Master's thesis

NTNU
Norwegian University of Science and Technology
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The Social and Educational Experiences of Syrian Children in need of Special Support in Norway: A Qualitative Study with Children and Parents.

Master's thesis in MPhil in Childhood Studies
Supervisor: Anne Trine Kjørholt
May 2022

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List of Acronyms

BUP - Barne- og ungdomspsykiatrisk poliklinikk. (Child and adolescents' psychiatric clinic).

ESCWA- The United Nations Economic and Social Commission for Western Asia.

PPT - Pedagogical-Psychological Service.

UNCRC -The United Nations Convention on the Rights of the Child.

UNCRPD - The Convention on the Rights of Persons with Disabilities.

UNESCO- The United Nations Educational, Scientific and Cultural Organization

UNICEF- The United Nations International Children's Emergency Fund.

WHO - World Health Organization.

Abstract

Each year, many immigrant children join the Norwegian society, and among them, there is a considerable number of children in need of special support due to disability, language barriers, or learning difficulties. However, the social and educational experiences of those children need further investigation. Therefore, the primary aim of this thesis is to explore, through conducting a qualitative study, the social and educational experiences (i.e challenges, motives) of Syrian children who are living in Norway and in need of special support. The thesis applies an understanding of children’s life stories following a qualitative approach, by implementing, interviews, observational and participatory methods. The overall goal is to investigate the motivations that aid in the development of a sense of belonging to a new culture and, adjustment to the educational system. By using children's voices as a guiding source of data, we can bridge the gap between children's lived experiences, parents' knowledge, and inclusive policies. The children's own perspectives and voices regarding their social experiences in terms of the sense of belonging; and educational experiences in terms of interventions, difficulties, and motivations, were examined through qualitative participatory research with Syrian children aged 10 to 18 in need of special assistance. Furthermore, the perspectives of children’s parents were further investigated by conducting semi-structured interviews. The thematic analysis approach was followed to analyze the data. Overall, children are having positive experiences at school but poor social life. Findings indicate that Syrian children and their families in Norway have varied emotions about their quality of life. The origins of these conflicting feelings appear to be related to language barriers, contradictory cultural traditions, a lack of understanding of how to accept and comprehend the Norwegian child welfare system, and a lack of transparency about some of the issues they experience owing to a fear of being misunderstood by the child protection services in Norway. The main contribution of this thesis is that it combines children's and parents' views in an attempt to get a thorough insight into children’s lives. It advocates for a greater understanding of how various institutional and cultural factors impact the lives of immigrant children in Norway, and it calls for open and transparent collaboration among children, parents, and stakeholders.

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Chapter 1. Introduction

1.1 Introduction

My thesis aims to explore, from multiple perspectives, the experiences of Syrian children in need of special support and their families who are living in Norway. Five key areas were investigated: everyday life, school life, social experiences, interventions, and challenges. The thesis is theoretically based on the social constructionism approach as described in the childhood studies field of research and on intersectionality theory as a way of understanding how diverse elements interact and affect children's lives. Semi-structured interviews were conducted with parents of five Syrian children in need of special support. Activity-based interviews and participatory methods were implemented with the group of children, in addition, observations during my working time as a teacher with immigrant children, were reflected upon in the analysis.

The thematic analysis approach was followed to analyze the data. 11 themes and subthemes were identified based on the perceptions of the groups interviewed, and my experiences working with children in Norway.

Whereas the perspectives of children are the core concern, I also recognize the value of the perceptions of their parents and therefore I aimed to combine both views.

1.2 Problem statement

While some individuals want to move to improve their life prospects, others are forced to escape and seek refuge in other regions of the globe. Children are the most vulnerable in both cases, and when we consider children with impairments, the vulnerability is multiplied (Arfa et al, 2020). People move to Norway for a variety of reasons, including seeking shelter (23%), education (5%), work (35%), or family reunion (39%) (Rosnes & Rossland, 2018). A substantial number of immigrant children arriving in Norway have a variety of special needs and impairments. The Norwegian government has made it a priority to promote a more equitable and inclusive society. As a result, additional research on the social and educational experiences of children who require special assistance due to a disability or minority status is required.

Several studies have looked at the experiences of immigrant adults with disabilities (Lien, Nafstad, & Rosvold, 2008; Soldatic & Fiske, 2009), as well as immigrant parents raising a child with a disability (Arfa et al, 2020; Berg, 2015; Mangrio & Persson, 2017; Piérart et al, 2020; Söderström, 2014). Children's voices, on the other hand, are underrepresented in the literature (Ajodhia, 2019; Jordan & Prendella, 2019).

“Disability is an evolving concept and results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others”. (UNCRPD, 2006, Preamble). Disability has consequences that go beyond occupational functioning, affecting social connections, personal conduct, and educational success, making it difficult to keep friendships and succeed in school.

Upon migration, individuals struggle on different levels. To start with, they lose their social capital which is the sum of resources that the individual or the group of individuals obtain as a result of solid relationships, this loss leads to a status of social isolation and segregation (Bourdieu,1986; McMichael & Manderson, 2004). The lack of social capital negatively affects the sense of belonging and quality of life (Tough et al, 2017; Wærdahl et al, 2017). People of all ages have an innate need to be a part of social groups and establish relationships with others. The term "sense of belonging" can be defined as “A shared sense of socially constructed meaning that provides a sense of security or relatedness, unique to the individual and deeply personal” (Sedgwick & Yonge, 2008, p.3). One of the most serious problems faced by immigrant children is the lack of belonging, which leads to a loss of social identity (Mahar et al, 2013; Nette & Hayden, 2007). Social identity is “the aspects of an individual's self-image that derive from the social categories to which he perceives himself as belonging” (Tajfel & Turner, 1986, p. 277). Migration can deprive children of a balanced and normal upbringing while also increasing their risk of experiencing distress (Pace & Sen, 2018). Language barriers, disability, and other learning difficulties, on the other hand, are risk factors for stress and withdrawal (Porcelli et al, 2014).

Starting corrective and inclusive initiatives, one should first question children about their actual experiences and worries by conducting inclusive participatory-based research. The objective of this thesis is to assign credibility and significance to children's voices and viewpoints, regardless of their varying epistemic abilities.

1.3 Research Approach

1.3.1 Research Aim

The goal of my thesis is twofold, to investigate the social and educational experiences of Syrian children in need of special support and to gain insights into the experiences of raising a child with special needs in Norway. I'm particularly interested in combining children's viewpoints with parents' perspectives to understand children's challenges and motivations as well as their parents’ experiences and perceptions that could influence inclusive initiatives. The thesis follows a qualitative approach through which I obtained information from children using a mix of participatory methods including diaries, photovoice, and activity-based interviews. Furthermore, semi-structured interviews were conducted with the parents. Following the thematic analysis approach, I structured the analysis in a number of eleven themes and subthemes. The themes were chosen in light of the data derived from participants, previous related studies in the literature, and my reflections.

1.3.2 Research Questions

Main research question:

What are the social and educational experiences of Syrian children in need of special support as perceived by children and parents?

Specific research questions

How are Syrian children in need of special support experiencing life in Norway?

How are parents of immigrant children in need of special support experience raising a child in need of special support in Norway?

How are Syrian children in need of special support experiencing school in Norway?

What are the perceptions of children and parents concerning:

a) The challenges to social inclusion?
b) The educational strategies/interventions that facilitate a successful inclusion for children?
c) The barriers to accessing information and services?

1.4 Personal interest

My interest in the lives of immigrant children in need of special support stems primarily from my international and multidisciplinary background in education, clinical psychology, and childhood studies. I work as a teacher, and I know how difficult it is to come up with practical techniques for approaching children of different abilities. In addition, I studied clinical psychology and wrote a thesis about the social lives of individuals with reading disabilities (Dyslexia). The participants talked about their childhood memories and how they were influenced as adults by different social and educational stresses, as well as motivations. I also completed an internship at an institution that provides psychological support to refugees, Cooperativa Ruah[1]. In September 2019, I began the master's degree program in childhood studies and started volunteering with two different organizations Save the Children Norway and Vision Inclusive[2]. All these events combined, gave me a better understanding of the importance of culture, power structures, and marginalization processes, as well as how people's well-being, experiences, reactions, and interactions are culturally constructed and determined by structural forces that define societies differently and impose constraints on individuals. After joining a group of volunteers at Save the Children in Trondheim, my desire to learn more about the social and educational experiences of immigrant children grew even stronger. I participated in a number of events, and I anticipated that my participation would be of particular interest to Syrian children, and I thought Syrian children might find it easy to engage with me. However, children of different ethnicities were more involved with me, whilst Syrian children were more engaged with the Norwegian volunteers and preferred to make effort to speak Norwegian. My analysis of this situation is that children are more interested in forming ties with locals, which I ascribe to their desire to feel a part of the Norwegian society. However, this is only a personal observation, and I have found that the experiences of immigrant children (particularly those who require special assistance) are not thoroughly discussed in the literature. To summarize, my research is driven by my academic and professional experiences, as well as my deep personal commitment to child well-being and sincere desire to give children a voice.

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[1] http://www.cooperativaruah.it/

[2] https://visioninclusive.org/

1.5 The structure of the thesis

The thesis is divided into six chapters.

Chapter 1 is the introduction in which the topic of the thesis, my motivation for choosing the topic, the objectives, and research questions are presented.

Chapter 2 clarifies the background of the thesis, the reason for choosing the term "in need of special support", an overview of disability in the Arab world with a focus on Syria, and finally presents information on migration and disability in Norway.

Chapter 3 presents the theoretical framework of the thesis. I discuss here ideas related to the social studies of children and childhood, children's participation rights, the limits to children's participation, children's agency, and intersectionality theory in which my thesis is grounded. I finally clarify the Relevance of the theoretical perspectives to my thesis

Chapter 4 is about methodology including information about the qualitative approach, reliability and validity, methods, recruitment process, field entry, my role in the field, reflexivity, data collection process, methods used for data collection, fieldwork process, and ethical considerations.

Chapter 5 is the analysis chapter. Here, I present and discuss the analysis of my theses in connection to previous studies.

Chapter 6 introduces concluding remarks**,** recommendations for further research, and highlights the limitations of the thesis.

Chapter 2: Background

2.1 Introduction

This chapter is divided into three sections. The first one includes a clarification of the term used in the title of the thesis "in need of special support" and the rationale for its selection. The second section focuses on current beliefs and attitudes toward individuals with disabilities in various Arab nations, as well as cultural understanding, social conditions, and educational services for people with special needs in Syria. The information offered regarding disability in Syria is intended to provide a general picture of the pre-war period. This thesis did not attempt to broaden the scope of this inquiry to incorporate information concerning disability during and after the Syrian crisis. This is because the situation is still critical in Syria, and I could not find related research. The third section explains the situation of immigrant children in need of special support in Norway and mentions some of the resources that are accessible to them.

