assessment .....	118

Disclaimer: Tables and Figures have been re-numbered to reflect the chapter number in the thesis to avoid confusion of multiple figures or tables with the same number.

## List of Figures

Figure 1.0	Figure 1.0 Arts and Health Diamond by MacNaughton et al., (2005).....	16
Figure 2.0	PRISMA Study Selection Flowchart .....	106
Figure 3.0	Impact of Music Program Themes and Sub-Themes.....	128
Figure 3.1	Environment of Music Program Themes .....	129
Figure 4.0	Community-Based Music an Ecosystem for Well-Being .....	180

Disclaimer: Tables and Figures have been re-numbered to reflect the chapter number in the thesis to avoid confusion of multiple figures or tables with the same number.

## **List of Abbreviations and Symbols**

All-Party Parliamentary Group on Arts, Health, and Wellbeing [APPAHW]

Centre for Addiction and Mental Health [CAMH]

Interdisciplinary Committee on Ethics in Human Research [ICEHR]

Newfoundland and Labrador [NL]

Primary Health Care [PHC]

Preferred Reporting Items for Systematic Reviews and Meta-Analysis [PRISMA]

Self Determination Theory [SDT]

Social Determinants of Health [SDH]

Strong Harbour Strings [SHS]

The Centre for Addiction and Mental Health [CAMH]

The Commission on the Social Determinants of Health [CSDH]

The Personal Health Information Act [PHIA]

The US Preventive Services Task Force quality rating criteria [USPSTF]

Tri-Council Policy Statement [TCPS-2]

World Health Organization [WHO]

## **List of Appendices**

Appendix A: Parent or Caregiver Consent Form .....	200
Appendix B: Instructor Consent Form .....	207
Appendix C: Invitation Letter for Parents or Caregivers .....	213
Appendix D: Invitation Letter for Instructors.....	214
Appendix E: Script Email of Phone Call for Parents or Caregivers .....	215
Appendix F: Child Interview Script and Questions .....	217
Appendix G: Parent Interview Script and Questions.....	219
Appendix H: Instructor Focus Group Script and Questions .....	221
Appendix I: Approval Letter Interdisciplinary Committee on Ethics in Human Research (ICEHR) .....	223

## **Chapter One: Introduction and Overview**

### **Introduction**

The arts have shown promise in benefiting physical, social, mental, and spiritual well-being in individuals of all ages and diverse cultures (Hanna, Rollins, & Lewis, 2017). Policymakers and researchers worldwide have acknowledged that social, environmental, and cultural factors can shape health and well-being (Sunderland, Lewandowski, Bendrups, & Bartleet, 2018). Given the strong influence of external factors, community-based participatory arts programs may be one innovative way to address health needs within communities. A scoping review conducted by the World Health Organization (WHO, 2019) supports the arts as a course of action to address health needs and promote well-being. This review stated that arts could contribute to health and health promotion through “prevention, support, treatment, and management of mental illness as well as other health problems” (WHO, 2019, p. 57). One of the arts that has displayed promise in promoting health outcomes is participatory music programs.

Music engages people, produces positive impacts in the brain, brings people together and allows us to communicate, even when language is not possible (MacDonald, Kreutz, & Mitchell, 2012). Participatory music is active engagement with music that can include playing an instrument, singing, dancing, or moving along to a beat, each of which has shown potential health benefits (WHO, 2019). Research suggests that active involvement with music, such as playing an instrument or singing, can improve psychological and spiritual health (Bittman, Berk, Shannon, Sharaf, Westengard, Guegler, & Ruff 2010; Koelsch, Offermanns, & Franzke, 2010; Sun & Buys, 2016). Playing a musical instrument is enjoyable and a form of self-expression that shows clear physical

benefits through increasing the body's exercises and fine motor skills (Sun & Buys, 2016). It also has demonstrated psychological health benefits such as reducing stress action in the neuroendocrine system, relating to improved emotional well-being (Bittman et al., 2005).

Those involved in music programs also recognize the benefits learning musical instruments can have on well-being. Burnard and Dragovic (2015) explored creative instrument music group learning in an extracurricular music group named Percussion 1. Students involved in the program shared their experiences, describing it as “life-changing” and expressed feelings of belongingness, happiness, and well-being (Burnard & Dragovic, 2015, p. 387). While volunteering at an alternate school, I witnessed how giving children alternative options to learn that incorporate music and arts can change them. I observed firsthand how the competence and confidence gained from learning an instrument helped children come out of their shell and learn to flourish in other areas of their lives. Shy students who often underperformed and refused to speak up glowed with excitement while sharing stories about learning their new instrument. While there are numerous external factors that contribute to positive changes in one's life, qualitative studies are one way to give participants a voice and allow them to explain why they feel these changes have occurred (Solli & Rolvsjord, 2015). In my qualitative study (chapter three), one student participating in a local community-based music program stated that they felt they learned “more than music” during their lessons. They shared, “It's not just the music that you can learn, you can learn a bunch of other things, like caring for other people, and understanding, you can learn empathy, passion, dedication and



responsibility.” It seems clear through these experiences and existing research that the relationship between music programs and health needs further exploration.

Research suggests that learning an instrument can create a therapeutic relationship with the mind that supports development, health, and well-being (Thaut, 2005).

Instrumental community music programs and the instructor support they provide have positively impacted personal, relational, and musical skills (Sheltzer & Consoli, 2019).

However, current researchers also expressed that there has been historical neglect in music education research, especially regarding group music-making and instrumental

learning which occurs outside subject curricula music and classrooms (Burnard &

Dragovic, 2014; Sunderland et al., 2018). Systematic reviews have also claimed that

youth populations are underrepresented in research that explores music and well-being

(Sheppard & Broughton, 2020). Most mental and emotional health problems in adults

begin in childhood and adolescence, so it is important to include young people in research

and determine interventions that can prevent adverse mental health and promote well-

being in young ages (Underwood, Washington & Underwood, 2016).

My thesis explores the relationship between community music programs and well-

being in youth and adds to existing arts and health literature. The thesis is written in

manuscript format which consists of an introductory chapter, two stand-alone studies, and

a fourth chapter summarizing the findings. This introductory chapter explores important

definitions and concepts along with the rationale for the thesis and conducted studies.

This is followed by a literature review exploring relevant literature and research. Next,

the methods and aims of the two studies in this thesis are explored. The chapter concludes

with a personal reflection and a brief overview of the following chapters.

## **Defining Health and Well-Being**

One of the early models for defining health is the biomedical model, which focused solely on biology and whether or not disease was present (Engel, 1997). This model is challenged for its focus on biology alone and excluding psychological, environmental, and social factors including patients' non-measurable and subjective experiences (Engel, 1997). The biopsychosocial model is more comprehensive and recognizes that many factors affect health, such as the psychological and social domains (Engel, 1997). Engel (1997) argued, "we suffer when our interpersonal bonds are sundered and feel solace when they are re-established" (p. 522). The biopsychosocial model considers how our environments and social relationships can impact our health and well-being and provides "a conceptual framework to accommodate the human domain" (Engel, 1997, p. 527). Given that subjective experience is important to health, interaction between physician and patient (interviewing, for example) can "yield primary data" (Engel, 1997, p. 527). Thus, we can consider human meaning and the experiences people share to be sources of data and evidence of health and well-being.

Health is defined by the World Health Organization (WHO, 1946) as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity" (p. 100). While this definition tries to capture the complex and multifaceted nature of health, the latter half is criticized for the association between absence of disease and health (Clift & Camic, 2016). This association is problematic because individuals exist with chronic conditions and still achieve well-being and live healthy lives (Clift & Camic, 2016). Ansdell and DeNora (2012) touch on this controversy and define health and well-being as "multi-dimensional phenomena including biochemical, psycho-motor, cognitive, emotional, social, and cultural" (p. 106). They also note there is "no 'one form' of health" and that it is "possible

to enjoy ‘good health’ according to some measures while being ‘ill’ according to others” (Ansdell & DeNora, 2012, p. 106). They suggest we need to turn our focus away from health as a cure and “toward a consideration of well-being cultivated through care and the cultivation of broader human flourishing” (Ansdell & DeNora, 2012, p. 110).

Despite the growing research interest in well-being, there is still a lack of consensus on how to define the term (Burnard & Dragovic, 2015; Dodge, Daly, Lalage & Sanders, 2012). Mental health is defined by the WHO (2004) as “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.” However, what does well-being consist of? Initially, in well-being research, two approaches emerged: hedonistic and eudaimonic well-being (Dodge et al., 2012; Ryan & Deci, 2001). Hedonistic well-being focuses on happiness, positive and negative mood or affect, and life satisfaction (Bradburn, 1969; Diener, 1984; Lyubomirsky & Lepper, 1999; Schwarz, Kahneman & Diener, 1999). Eudaimonic well-being looks deeper into psychological functioning and positive human development such as autonomy, environmental mastery, positive relationships with others, purpose, potential, and self-acceptance (Ryff, 1989; Waterman, 1993). More recently, well-being is understood as multi-dimensional and including aspects of both (Diener, 2009; Michaelson, Abdallah, Steuer, Thompson, & Marks, 2009; Stiglitz, Sen, & Fitoussi 2009).

One of the most prominent theories of well-being is the PERMA model (Seligman, 2011). Seligman (2011) stated that flourishing is the gold standard for measuring well-being. He believes well-being is achieved through the building blocks for flourishing, which includes positive emotions, engagement, relationships, meaning and

accomplishment (PERMA) (Dodge et al., 2012; Seligman, 2011). Researchers in well-being recognize the highly subjective and individual nature of psychological well-being. Shin and Johnson (1978) defined well-being as a person's quality of life according to their own perception and criteria. This view is still relevant in recent well-being literature as well-being is an individual and subjective experience (Rees, Goswami, & Bradshaw 2010; Stratham & Chase, 2010; Zikmund, 2003).

Regardless of controversies regarding the definition of health, one thing that remains clear is that a mental and social sense of well-being is vitally important to health. Unlike biological determinants, both the social and environmental factors can be changed by timely interventions. Thus, it is important to seek out environments with the potential to prevent negative health and promote positive growth and well-being. Some of the risk factors for mental health and well-being were identified by WHO (2012). They highlight the importance of individual factors such as self-esteem and confidence, social factors such as belongingness, and environmental factors such as access to basic needs and acceptance in mental health and well-being. Marmot (2011) combined many aspects of well-being and defined it as a "multidimensional construct including life satisfaction, autonomy, control, self-esteem and an absence in depression and loneliness" (p. 42). Sunderland and colleagues (2018) consider this description crucial in understanding the link between music, health, and well-being. This is due to their belief that music can allow for development in each of these areas.

There are central themes that recur in the many definitions of well-being. A subjective sense of positive emotions, a sense of competence, self-esteem, and social connectedness are all considered crucially important to well-being (Dodge et al., 2012;

Seligman, 2011; Sunderland et al., 2018; Weare, 2017). For the purpose of this thesis, aspects of subjective social and emotional well-being will be the focus. Well-being is critical in any definition of health and musical activities can potentially play a role in encouraging well-being across the nation (Sunderland et al., 2018).

### **Community Spaces for Health and Wellness**

Health is no longer seen as the responsibility of the health sector alone. Rather, it is part of communities and lifestyles (WHO, 1986). The way we interact with society and our communities can play a role in our health and wellness. Health promotion allows people to have more control over and improve their health (WHO, 1986). Declarations for health promotion include “building healthy public policy, creating supportive environments, strengthening community actions, developing personal skills, and reorienting health services.” (Clift & Camic, 2016 p. 6; WHO, 1986). These declarations reveal the importance of our actions, environments, and communities in achieving and promoting health. Community health psychology research works with groups of people or communities collaboratively to identify how they understand their world and to explore opportunities to create change (Murray & Lamont, 2012). Murray and Lamont (2012) share that it is through this action of listening and supporting others that people can be “encouraged to reflect upon their practices and to grow in confidence through collective action” (p. 78). They also argue that community arts are one form of this collective action that can bring about empowerment and positive change. Community art is less about the quality of the art and more about how it can “contribute to some form of personal and social transformation” (Murray & Lamont, 2012, p. 78). Community arts and music

programs could be a place for health promotion as participating in music programs is one way to provide individuals with health and well-being determinants (Sunderland et al., 2018). We must continue to identify and engage in environments that allow us to thrive and achieve wellness.

### **Social Determinants of Health**

Our environment can play a large role in health and well-being. Research shows increasing evidence that health and well-being are influenced by “complex individual, social, political, economic and environmental determinants” (Sunderland et al., 2018, p. 2). The Commission on the Social Determinants of Health (CSDH) stated, “the structural determinants and conditions of daily life constitute the social determinants of health and are responsible for a major part of health inequities between and within countries” (WHO, 2008, p. 1). They also shared that “social injustice is killing people on a grand scale” and that social determinants have a big impact on people’s mental health, physical health, and livelihood (WHO, 2008, p. 26). Social determinants of health (SDH) are defined as “the conditions people are born into, grow, live, work and age in” that impact their health and well-being (WHO & Calouste Gulbenkian Foundation, 2014, p. 9). These determinants, including early life experiences, can strongly influence mental health and well-being. Community-based music programs can help by providing a supportive space and positive early learning experiences for young people. Consideration of these determinants can also help us research and explore links between music, health, and well-being. WHO and the Calouste Foundation (2014) express that structured action to promote social determinants supports the prevention of mental health disorders and promotion of positive well-being.

As mentioned above, community arts can be a means of collective action and creating change (Murray & Lamont, 2012).

### **Need for Research**

Social determinants of health have a large impact on people's mental health, physical health, and livelihood (WHO, 2008). Action promoting access to these determinants of health shows promise in preventing poor mental health and increased well-being (WHO and Calouste Foundation, 2014). There is a need to explore ways to improve access to social determinants, prevent adverse mental health, and promote well-being. Mental health problems are common, costly, chronic, and disabling health problems that impact hundreds of millions of people worldwide (Ferrari, Charlson, Norman, Patten, Freedman & Murray, 2013). The cost of mental health-related problems in Canada is an estimated \$51 billion per year in health care, lost productivity, and reductions in health-related quality of life (Lim, Jacobs, Ohinmaa, Schopflocher, & Dewa, 2008). Despite the importance of mental health, it receives far less funding than physical health conditions such as cancer, cardiovascular disease, and other infectious diseases (MQ, 2015). Improved mental health and well-being is even associated with reduced risk of many of these physical health conditions (De Neve, Diener, Tay, & Xuereb, 2013). Beyond this, poor mental health is also the leading cause of disability in Canada, diminishing well-being and life expectancy by as much as 10-20 years (CAMH, 2012). These issues are also prevalent in the province of Newfoundland and Labrador (NL).

In 2017, NL Support conducted a population-based survey that identified mental health services and preventative care as two of the top three health priorities in the province. Youth hospitalization for mental health issues in NL is higher than the national average and has steadily been growing since 2007 (Power, 2019). This growth is concerning as waitlists to receive mental health professionals' help are long and continue to grow (Power, 2019). In an article about the state of mental health in NL, one frustrated mother shared their story about their daughter's struggle with depression and being on waitlists (Power, 2019). She shared that she found some hope through a community program at her daughter's school, but the program ended. She then went on to say that her family continues to struggle one day at a time. This personal account reveals the need for more mental health support in NL. Her story also suggests the impact that social determinants such as community support and community programs can provide.

The NL 2015-2025 Primary Health Care Framework states at least 100,000 people in NL are currently suffering from mental health problems. Many people in NL also remain undiagnosed, especially in the youth population (Government of Newfoundland and Labrador, 2015). It is clear that more research and resources promoting mental health and well-being are needed within this province. Thus, a significant objective of the framework is focused on the prevention of mental illness and the promotion of positive mental health and well-being. The framework aims to discover and improve early intervention programming for mental illness and ensure there are opportunities for optimal childhood development in early learning environments (Government of Newfoundland and Labrador, 2015). There is an emphasis on finding and developing programs to promote youth well-being to promote positive mental health within the



province. Social and environmental factors remain essential in mental health research as they have the potential to be explored and changed in an attempt to promote positive health (Weare, 2017).

In 2017, the province of NL All-Party Committee on Mental Health and Addictions released a document titled “Towards Recovery: A Vision for a Renewed Mental Health and Addictions System for Newfoundland and Labrador.” This document outlined 54 recommendations to address what is working and what needs to change in the current mental health system (All-Party Committee on Mental Health and Addictions, 2017). When breaking down the themes for the report into five broad categories, two relevant themes include “promotion, prevention, and early intervention” and “the need for strengthened community supports.” The report states that it is important to provide all families with access to programs that can promote child development as well as “the social and emotional competence of children” (All-Party Committee on Mental Health and Addictions, 2017, p. 4). Instrumental community-based music programs may be one way to help address these needs (Hallam, 2010; Sheltzer & Consoli, 2019). The Government of NL also released a report titled “The Way Forward” in which they state they are committed to implementing all 54 recommendations from the Toward Recovery report (p. 42). One of this report’s actions is to support better mental health within the province and to increase spending on mental health services. The report claims that these investments will provide more community agencies with funds to expand peer support and harm reduction initiatives. Community programming could potentially help achieve some of these initiatives.

The aim of this thesis is to explore the impact of instrumental community music programs on youth well-being. This thesis directly aligns with health strategies and frameworks in NL that push more research and discovery in early interventions to improve youth well-being and mental health (All-Party Committee on Mental Health and Addictions, 2017; Government of Newfoundland and Labrador, 2015; NLSupport, 2017).

Our environments and communities can play a role in our health and well-being. There has also been an increase in recognition of music's importance in promoting health and well-being over the past three decades (Sunderland et al., 2018). However, there is still a general lack of research exploring the impact of instrumental community-based music programs and their effect on health and well-being (Burnard & Dragovic, 2015). More research in this area is important to further explore the relationship between different programs and health. Arts-based participatory programs are considered low risk and low-cost ways to engage populations and potentially improve health and well-being (Clift & Camic, 2016). More research in the arts and health is also supported and encouraged by large and comprehensive reports (All-Party Parliamentary Group on Arts, Health and Wellbeing, 2017; WHO, 2019).

Many national organizations exist to support further research and recommendations in the arts and health. Haley Toll (2019) summarized some of the frameworks and initiatives worldwide that support arts and health in a presentation entitled *Arts, Health, & Wellbeing Frameworks to Inform Public Policy*. In this presentation, Toll (2019) reveals that the United Kingdom, United States of America, Australia, Norway, Sweden, Finland, and Canada all have national organizations supporting arts and health. However, Canadian art policy does not yet exist. Canada has

not released national papers or documents supporting the arts and health and does not have the same support and backing that many other countries have. Such initiatives would help promote the use of arts or music for health promotion and prevention.

With regards to health promotion, social prescription is becoming more prevalent throughout the world and in Canada (Alliance for Healthier Communities Canada, 2020; WHO, 2019). Social prescription involves health care providers referring people to non-clinical services within the community (Alliance for Healthier Communities Canada, 2020). A pilot study with over 1,100 clients and 3,300 social prescriptions had three findings: 1) clients reported improvements in their mental health and ability to self-manage health, decreased loneliness, and increased connectedness and belonging. 2) Healthcare providers recognized social prescribing as useful for improving well-being of clients and reducing repeated visits. 3) Social prescribing enhanced community and allowed for co-creation and more integration between clinical care, interprofessional teams, and social support (Alliance for Healthier Communities Canada, 2020). This reveals the power community has in health promotion and assisting with health care.

Music has been used to help people with mental health problems, chronic health problems, learning difficulties, neurological problems, and physical disabilities (Västfjäll, Juslin, & Hartig, 2012). Life expectancy is increasing, and people are living longer with chronic conditions, yet, psychological illnesses remain increasingly high (Västfjäll, Juslin, & Hartig, 2012). There is also much evidence that those living with chronic illness are more susceptible to mental health problems (Canadian Mental Health Association, 2008). The importance of mental health in all areas of health and well-being speaks to the importance in identifying ways to promote positive mental health. While this project

focuses on youth, research in arts based programs can benefit well-being of people of all ages, cultures, and ability (Västfjäll, Juslin, & Hartig, 2012).

### **Literature Review**

Creswell (2012) expresses that literature reviews are important in providing a rationale for studying a problem. This review will cover literature exploring arts and health, music and health, and relevant research. It will also explain why this thesis focuses on instrumental community-based music programs' impact on youth populations specifically. The systematic review in chapter two will also provide a detailed literature review specifically focused on community-based music programs' impact on well-being.

### **Arts and Health**

Practicing an art, no matter how well or badly, is a way to make your soul grow, for heaven's sake. Sing in the shower. Dance to the radio. Tell stories. Write a poem to a friend, even a lousy poem. Do it as well as you possibly can. You will get an enormous reward. You will have created something (Vonnegut, 2005, p. 24).

Arts and health is a broad term used to describe fields that contribute to practice, education, and research into arts-based services that can be integrated into health settings (Clift & Camic, 2017). The importance of arts in health and well-being is becoming increasingly recognized throughout the world. The WHO (2019) scoping review reveals evidence that the arts play a role in health and further research in this area.

The use of arts as an intervention for health purposes has existed for generations (Clift & Camic, 2016). There is a long history of arts being used in education, fostering social engagement and social change, and influencing behaviours of populations (Clift & Camic, 2016). Clift and Camic (2016) reflect that art-based health promotion has a

history in traditional cultures through storytelling, drama, and song to facilitate healing and beliefs within cultures. The importance of art was long recognized in the world's indigenous peoples and was part of feasting and gifting rituals, singing, dancing, drumming, weaving, basket making, and carving which simultaneously merged creative expression with spiritual practices, community identity and lineage (Clift & Camic, 2016; Muirhead & de Leeuw, 2012). Malchiodi (2002) states, "artistic expression is one of our elemental tools for achieving psychological integration, a universal creative urge that helps us strive for emotional well-being" (p. 11). Artistic interventions, such as music programs, may be one way to encourage mental health well-being (Culp, 2016).

Arts-based services and interventions are ideal for health promotion as they are "preventative, non-invasive, cost-effective, and accessible with few to no adverse side effects" (Clift & Camic, 2016, p. 274; Malchiodi 2005; Sonke 2011). In the WHO (2019) scoping review, a figure explains the components, responses, and outcomes associated with arts and health. Some of the responses to arts interventions include psychological responses such as enhanced self-efficacy, coping, and emotional regulation, physiological responses, social responses such as a reduction in loneliness and isolation, increased social support and social behaviours, and behavioural responses such as healthier behaviours and skill development (WHO, 2019). The review also stated that arts activities could help increase self-esteem, self-acceptance, confidence, socialization, and resilience, all of which help protect against mental illness and promote well-being (WHO, 2019). The arts have also been shown to promote cooperation, social inclusion, and bring together different cultures and communities (Bang, 2016). Levitin (2006) describes "the power of art is that it can connect us to one another, and to larger truths about what it

means to be alive and what it means to be human” (p. 239). Arts can improve prosocial behaviours such as volunteering and charitable giving that bring together communities (Van de Vyver & Abrams, 2018). This is evident in musical activities, where experimental studies on singing have revealed benefits in self-perceptions of social bonding through music faster than with other social activities (Pearce, Launay & Dunbar, 2015).

### Key dimensions of arts/health

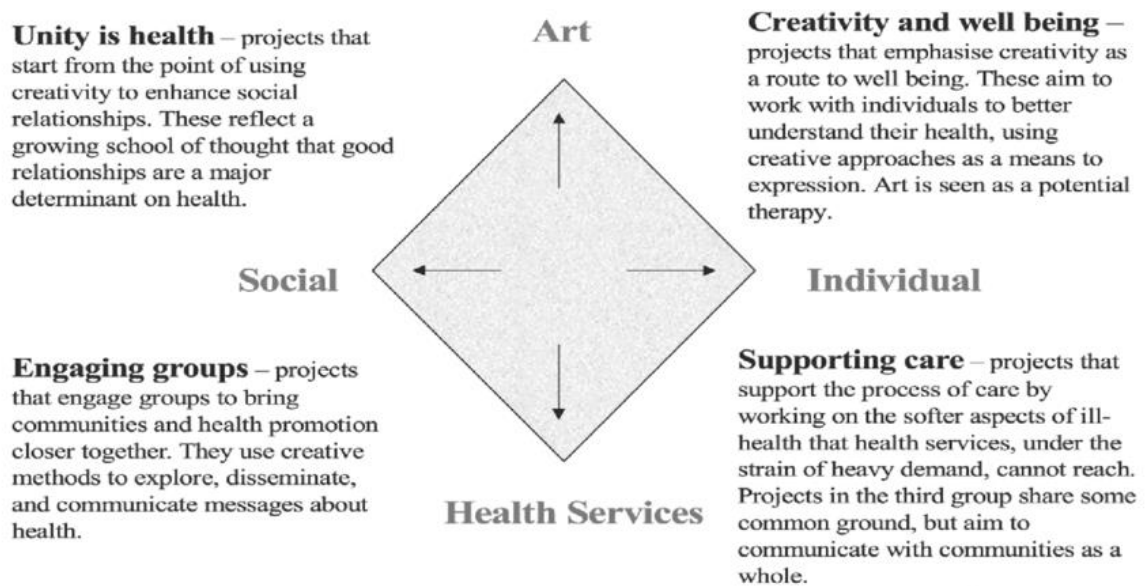


Figure 1.0 Arts and Health Diamond by MacNaughton et al., (2005)

MacNaughton, White, and Stacey (2005) designed the arts and health diamond when reviewing arts and health initiatives. The right side is more focused on the individual, while the left side is more concerned with larger groups and community health. This diagram aims to show how the arts and health are connected (Murray & Lamont, 2012). In the unity of health section, good relationships are referred to as a

“major determinant of health.” Many arts based programs are social in nature and aim to bring people together, fostering determinants of health (Murray & Lamont, 2012).

### **Music and Health**

For virtually all of us, music has great power, whether or not we seek it out or think of ourselves as particularly ‘musical.’ This propensity to music shows itself in infancy, is manifest and central in every culture, and probably goes back to the very beginnings of our species (Sacks, 2007, pp. x-xi).

Daniel Levitin (2006) explains that “music listening, performance, and composition engage nearly every area of the brain” (p. 9). Research reveals that engagement with music can change the brain and affect learning, development, and brain function (Thaut, 2005). Learning an instrument or participating in music interventions can create a therapeutic relationship with the mind that supports development, health, and well-being (Hallam, 2010; Thaut, 2005).

Music has played a large part in expression, spiritual practices, community identity, health, and well-being in indigenous populations (Clift & Camic, 2016; Harrison, 2009; Muirhead & de Leeuw, 2012). An article by Harrison (2009) explored Aboriginal Canadian music promoting well-being in those who take part in musical cultural healing programs. In this article, a participant named Fred John is asked about his experience Powwow Drumming at the Aboriginal Front Door program. He explains that the drumming experience is healing not only for the individuals involved but also for those around them. Fred John shares, “when we’re drumming, they can hear the drum sound almost like the drum sound to us is, it makes us feel, let’s see, we feel like it’s healing us. It makes us proud to hear the drum and the drum songs” (Harrison, 2009, p. 5). He also shares that other aboriginal people will recognize the song they are playing

and that it “revives that spirit again” (Harrison, 2009, p. 5). He stated that the music triggers memories and makes them feel good, “They’ll feel like it’s bringing them back to the purification time when they were little or when they’ve been raised before the hardship started” (Harrison, 2009, p. 5). Fred John’s explanations help reveal the powerful emotional impact of producing and listening to music. Harrison (2009) also explored Brenda Wells’ and Frank McAllister’s stories involving music and wellness. Personal communications revealed that hand drumming allowed Frank to let go of the past painful experience that he felt contributed to drug and alcohol addictions. Brenda considered leading hand drumming to be a “positive experience” that also lead her to help others in similar social or health struggles (Harrison, 2009, p. 13). These accounts revealed the positive and healing power that music can have on individuals. As Patricia Leavy explains, “The arts, at their best, are known for being emotionally and politically evocative, captivating, aesthetically powerful, and moving” (p. 24). Although music engagement’s positive impact seems clear, those leading music projects without consideration of the potential negatives that can occur can be damaging to health (Daykin, 2012). Emotional responses to music may not always be positive. The “positive impacts of music and arts participation cannot be assumed,” as there may be unintended negative consequences (Daykin, 2012, p. 68).

In the scoping review, there are many mentions of the impact of music interventions on health and wellness (WHO, 2019). Music challenges inequities and inequalities by reducing anxiety, depression, emotional alienation, and aggression in children, especially those at risk (Cain, Lakhani & Istvandity, 2016). It also shows benefits related to positive mental health and well-being, such as school attendance, self-



esteem, cultural empathy, confidence, empowerment, and healthy nutrition (Cain et al., 2016). One study suggests instrumental music can prevent the development of mental health problems such as depression, anxiety, attention problems, and withdrawal in children who are experiencing maltreatment (Kim, 2017). Participating in musical activities can have a profound positive experience for those involved.

### **Music Interventions**

Engaging with music can be used for many different health related purposes such as: communicating and emotional sharing in those with disabilities and special needs; maintenance of healthy brain function and reducing decline of cognitive functioning in elderly; reducing depression and anxiety through raising spirits; and reducing isolation and loneliness through providing social support (Clift et al., 2010). There are many different environments and ways to explore music and its impact on mental health and well-being. Music interventions can include listening, learning, performing, moving to, or singing music (WHO, 2019). It can occur in many settings, including the home, the hospital, other health care settings, in school, or within the community. Music interventions can also be individual or in groups and even by distance or online. Individual or private music lessons often consist of one-on-one lessons with a singular student. School-based music programs or music education includes any music programs that are part of or become part of school time and curriculum. An example of a school-based music program is evident in Rickard and colleagues' (2012) study. In this study, a music program was implemented as part of the school curriculum and required participation as a part of schooling. This study suggested that receiving school-based

music instruction prevented a decline in self-esteem that was seen in the control group who were not taking part in the music class.

Musical interventions that aim to improve health may include music therapy. Music therapy (MT) is a structured music intervention provided by a board-certified music therapist to enhance a patient's quality of life (Maratos, Crawford & Procter, 2011). The Canadian Association of Music Therapists (2016) defines music therapy as a discipline where accredited professionals "use music purposefully within therapeutic relationships to support development, health, and well being." Music therapists "use music to address human needs within cognitive, communicative, emotional, musical, physical, social and spiritual domains" (Canadian Association of Music Therapists, p. 1). They can provide services to people of all ages, abilities, and backgrounds, in many settings, including "health care, educational, community, private, institutional, and corporate" (Canadian Association of Music Therapists, 2016, p. 1). The primary differentiation between MT and other music interventions is the presence of a licensed music therapist, the structure and purposeful use of music, and the therapeutic relationship between the therapist and their patients (Canadian Association of Music Therapists, 2016). An example of MT can be seen in Solli and Rolvsjord's (2015) study exploring how music therapy impacted patients diagnosed with psychosis. Participants were recruited from the psychiatric unit at a hospital and had to meet the diagnosis for a psychotic illness. Trained music therapists offered individual weekly sessions with each patient as well as a group session. The therapies included a various music activities based on patient preferences such as structures improvisations, playing and learning instruments, singing, music listening, song recording, and music production. Through

semi-structured interviews they found that music therapy sessions were related to themes such as freedom, contact, well-being, and symptom relief. Some of the sub-themes included participants feeling freedom from their illness, contact with feeling alive, and well-being in the form of enjoyment, motivation, and hope (Solli & Rolvsjord, 2015). Each of these themes portrays the positive effect the music therapy sessions had on patients.

### **Community-Based Music Programs**

Music has the ability to communicate, inspire, excite, motivate and to express a wide range of feelings and experiences. Community music involves musicians working with people to enable them to actively enjoy and participate in music. This can happen anywhere and with anyone, because a ‘community’ doesn't have to be a geographical one. It can be a group of people who share common interests, experiences, or backgrounds (Veblen, 2007, p. 5).

One approach to music learning is as a form of community art. Community arts show promise in achieving more than “purely musical goals in terms of identity, health and well-being” (Murray & Lamont, 2012, p. 76). Community arts are distinguished from other arts by Webster (2005, p. 2) based on three criteria: 1) participation is promoted regardless of existing skill; 2) it is lead by a group who have a collective identity or values and a goal beyond the art itself; 3) the primary goal is to provide an opportunity to those who have less access to participate in arts for social or economic reasons., Community music has many different definitions, which Higgins (2012) attempts to break down into three broad categories. These are the music of a community, communal music-making, and the intervention between a music leader and participants (Higgins, 2012, p. 3). Higgins (2012) states that community music is music making outside of formal music institutions and relationships between informal, formal, and educational settings.

Although community music may not always have therapeutic impacts as a primary concern, they are concerned with increasing access to music programs (Higgins, 2012).

Community-based music programs include extracurricular music programs that are not a mandatory part of the school curriculum during school hours. They may take place in school or other areas within the community. Higgins (2012) and Veblen (2007) explain that there are many beliefs and definitions regarding community music. For some, it is any music education that exists outside of regular school programs. However, community music involves active music-making, which refers to creating music and performing music. It can be formal or informal and includes many music genres and performances that may be part of cultural and arts events or other celebrations (Veblen, 2007). Higgins (2012) shares that some of the values of community musicians are that everyone has the right to create and enjoy their own music, music opportunities should be accessible within the community, social and personal growth are as important as musical growth, work should be completed in a way to show respect for culture and community, and that music can be used to help foster acceptance and understanding. Community music programs also emphasize a mission of lifelong learning and music access (Higgins, 2012; Veblen, 2007). Community music holds these values and attitudes, and they are able to be passed on between a music leader and their participants (Higgins, 2012). Sound Sense, an agency in the UK that promotes community music, expresses some of the benefits of community music:

[it] helps people make music, on their own terms. It reflects their lives and experiences. And, as well as providing an enjoyable fulfilling experience, community music brings people together through music... it can help people express things, empower them, create positive attitudes, build confidence, provide

skills and open up routes to new opportunities (Murray & Lamont, 2012, p. 78; <http://www.soundsense.com>)

### **Systematic Reviews Exploring Music Interventions and Well-Being**

A limited number of systematic reviews explore instrumental music's relationship with mental health and well-being. Daykin and colleagues (2018) conducted a systematic review exploring well-being outcomes for music and singing in adult populations. The review included 61 studies that examined a wide range of music interventions that included any musical listening, singing, or playing. The conclusion revealed support for music and singing as a potential way to enhance well-being and reduce or prevent symptoms of depression in adults (Daykin et al., 2018). This review also noted that music listening interventions are the most common, and there is a need for more research involving instrumental music programs (Daykin et al., 2018). Sheppard and Broughton (2020) also conducted a systematic review exploring how music and dance participation promotes well-being and health. They focused on cognitive sources of well-being such as quality of life for music interventions and cognitive and physical health for dance interventions. The review included a total of 28 studies examining active participation in music and dance. Findings in this review suggest that active music participation promotes or maintains well-being and health (Sheppard & Broughton, 2020). The review also revealed that there is a dominant focus on older adults when it comes to research in music and well-being and that younger populations should also be explored.

A systematic review by Henderson and colleagues (2017) explored seven studies in which migrants took part in participatory music activities. The findings revealed that participation in music activities had a generally positive impact on migrant populations.

This review explains that migrant populations often experience poor physical and psychosocial issues such as feeling alienated or isolated from the general population. This is due to the many challenges these communities face such as the “cultural, mental, physical, and emotional challenges” that are a consequence of their experiences “prior to and during resettlement” (Henderson, Cain, Istvandy, & Lakhini, 2017, p. 459-460). Migrant experience places them at risk for “psychological problems such as loss of self-esteem, loss of identity, behavioural issues, aggression, anxiety, depression and emotional upheaval” (Henderson et al., p. 460). Although most immigrants and refugees adjust after resettlement, there are still stresses and difficulties associated with living in a new country with a different language and culture. They are at higher risk of depression, anxiety, and other mental health disorders because of these challenges (Henderson, Cain, Istvandy & Lakhani, 2017). Studies in the review suggested that music participation improved social well-being, self-esteem, confidence, reduced stress, and enhanced mental health. Mental health was enhanced by increasing self-esteem and confidence, allowing participants to feel empowered (Henderson et al., 2017). Participants also found group connectedness and increased trust. A study in the review also revealed that engaging in a musical activity allowed for catharsis by expressing their grief through music and song writing (Schwantes et al., 2011). Another review by Hohmann and colleagues (2017) revealed the potential benefits of music in at risk populations who met the criteria for substance use disorder. The review found that music therapy and other music-based interventions show promise in promoting positive mental health as well as beneficial increases in mood, social skills and self-esteem as well as decreases in stress levels (Pelletier, 2004; Sharma

& Jagdey, 2012, Gooding, 2011; Shuman, Kennedy, DeWitt, Edelblute, & Wamboldt, 2016).

Youth populations were severely underrepresented in the systematic reviews. One of the few reviews that focused on youth looked at music's impact on health and well-being focused on youth offenders or those considered at high risk for offending (Daykin, de Viggiani, Pilkington & Moriarty, 2013). In this review, the music interventions included all kinds of music activities such as playing or listening to music, learning instruments, singing, rapping, hip hop, and drumming. This review did suggest that music interventions might be important for health promotion and prevention of offending in young people (Daykin et al., 2013).

As mentioned, there are few systematic reviews explore the health and well-being benefits of music participation. Of the existing reviews, none directly study instrumental community-based music programs or in youth populations. However, the available reviews reveal a positive relationship between music and well-being.

### **Why Explore Community-Based Music?**

Youth often spend time out of school in extracurricular, community-based activities (Sheltzer & Consoli, 2019). There are up to 25 hours of the week where youth are out of school and caregivers may be working, creating an after-school gap (Catalyst, 2006). Programs occurring during after school hours can help reduce this gap that is associated with higher youth crime rates and other negative outcomes (Sheltzer & Consoli, 2019). Research suggests high-quality programs outside of school time can produce meaningful results for youth (Durlak & Weissberg, 2007). Health and well-being

are something we can achieve in our communities, lifestyles, hospitals, and health centres (WHO, 1986).