2.2 Terms and definitions

2.2.1 Children in need of special support

Various theories describe disability in different ways. The two dominant models are: (a) the social model, which is the result of disability rights organizations founded in the 1970s. This model views disability as a social construct, and thus there are social barriers such as attitudes and discourses that disable and exclude people with special needs from full participation in society (Begnum,2016). Meaning that, just as there are cultures of disability that " act as a means of politicizing and cohering disabled people" (Barnes & Mercer, 2001, p.517), there are also "disabling cultures" that have a restricted view of disability and place limitations on people's potential (Tajo, 2019). (b) In contrast to the social model, the medical model views the problem of exclusion to be a problem inside the disabled individual and defines disability as any health disorder that produces psychological or physiological dysfunction (Begnum,2016). When it comes to special needs, the relational perspective sees them as socially generated, whereas the categorical approach sees them as pathological deviance (Haug, 2014).

The term disability is defined by the United Nations Convention of the Rights of Persons with Disabilities (UNCRPD) as:

> “long term physical, mental, intellectual or sensory impairments, which in interaction with various barriers may hinder [the person’s] full and effective participation in society on an equal basis with others” (2006, Article 1).

The above-mentioned definition of disability transfers the focus of the definition of disability from a medical to a social perspective, and this is also the aim of using the term “in need of special support” which is adopted in this thesis. It refers to children who require more assistance due to a medical condition (physical or chronic sickness) as well as social and contextual factors (migration, minority status, and language barriers).
Another reason for choosing this term is culturally derived. Individuals with impairments are stigmatized and labeled in the Arab world, and the term "disability" has a negative connotation. Therefore, the term “children in need of special support” is chosen to be used in this thesis instead of children with disabilities since the focus of the study is Syrian children and families.
Finally to mention here is that the term "children in need of special support" is used in the white paper NO.6, which focuses on early intervention and inclusive education in kindergartens, schools, and out-of-school-hours care, to refer to a group of children who do not or cannot follow mainstream education and are thus entitled to special needs supports, including children from national and international minorities, children with special needs, and children with disabilities (White papers no 6, the Norwegian parliament, 2019-2020).

2.2.2 Inclusion/Integration

For a while, teachers and academic researchers used the phrases inclusion and integration interchangeably (Hodkinson & Devarakonda, 2009; Vislie, 2003). After the Salamanca Statement on Principles, Policy, and Practice in Special Needs Education, which was adopted worldwide in 1994, the two names began to be differentiated (Vislie, 2003). The notion of integration in Norwegian education has a long history, and its origins in educational institutions may be traced back to the institutionalized segregation of children and young people who do not fit into the mainstream community, which did not serve core values of equality. In Norway, however, the term "inclusion" was first used in 1994 in connection to the UNESCO Salamanca Declaration (The Norwegian Government, Nou

2009-18). The primary distinction between the two phrases is that integration aims for social equality and defines equality as the right to be part of a society, whereas inclusion implies that equality is the right to be different (The Norwegian Government, NOU 2009-18).

The term "inclusion" is used in the context of this thesis and refers to the act of involving all children, regardless of their ability, in mainstream schooling and social life. The term "inclusion" describes a setting in which all children feel secure, valued, and have a sense of belonging. It is a necessary practice for safeguarding diversity and ensuring democracy (White papers no 6, the Norwegian parliament, 2019-2020).

2.3 Disability in the Arab world

According to the most recent figures published by the United Nations Economic and Social Commission for Western Asia "ESCWA," Arab countries have a low percentage of disabled individuals when compared to the rest of the globe. However, the data in the study are inaccurate since individuals are afraid of being stigmatized if they disclose their impairment; also, security instability in the Arab world, internal conflicts between nations, and high migration rates cause the number to fluctuate regularly (ESCWA,2018).

The Arab world is divided between prosperous nations with a high standard of living and disadvantaged ones plagued by war, conflict, and economic difficulties.

The degree to which people with disabilities suffer varies by country, depending on the state of the economy and safety conditions; however, cultural understanding and how people perceive and respond to disability is negative across Arab countries, and people with disabilities have a lower quality of life, literacy rates, educational attainment, and employment opportunities (ESCWA,2018; Azar & Badr, 2006;Hussein & Taha, 2013).

In other words, disabled individuals in Arab nations confront difficult situations, particularly women and children, who are subjected to a double bind of persecution (Scalenghe, 2004). Stigmatizing attitudes and behaviors, such as social distance from persons with mental health difficulties, have been documented in Arab-speaking nations, in addition to religiously based stigmatizing ideas about God's punishment (Zolezzi,2018).

All ESCWA member states have signed the Convention on the Rights of Persons with Disabilities since 2006, and have shown a growing commitment and interest in improving the living conditions of this population since then. However, the situation for persons with disabilities remains far from being adequate, and they remain one of society's most underserved groups (ESCWA,2018).

There has been a notable growth of NGOs and government action in the Gulf nations to offer services for persons with special needs, with more facilities intended to suit their requirements in restaurants, public transport, and streets. However, the issue persists in Arab people’s lack of understanding of dealing with persons with special needs in addition to the sentiment of guilt, reluctance, and doubt that are common when a family member is classified as handicapped or in need of special assistance. Because of their feelings of humiliation and rejection, families are hesitant to seek the treatment their children require because they prefer to keep it secret.

2.4 Syria

Since the participants are from Syria, a brief introduction of disability definition, legislation, educational interventions, and societal understanding will be presented further. The goal is to provide an overview of the social and educational circumstances of Syrian children in need of special support and services provided in Syria.

2.4.1 Disability in Syria

According to the Syrian constitution (2012), a disabled person is someone who is unable to live freely and secure the basics of life owing to a genetic or acquired deficit in physical or mental ability. This definition is consistent with the medical approach of disability analysis.

2.4.2 Policies, rights, and education in Syria

On June 13, 1993, the Syrian government ratified the UNCRC and ratified the UNCRPD in 2009, two years before the Syrian crisis. However, initiatives to include children with special needs date back to the early 1990s, when members of the Ministry of Social Affairs and Labor visited several schools in Jordan and Egypt that were implementing inclusive strategies, and when the Ministry of Education and UNESCO collaborated to hold workshops and courses on inclusion in various schools (Mansour & Alawad, 2012). A national committee for inclusion was created by the Ministry of Education in 2000. In 2001, this committee attended Lebanon's first regional conference on children with special needs and visited many schools to learn about their inclusive programs.

A national conference on the inclusion of children with special needs in formal regular schools was held in March 2002. This conference inspired decision-makers in both the Ministry of Education and the Ministry of Social Affairs to implement inclusive strategies, and the inclusion project was launched (Ministry of Education et al., 2005). Syria had good partnerships with international non-profit organizations like UNESCO and UNICEF at the time, and those organizations expressed their commitment to providing the help required to ensure the success of the inclusion initiative. Also, the Syrian Organization for the Disabled, a civil non-profit organization, was founded in 2002 with the goal of raising disability awareness and spreading knowledge about disability, as well as provide rehabilitation services (AAMAL, 2017). Different schools in each city were equipped with the required facilities and specialists to implement the inclusion project, and these schools were chosen based on the area's needs. The inclusion committee of the Ministry of Education, which is made up of psychiatrists, social and psychological counselors, assesses and diagnoses children before they are accepted into the school. Mild to moderate cases, such as physical, hearing, and speech difficulties, as well as some cases of mental and psychiatric problems, hyperactivity, autism, and persons with Down syndrome, are accepted by the committee (Mansour & Alawad, 2012).

Syria's educational system is regulated by the government, and all residents are entitled to free education (Kabbani & Salloum, 2010). The educational system is separated into two parts: primary school (ages 6 to 15) and secondary school (ages 16 to 18). Syria's current constitution, which was adopted on February 27, 2012, specifies that education is compulsory and free in primary school (grades 1-9), free but not compulsory in secondary school (grades 10-12), and university education needs minimal tuition (Syrian constitution,2012).

The educational roles and institutional frameworks are rigid, putting huge pressure on Syrian students who want to attend public colleges. Students' lives are to a large extent determined by the ninth-grade national test, which decides whether they may enroll in general or vocational secondary schools. After completing the 12th-grade national test, general secondary students can apply to public universities, but vocational secondary students can only apply to 2-year technical schools known as intermediate institutes, and they have a harder time finding work after graduation (Kabbani & Salloum, 2010).

Legally speaking, in the field of primary and higher education, the Syrian constitution states that individuals with disabilities have the right to be assessed by specialists and provided with the education they require, whether in formal schools or special institutions, and it is the ministry of education's responsibility to protect those rights (Mansour & Alawad, 2012). In higher education, students with physical impairments have priority in obtaining accommodations, and they are also given priority in admission to some university fields, such as the humanities. People with special needs receive a 50% discount on public transit, and specific seats near the entrance are reserved for them.

2.4.3. The social level

Data about disability and the social challenges faced by people with special needs in Syria are difficult to obtain due to societal stigma and a scarcity of research (Thompson, 2017). Nonetheless, it is critical to investigate the social dimensions of disability, since both the understanding of disability and the construction of children and childhood are dynamic and socially constructed (Dew et al,2020). Therefore, I sought some answers in that regard when talking to the parents about their experiences of raising a child with a disability in Syria. What they mentioned regarding attitudes towards people with disability in Syria was consistent with findings of other studies in other Arab countries in that disability is perceived as a condition that bears religious and cultural stigma (Further information will be discussed in the analysis chapter). This is despite the fact that the general attitudes to people with special needs are improving and social media platforms nowadays in Syria are full of examples of children who excelled despite having a disability.
Being a Syrian myself, and having worked as a teacher in Syria, I have experienced that in Syria, like in many other nations, particularly in the global south, the child is regarded as a future investment. Having a disabled child limits parents' expectations of their child's future potential and is commonly dealt with tragically. People are afraid to talk about disability because of stigmatizing ideas and practices. Furthermore, some families are afraid of disclosing the presence of a disabled child because, for example, they believe it would hinder men from proposing to their daughters, or that the person with a disability is a bad omen within this family, and a bringer of bad luck. Within Syria, however, there is a great deal of variation, and having a child with a disability can also be viewed as either a blessing or a test of patience from God, or as God's will (Dew et al,2020). As far as I experienced in Syria, accepting mental and intellectual impairments is generally the most difficult, but children with other forms of physical, hearing, or visual difficulties who are capable of academic success are praised.

2.4.4 Barriers to a the successful inclusion in Syria

According to pre-war studies, despite the efforts made to implement an inclusion project in Syria's kindergartens and schools, the project's effectiveness was limited by a number of challenges. The most serious issues include a lack of proper teacher training, which makes it very hard to provide the appropriate assistance, the Ministry of Education's lack of follow-up measures, and the lack of parental engagement and involvement (Mansour & Alawad, 2012). The inclusion of children with special needs in regular schools without preparing the school and educational staff adds burdens on the teacher and creates chaos among the children because the child who requires special assistance draws the teacher's attention away from the other children, and this process results in a delay and decline in overall educational achievement (Ossi, 2018), which is a priority in Syria. The curriculum and activities offered within the context of general education do not correspond to the requirements of children with special needs in terms of content. A large number of children in the classroom makes it difficult for the teacher, no matter how skilled, to provide equal care to all of them (Ossi, 2018). Furthermore, not all schools have the resources needed to implement inclusive strategies. While each city has a number of inclusive schools and institutions, most parents choose to enroll their children in the closest school available, due to financial constraints, which may or may not be prepared to meet their children's needs. This was the condition prior to the crisis; but, owing to war-related factors, it became more difficult to address the requirements of those children after 2011. This problem has gotten a lot of attention and UNICEF cautioned that in the absence of a solution to the Syrian crisis, children with disabilities are among the most vulnerable populations, at risk of being ostracized and forgotten.

In other words, in addition to the war-related reasons, and the shortage in the number of specialists to carry out the assessment and implement the necessary inclusion strategies, there are cultural and religious barriers. Some families struggle to accept the fact that their child is different and in need of special assistance and others deal with the situation with much privacy by keeping their child distanced from others.

2.5 Norway

The thesis fieldwork was conducted in Norway, a welfare state that is well-known for its extensive efforts to ensure the best possible conditions for children to grow up in a safe and inclusive environment. Below is a summary of disability definitions, legislation, educational approaches, and societal understanding of disability in the Norwegian context.

2.5.1 Disability in Norway

The social-relational model of disability is dominant in Norway. It shifts the focus from the medical factors to the societal factors of disability. Accordingly, disability is seen as the result of the physical environments that aren't appropriately suited to different levels of ability (Bufdir, n.d). The Convention on the Rights of Persons with Disabilities (UNCRPD) which Norway ratified in 2013 is the framework for disability policy and legislation. The CRPD marks a fundamental paradigm change in how people with disabilities are viewed. The Convention was developed as a consequence of a robust global disability rights movement, and it approaches disability from a rights-based perspective. It challenges the so-called "social welfare" paradigm, which views disabled persons as care recipients (Crock, McCallum & Ernst, 2011, p.1). I have not been in Norway for a very long time now, but almost three years living and working here were enough to understand that a primary goal in Norway is inclusive education, which provides equal opportunity to empower children regardless of their individual differences, abilities, disabilities and cultural background. Accordingly, early interventions and inclusive strategies are essential to ensure that children can achieve their ambitions. Norway is investing in professional development in kindergartens, schools, and psychological services. All municipalities in Norway have the obligation to provide intensive tuition to children who need it. The aim is to guarantee that all children feel included and able to achieve their full potential (White papers no 6, the Norwegian parliament, 2019-2020).

2.5.2 The Norwegian welfare state and services for children in need of special support.

Allowing families with special needs children to enjoy regular lives and alleviating additional burdens is an uncontested cornerstone of the Norwegian policy. Children who require special assistance enroll in inclusive daycare centers and regular schools, where they are encouraged to participate in recreational activities with other children (Traustadóttir et al, 2015). Children in need of special support are entitled to receive a special provision in Norwegian schools, this includes children of minority backgrounds as well as children with disabilities (Haug,2014). It is difficult to list all of the services available to children in Norway but to name a few, children from minority language groups are provided with a variety of inclusion-oriented services. Newcomers to Norway who are of school age, for example, are offered the opportunity to participate in an introductory program in which they get an adapted educational curriculum and assistance, known in Norwegian as "innføringstilbud". The goal of the education offered through this introductory program is for students to learn Norwegian as quickly as possible so they can be able to follow the ordinary education in Norwegian schools. Furthermore, when children from linguistic minorities begin at regular schools, they are offered the option of having a mother tongue teacher "morsmålslærer" (The Norwegian Directorate of Education, 2013). The mother tongue teachers' job is to assist children who do not have sufficient competence in Norwegian through private teaching hours during school time or by attending lessons with them in the classroom and clarifying instructions using both the mother tongue and Norwegian.

There is also the Pedagogical-Psychological Service "PP-tjeneste," which provides assistance to children and adults who need special support due to psychological or physiological difficulties. In addition, the PPT service assists kindergartens and schools in providing special education for children with special needs. The Norwegian Education Law (1998) states:

> "Each municipality and each county municipality shall have an educational-psychological service …the service shall assist the school in the work with competence development and organizational development in order to facilitate the education for pupils with special needs. The pedagogical-psychological service shall ensure that an expert assessment is prepared where required by law". (The education law,5-6).

Another example is the "Barne- og ungdomspsykiatrisk poliklinikk BUP," the child and adolescent psychiatric care. BUP is a service to assist children under the age of 18 with their mental health. It is provided to children and families who are dealing with a variety of issues that are impacting their daily lives. In such circumstances, doctors, psychologists, educators, social workers, and other professionals investigate the case and are held accountable to make a decision regarding the help that the child needs. BUP collaborates with children's caregivers who are crucial to them in their everyday lives, such as parents or school teachers. Cooperation is always done with the approval of the individual in question and his or her guardians, whether they are parents or other adults who live with the child (The Norwegian Directorate of Health, n.d).

However, due to cultural differences, stereotypes among service providers, language barriers, and marginalization, the educational and social services for immigrant children with special needs start later and take longer (Arfa et al, 2020). Studies show that the deviant behavior is frequently linked to the child's immigrant origin, resulting in a delay in evaluation and action, which has negative consequences on the accessibility of health care services and the success of inclusion programs (Arfa et al, 2020). Because immigrant children are not a homogenous population, individualized interventions and multidisciplinary teamwork are required so that health experts, teachers, and social workers can understand how different immigrants encounter and respond to various obstacles (Arfa et al, 2020).

2.5.3 Immigrants in Norway

The number of immigrants and Norwegian-born to immigrant parents in Norway in 2021 is estimated to be 997942 which is equivalent to ~18.5% of the Norwegian population (Statistics Norway, 2021). These cultural and demographic shifts make it necessary to investigate the level of inclusion and the overall situation of immigrants in Norway. Successful inclusion has a long-term positive impact on the well-being of immigrants which is a fundamental goal and leads to positive outcomes for the host country (Keles et al, 2017). Immigrants in Norway have the same rights as Norwegians to receive free education, access to health and other welfare services, but still, they are less likely to get the advantages of such a situation. For example, surveys show that the use of primary health care services is less among immigrants in Norway compared with non-immigrants, this is mainly due to language and cultural differences (Fadnes et al, 2016). Immigrating to a new country entails facing different challenges and adaptations issues, those issues get more complicated when the cultural differences between the country of origin and the host country are huge such in the cases of non-western immigrants from Arabic or refugee backgrounds migrating to Norway (Dew et al, 2020; Hagelund, 2005). Without a doubt, this accumulative stress will have an impact on children, since they are directly impacted by their parents' experiences. Immigrants are expected to adapt to the norms and satisfy the expectations of the host nation while maintaining a balance of their own cultural values for effective inclusion. This is particularly challenging in cases of conflicting cultures, and children are often the ones who suffer the most in such situations (Keles et al, 2017). One of the concrete and practical actions Norway has taken to promote the inclusion of refugees is the implementation of a mandatory two-year introduction program, which is a financial and educational program in which salaries are contingent on participation in a full-time training program aimed at allowing members to become self-sufficient and integrated members of society. The program also provides training programs based on the individual's area of expertise; however, the diversity of language or employment training courses varies by municipality, which can be helpful for some but leaves others struggling to either change their major or end up being unemployed (Hagelund, 2005).

2.6 Summary

Cultural sensitivity and providing sufficient information on different services available to immigrant families residing in Norway, preferably in their mother tongue, are required due to significant cultural differences and the incomparable situation between services offered in Norway and services available in developing countries. It is important to consciously acknowledge the diversity of the population in order to establish a thorough understanding based on the individual differences and to ensure that all people have equitable access to available services (Gender Equality and the Discrimination Ombud,2011).

Chapter 3: Theory

3.1 Introduction

In this section, I will elaborate on the theoretical frameworks within which my thesis is grounded. It is guided by the social studies of children and childhood, the social constructionism perspective on children and childhood, and the intersectionality theory. Most research on childhood and disability often take a biomedical or individualistic approach through which disability is viewed as an abnormality. This thesis aims to give examples from Norway as being one of the countries that have made conscious efforts to create a just and inclusive society for children. This is to highlight the fact that the experiences of disability are influenced by the context, the societal factors, and the culture within which the individuals live.

3.2 Childhood studies

For a long period of time, children's lives have primarily been observed from the perspective of their caregivers. Inclusive, participatory, and child-focused approaches to understanding children have developed and been influenced by the social studies of children and childhood that emerged in the 90th. (James & Prout, 1990). Inspired by the sociology of childhood studies, the lives of children are now approached and understood differently. The traditional socialization theory's ideas were discarded, and child-centered approaches were implemented and praised. Children's viewpoints and ideas began to be recognized, and an increasing number of academics pushed for seeing children as social actors whose voices and thoughts must be heard and taken into account (Nilsen,2015; Alderson & Morrow, 2011; Nieuwenhuys, 2006; Prout & James, 1990).

In the socialization theory, children are regarded as investments for the future, as adults in the process, and childhood is a transitional stage leading to maturity. This future-oriented approach to perceiving children was challenged by childhood studies scholars for ignoring the present of children's lives (*being*) in favor of focusing on what they will (*become)* (Nilsen, 2015; Qvortrup, 2009). Another critique of the socialization theory by the childhood studies field is related to the way socialization theory considered children as passive with no power or ability to exercise agency, immature, and irrational. The childhood studies paradigm, on the other hand, regards children and childhood as being constructed socially, and participating in the process of constructing and reconstructing the society and the world around them, they have agency, and the ability to influence the world. Furthermore, childhood studies oppose the individualistic approach to conceptualizing children and childhood, favoring the study of children's lives with respect to their relation to adults (Alanen;2009), family (Mayall,2009), peer culture (Corsaro, 2009), societal variables such as race, gender, or ethnicity (Connell, 1998), and wider political and structural forms (Qvortrup,2009; Punch et al,2007). The childhood studies paradigm opposes seeing childhood as a universal phenomenon and challenges developmental psychology theories for treating children as a homogeneous group. In addition, the concept of a universal child or childhood has been supplanted with the concept of "*childhoods*" which respects a plurality of children's experiences that change throughout time and space (Qvortrup,2009). To put it another way, in the framework of childhood studies, there is a greater emphasis on researching "*ideas*" about children's lives rather than "*facts*", dismissing by that any fixed notions about children as a natural, a homogeneous, or a comparable group (Qvortrup,2009).