There is an increasing emphasis on the importance of creating community spaces for health and promoting social and emotional well-being in young people (Clift & Camic, 2017; Weare, 2017). Participating in community activities is a protective factor in positive health outcomes (Stewart & Irons, 2018). However, group music-making's role in health promotion is still under-researched (Stewart & Irons, 2018). Community-based music programs have the opportunity to provide youth with an environment that promotes learning, social opportunity, and positive growth outside of school (Sheltzer & Consoli, 2019). Community-based music programs emphasize youth well-being as much as they emphasize music education, and instructors aim to bring people together and create individual and collective identities (Veblen, 2007). Burnard and Dragovic (2015) describe extracurricular instrumental music group learning, commonly seen in community music, as “rooted in and representing people working together to express their needs, their hopes, their visions, about people being active and having fun together, and the self-respect of individuals and the community” (p. 372). The goals of community music align with theories of achieving well-being as they aim to achieve positive and safe feelings and a sense of connection with others and the community and the wider environment.

Although community music programs can involve various forms of music, this thesis will focus on instrumental music programs. Instrumental music interventions are currently the most underrepresented in health and music research (Sheppard & Broughton, 2020). Different music interventions can reveal various benefits, so it is essential to research them individually as well. Instrumental music will come with its



unique challenges and experiences, much like singing or dancing would. This choice includes the time limitations of a master's thesis, accessibility of an interested community-based instrumental music program that has never been studied and the suggestions from other reviews and research (Daykin et al., 2013; Daykin et al., 2018; WHO, 2019).

### **Why Focus on Youth?**

Since most adult mental health problems begin in childhood and adolescence, it is important to determine which prevention methods are effectively keep youth happy and healthy (Underwood, Washington & Underwood, 2016). Brain development does not reach completion until early adulthood (Arain, Haque, Johal, Mathur, Nel, Rais, Sharma, 2013). Our brains are continually developing and forming new connections throughout adolescence, but this process slows down after the teenage years (Levitin, 2006). Therefore, our neural circuits are more easily changed and structured due to our experiences at young ages (Levitin, 2006). Because young people's brains are not fully developed, they may also experience life and interventions differently than adults. Young people often experience difficulties coping with the daily pressures, which can contribute to low motivation, a lack of confidence, and poor self-esteem (Sklar, Anderson, & Autry, 2007). Self-esteem development is crucial for youth as it enables them to build resilience and deal with these pressures. Therefore, it is important to conduct research focusing on opportunities or interventions that effectively promote positive health, resilience, and self-esteem in youth.

Lower self-esteem in youth is related to poorer mental health outcomes and higher levels of criminal activity in adulthood than those with high self-esteem (Trzesniewski,

Donnellan, Moffitt, Robins, Poulton, & Caspi, 2006). Many social and educational problems in young people such as anti-social behaviour, criminal activities and violence, failure in education and substance abuse are associated with low well-being (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2002). Therefore, it is important to look at youth's mental health needs to ensure they can develop and contribute positively to society (Weare, 2017). Thus, interventions that promote well-being, self-esteem, and resilience are linked to positive mental health outcomes.

Few qualitative studies exist that look at music involvement in youth and of the existing qualitative studies we have explored, most focus on music therapy settings. Critical theorists state there is a "lack of first-person accounts" when it comes to at-risk populations such as youth (Solli & Rolvsjord, 2015). By not hearing their voices, we risk silencing an entire group of people "who have been left subject to the perspectives of others" (Solli & Rolvsjord, 2015). Using qualitative methods, we can collect narratives and experiences from these individuals, giving them a voice. Conducting research that explores community-based music programs and wellness in youth can help us understand whether and why these programs are effectively promote positive mental health. If interviews support the narrative that music programs positively impact youth, implementing community-based music programs may be introduced in other communities as an alternative method of promoting mental health and wellness in youth.

### **Instrumental Community Music Programs and Well-Being**

Learning an instrument has shown positive development and benefit in youth (Hallam, 2010). Hallam's (2010) article on the power of music references studies that explore the impact of different kinds of musical learning. Some of the findings suggest

that learning an instrument can lead to increased self-esteem, confidence, self-discipline, self-expression, a sense of achievement and other personal and social benefits. When learning occurs in a group, it also promotes friendships, social skills, belonging, teamwork, responsibility, commitment and support (Hallam, 2010). Instrumental community music programs provide both the opportunity to learn an instrument while interacting with a group of likeminded individuals.

### *Self-Esteem, Confidence and Competence*

Instrumental music programs provide the opportunity to learn a skill. Research by Shin (2011) suggests that in just seven weekly community-based musical involvement sessions, self-esteem in youth residing in low-income communities can improve. The music program's aim was "to enable students to discover, heighten, and enjoy their feelings of self-worth by learning how to create and perform music" (Shin, 2011, p.32). The program was considered student-lead and allowed for students to share and create music from their own ideas. Having their ideas respected and creating music likely contributed to the self-esteem and competence that students felt (Shin, 2011). Barrett and Bond (2015) looked at an Australian community music program. This voluntary and inclusive program offered many different musical activities. Interviews revealed that participants felt the music program supported self-esteem and confidence. One teacher commented on the program saying, "I think it's a huge self-esteem builder" (Barrett & Bond, 2015, p. 45). A student also stated, "We learn not to be embarrassed about how much we do wrong ... not to worry about what other people are going to think; so I'll play the drums, and learn not to be afraid to do that as well." (Barrett & Bond, 2015, p.

45). This quote speaks to Higgins (2012) criteria for community music and the importance of accepting everyone regardless of skill. Environments with less pressure provide more room to learn and feel confident and competent. These changes are also evident in Barrett and Smigiel's (2007) study exploring different community-based music interventions taking place in school settings. One of the students shared that there is a positive challenge associated with playing music with other people. Another shared, "As I have grown up, it has definitely given me a lot more courage and belief in myself... It just means that I have achieved something. That I can actually do something and be good at it." (Barrett & Smigiel, 2007, p. 46). Learning a skill and performing it in a non-judgemental environment seems connected to this improved self-esteem and sense of competence.

Conversely, Alemán and colleagues (2017) found that participation in an El Sistema community-based music program did not significantly increase self-esteem or prosocial behaviours. The music program has orchestras and choirs and following a "national curriculum that specifies compositions and arrangements of increasing complexity" (p. 868). The notion of El Sistema is often positively received despite its problematic background. An article by (Baker, 2016) claims that El Sistema's idealization of orchestra dynamics is complicated and may produce exclusion. The article continues that this structure can often lead to dissatisfaction amongst musicians (Baker, 2016). This program appears more structured than many of the above studies which are open to multiple music activities and collaboration. A stricter musical structure could lead to less enjoyment than more open and inclusive programs (Baker, 2016; Higgins, 2012). Although this program would meet certain definitions of community music, it would not

meet all of Higgins (2012) criteria. Shockingly, El Sistema's creator stated that they were thinking more about discipline than music, and they aimed to discipline the poor and "civilize" or "improve social and ethnic others" (Baker, 2016, p. 14). This vision goes against the aim of community music to include and empower. Higgins (2012) argues that inclusivity and openness, regardless of skill, is vital in community music. Baker (2016) reveals there was nothing about social justice in the objectives of El Sistema, and the goal was to boost classical music within the country. If current programs continue to value music over opportunity, this could account for the lack of significant improvement within El Sistema studies. It is important to be cautious about the structure and aims of community music programs to ensure they align with those of community music.

### ***Prosocial Outcomes***

Dakon and Cloete (2018) conducted a qualitative case study that explored the benefits of an eclectic community-based music group called Violet. Although it is a string orchestra program, Violet is considered an informal and relaxed environment where social interaction is just as important as musical learning. They found through interviews and observations that music participation provided young people with a way to meet people and make friends. They also shared that members were encouraged to "work on self-respect and self-esteem" (Dakon & Cloete, 2018, p. 69). Many of the students involved in Violet have called it a "family" and reference bonding and creating deep relationships with others (Dakon & Cloete, 2019, p.67). Participants also mentioned feeling secure and accepted by the group. They shared that the respect they learned helps

them identify and celebrate similarities while respecting differences amongst other members.

Burnard and Dragovic (2015) also found that the togetherness and co-creation of a community-based extracurricular instrumental music program provided features of well-being such as belongingness, relatedness, and feelings of competence in their percussion group. One student wrote in her diary, “Percussion 1 is definitely special to me for a number of reasons. One of the main reasons is that I am around like-minded people, who all love, understand and feel the music in the same way” (Burnard & Dragovic, 2015, p. 386). Higgins (2012) explains that social connections and collaboration are among the most significant characteristics of community music.

Auerbach and Delport (2018) also explored a non-formal community-based music program in a voluntary aftercare facility. They found that musical practices and active listening helped mindfulness and improved social well-being in areas such as social skills, listening skills, teamwork, and communication skills. One of the main themes they identified was “increased awareness of the self and others” (Auerbach & Delport, 2018, p. 5). They suggested that group music activities enhanced social inclusion and cohesion, and children experienced mutual connection when making music together. They gave examples such as students clapping together after and expressing joy after creating sounds of pure harmony (Auerbach & Delport, 2018).

Barrett and Bond (2015) also found evidence of social well-being through community-based music involvement. The article concludes that both teachers and students found a “range of social competencies that they believed they had developed through their music activities” (Barrett & Bond, 2015, p. 44). One of the important

themes uncovered by the authors was that of “connection” formed between students and instructors in these programs. Evidence of music programs fostering connection was seen through the interviews. Teachers stated that children learn to be part of a team, which is incredibly important in social wellness. The principal noted that even those struggling with failure, attention, and behavioural disorders, and learning difficulties, were helped by the program’s social aspects. A quote from the principal stated “They’re actually starting to have fun doing pro-social things like cooperating, working as a group, acknowledging the fact that somebody else in the group might need them to slow down for a while, while they learn their bit ... we have got to create this memory of a positive experience” (Barrett & Bond, 2015, p. 46). Barrett and Smigiel, (2007) also found evidence of social well-being in their study. One of the emerging themes was “unity of purpose” which revealed that connections were made with other students with similar interests. Another relevant theme was “relationships and community.” Youth participating in the music program found that the music program helped create a sense of family, created friendships, and improved social bonds and sense of community. One student stated, “The people in my class and the people are just really lovely here. They are really willing to help you out with anything” and “Most of the people here know me really well, and we all know each other, and we all take care of each other and we look out for each other” (Barrett & Smigiel, 2007, p. 46).

### ***Positive Emotions***

Devroop (2012) explored whether community-based musical activities provided by the South African Musical Outreach Project could impact outcomes such as optimism

and happiness. This program aimed to give underserved children the opportunity to learn music. They found that participation was significantly correlated with optimism and happiness. Devroop (2012) stated that levels of optimism and perseverance become pivotal building blocks to a psychologically and socially balanced and healthy generation of youth (p. 414). Many of the participants in Barrett and Smigiel's (2007) study also spoke about how participating gave them a sense of fulfillment and well-being. One child noted, "I feel happy and free and I feel good about myself" (Barrett & Smigiel, 2007, p. 46).

### **Literature Review Concluding Remarks**

It is evident through the literature review that arts and music programs show promise in promoting well-being. However, a recurring theme in existing research and reviews about music and health is that there needs to be more research in this area. As mentioned above, no existing systematic reviews are exploring instrumental community-based music programs' impact on youth. Also, many of the existing reviews involving music are focused on music therapy or adults and older populations (Daykin et al., 2008; Daykin et al., 2012; Hohmann et al., 2017; Ing-Randolph et al., 2015; Zhao et al., 2016). Existing reviews cited the lack of interventions in younger populations as a limitation and suggested more research involving children and youth necessary (Daykin et al., 2018; Sheppard & Broughton, 2020). One review also noted that studies examining playing musical instruments are less common than other interventions and need to be further researched (Daykin et al., 2018).



## **The Current Study**

### **Statement of the Problem**

Mental health problems are common, debilitating, and costly in economics and quality of life (Lim et al., 2008). Because environmental factors and social determinants play an important role in mental health and well-being, community-based music programs might be one way to promote health and provide youth with skills to encourage well-being. This thesis explores whether community-based music programs can potentially encourage outcomes that lead to wellness and positive mental health.

### **Environment**

The importance of mental health and well-being is recognized world-wide (Ferrari et al., 2013). Chapter two is a systematic review that includes studies around the globe. However, chapter three is specific to Newfoundland and Labrador (NL). NL has recognized a need within the province to focus on strategies to promote positive mental health and wellness (Government of Newfoundland and Labrador, 2015). The 2015 framework aims to seek out opportunities and programs that allow for optimal childhood learning environments (Government of Newfoundland and Labrador, 2015). In chapter three, the environment is a local music program in St. John's, the Strong Harbour Strings (SHS). SHS is a non-profit organization that provides equal access to music education and performance for young people residing in underserved neighbourhoods with little opportunity for music enrichment (Strong Harbour Strings, n.d.). It is open to everyone regardless of their skill level, experience, or financial ability. This community-based music program is run by professional musicians who offer music lessons free of charge to all students in school ages, approximately 6 to 15 years. Participating students can learn

to play string instruments while in an environment that promotes healthy attitudes and positivity. One of program's goals is for youth to improve their self-esteem and well-being through active participation (Strong Harbour Strings, n.d.). During the focus group, an instructor described SHS as having similar values to El Sistema. They considered both to be "a program that is for students that might not otherwise have an opportunity to learn a musical instrument, a program that attempts to break down these financial and societal barriers to allow education and music."

There are currently two SHS sites in St. John's NL. The original site offers lessons twice a week in individual and group learning settings. These take place after school and in a community centre within walking distance from nearby schools. The newer site offers after school classes once a week in group learning sessions within the school. All instruments, learning materials, and lessons are entirely free of cost.

The instructors, referred to as teaching artists, teach students and perform with those in the program (Strong Harbour Strings, n.d.). They also plan and lead educational workshops for students 12 and older ranging from musical knowledge and social justice. The program was modelled after the transformative music program, Community MusicWorks, whose mission is to create cohesive communities through music education and performance and transforming the lives of children, families, and musicians within the community (Community MusicWorks, 2020).

To my knowledge, there are currently no other instrumental community-based music programs like this in NL. Music instruction is currently offered in most schools in NL in the form of band classes or programs. However, there is nothing quite like SHS offered. During a conversation with SHS instructors, they stated it had similar values to

the El-Sistema program because there was an aim to provide music opportunities to underserved areas. There are many Sistema-inspired programs in Canada, including Vancouver (St. James Music Academy), Edmonton (through the Edmonton Symphony Orchestra Educational Program), Saskatoon (Sistema Saskatoon), Winnipeg (Through the Winnipeg Symphony Orchestra Educational Program), Ontario (Sistema Toronto, The Hammer Band, The Leading Note Foundation) New Brunswick (Sistema NB), and Quebec (Encore! Sistema) (El Sistema in Canada, n.d.). However, there are currently no Sistema inspired programs in NL.

In addition to music instruction and performance opportunities, SHS offers a social club for students 12 and older. This club, titled the 12+ club, takes place a half-hour before group lessons and explores important topics such as social justice issues with students. One of the instructors explained, “I like envision it as filling the gaps in the public school education which deals with critical thinking, which deals with media literacy, and social justice issues that are prevalent in our community but also in the world at large.” Some of the topics explored include equity and equality, gender issues, and how music can be used for social justice. This program is unique to SHS.

### **Objective of the Thesis**

The objective of this thesis is to explore the impact of community-based music programs on youth well-being. This objective is explored by two unique and connected studies, a systematic review (chapter two) and a qualitative study (chapter three).

The first study (chapter two) explores the impact of community-based music programs on youth social and emotional well-being. The outcomes studied included self-esteem, social skills, sense of belongingness, resilience, quality of life, and happiness.

These outcomes are relevant due to their link to positive mental health and well-being (Weare, 2017).

The second study (chapter three) is a qualitative study informed by the systematic review. It examines youth, instructor, and caregiver perceptions of the impact of a local community-based music program. This research project involved gathering rich qualitative data through semi-structured interviews and a focus group. The purpose was to explore how this music program impacted local youth. We were interested in the perceived impact of the program and the potential reasoning behind the effects perceived.

### **Research Questions**

The research question for the systematic review (chapter two) was: What is the impact of community-based music programs on measures of social and emotional and well-being in young adults and children aged 25 and under?

The research question for the qualitative study (chapter three) was: How do youth, instructors and caregivers perceive the impact of a community-based music program on youth well-being?

## **Methodology**

### **Chapter Two: Systematic Review**

The systematic review in chapter two explores community music programs' impact on social and emotional well-being in youth 25 and under. It provides an understanding of the existing literature.

### ***Methods***

The systematic review (chapter two) followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (Moher, Liberati, Tetzlaff,

& Altman, 2006). The review aimed to explore the impact of community-based music instruction on mental health and wellness in children and young adults. A search strategy was created and conducted with help from a librarian to capture all relevant research articles. This search was developed and modified for each database. All identified studies were imported to the online bibliographic management program, Zotero, and duplicates were removed. Titles and abstracts of all articles were then screened to identify potential articles that met the eligibility criteria and full-text articles were reviewed for eligibility and inclusion. The full-text articles were assessed by three independent reviewers. Data was removed from the included articles and analyzed in the review.

### *Quality Assessment*

Three authors independently assessed the risk of bias and quality of eligible studies using the Critical Appraisal Tool Programme (CASP) tools (CASP, 2020). For qualitative studies, the CASP qualitative research checklist was used. This tool evaluates study purpose, design (including recruitment), data collection and analysis, ethical issues, and overall significance of the findings. When examining quantitative and mixed methods studies, the CASP randomized control trial checklist was used. This checklist evaluates study quality and looked at randomization; treatment of intervention and control groups; effective size and precision; and applicability of the results. Once the articles were scored, they were then given a USPSTF checklist quality score of poor, fair, or good. Good studies were considered well-designed, well-conducted and representative studies with a direct assessment of health outcomes, studies were considered as “fair” if they met most design standards, poor studies were felt to contain more significant flaws in design or did not include important information (USPSTF, 2018).

### **Chapter Three: Qualitative Study**

The qualitative study (chapter three) followed interpretative phenomenological analysis. Semi-structured interviews and a focus group were used to gather rich data from participants. Interviews took place with youth, instructors, and parents/caregivers who were a part of a local community-based music program, SHS. Transcripts were examined for themes using thematic analysis.

#### ***Community Engagement***

This study was supported by Translational and Personalized Medicine Initiative (TPMI) / NL SUPPORT Educational Funding, which supports patient-oriented research. I tried to ensure that community members were involved throughout the research project. Initially, community interest in the music program helped identify the research topic. I also attended community events to engage with the community about the research topic and to get feedback. I had conversations with members of Strong Harbour Strings regarding the interview questions and research goals. This project would not be possible without the SHS community as well as the communities these lessons took place in.

#### ***Participant Recruitment***

I recruited participants by attending the program and letting all students, caregivers, and instructors know about the opportunity to participate in this study. The director of SHS introduced me to students and available parents to speak briefly about the study at the beginning of the classes. At this time, letters containing a description of the study and a consent form were handed out. Students were asked to bring the letters home to their parents and caregivers. I also handed out letters to each of the instructors. These letters invited participants to the study, explained what the study consisted of, and

had an attached consent form that described the study's consent process. Everyone was made aware that a drop box would be left at the SHS locations for students, parents, and instructors to return consent forms anonymously and conveniently.

### ***Data Collection and Analysis***

Data was gathered through audio-recorded semi-structured interviews and a focus group. The interviews and focus group all took place at the location of Strong Harbour Strings (SHS) for participants' convenience. The interviews were guided by open-ended questions that explored students' experiences and feelings about the SHS music program and its impact. This study explored the research question, "How do youth, instructors and caregivers perceive the impact of a community-based music program on youth well-being?" We aimed to reach this using open-ended questions such as "Tell me about what you do when you come to Strong Harbour Strings" "How does being a part of the music program make you feel about yourself?" "Do you notice any changes in yourself after joining the program? Explain" (see Appendix F-H for a full list of questions).

After the audio-recorded interviews and focus groups were completed, they were transcribed verbatim by the primary researcher and de-identified. The original transcripts were saved on an encrypted password-protected flash drive to ensure privacy and protection of the data. Only de-identified copies of the transcribed transcripts were distributed to the research team.

I conducted this study following interpretative phenomenological analysis as described by Smith and Osborn (2004) and analyzed data through thematic analysis as described by Braun and Clarke (2006). The steps to thematic analysis as defined by Braun and Clarke (2006) include, "familiarizing yourself with your data, generating initial

codes, searching for themes, reviewing themes, defining, and naming themes and producing the report.” I was responsible for listening to and transcribed the data verbatim and de-identifying it to share with other research team members. I then spent countless hours going over the transcripts and coding and finding relevant quotes in each of the transcripts. Once I identified codes and themes, I wrote them up in a document and shared with the research team. Categories, themes, and sub-themes emerged from this process and were agreed upon by the research team.

### ***Research Paradigm, Ontology and Epistemology***

This qualitative research project followed a constructivist (or interpretivist) research paradigm. Constructivism is considered a postmodern paradigm, which contends positivist and postpositivist paradigms (Lincoln, Lynham & Guba, 2011). This is because positivist and postpositivist views practice objectivity in data collection and are most common in quantitative and mixed methods studies (Leavy, 2017). Postmodern views, such as the constructivist view, are more common in qualitative and arts or community-based research (Leavy, 2017). These views acknowledge that one’s own biases or beliefs and understands that the researcher cannot be separated from their research. The beliefs of constructivism are best defined in Lincoln, Lynham & Guba’s tables on basic beliefs of paradigms, paradigm positions on selected issues, and themes of knowledge (2011, pp. 98-116).



Table 1.0

*Constructivist (Interpretivist) Paradigm Positions on Selected Issues (Lincoln, Lynham & Guba, 2011).*

<p>Ontology</p> <p>“World view and assumptions in which researchers operate” (Schwandt, 2007, p. 190).</p>	<p>Relativism consists of local and specific constructed and co-constructed realities (Lincoln, Lynham &amp; Guba, 2011, p. 98)</p> <p>“We construct knowledge though our lived experiences and through our interactions with other members of society. As such, as researchers, we must participate in the research process with our subjects to ensure we are producing knowledge that is reflective of their reality” (Lincoln, Lynham &amp; Guba, 2011, p. 103)</p>
<p>Epistemology</p> <p>The process of thinking. The relationship between what we know and what we see. Truths we seek as researchers (Guba &amp; Lincoln, 2005; Lynham &amp; Webb-Johnson, 2008; Pallas, 2001).</p>	<p>Transactional/subjectivist co-created findings (Lincoln, Lynham &amp; Guba, 2011, p. 98). The philosophical belief that people construct their own understanding of reality; we construct meaning based on interactions with our surroundings (Guba &amp; Lincoln, 1985).</p> <p>Follows assumption that we are unable to separate ourselves from our knowledge. The investigator and investigation are connected (Guba &amp; Lincoln, 1994).</p> <p>“We are shaped by our lived experiences and these will always come out in the knowledge we generate as researchers and in the data generated by our subjects” (Lincoln, Lynham &amp; Guba, 2011, p. 104)</p>

<p>Methodology</p> <p>The process of how we seek out new knowledge (Schwandt, 2007).</p>	<p>Hermeneutical/dialectical: individual constructions are elicited and refined hermeneutically and compared and contrasted dialectically, with aim of generating one or a few constructions (Guba, 1990, p. 27). Hermeneutics refers to interpretation, recognition, and explanation (Guba, 1996).</p> <p>Interpretative approaches rely heavily on naturalistic methods such as interviewing and observation. Meanings emerge from the research process, and typically qualitative methods are used (Angen, 2000).</p>
<p>Inquiry Aim</p> <p>The goals of research and reason why inquiry is conducted (Guba &amp; Lincoln, 2005).</p>	<p>To understand and interpret through meaning of phenomena (which is obtained from joint construction of meaning of lives experience); such understanding is sought to inform practice (Lincoln &amp; Guba, 2005, p. 194).</p>
<p>Nature of Knowledge</p> <p>How researchers view the knowledge generated through inquiry research (Guba &amp; Lincoln, 2005).</p>	<p>People construct their own understanding of reality (Guba, 1990).</p> <p>Subjective and co-created though the process of interaction between the inquirer and inquired into (Lincoln, Lynham &amp; Guba, 2011).</p>

As outlined in Table 1.0, constructivist paradigms follow the belief that people construct their own meaning and reality (Lincoln, Lynham & Guba, 2011). These realities are co-constructed which means they are created from multiple people or mental constructions. The interaction between the interviewer and those being interviewed creates these findings. The philosophical belief behind relativism is that people create their own reality based on how they interact with the world around them and the meaning they get from these experiences (Guba & Lincoln, 1985). Thus, it is impossible to fully separate oneself from one's research.

## ***Methodology***

In this qualitative study, data was collected through semi-structured interviews and a focus group. These means were appropriate to answer the research question which aimed to understand the social phenomenon of being part of a community-based music program and its impact on well-being. As seen in Table 1.0, qualitative methods following interpretative approaches such as interviewing and observation are the methodology of choice when exploring a phenomenon from a constructivist lens (Angen, 2000). Rehman and Alharthi (2016) state “the goal of interpretive methodology is to understand social phenomena in the participants’ context” (p. 55). The goal of this study was to explore how participants perceived a community-based music program impacted well-being. Hunter, Lusardi, Zucker, Jacelon & Chandler (2002) state that creative arts help researchers notice the complex process of meaning making and how this shapes research. They consider this meaning making a natural and central part of all research. This is especially true in qualitative research where meaning-making is considered an “iterative process” that “emerges through labeling, identifying, and classifying emerging concepts; interrelating concepts and testing hypothesis; finding patterns; and generating theory ( Hunter et al., 2002, p. 389). Qualitative approaches explicitly reveal the meaning-making process through the constant examining and re-examining of data and context to create meanings (Hunter et al., 2002).

## ***Methods***

This study's qualitative method was interpretative phenomenological analysis (IPA), as explained by Smith and Osborn (2004). IPA aims to explore how participants are understanding and making sense of their own world and experiences (Smith &

Osborn, 2004). IPA looks to understand an experience from the participant's point of view, to take and share their views (Smith & Osborn, 2004). As mentioned above, this comes about through the co-creation between investigator and participants (Lincoln, Lynham, & Guba, 2011). The German philosopher, Edmund Husserl built the foundation of phenomenology, however interpretative phenomenology was formed by Martin Heidegger. Heidegger developed interpretive phenomenology by expanding hermeneutics, the philosophy of interpretation (Creswell, 1994). Hermeneutics is interested in the meaning of everyday occurrences and interpreting human experiences (Lopez and Willis, 2004). Heidegger's philosophy suggests the essence of human understanding is hermeneutic and that "our understanding of the everyday world is derived from our interpretation of it" (Reiners, 2012). Interpretive phenomenology is used when looking at the meaning of a phenomenon when a researcher does not bracket their biases with the question (Reiners, 2012). This aligns with the constructivist views, as seen in table 1.0.

When constructing a research question in IPA, it is important to focus on finding out how participants are perceiving a situation they are in and how they are making sense of their world (Smith & Osborn, 2004). The question is broad and open to remain flexible and explore individuals' experiences (Smith & Osborn, 2004). This is the case in this study, which aims to explore students, caregivers, and instructors' perceptions of how a community-based music program impacts the well-being of youth involved. Smith & Osborn (2004) also explain that IPA studies are conducted on small sample sizes in purposive samples, which is also the case in this study. The study includes 15 one-on-one interviews with nine students and five caregivers and a single focus group with all five

instructors in a local community music program. Smith and Osborn (2004) also share that semi-structured interviews are the exemplary method of choice for IPA. This was the chosen style of interview for students and caregivers. A focus group was used to interview instructors, this was in part due to time restrictions in the master's program.

### *Quality*

Goodness or quality criteria is how researchers judge the quality of inquiry in qualitative research (Guba & Lincoln, 2005). In interpretive designs, quality is measured through trustworthiness, which includes credibility, transferability, dependability, and confirmability (Guba & Lincoln, 2005). I took the initiative to achieve each of these throughout the study and reporting of the findings. Credibility relates to the truth of the findings and whether they are plausible information drawn from interaction with the participants (Guba & Lincoln, 1985; Kortjens & Moser, 2018). I ensured credibility through listening through the audio-recordings and re-reading the transcripts multiple times while making interpretations. The de-identified transcripts were also shared with my entire committee, who approved of my themes and interpretations. These actions relate to confirmability, which is the degree to which findings of the study can be confirmed by other researchers (Guba & Lincoln, 1985; Kortjens & Moser, 2018). Kortjens & Moser (2018) state that confirmability helps show that the findings are not a figment of the inquirer's imagination alone. I held multiple meetings with my co-supervisors and two meetings with my committee to go over transcripts as well as my interpretations and themes. All themes were agreed upon by the entire committee. Transferability refers to whether the research can be transferred into other settings or contexts and can be achieved through a thick description of the research (Kortjens &

Moser, 2018; Guba & Lincoln, 1985). I aimed to provide clear instructions of the study's methods and procedures such that it could easily be transferred to other settings. I described the recruitment process, setting, sample, and even included a list of the interview questions (Appendices F-H). Dependability refers to the findings' stability over time and is achieved by being consistent and transparent about all steps and results (Guba & Lincoln, 1985; Kortjens & Moser, 2018). I aimed to ensure dependability through being transparent and descriptive and including many direct quotes of the participant's experience. Lastly, reflexivity or critical self-reflection is also important to trustworthiness (Guba & Lincoln, 1985; Kortjens & Moser, 2018).

### **Reflexivity**

Reflexivity in research refers to “paying attention to how power influences our attitudes and behaviours, and our own role in shaping the research experience” (Leavy, 2017, p. 48). Reflexivity is a crucial part of ethics and emerged as part of social justice movements highlighting the inequities and power imbalances existing in research (Leavy, 2017). Some of these inequities included excluding minorities from research and reinforcing ideologies and stereotypes that were already dominant (Leavy, 2017). It is now considered an important part of all ethical research and is especially important to the trustworthiness of qualitative studies (Guba & Lincoln, 2005; Leavy, 2017).

Trustworthiness refers to the credibility, transferability, dependability, and confirmability of research which makes up its goodness or quality (Guba & Lincoln, 1985; Guba & Lincoln, 2005). One way to practice reflexivity is through reflexive journaling (Creswell & Poth, 2018). Throughout my master's research experience, I aimed to remain reflexive and made journal entries about my experiences, attitudes, and beliefs throughout my

research. Creswell and Poth (2018) state that reflexivity involves exploring and engaging in self-understanding about one's biases, values and experiences brought into a qualitative research study. Creswell and Poth (2018) also explain that a characteristic of good qualitative research is for the researcher to make their position explicit. This can be done by talking about experiences through work, school, family dynamics, and explore how these experiences shape their interpretations.

My personal motivation for this research comes from previous experience and a passion for arts and health. From a young age, I have always found a sense of comfort and passion in the arts. I have created, scribbled, wrote creatively, painted, and took photographs for as long as I can remember. I even had a strong desire to attend an art school during high school, but those surrounding me convinced me to pursue other paths. I have also always had a strong desire to help others. I volunteered with a local animal shelter for years and would always lend an ear to friends or peers in need during my youth. When I first began post-secondary schooling, I became incredibly passionate about psychology and promoting mental health. During a positive psychology class, we explored different ways we could adjust our lives and the lives of others to promote wellness in general populations as well as those suffering from mental health problems. I was fascinated as we explored ways that creative arts could improve wellness. I had a suspicion that artistic endeavours had a positive impact on me, but I was excited to learn of their potential for health in other environments. I was also privileged enough to experience the power of the arts and health firsthand while volunteering at a local alternate school.

The alternate school I volunteered in provided students who struggled in traditional settings a second chance to succeed academically. However, classes were much less structured and incorporated more art and different methods of learning and teaching. I ran a photography workshop and took the kids out on an adventure with cameras. During this time, there were a few students who really stood out to me. One of these students had found confidence through learning a music instrument. The first few interactions I had with them, they were painfully shy and did not want to participate in any activities. Through the alternate program, they were able to take guitar lessons between classes and during breaks. It was phenomenal to experience the difference that picking up a guitar made in this child's confidence. Before they even knew how to play a singular song, their body language and demeanor changed dramatically from simply getting to hold the instrument. After they had finally mastered a song, they were more vocal and more open to participating in other activities. It was amazing to see these changes occur so quickly. I knew after this experience that I wanted to build a future that would allow me to be a part of these changes again and again. Given this, I do admit that I bring a bias in favor of the arts and the power they have to impact well-being in youth based on firsthand experiences. I also realize I am incredibly privileged to be in the position that I am in and to get to research a topic I am so passionate about.

My passion for the arts and promoting wellness lead me to research community-based music programs' impact on well-being in my master's. I was the primary investigator in both of these studies. My educational background also provided me with the skills and passion needed to conduct this research. I have years of experience in research and research methods and I took master's level courses to prepare me for these



studies. These courses included a course on how to conduct a systematic review, research methods, and advanced qualitative methods and analysis. I also had prior experience working on studies in psychology research labs.

Another reason I was able to complete my research was that I was lucky enough to find a research team with a keen interest in the arts and health. My co-supervisors Dr. Bishop and Dr. Darcy have co-led community-based participatory research projects on youth mental health and wellness in the past. They are part of a local alliance that exists between a health centre, community board, and school that allows for these kinds of projects to take shape. My supervisors connected to the SHS music program in an attempt to get them to branch out and offer it in new communities as well.

The first time I met with students, caregivers, and instructors at SHS was when I helped my supervisors with a quantitative study with the same population a year prior to my qualitative study. This project was quantitative in nature and I was required to meet with all of the students and administer surveys as well as help them with any questions. During this time, a few things stood out to me. Firstly, the director's passion and enthusiasm for music and the SHS community was incredible and contagious. All of the instructors were incredibly welcoming and passionate about music and building a positive community at SHS. Another thing that was clear to me that these students did not want to simply fill out surveys, they wanted to talk to me, they wanted to explain why they were answering the way they were; they wanted to talk about their experiences and have their voices heard. This helped motivate the need to conduct a qualitative project with this population.

It is also important to reflect on the perception of power or power imbalance when conducting research. Power is complicated, complex and exists in multi-layered ways and multiple directions (Finlay, 2012). For me it was particularly important to examine my role and position in the study as I was coming into the SHS community as a researcher and outsider. Eder and Fingerson (2002) state that power imbalances can be more prominent when researching children because of the perceived differences between adult and child as well as those between the researcher and participants. I do believe that the students viewed me as more of an instructor figure when I first showed up, but I tried my best to break down this barrier by explaining that I was a student and wanted to learn from them.

I do not believe my being an adult researcher had a profound impact on any of the participants hindered my data collection. I understand that I came to SHS as an adult outsider, but everyone was incredibly warm and welcoming, and I tried to familiarize myself with those involved. I spent time with the SHS community observing them, interacting with them, and giving out surveys. I also attended community events, fundraisers, and concerts they held. During my interviews and previous surveys with these students, I made it clear that I was not affiliated with SHS, that they could be honest with me, and anything they said would remain confidential. As mentioned, due to the age difference, some students may have seen me as an authority figure, such as a “teacher” however, I tried my best to make it clear that they could be honest with me and it would not impact their SHS experience. During the interviews, it felt as if students were being sincere and they were still able to give examples to back up their claims about their experiences with the program.

Of course, power goes beyond the relationship between researcher and participants. It is important given my topic to note that well-being is not an individual matter and that social factors contribute to well-being and mental health as well (Weare, 2017). People who are at the highest risk for poor mental health include disadvantaged groups and families experiencing stress through “problems such as poverty or social marginalization, divided families, families where parents suffer mental illness” (Weare, 2017, p. 115). Young people experiencing traumatic events such as abuse, violence, accidents are also disadvantaged. Those who migrate and seek asylum from wars, conflicts, and natural disasters also experience disadvantages. Gender must also be considered as women, particularly in more traditional societies, experience major inequities. Those who identify outside of mainstream in terms of gender or sexuality may also have their mental health compromised through stigma and discrimination (Weare, 2017). It is worth further exploring how community music programs may impact those facing greater challenged and inequity.

I will be forever changed through the learning and experiences I have had during my thesis. Being able to see firsthand the impact that the arts can have on an individual and everyone around them is a powerful and heartwarming experience. The children in the SHS had so much love and so many positive things to say about their experience and how it had shaped them as people. It has only made me more passionate and determined to pursue a career in which I can promote or be part of this change.

## **Ethics statement**

Ethics was obtained through (ICEHR) for the qualitative study. Ethics was not required for the systematic review. The research team completed the Personal Health Information Act (PHIA) (Government of Newfoundland and Labrador, 2019).

## **Overview of Thesis Structure**

This thesis follows the manuscript-style and is divided into four chapters. These chapters include an introduction, two separate but connected research studies, and a conclusion. Appendices are also included in the two studies. Chapters two and three are formatted to fit the criteria outlined by the peer-review journals they are submitted to. Because these are stand alone papers and due to the nature and subject of both studies, repetition will exist between the chapters.

Chapter One: This chapter is an introduction to the thesis. The aim of this chapter is to provide background information as well as the research objectives and thesis objectives and structure.

Chapter Two: Chapter two consists of a systematic review that explores the impact of community-based music programs on social and emotional well-being in people 25 and under. This study is prepared for publication in the Arts and Health Journal.

Chapter Three: This chapter is the qualitative study that explores students, caregivers, and instructors' perceptions of the impact of a community-based music program on youth well-being. This study is prepared for publication in the Journal of Community Psychology.