3.3 Children's participation

The childhood studies paradigm attributed a great value to children's voices, and children's rights to participation have become an integral element of the research ethical rules (Abebe, 2009; Bell, 2008; Ennew et al, 2009; Van Blerk & Ansell, 2007). Furthermore, children's perspectives, agency, and active involvement began to be valued in the design, planning, and evaluation of many programs and policies (Alderson & Morrow, 2011). As James (2007) points out, giving children's voices such significance was a direct reaction to and a rejection of the negative passive ways in which socialization and developmental psychology treated children. In line with the childhood studies premises, also, the United Nations Convention on the Rights of the Child, adopted in 1989, has affected how children are approached in research. One of the convention's key principles is children's rights to participation which along with the right to protection and the right to provision constitute central themes in the CRC "The three Ps". Article 7 of the UNCRC emphasizes the significance of respecting children's opinions and voices in a way that ensures their active involvement in matters that are important to them. The following is taken from the article 7:

> "States Parties shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, on an equal basis with other children,

> and to be provided with disability and age-appropriate assistance to realize that right." (United Nations General Assembly, 1989).

However, as Nieuwenhuys (2006) points out, talking about an international norm of children's rights is not always promising, and the basic assertions of the children's rights framework aren't necessarily applicable in all circumstances. Also, this international discourse on children's rights is not solely connected to the childhood field but is linked to political and economic agendas. National discourses on children's participation and related initiatives aimed at improving children's rights as citizens have played a prominent role in Norwegian policies since the mid-1980s and are linked to a variety of discourses and goals beyond the sphere of children and childhood. For example, the development of Norway's image as a democratic society and creating sustainable local communities are intimately tied to promoting children's participation and empowering their voices (Kjørholt, 2002).
Respecting children's rights entails appreciating their perspectives on the world as significant complements to our understanding as adults, and this is not accomplished by just offering them the space to talk (Goethals, De Schauwer & Van Hove, 2015). Despite hopeful attempts, children continue to be vulnerable, and their stories are not prioritized (Ogden, 2014). As a result, there is sometimes a disconnection between reality and the goals of fostering an inclusive society for children with special needs. In other words, while considerable research has been done on immigrant children with disabilities and inclusion at the national and institutional levels, children's voices still need to be heeded. Research that goes beyond generalization to reflexively examine each human being's uniqueness and originality is needed (Tateo, 2015; Goethals, De Schauwer & Van Hove, 2015). Promoting children's sense of belonging and maintaining high-quality inclusive education for minority group populations require efforts to comprehend children's social and educational experiences, showcasing the obstacles as well as the aspirations by seeking their perspectives and listening intently. In instances where obtaining children's perspectives is difficult owing to disability or other obstacles, one should strive to reflect and talk transparently about the challenges in presenting children's lives (Goethals, De Schauwer & Van Hove, 2015).

3.4 The limits of children's voices

The childhood studies paradigm is not without flaws as it requires a great level of sensitivity to the complexities, and ethical considerations associated with engaging children as social actors in research. Despite the aforementioned principles and objectives, academics are still struggling to portray children's voices objectively (Woodhead and Faulkner, 2000). Furthermore, international studies that are linked to the right of participation mostly apply a normative criterion of understanding children and childhood and therefore are not sensitive to the socioeconomic, and political forces in the context where the child lives (Kjørholt, 2015).

The way children are approached in research varies depending on their social position, the researcher's perspective, as well as children themselves, who are intrinsically different from adults in terms of, for example, vocabulary comprehension, power, or living conditions (Punch, 2002). Also, Spyrou (2011) mentions other factors that hinder giving a voice to children, for instance, the child's shyness and degrees of self-confidence, as well as the researcher's own bias and preconceptions about children. Moreover, children's voices are understood, translated, and conveyed by adults and those processes of translation and interpretation are not neutral. In what James (2007) calls the *"pitfall of authenticity,"* it is suggested that academics are vastly underestimating the complexities of depicting the livelihoods of children. However, reflexivity, critical thinking, and cultural sensitivity are factors that contribute to increased objectivity (Christensen, 2004; James 2001; James, 2007; McNamee and Seymour,2014; Solberg,1996). According to Berger (2015), reflexivity is defined as a continual internal conversation and critical self-evaluation of the researcher's position in research, as well as consciousness and awareness of the effect of this position on the research process, objectivity, and quality. Reflexivity is the process of interpreting one's own interpretation and looking at one's own perspective from a different angle. Reflecting on how diverse positionalities affect knowledge generation has the potential to construct a careful depiction of reality in childhood and disability studies (Goethals, De Schauwer & Van Hove, 2015).

3.5 Agency

Robson et al, (2007) define agency as the individuals' skills and competencies to act and play active roles in fulfilling social and economic tasks in society. According to Robson et al, (2007), agency is dynamic, contextual, and relational. Children's confidence and skills, the environment in which the child resides, the time, and the adults who exist in the environment, all influence children's experience of agency. Childhood studies field of research views childhood as a permanent social construction, and children as active members and contributors (Qvortrup,2004). According to this viewpoint, it is critical to acknowledge the child's agency as it is a part of the social world and children's ideas, behavior, and practices have the potential to impact the society's structure. Children and adults are all affected by the same societal factors, albeit these forces have distinct effects on them. Meaning that children should not be overlooked or assumed to have the same conditions as adults merely because they live in the same house or community, and research with children should aim to analyze their distinct experiences and admit their agency (Qvortrup,2004).

3.6 Social constructionism

According to the social constructionist perspective, children are regarded as a social group whose lives are shaped socially and their conduct is regulated and steered by adults (James & Prout, 1990). Therefore, children's positions vary across different cultures and are influenced by different discourses, societal and global power relations, and those factors should be considered when researching the lives of children. Social constructionism takes into account not only the cultural aspects but also the wider socioeconomic dimensions which operate in different contexts and impact children's lives (Kjørholt, 2004; Jenks,2004).

Among the first scholars who mentioned that children and childhood are socially constructed is Phillippe Ariès, in his studies, he mentions that children were depicted as miniatures of adults throughout the Middle Ages, and it wasn't until the sixteenth century that children were acknowledged as a distinct group from adults. Ariès relied on visual art, suggesting that pictures portrayed children as miniatures, and this reveals a lot about how childhood was viewed and regarded (Gittins, 2009; Ariès, 1982).

Going back in time, there are three primary ways of conceptualizing childhood and children. The puritan perspective, in which the child is regarded as being born immoral, reflects Christian theological ideas, and the emphasis is on discipline and creating the moral self (Hobbes); second, the child as, *tabula rasa,* a blank slate, and with proper education, a decent individual can be developed (John Locke). Third, is the romantic viewpoint, which sees the infant as fundamentally pure (Rousseau) (Jenks,2004).

Power relations and the different discourses that are dominant in different societies impact the way children are constructed. The concept of discourse was developed by Foucault, and it refers to the series of assertions that define how people use language to describe a phenomenon, and these assertions influence how people behave (Foucault, 1995). That is to say that various discourses about childhood and children in a certain society have distinct impacts and influence how people think about and treat children. Another factor that affects the degree and scope of power that children may wield is the global power, in which the world’s classification of countries into minority and majority worlds (Punch et al, 2007)

Children do not constitute a homogeneous group and there are many different discourses circulating in each culture that shape and add meanings to children’s lives, also there are institutions such as schools that exercise control over children (Foucault, 1995). Discourses regarding children's vulnerability, for example, are spreading and influencing how children are viewed, and inspire the design of different tactics for monitoring and regulating their lives under the guise of protection. However, as Foucault affirms, where there is power and control, there is also *resistance*, meaning that children could actively act and engage in the process of reproducing and reshaping the dominant ideologies and practices (Qvortrup, 2009).

3.7 Intersectionality

The concept of intersectionality was first introduced by the American law professor Kimberlè W. Crenshaw and has been mostly used in gender research. Intersectionality follows a non-reductionist approach which argues that different dimensions of social lives and socially constructed categories (i.e children, women) cannot be understood in isolation from other social dimensions (i.e disability, immigration, age, gender) (Crenshaw, 1991; Moodley & Graham, 2015). Intersectionality theory has also been adopted in some disability studies by arguing that factors of disability should be looked at within wider socio-cultural boundaries (Goodley, 2013). Also, it has been adopted in studies of age and gender. Taefi (2009) emphasizes that female children being minors and girls are subjects to multiple marginalizations as their oppression is exacerbated by a combination of gender prejudice and authoritarian tendencies. The adult and masculine control dominates their lives, and it is strengthened by societal traditions that increase the suppression of the young girls’ entitlements.

There is a danger in disability research of allowing the status of having a disability to take precedence over other relevant factors such as age, gender, or culture; hence, an intersectional approach can help to avoid the links between all the above variables being neglected (Goethals, De Schauwer & Van Hove, 2015).

A multidimensional approach to understanding disability is an important tool for critical reflection and analysis in social science. The individual’s stories need to be seen in interconnection to other power relations that control societies. Also, Alanen (2016) points out how the lives of children are structured intersectionally and impacted by different axes of power, and such a frame of reference in understanding children’s lives is in line with the social studies of children and childhood which pushes to contextually analyze and observe the diversity of children's lives and admits the existence of a plurality of *childhoods*.

Being a child with a disability is a double disadvantage, and being an immigrant just adds to the vulnerability. Experiences of re-settlement negatively interrupt children's development and prevent them from enjoying their childhood (UNHCR,2019). The interaction of the different variables (age, disability, migration) is a predisposing factor for social and educational maladjustment (Czapka & Sagbakken, 2020). For the topic of this thesis, intersectionality theory helps to understand how age, disability, and minority status intersect and shape immigrant children's experiences.

3.8 The Relevance of the theoretical perspectives to my thesis

The ideas and concepts discussed above shaped how I approached the participants, as well as how I formulated the analysis and the discussion. The childhood studies paradigm influenced me to see the uniqueness of each experience and to concentrate on the plurality of *childhoods*, meaning that, even though the participants in my thesis share common characteristics and belong to the same ethnic and linguistic groups, I was conscious of not making pre-judgments or think about them as a homogeneous group and aimed to approach each family with openness and curiosity. In fact, the stories and events in each narrative were all unique.