Chapter Four: This chapter summarizes the research project and brings the previous chapters together. The aim is to address the main findings in the thesis.

## References

- Alemán, X., Duryea, S., Guerra, N. G., McEwan, P. J., Muñoz, R., Stampini, M., & Williamson, A. A. (2017). The effects of musical training on child development: A randomized trial of el sistema in venezuela. *Prevention Science, 18*(7), 865-878. doi:10.1007/s11121-016-0727-3
- All-Party Committee on Mental Health and Addictions Newfoundland and Labrador (2017). *Towards Recovery : A Vision for a Renewed Mental Health and Addictions System for Newfoundland and Labrador*. Retrieved from <https://www.gov.nl.ca/hcs/files/all-party-committe-report.pdf>
- Angen, M. J. (2000). Evaluating interpretive inquiry: reviewing the validity debate and opening the dialogue. *Qualitative Health Research, 10*(3), 378–395. <https://doi.org/10.1177/104973230001000308>
- Ansdell, G & DeNora, T (2012). *Musical flourishing: community music therapy, controversy, and the cultivation of wellbeing. Music, health, and wellbeing.* Oxford University Press.
- Arain, M., Haque, M., Johal, L., Mathur, P., Nel, W., Rais, A., Sandhu, R., Sharma, S., & Arain, M. (2013). Maturation of the adolescent brain. *Neuropsychiatric Disease and Treatment, 9*, 449–461. <https://doi.org/10.2147/NDT.S39776>
- Auerbach, C., & Delport, A. C. (2018). Developing mindfulness in children through participation in music activities. *South African Journal of Childhood Education, 8*(1), e1-e7. doi:10.4102/sajce.v8i1.519

- Bang, A. (2016). *The Restorative and Transformative Power of the Arts in Conflict Resolution*. *Journal of Transformative Education*, 14(4), 355–376.  
<https://doi.org/10.1177/1541344616655886>
- Barrett, M. S., & Bond, N. (2015). Connecting through music: The contribution of a music programme to fostering positive youth development. *Research Studies in Music Education*, 37(1), 37-54. doi:10.1177/1321103X14560320
- Barrett, M. S., & Smigiel, H. M. (2007). Children's perspectives of participation in music youth arts settings: Meaning, value and participation. *Research Studies in Music Education*, 28(1), 39-50. doi:10.1177/1321103X070280010204
- Bittman, B. B., Berk, L., Shannon, M., et al. (2005). Recreational music-making modulates the human stress response: a preliminary individualized gene expression strategy. *Medical Science Monitor: International Medical Journal of Experimental and Clinical Research*, 11(2), BR31–BR40.
- Bradburn, N., & Noll, C. (1969). *The structure of psychological well-being*. Aldine Pub. Co.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101.  
<https://doi.org/10.1191/1478088706qp063oa>
- Burnard, P., & Dragovic, T. (2015). Collaborative creativity in instrumental group music learning as a site for enhancing pupil wellbeing. *Cambridge Journal of Education*, 45(3), 371-392. doi:10.1080/0305764X.2014.934204
- Cain, M., Lakhani, A., & Istvandy, L. (2016). Short and long term outcomes for culturally and linguistically diverse (CALD) and at-risk communities in

participatory music programs: A systematic review. *Arts & Health*, 8(2), 105–124.

<https://doi.org/10.1080/17533015.2015.1027934>

Catalano, R., Berglund, M., Lonczak, H., & Hawkins, J. (2004). Positive youth development in the United States: research findings on evaluations of positive youth development programs. *Annals of the American Academy of Political and Social Science*, 591, 98–124. <http://search.proquest.com/docview/37831529/>

Catalyst. (2006). After-school worries: Tough on parents, bad for business. Retrieved from <https://www.catalyst.org/research/after-school-worries-tough-on-parents-bad-for-business/>

Critical Appraisal Skills Programme (2018). CASP Checklists. Retrieved from <https://casp-uk.net/casp-tools-checklists/>

Centre for Addiction and Mental Health (CAMH). (2012). Mental Illness and Addictions: Facts and Statistics. Retrieved from [http://www.camh.ca/en/hospital/about\\_camh/newsroom/for\\_reporters/Pages/addictionmentalhealthstatistics.aspx](http://www.camh.ca/en/hospital/about_camh/newsroom/for_reporters/Pages/addictionmentalhealthstatistics.aspx)

Clift, S., Hancox, G., Morrison, I., Hess, B., Kreutz, G., and Stewart, D. (2010). Choral singing and psychological wellbeing: Quantitative and qualitative findings from English choirs in a cross-national survey. *Journal of Applied Arts and Health*, 1(1), 19 – 34 .

Clift, S., & Camic, P. M. (2016). *Oxford textbook of creative arts, health, and wellbeing: international perspectives on practice, policy and research*. Oxford: Oxford University Press.



- Commission on the Social Determinants of Health (2008). *Closing the Gap in a Generation: Health Equity Through Action on the Social Determinants of Health. Final Report of the Commission on Social Determinants of Health*. Geneva: World Health Organization.
- Community Musicworks. (2020). Retrieved from <http://communitymusicworks.org/>
- Costa-Giomi, E., Price, H., Rauscher, F., Schmidt, J., Shackford, M., & Sims, W. (1999). Straight talk about music and research. *Teaching Music*, 7(3), 29-34
- Creswell, J.W. (1994) *Qualitative and Quantitative Methods*. Newbury Park, Sage.
- Creswell, J. W. (2012). *Planning, Conducting, and Evaluating Quantitative and Qualitative Research (4th Edition)*. Pearson.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry & research design: Choosing among five approaches*.
- Culp, M. (2016). Improving self-esteem in general music. *General Music Today*, 29(3), 19–24. <https://doi.org/10.1177/1048371315619962>
- Dakon, J. M., & Cloete, E. (2018). The violet experience: Social interaction through eclectic music learning practices. *British Journal of Music Education*, 35(1), 57-72. doi:10.1017/S0265051717000122
- Daykin, N., Orme, J., Evans, D., Salmon, D., Mceachran, M., & Brain, S. (2008). *The Impact of participation in performing arts on adolescent health and behaviour: A systematic review of the literature*. *Journal of Health Psychology*, 13(2), 251–264. <https://doi.org/10.1177/1359105307086699>

- Daykin, N (2012). Developing social models for research and practice in music, arts, and health: a case study of research in a mental health setting. *Music, health, and wellbeing* . Oxford University Press.
- Daykin, N., de Viggiani, N., Pilkington, P., & Moriarty, Y. (2013). Music making for health, well-being and behaviour change in youth justice settings: a systematic review. *Health Promotion International*, 28(2), 197–210.  
<https://doi.org/10.1093/heapro/das005>
- Daykin, N., Mansfield, L., Meads, C., Julier, G., Tomlinson, A., Payne, A., . . . Victor, C. (2018). What works for wellbeing? A systematic review of wellbeing outcomes for music and singing in adults. *Perspectives in Public Health*, 138(1), 39-46.
- Dalgas-Pelish, P. (2006). Effects of a self-esteem intervention program on school-age children. *Pediatric Nursing*, 32(4), 341.
- De Neve, J.-E., Diener, E., Tay, L., & Xuereb, C. (2013) The objective benefits of subjective well-being. In Helliwell, J., Layard, R., & Sachs, J., eds. World Happiness Report 2013. New York: UN Sustainable Development Solutions Network.
- Devroop, K. (2012). The social-emotional impact of instrumental music performance on economically disadvantaged south african students. *Music Education Research*, 14(4), 407-416. doi:10.1080/14613808.2012.685456
- Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95, 542–575.  
<http://dx.doi.org/10.1037/0033-2909.95.3.542>
- Dodge, R., Daly, A., Huyton, J., & Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 222-235.

- Durlak, J. A., Mahoney, J. L., Bohnert, A. M., & Parente, M. E. (2010). Developing and improving after-school programs to enhance youth's personal growth and adjustment: A special issue of AJCP. *American Journal of Community Psychology*, 45(3-4), 285–293. <https://doi.org/10.1007/s10464-010-9298-9>
- Eder, D. & Fingerson, L. (2002). Interviewing children and adolescents in Gubrium, J.K. & Holstein, J.A., *Handbook of Interview Research*. London: Sage.
- El Sistema in Canada (n.d.), Retrieved from <https://jonathangovias.com/canada/>
- Engel, G. L. (1997). From Biomedical to Biopsychosocial: Being Scientific in the Human Domain. *Psychosomatics* (Washington, D.C.), 38(6), 521-528.
- Ferrari, A., Charlson, F., Norman, R., Patten, S. B., Freedman, G., Murray, C. J. L., et al. (2013). Burden of depressive disorders by country, sex, age, and year: findings from the global burden of disease study 2010. *PLOS Medicine*, 10, 1–12.
- Finlay, L. (2014). Five lenses for the reflexive interviewer in Gubrium, J.K. & Holstein, J.A., *The SAGE Handbook of Interview Research*. London: Sage.
- Franklin, M. (1992). Art therapy and self-esteem. *Art Therapy*, 9(2), 78–84. doi: 10.1080/07421656.1992.10758941.
- Gooding, L. F. (2011). The effect of a music therapy social skills training program on improving social competence in children and adolescents with social skills deficits. *Journal of Music Therapy*, 48(4), 440-462. doi:10.1093/jmt/48.4.440
- Government of Newfoundland and Labrador (2015) Healthy People, Healthy Families, Healthy Communities: A Primary Health Care Framework for Newfoundland and Labrador 2015-2025. Retrieved from

[https://www.health.gov.nl.ca/health/publications/PHC\\_Framework\\_update\\_Nov26.pdf](https://www.health.gov.nl.ca/health/publications/PHC_Framework_update_Nov26.pdf)

Government of Newfoundland and Labrador (2018). *The Way Forward Building Our Future*. Retrieved from [https://www.gov.nl.ca/pdf/the\\_way\\_forward.pdf](https://www.gov.nl.ca/pdf/the_way_forward.pdf)

Guba, E. (1990). *The Paradigm dialog*. Newbury Park, CA: Sage Publications.

Guba, E. G., & Lincoln, Y. S. (1994). Competing paradigms in qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (p. 105–117). Sage Publications, Inc.

Guba, E. G., (1996). What happened to me on the road to Damascus. In L. Heshusius & K. Ballard (Eds.), *From positivism to interpretivism and beyond: Tales of transformation*.

Guba, E. G., & Lincoln, Y. S. (2005). Paradigmatic Controversies, Contradictions, and Emerging Confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), *The Sage handbook of qualitative research* (p. 191–215). Sage Publications Ltd.

Hanna, G., Rollins, J., & Lewis, L. (2017). *Arts in medicine literature review*. Seattle, WA: Grantmakers in the Arts.

Harrison, K. (2009). "Singing my Spirit of Identity": Aboriginal music for well-being in a Canadian inner city. *MUSICultures*, 36, 1-21

Henderson, S., Cain, M., Istvandity, L., & Lakhani, A. (2017). The role of music participation in positive health and wellbeing outcomes for migrant populations: A systematic review. *Psychology of Music*, 45(4), 459-478.

doi:10.1177/0305735616665910

Higgins, L. (2012). *Community Music*. New York: Oxford University Press.

- Hohmann, L., Bradt, J., Stegemann, T., & Koelsch, S. (2017). Effects of music therapy and music-based interventions in the treatment of substance use disorders: A systematic review. *PLoS One*, 12(11), e0187363.  
doi:10.1371/journal.pone.0187363
- Hunter, A., Lusardi, P., Zucker, D., Jacelon, C. & Chandler, G. (2002). Making Meaning: The Creative Component in Qualitative Research. *Qualitative Health Research*, 12(3), 388-398, doi: 10.1177/104973202129119964
- Ing-Randolph, A., Phillips, L., & Williams, A. (2015). Group music interventions for dementia-associated anxiety: A systematic review. *International Journal of Nursing Studies*, 52(11), 1775–1784.  
<https://doi.org/10.1016/j.ijnurstu.2015.06.014>
- Kim, J. (2017). Effects of community-based group music therapy for children exposed to ongoing child maltreatment & poverty in South Korea: A block randomized controlled trial. *The Arts in Psychotherapy*, 54, 69–77.  
<https://doi.org/10.1016/j.aip.2017.01.001>
- Koelsch, S., Offermanns, K., and Franzke, P. (2010). Music in the treatment of affective disorders: an exploratory investigation of a new method for music-therapeutic research. *Music Perception: An Interdisciplinary Journal*, 27, 307–316.
- Korstjens, I., & Moser, A. (2018). Series: Practical guidance to qualitative research. Part 4: Trustworthiness and publishing. *European Journal of General Practice*, 24(1), 120–124. <https://doi.org/10.1080/13814788.2017.1375092>
- Leavy, P. (2017). *Research design : Quantitative, qualitative, mixed methods, arts-based, and community-based participatory research approaches.*

- Leavy, P. (2020). *Method meets art: Arts-based research practice* (3rd ed.). New York: Guilford Press.
- Lim, K., Jacobs, P., Ohinmaa, A., Schopflocher, D., & Dewa, C. S. (2008). A new population-based measure of the economic burden of mental illness in Canada. *Chronic Diseases in Canada*, 28(3), 92.
- Lincoln, Y., & Guba, E. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage Publications.
- Lincoln, Y. S., Lynham, S. A., & Guba, E. G. (2011). Paradigmatic controversies, contradictions, and emerging confluences, revisited. In N. K. Denzin & Y. S. Lincoln (Eds.), *The SAGE handbook of qualitative research* (4th ed., Chapter 6). Thousand Oaks, CA: Sage Publications.
- Levitin, D.J. (2006). *This is Your Brain on Music: The Science of a Human Obsession*. New York: Dutton.
- Lopez, K., & Willis, D. (2004). Descriptive Versus Interpretive Phenomenology: Their Contributions to Nursing Knowledge. *Qualitative Health Research*, 14(5), 726–735. <https://doi.org/10.1177/1049732304263638>
- Lynham, S.A., & Webb-Johnson, G. W. (2008). Models of Epistemology and Inquiry Class Notes. Texas A&M University.
- Lincoln, Y. S., Lynham, S. A., & Guba, E. G. (2011). Paradigmatic controversies, contradictions, and emerging confluences, revisited. In N. K. Denzin & Y. S. Lincoln (Eds.), *The SAGE handbook of qualitative research* (4th ed., Chapter 6). Thousand Oaks, CA: Sage Publications.

- Lyubomirsky, S., & Lepper, H. S. (1999). A measure of subjective happiness: Preliminary reliability and construct validation. *Social Indicators Research*, 46, 137–155. <http://dx.doi.org/10.1023/A:1006824100041>
- MacDonald, R., Kreutz, G., & Mitchell, L. (2012). *Music, health, and wellbeing*. Oxford University Press.
- Malchiodi, C.A. (2002). *The Soul's Palette: Drawing on Art's Transformative Powers for Health and Wellbeing*. Boston: Shambala.
- Maratos A, Crawford MJ, Procter S. Music therapy for depression: it seems to work, but how? *British Journal of Psychiatry* 2011;199(2):92-3.  
[DOI: 10.1192/bjp.bp.110.087494]
- Marmot, MG 2011, Fair Society, Healthy lives, paper presented at the *Centre for Aging Research and Development in Ireland (CARDI) International Conference*, 2–4 November, Dublin. Retrieved from [www.cardi.ie/userfiles/DublinCARDIMarmot\\_Keynote\\_presentation\\_2011\(2\).pdf](http://www.cardi.ie/userfiles/DublinCARDIMarmot_Keynote_presentation_2011(2).pdf)
- Macnaughton, R.J., White, M., and Stacy, R. (2005). Researching the benefits of arts in health. *Health Education*, 105, 332–9.
- Michaelson, J., Abdallah, S., Steuer, N., Thompson, S., & Marks, N. (2009). National accounts of well-being: *Bringing real wealth onto the balance sheet*. London: New Economics Foundation.
- Moher, D., Liberati, A., Tetzlaff, J., Altman, D. G., & PRISMA Group. (2009). Preferred reporting items for systematic reviews and meta-analyses: The PRISMA statement. *Journal of Clinical Epidemiology*, 62(10), 1006.

- Muirhead, A., De Leeuw, S., National Collaborating Centre for Aboriginal Health, & Canadian Electronic Library. (2013). *Art and wellness the importance of art for Aboriginal peoples' health and healing* (DesLibris. Documents collection). Prince George, B.C.: National Collaborating Centre for Aboriginal Health.
- Murray, M & Lamont, A (2012). Community music and social psychology: linking theoretical and practical concerns. *Music, health, and wellbeing* . Oxford University Press.
- MQ (2015). UK Mental Health Research Funding: MQ Landscape Analysis. Retrieved from [www.joinmq.org/research](http://www.joinmq.org/research)
- NL Support. (2017). You spoke, we listened: 2017-2018 Priorities Survey Results. Retrieved from <https://medium.com/support-letters/you-spoke-we-listened-2017-2018-priorities-survey-results-55f42e582578>
- Pearce, E., Launay, J., Dunbar, R., & Pearce, E. (2015). *The ice-breaker effect: singing mediates fast social bonding*. Royal Society Open Science, 2(10), 150221–150221. <https://doi.org/10.1098/rsos.150221>
- Pelletier, C. L. (2004). The effect of music on decreasing arousal due to stress: A meta-analysis. *Journal of Music Therapy*, 41(3), 192-192. doi:10.1093/jmt/41.3.192
- Power, L. (2019 May 9) N.L. youth hospitalization for mental health issues higher than national average. CBC. Retrieved from <https://www.cbc.ca/news/canada/newfoundland-labrador/youth-mental-illness-emergency-hospitalization-1.5127518>



- Rees, G., Goswami, H., & Bradshaw, J. (2010). Developing an index of children's subjective well-being in England: Summary Report. *The Children's Society*, London.
- Rehman A., & Alharthi, K. (2016). An introduction to research paradigms. *International Journal of Educational Investigations*, 3(8), 51-59.
- Reiners, G. (2012). Understanding the Differences between Husserl's (Descriptive) and Heidegger's (Interpretive) Phenomenological Research. *Journal of Nursing & Care*. 1. 10.4172/2167-1168.1000119.
- Rickard, N. S., Bambrick, C. J., & Gill, A. (2012). Absence of widespread psychosocial and cognitive effects of school-based music instruction in 10–13-year-old students. *International Journal of Music Education*, 30(1), 57-78.  
doi:10.1177/0255761411431399
- Ryan, R., & Deci, E. (2001). On happiness and human potentials: A review of the research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 52, 141-166.
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological wellbeing. *Journal of Personality and Social Psychology*, 57, 1069–1081. <http://dx.doi.org/10.1037/0022-3514.57.6.1069>
- Sacks, O. (2007). *Musicophilia : tales of music and the brain* (1st ed.). New York, NY: Alfred A. Knopf.
- Schwantes, M., Wigram, T., McKinney, C., Lipscomb, A., & Richards, C. (2011). The Mexican “corrido” and its use in a music therapy bereavement group. *Australian Journal of Music Therapy*, 22, 2–23.

- Schwarz, N., Diener, E., Kahneman, D., & Project Muse. (1999). *Well-being : The foundations of hedonic psychology* (Book collections on Project MUSE). New York: Russell Sage Foundation.
- Schwandt, T. (2007). *The SAGE Dictionary of Qualitative Inquiry. Third Edition*. SAGE Publications.
- Seligman, M. E. P. (2011). *Flourish – A new understanding of happiness and well-being – and how to achieve them*. London: Nicholas Brealey Publishing.
- Sharma, M., & Jagdev, T. (2012). Use of music therapy for enhancing self-esteem among academically stressed adolescents. *Pakistan Journal of Psychological Research*, 27(1), 53.
- Sheltzer, J. M., & Consoli, A. J. (2019). Understanding the impact of an after-school music program with engaged underserved youth. *Journal of Community Psychology*, 47(6), 1364-1379. doi:10.1002/jcop.22193
- Shin, J. (2011). An investigation of participation in weekly music workshops and its relationship to academic self concept and self-esteem of middle school students in low income communities. *Contributions to Music Education*, 38(2), 29–42.
- Shin, D., & Johnson, D. (1978). Avowed happiness as an overall assessment of the quality of life. *Social Indicators Research*, 5(1), 475–492.  
<http://dx.doi.org/10.1007/BF00352944>
- Sheppard, A., & Broughton, M. (2020). Promoting wellbeing and health through active participation in music and dance: A systematic review. *International Journal of Qualitative Studies on Health and Well-being*, 15(1)

- Shuman, J., Kennedy, H., DeWitt, P., Edelblute, A., & Wamboldt, M. Z. (2016). Group music therapy impacts mood states of adolescents in a psychiatric hospital setting. *The Arts in Psychotherapy*, 49, 50-56. doi:10.1016/j.aip.2016.05.014
- Smith, J. A., & Osborn, M. (2004). Interpretative phenomenological analysis. In G. M. Breakwell (Ed.), *Doing social psychology research* (p. 229–254). *British Psychological Society*; Blackwell Publishing.
- Sklar, S., Anderson, S., & Autry, C. (2007). Positive youth development: A wilderness intervention. *Therapeutic Recreation Journal*, 41(3), 233–243.
- Solli, H. P. & Rolvsjord, R. (2015). "the opposite of treatment": A qualitative study of how patients diagnosed with psychosis experience music therapy. *Nordic Journal of Music Therapy*, 24(1), 67-92.
- Sonke J. (2011). Music and the arts in healthcare: a perspective from the United States. *Music and Arts in Action*, 3, 5–14.
- Stiglitz, J., Sen, A., & Fitoussi, J. P. (2009). Report by the commission on the measurement of economic performance and social progress. Retrieved from <http://files.harmonywithnatureun.org/uploads/upload112.pdf>
- Stewart, D., & Irons, Y., (2018). Music, public health, and health promotion: can music be a social determinant of health? In N, Sunderland *Music, health and wellbeing : Exploring music for health equity and social justice*.
- Stratham, J., & Chase, E. (2010). Childhood wellbeing – A brief overview. Loughborough: Childhood Wellbeing Research Centre.
- Strong Harbour Strings (n.d). Strong Harbour Strings Strengthening Communities Through Music. Retrieved from <https://strongharbourstrings.com/>

- Sun, J & Buys, N. (2016) A role for the creative arts in addressing public health challenges in China. In Clift, S., & Camic, P. M. *Oxford textbook of creative arts, health, and wellbeing: international perspectives on practice, policy and research*. Oxford: Oxford University Press.
- Sunderland, N., Lewandowski, N., Bendrups, D., & Bartleet, B. (2018). *Music, health and wellbeing : Exploring music for health equity and social justice*. Palgrave Macmillan, London, 2018. ISBN 978-1-349-95283-0.
- Thaut, M. H. (2005). The future of music in therapy and medicine. *Annals of the New York Academy of Sciences*, 1060(1), 303-308. doi:10.1196/annals.1360.023
- Toll, H (2019). *Arts, Health, & Wellbeing Frameworks to Inform Public Policy* [PowerPoint presentation]. Retrieved from [https://www.researchgate.net/publication/331210337\\_Understanding\\_International\\_Arts\\_in\\_Health\\_and\\_Wellbeing\\_Structures\\_and\\_Implications\\_for\\_Canada](https://www.researchgate.net/publication/331210337_Understanding_International_Arts_in_Health_and_Wellbeing_Structures_and_Implications_for_Canada)
- Trzesniewski, K. H., Donnellan, M. B., Moffitt, T. E., Robins, R. W., Poulton, R., & Caspi, A. (2006). Low self-esteem during adolescence predicts poor health, criminal behavior, and limited economic prospects during adulthood. *Developmental Psychology*, 42(2), 381-390. doi:10.1037/0012-1649.42.2.381
- Underwood, L., Washington, A., & Underwood, L. (2016). Mental Illness and Juvenile Offenders. *International Journal of Environmental Research and Public Health*, 13(2), 228–228. <https://doi.org/10.3390/ijerph13020228>
- U.S. Preventive Services Task Force, (2018). Criteria for assessing internal validity of individual studies. Retrieved from

<https://www.uspreventiveservicestaskforce.org/uspstf/procedure-manual-appendix-vi-criteria-assessing-internal-validity-individual-studies>

Van de Vyver, J., & Abrams, D. (2018). The arts as a catalyst for human prosociality and cooperation. *Social Psychological and Personality Science*, 9(6), 664–674.

<https://doi.org/10.1177/1948550617720275>

Västfjäll, D, Juslin, P and Hartig, T. (2012). Music, Subjective Wellbeing and Health: The Role of everyday emotions in *Music, health, and wellbeing* . Oxford University Press.

Veblen, Kari. (2007). The many ways of community music. *International Journal of Community Music*. 1. 5-21. 10.1386/ijcm.1.1.5\_1.

Vonnegut, K., & In Simon, D. (2005). *A man without a country*

Waterman, A. S. (1993). Two conceptions of happiness: Contrasts of personal expressiveness (eudaimonia) and hedonic enjoyment. *Journal of Personality and Social Psychology*, 64(4), 678–691. <http://dx.doi.org/10.1037/0022-3514.64.4.678>

Webster , M. ( 2005 ). Warming up . In: M. Webster and G. Buglass (eds.) *Finding voices, making choices: Creativity for social change* , pp. 1 – 8 . Nottingham : Educational Heretics Press .

Weare, K. (2017). Promoting social and emotional wellbeing and responding to mental health problems in schools. In Bährer-Kohler, S and Carod-Artal F.J., *Global Mental Health Prevention and Promotion* (pp. 33-46). Switzerland: Springer.

World Health Organization (1946). Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19–22 June, 1946; signed on 22 July 1946 by the representatives of 61 States (*Official*

*Records of the World Health Organization*, no. 2, p. 100) and entered into force on 7 April 1948.

World Health Organization (1986). *Ottawa Charter for Health Promotion, 1986*.

Retrieved from

<http://www.who.int/healthpromotion/conferences/previous/ottawa/en/>

World Health Organization. (2004) Promoting mental health: concepts, emerging evidence, practice (Summary Report). Geneva: World Health Organization.

World Health Organization. (2008). *Commission on the Social Determinants of Health*.

*Final Report: Executive Summary, Closing the gap in a generation: Health equity through action on the social determinants of health*, Retrieved from

[www.who.int/social\\_determinants/final\\_report/csdh\\_finalreport\\_2008.pdf](http://www.who.int/social_determinants/final_report/csdh_finalreport_2008.pdf)

World Health Organization. (2012). Risks to mental health: an overview of vulnerabilities and risk factors. Retrieved from [https://www.who.int/mental\\_health/mhgap/risks\\_to\\_mental\\_health\\_EN\\_27\\_08\\_12.pdf](https://www.who.int/mental_health/mhgap/risks_to_mental_health_EN_27_08_12.pdf)

World Health Organization and Calouste Gulbenkian Foundation. (2014). Social determinants of mental health. Geneva: World Health Organization

World Health Organization (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review (2019)

Zikmund, V. (2003). Health, well-being, and the quality of life: Some psychosomatic reflections. *Neuroendocrinology Letters*, 2(6), 401–403.

Zhao, K., Bai, Z., Bo, A., & Chi, I. (2016). [Review of *A systematic review and meta-analysis of music therapy for the older adults with depression*]. *International Journal of Geriatric Psychiatry*, 31(11), 1188–1198.

<https://doi.org/10.1002/gps.4494>International Journal of Geriatric  
Psychiatry, 31 (11) (2016), pp. 1188-1198, 10.1002/gps.4494

### **Co-authorship Statement**

I designed my master's thesis through consultation with my committee members consisting of my co-supervisors, Dr. Lisa Bishop and Dr. Stephen Darcy, and committee members Dr. Natalie Beausoleil and Dr. David Buley.

The systematic review was designed with my co-supervisors, Dr. Lisa Bishop and Dr. Stephen Darcy (LB, SD). I (BH) created a search strategy with the help of librarian, Allison Farrell and conducted the article screening process. All authors met to discuss article selection, article inclusion, data extraction, and interpretation of the data. I completed the first draft of the manuscript, which was revised by the co-authors (LB, SD). The final manuscript was reviewed by all authors (BH, LB, SD) and is in preparation for submission to the Arts and Health journal.

The qualitative manuscript was designed and completed with my entire committee. I (BH) created the interview questions and conducted the semi-structured interviews and focus group. I transcribed all interviews and the focus group verbatim and removed all identifiable information. I then coded the transcripts and analyzed the data for emerging themes. The co-authors (LD, SD, NB, DB) approved the interview questions and were given de-identified versions of the transcripts to examine for themes. We met to discuss and agree on themes. I also met with my co-supervisors (LD, SD) often to thematically analyze the data. I wrote the first draft of the manuscript and met with all co-authors (LD, SD, NB, DB) for revisions and suggestions. The final manuscript has been reviewed and approved by all authors (BH, LD, SD, NB, DB) and is in preparation for submission to the journal of Journal of Community Psychology.



**Chapter Two: The social and emotional influence of community music programs on youth well-being: A systematic review**

**Authors:** Brittany Howell<sup>1</sup>, Lisa Bishop<sup>1,2</sup>, Stephen Darcy<sup>2</sup>

**Affiliations:** <sup>1</sup> Memorial University of Newfoundland School of Pharmacy, <sup>2</sup> Memorial University of Newfoundland Discipline of Family Medicine, Faculty of Medicine

**Institution:** Memorial University of Newfoundland, Health Sciences Centre, 300 Prince Philip Drive St. John's, NL, A1B 3V6.

This manuscript is currently being prepared for publication in *Arts & Health: An International Journal for Research, Policy and Practice*.

## Abstract

**Background:** This systematic review explored the impact of community music instruction on youth and young adults' social and emotional well-being. **Methodology:** A systematic review was conducted following the Preferred reporting items for systematic reviews and meta-analyses (PRISMA) guidelines. The databases PubMed, PsycINFO, ERIC, Embase, CINAHL, Academic Search Complete, IBSS, Sociological Abstracts, Music Index, Music Periodicals Database, Arts and Humanities Databases, RILM, and Education Source were searched. A total of 15 studies were included. **Results:** Quantitative and mixed-method studies (n=8) showed positive but mixed results. While all studies showed evidence that music programs showed an increase in social or emotional well-being, the results were not always statistically significant. All of the qualitative studies (n=7) showed themes and rich quotes suggesting that community-based music programs had a positive impact on social and emotional well-being. **Conclusions:** Community music programs show evidence of enhancing social and emotional well-being; however, research is inconsistent, and the multitude of measurement tools and definitions can make comparisons difficult. More high-quality research is needed in this area.

**Keywords:** Community health, music, well-being, youth well-being, systematic review

## **Introduction**

Mental health problems are common, chronic, and disabling, impacting hundreds of millions of people worldwide (Ferrari et al., 2013). Mental health and well-being can be determined and influenced by biological, sociological, and environmental factors (Carod-Artal, 2017). Unlike biological determinants, both social and environmental factors have the potential to be changed by timely interventions. Arts-based participatory programs are considered low-risk and low-cost ways to engage populations and potentially improve health and well-being (Clift & Camic, 2016). They can benefit physical, social, and spiritual well-being in individuals of all ages and diverse cultures (Hanna, Rollins & Lewis, 2017). Community music programs may be one way to encourage social and emotional well-being in youth and provide access to social determinants of mental health that are important in positive development.

### **Determinants of Mental Health**

Much of the existing prevention and promotion research for mental health focuses on the social determinants of mental health (SDMH) (Carod-Artal, 2017). The World Health Organization (WHO) defines social determinants of health (SDH) as “the conditions people are born into, grow, live, work and age in that impact their health and well-being” (WHO & Calouste Gulbenkian Foundation, 2014, p. 9). SDH, including early life experiences, can strongly influence youth mental health and well-being (Carod-Artal, 2017). Since most adult mental health problems begin in childhood and adolescence, it is important to determine which prevention methods are effective in promoting youth mental health and wellness (Underwood, Washington & Underwood, 2016). The WHO and Calouste Gulbenkian Foundation (2014) report on social determinants of mental

health emphasize the importance of early childhood support socially and within the community. They state that positive beliefs relating to optimism, self-esteem, and a sense of control, can help to combat stressors that lead to negative physical and mental health. Community-based music programs can be one way to improve well-being outcomes such as self-esteem and optimism (Sheltzer & Consoli, 2019). This is due to the programs' potential to foster an environment and early life experience that promotes learning, social opportunity, and positive growth outside of school (Sheltzer & Consoli, 2019).

There is an increasing emphasis on positive approaches to development focused on promoting social and emotional well-being (Weare, 2017). These approaches concentrate on positive mental health and resilience and aim to explore and improve existing strengths that can help youth face life challenges. Resilience refers to “the ability to continue to develop in difficult circumstances, to face, to face, overcome, and ultimately be strengthened by life’s adversities and challenges” (Weare, 2017, p. 115). It is recognized as having protective factors against poor mental health. Some of the traits explored that relate to positive mental health include “pro-sociability,” “connectedness,” “life skills,” and “happiness” (Weare, 2017, p.113). Social skills, as well as self-confidence and competence, are at the center of emotional and social well-being (Weare, 2017). This is because social and emotional skills are said to build resilience and help with life challenges. These skills also help prevent poor mental health and the onset of risky behaviours (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2002). Osborne and colleagues (2016) define emotional well-being as general happiness, positive identity, and self-esteem. It is clear through these definitions and reports that self-esteem and a general sense of happiness or wellness are crucial in emotional well-being. In 2012, the WHO

created an overview of the risk factors for mental health. The overview highlights the importance of individual factors such as self-esteem or confidence, social factors such as belongingness, and environmental factors such as access to basic needs and acceptance play an important role. Because of their importance in mental health, social, and emotional well-being will be the focus of this review.

Young people often experience difficulties coping with the pressures they experience, this can contribute to low motivation, a lack of confidence, and poor self-esteem (Sklar, Anderson, & Autry, 2007). Self-esteem development is crucial for youth as it enables them to withstand stressors and pressures encountered during early ages (Dalgas-Pelish, 2006). Therefore, it is important to conduct research focusing on potential prevention opportunities or interventions that are effective in promoting positive health and self-esteem in youth.

### **Arts and Youth Wellness**

Arts-based interventions are ideal for promoting positive health as they are accessible, low cost, preventative, and have few to no adverse side effects (Clift & Camic, 2012; Malchiodi 2005; Sonke 2011). The WHO (2019) conducted a scoping review that reveals evidence for arts programs as a potential way to address health needs and promote well-being. This report contains over 900 references of arts interventions claiming that arts may contribute to health, health promotion and prevention, as well as supporting treatment and management of mental illness as well as other illnesses (WHO, 2019). The report recommends and supports further research in the arts and health. Beauregard (2014) examined the impact of different arts-based school programs on outcomes related to mental health. Although the outcomes were generally positive, there were some mixed

results. Some studies found significant improvements in hope, coping, resilience, prosocial behaviours, and self-esteem, while others found no significant changes in the same health outcomes. As recommended by WHO (2019), it is important to further explore which specific arts-based programs may be effective in promoting positive health.

### **Music and Youth Wellness**

One of the arts that have shown promise in promoting health outcomes is participatory music (WHO, 2019). Engagement with music can impact learning, development, and brain function (Thaut, 2005). Learning an instrument has the potential to create a therapeutic relationship with the mind that supports development, health, and well-being (Hallam, 2010). Hallam (2010) explored the power of music and suggested that music positively impacts young people's intellectual, social, and personal development. A study by Rickard and colleagues (2013) found that string instrument participation protected children against declining self-esteem. Similar findings were present in research by Shin (2011). In just seven weekly sessions of musical involvement, students considered the music program beneficial to their self-esteem and competence in school (Shin, 2011).

There are very few systematic reviews that examine instrumental music's impact on well-being. One systematic review by Hohmann and colleagues (2017) suggests music therapy or music-based interventions have shown promise in promoting positive mental health for those who meet criteria for substance abuse disorder. Weekly one on one and group music activities provided beneficial increases in mood, social skills, and self-esteem as well as decreases in stress levels (Gooding, 2011; Pelletier, 2004; Sharma & Jagdey, 2012; Shuman et al., 2016). Another systematic review by Henderson, Cain,

Istvandy and Lakhani (2017) revealed that music participation had a generally positive impact on migrant populations. The studies within the review showed evidence that music participation improved social well-being, self-esteem, confidence, reduced stress, and enhanced mental health. They stated mental health was improved by increasing self-esteem and confidence and allowing participants to feel empowered (Henderson et al., 2017). The participants also found group connectedness and increased trust which is important to well-being (Henderson et al., 2017).

This systematic review is the first to our knowledge to focus on instrumental community-based music programs in youth populations. Previous systematic reviews exploring music and well-being have recommended more research in instrumental group music as well as in youth populations (Daykin, de Viggiani, Pilkington & Moriarty, 2013; Sheppard & Broughton, 2020). This study is intended to fill that gap in the literature and explore the viability of instrumental community-based music programs to promote youth well-being outcomes.

This systematic review aims to explore the impact of community-based music programs on the social and emotional well-being of youth. Social and emotional skills are important in building the resilience necessary to tackle the challenges of growing up (Catalano et. al., 2002). These skills can help protect youth from negative mental health and have been shown to be connected to learning, school accomplishment, less involvement in crime and lifelong resilience (Zins et al., 2004). Confidence can also encourage the ability to engage in social interactions and relationship building (Weare, 2017). Thus, social and emotional well-being is important in positive mental health and development.