Also, because the participants in my thesis are immigrants who do not live in their home country, social constructionism theory was very relevant to my work because it was necessary to be sensitive to how different concepts and phenomena such as children's participation, disability, and agency change contextually, and to use this point of view to understand participants' experiences.

Having the right to participate and acknowledging children's agency as guiding principles also helped me to avoid seeing parents' replies as final and definitive, and listen intently to children and highlighting the differences and similarities of the different viewpoints.

Finally, intersectionality theory strengthened my knowledge of how many aspects are interconnected. It provided me with valuable insight into how various variables interact and affect people's lives in a variety of ways. It served as an analytical method to investigate the complexity of the participants' experiences.

As a result, with those theories and notions in mind, I attempted to find the balance between being sensitive and aware of various characteristics and circumstances but remaining open and free of preconceptions.

3.9 Summary

There are different aspects that make the group of children targeted in my thesis more vulnerable as their special needs intertwined with other dimensions of vulnerability including age and minority status. On top of that, children's voices are multi-layered, complicated, and challenging to depict, especially in the case of children in need of special support who might be unable to express their thoughts, thus, communication with parents becomes a primary and an essential resource of information. Nevertheless, in such cases, it is important to not take the adults' viewpoints for granted and to examine the many dynamics and variables that may have an influence on the narratives of the research participants. By bringing intersectional attention to the notions of special needs, age, and migration, in addition to adopting the social constructionism perspective, and the concepts of agency, discourse, and power as described in the social studies of children and childhood I was inspired to be self-critical, to listen well and to be aware of how children navigate the world and are regulated by intersecting systems and most importantly to analyze the impact of my personal characteristics throughout the process of conducting and writing my thesis.

Chapter 4: Methodology.

4.1 Introduction

The study's goal is to learn about how Syrian children in need of special assistance experience life in Norway, using a qualitative approach that includes interviews, observation, and participatory methods as data gathering methods. This chapter describes the process of recruiting informants, the groups of informants, and my position as a researcher during the fieldwork. In addition, I describe the study methodology, methods I applied to obtain data from participants, the reasoning for choosing each method, and the pros and cons of using them. The ethical implications, as well as validity and trustworthiness concerns, are also discussed.

4.2 The qualitative approach

The purpose of this dissertation is to investigate the social and educational experiences of Syrian children with special needs living in Norway, by listening to the views of children as well as the perceptions of their parents.

Accordingly, a qualitative approach through which participatory methods (interviews, visual-based methods, written-based methods, observation) were implemented with the group of children, and semi-structured interviews were used with the group of adults. I chose the qualitative design as it provides a unique insight into one's thoughts and experiences, as well as a search for complexity and depth of viewpoints and ideas (Hamilton & Bowers, 2006). On the other hand, Children from a variety of backgrounds, interests, and capacities can be meaningfully included in research using mixed participatory techniques (Grant, 2017).

I planned to meet with each family two or three times rather than conducting one-time interviews. This was useful as it allowed me to evaluate my methods and questions on a regular basis, as well as to analyze the situation and modify my approaches according to the informants' preferences. Having the opportunity to spend extended time with the participants allows researchers to have a deeper understanding of their experiences than one could get from a one-time interview (Punch,2002).

4.3 Reliability and validity

Evaluating validity and reliability in qualitative research is complicated and fraught with different viewpoints (Winter, 2000). The term ″reliability″ refers to:

> The extent to which results are consistent over time and an accurate representation of the total population under study is referred to as reliability and if the results of a study can be reproduced under a similar methodology, then the research instrument is considered to be reliable. (Joppe,2000, p. 1 as quoted in Golafshani, 2003)

The idea of reliability as described in the above-mentioned definition is applicable to quantitative methods (Golafshani, 2003). However, ensuring rigor is a requirement in all research approaches (Morse et al, 2002); but instead of using the terms validity and reliability, qualitative researchers employ words like *"credibility" "trustworthiness," "value,"* and *"consistency"* (Brink,1993). In this thesis, I clearly explained the study's objectives, I introduced myself clearly and openly, and aimed to build rapport with participants. Also, I responded to the participants' questions as swiftly as possible, and I was always accessible for any necessary elaboration. Furthermore, participants' actual quotes were used to support each theme mentioned in the analysis, which all together supported the credibility of the research process and interpretation.

On the other hand, according to Leung (2015):

> Validity in qualitative research means "appropriateness" of the tools, processes, and data. Whether the research question is valid for the desired outcome, the choice of methodology is appropriate for answering the research question, the design is valid for the methodology, the sampling and data analysis is appropriate, and finally the results and conclusions are valid for the sample and context. (P.3).

The qualitative approach used in this study was appropriate for achieving the study's goal of comprehending the participants' everyday experiences. Even though the study's sample size is small, the participants willingly shared a wealth of information and openly expressed their opinions. Furthermore, having the study as exploratory in nature, there was no bias in finding and classifying the themes because the goal is to investigate and explore the participants' experiences rather than to validate a theory or a presumed hypothesis.

On the other hand, Patton (1999) says that to improve the quality of the analysis, the researcher must be clear and precise in describing all the details of the research processes, in that regard, I attempted to provide as many details as possible explaining the different steps I followed including the reason for choosing the topic, the recruitment process, my role in the fieldwork, and how each method was implemented.

Moreover, triangulation of data sources and data collection methods were means to improve the study's validity (Ennew et al, 2009). The information was acquired not just by using various methods, but also through several groups of informants (adults and children). Parents were invited to participate in semi-structured interviews, while children were encouraged to participate in a variety of visual, written, and verbal participatory activities.

4.4 The fieldwork

I will next explain the recruitment process, the characteristics of the participants, the research site, the methods, and the role I took as a researcher.

4.4.1 Recruitment process

A purposive sample strategy was used to recruit participants who fulfilled the inclusion criteria of being Arab-speaking children aged 10-18 years old, in need of special support to be able to follow the mainstream education, not born in Norway, and having parents with immigrant origins. Initially, the goal was not to focus on Syrian children; instead, the goal was to recruit informants from various Arab nations. However, snowball sampling resulted in getting the agreement of five Syrian families with children in need of special support to be the informants in my thesis.

The recruitment procedure was the most difficult part of my thesis research. I must admit that I was frustrated at times and was on the verge of changing the subject. But I'm glad I didn't, and credit for that goes to my supervisor, who helped me to control my frustrations and to maintain progress.

The challenges began in March 2020 due to the increased restrictions owing to the COVID-19 pandemic. My thesis proposal at the time was to conduct field research in the non-profit organization *Save the Children* in Norway, which had banned all physical activities due to COVID at the time. However, I had some optimism that the situation might improve during or after the summertime, which was the time planned to start looking for participants.

In the months that followed, the COVID situation became increasingly alarming, and progress was difficult to be achieved with so much ambiguity and all the duties of the new digital lifestyle.

However, I didn't give up and, with the support of my supervisor, I endeavored to contact Save the Children in August 2020. I had a number of online meetings with people working at the organization in Oslo and Trondheim, and they demonstrated the intention of supporting my topic, but I couldn't get an answer as to when, where, or with whom I could begin.

Time passed with little progress, and I saw that some of my classmates had changed their themes and started working on a theoretical-based thesis. Then I came to the realization that I needed to make some adjustments as well, and so, I had to abandon my plan to do fieldwork with Save the Children. I requested the help of my supervisor to contact someone who might assist me in locating participants in Trondheim municipality. Thanks to her assistance I was able to contact the leader of the municipality's health and relief services for children and young people "Helse-og avlastningstjenesten for barn og unge".

I met with the leader and presented my thesis idea to him, and he assisted me by sharing the information letter with some families.

After more than a month went by without a response because of the pressure and the social distancing due to COVID, I had to figure out different means to find participants (this was at the end of October 2020).

Then I had to think differently and use the safest means available at the time to stay in touch with others, which was social media. I joined a Facebook group for Arab immigrants in Norway, where I shared information about my thesis, and I invited people to contact me if they believe they match the inclusion requirements.

Negotiations with a number of mothers resulted in the identification of one family that met the criteria for participation. This family's mother graciously assisted me, and she is credited for helping me in reaching four other families who eventually participated in my thesis.

The data were collected during three periods, the first of which was from mid-November to mid-December in 2020. The second session took place in January 2021, while the final period took place in March 2021. This, again, was due to COVID-related circumstances as well as the fact that I moved from Trondheim to Bergen.

After moving to Bergen, I felt more at ease because I had obtained the families' consent to participate in the thesis. I also attempted to seek the assistance of the municipality of Bergen in order to locate additional families, but the corona situation was critical at the time in Bergen, and my efforts were unsuccessful.

Starting some discussions with the families, I discovered that they are sharing thick information, therefore after consulting with my supervisor, we agreed that the rich data supplied by five families can be sufficient for the purposes of this thesis.

4.4.2 Sample

The sample of this study consists of five families which I regard as two groups. The first group includes children between 10-18 years old receiving special support at schools. The second group includes the children's parents. In qualitative research, the total number of participants is hard to be decided in advance, thus, reaching a saturation point was the guiding principle (Guest et al, 2006; Mason, 2010). Details about the children's condition, age now and upon arrival, gender, family composition, and parents' level of education are described below:

Pseudo names	**Age upon arrival to Norway**	**Age now**	**Gender**	**Condition**	**Family**	**Parents' education**
Sara	11	15	girl	Chronic Disease	1 younger brother	Bachelor (both)
Lucas	10	13	boy	Speech difficulty	1 older sister	Bachelor (mother). High school (father)
Noor	09	13	girl	Mobility impairment	2 older siblings	High school (both)
Lama	08	12	girl	Learning difficulties	2 younger siblings	Bachelor (mother). High school (father)
Rami	08	11	boy	Chronic Disease	2 older siblings	High school (both)

Table.1 (Information about the participants)

4.4.3 Field entry

Fieldwork was carried out in Trondheim as all the families were living there. I had the information letter and two versions of the informed consent ready before contacting them, one for the children, and the other for the parents (see appendices), in three different languages: English, Arabic, and Norwegian.

First, I called each family and gave them background information about myself, my thesis, and why I was contacting them. The mothers in each family were the first people I spoke with, and it was through them that I learned about the family's composition, the child's special needs, and age. They all appeared to be positive, encouraging, and keen to help.

I emailed the parents the information letter and the informed consent sample after gaining an initial verbal acceptance over the phone. Two families phoned me back a few days later to say they agreed to join in the thesis research on the condition that their children's meetings cannot be recorded.

I made it clear that their approval did not imply that their children had to participate and that we needed to have children’s permission as well. The other three families, on the other hand, did not respond to my emails. I didn't want to annoy them, so I waited a few days for them to contact me.