## **Methods**

### **Search Strategy**

A systematic review was conducted following the preferred reporting items for systematic reviews and meta-analyses (PRISMA) guidelines (Moher, Liberati, Tetzlaff, & Altman, 2006). The search strategy was created and conducted with help from a librarian at the Memorial University of Newfoundland (see Table 2.0). Databases were searched for all articles published until October 2019. Numerous keywords and their synonyms were searched in thirteen electronic databases. Relevant terms such as “community-based” “music” “self-esteem” “social skills” “well-being” and several synonyms were included in order to capture all related literature and adapted to fit each database (see Table 2.0). The following databases were searched: PubMed, PsycINFO, ERIC, Embase, CINAHL, Academic Search Complete, IBSS, Sociological Abstracts, Music Index, Music Periodicals Database, Arts and Humanities Databases, RILM, and Education Source. The search strategy was developed and modified for each database. Other systematic reviews and reference lists were hand-searched for potential articles to include. The Cochrane database, PROSPERO, and other databases were explored to identify whether any potential systematic reviews existed relating to our research question.

### **Selection criteria**

The inclusion criteria were kept broad to capture all studies that looked at community music programs that explored outcomes of emotional and social well-being. For the purpose of this review, community-based music programs included any extracurricular music programs and after school programs that offered instrumental lessons in a group setting. Studies were included in the review if (1) they explored



community music programs; (2) they included a population of children or young adults up to age 25 or their caregivers and instructors; (3) outcomes included social or emotional well-being outcomes, including a range of benefits such as social skills, sense of belongingness, quality of life, happiness, self-esteem and confidence; (4) was published in a peer-reviewed journal in English. Participants of all ethnicities and socioeconomic status were included, and there was no limitation in study designs.

### **Study Selection**

All studies gathered from the search string were imported from the electronic databases on to the online bibliographic management program, Zotero, where duplicates were removed. Titles and abstracts of all articles were then screened to identify potential articles that met the selection criteria. Following this, full-text articles were screened and further reviewed for eligibility and inclusion. Three independent reviewers (B.H, L.B, S.D) assessed the full-text articles (see Figure 2.0). Any disagreements were resolved by consensus following further exploration of the article during a meeting.

### **Data Extraction and Analysis**

Information was extracted from the individual studies and organized into tables (see Table 2.1-2.4). Table 2.1 gives an overview of the author and publication information, methods, research design, aim, population characteristics, outcomes explored and geographical focus. The type of intervention conducted and length, the control or comparison, and the results were captured in tables 2.2-2.4. An attempt was made to synthesize the results by observing the results of each of the studies and examining the patterns within the data.

## **Quality Assessment**

Three authors independently assessed the risk of bias and quality of eligible studies (Table 2.5). The risk of bias was assessed using the Critical Appraisal Tool Programme (CASP, 2020) tools. For strictly qualitative research, the CASP qualitative research checklist was used. This tool was used to evaluate a number of categories, including, among other things: purpose, design (including recruitment issues), data collection and analysis, ethical issues, and overall significance of the findings. For mixed methods and quantitative studies, the CASP randomized control trial checklist was used. This checklist was used to evaluate the study design and results, including, among other things: randomization, treatment of intervention and control groups, effective size and precision and applicability of the results. Once the articles were scored, they were then given a USPSTF checklist quality score of poor, fair, or good (see Table 2.5). Good studies were considered well-designed, well-conducted and representative studies with a direct assessment of health outcomes. Studies were considered as “fair” if they met most design standards, while poor studies were felt to contain more significant flaws in design or did not include important information (USPSTF, 2018).

## **Results**

### **Study Selection**

A total of 2664 research articles were identified (Figure 2.0). After duplicates were removed, 1020 articles remained. Of these studies, 856 were excluded after reviewing titles and abstracts to ensure the studies met eligibility criteria. Articles were excluded for not meeting the criteria of “community music program” such as music rehabilitation or music therapy studies, music lessons being taught online, one-on-one

lessons, or mandatory in school music classes. Articles were also excluded if the participants did not meet the eligibility criteria. There were also a number of perception pieces or commentary articles that did not meet the standards of a peer-reviewed article. After examining 164 full-texts, 15 studies met the inclusion criteria and were included. Of the 15 included articles, seven were qualitative, six were quantitative, and two were mixed methods. A meta-analysis could not be conducted due to the heterogeneity of the study designs.

### **Quality Assessment**

Of the seven qualitative research studies, one received a score of good, five had a score of fair, and one had a score of poor. In all cases, there was a clear purpose for the study, and qualitative measures were appropriate. However, the majority of studies did not include a discussion of positionality, the relationship between the researcher and participants or clarify how they ensured their study followed ethics. Of the six quantitative studies and two mixed methods, seven studies received a score of fair, and one received a score of poor. No studies were excluded due to their quality rating.

### **Descriptive Findings**

Tables 2.1-2.4 contains the characteristics of the studies. The studies were conducted between 2001 and 2019 and the number of participants ranged from 12 to 2914 per study. The ages of children and youth ranged from three to 18. The studies came from seven different countries (Australia, Belgium, China, Scotland, South Africa, the USA, and Venezuela). The findings in the articles were clustered into 3 outcomes: social well-being, self-esteem, and emotional well-being that consisted of a sense of wellness, quality of life, or happiness.

## **Intervention Explored**

The intervention explored was instrumental community-based music programs, thus, the intervention in each study consisted of community programs predominantly consisting of instrumental learning. These programs vary in length and format from study to study. Alemán and colleagues (2017), Osborne and colleagues (2015), and Harkins and colleagues (2019) all looked at El Sistema or El Sistema inspired music programs. El Sistema emphasizes the importance of social interaction with group music instruction as well as performances. Auerbach and Delport (2018), Barrett and Bond (2014), Shields (2001), and Shin (2011) looked at music programs that explored different musical activities, one of which being learning an instrument. Burnard and Dragovic (2014), Devroop (2012), Sheltzer and Consoli (2019) and Cheung and colleagues (2019) all explored music programs focused on instrumental learning. Barrett and Smigiel (2007) looked at many arts organizations, including a music theatre ensemble, children's choir, youth orchestra, and community music band program. Rickard, Brambrick, and Gill (2012) compared a new classroom-based music program with a new drama program, and Ilari and colleagues (2019) compared different extracurricular activities, including an instrumental music group. It is clear that many of the interventions are different in terms of length, aims, expectations. However, each of the programs offered youth a chance to learn a musical instrument in a group setting that is not mandatory, private, or part of the existing school curriculum. Further details of each individual intervention are available in Tables 2.2-2.4.

## **Music and Social Well-Being**

Social well-being relates to how people view their relationships with other people as well as their community (Keyes, 1998). This includes a broad range of components including social integration, social contribution, social coherence, social actualization, and social acceptance, all of which contribute to wellness (Keyes, 1998). Thirteen of the fifteen studies mentioned aspects of social well-being.

Four of the six quantitative studies explored aspects of social well-being as outcomes (Alemán, et al., 2017; Ilari et al., 2019; Osborne et al., 2016; Rickard et al. 2012). All four saw increases in social well-being, however, the results were only statistically significant in Ilari and colleagues (2019) study and one of the two schools in Osborne and colleagues' (2016) study.

All seven qualitative studies included in the review looked at aspects of social well-being and each study found positive social benefits through music participation. Barrett and Bond (2015) found evidence of social well-being through community-based music involvement in the form of connection formed between students and instructors in these programs. Barrett and Smigiel, (2007) also found evidence of social well-being and connections in their study. One of the emerging themes was “relationships and community” and another, “unity of purpose” revealed that connections were made with other students with similar interests. Similarly, Burnard and Dragovic (2015) found that participants found social benefits and a sense of belongingness in the percussion group. They mentioned there was co-creation that lead to belongingness, relatedness, and competence. Dakon and Cloete (2018) found important outcomes related to social wellness included friendships and a sense of family, and feelings of security. Harkins and

colleagues (2016) study found a similar theme relating to social well-being, called “sense of security, belonging, and relationships made.” Lastly, Sheltzer and Consoli, (2019) considered social benefits such as social skills, feeling of community, support, and friendship to be influential and positive program characteristics in their study. Each of the qualitative studies touched on the importance of the social aspect and social relationships being formed in community music programs.

Social well-being was also an important finding in the two mixed method studies (Shield 2001; Shin 2011). Shields (2001) found an increase in social skills and adjustment, but it was not statistically significant. Shin (2011) did not assess social well-being with the questionnaires but it did come up during the interviews. Teachers noted they felt that relationships with the students were a very important part of the program.

### **Supporting Self-Esteem**

Osborne and colleagues (2016) refer to emotional well-being as consisting of general happiness, positive identity, and self-esteem. Self-esteem is an important part of an individual’s well-being that leads to self-confidence, self-worth, strengths, capability, and adequacy, as well as feelings of being useful and necessary in the world (Maslow, 1987). 11 of the 15 studies touched on self-esteem and/or confidence.

Three of the seven quantitative studies touch on self-esteem. The impact of music programs on self-esteem was mixed, Alemán and colleagues (2017) found no significant differences while Devroop’s study (2012) found that participation in the music program was significantly and positively correlated with self-esteem. Following this pattern, in Rickard and colleagues (2012) self-esteem was increased, but the results were not statistically significant.

In the qualitative studies, six out of seven studies looked at self-esteem or confidence. Auerbach and Delpont (2018) did not explore self-esteem or confidence as a theme or in detail in their study. However, they did mention that they found music and active listening supported inner growth in areas such as confidence. Barrett and Bond (2015) found confidence as one of their themes within their study. In Barrett and Smigiel (2007) the concept of self-esteem comes up under the theme of “growth and well-being” theme. Dakon and Cloete (2018) also found that their music program, Violet, helped improve confidence. They stated that the respect and work ethic learned in the program could lead to abilities in which students can be proud of. In the “personal benefits” outcome, feelings of accomplishment, self-confidence, and empowerment were evident. There were a number of quotes from students who admit to feeling accomplished and proud after a performance. One of the participants stated she felt “more confident doing something she would normally be afraid of” thanks to the music program (Dakon & Cloete, 2018, p. 66). Similarly, Harkins and colleagues (2016) had a theme of increased pride and confidence from learning an instrument. Sheltzer and Consoli (2019) reported confidence as one of the benefits found in a music program. Burnard and Dragovic (2015) do not focus on self-esteem per se, however, they do cite music programs as a potential self-esteem builder in their introduction.

Both mixed methods studies also touched on self-esteem. In mixed methods studies, Shields (2001) found there were no significant differences in the scores for self-worth, but youth felt there were benefits and expressed happiness with the program. Shin (2011) showed a significant increase in self-esteem and self-concept. The results for whether music programs improve self-esteem is inconsistent.

## **Emotional Well-being**

Emotional well-being includes positive feelings and general happiness (Osborne et. al., 2016). We have included these factors as a secondary outcome as it is related to overall youth well-being. Nine of the 15 studies touch on feelings of wellness.

Three of six quantitative studies that looked directly at emotional well-being (Cheung et al., 2019; Devroop et al., 2012; Osborne, 2016). Both Cheung (2019) and Devroop's (2012) studies found that participation was significantly correlated with emotional well-being. In Osborne's (2016) study school 1 showed a significant increase in emotional well-being and school 2 showed an increase, however, it was not statistically significant.

Six of seven of the qualitative studies touched on aspects of well-being. Auerbach & Delport (2018) stated that listening and participating in music improved their sense of well-being. The article states that the children felt their sense of well-being was improved and they felt "good, joyful, and happy" when their listening was focused during music activities (Auerbach & Delport, 2018, p. 6). Barrett & Bond (2015) also had some examples of wellness expressed by students in the program. Barrett & Smigiel (2007) found a number of references to well-being during their interviews. Many of the participants spoke about how participating gave them a sense of fulfillment and well-being, including statements such as "I feel happy and free and I feel good about myself" (Barrett & Smigiel, 2007, p. 46). Burnard and Dragovic (2015) stated that creative instrument music group learning can encourage well-being by empowering participants through support and decision making. They state that well-being can be achieved through the autonomy, agency, and authoring of musical learning. Their interviews suggest that



being in Percussion 1 was linked to pupil well-being. Some students described their experience as “life-changing” (Burnard & Dragovic, 2015, p. 387). Although it is not a theme, Dakon and Cloete (2018) mention that students feel a sense of security and enjoyment. “People always say after concerts how good it was, so I’m happy to be part of Violet because everybody is so proud of us” (Dakon & Cloete, 2018, p. 66). Harkins and colleagues (2016) found a theme that mental and emotional well-being was being impacted by happiness and the enjoyment of taking part of the program.

In the mixed methods studies, Shields (2011) mentioned that youth expressed feelings of pleasure and happiness participating in the music program.

## **Discussion**

To the best of our knowledge, this is the first systematic review to explore community-based instrumental music programs on well-being outcomes in youth. The results of this review indicate that there is potential promise for instrumental community-based music programs as a means of improving social and emotional well-being in youth. The qualitative studies shared many themes and descriptive quotes with participants citing how community music had a significant and positive impact on social and emotional well-being (Alemán et al., 2017; Barrett & Smigiel, 2007; Burnard & Dragovic, 2015; Ilari et al 2019; Osborne et al., 2016; Rickard et al. 2012 & Sheltzer & Consoli, 2019). One of the most prominent theories of well-being is the PERMA model (Seligman, 2011). Seligman (2011) stated that flourishing is the gold standard for measuring well-being. He believes well-being is achieved through the building blocks for flourishing which includes positive emotions, engagement, relationships, meaning and accomplishment, all of which are present in the qualitative studies within this review

(PERMA) (Dodge et al., 2012; Seligman, 2011). An example of this is clear in the themes of Dakon and Cloete's (2018) study. Two of the themes are social and personal benefits which include things such as a sense of accomplishment, self-confidence, empowerment, and opportunities to meet new people and make friends. It is clear from the themes found in the qualitative studies that youth involved in music programs are perceiving a sense of flourishing and well-being that they attribute to the music program (see Table 2.3).

Quantitative studies also showed a significant increase in emotional well-being (Cheung et al., 2019; Devroop et al., 2012; Osborne, 2016). However, despite showing increases in emotional well-being outcomes, the results from the quantitative studies and quantitative portions of mixed methods studies regarding social well-being and self-esteem were not always statistically significant. Due to a lack of studies, inconsistencies in interventions, definitions of outcomes, and study quality, it would be difficult to form a conclusion regarding the social and emotional impact of community music programs in youth based on quantitative results alone. There was no clear reason for the inconsistencies in the quantitative results. Significance did not seem to be impacted by population, whether the population was at risk, the length of the intervention, or the measure used. Part of the reasoning for this could be the use of quantitative measures to explore subjective well-being and the arts. Leavy (2017) argues that positivist and postpositivist views that are generally present in quantitative research and mixed methods are not always practical. She argues that interpretative, constructivist, critical, or transformative world views such as those generally in qualitative, arts-based, and community-based participatory research may better capture the experience of arts-based

research. In personal qualitative interviews, participants clearly state that they see positive impacts on social and emotional subjective well-being.

One of the main challenges when compiling the results with this study was the range of definitions and measures there are to measure any given outcomes. Higgins (2012) and Veblen (2007) explain there are many different beliefs and definitions surrounding community music. Veblen (2007) shares that for many, community music can be considered any music education that exists outside of ordinary school programs. However, she argues that community music involves active music-making, creating music, and performing music. It can also be formal or informal and include different genres of music (Veblen, 2007). Higgins (2012) attempted to define community music through a series of connected definitions. He shares that not all community music programs actually adhere to the core values of community music. Some of the values of community musicians are that everyone has the right to create and enjoy their own music, music opportunities should be accessible within the community, social and personal growth are as important as musical growth, work should be completed in a way to show respect for culture and community, and that music can be used to help foster acceptance and understanding. Community music programs also emphasize a mission of lifelong learning and music access (Higgins, 2012; Veblen, 2007). Community music holds these values and attitudes and thus they are able to be passed on between a music leader and their participants (Higgins, 2012). While the studies included in this review are all community music and share many features, nevertheless they comprise of a variety of missions and aims (see table 2.1). For example, Alemán and colleagues (2017) study follows traditional El Sistema programs which have a stricter nature than other programs

explored. Baker (2016) claims that El Sistema's strict orchestra dynamics are complicated and may produce exclusion and can often lead to dissatisfaction amongst musicians (Baker, 2016). This could lead to less enjoyment than more open and inclusive programs (Baker, 2016; Higgins, 2012). Although this program would meet certain definitions of community music, it would not meet all of Higgins (2012) criteria. Baker (2016) also revealed El Sistema's creator was thinking more about discipline than music, and the aim was to discipline the poor and "civilize" or "improve social and ethnic others" (Baker, 2016, p. 14). This vision goes against the aim of community music to include regardless of skill and empower participants (Higgins, 2012). If the current program continues to value music over opportunity, this could account for the lack of significant improvement within the program.

Social and emotional well-being outcomes being explored also have varying definitions and terms. Terms such as self-esteem, social well-being, belongingness, and happiness or wellness do not have a universal, quantifiable, or concrete definition and can vary between studies. Because of this, there is no singular standardized way to record these outcomes. In fact, this brings about the question of whether or not a standardized definition is necessary. Shin and Johnson (1978) defined well-being as a person's quality of life according to their own perception and criteria. This view is still relevant in recent well-being literature as well-being is an individual and subjective experience (Rees, Goswami, & Bradshaw 2010; Stratham & Chase, 2010; Zikmund, 2003). As Leavy (2017) mentions, qualitative approaches may be more suitable when looking at personal and subjective experiences such as one's experience in an artistic program and its impact

on well-being. Participating in music programs does allow for opportunities to connect with others socially, gain skills, confidence and improve subjective well-being.

Beyond mental health and wellness, subjective well-being also has other health benefits. De Neve and colleagues (2013) summarized some of the objective health benefits of subjective well-being, these included reduced stress, inflammation, lowered risk of heart disease, stroke and susceptibility to infection and improved cardiovascular health, immune, and endocrine systems (De Neve et al., 2013). They also noted that high subjective well-being has also been linked to healthier eating, increased exercise, healthier weight, and reduced likelihood of smoking (De Neve et al., 2013). Positive emotions are also said to speed up recovery and reduce negative physiological effects. In general, happier individuals are also shown to live longer after controlling for relevant factors (De Neve et al., 2013). Although subjective well-being on its own is an important component of health and wellness, it is worth exploring the other health implications of interventions that can improve subjective well-being (De Neve et al., 2013).

### **Limitations**

Although this systematic review highlights important findings with regards to music involvement's impact on youth, there are several limitations present within this review. There were a limited number of good quality studies published on community-based instrumental music programs for youth. Out of the 15 studies included, only one received a USPSTF score of “good” quality. Some of the qualitative studies lacked theoretical clarity and did not state the theoretical background of their research or the philosophical positions that shaped their research. The community-based music programs were all unique and had different structures, lengths, practices, and goals, leading to

challenges combining and comparing the studies in the way traditional systematic reviews would. The studies also use a number of different methods for evaluating music interventions and their impact on well-being, with different scales and surveys. Lastly, only articles in the English language were included so other relevant studies might have been missed.

## **Conclusion**

This review highlights the potential impact community music programs have on social and emotional well-being in youth. Youth taking part in instrumental community-based music programs as well as their parents or instructors tend to express a positive impact on social and emotional well-being. However, the limited number of high-quality studies and variability in the methods, definitions and results make it difficult to draw firm conclusions. This review explores an under-researched and important area of health research and highlights the need for further rigorous research in this area. Community-based music interventions might be one way to address the health needs within communities and provide youth with social determinants that promote well-being in youth.

## **Declarations**

### **Conflict of Interest**

There is no conflict of interest present in this study.

### **Funding**

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

## **Acknowledgements**

We would like to thank Allison Farrell, librarian, for providing her expertise in systematic review search strategies and helping conduct the literature review.

## References

- Alemán, X., Duryea, S., Guerra, N. G., McEwan, P. J., Muñoz, R., Stampini, M., & Williamson, A. A. (2017). The effects of musical training on child development: A randomized trial of el sistema in venezuela. *Prevention Science, 18*(7), 865-878. doi:10.1007/s11121-016-0727-3
- Alliance for Healthier Communities Canada. (2020). Rx: Community - Social Prescribing in Ontario. Retrieved from <https://www.allianceon.org/Social-Prescribing>
- Auerbach, C., & Delport, A. C. (2018). Developing mindfulness in children through participation in music activities. *South African Journal of Childhood Education, 8*(1), e1-e7. doi:10.4102/sajce.v8i1.519
- Baker, G (2016). Editorial introduction: El Sistema in critical perspective. *Action, Criticism, and Theory for Music Education 15*(1).
- Barrett, M. S., & Smigiel, H. M. (2007). Children's perspectives of participation in music youth arts settings: Meaning, value and participation. *Research Studies in Music Education, 28*(1), 39-50. doi:10.1177/1321103X070280010204
- Barrett, M. S., & Bond, N. (2015). Connecting through music: The contribution of a music programme to fostering positive youth development. *Research Studies in Music Education, 37*(1), 37-54. doi:10.1177/1321103X14560320
- Beauregard, C. (2014). Effects of classroom-based creative expression programmes on children's well-being. *The Arts in Psychotherapy, 41*(3), 269-277. doi:10.1016/j.aip.2014.04.003



- Burnard, P., & Dragovic, T. (2015). Collaborative creativity in instrumental group music learning as a site for enhancing pupil wellbeing. *Cambridge Journal of Education*, 45(3), 371-392. doi:10.1080/0305764X.2014.934204
- Canadian Association of Music Therapists (2016). About Music Therapy. Retrieved from <https://www.musictherapy.ca/about-camt-music-therapy/about-music-therapy/>
- Carod-Artal, F.J. (2017). Social determinants of mental health. In Bährer-Kohler, S and Carod-Artal F.J., *Global Mental Health Prevention and Promotion* (pp. 33-46). Switzerland: Springer.
- Catalano, R., Berglund, M.L., Ryan, G.A.M., Lonczak, H.S., & Hawkins, J.D. (2002). Positive youth development in the United States: Research findings on evaluations of positive youth development programs. *Prevention and Treatment*, 5, Article 15.
- Cheung, A. T., Li, W. H. C., Ho, L. L. K., Ho, K. Y., Lam, K. K. W., & Chung, O. K. (2019). Effectiveness of a musical training programme in promoting happiness and quality of life of underprivileged preschool children. *Journal of Clinical Nursing*, 28(23-24), 4412-4423. doi:10.1111/jocn.15023
- Clift, S., & Camic, P. M. (2016). *Oxford textbook of creative arts, health, and wellbeing: international perspectives on practice, policy and research*. Oxford: Oxford University Press.
- Critical Appraisal Skills Programme (2020). CASP Checklists. [online] Retrieved from <https://casp-uk.net/casp-tools-checklists/>
- Dakon, J. M., & Cloete, E. (2018). The violet experience: Social interaction through eclectic music learning practices. *British Journal of Music Education*, 35(1), 57-72. doi:10.1017/S0265051717000122

- Dalgas-Pelish, P. (2006). Effects of a self-esteem intervention program on school-age children. *Pediatric Nursing*, 32(4), 341.
- Daykin, N., de Viggiani, N., Pilkington, P., & Moriarty, Y. (2013). Music making for health, well-being and behaviour change in youth justice settings: a systematic review. *Health Promotion International*, 28(2), 197–210.  
<https://doi.org/10.1093/heapro/das005>
- De Neve, J.-E., Diener, E., Tay, L., & Xuereb, C. (2013) The objective benefits of subjective well-being. In Helliwell, J., Layard, R., & Sachs, J., eds. *World Happiness Report 2013*. New York: UN Sustainable Development Solutions Network.
- Devroop, K. (2012). The social-emotional impact of instrumental music performance on economically disadvantaged south african students. *Music Education Research*, 14(4), 407-416. doi:10.1080/14613808.2012.685456
- Dodge, R., Daly, A., Huyton, J., & Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 222-235.
- Ferrari, A., Charlson, F., Norman, R., Patten, S. B., Freedman, G., Murray, C. J. L., et al. (2013). Burden of depressive disorders by country, sex, age, and year: findings from the global burden of disease study 2010. *PLOS Medicine*, 10, 1–12.
- Gooding, L. F. (2011). The effect of a music therapy social skills training program on improving social competence in children and adolescents with social skills deficits. *Journal of Music Therapy*, 48(4), 440-462. doi:10.1093/jmt/48.4.440

- Hallam, S. (2010). The power of music: Its impact on the intellectual, social and personal development of children and young people. *International Journal of Music Education, 28*(3), 269-289. doi:10.1177/0255761410370658
- Hanna, G., Rollins, J., & Lewis, L. (2017). Arts in medicine literature review. Seattle, WA: Grantmakers in the Arts.
- Harkins, C., Garnham, L., Campbell, A., & Tannahill, C. (2016). Hitting the right note for child and adolescent mental and emotional wellbeing: A formative qualitative evaluation of sistema Scotland's "Big noise" orchestral programme. *Journal of Public Mental Health, 15*(1), 25-36. doi:10.1108/JPMH-11-2015-0047
- Higgins, L. (2012). Community Music. New York: Oxford University Press.
- Henderson, S., Cain, M., Istvandy, L., & Lakhani, A. (2017). The role of music participation in positive health and wellbeing outcomes for migrant populations: A systematic review. *Psychology of Music, 45*(4), 459-478. doi:10.1177/0305735616665910
- Hohmann, L., Bradt, J., Stegemann, T., & Koelsch, S. (2017). Effects of music therapy and music-based interventions in the treatment of substance use disorders: A systematic review. *PLoS One, 12*(11), e0187363. doi:10.1371/journal.pone.0187363
- Ilari, B., Perez, P., Wood A., & Habibi, A. (2019). The role of community based music and sports programmes in parental views of children's social skills and personality. *International Journal of Community Music, 12*(1). doi: 10.1386/ijcm.12.1.35\_1

- Keyes, Corey L. M. (1998). Social well-being. *Social Psychology Quarterly*, 61(2), 121-140. doi:10.2307/2787065
- Leavy, P. (2017). *Research design : Quantitative, qualitative, mixed methods, arts-based, and community-based participatory research approaches*.
- Malchiodi, C.A. (2002). *The Soul's Palette: Drawing on Art's Transformative Powers for Health and Wellbeing*. Boston: Shambala.
- Maslow, A. H. (1987). *Motivation and personality*. (3rd ed.). New York, NY: Harper & Row, Publishers, Inc.
- Moher, D., Liberati, A., Tetzlaff, J., Altman, D. G., & PRISMA Group. (2009). Preferred reporting items for systematic reviews and meta-analyses: The PRISMA statement. *Journal of Clinical Epidemiology*, 62(10), 1006.
- Osborne, M. S., McPherson, G. E., Faulkner, R., Davidson, J. W., & Barrett, M. S. (2016). Exploring the academic and psychosocial impact of el sistema-inspired music programs within two low socio-economic schools. *Music Education Research*, 18(2), 156-175. doi:10.1080/14613808.2015.1056130
- Pelletier, C. L. (2004). The effect of music on decreasing arousal due to stress: A meta-analysis. *Journal of Music Therapy*, 41(3), 192-192. doi:10.1093/jmt/41.3.192
- Rees, G., Goswami, H., & Bradshaw, J. (2010). Developing an index of children's subjective well-being in England: Summary Report. *The Children's Society*, London.
- Rickard, N. S., Bambrick, C. J., & Gill, A. (2012). Absence of widespread psychosocial and cognitive effects of school-based music instruction in 10–13-year-old

students. *International Journal of Music Education*, 30(1), 57-78.

doi:10.1177/0255761411431399

Rickard, N. S., Appelman, P., James, R., Murphy, F., Gill, A., & Bambrick, C. (2013).

Orchestrating life skills: The effect of increased school-based music classes on children's social competence and self-esteem. *International Journal of Music Education*, 31, 292–309.

Seligman, M. E. P. (2011). Flourish – A new understanding of happiness and well-being

– and how to achieve them. London: Nicholas Brealey Publishing.

Sharma, M., & Jagdev, T. (2012). Use of music therapy for enhancing self-esteem among

academically stressed adolescents. *Pakistan Journal of Psychological Research*, 27(1), 53.

Sheltzer, J. M., & Consoli, A. J. (2019). Understanding the impact of an after-school

music program with engaged underserved youth. *Journal of Community Psychology*, 47(6), 1364-1379. doi:10.1002/jcop.22193

Sheppard, A., & Broughton, M. (2020). Promoting wellbeing and health through active

participation in music and dance: A systematic review. *International Journal of Qualitative Studies on Health and Well-being*, 15(1), International Journal of Qualitative Studies on Health and Well-being, 01 January 2020, Vol.15(1).

Shields, C. (2001). Music education and mentoring as intervention for at-risk urban

adolescents: Their self-perceptions, opinions, and attitudes. *Journal of Research in Music Education*, 49(3), 273-286. doi:10.2307/3345712

- Shin, D., & Johnson, D. (1978). Avowed happiness as an overall assessment of the quality of life. *Social Indicators Research*, 5(1), 475–492.  
<http://dx.doi.org/10.1007/BF00352944>
- Shin, J. (2011). An investigation of participation in weekly music workshops and its relationship to academic self concept and self-esteem of middle school students in low income communities. *Contributions to Music Education*, 38(2), 29–42.
- Shuman, J., Kennedy, H., DeWitt, P., Edelblute, A., & Wamboldt, M. Z. (2016). Group music therapy impacts mood states of adolescents in a psychiatric hospital setting. *The Arts in Psychotherapy*, 49, 50-56. doi:10.1016/j.aip.2016.05.014
- Sklar, S., Anderson, S., & Autry, C. (2007). Positive youth development: A wilderness intervention. *Therapeutic Recreation Journal*, 41(3), 233–243.
- Sonke J. (2011). Music and the arts in healthcare: a perspective from the United States. *Music and Arts in Action*, 3, 5–14.
- Stratham, J., & Chase, E. (2010). Childhood wellbeing – A brief overview.  
Loughborough: Childhood Wellbeing Research Centre.
- Thaut, M. H. (2005). The future of music in therapy and medicine. *Annals of the New York Academy of Sciences*, 1060(1), 303-308. doi:10.1196/annals.1360.023
- Underwood, L., Washington, A., & Underwood, L. (2016). Mental Illness and Juvenile Offenders. *International Journal of Environmental Research and Public Health*, 13(2), 228–228. <https://doi.org/10.3390/ijerph13020228>
- U.S. Preventive Services Task Force, (2018). Criteria for assessing internal validity of individual studies. Retrieved from

<https://www.uspreventiveservicestaskforce.org/uspstf/procedure-manual-appendix-vi-criteria-assessing-internal-validity-individual-studies>

- Veblen, Kari. (2007). The many ways of community music. *International Journal of Community Music*. 1. 5-21. 10.1386/ijcm.1.1.5\_1.
- Weare, K. (2017). Promoting social and emotional wellbeing and responding to mental health problems in schools. In Bährer-Kohler, S and Carod-Artal F.J., *Global Mental Health Prevention and Promotion* (pp. 33-46). Switzerland: Springer.
- World Health Organization. (2012). Risks to mental health: an overview of vulnerabilities and risk factors. Retrieved from [https://www.who.int/mental\\_health/mhgap/risks\\_to\\_mental\\_health\\_EN\\_27\\_08\\_12.pdf](https://www.who.int/mental_health/mhgap/risks_to_mental_health_EN_27_08_12.pdf)
- World Health Organization and Calouste Gulbenkian Foundation. (2014). Social determinants of mental health. Geneva: World Health Organization
- World Health Organization (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review (2019)
- Zikmund, V. (2003). Health, well-being, and the quality of life: Some psychosomatic reflections. *Neuroendocrinology Letters*, 2(6), 401–403.
- Zins, J., Weissberg, R., Walberg, H., Zins, J. R., Weissberg, M. Wang, & Walberg, H. (2004). Building academic success on social and emotional learning: What does the research say? New York: Teachers College Press.

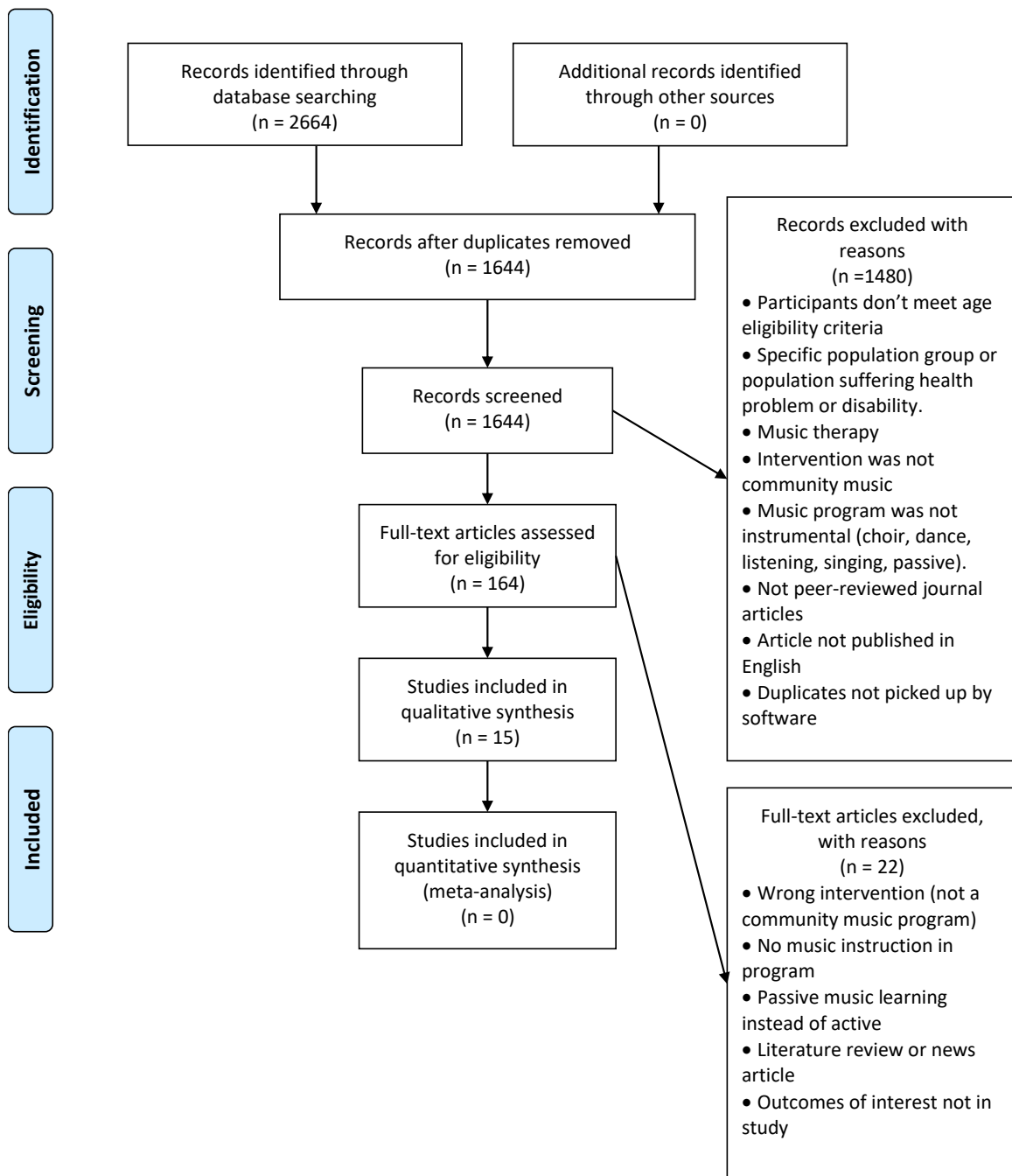


Figure 2.0.

*Prisma FLOW Diagram*



Table 2.0

*Example search strategy as performed in MEDLINE (via EBSCO).*

#	Search Query	Results
S1	(child OR children OR adolescent OR adolescents OR adolescence OR teenager OR teen OR teens OR teenagers OR paediatric OR paediatrics OR pediatric OR pediatrics OR youth OR "young adult" OR "young adults" OR "emerging adult" OR "emerging adults")	4203747
S2	("self esteem" OR "self concept" OR "self perception" OR "self efficacy" OR "self acceptance" OR "self-actualization" OR "self-identity" OR "social identity" OR "social identification" OR "self-structure" OR "self-confidence" OR "confidence" OR "self evaluation" OR "self assessment" OR "self assurance" OR "wellbeing" OR "well being" OR "wellness" OR "well*" OR "quality of life" OR "life satisfaction" OR "happy" OR "happiness" OR "optimism" OR "resilience" OR "adaptability" OR "coping" OR "cope" OR "emotional adjustment" OR "psychological endurance" OR "belonging" OR "social identity" OR "social skill" OR "social skills" OR "connection")	3889711
S3	("community based music" OR "community music" OR "extracurricular music" OR "music instrument" OR "musical instrument" OR "music program" OR "school music" OR "afterschool music" OR "after school music" OR "music education" OR "music instruction" OR "music activity" OR "music group" OR "orchestra")	5976
S4	S1 AND S2 AND S3	671

Table 2.1

*Characteristics of All Included Studies*

Authors (Year)	Methods / Design	Aim	Population	Relevant Outcomes Explored	Geological Focus
Alemán et al., (2017).	Quantitative (Randomized control trial)	To assess the effects of a large-scale community music program on children's developmental functioning in low socioeconomic areas with exposure to violence.	2914 at-risk children in low socioeconomic areas exposed to violence. Ages 6–14.	Prosocial behaviour and self-esteem	Venezuela
Auerbach & Delpont, (2018).	Qualitative (Semi-structured interviews)	To explore the impact of music and aspects of mindfulness in young children through the active participation in musical activities.	12 children in a socially and economically disadvantaged area. Ages 11-14.	Social well-being, self-awareness, well-being	South Africa
Barrett & Bond, (2015).	Qualitative (Collective case study, semi-structured interviews)	To identify learning outcomes of participation in the music program, the strategies that support these outcomes, and factors that promote positive music engagement and learning outcomes.	28 students in disadvantaged schools. Ages 10-16.  11 school staff and parents.	Social competence, connection, and confidence	Australia

Barrett & Smigiel, (2007).	Qualitative (Collective case study, interviews)	To explore perceptions of youths' meaning and value of arts in their lives, the extent of participation and to gain information through interviews to develop artistic programs.	25 youth with no at-risk status. Ages 5-17.	Connection with others, individual growth, and well-being	Australia
Burnard & Dragovic, (2015).	Qualitative (Case study, interviews, and journal entries)	To determine outcomes related to creativity in instrumental group music learning and explore whether those elements provide conditions for collaborative creativity to flourish and potential for well-being.	13 students and teachers as well as 41 journal entries. No at risk status.	Well-being, belongingness, relatedness, and competence	Australia
Cheung et al., (2019)	Quantitative, Quasi-experimental design	To explore music training program's effectiveness in promoting happiness and quality of life in underprivileged children.	171 children who were socioeconomically disadvantaged. Ages 3-6.	Quality of life and happiness	China
Dakon & Cloete (2018).	Qualitative (Case study, interviews and observations)	To explore an eclectic music program and see how members benefit musically, socially, and personally from these spaces.	20 youth with no at risk status. Ages 12-18.	Social benefits and self-esteem	Belgium

Devroop (2012).	Quantitative, Correlational survey study	To address the efficacy of musical outreach project as an intervention for self-esteem, optimism, sense of happiness and perseverance.	84 youth from socioeconomically disadvantaged areas. Ages 12-16.	Self-esteem, optimism, happiness, and perseverance	South Africa
Harkins et al., (2019)	Qualitative (Semi-structured interviews)	To address impacts of mental and emotional well-being within Sistema Scotland's Big Noise Program.	9 girls with no at risk status. Ages 10 to 16.  126 interviews with staff, volunteers, and partners.	Happiness and enjoyment, belonging, confidence and self-esteem	Scotland
Ilari et al., (2019)	Quantitative (Longitudinal survey study)	To examine perceptions and potential impact of extracurricular programs on children's socio-emotional skills and personality.	89 children with no at risk status. Ages 6-7.	Social skills	USA
Osborne et al., (2016).	Quantitative (Non-randomized control trial)	To understand the potential for positive non-musical outcomes for economically and socially disadvantaged primary school students who are involved in instrumental music learning programs.	92 students who are socioeconomically disadvantaged. Ages 8-11.	Psychosocial well-being including emotional well-being, social well-being, social relationships, and self-regulation	Australia

Rickard, Bambrick, & Gill (2012).	Quantitative (Experimental survey study)	To explore the impact of an increase in school-based music training on a range of cognitive and psychosocial measures.	100 primary school students. Ages 10-13. No at risk status.	Prosocial behaviour and self-esteem	Australia
Shields (2001).	Mixed Methods (Quantitative surveys and qualitative interviews)	To explore the importance of music education as intervention for at-risk youth through participation in performance groups while receiving mentoring.	429 sixth grade students identified as at risk and 32 parents.	Social acceptance, self-worth, and well-being	USA
Shin (2011).	Mixed Methods (Quantitative correlational survey study and qualitative interviews)	To examine how a music program affected academic self-concept and self-esteem of middle school students in low-income communities.	18 students and parents in a low socioeconomic area.	Social competence, connection, and confidence	USA
Sheltzer and Consoli, 2019	Qualitative (Semi-structured interviews)	To explore and understand the benefits of youth involvement in an after-school music program in an underserved youth population.	11 alumni and five instructors of music program. Underserved youth population.	Social skills and identity development	USA

Table 2.2

*Review of Quantitative Studies*

Authors (year)	Intervention	Length	Control Group	Measurement Tools	Relevant Outcomes
Alemán et al., (2017).	Community-based music program “El Sistema” youth and children’s orchestras and choirs that emphasize social interactions through group practice and performance.	Four months, several times a week	Control group of children who start program a semester later.	Prosocial behaviour and connections were measured using the Strengths and Difficulties Questionnaire. Self-esteem was measured with the Adolescence Rosenberg Self-Esteem Scale.	No significant differences were present in prosocial behaviour or self-esteem.
Cheung et al., (2019)	Free music education for children in low-income families. The program consists of music lessons, workshops, and the chance to join ensembles and perform publicly.	Three months, once a week	Control group of children who started music instruction after study.	Quality of life was measured with the Paediatric Quality of Life Inventory 4.0 Parent Report for toddlers. Levels of happiness were assessed using the Visual Analog Scale (VAS).	There was a positive significant difference in quality of life and happiness for those in experimental group. This group of children receiving music instruction reported higher quality of life and happiness levels compared to the control group.
Devroop (2012).	South African Musical Outreach	Two Years	No control group.	A developed Likert scale was used to	Music participation was significantly and positively

	project sustainable music program of performing instrumental ensembles at disadvantaged public schools.			measure outcomes. Correlations were explored.	correlated with self-esteem, optimism, happiness, and perseverance.
Ilari et al., (2019)	The Youth Orchestra Los Angeles at the Heart of Los Angeles. This is an El Sistema-inspired community-based music program that provides free music education to underserved populations.	5 years	Compared to music extracurricular group and control group of students in no extracurricular activities	Social skills were explored with the Behavioural and Emotional Screening System (BESS)	There was a positive significant difference between the control and music group in year 3 and 4. This reveals parents felt children who were involved in music had less socio-emotional problems and better social skills than those who did not participate in the music group.
Osborne et al., (2016).	El Sistema Inspired Music Programmes (learning a music instrument). The study takes place in two schools.	12 months	Control group of students in no music program	An interactive computerized assessment system for students was used to collect information on skill items. They used a game titled “Clowning Around” designed to look at well-being, self-	The School 1 Music Program group reported significantly higher scores on total well-being on all seven psychosocial subtests (emotional well-being, social well-being, protective factors, social relationships, self-regulation) than the non-music program group.

				esteem, and adjustment in young people.	There were increases but no significant differences for School 2.
Rickard, Bambrick, & Gill (2012).	Compares new classroom-based music programme with new drama program.	Six months	Compared to new drama program	Children and parents or guardians completed the Social Skills Rating System to look at social well-being. The Rosenberg Self-Esteem Scale was used to test self-esteem.	There were no significant differences in social skills or self-esteem in the music program versus drama program.

Table 2.3

*Review of Qualitative Studies*

Authors (year)	Intervention	Length	Measurement Tools	Relevant Outcomes
Auerbach & Delpont (2018).	Non-formal music program taking place in a voluntary aftercare facility within the community. Included learning instruments.	Ten months, weekly	Interviews were examined for themes using thematic analysis.	Themes suggested improved well-being. Increased awareness of self and others: The music learning and mindfulness seemed to improve well-being and create level-headedness as well as relieve stress. Core role of listening: Listening activities improved well-being, children felt “good, joyful, happy.”



Barrett & Bond (2015).	Australian Children's Music Foundation (ACMF) taking place after school in four socio-economically disadvantaged school settings. This included instrumental and vocal workshops.	Nine months, weekly	In-depth semi-structured interviews were examined for themes. They centered around five domains of positive youth development (PYD).	Themes suggested improved social well-being and self-esteem. Social competence: Students and teachers highlighted social competencies they developed through music. Confidence: School teachers and principals mentioned the program encouraged youth confidence and was a "self-esteem builder." Parents also commented on this. Connection: building positive bonds with others was mentioned.
Barrett & Smigiel (2007).	Different music programs (music theatre, youth choir, youth orchestra, community band).	No duration specified	Interviews were examined for themes using thematic analysis.	Themes suggested improved social well-being and overall well-being. Unity of purpose: Connection with other students with similar interests is mentioned. Relationships and community: Children spoke of relationships and their importance in music sites. Some mentioned making friends and creating "sense of family" Individual growth and well-being: Children spoke of how participation in music was fulfilling and gave them a sense of well-being.
Burnard & Dragovic (2015).	Instrumental program that took place within school.	12 months	Semi-structured interviews and diaries were examined for themes.	Themes suggest improved well-being. Analysis of interviews in instrumental group music included features of well-being such as belonging, relatedness, and competence.

Dakon & Cloete (2018).	Non-profit youth music string program called Violet that serves Belgian communities	Six months	Interviews were examined for themes. Observations also took place.	Themes suggest personal and social benefits. Social benefits: Music participation provided young people with ‘a means of meeting new people and making new friends.’ Self-esteem: Members are encouraged to “work on self-respect and self- esteem.”
Harkins et al (2016).	Sistema Scotland’s Community-based “Big Noise program” which focuses on music-making to foster well-being and other benefits.	Length of involvement varied	Semi-structured interviews, observation, drawing, filmmaking, focus group and program analysis.	Qualitative findings support that participant mental and emotional being are impacted in 3 ways: 1: happiness and enjoyment taking part of the program 2: sense of security, belonging, and relationships made. 3: increased pride and confidence from acquiring music skills.
Sheltzer and Consoli, (2019)	After school music program Notes for Notes that provides free music resources and lessons and opportunity for youth.	Alumni in program a minimum of two years, instructors a minimum of one year.	Semi-structured interviews or alumni and current staff.	Many influential positive program characteristics were noted including relational or social benefits such as social skills, feeling of community, support, friendship, and personal benefits such as confidence.

Table 2.4.

*Review of Mixed Methods Studies*

Authors (year)	Intervention	Length	Measurement Tools	Relevant Outcomes
Shields (2001).	Music education as intervention for at-risk urban adolescents. No control group.	16 weeks	Social well-being was explored using the Social Support Scale for Children, a self-report self-perception profile for children. Children were also interviewed.	There was no significant difference in scores in social acceptance or self-worth. In interviews youth felt pleasure, happiness, and social benefits.
Shin (2011).	I Am A Dreamer Musician Program - community music programme with weekly workshops including instrument learning, improv, jam sessions in low income areas. No control group.	Seven weeks, weekly sessions	Modified version of the Self-Description Questionnaire (SDQ-I) to look at student's self-concept. Children were also interviewed.	The SDQ found that there was a significant relationship between the music program and positive self-concept. Parent interview and individual interviews suggested positive relationship with the music program and self-esteem.

Table 2.5.

*Article Quality Assessment*

Method	Article	Grade
Qualitative	Auerbach & Delpont (2018).	Poor
Qualitative	Barrett & Bond (2015).	Fair
Qualitative	Barrett & Smigiel (2007).	Fair
Qualitative	Burnard & Dragovic (2015).	Good
Qualitative	Dakon & Cloete (2018).	Fair
Qualitative	Harkins et al (2016)	Fair
Qualitative	Sheltzer & Consoli (2019)	Fair
Quantitative	Alemán et al., (2017).	Fair
Quantitative	Cheung et al., (2019)	Fair
Quantitative	Devroop (2012).	Poor
Quantitative	Ilari et al., (2019)	Fair
Quantitative	Osborne et al., (2016).	Fair
Quantitative	Rickard, Bambrick, & Gill (2012).	Fair
Quantitative and Qualitative	Shields (2001).	Fair
Quantitative and Qualitative	Shin (2011).	Fair

## **Chapter Three: Exploring the Impact of a Community-Based Music Program on Youth Well-Being**

Brittany Howell<sup>1</sup>, Dr. Lisa Bishop<sup>1,2</sup>, Dr. Stephen Darcy<sup>2</sup>, Dr. Natalie Beausoleil<sup>3</sup> and Dr. David Buley<sup>4</sup>

<sup>1</sup> Memorial University of Newfoundland School of Pharmacy

<sup>2</sup> Memorial University of Newfoundland Discipline of Family Medicine, Faculty of Medicine

<sup>3</sup> Memorial University of Newfoundland Department of Community Health and Humanities, Faculty of Medicine

<sup>4</sup> Memorial University of Newfoundland Faculty of Education

This manuscript is currently being prepared for the Journal of Community Psychology.

## Abstract

**Aims:** To explore perceptions of how a local community-based music program impacts youth well-being. **Methods:** We conducted an interpretative phenomenological study consisting of semi-structured interviews with students (n=9) and caregivers (n=6) as well as a focus group with instructors (n=5) who are part of the Strong Harbour Strings music program. Interviews were audio-recorded, transcribed verbatim and examined for themes. **Results:** Data analysis led to two broad categories and six themes. The categories included impact of the music program and environment of the music program. Themes included impact on emotions, impact on learning, opportunities for engaging, importance of accessibility, accepting and positive space, and instructor influence. **Conclusion:** Participating in community-based music programs provided young people with perceived benefits important to positive youth development. The themes suggest the safe and accepting environment connected students with caring and influential instructors and allowed for benefits such as positive feelings, confidence, social connections, and learning skills.

*Keywords:* community-based participatory program, community-based music, instrumental music, community health, youth, well-being

## **Introduction**

Mental health problems are amongst the leading causes of illness, disability, and lowered quality of health worldwide (WHO, 2001). The World Health Organization (WHO, 2018) states that health is not possible without mental health. Despite this, the magnitude of mental health's burden is often unmet and mental health research and treatment are often underfunded, lacking resources, and receiving less urgency than physical health problems (WHO, 2001). Mental and emotional well-being are impacted by biological, sociological, and environmental factors (Carod-Artal, 2017). The biopsychosocial model of health recognizes that social factors are an important part of our well-being and is connected to physical and biological health problems as well (De Neve et al., 2013; Engel, 1997). Unlike biological determinants, both social and environmental factors can be altered by timely interventions and experiences. Thus, there is an emphasis on finding and developing programs to promote mental and emotional well-being. This is especially important in young populations, since most adult mental health problems begin in childhood and adolescence (Underwood, Washington & Underwood, 2016).

The way we interact with society and our communities can play a crucial role in our health and wellness. The Commission on the Determinants of Health (CSDH) has stated that "social injustice is killing people on a grand scale" and that social determinants affect people's mental health, physical health, and livelihood (WHO, 2008, p. 26). Commission on the Social Determinants of Health, 2008). Some of the ways we can achieve health are through "creating supportive environments, strengthening community action, developing personal skills, and reorienting health services." (Clift & Camic, 2016,

p. 6; WHO, 1986). Thus, we must identify and engage in environments that promote wellness and allow us to thrive.

Exploring environments that promote well-being and positive growth can help communities better prevent negative health outcomes and promote mental health. Because of this, environments that allow for participation in the arts should be further explored for their potential health benefits. Artistic practices have the potential to benefit social, psychological, and spiritual well-being (Hanna, Rollins, & Lewis, 2017). The WHO (2019) released a comprehensive scoping review on arts and health, which revealed that community arts have shown promise in improving health outcomes. The report noted that music programs, in particular, showed much promise in improving mental health and well-being. Although music has been gaining recognition for promoting health and well-being over the past three decades, studies regarding instrumental learning in the community are still under-researched (Burnard & Dragovic, 2014; Sunderland et al., 2018). Based on the existing research, community-based music programs show promise in fostering an environment and early life experience that promotes learning, social opportunity, and positive growth outside of school (Sheltzer & Consoli, 2019).

Engagement with music can change the brain and affect learning, development, and brain function (Thaut, 2005). Learning an instrument has shown the potential to create a therapeutic relationship with the mind that supports development, health, and well-being (Hallam, 2010). This therapeutic relationship is evident in research suggesting community-based music programs can promote self-esteem, positivity, social connections, and well-being in youth (Auerbach & Delpont 2018; Barrett & Bond, 2015; Burnard & Dragovic, 2015; Dakon & Cloete, 2018; Sheltzer & Consoli, 2019). While



many of the published studies exploring community-based music programs show benefits, some studies show mixed results or no significant changes (Alemán et. al., 2017; Osborne et al., 2016). Given the potential for these music programs and the limited research focusing on youth populations and instrumental group music learning, it is crucial to explore the relationship between community-based music programs and youth well-being.

Strong Harbour Strings (SHS) is a community-based music program that aims to provide underserved youth with a transformative learning experience through music. The program offers free access to string instruments, individual and group lessons, and opportunities for other learning and community building experiences. This study, set in the community-based SHS program, explores the impact of this program on youth well being through the perceptions of the students, caregivers, and instructors involved in the program.

### **Methods**

This qualitative study was conducted using a constructivist paradigm and following interpretative phenomenological analysis (IPA). Individual semi-structured interviews with children and caregivers and a focus group with instructors were used to collect data. The main beliefs of constructivism are that we construct knowledge and reality through lived experiences and daily interactions (Lincoln, Lynham & Guba, 2011). Constructivist research is often qualitative and interpretative in nature and involves naturalistic methodologies such as interviews or observation (Angen, 2000; Lincoln, Lynham & Guba, 2011). Interviews allow us to listen and learn about and people's realities and perceptions. IPA explores how participants are understanding and making

sense of their own world and experiences (Smith & Osborn, 2004). The aim is to understand an experience from the participant's point of view and to take and share their views (Smith & Osborn, 2004). Because this study aimed to explore participants' perceptions of their experience in the music program, this research design was appropriate to help capture and share their reality. Martin Heidegger developed interpretive phenomenology by expanding hermeneutics, the philosophy of interpretation (Creswell, 1994). Heidegger's philosophy suggests the essence of human understanding is hermeneutic and that "our understanding of the everyday world is derived from our interpretation of it" (Dahlberg, Drew & Nystrom, 2008; Reiners, 2012). Following IPA, the themes in this study are derived from our understanding of the participants' personal accounts and interpretations.

### **Participants and Setting**

Participants consisted of students involved in SHS, their caregivers, and instructors who were invited to participate in the study and given an equal opportunity to participate. SHS is a non-profit organization that provides free music lessons for youth in underserved communities in St. John's, Newfoundland and Labrador (NL) (Strong Harbour Strings, n.d.). The program was modelled after Community MusicWorks, whose mission is to create cohesive communities through music education and performance and to transform the lives of children, families, and musicians within the community (Community MusicWorks, 2020). The province of NL has recognized a need to focus on strategies to promote positive mental health and wellness, including opportunities and programs that are optimal childhood learning environments (Government of

Newfoundland and Labrador, 2015). SHS aims to provide youth with an optimal learning environment and a positive experience.

SHS music lessons occur after school, and students can learn various string instruments, including the violin, viola, or cello. They aim to provide equal opportunities to learn music while positively benefiting growth and learning. There are currently two SHS sites. The original site offers lessons twice a week in individual and group learning settings after school and in a community centre within walking distance from nearby schools. The second and newer site offers after school classes once a week in group learning sessions within the school. All instruments, learning materials, and lessons are entirely free of cost.

In addition to music instruction and performance opportunities, they offer a social club for students 12 and older. This club, titled the 12+ club, takes place a half-hour before group lessons and explores important social justice issues with students. Some of the topics explored include equity and equality, gender issues, and how music can be used for social justice.

### **Recruitment and Ethics**

This study was reviewed and approved by the Interdisciplinary Committee on Ethics in Human Research (ICEHR) at Memorial University. After receiving ethics approval, the primary researcher recruited participants by attending the program and inviting everyone to partake in the study. Invitation letters and consent forms were distributed, and the forms were returned anonymously and conveniently in a drop box at the SHS location.

## **Data Collection and Analysis**

Data was gathered through semi-structured interviews and a focus group. The interviews were guided by open-ended questions that explored student's experiences and feelings about the SHS music program and its impact. This study explored the research question, "How do youth, instructors and caregivers perceive the impact of a community-based music program on youth well-being?" We aimed to reach this using open-ended questions such as "How does being a part of the music program make you feel about yourself?" "Do you notice any changes in yourself after joining the program? Explain" (See appendices F-H). These questions were adjusted based on whether the participant was a student, caregiver, or instructor.

The interviews and focus groups were audio-recorded and transcribed verbatim by the primary researcher and de-identified. The original transcripts were saved on an encrypted password-protected USB drive to ensure the privacy and protection of the data. De-identified transcripts were examined for themes following thematic analysis as described by Braun and Clarke (2006). This includes deep immersion with the data, generating codes, searching for themes, reviewing themes, defining, and naming themes and producing the report. The research team met on multiple occasions to go over the transcripts and comment on emerging themes. Two categories and six main themes emerged from this process and were agreed upon by the research team.

## **Positionality of Researcher**

Creswell and Poth (2018) state that it is important to be reflexive and consider what you bring to qualitative research, including values, and experiences. This is

something I kept in mind and wrote about in a reflexive journal as I interacted with those at SHS. I acknowledge that I was an outsider, as I was not a part of the SHS community, nor did I play a string instrument. I was also in a position of perceived power due to my role as a researcher. Eder and Fingerson (2002) state that power imbalances may be more prominent when researching children because of “inherent power differences between adult and child in addition to those between the researcher and participants” (p. 194). I did my best to ensure the children I interviewed were aware that I was a student doing research and that they could be honest with me about their experiences with no consequences. Everyone was incredibly welcoming and curious when I began showing up and throughout my project, I attended some classes and performances to make myself more familiar to those in the program. I was also responsible for handing out surveys to students in a prior research role. During this time, it was clear to me that the children wanted to talk about and share their experiences in the program and not simply fill out a survey. There was no prior relationship with anyone involved in the study apart from this and I do not feel this influenced the data.

## **Results**

### **Participants**

A total of 20 participants were included: nine students, six caregivers, and five instructors. There was a total of 15 interviews and one focus group of instructors. Students' ages ranged from 6 to 14 years old and the length of time in the program ranged from a few months to six years. All participants were from the original program site except for one student and one parent who were from the new program.

## Themes

Analysis of the transcripts led to the identification of two broad categories: impact of the music program and environment of the music program. The impact of the program had three themes: impact on feeling, impact on learning, and opportunity for engagement. Each of these had sub-themes, which are depicted in Figure 3.0. The environment also consisted of three themes: importance of accessibility, accepting and positive space, and instructor influence. Some of the included quotes have been edited for clarity.

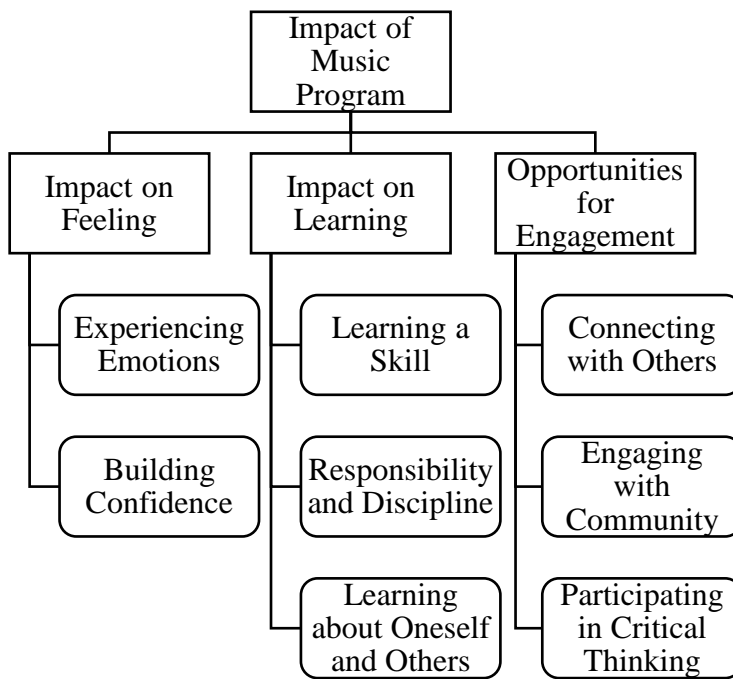


Figure 3.0

*Impact of Music Program Themes and Sub-Themes*

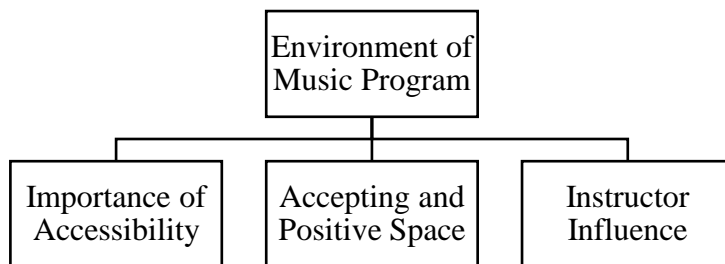


Figure 3.1

*Environment of Music Program Themes*

**Impact of the Music Program**

The music program impacted youth by influencing their feelings, allowing them to learn, and allowing them opportunities to engage with others and their community.

***Theme 1: Impact on Feeling***

Being part of SHS and learning to play an instrument had an impact on students' feelings and emotions, resulting in two sub-themes: experiencing emotions and building confidence. Self-confidence and competence are considered to be at the center of emotional and social well-being (Weare, 2017). Experiencing positive emotions or positive affect is also viewed as one of the most influential parts of well-being (Bradburn, 1969; Schwarz, Kahneman & Diener, 1999; Seligman, 2011). The sub-themes experiencing emotions, and building confidence, were commonly expressed in the students' experiences at SHS.

**Experiencing Emotions.**

When asked how being at SHS or playing an instrument made them feel, all of the students felt enjoyment or happiness. One student shared:

I'm never upset or displeased when I come here. If I had a rough day at school and I have this after school, it's nice to come here and just relax and play some music with a bunch of kids, so it obviously positively impacts my personal life and also I just really enjoy it.

A sense of enjoyment and positivity towards the program was seen in all student interviews. Generally, playing a musical instrument was one part of the program that all the students enjoyed. When asked "How do you feel when you are playing an instrument and learning?", one student responded, "I feel really good, because I'm happy, because we get to play songs for concerts and it's really fun!" The expression of these positive emotions was common in the interviews with students.

A few students noted that they also felt frustrated at times, but this was mainly related to their ability to play. One of the students reflected on how this frustration can be normal and encourage practicing:

I mean, if it is a complicated piece of course people will get frustrated by the music, but other than that it is fun to know there is something to do in spare time and something to practice and work at.

Instructors tried to harness these negative emotions by teaching them the skills to deal with their feelings in positive ways. When asked about what students learn in the program, one instructor said they learned how to better deal with emotions and "how to put yourself in a different state if you're frustrated, how to calm yourself and think critically."

Returning to the joy felt by students, the instructors also noted that students would often stay after their lessons just to enjoy their time and socialize:

They really enjoy being in the space. Their lesson is half an hour long, but these kids will stay there until the last staff member leaves... They just enjoy being in that space together with each other.



SHS seems to have created a space where students want to be and enjoy being. All involved students expressed emotional well-being and happiness. Even when times get tough, instructors aim to teach students the skills to deal with negative emotions that arise in a healthy way.

### **Building Confidence.**

The ability to learn a new skill provided feelings of confidence in many of the students. When asked about how the program impacted them, one student noted:

I have gained a lot of confidence from playing here. Going up on stage and stuff in front of small crowds is really good for public speaking even though you are not speaking. It is like you are up and in front of people showing them what you have learned. So, it has helped me gain more confidence in myself which is good.

Comfort and a judgement-free atmosphere contributed to these feelings of confidence.

When another student was asked how the program impacted them, they explained, “I feel playing music makes me feel honestly super confident and at this place even if you make a mistake you just laugh and it’s no big deal.”

It was important to students that they felt comfortable to make mistakes or be themselves and feel encouraged instead of judged.

Caregivers have also noted this improvement in confidence in their children.

When asked about what differences they noticed in their children, one caregiver stated “There's more confidence, more self-esteem. They just come in as if it's family.” This caregiver also shared:

Caregiver: They wanted to quit their instrument... They used to cry when they had to perform in school but when they came here (SHS), they just loved it. They just cannot wait to play, cannot wait for us to come watch and the teachers got a lot to do with that, I think. Amazing difference in confidence.

Interviewer: So, what do you think was the main difference between school and

learning it here?

Caregiver: I think it was the teachers, but I think it was that they had more confidence and learned more here so they were not afraid to perform because they knew what they were doing.

This situation shows the positive difference that confidence gained through support and instruction can have on a child. It also reveals the difference that having extra one on one time to really work with a child may have on their confidence and ability. School-based music classes are more limited in time and ability to work individually with a student. As seen in the example above, community-based music programs may provide the extra time or resources to help those who may have struggled in classroom settings.

When asked what students learn at SHS, all of the instructors agreed that self-esteem and confidence was often something they have seen improve. They shared:

Self-esteem and confidence are huge. You see it in their body language and in their approach to their instrument and the experience. A lot of reflection surveys that we see from parents and students have to do with that. A lot of parents are like, "My shy kid would never have done that if it weren't for this experience" and with kids a lot of times it has to do with "I wanted to play a hard piece and I did."

They also shared that they have watched many students come out of their shell and grow:

One student that's learned a lot of confidence, they are very really, really, shy and I think maybe not that comfortable in their body, but you know sitting down learning, learning the posture, learning the language of music and just performing a few times, I think they are now in more of a leadership role in one of the orchestras.

SHS is perceived as a positive place where students enjoy spending time and learning instruments. Many students have expressed happiness and enjoyment with the program, with some expressing frustration with the music practice. The program also encourages feelings of confidence through the comfortable environment, social support, and ability to learn a skill and perform it. The confidence they gain has different sources

such as comfort in the space, confidence from learning to play an instrument, as well as confidence after a performance. The program offers many opportunities to feel and learn.

***Theme 2: Impact on Learning.***

In this instrumental music program, everyone has the opportunity to learn either violin, viola, or cello. Beyond this, participants felt that SHS teaches much more than music. The sub-themes include learning a skill, responsibility, and discipline, and learning about the self and others. Learning these life skills allowed students to feel a sense of accomplishment or competence which many researchers in well-being feel is crucial in achieving wellness (Ryan & Deci, 2001; Seligman, 2011).

**Learning a skill.**

When asked “What kinds of things do you learn at SHS?”, many students were quick to chime in with the many musical lessons they have learned. One student stated, "How to play violin, viola or cello, in my case violin, how to read sheet music, various other music and music-related things." Playing an instrument has given them opportunities to perform, and even make money. One caregiver noted their child busked at the local regatta and made money for themselves. Many caregivers also mentioned the importance of learning music as a skill. It is clear that learning a musical instrument is an opportunity that provides further skills and opportunity. Consider this perspective from one of the instructors who was asked about what students learn at the program:

I think in addition to all the normal things you learn in a music program, they are learning other transferable skills such as problem-solving, it is a big one, and the creativity that comes with problem-solving. Learning how to approach a problem in music or how to deal with other people are things they came across this program. These are things that they can take to future jobs, to school, to dealing with their parents, to really any challenges that they have. I'd like to think that by

teaching them, by not just spoon-feeding all the answers, by trying to walk them through the process of how you solve that problem, and then to get them to try to solve it, is really important.

Students at SHS have opportunities to learn musical instruments and many other transferable skills that contributed to their enjoyment of the program as well as other aspects of life.

### **Responsibility and discipline.**

One of the main skills mentioned was learning a sense of responsibility. One student spoke about the responsibility involved in owning an instrument:

Interviewer: What are some kinds of things you can learn here?

Student: I feel like it's not just the music that you can learn, you can learn a bunch of other things, like caring for other people, and understanding, you can learn empathy, passion, dedication, responsibility.

Interviewer: What about the music program do you think makes you feel more responsible or gives you that responsibility?

Student: The thing is when you get an instrument it's something that you might have for the rest of your life and when I got my full-size, my parents were like "DO NOT, do not, do not break this! It cost us a fortune!" I am like, "Okay I won't break it I promise," I came awfully close once, but I tried to make sure that didn't happen again... I think that learning a musical instrument is important to teach you responsibility in a way that sometimes homework can't always do.

Students also shared that they had to become more aware of time management:

I found I learned that you need to be able to, you need to manage your time well so that you can really put stuff together because if we don't, say if people are like fooling around or whatever and we don't get stuff done, then we're not going to have what we planned to have finished for the end of the year.

Caregivers echoed this sentiment, sharing that students would need to discipline themselves in order to learn the instrument and keep up with the group:

I find that they are learning to discipline themselves because they know if you want to perform and you want to sound nice you need to go home and practice and

they're learning that on their own where I don't have to say "Go practice your violin." They are like "I need to go practice and I need to know what I'm doing" especially when you are in a group. You don't want to be the one in the group making all the mistakes.

Being a part of SHS helps to teach youth important lessons in responsibility.

Whether it is the responsibility of taking care of an instrument or learning the instrument and keeping up with the surrounding group, responsibility is an important part of successfully taking part in the program.

### **Learning about one's self and others.**

Taking part in SHS allows students to learn more about themselves and others.

This is especially evident in the discussions with the 12+ club. One student mentioned that during their discussions they learned about understanding yourself better:

With the 12+ group, we have done self-identity things which is really cool and other questions about how you feel that music impacted your personal life and really meaningful questions that help you understand yourself better.

When asked if they notice any changes in their self since joining the program, one student explains they are learning to be more patient with their self and others:

I think I am a lot more patient with people and myself. I play the violin, and you do not always get it the first try you have to keep on trying. But we all know that you will get it, and it does happen, but you just have to be patient with yourself.

Another student mentioned that you learn empathy and social skills:

Interviewer: You mentioned empathy, is there an example you can give of learning empathy here or saw others showing empathy?

Student: Well in the 12+ group, we discussed what's happening with ourselves and that puts us in a place where we just kind of have to understand, try to understand what other people are talking about.

Interviewer: Has this changed how you feel about or interact with other people?

Student: Mhmm, because I used to be kind of just saying everything that I thought

of. Now I kind of think before I speak because I am like “Should I say this, or should I find another way to say this?” I mean sometimes I mess up, we all make mistakes, but I am more thoughtful now.

Interviewer: and you think that has to do with the music program?

Student: Mhmm, it taught me how to socialize.

Caregivers also mentioned that students learn about themselves and others in the program. One caregiver explains they are learning to be part of a group:

They are learning how to be in a group and being able to put up with other people and learn that people learn at different speeds. One song might be hard for you and the next song might be hard for somebody else and you need to be patient and stuff like that.

When asked what students learn at SHS, instructors also carried this sentiment:

Instructor 1: It teaches compassion, be compassionate towards your teachers, your peers, yourself. I think that is one that though people have a hard time with, even these kids are being compassionate with themselves.

Instructor 2: Mhmm

Instructor 3: Yeah there’s a lot of answers to this one, yeah, I guess yeah ownership or accountability is a big one, especially in group settings because half of the program is group or orchestra, orchestral ensembles, so working within that group setting, group dynamics, and the accountability of being a part of that group, and what that means and having to pull your weight for the greater good.

Everyone involved seemed to note that they were learning more about themselves and how to interact with and respect other people through the music program.

### ***Theme 3: Opportunities for Engaging***

Being part of SHS gave the students many opportunities, such as connecting with other people, engaging with their community, and critical thinking. Once again, making social connections and engaging with the wider community are viewed as important in achieving well-being (Lerner, Fisher, & Weinberg, 2000; Seligman, 2011).

### **Connecting with others.**

All of the students shared that they made new friends and connected with peers through the program. When asked about how the program impacted them and how they felt about others, one student mentioned:

Most of the kids that are here that are my age go to my school and I actually didn't know that some of them went to my school till I came here, so I've gotten to know all of them better and which makes me have better relationships with them at school and here. I've made better friendships through this program too because there's three kids that I knew but I didn't really know them, and I found out that they are really nice people.

One student even brought up the importance of programs like this for making new connections:

Interviewer: Do you feel the music program is important?

Student: I think it is one of the most important things that happened to this community.

Interviewer: Why do you feel it is important?

Student: Because it's run by people that have a good head on their shoulders and music is one of the most important parts of anybody's life, and making new friends. If you don't make new friends you could be alone for quite some time, if you never take that step forward then you will just be stuck in one place.

The program also allows students to take on mentor roles and connect with younger kids. One caregiver explained, "They have the mentor program with the kids that started with my daughter. They are now mentoring the younger students and are more actively involved." Other caregivers expressed their child was excited to get to mentor as they get older. One caregiver stated, "My daughter wants to be like the teachers, she's looking at this like she can help volunteer as she's older and stuff." The instructors also see the social place they have helped create for students to be part of a group and belong:

For those kids who might get kind of drowned out at school where there are so many kids and might be looking for kind of this sense of being part of a group. I think here in Strong Harbour everyone is part of this group and there is no barrier.

SHS is a social program and these social elements provide youth with the ability to connect with other peers, mentors, and even the wider community. Connecting with others and belonging as well as reaching out to the community are all connected to positive mental health well-being (Seligman, 2011; Weare, 2017).

### **Engaging with community.**

There were many mentions of the opportunity to engage with the community through volunteering and performance. One student mentioned the value of growing the community:

Interviewer: Do you think that the music program is important to other people such as the other students?

Student: I think it should be just as important to me as it is to them, even if some of the younger people do not understand how important it is yet, they will when they get older.

Interviewer: Yeah, did you find that happened for you?

Student: I didn't see the importance in growth and growing community that I do now

Interviewer: and what do you mean by growing the community?

Student: Growing a community in a way of intelligence and able to reach out a hand to help somebody else

Interviewer: Do you think being a part of this program has improved intelligence in that?

Student: Mhmm, because music is scientifically proven to help with focus and other things like responsibility and intelligence overall.



Another student mentioned that the money raised from performing can be used to help others:

It helps our environment and people who need stuff. If you do this stuff, then when you get money for doing it you can help poor people who are lonely and that... You can help them and give them money.

Caregivers also noted the opportunities to connect with their community:

They are now mentoring younger students and are more actively involved. They are getting their opinion on things. We are going to talk about how music affects the community, like, when it was used for a protest during, like, especially for the civil rights movements. How important music was for organizing things and putting a message out there and doing good not just for the children in a musical group or something but in the community at large.

Caregivers have also noted that the program helps connect students with their communities:

Yeah, it is an amazing program. All the teachers are very talented and kind and generous with their time and the kids are, really. It's opened up a lot of doors and they have heard a lot of different bands, yeah, they get a lot of people to come in and do presentations and they get out in the community so it's been great!

The opportunities for performance allowed students to connect to and bring the community together.