However, they did not reply, so I had to phone them back. This time, I noticed considerable hesitation about the idea of recording discussions on audio. They refused to allow me to record meetings with them or with their kids, and I had no option but to accept their request because of the time constraint and the difficulty in reaching out to institutions that could assist me in finding families owing to the COVID situation. However, I informed them that I would be taking notes throughout our meetings without adding their real names or personal information that might allow them to be recognized in the event that my notebook was lost, or any other unfortunate event occurred. Rather than recording the experiences, I made comprehensive notes during and soon after meetings to document all that happened using a standard observation and notes sheet (see appendices).

The houses of the families served as the research location. There are benefits and cons to conducting research at home. It was advantageous in the sense that the children are familiar with the setting and are in a secure atmosphere. However, the presence of their parents, both directly and indirectly, may had an influence on their responses. Nevertheless, having the opportunity to meet them several times helped in building rapport and gave me the chance to be with the children without the parents’ attendance.

4.4.4 My role in the fieldwork.

I met each family several times (see table 2). I hoped to establish a rapport with the families and to be transparent with them, so I answered all their questions, even those that weren't directly relevant to the thesis but were more about my migration and life in Norway. Such, I can state that during the first meeting, I was the one who spoke the most, and I did not consider this a waste of research time since I believed it helped to establish trust and comforted them to disclose information about their lives as I genuinely did so first.

I asked the parents to invite the child during the first visit so that he or she may get more comfortable talking to me. In line with (Punch, 2002), I don't see studies with children as being fundamentally different from research with adults, thus my goal with both groups was to build a *friendly* role, or what Mandell (1988) refers to as the *least adult role*.

Problems with power imbalance and paternalism can be resolved by acting differently from other adults and taking on the smallest adult role feasible (Christensen, 2004).

As a result, rather than being a leader or controller over the discussions, my position was that of a facilitator and I participated in all the activities as children did, so I brought photos about my life, wrote lists and was a partner in the (Hei) tool (see appendices).

However, given the age difference, the power imbalance between me as an adult and the children is worth noting, since it adds to the difficulty of designing and conducting ethical research (Ennew et al, 2009; Abebe & Bessell, 2014; Abebe,2009). Also, other characteristics, such as race, class, or gender, may increase power differentials in the child-researcher connection. In this sense, I feel that doing this research in a country where I am also a foreigner mitigated the negative effects of such power imbalances since we both face the same challenges related to the fact of being new to the country and to its culture and language. I was careful not to influence their responses or how they completed the methods by mentioning that there are always different ways to complete the methods and that there is no right or wrong answer. Also, I listened intently and did not interrupt them at any time throughout their talk. I encouraged them to ask me follow-up questions, and I took an interactive and participant role by participating in the activities as well. In addition, I dressed simply and spoke in a straightforward manner. I was also attentive to the parents, willing to offer information about my life that they sought, respectful of their generosity in sharing their experiences, grateful for the time they spent with me and offering my help if needed for something I can help with such as information about the Norwegian Directorate of Immigration (UDI) or resources for their kids to learn Arabic.

As recommended by many researchers, for instance, Christensen (2004), and Corsaro (2009), I tried to obtain a position as a different and unusual type of adult, an adult that does not practice authority over the children and gives them space to express their voices. I also followed what Solberg (1996) refers to as an " *ignorance of age,"* with the goal of increasing reflexivity by putting aside the researcher's preconceptions about children and engaging children based on their actions *(doing)* rather than who they are expected to be as children *(being).*

4.4.5 Data collection process:

To ensure following a methodological approach and covering research questions, I set the theme of each meeting and made a primary plan regarding which method will be implemented, as detailed in the table below,

Meeting	Participants	Goal/Theme	Tools	time
1st meeting	The family	To introduce myself, my thesis and to obtain their consent	Informed consent.	45-60 min
2nd meeting	Parents	Family composition, home country, migration, and social experiences.	Interview guide (See appendices)	45-60 min
3rd meeting	Children	Home country, the child’s everyday life.	❖ Photovoice ❖ lists ❖ Interviews	45-60
4th meeting	Children	Social life.	❖ Photovoice ❖ Diaries ❖ Interviews	45-60
5th meeting	Parents	School, services, and challenges	Interview guide (See appendices)	45-60
6th meeting	Children	School	❖ Photovoice, Lists, Hei tool, ❖ Interviews	45-60

Table.2 (Meetings, tools, and themes)

As mentioned earlier, the fieldwork site was the families' houses. In each visit, I focused mainly on one theme and had some questions pre-prepared in mind to make sure that I do not lose track.

During the first visit, I met all the family members. In this meeting, my aim was to introduce myself and the reason for my visit which is writing my thesis, to answer any questions regarding their participation, and obtain their final consent.

The second visit was with the parents, the aim was to gain an understanding of the child's special needs, the composition of the family, demographic information about the parents, about Syria, and information about the child's character and preferences. During this visit, I asked to invite the child at the end so he or she sees me for the second time, get to know each other more, and explain that I will be meeting him/her next time.

The third visit was the first long individual meeting with the child. I started this first encounter by asking the children if they understand who I am, why I need their help to participate in my thesis, and that their participation is voluntary. My aim of this meeting was to make sure that the children agree to participate and to start building rapport through talking about things we have in common. I brought with me for each meeting some photos, starting the first meeting with photos of my city in Syria, later of my family, and my university in Norway. Using those photos encouraged them to ask me questions and allowed me the opportunity to ask them questions in return without them feeling shy as I used to give examples about my life and ask them to give examples about their lives in return. I also aimed to start that in the first meeting to introduce them to the photovoice activity that I wish them to engage with later. In this meeting, we engaged with the lists tool, and I got information about children's everyday lives, activities they like most or least, and meaningful things they remember about their home country.

On the fourth visit, we engaged in photovoice and diaries and discussed the social life. I used to meet the parents before and after the time I spend with the children, I used this time, to ask questions about a specific theme or to clarify any information. At the end of this meeting, I asked them to prepare photos they would like to share about the time they spend at school or with their favorite ones whether family members or friends.

The fifth meeting, was with parents and we talked about school life, then I talked with the children and explained that we will meet one last time.

The **last meeting** with the children was to talk about school, in this meeting, children brought photos of their school, and we discussed school strategies/things they like and/or wish to be different. Also, we engaged in the (Hei) tool and we talked about feelings, andndifferent pleasant and not very pleasant events. In this meeting, I prepared a letter for each child with a small bag of their favorite goodies as a way to thank them for their effort. I finally encouraged them to write a letter for me and to mention, things they liked the most and the least in their participation experience.

With the child who had speech difficulty, the presence of the mother was necessary most of the time because I did not want to interrupt him or ask him to repeat as this could be stressful for him, so I used to either invite the mother to be present or to take notes and to sit later with the mother at the end of the meeting so she could explain to me things I could not catch.

I was allowed to record two meetings with the parents of two of the families, but not during the rest of the time of data collection. During all meetings, I used to keep my notebook and the standard observation sheet (see appendices) with me to write down quotes and significant information. I took notes during the meetings and directly after going home.

4.5 Methods

Participatory methods serve to foreground children's experiences. Through mixed participatory methods, children with diverse backgrounds, interests, and capacities can be actively included (Grant, 2017). I had the thought that children targeted in my thesis are better approached using participatory methods, but there is a wide range of participatory methods and choosing which to implement with children was not an easy decision, thus, getting information about the child's preferences in advance was very important. So, before designing my methods, I negotiated with the parents, and also the children to get to know the child's preferences for example writing, drawing, talking, or photographing. As mentioned earlier, 4 of the children who participated in my thesis did not have speech or intellectual-related difficulties so verbal communication was not an issue, hence, activity-based interviews, open dialogues, and discussions were the main methods for data collection. Nevertheless, I had to think of ways to encourage them to speak and reduce the feelings of shyness they might have. In that regard, participatory methods served as engaging tools for promoting dialogues and giving a direction to the conversation. One child had a speech difficulty, so with him, written-based tools were of great help, and with the help of his mother, I could clarify any ambiguities. Children were encouraged to take part in a mix of visual, written, and verbal methods with respecting their preferences and verbal competencies. Triangulation of methods is an effective approach for comparing similarities and disparities and reflecting on them before making the final conclusions (Grant, 2017).

4.5.1 INTERVIEWS

Semi-structured interviews were the main methods for data collection with parents and were also one of the methods used with children (See appendices). A semi-structured interview is a type of interviews in which the researcher follows an interview guide as a point of reference that allows keeping track of important points but also leaves the opportunity to ask and answer additional questions that were not prepared in advance (Brinkman and Kvale, 2009).

Interviews are used in a wide range of research fields as data collection tools that have the potential to unveil rich data and to understand the world as the interviewee explains it. The effectiveness of the interviews is determined by a variety of elements, including the environment, the participants' mood, willingness to communicate during the interview, and, most crucially, the interviewer's abilities, expertise, and pre-assumptions (Brinkman and Kvale, 2009).

The researcher should be conscious of his or her role and impact throughout the interview time. According to Brinkman and Kvale (2009), the researcher can play one of two roles during the interview: "*a minor or a traveler*". While conducting the interviews, I assumed the role of *a "traveler".* I aimed to enter the interviews with my preconceptions about the topic set aside and to regard the participants as experts in their lives whose words should be listened to attentively and interpreted carefully through seeking clarifications. However, I was also a part of the knowledge construction process by formulating conclusions and then highlighting the themes of the interviews.

In addition, the sequence and structure of the questions play a significant effect in motivating people to talk. It might be tough to design and decide on interview questions, and they should be thoroughly examined and evaluated. Short, unambiguous, open-ended, and non-leading questions should be the goal of the researcher (Ennew et al, 2009). Adapting research methodology and rephrasing interview questions should also be a continuous activity. The researcher should be self-aware and adaptable enough to make required adjustments as needed (Brinkman and Kvale, 2009).

To ensure that the questions were appropriate, I discussed them with my supervisor and conducted a pilot interview with a friend who is a mother of a child with special needs and thanks to her I paraphrased, deleted and added questions.

During the interviews, I was conscious of being a good listener and allowing enough time for participants to discuss each topic. As a result, the interviews with both groups were more like an open, non-formal dialogue in which I listened, clarified questions, responded to questions I was asked, and sought clarification whenever I didn't understand.

On the other hand, I did not do question-and-answer interviews with children; instead, I performed activity-based interviews. So, to build communication, I employed participatory-based methods (described later in this chapter). That is, I began each interview with the children with an activity, which was very helpful in breaking the ice and establishing rapport with them. It also helped to make the process of taking notes a more spontaneous and natural process, as we all had papers, pens, or other tools with us during the meeting time.