### **Participating in critical thinking.**

SHS also gives students a chance to think critically and explore relevant topics in social justice. This is mainly achieved through 12+ club. One of the instructors explained:

We meet every Monday for a half hour and often we, what I envision it as is filling the gaps in the public school education which deals with critical thinking, which deals with media literacy, is a big thing, and also you know social justice issues that are prevalent in our community but also in the world at large and how we can try and think globally and act locally.

All students who were old enough to be a part of 12+ Club mentioned their interest in the material covered in these sessions. One student explains some of the things they have learned:

Student: Well there's this group for people that are 12+ and we talk about society and changes in society and how we can make everything better.

Interviewer: What are some of the things that you talked about at the 12+?

Student: Well we're talking about equality and equity...We talked about sometimes a little bit of our history, sometimes about racism and whether some illegal laws that should really be illegal.

Interviewer: That's cool, do you have any examples of how music can impact say equity?

Student: I mean if somebody decides to make up some sort of song or whatever, about some sort of struggle that they went through people could kind of understand that and work with them. You could just turn that one song into something that everybody else wants to be part of.

Another student explained what was discussed during the group, "We talked about how we all have rights and what they are even though we're only young and the instructor was asking 'Do we think that playing music should be a right or is it like a privilege?'"

SHS is providing students with opportunities to engage and connect with others, engage, and connect with community, and engage in critical thinking. Engaging and connecting with others allows students to build friendships, feel a sense of connection, and help improve and teach social skills. They are also given chances to perform and connect with those in the community around them through volunteering and performance. The critical thinking and social justice aspects of the conversations that happen at SHS help build critical thinkers who are pondering large questions about social justice, such as ideas of equity versus equality and human rights.

## **Environment of the Music Program**

The environment was commonly seen as an accessible and accepting space that allowed for positive opportunities and experiences for the students. The instructors, their influence, and their connection with the students was also a large part of what led to the perceived positive impact of the music program.

### ***Theme 4: Importance of Accessibility***

Accessibility was mentioned by students, caregivers, and instructors. The program is free of cost and takes place after school in a location near the school (site 1) or directly in school (site 2). The reactions surrounding the accessibility from students and caregivers were positive and seemed to contribute to their positive opinions of the program. When asked why they thought the program was important, one student exclaimed, “Because people just if they want to learn music, they can just do it here and not have to pay for it!” Another student felt the free lessons did not impact the quality of the lessons:

It is really, really nice to have the option to play your instrument for free instead of having to pay because lessons are very expensive and then your parents can put the money towards other activities for other siblings... I feel a lot is the same as what I do for other lessons, so it is not downgraded or anything, it is just as good as having paid lessons.

One caregiver noted the importance of a free program and that not everyone can afford lessons. They emphasized that this experience can really change a child's life:

Interviewer: Do you think that the music program is important for other children as well?

Caregiver: Yes, I'd highly recommend it, and if they were ever wanting to get this program spread through other schools I would highly recommend it, and I know if other parents were given the opportunity, especially if their child's not interested

in sports and you'll have to be in school, it's fabulous. My kids are very active in all kinds of programs, and to have a very low cost, basically no-cost program, it's unheard of.

Interviewer: Yes, lessons can be expensive

Caregiver: Yeah, well it is, and so to have an opportunity like that and it's high, hundreds, hundreds of dollars on things like dance and music and sports and skating lessons and I mean she liked them all, but it's still big out of the pocket... In a community like this, not everyone is working. So not everyone, I know even with (child's) friends, some of them are not involved in anything other than this. Because it is offered through school so they would not have the opportunity (daughter) has just because of their social status at home. I mean what if they have these great skills? But they do not have the financial background and then they offer this, it can really change someone's life, a child's life.

Accessibility is a facilitator for youth and their families as it allows them to join the program regardless of socioeconomic status. It is also conveniently located so that students can find their way to the program without an adult. The accessibility is one of the things the instructors really enjoyed about the program. When asked what they liked about the program, one instructor responded, "I mean, accessibility, that anybody's welcome to join regardless of their socioeconomic background." They also mentioned that despite the accessibility present, they would like to work harder to reach out to those who might not currently be reached:

Getting kids who have the support, to get transportation to the centers, whether it's recruitment of you know, kids who might not have great language skills or form foreign language students, ah, you know people with accessibility issues. All those things would be amazing to be able to develop the program so it can be inclusive of all those people.

It was clear from the focus group that the instructors are doing what they can to ensure the program is as inclusive as possible within their means and students and caregivers are noticing and appreciating this. The accessibility of the program is

important because it is what allows some of these students the opportunity to be a part of the program and to learn a musical instrument.

***Theme 5: Accepting and Positive Space***

Another concept that the children frequently mentioned was that the program was accepting, non-judgemental, and safe. These positive aspects were important to students and helped them to feel comfortable and confident in the space. One student expressed that the program does not discriminate:

Interviewer: Anything else you would like to say about the experience?

Student: Well just overall it's really good here and welcoming and friendly and it is really important to say that I'm never unhappy when I'm here. A lot of groups can have discriminating things that most people don't see, but this program has all acceptance, so it is all good!

Even caregivers noticed that acceptance was a big part of the program:

Interviewer: Do they (your children) learn anything about themselves that you have seen?

Caregiver: I feel that there's a lot of diversity in the program, so I feel as though there are many differences within the kids. I feel acceptance is a big thing that is not pushed but shown and valued here, so I think that's taught.

Instructors encourage acceptance by allowing children to be themselves in an environment that is free of judgement:

You have all sorts of eccentric personalities and nobody is forced to blend in. They're allowed to keep their eccentricities, if that's a word, and they're allowed to, we have somehow created this safe space right where people are just accepting of each other the way they are they don't have to, to fit in, which I think is really special.

This message of acceptance and lack of judgement helped create a safe space for students:

Interviewer: What are some things that you enjoy about the program?

Student: I enjoy knowing it is like a safe place where you can go and not be judged for different mistakes and it is all just open.

Interviewer: Can you explain why you called it a safe space?

Student: I guess it's more of a safe space because when we come here it's not judgemental and we always know we can rely on others and trust our teachers.

Caregivers also appreciated the accepting and non-judgemental space. One caregiver noted it is a positive space to keep their child away from more negative environments:

There is that social connection to it, and for me speaking as a parent it keeps her occupied and busy, it keeps her involved in a group where positive things are happening. Whereas I feel if she was not in this program, she'd be bored, she'd be spending a lot more time on technology ... it's just a lot of it's such a waste of time and some of it is very negative and they might want to minimize that as much as possible.

Many perceived that SHS had created a safe and positive place for youth to spend time, interact, and learn. The comfort provided by this environment helped allow for other positive outcomes such as positive feelings, and confidence which we will explore later. A big part of this welcoming space was also due to the instructors.

### ***Theme 6: Instructor Influence***

The instructors had a tremendous impact on the environment and thus the outcomes of the music program. All of the students and many caregivers expressed appreciation and trust toward the instructors. One student expressed, "I feel like I can easily go up to any of the teachers and tell them that 'I'm uncomfortable with this or I need to improve on this,' and they will help me with it." When asked what they thought about others in the program, one student said:

The instructors are all very nice and very encouraging and it's nice to know that there is someone there who we can talk to about music and not just about that, but about other problems and stuff like that when we might need some help.

Caregivers also noted that the instructors helped create a positive atmosphere and noted that instructors become people the students look up to:

The teachers are amazing, amazing! They work really well with the kids. The kids are on all different levels, like they know how to put all of them together and be able to entertain all of them at once, which is hard to do. My kid loves the teachers. Every occasion she gives them gifts, it's always gifts, and where a lot of her stuff is done on social media, she has her instructors on social media, so she sees their updates and stuff, she's like "Oh mom look! My teacher is going on tour" and she loves it, she feels almost proud, she knows who this musician is and she's so excited to tell everyone about it.

It was clear throughout the focus group that the appreciation and care go both ways. The instructors were dedicated to making students comfortable and welcome. They expressed they would put aside music lessons to speak to a student if they were having a bad day:

I'm never disappointed when a student comes in and of course, I feel for them, because there's slumped over and you know they have obviously had a rough day, so that special moment when they're like, "well this is what's going on at school, this is what is going on in my life" and you can take that ten, fifteen minutes, just to listen, give advice.

The instructors spoke about how the aim of the program was to build relationships and teach the whole person, not simply the music:

Ultimately the thing that I think is really special about SHS is the fact that it is so personal, it's driven by the relationship and it's driven by the want to see these youth succeed and whatever that means for that individual person and how we've created this culture of teaching the whole person not just teaching the music.

The instructor's ability to create trusting relationships with students helps create a safe and accepting space that leads to positive emotions and outcomes the students expressed.

The instructors recognized that they are role models and do their best to set good examples for their students and treat them with respect.

## **Discussion**

This study revealed positive perceptions regarding the impact of a community-based music program on youth well-being. One definition of well-being states it is a positive state of mind and body that includes feeling safe, the ability to cope, and a sense of connection with people, communities, and the wider environment (Department of health, 2009). Each of these was present in the perceptions of the impact of this community-based music program. The environment and influential instructors helped create a space where the youth felt safe and experienced many positive feelings, skills, and opportunities to connect with others and the wider community.

Many of the themes that emerged in this study and benefits perceived by participants align with theories and features that are crucial to positive youth development and well-being (Lerner, Fisher, & Weinberg, 2000; National Research Council, 2002; Seligman, 2011). The National Research Council identified important features of programs that are important for positive social and personal development in youth such as safety, opportunities to form supportive adult and peer relationships, and the ability to develop a sense of belonging (National Research Council, 2002). All of these features are present in SHS and can be seen in the themes and perceptions of those involved. Many of the students considered the program a “safe space” where they could feel comfortable and receive emotional and moral support. Many students also felt close relationships with instructors and mentioned connecting and making friends with peers. Seligman, (2011) a



prevalent researcher in well-being, considers positive emotions, engagement, relationships, meaning and accomplishment as the building blocks for flourishing and well-being (PERMA) (Dodge, Daly, Lalage & Sanders, 2012; Seligman, 2011). Each of these is also prevalent in the themes above. Students displayed positive emotions toward being part of the program and made friends and had opportunities to engage with music and their community. They also showed a sense of achievement through learning, playing, and performing instruments.

Lerner and colleagues (2000) developed a positive youth development framework known as the Five Cs model that explores fundamental domains in youth development (Barrett & Bond, 2015). These include competence, confidence, connection, character, and caring. Success in these domains leads to contribution to the environment, community, and society (Lerner, Fisher, & Weinberg, 2000; Ramey & Rose-Krasnor, 2012). Characteristics of all of these domains are also evident in the themes in this study. The students showed competence through learning a skill and working on social competence through their interaction with others in their social space. Furthermore, there is also evidence of contribution to the environment, community, and society. This suggests that the music program has successfully contributed to each of the five domains. Examples of this can be seen in the “engaging” theme between engaging with others, caring about the community around them, and exploring social justice ideas in the 12+ group. Many of the feelings and experiences students, caregivers, and instructors at SHS perceived the youth experienced can be seen in these theories of positive development and well-being in youth. Given this information, SHS is perceived as positively impacting the well-being of the youth involved.

A systematic review examining after school programs in urban environments viewed accessibility as one of the main barriers to youth engagement (Pelcher & Rajan, 2016). In this study, accessibility was also seen as valuable to everyone involved. Furthermore, Cross and colleagues (2010) conducted a study examining the quality and positive experiences in after school programs and found that staff quality may be the most important factor in program success. This was an important theme in our study, as many students and caregivers stated that the instructors were one of the key things about the program that they felt led to perceived benefits. The instructors shared that they value the students' opinions and treat them as equals. They aim to ensure their voices are heard, which is not always possible in classroom settings (Barrett & Smigiel, 2007). This is due to limited timing and the structure of classroom music, which usually has one instructor assigned to all students. The influential and caring group of instructors were a large part of what makes the SHS program successful and enjoyable to students and everyone involved. Students, caregivers, and instructors all expressed positive feelings and benefits that were part of the program, but these were not due to the music program alone. Learning music in a safe and positive environment under the direction of caring instructors contributed significantly to these positive outcomes.

The values of the SHS program aligned with Higgins (2012) values of community musicians. These values include everyone having the right to create and enjoy their own music, that music opportunities should be accessible within the community, social and personal growth are as important as musical growth, work should be completed in a way to show respect for culture and community, and that music can be used to help foster acceptance and understanding. The themes and quotes from instructors and those

involved in the program illustrate these values and their impact on youth within the program. The students also showed value and respect for music accessibility, community growth, and acceptance of others. Higgins (2012) expresses that community music holds these values and attitudes and thus they can be passed on between a music leader and their participants, which can be seen in this study.

One of the unique advantages of this program was the 12+ group that allowed students to think critically and talk about relevant social justice issues happening in the world. The students who participated in this group stated it was something they really enjoyed about the program and that they felt as if they learned things they were not learning in school. They learned about gender, race, equity, equality, respecting other people, and making positive differences to their community and others around them. These are all topics that are crucially important for young people to learn. It would be interesting to see how implementing a similar group in other extracurricular programs.

### **Strengths and Limitations**

There were many strengths in this study, including the inclusion of students, caregivers, and instructors, to create a greater depth of knowledge and understanding of the experience from a community-based music program. Much of the literature on community-based music programs focus on just one of these groups, but do not consider all three perspectives (Devroop 2012; Dakon & Cloete 2018; Ilari et al., 2019; Osborne et al., 2016; Rickard, Bambrick, & Gill 2012). Having the perspectives of three different roles within the program helped allow for a richer understanding of the experience SHS provides from all angles. Furthermore, the different narratives complimented one another, strengthening the themes. Another advantage of this study was using current youth

participants in the research. Youth are often under-represented in research, so including young people in community-based research enhances the quality and increases youth empowerment, allowing their voices to be heard (Jacquez, Vaughn, & Wagner, 2013).

This study was not without its limitations, one of the limitations is the lack of depth in the demographic area. Because questions about gender and ethnicity were not asked in the interview or on the consent form, they were omitted from the demographic information presented in the study. Another potential limitation is that all participants were current members or caregivers of SHS. Alumni or those who have left the program might offer different experiences and perceptions than those who were still involved. This would also give an opportunity to explore the challenges encountered for members who decided not to continue. In addition, more participation from the newer location could have further broadened the scope of the findings.

## **Conclusion**

Students, caregivers, and instructors involved in SHS perceived a positive impact on the well-being of the youth involved in the program. The program's structure and environment contributed to their positive feelings and experiences, and those involved were able to gain skills and characteristics associated with well-being. The students felt comfortable and demonstrated improved traits such as confidence and social well-being. Furthermore, the 12+ program offered a unique opportunity to learn about critical thinking, social justice, and community building. This research on a community-based community program adds to the arts and health literature and may be used to help structure other arts and community-based music programs.

## References

- Alemán, X., Duryea, S., Guerra, N. G., McEwan, P. J., Muñoz, R., Stampini, M., & Williamson, A. A. (2017). The effects of musical training on child development: A randomized trial of el sistema in venezuela. *Prevention Science, 18*(7), 865-878. doi:10.1007/s11121-016-0727-3
- Barrett, M. S., & Bond, N. (2015). Connecting through music: The contribution of a music programme to fostering positive youth development. *Research Studies in Music Education, 37*(1), 37-54. doi:10.1177/1321103X14560320
- Bradburn, N., & Noll, C. (1969). *The structure of psychological well-being*. Aldine Pub. Co.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101.
- Burnard, P., & Dragovic, T. (2015). Collaborative creativity in instrumental group music learning as a site for enhancing pupil wellbeing. *Cambridge Journal of Education, 45*(3), 371-392. doi:10.1080/0305764X.2014.934204
- Carod-Artal, F.J. (2017). Social determinants of mental health. In Bährer-Kohler, S and Carod-Artal F.J., *Global Mental Health Prevention and Promotion* (pp. 33-46). Switzerland: Springer.
- Commission on the Social Determinants of Health (2008). *Closing the Gap in a Generation: Health Equity Through Action on the Social Determinants of Health. Final Report of the Commission on Social Determinants of Health*. Geneva: World Health Organization.

- Community Musicworks, 2020. Retrieved from <http://communitymusicworks.org/>
- Creswell, J.W. (1994) *Qualitative and Quantitative Methods*. Newbury Park, Sage.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry & research design: Choosing among five approaches*.
- Cross, A., Gottfredson, D., Wilson, D., Rorie, M., & Connell, N. (2010). Implementation quality and positive experiences in after-school programs. *American Journal of Community Psychology, 45*(3-4), 370–380. <https://doi.org/10.1007/s10464-010-9295-z>
- Culp, M. (2016). Improving self-esteem in general music. *General Music Today, 29*(3), 19–24. <https://doi.org/10.1177/1048371315619962>
- Dahlberg, K., Drew, N., Nystrom, M. (2008) *Reflective lifeworld research*. (2), Studentlitteratur, Sweden.
- Dakon, J. M., & Cloete, E. (2018). The violet experience: Social interaction through eclectic music learning practices. *British Journal of Music Education, 35*(1), 57-72. doi:10.1017/S0265051717000122
- De Neve, J.-E., Diener, E., Tay, L., & Xuereb, C. (2013) The objective benefits of subjective well-being. In Helliwell, J., Layard, R., & Sachs, J., eds. *World Happiness Report 2013*. New York: UN Sustainable Development Solutions Network.
- Dodge, R., Daly, A., Huyton, J., & Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing, 2*(3), 222-235.
- Department of Health. (2009). *New horizons: A shared vision for mental health*. London: HMSO.

- Eder, D. & Fingerson, L. (2002) Interviewing Children and Adolescents in Gubrium, J.K. & Holstein, J.A., Handbook of Interview Research. London: Sage.
- Government of Newfoundland and Labrador (2015) Healthy People, Healthy Families, Healthy Communities: A Primary Health Care Framework for Newfoundland and Labrador 2015-2025. Retrieved from [https://www.health.gov.nl.ca/health/publications/PHC\\_Framework\\_update\\_Nov26.pdf](https://www.health.gov.nl.ca/health/publications/PHC_Framework_update_Nov26.pdf)
- Hallam, S. (2010). The power of music: Its impact on the intellectual, social and personal development of children and young people. *International Journal of Music Education*, 28(3), 269-289. doi:10.1177/0255761410370658
- Higgins, L. (2012). Community Music. New York: Oxford University Press.
- Hanna, G., Rollins, J., & Lewis, L. (2017). Arts in medicine literature review. Seattle, WA: Grantmakers in the Arts.
- Lerner, R. M., Fisher, C. B., & Weinberg, R. A. (2000). Toward a science for the people: Promoting civil society through the application of developmental science. *Child Development*, 71(1), 11–20.
- Lincoln, Y. S., Lynham, S. A., & Guba, E. G. (2011). Paradigmatic controversies, contradictions, and emerging confluences, revisited. In N. K. Denzin & Y. S. Lincoln (Eds.), *The SAGE handbook of qualitative research* (4th ed., Chapter 6). Thousand Oaks, CA: Sage Publications.
- National Research Council and Institute of Medicine (2002). Committee on community-level programs for youth., Community programs to promote youth development. Washington, DC: National Academy Press.

- Pelcher, A., & Rajan, S. (2016). After-school program implementation in urban environments: increasing engagement among adolescent youth. *Journal of School Health, 86*(8), 585-594.
- Ramey, H. L., & Rose-Krasnor, L. (2012). Contexts of structured youth activities and positive youth development. *Child Development Perspectives, 6*(1), 85–91.
- Reiners, G. (2012). Understanding the Differences between Husserl’s (Descriptive) and Heidegger’s (Interpretive) Phenomenological Research. *Journal of Nursing & Care, 1*. 10.4172/2167-1168.1000119.
- Ryan, R., & Deci, E. (2001). On happiness and human potentials: A review of the research on hedonic and eudaimonic well-being. *Annual Review of Psychology, 52*, 141-166.
- Schwarz, N., Diener, E., Kahneman, D., & Project Muse. (1999). *Well-being : The foundations of hedonic psychology* (Book collections on Project MUSE). New York: Russell Sage Foundation.
- Seligman, M. E. P. (2011). *Flourish – A new understanding of happiness and well-being – and how to achieve them*. London: Nicholas Brealey Publishing.
- Sheltzer, J. M., & Consoli, A. J. (2019). Understanding the impact of an after-school music program with engaged underserved youth. *Journal of Community Psychology, 47*(6), 1364-1379. doi:10.1002/jcop.22193
- Smith, J. A., & Osborn, M. (2004). Interpretative phenomenological analysis. In G. M. Breakwell (Ed.), *Doing social psychology research* (p. 229–254). British Psychological Society; Blackwell Publishing.



- Strong Harbour Strings (n.d). Strong Harbour Strings Strengthening Communities Through Music. Retrieved from <https://strongharbourstrings.com/>
- Sunderland, N., Lewandowski, N., Bendrups, D., & Bartleet, B. (2018). *Music, health and wellbeing : Exploring music for health equity and social justice*.
- Thaut, M. H. (2005). The future of music in therapy and medicine. *Annals of the New York Academy of Sciences*, 1060(1), 303-308. doi:10.1196/annals.1360.023
- Underwood, L., Washington, A., & Underwood, L. (2016). Mental Illness and Juvenile Offenders. *International Journal of Environmental Research and Public Health*, 13(2), 228–228. <https://doi.org/10.3390/ijerph13020228>
- Vaughn, L., Wagner, E., & Jacquez, F. (2013). A review of community-based participatory research in child health. *MCN, the American Journal of Maternal Child Nursing*, 38(1), 48-53.
- Weare, K. (2017). Promoting social and emotional wellbeing and responding to mental health problems in schools. In Bährer-Kohler, S and Carod-Artal F.J., *Global Mental Health Prevention and Promotion* (pp. 33-46). Switzerland: Springer.
- World Health Organization (1986). *Ottawa Charter for Health Promotion, 1986*. Retrieved from <http://www.who.int/healthpromotion/conferences/previous/ottawa/en/>
- World Health Organization (2001). [Review of *The World Health Report 2001; Mental health: New Understanding, New Hope*. (Books & Electronic Media)]. *Bulletin of the World Health Organization*, 79(11), 1085–1085. <https://doi.org/10.1590/S0042-96862001001100014>

World Health Organization (2018). <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>

World Health Organization (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review (2019).

## **Chapter Four: Summary**

### **Overview of Chapter**

In this final chapter, I will discuss the background of the studies conducted in chapters two and three and summarize and compare the findings of the two studies. Chapter two consisted of a systematic review that explored community music programs' impact on social and emotional well-being. Chapter three consisted of a qualitative study that explored perceptions of the impact of a community-based music program. I will end this chapter with the implications of this research and a final reflection of my thesis experience.

### **Background of Studies**

#### **Development of Research Questions and Objectives**

The main question of interest in this thesis was: How do instrumental community-based music programs' impact youth mental health and well-being? To answer this question, I conducted the two complementary studies presented in this thesis. This research question was born from my passion for arts and mental health, and my interest in the arts in health promotion and prevention of negative mental health outcomes. I have always felt connected to the arts, but I never realized the health benefits participating in an arts program could have. After experiencing firsthand the difference that the arts can make in young people's lives and mental health while volunteering at an alternate school, I became curious about what research in this area existed. I quickly recognized there was a need and value for more research in these areas.

My research was made possible by the existence of a functioning but unstudied instrumental community-based music program whose aim was to provide an opportunity and music access to underserved neighbourhoods. Despite the prevalence of adverse mental health and its extreme cost financially and with regarding quality of life, research in mental health is severely underfunded worldwide (Lim, Jacobs, Ohinmaa, Schopflocher, & Dewa, 2008; MQ Landscape Analysis, 2015). The Government of Newfoundland and Labrador (2015) acknowledges this gap and has developed a framework that aims to discover and improve early interventions for mental illness and ensure there are opportunities for optimal childhood development in early learning environments. After learning more about Strong Harbour Strings (SHS), and their mission to promote wellness and give an opportunity to underserved neighbourhoods, I felt it was the perfect place to conduct this research.

### **General Approach and Methods**

I conducted two studies exploring the impact of community-based music programs on youth well-being. In chapter two, I conducted a systematic review that summarized relevant peer-reviewed studies of instrumental community music programs in youth populations that explored social and emotional well-being outcomes. To my knowledge and through my research, no prior systematic reviews had explored the impact of instrumental community music on well-being outcomes. The emotional and social well-being outcomes included self-esteem, social skills, sense of belongingness, resilience, quality of life, and happiness. These were chosen because of their link to positive development in youth and positive mental health (Weare, 2017). This review was

conducted following the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guidelines (Moher, Liberati, Tetzlaff, Altman, & PRISMA., 2009). I also created a search strategy with the help of a librarian and searched 13 databases in total. Results from the systematic review helped inform the qualitative study in chapter three by allowing me to look in-depth at existing quantitative and qualitative studies involving community music programs while also examining their methods and quality. Using CASP tools to examine quality allowed me to understand important elements of qualitative studies that others often left out. The review was also incredibly helpful in designing a unique study for the local population and music program.

The qualitative study (chapter three) explored the perspectives of students, caregivers, and instructors on how a community-based music program impacts youth well-being. This study followed a constructivist view as defined by Lincoln, Lynham and Guba (2011) and the procedures for interpretative phenomenological analysis (IPA) as described by Smith and Osborn (2004). The aim of IPA is to explore and share participants' understanding and experience of a phenomenon (Smith & Osborn, 2004). I chose to conduct a qualitative study following the IPA design because it is an appropriate way to explore and understand a social phenomenon (Angen, 2000). These processes are described in more depth in Chapter one. There is also a lack of first-person accounts when it comes to youth populations and I was interested in hearing their voices and exploring their experience with the music program (Solli & Rolvsjord, 2015). This was further supported during my time as a research assistant with the SHS population. The students were involved in a quantitative survey study, but they did not want to quietly fill out the Likert scale. Their eyes would brighten, and I could see their excitement as they tried to

explain their answers and share their experiences with me. Knowing that this would not be captured in a survey study, I felt an interpretative qualitative study that would allow them to tell their stories and experience was the best fit.

## **Summary of Findings**

### **General Findings**

The systematic review (chapter two) showed some promise for the impact of instrumental community music programs on social and emotional well-being in youth. All qualitative studies included in the study contained narratives supporting community music programs' positive impact on social and emotional well-being outcomes. The quantitative studies which looked at this issue also showed a positive effect on emotional well-being. However, the quantitative studies that explored social well-being and self-esteem showed mixed and inconsistent results. Although the community music program often increased self-esteem and social well-being scores, the results were often not statistically significant. Part of this reason could be the use of quantitative measures in exploring well-being in the arts. Leavy (2017) argues that qualitative methods are much better suited to address these kinds of topics. There was also a lack of well-designed, good quality quantitative study in this area. Although the review support community music's impact on youth well-being, there are a limited number of studies and few of good quality. Thus, these results must be taken with caution, and more rigorous studies are needed in this area to make a more definite conclusion.

The qualitative study (chapter three) revealed that students, instructors, and caregivers view a community-based music program as beneficial for youth well-being. The themes themselves fall into two broad categories, impact of the music program and

environment of the music program. The themes themselves were as follows: (1) impact on feeling, (2) impact on learning, (3) opportunities for engagement, (4) importance of accessibility, (5) accepting and positive space, and (6) instructor influence. The theme impact on feeling included sub-themes experiencing emotions and building confidence. Participants perceived the music program had a positive effect on emotions, enjoyment as well as their confidence and self-esteem. Impact on learning explores what youth have learned in the music program. Sub-themes include learning a skill, responsibility, and discipline, and learning about oneself and others. Opportunities for engagement refers to sub-themes connecting with others, engaging with community, and participating in critical thinking. The music program offered social opportunities and students built connections and felt connected to others within the program as well as their community. The program's 12+ club and insightful instructors also provided students with many opportunities for critical thinking. Students, caregivers, and instructors brought these opportunities up, and they were seen as something that students really enjoyed about the program.

These themes relate to positive well-being and to traits such as “pro-sociability,” “connectedness,” “life skills,” and “happiness” which are regarded as essential for youth to face life's challenges (Weare, 2017). Social skills, self-confidence, and competence are considered to be at the center of emotional and social well-being (Weare, 2017). The themes found in chapter three consistently align with literature in positive youth development and well-being theories (Lerner, Fisher, & Weinberg, 2000; National Research Council, 2002; Seligman, 2011). They also further support the positive impact of community music programs (Higgins, 2012).

It was clear from the transcripts of the qualitative study that the music program's structure and environment contributed to the perceived impacts and benefits. Themes included the importance of accessibility, positive and accepting space, and instructor influence. Participants shared their admiration for the program's accessibility and its aim to provide music education to underserved areas. The positive and accepting space resulted in positive feelings and comfort, which allowed for other outcomes such as positive emotions and confidence to flourish. Lastly, the influential and caring instructors were a large part of what makes the program successful and enjoyable to students and everyone involved. Students, caregivers, and instructors all expressed positive feelings and benefits that were part of the program, but these were not due to the music program alone. Learning music in a safe and positive environment under the direction of caring instructors contributed significantly to these positive outcomes. The results from this study contribute to the field of research in arts and health as well as in community organizations for health promotion.

### **Detailed Findings**

This section explores the findings more in-depth and observes the similarities and differences that exist in the two studies.

#### ***Impact on Emotion***

The impact of community music programs on youth's emotion and emotional well-being was an important element in both chapters two and three. Emotional well-being includes positive feelings and general happiness (Osborne, McPherson, Faulkner, Davidson & Barrett 2016). These subjective feelings are important in health and well-



being and can contribute to psychological and physical wellness (De Neve, Diener, Tay, & Xuereb, 2013; Seligman, 2011; Weare, 2017). In Seligman's (2011) PERMA model of well-being, the "P" refers to positive emotions. Two of the quantitative studies, analyzed in chapter two, looked at feelings and emotional wellness (Cheung, Li, Ho, Ho, Lam, & Chung, 2019; Devroop, 2012). In Devroop's study (2012), participation was significantly and positively correlated with self-esteem, optimism, happiness, and perseverance. Similarly, in Cheung and colleagues' (2019) study, the music group revealed positive differences in quality of life and happiness compared to the control group who were not in a music program.

All of the qualitative studies in chapter two touched on aspects of feelings of wellness and well-being and demonstrated that community music positively impacts emotional wellness. Auerbach & Delport (2018) stated that the children felt their sense of well-being was improved and they felt "good, joyful, and happy" during music activities (Auerbach & Delport, 2018, p. 6). These results were similar to the positive responses from students in chapter three (qualitative study) which were evident in the "impact on feeling" theme. When asked about their music program experience, all students had positive things to say about their enjoyment of the music program. They mentioned positive feelings regarding playing the instrument, performing, being part of the program and surrounding other opportunities the music program provided. One student in the study noted:

I'm never upset or displeased when I come here, if I had a rough day at school or something and I know I have this after school it's nice to come here and just relax and play some music with a bunch of kids stuff, so it obviously positively impacts my personal life and also I just really enjoy it.

There was a consensus amongst both studies that community music programs positively impact subjective well-being, such as general feelings of happiness, enjoyment.

Overall, there is a sense that student involved in the music programs enjoy being there and being part of the program. In chapter two, many of the studies mention children feeling positive about being part of the program. An example of this can be seen in Dakon and Cloete's (2018) study when a student notes, "people always say after concerts how good it was, so I'm happy to be part of Violet because everybody is so proud of us" (Dakon & Cloete, 2018, p. 66).

In chapter three, even the instructors have noticed how students enjoy being part of the program. One instructor stated, "They really enjoy being in the space... Their lesson is half an hour long, but these kids will stay there until the last staff member leaves... They just enjoy being in that space together with each other." Part of this can also be attributed to the social aspect of the program. In chapter two, Burnard & Dragovic (2015) explain that togetherness, co-creation, belongingness, and relatedness that occur in the music program also contribute to well-being. It is also clear the social aspects contribute to happiness and well-being in chapter three.

### ***Enjoyment of Performance***

Beyond generally feeling good in the program, the aspect of enjoying performance showed up in both chapter two and chapter three. Barrett and Bond (2015) shared a quote from one student stating, "I get really excited when performing. Just really happy that you've done something to show people something different" (p. 44). Another stated "I love performing in front of others. It feels really good because you know that you've done

something that you wouldn't think you would do" (Barrett & Bond, 2015, p. 44). Students shared their love of performing and sharing music with others in the love of performance theme in Barrett & Smigiel's study (2007).

Similarly, in chapter three, students mentioned their love of performing. One of the students shared, "I feel really good because I'm happy because we get to play songs for concerts sometimes and it's really fun!" These reactions also reveal that youth are also building competence as they learn to play and perform an instrument. Sheldon and Kasser (1995) argue that satisfaction of competence and autonomy are crucial in emotional well-being. This is supported by Self-Determination Theory which suggests that in humans, autonomy, competence, and relatedness are essential to personal growth, integrity, and well-being (Deci & Ryan, 1991). Therefore, interventions or factors that can improve autonomy, competence, or relatedness are said to enhance well-being (Deci & Ryan, 1991). Community music programs have an instrumental element which involves learning an instrument and opportunities to perform (Veblen, 2007). This allows for not only subjective well-being but a sense of competence and control as well. MacDonald, Kreutz, & Mitchell (2012) mention that music can be distracting and take people away from distressing, painful, or emotional events. They mention this can be possibly done by promoting the experience of 'flow' (Csíkszentmihályi 1996) and that this can also provide health benefits and positive well-being. This also relates to the autonomy and competence experienced while successfully playing a musical instrument.

### *Self-Esteem and Confidence*

Self-Esteem and confidence were also incredibly prevalent in both of the studies. Reis and colleagues (2000) note extensive literature suggests emotional well-being is reliably related to certain traits such as self-esteem (Myers & Diener, 1995). Self-confidence and competence are also considered to be at the center of emotional and social well-being (Weare, 2017). In chapter two, the three quantitative studies and two quantitative portions of mixed methods studies revealed inconsistent results when it comes to the impact of community music programs on self-esteem. Only three of five quantitative studies showed a significant positive impact on self-esteem (Devroop, 2012; Osborne et al., 2016; Shin 2011). However, all qualitative studies that touched on self-esteem in chapter two and my qualitative study in chapter three revealed that students felt community music programs positively influenced confidence and self-esteem. In chapter two, confidence comes up as a theme in Barrett and Bond's (2015) study. One of the teacher's comments that the program is "a huge self-esteem builder" (Barrett & Bond, 2015, p. 45). Similarly, when asked what students learned in my study an instructor shares, "self-esteem and confidence are huge." They continued,

You see it in their body language and in their approach to their instrument and the experience. A lot of reflection surveys that we see from parents and students have to do with that. A lot of parents are like, "my shy kid would never have done that if it wasn't for this experience" and with kids a lot of times it has to do with "I wanted to play a hard piece and I did."

Caregivers also noted that the program was good for self-esteem and confidence. When asked about what differences they noticed in their children, one caregiver explains that their child was going to quit music in school but now at the community program, they love it. When asked what the difference was in learning it at the community

program, they said “I think it was the teachers, but I think it was that (child) had more confidence and learned more here.” In both chapter two and three, self-esteem or confidence seemed to be improved due to a few different factors such as the competence from learning a skill and performing as well as through the social connections being built, support and comfort felt in the environment. Self-esteem and confidence are also a very important part of well-being and positive mental health (Marmot, 2011; Weare, 2017; WHO, 2012). The WHO (2012) identified the risk factors for mental health and well-being and highlighted the importance of individual factors such as self-esteem and confidence in positive mental health. Marmot’s (2011) definition of well-being is a multidimensional construct including life satisfaction, autonomy, control, self-esteem and an absence in depression and loneliness (p. 42). Through the interviews, it is clear that a sense of autonomy, control and self-esteem were felt by youth involved in these programs and being able to learn an instrument was part of that.

### ***Impact on Learning***

Participants involved in a community music program are always learning something new. They are obviously learning how to play and perform a musical instrument, but as one student in chapter three puts it “it’s not just the music that you can learn.” Under the theme impact of learning in chapter three, there are three sub-themes: learning a skill, responsibility, and discipline, and learning about oneself and others. In chapter two, the learning element was not explored as the focus was on social and emotional well-being, however, each of these ideas came up in other themes. There was still mention of the competence and enjoyment that came from learning a skill. In chapter

two, Burnard & Dragovic (2015) Stated that creative instrument music group learning can encourage well-being by empowering participants through support and decision making. They state that well-being can be achieved through the autonomy, agency, and authoring of musical learning. Harkins and colleagues (2019) mentioned that participants described that although it could be challenging to learn and play instruments, playing them was a great source of pride. A similar notion was brought up in chapter three when children shared that they became frustrated at times when learning an instrument, but this was to be expected. Harkins and colleagues (2019) also stated that the musical competence gained from learning an instrument could even make up for feelings of competence in those who struggled academically. Although competence was not a theme in chapter three, feelings of competence were evident in many of the quotes and experiences students, caregivers, and instructors provided. An example of this can be seen above, when a caregiver expressed their child is more confident in his ability since learning to play an instrument properly.

### ***More than Music***

In chapter three, the theme impact on learning had two sub-themes: responsibility and discipline and learning about oneself and others. Both of these sub-themes touched on the music program's ability to help youth learn about other peers and behave respectfully and responsibly. In chapter two, Auerbach and Delport (2018) found that musical practices and active listening helped mindfulness and thus improved social well-being in areas such as social skills, listening skills, teamwork, and communication skills. They found themes to back this such as "increased awareness of the self and others." This is similar to the sub-theme in chapter two, learning about the self and others. In chapter two,

students expressed that the music program helped them think more about themselves and others and even helped teach them to socialize and think before they speak. The instructors also mirrored this finding, One instructor stated the music program “teaches compassion, to be compassionate towards your teachers, your peers, yourself.”

Further evidence of learning about others can be found in Barrett and Bond’s (2015) study summarized in chapter two. The teachers stated that children learn to be part of a team in the music program and that is incredibly important in social wellness. The Principal noted that despite some history with failure, attention and behavioural disorders, and learning difficulties, the program was able to help with these issues through social means. A quote from the principal stated “They’re actually starting to have fun doing pro-social things like cooperating, working as a group, acknowledging the fact that somebody else in the group might need them to slow down for a while, while they learn their bit ... we have got to create this memory of a positive experience” (Barrett & Bond, 2015, p. 46). Students also displayed a willingness to help and support one another, especially when they had difficulty with an instrument. Chapter three also displayed similar findings. In the sub-theme, connecting with others, students reported that they have built connections and are learning to be part of a team. Learning to be a part of a team and connect to others is also an important aspect of well-being. The WHO (2012) considers connection and a sense of belongingness and acceptance as crucial to mental health and well-being. Community-based music programs seem to promote belongingness and positive social experiences in youth.

### *The Social Impact of Community Music Programs*

The social experience of community-based music programs was evident and crucial in both studies. Social experiences are also an essential part of well-being. As mentioned, the social determinants of health are an important factor in mental health, this includes relationships and connection with others (Weare, 2017). The importance of social relationships is also made clear in Seligman's (2011) PERMA model of flourishing and well-being, where the "R" stands for relationships. In chapter three, the social aspects of the program were present in many themes and sub-themes. In the opportunities for engaging theme, two of the sub-themes included connecting with others and engaging with the community. The sub-theme connecting with others revealed that the music program allowed students to build positive relationships and social skills throughout the program. When asked why they felt the music program was important, one student said:

Music is one of the most important parts of anybody's life, and making new friends. If you don't make new friends you could be alone for quite some time, if you never take that step forward then you'll just be stuck in one place.

As evidenced in the previous paragraph, connection and belongingness are identified as crucial factors in mental health (WHO, 2012). There are also a number of examples of students sharing that they learned to socialize and have made many friendships and connections in the music program.

In chapter two, four of the six quantitative studies explored aspects of social well-being as outcomes (Alemán et al., 2017; Ilari et al., 2019; Osborne et al., 2016; Rickard et al. 2012). All four saw increases in social well-being, however, the results were only statistically significant in Ilari and colleagues' (2019) study and one of the two schools in Osborne and colleagues' (2016) study. Rickard and colleagues (2012) noted that while the



evidence suggested that children enjoyed the social aspect of participating in a music program, their study found no significant results. Osborne and colleagues (2016) explored two different schools, school one showed significantly higher scores in all aspects of well-being including social well-being, while school two showed increases but no significant differences. Social well being was also important in the mixed method studies (Shield 2001; Shin 2011). Shields (2001) found an increase in social skills and adjustment, but it was also not statistically significant. Shin (2011) found that social well-being came up in interviews. Teachers revealed they felt that relationships with the students were a very important part of the program (Shin, 2011). Regardless of statistical significance, it would be hard to argue that community music programs in group settings do not positively impact youth.

### ***Forming Connections***

All students in chapter three mentioned the connections they were forming because of the music program. One student noted:

Most of the kids that are here that are my age go to my school and I actually didn't know that some of them went to my school till I came here, so I've gotten to know all of them better and which makes me have better relationships with them at school and here. I've made better friendships through this program too because there's three kids that I knew but I didn't really know them, and I found out that they are really nice people.

Chapter two also revealed that students and teachers alike found that connections were a big part of the music program. Barrett and Bond (2015) conclude that both teachers and students found a “range of social competencies that they believed they had developed through their music activities” (Barrett & Bond, 2015, p. 44). One of the important themes uncovered by the authors was the “connection” formed between students and

instructors in these programs. Similarly, Burnard and Dragovic (2015) also found that participants found social benefits and a sense of belongingness in the percussion group. They mentioned there was a covert togetherness and co-creation that lead to belongingness, relatedness, and competence. They also found that the percussion group felt like a family-like setting. One student wrote in her diary, “Percussion 1 is definitely special to me for a number of reasons. One of the main reasons is that I am around like-minded people, who all love, understand and feel the music in the same way” (Burnard & Dragovic, 2015, p. 386). Similar findings were seen in Dakon and Cloete’s (2018) study which explored a music program called Violet. Some of the outcomes examined include friendships and a sense of family, feelings of security, the Violet mentality, and service. In the “friends and family theme” many of the students involved in Violet have called it a “family” and reference bonding and creating deep relationships with others. In the “sense of security” theme, participants mention feeling secure in the group and that they feel accepted by others. Similar opinions are found throughout the “mutual respect” theme. Members of Violet shared that the respect they learn helps their social interactions by helping them identify and celebrate similarities while respecting differences amongst other members.

### *A Sense of Community*

In Barrett and Smigiel’s (2007) study, one of the emerging themes was “relationships and community.” Youth participating in the music program found that the music program helped create a sense of family, created friendships, and improved social bonds and sense of community. One student stated, “The people in my class and the

people are just really lovely here. They are really willing to help you out with anything” and “Most of the people here know me really well and we all know each other, and we all take care of each other and we look out for each other” (Barrett & Smigiel, 2007, p. 46). Being part of a community music program helped create a sense of community between those involved.

The qualitative study in chapter three had similar findings and quotes. The instructor shared that the program allows students to be part of a community or group. They stated, “for those kids who might get kind of drowned out at school where there are so many kids and might be looking for kind of this sense of being part of a group. I think here everyone is part of this group and there's no barrier.” The sense of community extends beyond those involved in the program. One student mentioned the program showed them the importance of growth and growing community. When asked what they meant by growing a community, they explained: “by way of intelligence and being able to reach out a hand to help somebody else.” One of the caregivers also stated that the program has “opened up a lot of doors and they have heard a lot of different bands, they get a lot of people to come in and do presentations and they get out in the community.” Not only are they creating a community, but they are branching out into the wider community as well.

Once again, these outcomes show that youth are receiving benefits related to well-being and positive youth development. One definition of well-being defines it as a positive state of mind and body that includes feeling safe, the ability to cope, and a sense of connection with people, communities, and the wider environment (Department of health, 2009). Community music programs appear to be one way to achieve this positive

state. Positive youth development theories also state that success in these positive youth development domains leads to contribution to the environment, community, and greater society (Lerner, Fisher, & Weinberg, 2000; Ramey & Rose-Krasnor, 2012). Youth involved in the music programs in both chapters two and three express this connection and contribution to the community.

### ***The Environment of the Music Program***

In chapter two, the environment of the music program was of utmost importance. Three themes that were related to the environment included the importance of accessibility, positive and accepting space, and instructor influence. Although the environment was not something that was focused on in chapter two, the importance of environment and different community music environments were still explored and said to be some of the reasons behind the benefits of the program. This is especially evident in Sheltzer and Consoli's (2019) study where alumni explained that influential characteristics such as the consistency, opportunity, exposure, and support/instruction help provide a favorable impact on personal, relational, and music skills. When exploring the environment or program characteristics, alumni mentioned the program was consistent, allowed for opportunity, and exposure. They state that staff were regularly available and dependable which helped to create a safe space. Locations were accessible and alumni noted that they could walk to the program and go right after school which helped with this accessibility.

When exploring the environment in chapter three, similar findings occurred. Accessibility, the safe and accepting environment, and instructors' influence were seen as

important aspects of the program by students, caregivers, and instructors alike. It is clear that having an accessible and accepting environment is crucially important to students and may impact the benefits they perceive. A systematic review examining after school programs in urban environments found that accessibility was one of the main barriers to youth engagement (Pelcher and Rajan, 2016). When asked why they felt the program enhanced positive feelings, confidence, and other benefits in the program, many of the students referenced the comfortable and safe space or the accepting and non-judgemental instructors. Accessibility, comfort, and safety are all important in well-being and mental health (Department of health, 2009).

### ***Instructor Influence***

Instructors can help define the experience of a community music program for youth. Instructor influence was a theme in chapter three, and all students and caregivers expressed their adoration for the instructors in the music program. One student expressed, "I feel like I can easily go up to any of the teachers and tell them that I'm uncomfortable with this, or I need to improve on this, and they will help me with it." When asked what they thought about others in the program, another mentioned all the instructors are nice and encouraging and that "it's nice to know that there is someone there who we can talk to about music and not just about that, but about other problems and stuff like that when we might need some help." Recall the example referred to above, whereby a student who had resolved to quit cello based upon their experience in a school-based program, flourished in the atmosphere provided by community-based instruction. When asked what the main difference between school and the program was, the caregiver stated, "I think it

was the teachers but I think it was that he had more confidence and he learned more here so he wasn't afraid to perform because he knew what he was doing.”

This sentiment is also evident in a number of studies in chapter two. Barrett & Smigiel’s (2007) study compares the qualities of the teacher-student relationship in the program setting versus those in a school setting. Students share they felt in the music program, the teacher is willing to help them with anything, they feel closer to them compared to school music teachers, and they really felt the effort the teacher put into understanding them at the program (Barrett & Smigiel, 2007). They further express that not only do teachers make an effort to understand you in the music program, but they also try to ensure everyone else understands you, creating a comfortable environment for all.

### *Instructor Values*

One of the things that really stood out while conducting the study in chapter three was the values and passion that the instructors had for the program. It is clear that the instructors had influence but getting the perspective of the instructors helped to reveal why they were so influential. Carole Bestvater, the director and founder of SHS sought out a team of individuals who had similar values and a shared vision to provide access to music and to strengthen communities through music. When asked what they enjoyed about the program, one student shared they enjoyed “knowing it is a safe place where you can go and not be judged for different mistakes.” When asked what they meant by this, they shared “I guess it's a safe space because when we come here it's not judgemental and we always know we can rely on others and trust our teachers.” It is clear that the instructors have done a great job creating a welcoming and judgement-free environment.

During the focus group with the instructors, their passion and care for the program and everyone in it was clear. One instructor shared:

Ultimately the thing that I think is really special about SHS is the fact that it is so personal, it's driven by the relationship and it's driven by the want to see these youth succeed and whatever that means for that individual person and how we've created this culture of, of teaching the whole person not just teaching the music.

SHS instructors all shared this value of teaching the whole individual, not just teaching them music. It is also interesting that in this quote the instructor chose to say they want to see the youth succeed, whatever that may mean for that individual. They understand and treat each student as an individual and recognize that what constitutes success may vary from person to person and day to day. They are also always willing to be there for students when they are going through a rough time. One instructor shared that they are never disappointed when a student wants to talk to them about problems or seek advice. The other instructors shared this sentiment.

### ***Expanding Minds Through Music and the 12+ Club***

One thing that was unique to the group chosen for this study and reported in chapter three was an extracurricular group that took place directly before music lessons called the “12+ club”. This is a group for members of the music program who are 12 and older. One of the instructors shares a description of the club,

We meet every Monday for a half hour and often we, what I envision it as is filling the gaps in the public school education which deals with critical thinking, which deals with media literacy, is a big thing, and also you know social justice issues that are prevalent in our community but also in the world at large and how we can try and think globally and act locally as I say sometimes.

This club was brought up enthusiastically by each student aged 12 and older who was interviewed as well as their parents. One student stated,

Student: Well there is this group for people that are 12+ and we talk about society and changes in society and how we can make everything better.

Interviewer: What are some of the things that you talked about at the 12+?

Student: Well we are talking about equality and equity...We talked about sometimes a little bit of our history, sometimes about racism and whether some illegal laws that should really be illegal.

It was clear from the conversations that students were really retaining the information being learned in 12+ club and were excited to learn and share this information. This is a unique aspect of this particular music program that could potentially be tried in other music or arts groups in which instructors are working with groups of young people. It was captured in the sub-theme, critical thinking, a theme not found in any of the existing studies consulted for this thesis. The students in the qualitative study mentioned how they were learning things that they were not learning in school. Community-based music programs present an opportunity for learning as they are often less structured than typical classrooms. Learning about topics such as equity, equality, racism, and gender can help to create more conscious and accepting members of society.

***Positive Growth: The community-based music ecosystem for youth well-being***

When exploring the themes in the qualitative study (chapter two) I felt they came together as a sort of narrative that could be expressed through the image of an ecosystem (see Figure 4.0). The flower in this image represents the impact of the music program itself: the impact on feelings, impact on learning, and opportunities for engaging that the program provides. However, it is not the music program alone that provides these benefits. Outside sources have helped this music program grow into something as powerful and strong as it is. This is the environment of the music program: the



accessibility, accepting and positive space and instructor influence which have been portrayed in the image as the ground, the sun and the rain, respectively. Accessibility forms the ground in which the flower can take root. There needs to be a place for the flower, or the program to grow. The accepting and positive space takes the form of the sun, another essential part a healthy flower's growth. The accepting and positive environment allowed students to feel comfortable, welcome, and safe in their environment, which also allowed them to flourish. Lastly, the instructor's influence is depicted in the rain cloud, showering the flower, and providing it with the water necessary for survival. I envisioned this as the teachers passing down their knowledge, passion, and compassion to the program's students. What is important to note is that each of these environmental aspects is an important part of what has allowed the flower to flourish. SHS's structure works wonderfully for the community and students in the program, allowing them to flourish, learn and grow in a safe environment.

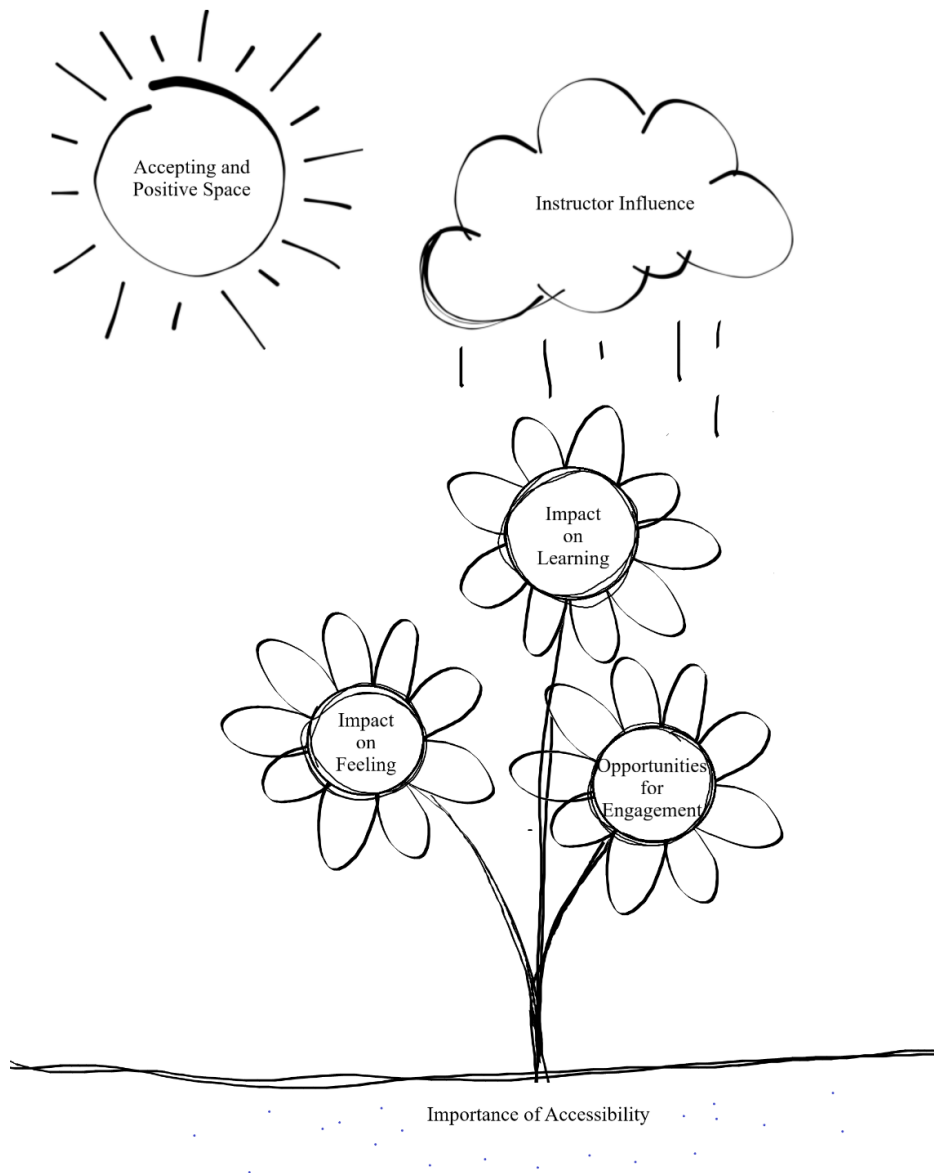


Figure 4.0: Community-Based Music an Ecosystem for Well-Being

***What Do These Findings Mean?***

There are detailed explanations of some of the benefits and experiences found in instrumental community-based music programs in above paragraphs. Based on these findings, the music programs have provided young people with the opportunity to learn

new skills, meet new people, and gain benefits such as improved confidence, sense of connection, and sense of community. Such outcomes are present in definitions and theories of positive youth development, well-being, and positive mental health (Lerner, Fisher, & Weinberg, 2000; National Research Council, 2002; Seligman, 2011; WHO, 2012). Based on these studies, it seems clear that community-based instructional music programs do provide the potential for youth to perceive benefits in well-being that are important to mental and overall health and should be further explored as a means of health promotion in youth.

### **Strengths**

This thesis had many strengths that contribute to the field of arts and health as well as community health promotion. The supervisory committee involved in this study included experienced professionals in diverse fields of academia and qualitative research. Large reviews such as WHO's (2019) scoping review support and recommend further research in arts and health and music for health. There is also a large demand for research in youth mental health and this is prevalent in Canada as well as NL (CAMH, 2012; Government of Newfoundland and Labrador, 2015; NLSupport, 2017).

The systematic review (chapter 2), was conducted following the strict guidelines of preferred reporting items for systematic reviews and meta-analyses (PRISMA) (Moher et al., 2009). It is the first to explore instrumental community music programs' impact on youth well-being. Other reviews have stated that more research is needed to explore instrumental music programs as well as in young populations (Daykin et al., 2013; Sheppard & Broughton, 2020). The limited number of studies in this specific area is evidenced from the 1664 articles that were discovered through the search strategy when

duplicates were removed and the fact that only 15 studies met the inclusion criteria for the review. This review also included both qualitative and quantitative research to include a broad variety of studies and show a more complete picture of the existing research exploring instrumental community music programs in youth.

The qualitative study (chapter three) also had many strengths. It is a new study exploring the impact of instrumental music in youth populations, as mentioned above, research in these areas was considered under-researched and recommended in other reviews (Daykin et al., 2013; Sheppard & Broughton, 2020). One of the main strengths was the inclusion of students, their caregivers, and their instructors, allowing for multiple perspectives. The fact that the perceptions from these different groups all echoed one another added to the strength of the findings. Including youth in this study was also a strength as their voices are often underrepresented in research (Solli & Rolvsjord, 2015). Multiple authors were involved in the coding and theme selection and themes were agreed upon by a committee of five people. To my knowledge, this is also the first study to explore community-based instructional music's impact on youth well-being in Newfoundland and Labrador. This study is also a direct response to province and nation-wide needs for more research regarding health promotion and negative mental health prevention in youth populations (Government of Newfoundland and Labrador, 2015; NLSupport, 2017).

### **Limitations**

These studies were not without limitations. The limited number of quality studies contributed to the limitations present within the systematic review. Only one of the 15

included studies received a score of “good” quality. This shows that much of the existing literature lacks rigorous design or has left out important information in the article.

Another limitation was the many inconsistencies in the interventions which made it difficult to combine and compare them. The community music programs had different structures, lengths, practices, and goals. There were a number of different methods for evaluating outcomes and even differing definitions of the outcome. What constitutes social and emotional well-being varied from study to study and method to method.

Because the review was limited to the English language, it is also unknown if there are other studies with further information published in different languages.

In general, defining terms was complicated throughout this study. As evidenced in the introduction, there are controversies and criticisms regarding many of the terms present in my thesis, including: health, well-being, community music, self-esteem, and more. When starting this project, I was unaware at how complicated it would be to truly define these ever-evolving terms. This multiplicity of meaning and interpretation makes it difficult to synthesize studies in a systematic review. What constitutes as a community music program in one definition may not meet the standards in another.

The qualitative study also had a few limitations. One limitation is the lack of demographic information collected. Because of my background in quantitative research, I was used to including questions regarding demographic information in the survey as opposed to the consent form. Because the interview or focus group did not contain questions regarding gender or ethnicity, comments in these areas could not be included in the study. There were also no alumni or past students’ caregivers or instructors to explore.

Those who are no longer in the music program may have had a different experience or perception of the program.

### **Implications and Recommendations**

This thesis contributes to the literature in community health promotion as well as arts and health, two areas of research I am very passionate about. I hope that the results of this thesis can allow knowledge users and decision makers to further explore community-based participatory arts programs as a means of potentially promoting positive mental health and well-being in youth. A recently published report by WHO (2019) suggested that in areas of prevention and health promotion, the arts are shown to impact social determinants of health as well as support positive child development, encourage health promotion and related behaviours, prevent ill health and support caregiving.

This report also recommended policy considerations, one of which was to “acknowledge the growing evidence for the role of arts in improving health and well-being” (WHO, 2019, p. viii). The report suggests this can be done through supporting the implementation of arts interventions, including “community arts programs for mental health” (WHO, 2019, p. viii). The report also recommends supporting research in the arts and health and exploring how they can promote health, improve health behaviours, and address inequalities. This thesis supports these policies and future research of community-based arts programs as one way to promote mental health and well-being. The report also recommended recognizing the added health value of arts engagement by ensuring diverse art forms are available and accessible to many different groups, especially disadvantaged

groups. I feel my research also supports these implications and recommendations and that further research and support for community arts programs is necessary.

There is a need for more quality research in the arts and health field, particularly regarding community-based instrumental music programs. In my systematic review (chapter 2) only one of 15 studies met the criteria for being a good quality study. Clift (2020) also mentions the quality and need for more critical examination of research in his response to the WHO scoping review. He argues that the report fails to include a solid and critical analysis of the quality of the included literature. An example of this includes citing systematic review but failing to mention whether they follow PRISMA guidelines and showing little evidence of any quality appraisal (Clift, 2020).

Given existing evidence of the connection of arts programs and health, social or arts prescribing should also be further explored. The WHO (2019) suggested “considering the introduction, or strengthening, of lines of referral from health and social care to arts programmes, for example through the use of social prescribing schemes” (p. 56). This refers to arts or social programs being prescribed for potential health benefits. Based on the promise that current arts and health research have shown, social and arts prescribing is worth further exploration, research, and implementation (WHO, 2019). Social prescribing is already gaining attraction in Canada (Alliance for Healthier Communities Canada, 2020; WHO, 2019). A Canadian pilot study including 1,100 clients and 3,300 social prescriptions had three findings important to the arts or community programs impact on health and well-being. The study found that clients reported improved mental health, ability to self-manage health, decreased loneliness, and increased connectedness and belonging. Healthcare providers also felt social prescribing was useful for improving

well-being of clients and decreasing repeated visits. Lastly, social prescribing enhanced community and allowed for co-creation and more integration between clinical care, interprofessional teams, and social support (Alliance for Healthier Communities Canada, 2020).

The Canadian Mental Health Association has considered three determinants of health to be crucial to mental health (CMHA, 2007). These include freedom from discrimination and violence, social inclusion, and access to economic resources. I feel future research into community music programs should look into the environment of the music program and explore the impact on music programs that emphasize providing youth with a means of meeting social determinants. In chapter three, the qualitative study, some things that contributed to well-being in a local music program included accessibility, a positive and accepting space, and the influential instructors. I fully believe the environment of the music program played a big part in students' perceived benefits.

Furthermore, the 12+ group introduced these students to topics related to social justice, equality, equity, racism, acceptance, and treating people with respect. Taking the opportunity to include something like this in other community arts or music programs can help work toward creating environments free from discrimination and violence and should be further explored.

### **Conclusion**

This thesis aimed to explore the impact of community music programs on youth mental health and well-being through two studies. Chapter two, the systematic review, showed inconclusive results regarding the effect of community music on social well-being and self-esteem in quantitative contexts. However, the quantitative studies that



looked at general well-being and the qualitative studies revealed positive impacts on youth well-being. Chapter three, the qualitative study, revealed the impact of community-based music programs on youth through two categories and six themes. Themes included: impact on feeling, impact on learning, opportunities for engagement, importance of accessibility, accepting and positive space, and instructor influence. These themes come together to tell a narrative of how an accessible and accepting music program with kind and caring instructors has fostered an environment that allows youth to flourish through positive feelings, learning, and engaging.

Overall, the results from the studies in this thesis reveal that community music programs should be further studied as a potential way to promote well-being in youth. Community music programs provide youth with a unique opportunity to learn a skill under the supervision of supportive adults while socializing with other youth within the community. The studies in this thesis contribute to literature in arts and health and community health promotion.

### **Final Reflection**

I feel incredibly privileged to have been able to complete a thesis on a topic that I am truly passionate about. I am proud of all of the hard work and dedication involved in the completion of a master's thesis. Throughout this process, I have gained tremendous respect for those who design and conduct research as there is so much work behind the scenes of every individual project. To prepare for my research, I took a graduate-level course on completing systematic reviews and with the help of Dr. Marshall Godwin. During his class, he went through PRISMA guidelines and creating a systematic review step-by-step. This included having a systematic review completed by the end of the

course with a fellow student partner in the classroom. The review I completed in the class focused solely on quantitative research, however, so that we could also complete a meta-analysis including forest plots of the statistics involved in the studies. Completing my own systematic review with my supervisors that included qualitative research helped me further prepare me to conduct my own qualitative study. While exploring the qualitative studies on community music programs I was able to get an idea of what my study design should look like. When determining the quality of articles for the systematic review I also noted the qualities that make a good qualitative study. I noticed what many of these qualitative studies failed to comment on, much of this was related to methodology, ethics, and examining their position as a researcher and relationship with the participants involved. This literature exploration and an advanced qualitative analysis course helped ensure I had the skills to conduct my own study.

I must admit, although I felt as if I had gained the required skills, I was incredibly nervous about creating and conducting a qualitative research project. All of my previous research experience was in quantitative research so the philosophy and methodology behind qualitative research was entirely new to me before graduate courses in research methods and advanced qualitative research. The ways you write, think, and immerse yourself in this research is completely different. I found myself initially stuck on words associated with quantitative research and had to rewire my ways of thinking to fully indulge in the art of qualitative research. However, once I dove in it was a surprisingly refreshing dip. This plunge would not have been possible without Dr. Natalie Beausoleil's deep knowledge and passion for qualitative research and the ability to push me to let go of quantitative ideas and fully immerse myself in qualitative literature.

As much as I would like to say it was smooth sailing, that was not the case. My first interview was awkward, clumsy, and quick. It took place with a member of the Strong Harbour Strings who was particularly shy and even my probing led to one-word answers and nods. After this interview, I was panicked and worried about what would happen if all of my interviews turned out this way. In the back of my mind, I thought about how phenomenology aimed for rich full descriptions and I wondered if this were something I could achieve if students felt shy around me. Luckily, my second interview went better than I could have ever imagined and with following each interview I was more confident in my ability and excited to examine the results. I genuinely enjoyed listening back to the audio recordings and analyzing the transcripts for themes and important quotes. Everything began to fit together like a puzzle, and I was overjoyed to see that the other members of my research team and committee were seeing the same things that I saw.

One of the challenges I faced during this research was completing a systematic review exploring an arts program as well as exploring qualitative research on arts and health in a field that is incredibly dominated by quantitative research. I still received a lot of praise and support but did endure some frustrating conversations from people who did not understand the value of a project so heavily focused on arts or without statistics to back up my claims. This reminded me of a quote by Robert Sapolsky (1994) that I relate heavily with,

I love science, and it pains me to think that so many are terrified of the subject or feel that choosing science means you cannot also choose compassion, or the arts, or be awed by nature. Science is not meant to cure us of mystery, but to reinvent and reinvigorate it (p. xii).

I feel this is the direction that we are moving with research as The WHO (2019) recently released a large scoping review with over 900 references supporting research on the arts and health. They also recommend policies in promoting more research in arts and health and creating more arts opportunities in communities. Throughout this journey, I have met a number of people who also see great value in the arts and can see its potential in health promotion and prevention of negative health outcomes. I hope to further break down the view of arts and sciences as separate entities and feel this is a wonderful time to be a part of this research.

Reading about peoples' experiences with community music programs and watching those in the music program experience it firsthand was an incredibly heartwarming experience. Although I had never been part of a community-based instructional music group, I was part of extracurricular choir and arts programs during my high school years. I was nostalgic for the sense of community and friendships made in these settings in which you are spending time doing things you enjoy with like-minded individuals. I cannot express enough how inspiring and encouraging Carole Bestvater, director of SHS is. Her enthusiasm and passion for what she does are truly contagious, and she is always so full of positive energy.

Overall, this thesis experience was incredibly rewarding, and I am honoured to contribute to work on arts and health. As mentioned in my introduction, I feel forever changed by the work and experiences that happened on this journey. It was clear through observation and communication that involvement in a community-based music program did have a profound impact on some student's well-being. It also helped educate them in becoming more critically thinking and empathetic members of the community and society

at large. I have hope that further research in this area will continue and communities will work towards making more spaces for young people to get together, get creative, think critically and have positive experiences that benefit their health and overall quality of life.

## References

- Alemán, X., Duryea, S., Guerra, N. G., McEwan, P. J., Muñoz, R., Stampini, M., & Williamson, A. A. (2017). The effects of musical training on child development: A randomized trial of el sistema in venezuela. *Prevention Science, 18*(7), 865-878. doi:10.1007/s11121-016-0727-3
- Alliance for Healthier Communities Canada. (2020). Rx: Community - Social Prescribing in Ontario. Retrieved from <https://www.allianceon.org/Social-Prescribing>
- Angen, M. J. (2000). Evaluating interpretive inquiry: reviewing the validity debate and opening the dialogue. *Qualitative Health Research, 10*(3), 378–395. <https://doi.org/10.1177/104973230001000308>
- Auerbach, C., & Delport, A. C. (2018). Developing mindfulness in children through participation in music activities. *South African Journal of Childhood Education, 8*(1), e1-e7. doi:10.4102/sajce.v8i1.519
- Barrett, M. S., & Smigiel, H. M. (2007). Children's perspectives of participation in music youth arts settings: Meaning, value and participation. *Research Studies in Music Education, 28*(1), 39-50. doi:10.1177/1321103X070280010204
- Barrett, M. S., & Bond, N. (2015). Connecting through music: The contribution of a music programme to fostering positive youth development. *Research Studies in Music Education, 37*(1), 37-54. doi:10.1177/1321103X14560320
- Burnard, P., & Dragovic, T. (2015). Collaborative creativity in instrumental group music learning as a site for enhancing pupil wellbeing. *Cambridge Journal of Education, 45*(3), 371-392. doi:10.1080/0305764X.2014.934204

Centre for Addiction and Mental Health [CAMH] (2007). Best practice guidelines for mental health promotion programs: Children & youth. Toronto, Centre for Addiction and Mental Health, Centre for Health Promotion, Toronto Public Health. Retrieved from [www.camh.net](http://www.camh.net)

Centre for Addiction and Mental Health (CAMH). (2012). Mental Illness and Addictions: Facts and Statistics. Retrieved from [http://www.camh.ca/en/hospital/about\\_camh/newsroom/for\\_reporters/Pages/addictionmentalhealthstatistics.aspx](http://www.camh.ca/en/hospital/about_camh/newsroom/for_reporters/Pages/addictionmentalhealthstatistics.aspx)

Cheung, A. T., Li, W. H. C., Ho, L. L. K., Ho, K. Y., Lam, K. K. W., & Chung, O. K. (2019). Effectiveness of a musical training programme in promoting happiness and quality of life of underprivileged preschool children. *Journal of Clinical Nursing*, 28(23-24), 4412-4423. doi:10.1111/jocn.15023

Clift, S. (2020). Fancourt, D. and Finn, S. (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review. *Nordic Journal of Arts, Culture and Health*. 2. 77-83. 10.18261/issn.2535-7913-2020-01-08.

Critical Appraisal Skills Programme (2020). CASP Checklists. [online] Retrieved from <https://casp-uk.net/casp-tools-checklists/>

Csikszentmihályi, M. (1996). *Creativity: Flow and the Psychology of Discovery and Invention*. New York: Harper Perennial.

Dakon, J. M., & Cloete, E. (2018). The violet experience: Social interaction through eclectic music learning practices. *British Journal of Music Education*, 35(1), 57-72. doi:10.1017/S0265051717000122

Daykin, N., de Viggiani, N., Pilkington, P., & Moriarty, Y. (2013). Music making for health, well-being and behaviour change in youth justice settings: a systematic review. *Health Promotion International*, 28(2), 197–210.

<https://doi.org/10.1093/heapro/das005>

Deci, E. L., & Ryan, R. M. (1991). A motivational approach to self: integration in personality. In: R. Dienstbier (Ed.), *Nebraska symposium on motivation: Vol. 38. Perspectives on motivation* (pp 237-288). Lincoln, NE: University of Nebraska Press.

Department of Health. (2009). *New horizons: A shared vision for mental health*. London: HMSO.

Devroop, K. (2012). The social-emotional impact of instrumental music performance on economically disadvantaged south african students. *Music Education Research*, 14(4), 407-416. doi:10.1080/14613808.2012.685456

Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95, 542–575.

<http://dx.doi.org/10.1037/0033-2909.95.3.542>

Government of Newfoundland and Labrador (2015) *Healthy People, Healthy Families, Healthy Communities: A Primary Health Care Framework for Newfoundland and Labrador 2015-2025*. Retrieved from

[https://www.health.gov.nl.ca/health/publications/PHC\\_Framework\\_update\\_Nov26.pdf](https://www.health.gov.nl.ca/health/publications/PHC_Framework_update_Nov26.pdf)

Harkins, C., Garnham, L., Campbell, A., & Tannahill, C. (2016). Hitting the right note for child and adolescent mental and emotional wellbeing: A formative qualitative



- evaluation of sistema Scotland's "Big noise" orchestral programme. *Journal of Public Mental Health*, 15(1), 25-36. doi:10.1108/JPMH-11-2015-0047
- Ilari, B., Perez, P., Wood A., & Habibi, A. (2019). The role of community based music and sports programmes in parental views of children's social skills and personality. *International Journal of Community Music*. 12(1). doi: 10.1386/ijcm.12.1.35\_1
- Leavy, P. (2017). *Research design : Quantitative, qualitative, mixed methods, arts-based, and community-based participatory research approaches*.
- Lerner, R. M., Fisher, C. B., & Weinberg, R. A. (2000). Toward a science for the people: Promoting civil society through the application of developmental science. *Child Development*, 71(1), 11–20.
- Lim, K., Jacobs, P., Ohinmaa, A., Schopflocher, D., & Dewa, C. S. (2008). A new population-based measure of the economic burden of mental illness in Canada. *Chronic Diseases in Canada*, 28(3), 92.
- Lincoln, Y. S., Lynham, S. A., & Guba, E. G. (2011). Paradigmatic controversies, contradictions, and emerging confluences, revisited. In N. K. Denzin & Y. S. Lincoln (Eds.), *The SAGE handbook of qualitative research* (4th ed., Chapter 6). Thousand Oaks, CA: Sage Publications.
- MacDonald, R., Kreutz, G., & Mitchell, L. (2012). *Music, health, and wellbeing* . Oxford University Press.
- Marmot, MG 2011, Fair Society, Healthy lives, paper presented at the *Centre for Aging Research and Development in Ireland (CARDI) International Conference*, 2–4

- November, Dublin. Retrieved from  
[www.cardi.ie/userfiles/DublinCARDIMarmot\\_Keynote\\_presentation\\_2011\(2\).pdf](http://www.cardi.ie/userfiles/DublinCARDIMarmot_Keynote_presentation_2011(2).pdf)
- Moher, D., Liberati, A., Tetzlaff, J., Altman, D. G., & PRISMA Group. (2009). Preferred reporting items for systematic reviews and meta-analyses: The PRISMA statement. *Journal of Clinical Epidemiology*, 62(10), 1006.
- MQ (2015). UK Mental Health Research Funding: MQ Landscape Analysis. Retrieved from [www.joinmq.org/research](http://www.joinmq.org/research)
- Myers, D., & Diener, E. (1995). Who Is Happy? *Psychological Science*, 6(1), 10–19.  
<https://doi.org/10.1111/j.1467-9280.1995.tb00298.x>
- National Research Council and Institute of Medicine (2002). Committee on community-level programs for youth., *Community Programs to Promote Youth Development*. Washington, DC: National Academy Press.
- NL Support. (2017). You spoke, we listened: 2017-2018 Priorities Survey Results. Retrieved from <https://medium.com/support-letters/you-spoke-we-listened-2017-2018-priorities-survey-results-55f42e582578>
- Osborne, M. S., McPherson, G. E., Faulkner, R., Davidson, J. W., & Barrett, M. S. (2016). Exploring the academic and psychosocial impact of el sistema-inspired music programs within two low socio-economic schools. *Music Education Research*, 18(2), 156-175. doi:10.1080/14613808.2015.1056130
- Pelcher, A., & Rajan, S. (2016). After-school program implementation in urban environments: increasing engagement among adolescent youth. *Journal of School Health*, 86(8), 585-594.