My time with participants can be described as spontaneous, open, genuine, and always ended with generously offering great Syrian dessert or food.

4.5.2 Diaries and lists.

Some children can be more comfortable expressing their ideas through writing (Grant,2017; Ennew et al, 2009). The written methods I used, were writing diaries and lists as well as writing descriptive essays about an agreed-upon atopic. Writing diaries requires detailed recordings of every day’s events, and feelings (Punch, 2002); while writing lists requires listing down a few keywords or short sentences about a given idea or question.

Written tools help to get more detailed information on the places, events, and people who children identify as important. Writing gives more time for further and more detailed reflections. This helps to understand children’s social and everyday experiences (Ennew et al, 2009).

All children chose to engage with writing lists and 2 of them wrote diaries and descriptions. Topics explored by this tool were related to concerns, feelings, activities they like\dislike in relation to their daily lives, and social experiences at school.

Each encounter began with asking how they were doing, how their day went, and whether they were in a good mood to speak. The first tool I presented was making lists. This is because Photovoice and diaries require pre-preparation by the participants, and the (Hei) tool requires more talking, and confrontation, so I chose to keep it until the last meeting. Also, creating lists takes less work and time. And so, in different meetings, children were asked to write lists about one or more of the following:

1) Things they enjoy the most at school.

2) Things they enjoy the least at school.
3) Things they like doing at home.
4) Things they like doing outside.
5) Things they wish to have/do.
6) Things they miss in their home countries.

At the end of the first meeting, I showed some photos of my life and introduced the photovoice and diaries tools. I also presented them the option to write essays that describe one of the following topics:

1) Moving to Norway (see appendices)
2) Friendships.
3) Free topic of their choice.

4.5.3 Photovoice.

Photography is widely used in qualitative studies as a method for data collection. Photovoice is increasingly implemented across a variety of research fields including childhood studies. This method entails asking them to bring photos related to the theme of the research and afterward seeking children's clarification of the photo, the reason it was taken, and other related details (Johnson,2011). Photovoice was a golden tool in my thesis, and all children engaged with it very positively, so it ended up being a part of each meeting. I did not provide cameras to the children as they all could use their mobile phones' cameras and they also showed me some old photos. At the end of the first meeting, I introduced this tool and asked them to prepare some photos about a topic of their choice out of some ideas I suggested to them. I told them that they can print the photos out or bring them on the phone, laptops, or whatever way they prefer. I also told them that they should not take or show pictures of others without asking their permission. Photovoice guided most of the dialogues and I aimed to repeat it because they liked it, and as it could be implemented using resources that children have used before and are familiar with, which increased their engagement and enjoyment. Photographs have the potential to reveal the intimacy of children's most significant places and moments (Ennew et al, 2009).

Children were asked to take photos of:

1) Places where they spend their time in a typical week.
2) Their favorite people/trip/activity/place.
3) Places they miss in their home country.
4) Free choice

4.5.4 (Hei) tool.

Sharing information about emotions, thoughts and situations can be difficult, but using this tool (see appendices) facilitated the discussion. This tool is known in Norway and used at health centers, and schools to encourage students to talk about their experiences.

I found it very useful as it was interactive, easy to implement, and served as a stimulation tool. Such stimulation materials motivate people to communicate their feelings and challenges (Fargas-Malet et al, 2010).

This tool was developed by Kristin Sommerseth Olsen and Guro Winsnes (two psychologists who are specialists in clinical child and adolescent psychology) as a tool to facilitate talking with children. The tool contains 75 different questions that are written on colorful cards. The questions are about what does the person like or dislike and about situations that one has experienced. It has flexible roles and could be used with children of different ages (The health station store, n.d). It facilitates talking about things that could be difficult to find a suitable occasion to talk about.

I wanted to make sure that the meeting ends with talking about positive events so I come up with the role that at the end of using this tool each of us would ask a free question that is not necessarily related to questions written on the cards or it was possible to ask to do or to tell a fun thing, talk about favorite singers, movies or the like. I used this method in the final meeting, this is because I wanted the children to be comfortable talking to me and answering the questions written on the cards and I thought that this could best happen at the end, and after spending several meetings with them.

4.5.5 Observation

I started working as a two-languages teacher in Norway in August 2021. My job is to teach Arabic-speaking children and to explain, the Norwegian concepts that are used in different school subjects so that they can follow ordinary lessons. Also, I am often present at various meetings and have a role as a translator between parents and Norwegian teachers.

At this point, I had completed my data collection with the families I met in Trondheim earlier. With the chance to work with this group of children while also working on my thesis, I could maybe expand the thesis sample by seeking the consent of some new families, and I found myself observing how immigrant children are having their time at school. However, after talking with my supervisor, we agreed that having one of my students as a participant would be ethically complicated, but that using and reflecting on my experiences and observations is very important.

So, without needing to recruit new participants, my job experiences provided a unique source of knowledge for data analysis, and I began to take notes while observing the larger picture and the various dynamics that play a role in the child-school relationship rather than focusing on individual experiences. I used standard observation sheets (see appendices) to write down my notes containing a description of a situation or an educational tool, my sentiments, and opinions about it, as well as any additional remarks that would be relevant to the analysis of the thesis.

4.6 Data analysis process

4.6.1 Data storage

a. The voice recorder

I sought the consent to use a voice recorder during the meetings, but my request was approved only by two mothers who accepted to record the meetings with them but not with their children. During the time I was allowed to record, I felt more relaxed, as I could give full concentration to the conversation without being worried about not missing vital information. I used to transcript the recordings as soon as possible so I could also add notes about my thoughts, feelings, and reflections on the interviews. No real names were mentioned in the transcriptions, and all are deleted after writing the thesis.

b. Field notes

I informed the participants that I will be taking notes during our meetings and clarified that the notes will be anonymous and used for the purpose of writing the thesis. I used a form that served as an observation sheet (see appendices) in which I wrote, the participant’s pseudo name, the tool used, keywords that help to retrieve information, and direct quotes when possible. After finishing each meeting, I spent time alone reviewing my notes and writing further details as much as I could recall.

4.6.2 Data analysis approach

A theme-centered analysis was used in this study. By definition, “thematic analysis is a method for identifying, analyzing, and reporting patterns (themes) within data,” (Braun & Clarke, 2006, p.79). There are six phases in the thematic analysis:

“1) familiarizing yourself with your data, 2) creating initial codes, 3) looking for themes, 4) evaluating themes, 5) defining and identifying themes, 6) producing the report.” (Braun & Clarke, 2006, p.87).

Even though these stages appear to reflect a linear technique, this method requires a continuous back and forth between the various steps. Thematic analysis is a versatile qualitative method that can be used to answer a wide range of research questions and examine the views and perceptions of the participants (Braun & Clarke, 2006; King 2004; Duncan,2018). It is a source for acquiring the basic skills that a researcher should develop and a tool for performing a variety of qualitative investigations (Braun and Clarke, 2006). A valid theme should represent relative information to the research question (Braun and Clarke, 2006).

As mentioned earlier, two of the families allowed me to record the meetings with them but not with their children. While the other three families rejected any type of voice recording. During all meetings with parents and children, I used to take detailed notes and tried to register all information possible. Then, I used, as far as I return home to sit down and do a voice recording of myself explaining anything I have noticed and commenting on the notes I have taken and that proved to be very helpful in the process of data analysis as I could relate the keywords and written notes I have taken with further comments I mentioned while recording myself.

I went through different resources of data I have multiple times in the first phase of the thematic analysis process to become familiar with the information supplied by the participants, and preliminary notes were taken down. Following that, I wrote initial codes. “Codes identify and provide a label for a feature of the data that is potentially relevant to the research question,” (Braun and Clarke, 2006, p.88). Following the initial coding, the data linked to each possible theme were gathered and combined, followed by a thorough evaluation of the data to generate comprehensive themes based on the viewpoints of the participants. Following that, some quotes from the participants were documented to support the identified themes, and each theme was given a distinct title.

4.6.3 Reflexivity

Reflexivity is an essential technique to conduct ethical research, it's about rethinking one’s position as a researcher and one’s interactions with the participants (Connolly, 1998). Reflexivity is not a one-time event; it is a continuing process that researchers should keep in mind throughout the research process and be aware of the influence of many factors such as knowledge, background, presumptions, and their role in the formation of knowledge and conclusions (Berger,2015; Ajodhia, 2019). Being reflexive also entails reflecting not just on the researcher’s position and preconceptions, but also on the methodologies used and how they were used (Punch,2002).

Attempting to be reflexive I intended to think of my own characteristics, methods, and analysis, and how they may impact the participants and the quality of my thesis. In terms of my characteristics, I believe that being a Syrian was advantageous. This is Because I share the same mother tongue as the participants, so it was much easier for me to establish rapport and grasp their vocabulary and terminology. Although Syrian culture is varied, and there are distinct ideas and discourses about disability and childhood in different places and among different religions and regions, being from the same nation of origin as the participants created a sense of closeness and a comforting atmosphere. I was aware to enter each meeting as an explorer, not as one having ideas to confirm or deny. I regarded the participants as being the experts in their lives and sought their explanations to make sure that my analysis is as objective and reflexive to their perspectives as possible. Further, I used different methods according to the participants’ preferences, and I took notes during and directly after each meeting.

4.7 ETHICS

4.7.1 Pre-research ethics

Before starting any contact with the families, I received the approval of the Norwegian Center for Research Data (NSD) (see appendices). The thesis did not seek medical-related data. Therefore, the approval of the Regional Committees for Medical and Health Research Ethics REK was not sought**.**

It is vital to respect and understand the dynamics of the context in which children live at the time of the research and the context in which they previously lived. The thesis' fieldwork took place in Norway, but the participants were from Syria, which added to the complexity of meeting both formal and informal ethical standards connected to the study's environment as well as participants' backgrounds (Abebe & Bessell, 2014). Not all of the parents were aware of the concept of doing research with children, and it was strange to explain to them that their consent does not imply their children's consent. And that children need to make their own decisions about whether they want to meet with me. I am describing this as challenging because it is popular in the Syrian culture that children follow their parents’ opinions and have little space to decide on such topics. So, I explained to the parents that I do know and understand the culture but that the research ethics require seeking children’s agreement without external influences. And so, before conducting any interviews I made sure that this point is clear and agreed upon.

4.7.2 Informed consent

First, I called the mother in each family to introduce myself, to give information about the thesis, and to know the child’s situation, and verbal or written competencies so I know how to draft the children’s sample of informed consent. Then, the parents received the information letter and two different copies of the informed consent. One to be read and signed by them, and one by their children (see appendices). In the information letter, I explained the thesis’ objectives and clarified how the data will be processed. They were asked to give permission for the participation of their children and explained that the child would choose to agree or disagree.