- Ramey, H. L., & Rose-Krasnor, L. (2012). Contexts of structured youth activities and positive youth development. *Child Development Perspectives*, 6(1), 85–91.
- Reis, H., Sheldon, K., Gable, S., Roscoe, J., & Ryan, R. (2000). Daily well-being: the role of autonomy, competence, and relatedness. *Personality and Social Psychology Bulletin*, 26(4), 419–435. <https://doi.org/10.1177/0146167200266002>
- Rickard, N. S., Bambrick, C. J., & Gill, A. (2012). Absence of widespread psychosocial and cognitive effects of school-based music instruction in 10–13-year-old students. *International Journal of Music Education*, 30(1), 57-78.  
doi:10.1177/0255761411431399
- Ryan, R., & Deci, E. (2001). On happiness and human potentials: A review of the research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 52, 141-166.
- Sapolsky, R. (1994). Why zebras don't get ulcers : a guide to stress, stress-related diseases, and coping. New York: W.H. Freeman.
- Sheldon, K., & Kasser, T. (1995). Coherence and congruence: two aspects of personality integration. (Personality processes and individual differences). *Journal of Personality and Social Psychology*, 68(3), 531–543. <https://doi.org/10.1037/0022-3514.68.3.531>
- Sheltzer, J. M., & Consoli, A. J. (2019). Understanding the impact of an after-school music program with engaged underserved youth. *Journal of Community Psychology*, 47(6), 1364-1379. doi:10.1002/jcop.22193
- Sheppard, A., & Broughton, M. (2020). Promoting wellbeing and health through active participation in music and dance: A systematic review. *International Journal of*

- Qualitative Studies on Health and Well-being*, 15(1), International Journal of Qualitative Studies on Health and Well-being, 01 January 2020, Vol.15(1).
- Shields, C. (2001). Music education and mentoring as intervention for at-risk urban adolescents: Their self-perceptions, opinions, and attitudes. *Journal of Research in Music Education*, 49(3), 273-286. doi:10.2307/3345712
- Shin, J. (2011). An investigation of participation in weekly music workshops and its relationship to academic self concept and self-esteem of middle school students in low income communities. *Contributions to Music Education*, 38(2), 29–42.
- Smith, J. A., & Osborn, M. (2004). Interpretative phenomenological analysis. In G. M. Breakwell (Ed.), *Doing social psychology research* (p. 229–254). British Psychological Society; Blackwell Publishing.
- Solli, H. P. & Rolvsjord, R. (2015). "the opposite of treatment": A qualitative study of how patients diagnosed with psychosis experience music therapy. *Nordic Journal of Music Therapy*, 24(1), 67-92.
- Veblen, Kari. (2007). The many ways of community music. *International Journal of Community Music*. 1. 5-21. 10.1386/ijcm.1.1.5\_1.
- Weare, K. (2017). Promoting social and emotional wellbeing and responding to mental health problems in schools. In Bährer-Kohler, S and Carod-Artal F.J., *Global Mental Health Prevention and Promotion* (pp. 33-46). Switzerland: Springer.
- World Health Organization. (2012). Risks to mental health: an overview of vulnerabilities and risk factors. Retrieved from [https://www.who.int/mental\\_health/mhgap/risks\\_to\\_mental\\_health\\_EN\\_27\\_08\\_12.pdf](https://www.who.int/mental_health/mhgap/risks_to_mental_health_EN_27_08_12.pdf)

World Health Organization (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review (2019).

## Appendix A

### **Parent / Caregiver and Child Informed Consent Form**

- Title: The perceived impact of a community-based music program on youth self-esteem and well-being
- Researcher(s): Ms. Brittany Howell, School of Pharmacy, Memorial University of Newfoundland, phone: 613-447-6713; e-mail: [bdhowell@mun.ca](mailto:bdhowell@mun.ca)
- Supervisor(s): Dr. Lisa Bishop, School of Pharmacy and Department of Family Medicine, Memorial University of Newfoundland, phone: 709-864-8469; e-mail: [ldbishop@mun.ca](mailto:ldbishop@mun.ca)
- Dr. Stephen Darcy, Department of Family Medicine, Memorial University of Newfoundland, phone: 709-752-4301; e-mail: [sdarcy@mun.ca](mailto:sdarcy@mun.ca)

You and your child are invited to take part in a research project. It is called “The perceived impact of a community-based music program on youth self-esteem and well-being.”

This form is part of the process of informed consent. It should give you the basic idea of what the research is about and what your participation will involve. It also describes your right to withdraw from the study. In order to decide whether you wish to participate in this research study, you should understand enough about its risks and benefits to be able to make an informed decision. This is the informed consent process. Take time to read this carefully and to understand the information given to you. Please contact the researcher, Brittany Howell, if you have any questions about the study or would like more information before you consent.

It is entirely up to you / your child to decide whether to take part in this research. Participation in the study is not a requirement of the program and will not impact involvement in the program. If you choose not to take part in this research or if you decide to withdraw from the research once it has started, there will be no negative consequences for you or your child, now or in the future.

#### **Introduction:**

My name is Brittany Howell. I am a master's Student in the School of Pharmacy at Memorial University. As part of my master's thesis, I am conducting research under the supervision of Dr. Lisa Bishop and Dr. Stephen Darcy.

**Purpose of Study:**

The purpose of this study is to explore how a music program affects youth self-esteem and well-being. Self-esteem and well-being are related to positive mental health. Research that looks at ways to promote mental health is important. Previous research suggests that arts programs may be one way to improve self-esteem and well-being in youth.

**What You Will Do in this Study:**

If you or your child chooses to participate in this study, we will ask that you / your child takes part in an interview. Both of you may decide to participate, or you may decide that just you or your child want to participate. The interview will ask questions about you / your child's experience with the music program. You will also be asked how you feel participating in a music program affects youth well-being. If you or your child does not want to answer any specific question during the interview, you can skip any of the questions. The interview will be audio-recorded.

**Length of Time:**

The interview should take 30 minutes to one hour.

**Withdrawal from the Study:**

- It is up to you to decide whether or not to take part in this research.
- If you choose not to take part in this research, it will not affect you.
- You are able to withdraw from the study at any point until the research report is written.
- If you wish to withdraw from the study before the interview, please contact me at [bdhowell@mun.ca](mailto:bdhowell@mun.ca) or 613-447-6713.
- If you wish to withdraw from the study during the interview, please let me know. If you no longer wish to participate, the interview will end immediately. If you withdraw during the interview, I will not include anything you say in the script.
- If you wish to withdraw after the interview has taken place, please contact me, Brittany Howell, at [bdhowell@mun.ca](mailto:bdhowell@mun.ca) or 613-447-6713. If the script has not yet been transcribed, it will not be. If the script has already been transcribed, your script and anything you say will be removed and will not appear anywhere in the report.

- It will be possible to withdraw until the research report is submitted in August 2019.

**Possible Risks:**

There are minimal risks associated with this study. It may be inconvenient to take the time to participate in an interview. It also might be upsetting for you / your child to talk about youth self-esteem and well-being. If you begin to feel uncomfortable, we can end the interview. You or your child can withdraw from the study at any point. If you or your child feels any distress please contact the Mental Health Crisis Line, 24-hour Toll Free at 1-888-737-4668. You / your child can also call the Kid's Help Phone at 709-685-0629.

**Confidentiality:**

The ethical duty of confidentiality includes safeguarding participants' identities, personal information, and data from unauthorized access, use, or disclosure. Every effort to protect your / your child's privacy will be made. You are not required to state your name at any point. If you do say any identifiable information during the interview, it will be removed from the report. Your participation will remain completely confidential. One limit to confidentiality is if a child shares any information that reveals they are in danger or in need of protective intervention. Section 15 of the Child Youth and Family Services Act of Newfoundland and Labrador states that "anyone who becomes aware that a person actually or apparently under the age of sixteen years is or may be in need of protective intervention, as defined by the Child Youth and Family Services Act, must report this to a peace officer or social worker."

**Anonymity:**

Anonymity refers to protecting participants' identifying characteristics. This includes characteristics such as name or description of physical appearance.

No identifying characteristics or data will appear in the report.

Every reasonable effort will be made to ensure your anonymity. You will not be identified in publications without your explicit permission.

**Recording of Data:**

The interview will be audio-recorded. Any identifiable information talked about during the recording will be removed. This information will not appear in the report. The recording will only be used to transcribe your words into a written script.

**Use, Access, Ownership, and Storage of Data:**

- Data will be stored on an encrypted and password protected USB stick.
- All data will be kept in a secure locked room in the university in a locked cabinet.



- The Consent forms will be stored in the same room but in a separate locked cabinet.
- Only my supervisor, Dr. Lisa Bishop, and I (Brittany Howell) will have access to the data.
- The data will be destroyed after five years.

“Data will be kept for a minimum of five years, as required by Memorial University’s policy on Integrity in Scholarly Research.”

### **Reporting of Results:**

The information from this research will be used in my graduate thesis report. It may also be used to write other reports, articles, or research papers. These reports have the possibility to be shared at conference presentations or published in journals. Your name will not appear in any report or article published from this project. Although the data from this research project may be published and presented at conferences, the data will not include identifiable information, so it will not be possible to identify individuals. Your identity will remain confidential. A summary of the research will be posted on the SHS and Shea Heights websites.

- Upon completion, my thesis will be available at Memorial University’s Queen Elizabeth II library, and can be accessed at:  
<http://collections.mun.ca/cdm/search/collection/theses>.

The data will be reported using direct quotations as well as in summarized forms.

### **Sharing of Results with Participants:**

Anyone who would like a copy of the report can contact Brittany Howell. You can also contact Dr. Bishop or Dr. Darcy. Reports will be given to the Strong Harbour Strings Board of Directors, the Shea Heights Community Board, and St. John Bosco School.

### **Questions:**

You are welcome to ask questions before, during, or after your participation in this research. If you would like more information about this study, please contact: Brittany Howell, phone: 613-447-6713; e-mail: [bdhowell@mun.ca](mailto:bdhowell@mun.ca), Dr. Lisa Bishop, phone: 709-864-8469; e-mail: [ldbishop@mun.ca](mailto:ldbishop@mun.ca) or Dr. Stephen Darcy, phone: 709-752-4301; e-mail: [sdarcy@mun.ca](mailto:sdarcy@mun.ca)

The proposal for this research has been reviewed by the Interdisciplinary Committee on Ethics in Human Research and found to be in compliance with Memorial University’s ethics policy. If you have ethical concerns about the research, such as the way you have been treated or your rights as a participant, you may contact the Chairperson of the ICEHR at [icehr@mun.ca](mailto:icehr@mun.ca) or by telephone at 709-864-2861.

**Consent:**

Your signature on this form means that:

- You have read the information about the research.
- You have been able to ask questions about this study.
- You are satisfied with the answers to all your questions.
- You understand what the study is about and what you will be doing.
- You understand that you are free to withdraw participation in the study without having to give a reason, and that doing so will not affect you now or in the future.
- You understand that if you choose to end participation **during** data collection, any data collected from you up to that **point will be destroyed**.
- You understand that if you choose to withdraw **after** data collection has ended, your data can be removed from the study up to August 1<sup>st</sup>, 2019.

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| I agree to be audio-recorded                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I agree to participate in the study               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I agree to let my child participate in this study | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I agree to the use of direct quotations           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

By signing this form, you do not give up your legal rights and do not release the researchers from their professional responsibilities.

**Your Signature Confirms:**

- I have read what this study is about and understood the risks and benefits. I have had adequate time to think about this and had the opportunity to ask questions and my questions have been answered.
- I agree to participate in the research project understanding the risks and contributions of my participation, that my participation is voluntary, and that I may end my participation.
- A copy of this Informed Consent Form has been given to me for my records.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

I consent for my child \_\_\_\_\_ to take part in this study.

**Researcher's Signature:**

I have explained this study to the best of my ability. I invited questions and gave answers. I believe that the participant fully understands what is involved in being in the study, any potential risks of the study and that he or she has freely chosen to be in the study.

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Date

**Assent of minor participant:**

**I have explained this study to the best of my ability. I invited questions and gave answers. I believe that the parent/guardian fully understands what is involved in being in the study, any potential risks of the study and that he or she has freely chosen for the child/ward to be in the study.**

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Date (DD-MM-YYYY)

**To be signed by the minor participant [if appropriate]**

- You have been read the information about this research study.
- You have been able to ask questions about this study.
- You are happy with the answers to your questions.
- You understand what the study is about and what you will be doing.
- You understand that you are allowed to stop being in the study. You can stop the interview without giving a reason. This will not affect you now or in the future.
- You understand that if you choose to stop being in the study during the interview, the recording will be destroyed.
- You understand that if you stop after the interview has ended, what you said can be removed from the study up to August 1<sup>st</sup>, 2019.

I agree to be audio-recorded  Yes  No  
 I agree to participate in the study  Yes  No  
 I agree to let you use direct quotes of what I say  Yes  No

By signing this form, you do not give up your legal rights and do not release the researchers from their professional responsibilities.

**Your Signature Confirms:**

- I want to participate in this study. I know what this study is about. I understand any risks and benefits. I have taken time to choose to participate. Any questions I had have been answered.
- I agree to participate in the research project. I understand any risks of doing this interview. I also understand it is up to me to answer the questions, and that I can stop at any point.
- A copy of this Informed Consent Form has been given to me or my parents.

---

Signature of minor participant  
YYYY)

Date (DD-MM-

---

Name printed

Age

## Appendix B

### **Instructor Informed Consent Form**

Title: The perceived impact of a community-based music program on youth self-esteem and well-being

Researcher(s): Ms. Brittany Howell, School of Pharmacy, Memorial University of Newfoundland, phone: 613-447-6713; e-mail: [bdhowell@mun.ca](mailto:bdhowell@mun.ca)

Supervisor(s): Dr. Lisa Bishop, School of Pharmacy and Department of Family Medicine, Memorial University of Newfoundland, phone: 709-864-8469; e-mail: [ldbishop@mun.ca](mailto:ldbishop@mun.ca)

Dr. Stephen Darcy, Department of Family Medicine, Memorial University of Newfoundland, phone: 709-752-4301; e-mail: [sdarcy@mun.ca](mailto:sdarcy@mun.ca)

You are invited to take part in a research project entitled “The perceived impact of a community-based music program on youth self-esteem and well-being.”

This form is part of the process of informed consent. It should give you the basic idea of what the research is about and what your participation will involve. It also describes your right to withdraw from the study. In order to decide whether you wish to participate in this research study, you should understand enough about its risks and benefits to be able to make an informed decision. This is the informed consent process. Take time to read this carefully and to understand the information given to you. Please contact the researcher, Brittany Howell if you have any questions about the study or would like more information before you consent.

It is entirely up to you to decide whether to take part in this research. Participation in this study is voluntary and is not an employment requirement for the instructors. If you choose not to take part in this research or if you decide to withdraw from the research once it has started, there will be no negative consequences for you, now or in the future.

#### **Introduction:**

My name is Brittany Howell. I am a master’s Student in the School of Pharmacy at Memorial University. As part of my master’s thesis, I am conducting research under the supervision of Dr. Lisa Bishop and Dr. Stephen Darcy.

**Purpose of Study:**

The purpose of this study is to explore how a music program affects youth self-esteem and well-being. Self-esteem and well-being are outcomes related to positive mental health. Research that looks at ways to promote mental health is important in Newfoundland and Labrador. Previous research suggests that arts programs may be one way to improve self-esteem and well-being in youth.

**What You Will Do in this Study:**

If you choose to participate in this study, you will take part in a focus group. This focus group will consist of instructors of Strong Harbour Strings. You will be asked questions about your experience with the music program. You will also be asked about student's experiences with the music program. If you do not want to answer any specific question during the interview, you are welcome to skip any of the questions. You are not required to add your input in a particular question if you do not wish to answer. The focus group will be audio-recorded.

**Length of Time:**

Participating in the focus group should take an hour.

**Withdrawal from the Study:**

- It is up to you to decide whether or not to take part in this research.
- If you choose not to take part in this research, it will not affect you.
- You are able to withdraw from the study at any point until the research report is written.
- If you wish to withdraw from the study before the focus group, please contact me at [bdhowell@mun.ca](mailto:bdhowell@mun.ca) or 613-447-6713 to let me know.
- If you wish to withdraw from the study during the focus group, please let me know as soon as you have decided this. Please state that you no longer wish to participate, and I will excuse you from the focus group. If you withdraw during the focus group, I will not include anything you say in the script.
- If you wish to withdraw after the focus group has taken place, please contact me, Brittany Howell, at [bdhowell@mun.ca](mailto:bdhowell@mun.ca) or 613-447-6713. If the script has not yet been transcribed, what you say will not be included in the script. If the script has already been transcribed, anything you say will be removed from the script and will not appear anywhere in the report.
- It will be possible to withdraw until the research report is submitted in August 2019.

**Possible Benefits:**

It is not known whether this project has direct benefits. However, the information gained will help increase our understanding of how music participation affects youth. What we learn may be helpful to youth in your community. The information collected from this study can be used to help inform future programs for youth. It will also add to existing literature on arts programs and well-being.

**Possible Risks:**

There are minimal risks associated with this study. You may find it inconvenient to take the time to participate in a focus group. It also might be upsetting for you to talk about youth self-esteem / well-being. If you begin to feel any discomfort, we can end the focus group. You can withdraw from the study at any point. If you feel any distress please contact the Mental Health Crisis Line, 24-hour Toll Free at 1-888-737-4668.

**Confidentiality:**

The ethical duty of confidentiality includes safeguarding participants' identities, personal information, and data from unauthorized access, use, or disclosure.

Every effort to protect your privacy will be made. You are not required to state your name at any point. If you do say any identifiable information during the focus group, it will be removed from the report. Because your participation is in a group setting, it is not confidential. I cannot ensure that what you say will not be repeated by others in the focus group. However, they will be asked not to repeat anything and to respect each other's privacy.

**Anonymity:**

Anonymity refers to protecting participants' identifying characteristics, such as name or description of physical appearance. Because Strong Harbour Strings has small number of instructors, and because this is a focus group, your participation will not be anonymous. However, no identifying characteristics or data will appear in the report.

Every reasonable effort will be made to ensure your anonymity. You will not be identified in publications without your explicit permission.

**Recording of Data:**

The focus group will be audio-recorded. Any identifiable information talked about during the recording will be removed. This information will not appear in the report. The recording will only be used to transcribe your words into text scripts.

**Use, Access, Ownership, and Storage of Data:**

- Data will be stored on an encrypted and password protected USB stick. Any hard copies of data will be kept in a locked safe in a locked room in the university.
- All data will be kept in a secure locked room in the university in a locked safe. The Consent forms will be stored in the same room but in a separate locked safe.
- Only my supervisor, Dr. Lisa Bishop, and I (Brittany Howell) will have access to the data.
- The data will be destroyed after five years.

“Data will be kept for a minimum of five years, as required by Memorial University’s policy on Integrity in Scholarly Research.”

**Reporting of Results:**

The information from this research will be used in my graduate thesis report. It may also be used to write other reports, articles, or research papers. These reports have the possibility to be shared at conference presentations or published in journals. Your name will not appear in any report or article published from this project. Although the data from this research project may be published and presented at conferences, the data will not include identifiable information, so it will not be possible to identify individuals. Your identity will remain confidential. A summary of the research will be posted on the SHS and Shea Heights websites.

- Upon completion, my thesis will be available at Memorial University’s Queen Elizabeth II library, and can be accessed online at:  
<http://collections.mun.ca/cdm/search/collection/theses>.
- The data will be reported using direct quotations as well as in summarized forms.

**Sharing of Results with Participants:**

Anyone who would like a copy of the report can contact Brittany Howell. You can also contact Dr. Bishop or Dr. Darcy. Reports will be given to the Strong Harbour Strings Board of Directors, the Shea Heights Community Board, and St. John Bosco School.

**Questions:**

You are welcome to ask questions before, during, or after your participation in this research. If you would like more information about this study, please contact: Brittany Howell, phone: 613-447-6713; e-mail: [bdhowell@mun.ca](mailto:bdhowell@mun.ca), Dr. Lisa Bishop, phone: 709-864-8469; e-mail: [ldbishop@mun.ca](mailto:ldbishop@mun.ca) or Dr. Stephen Darcy, phone: 709-752-4301; e-mail: [sdarcy@mun.ca](mailto:sdarcy@mun.ca)



The proposal for this research has been reviewed by the Interdisciplinary Committee on Ethics in Human Research and found to be in compliance with Memorial University's ethics policy. If you have ethical concerns about the research, such as the way you have been treated or your rights as a participant, you may contact the Chairperson of the ICEHR at [icehr@mun.ca](mailto:icehr@mun.ca) or by telephone at 709-864-2861.

**Consent:**

Your signature on this form means that:

- You have read the information about the research.
- You have been able to ask questions about this study.
- You are satisfied with the answers to all your questions.
- You understand what the study is about and what you will be doing.
- You understand that you are free to withdraw participation in the study without having to give a reason, and that doing so will not affect you now or in the future.
- You understand that if you choose to end participation **during** data collection, any data collected from you up to that **point will be destroyed**.
- You understand that if you choose to withdraw **after** data collection has ended, your data can be removed from the study up to August 1<sup>st</sup>, 2019.

I agree to be audio-recorded	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I agree to participate in the study	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I agree to the use of direct quotations	<input type="checkbox"/> Yes	<input type="checkbox"/> No

By signing this form, you do not give up your legal rights and do not release the researchers from their professional responsibilities.

**Your Signature Confirms:**

- I have read what this study is about and understood the risks and benefits. I have had adequate time to think about this and had the opportunity to ask questions and my questions have been answered.
- I agree to participate in the research project understanding the risks and contributions of my participation, that my participation is voluntary, and that I may end my participation.
- A copy of this Informed Consent Form has been given to me for my records.

---

Signature of Participant

---

Date

**Researcher's Signature:**

I have explained this study to the best of my ability. I invited questions and gave answers. I believe that the participant fully understands what is involved in being in the study, any potential risks of the study and that he or she has freely chosen to be in the study.

---

Signature of Principal Investigator

---

Date

## Appendix C

### Invitation Letter for Parents / Caregivers and Children

My name is Brittany Howell. I am a student in the School of Pharmacy at Memorial University of Newfoundland. My current research project is called “The perceived impact of a community-based music program on youth self-esteem and well-being.” This project is part of my master’s degree under the supervision of Dr. Lisa Bishop and Dr. Stephen Darcy. The purpose of the study is to examine how a music program affects youth. I am interested in how music programs can impact youth self-esteem and well-being. In this study I will ask about your / your child’s experience with Strong Harbour Strings. I am contacting you to invite you and your child to participate in an interview. Both of you may decide to participate, or you may decide that just you or your child want to participate. You will be asked to answer open-ended questions. These questions will be about your / your child’s experiences with the Strong Harbour Strings music program. Participation will require 30 minutes to an hour of your or your child’s time. The interview will be held at the location of your child’s Strong Harbour Strings music classes. Participation in this study is not a requirement of the music program. It will not affect involvement in the program and will not impact you or your child in any way. If you or your child is interested in participating in this study, please fill out the consent form and return it to me at [bdhowell@mun.ca](mailto:bdhowell@mun.ca). You or your child can also return this form to a drop box at the Strong Harbour Strings location.

Please contact me at [bdhowell@mun.ca](mailto:bdhowell@mun.ca) or 613-447-6713 to set up a time that works best for an interview for you or your child. You can also contact me if you have any questions about my research or my project.

Thank-you in advance for considering my request,  
Brittany Howell

The proposal for this research has been reviewed by the Interdisciplinary Committee on Ethics in Human Research and found to be in compliance with Memorial University’s ethics policy. If you have ethical concerns about the research, such as your rights as a participant, you may contact the Chairperson of the ICEHR at [icehr.chair@mun.ca](mailto:icehr.chair@mun.ca) or by telephone at 709-864-2861.

## Appendix D

### Invitation Letter for Instructors

My name is Brittany Howell. I am a student in the School of Pharmacy at Memorial University of Newfoundland. My current research project is called “The perceived impact of a community-based music program on youth self-esteem and well-being.” This project is part of my master’s degree under the supervision of Dr. Lisa Bishop and Dr. Stephen Darcy. The purpose of the study is to examine how a music program affects youth. I am interested in your opinion on how music programs can impact youth self-esteem and well-being.

I am contacting you to invite you to participate in a focus group. In the focus group you will be asked to answer questions about student’s experiences with the music program. You will also be asked questions about your experiences with the music program. Participation will require an hour of your time and will be held at Cornerstone Ministry Centre. This focus group will include instructors of the Strong Harbour Strings music program. Please note that participation in the focus group is voluntary and if you choose not to participate this will not impact you in any way.

If you are interested in participating in this study, please fill out the consent form and return it to me at [bdhowell@mun.ca](mailto:bdhowell@mun.ca). You can also return it to a drop box that will be present at Strong Harbour Strings classes. After you have returned your consent form, please contact me to let me know what times work for you to take part in a focus group. I will set up a time for your focus group. I will find a time that works for everyone to participate in the focus group.

Please contact me by email at [bdhowell@mun.ca](mailto:bdhowell@mun.ca), or by phone at 613-447-6713 to let me know when you can take part in the focus group or if you have any questions about me or my project.

Thank-you in advance for considering my request,  
Brittany Howell

The proposal for this research has been reviewed by the Interdisciplinary Committee on Ethics in Human Research and found to be in compliance with Memorial University’s ethics policy. If you have ethical concerns about the research, such as your rights as a participant, you may contact the Chairperson of the ICEHR at [icehr.chair@mun.ca](mailto:icehr.chair@mun.ca) or by telephone at 709-864-2861.

## Appendix E

### **Script Emails and Phone Calls**

#### **Script Introduction Email for Parent / Caregiver from Carole**

Hello,

I am emailing you today about an opportunity for you / your child to take part in a study. This study will look at your child's experience with the Strong Harbour Strings music program.

Attached is an invitation letter explaining the study. There is also a consent form to fill out if you, your child, or both of you would like to participate. Your child was also given a physical copy of both of these letters to bring home to you. The study will involve an interview asking questions about your experience with the music program.

If you or your child wants to take part in the study, please fill out and return the consent form to [bdhowell@mun.ca](mailto:bdhowell@mun.ca) or to the drop box that will be present at our Strong Harbour Strings location. Participating in this study is not a part of the program. It is completely voluntary and whether you or your child chooses to participate will have no impact on you or your child. If you would like to set up a time for the interview for you or your child please contact Brittany Howell by email at [bdhowell@mun.ca](mailto:bdhowell@mun.ca) or by phone at 613-447-6713.

Thank you,

Carole Bestvater

#### **Script Email for Parent / Caregiver Participating in the Study**

Hi [name],

Thank you so much for agreeing to take part in the study "The perceived impact of a community-based music program on youth self-esteem and well-being." As a reminder, the interview is expected to take a half hour to an hour.

Is there date or time that would work best for you? We can arrange a time that is most convenient for you.

Thank you and I look forward to hearing from you soon,

Brittany Howell

### **Script Phone Call for Parent / Caregiver Participating in the Study**

Hi, can I speak to [name]?

Hello, I'm Brittany Howell. Thank you for agreeing to take part in the study "The perceived impact of a community-based music program on youth self-esteem and well-being." I am calling to schedule a time for the interview. As a reminder, the interview is expected to take a half hour to an hour.

Is there a date and time that would work better for you?  
Where would be most convenient for you to meet?

Thank you so much, I look forward to seeing you then.

## Appendix F

### Script for Children

Welcome,

Thank you for coming to take part in my research project. The title is “The perceived impact of a community-based music program on youth self-esteem and well-being.” My name is Brittany Howell and I am a graduate student at Memorial University.

I’m going to be asking some questions but before that I will explain why I am here. For my research in school I am interested in how participating in a music program impacts young people. I want to hear about your experience with Strong Harbour Strings. I want to know how you feel about being part of the music program. Your participation in this study is voluntary meaning it is up to you if you want to participate. Your responses will be kept confidential which means that only I will know that you said this. Your name and information will not be in the study report. This interview is expected to last about 30 minutes to an hour depending on how much we talk about each question.

It is your choice to take part in this interview and talk with me. You do not have to answer these questions. You do not have to talk to me even if your Mom or Dad said yes. If you do not want to answer a question, let me know and I will skip that question. If you no longer want to answer questions, let me know and I will stop asking you questions. This will not impact you in any way. The interview will be audio-recorded.

Do you have any questions before we start?

1. Before I begin to ask about the music program, can you tell me what grade you are in?
2. How long have you been a part of Strong Harbour Strings?
  - (a) Have you been in any other music programs?
  - (b) How long have you been playing music instruments?
3. Tell me about what you do when you come to Strong Harbour Strings
  - (a) What happens when you first come for a music class?
  - (b) What happens after that?
  - (c) How does that make you feel?
4. What are some things you like about this music program?
  - (a) Why do you like these things?
  - (b) Can you give some examples?
5. What are some things you do not like about this music program?
  - (a) Why do you not like these things?
  - (b) Can you give some examples?

6. What kinds of things do you learn at Strong Harbour Strings?
  - (a) Can you give some examples?
7. How does it feel to learn a music instrument?
  - (a) Why does it make you feel this way?
  - (b) Can you give some examples?
8. How does being a part of the music program make you feel about yourself?
  - (a) Can you tell me about the emotions you feel and why?
9. How does being a part of the music program make you feel about other people?
  - (a) How do you feel about the instructors?
  - (b) How do you feel other students?
  - (c) Can you describe any experiences with other people you have had in the music program?
10. How do you think other students feel about the music program?
  - (a) Why do you think this?
  - (b) Can you give examples?
11. Do you notice any changes in yourself after joining the program?
  - (a) For example, do you feel or act any different than you did before joining the program?
  - (b) Do you think it changed your confidence or how you view yourself?
  - (c) What do you think caused these differences?
  - (d) Did being part of this music program change how you act outside of the program? (at school / at home)
12. Do you think this music program is important?
  - (a) Why do you feel it is/isn't important?
  - (b) Can you give any examples of why it is/isn't important?
  - (c) Do you think it is important to other students?
13. Is there anything else you would like to say about your experience with the music program?



## Appendix G

### **Script for Parents / Caregivers**

Welcome,

Thank you for coming to take part in this interview. My name is Brittany Howell and I am a graduate student at Memorial University. I'm currently doing a Master of Science in Pharmacy under the supervision of Dr. Lisa Bishop and Dr. Stephen Darcy. This project is titled, The perceived impact of a community-based music program on youth self-esteem and well-being.

Before getting to the questions I will briefly explain my research. I am interested in how participating in a music program impacts youth. I feel it is important to get the parent's or guardian's perspective on this. Your participation in this study is voluntary and your responses will be kept confidential. This means if you mention any names or identifiable information, it will be removed when the recording is transcribed. This information will not be included in the report. The interview is expected to last about 30 minutes to an hour depending on how much we talk about each question. If there are any questions you do not wish to answer, please let me know. You are welcome to skip any question you would rather not answer. Also, your participation is voluntary, and you are able to stop the interview at any time without penalty. As a reminder, this conversation will be audio-recorded.

Do you have any questions before we start?

1. Before I begin to ask about the music program, what grade is your child in?
2. How long has your child been a part of Strong Harbour Strings?
  - (a) Have they been a part of any other music programs?
  - (b) How long have they been learning an instrument?
3. Can you describe your experience with Strong Harbour Strings?
  - (a) How do you feel about the program?
4. What are some things you like about the music program?
  - (a) Why do you like these things?
5. What are some things you dislike about the program?
  - (a) Why do you dislike these things?
6. What kinds of things does your child learn at the music program?
  - (a) Can you give any examples?
  - (b) How has this affected them?

7. How do you think your child feels about being a part of the music program?
  - (a) What makes you think this?
  - (b) Can you give any examples?
  
8. How do you think being a part of the music program has impacted how your child views them self?
  - (a) What makes you think this?
  - (b) Can you give examples?
  
9. How do you think being a part of the music program has impacted how your child views others?
  - (a) How does your child view other students or instructors?
  - (b) Has it changed how they interact with you?
  - (c) What makes you think this?
  - (d) Can you give any examples?
  
10. Have you noticed any differences in your child since being a part of the music program?
  - (a) What differences did you notice?
  - (b) Do you notice differences in how they act at home or school?
  - (c) Can you give examples?
  
11. Would you say being a part of the music program impacted your child's life?
  - (a) How has it impacted their life?
  - (a) Has it impacted how they are at home or in school?
  - (b) Can you give examples of why you think this?
  
12. Do you think the music program is important for your child?
  - (a) Why do you think the music program is/isn't important?
  
13. Before we end this interview, is there anything else you would like to say about you or your child's experience with the music program?

## Appendix H

### **Script for Instructors**

Welcome,

Thank you for coming to take part in this focus group. My name is Brittany Howell and I am a student at Memorial University. I'm doing a Master of Science in Pharmacy under the co-supervision of Dr. Lisa Bishop and Dr. Stephen Darcy. This project is titled The perceived impact of a community-based music program on youth self-esteem and well-being.

Before getting to the questions I will briefly explain my research. I am interested in how participating in a music program impacts youth. I feel instructors' perspectives are very important in answering this question. Your participation in this study is voluntary and your responses will be kept confidential. Any names or identifiable information you mention will be removed during the transcription process. No identifiable information will remain in the report. The focus is expected to last about an hour depending on how much we talk about each question. If you do not wish to answer any specific question, you are not required to. Feel free to skip any question by not adding any input or simply stating you do not wish to answer. This focus group is voluntary and if you would like to withdraw at any point please let me know. Just as a reminder, this conversation will be audio-recorded.

Before we start, I am going to review some guidelines for the discussion:

1. Because we're audio-recording, please try to speak one person at a time
2. Please remember that there are no right or wrong answers, just different points of view.
3. It's okay if you don't agree with other people's opinions, as long as you are respectful of them. It is more helpful to us if you present your own ideas rather than comment on someone else's views.
4. All the data collected will be shared with others, but the identity of everyone who participated will not be shared with anyone. Try not to mention any specific names. If you do accidentally say any names, they will be removed during the transcription process.
5. I would like to keep your participation as confidential as possible. Please do not repeat anything that has been said during the focus group to others outside of the focus group.
6. Please talk to each other. My role as a moderator will be to guide the conversation.

Do you have any questions before we start?

1. How long have you been involved in Strong Harbour Strings?
  - (a) when did you begin teaching music?
2. What are some things you like about the music program?
3. What are some things you dislike about the music program?
4. Tell me about what it means to be a part of “Strong Harbour Strings?”
5. What do you think it means for the children to be a part of the music program?
6. What do students learn at Strong Harbour Strings?
  - (a) Can you give examples?
  - (b) How does this affect them?
7. How do you feel that participating in a music program impacts the children?
  - (a) Do you notice any differences in the children after being part of the program?
  - (a) Why do you think this?
  - (b) Can you give any examples?
8. Do you notice any changes in the way children view themselves as they participate in the music program?
  - (a) What changes do you notice?
  - (b) Can you give any examples?
  - (c) Do you notice any differences in their confidence?
9. Have you noticed any changes in the way children interact with others as they participate in the music program?
  - (a) How do they interact with other students?
  - (b) How do they interact with instructors?
  - (a) Can you give some examples?
10. Do you think this music program is important for youth?
  - (a) Why or why not?
  - (b) Can you give any examples?
11. Before ending this interview, is there anything else you would like to add about your experience with the music program and how it impacts the youth you teach?

Appendix I



Interdisciplinary Committee on Ethics in Human Research (ICEHR)

St. John's, NL, Canada A1C5S7  
Tel: 709 864-2561 [icehr@mun.ca](mailto:icehr@mun.ca)  
[www.mun.ca/research/ethics/humans/icehr](http://www.mun.ca/research/ethics/humans/icehr)

ICEHR Number:	20192353-PH
Approval Period:	January 11, 2019 – January 31, 2020
Funding Source:	Personalized Medicine Initiative [administered by School of Pharmacy]
Responsible Faculty:	Dr. Lisa Bishop, School of Pharmacy
Title of Project:	<i>The perceived impact of a community based music program on youth self-esteem and well-being</i>

January 11, 2019

Ms. Brittany Howell  
School of Pharmacy  
Memorial University of Newfoundland

Dear Ms. Howell:

Thank you for your correspondence of January 4, 2019 addressing the issues raised by the Interdisciplinary Committee on Ethics in Human Research (ICEHR) for the above-named research project. ICEHR has re-examined the proposal with the justifications and revisions submitted, and is appreciative of the thoroughness and clarity with which you have responded to the concerns raised by the Committee. In accordance with the *Tri-Council Policy Statement on Ethical Conduct for Research Involving Humans (TCPS2)*, the project has been granted *full ethics clearance* to January 31, 2020. ICEHR approval applies to the ethical acceptability of the research, as per Article 6.3 of the *TCPS2*. Researchers are responsible for adherence to any other relevant University policies and/or funded or non-funded agreements that may be associated with the project.

The *TCPS2* requires that you submit an Annual Update to ICEHR before January 31, 2020. If you plan to continue the project, you need to request renewal of your ethics clearance and include a brief summary on the progress of your research. When the project no longer involves contact with human participants, is completed and/or terminated, you are required to provide an annual update with a brief final summary and your file will be closed. If you need to make changes during the project which may raise ethical concerns, you must submit an Amendment Request with a description of these changes for the Committee's consideration prior to implementation. If funding is obtained subsequent to ethics approval, you must submit a Funding and/or Partner Change Request to ICEHR so that this ethics clearance can be linked to your award.

All post-approval event forms noted above must be submitted from your Researcher Portal account by selecting the relevant event form from the *Applications: Post-Review* link on your Portal homepage. We wish you success with your research.

Yours sincerely,

Kelly Blidook, Ph.D.  
Vice-Chair, Interdisciplinary Committee on Ethics in Human Research

KB/th

cc: Supervisor – Dr. Lisa Bishop, School of Pharmacy

Approved  
 Kelly Blidook  
 Vice-Chair, Interdisciplinary Committee on Ethics in Human Research  
 St. John's, NL, Canada A1C5S7  
 Tel: 709 864-2561  
 Email: [kblidook@mun.ca](mailto:kblidook@mun.ca)  
 www.mun.ca/icehr