Different cultures value different principles and these cultural differences should be respected. For example, in seeking consent from participants, I was aware that signing written documents could be problematic for some people. In my thesis, parents preferred not to sign the documents, and I respected their wish after consulting with my supervisor and following the recommendation that in such cases another method of obtaining consent should be sought, such as verbal consent (Abebe,2009; Alderson & Morrow, 2011).

In the first individual meeting with the child, I questioned whether they understand the reason I am meeting with them and explained the activities and asked again if they want to participate or not and whether they have any questions to be clarified. It was emphasized that participation is entirely optional, that they may select what activity or topic they wish to discuss, and that they can withdraw at any moment without having to offer a reason. I read the informed consent to them again, and to make sure they understood all of the terms, I asked them to summarize the topic and aims in their own words, and I verbally obtained their approval.

4.7.3 Privacy and Confidentiality

Since the study is concentrating on immigrant families they were asked about their nation of origin. But no further racial or ethnic data was required. They were told that data would be anonymized from the start of the research and that the participants' names would be changed, and they were given pseudo names. In addition, their request to be unrecorded was of course respected.

They were informed that only me and my academic supervisor could have access to the data, and the collected data will be deleted immediately after completing the analysis. It was assured that the data will be used only for the academic purposes described in the information letter, and that the data will be treated confidentially in accordance with the privacy regulations. It was also clarified that all personal information that can lead to identifying the participants' identities will not be included.

4.7.4 Safety and protection from harm

Although the aim of my thesis is not to seek sensitive information, the families I met are considered vulnerable. Participants were given concise information regarding the study's aims, potential risks, and benefits. It was clarified that there is no direct benefit from participation and that they are the ones who are helping me to write my thesis. The study aims to understand the social and educational lives of Syrian children in Norway to highlight different challenges and motives, but I confirmed that I am unable to provide any solutions to existing problems. The researcher is supposed to provide the support and comfort the participants need but must be careful to not give false promises (Abebe & Bessell, 2014).

4.7.5 Reciprocity

Reciprocity is a way of showing appreciation for the efforts of others. It also improves communication and is a useful tool for balancing power dynamics in the researcher-participant interaction (Diver et al, 2014; Ennew et al, 2009). My interaction with the participants was reciprocal in the sense that not only did they provide information about their lives, but I also answered all of their inquiries, such as regarding my immigration experience and social life. This improved their trust and encouraged them to open out. Furthermore, I offered my assistance in finding information that could be difficult for someone whose language level in Norwegian or English is not good enough. This is in matters related to UDI, language courses, or applying to jobs or universities, my Norwegian language level at the time was not very good but my English could provide the help needed.

Also, I told the children that I would like to do something good for them as they first helped me to write my thesis. So, I helped with some school homework, watched a movie on

Netflix with a child who did not have a Netflix account, and shared materials to learn and improve writing and reading Arabic. For the last meeting, I wrote a (goodbye) letter packed with some chocolate.

4.7.6 Post-Research ethics

I was aware that the participants in my thesis might be experiencing a feeling of exclusion or isolation or have experienced abandonment or loss. In such cases receiving a new form of attention provided by the researchers may be problematic as the children may develop an emotional attachment with them. Accordingly, in fulfilling the ethics of care (Abebe & Bessell, 2014), and because I genuinely cared about them and appreciated the time with each participant, I was careful not to give promises I cannot keep. I told them that they can contact me anytime they want but did not promise that we can meet anytime soon. As recommended by Corsaro and Molinari (2008), when leaving the field after a long-term interaction, the researcher should be careful not to cause any type of harm. Ending the study does not mean that the ties built during the period of research must be cut. It is important to maintain contact as long as it is important to participants' well-being.

4.8 Summary

The thesis followed a qualitative approach with participatory methods, and semi-structured interviews as tools for data collection. Each method has its strengths and limitations, the overall goal was for participants to feel comfortable and encouraged to speak. The fieldwork was carried out at the houses of the participants over which I took the least adult role. Conducting my thesis, I was conscious that ethics should be questioned throughout the research process for developing ethical research. Starting from deciding the topic, the context, and arriving at disseminating the analysis.

Chapter 5: Data Analysis and Discussion

5.1 Introduction

In this chapter, I discuss and present the analysis in light of the theories that guided my thesis and inspired the formulation of the analysis. Also, I connect the findings to previous related studies in the literature. Further, I reflect on how my personal experiences in doing the research and working as a two-languages teacher with groups of children that have many common characteristics with the group of children that are targeted in my thesis have influenced the construction of the analysis and the conclusions. The results and conclusions presented in the next two chapters draw on a rich body of data from qualitative fieldwork carried out in Trondheim municipality also on purposive and non-purposive observation. The main themes identified from the data are: cultural differences, social life, and educational experiences. I categorized the themes to make it clearer for the reader to comprehend how the research questions were addressed; each theme and subtheme represent an aspect that I wanted to investigate through this research. Justification and explanation of the main themes and sub-themes are supported by quotes derived from participants’ answers and are linked to past research.

5.2 Cultural differences

In this section, the topic of discussion will be how Syrian children and their families experience life in Norway considering cultural differences between Syria and Norway, as well as the influence these variances have on parental experiences and children's everyday lives. The primary issues explored were disparities in the construction of childhood and disability, as well as differences in cultural norms and parental practices.

5.2.1 The construction of childhood and disability

In accordance with the social studies of children and childhood, and the social constructionist perspective, the understanding of children and childhood is socially constructed and so it varies across different countries, thus, the cultural and contextual conceptualization and understanding of childhood and disability is essential when researching children's lives ((James & Prout, 1990; Kjørholt,2004; Franck & Nilsen, 2015). Discourses on disability within a society impact the living conditions of individuals who are categorized as such (Pihl, 2002). And so, the construction of disability varies with the variations of these discourses in different places .According to Foucault (1995), the term discourse refers to a series of declarations or claims that indicate how language is used to describe a phenomenon; these claims influence how people act and behave by establishing *truth regimes* that define what is acceptable and what is not. To put it another way, language is not neutral, and while it lacks a material nature, it does have tangible and actual repercussions, and so children's lives are shaped by the dominant discourses, which generate common knowledge, conceptions, values, practices, and expectations (Kjørholt, 2005; Kjørholt, 2004). The differences in the conceptualization of disability between Syria and Norway were repeatedly mentioned by the participants. All parents highlighted the cultural differences in the attitudes towards individuals with disabilities, appreciating the open society, the stigma-free understanding of disability, and the resources available to assist the child.

> *In Syria, we tried, as much as possible, to hide the fact that our child has a special case, we wanted her to live a normal life, and she cannot live such a life if she is labeled as different. But it is different here. Here we know many families who are raising a child with special needs, I am sure this is not because there are more cases here than in Syria, but because here no one hides it here or have to hide it all (Lama's mom).*

Disability, according to the social-relational model, is a situational condition that varies depending on the context, often due to socially generated restrictions, rather than a result of inability (Langørgen et al,2020). As the participants pointed out, discourses on disability in Syria portray people with special needs as helpless, different, and unable to achieve, in contrast to the prevailing social-relational paradigm of understanding disability that exists in Norway.

> *The focus here is not on what our child is lacking but on what qualities he has so they can help him succeed in his own way. We did not have an easy beginning and we are still facing some challenges, but now I can say that being here is a blessing for our child on the long term (Lucas's mom).*

> *I cannot imagine how her life would be if we are still in Syria, there is, if any, very.. very few opportunities for people with special needs to succeed because in Syria, we do not have the same resources nor the advantages of a welfare system (Noor's dad).*

Children noticed the difference as well, noting that they feel more at ease in Norway since they are not under any additional pressure to satisfy teachers' high academic expectations or overwhelming school demands:

> *I like that they ask me if I had a good time during the weekend and if I got time to play or to watch something fun instead of asking me if I studied as my parents do, my parents know that I need more time than my siblings to understand school's subjects and they always wish me to study more (Lama).*

When it comes to the construction of children and childhood, there is a big difference between Norway and Syria. Norway is a leading country in its advocacy for children's rights and was one of the first countries to sign the UNCRC with an emphasis on article 3, the best interest of the child, and article 12 which is on children's rights to participation. In Norway, children are seen as right holders, and a discourse of the competent child is dominant (Kjørholt,2015; Kjørholt, 2005). On the other hand, parents described the general attitudes in Syria as that children should be compliant with adults' orders who know what is best for them. Also, they are seen as dependent and investments for the future, therefore, having special needs that prevent them from succeeding academically and maintaining a safety ground to take care of their parents when they get older is a big concern:

> *I see that the special education teacher and the doctor are more concerned about how he is spending his free time or if has friends outside school, but we do not get much feedback regarding the academic results, I mean...in the end he needs to have a degree...(Lucas's mom)*

However, a discourse on a competent and a right-holder child does not stand alone and is not problem-free; it is entwined with other discourses that define normality and push for more monitoring and assessment, as well as the establishment of the norms of what constitutes a decent childhood (Franck & Nilsen, 2015; Kjørholt, 2005). This may make it more difficult for immigrant families, in particular, to feel as if they fulfill Norwegian society's standards and expectations. Furthermore, while a competent child discourse focuses on being socially competent, forming friendships, and having positive interactions with peers, (Franck & Nilsen, 2015); in Syria, the emphasis is on raising a well-disciplined child who excels academically. This presents a challenge for children with or without special needs to strike a balance between what their parents expect and what the Norwegian culture introduces to them, and to meet the demands of both cultures.

The teacher is happier when I do activities with my classmates, but my mom is happy when I read or do homework, I learn also when I play!
Me: And what makes you happy?
Well, I do not like homework because I need long time to finish (Lucas),

My parents say that I need to study more than the Norwegian kids because I need more time to read and because we speak Arabic at home, and at school they say that I can learn when I talk with my classmates and when I watch Norwegian series, but my parents do not like to see me much watching TV (Lama).

Nonetheless, these discourses have varied implementations that influence children’s lives. As a result, even a discourse on the value of children's participation can lead to more surveillance and control over children's life, because it is ultimately interpreted by adults and the way adults see how the participation right should be practiced. So, it's critical to recognize that the formation of children's positions whether as competent or dependent must be viewed from a relational viewpoint because all persons of all ages do not occupy a single position and they rather constantly fluctuate between being reliant and independent in different situations (kjørholt,2005).

5.2.2 Differences in the cultural and parenting practices:

Parents discussed how parenting practices in Syria and Norway are vastly different. I believe there is a narrow line between providing excellent care for a child and promoting the growth of a dependent personality. In the case of children who require special assistance, parents are concerned that they should devote more time and effort to caring for and assisting their children which might be seen by children as a form of control and extra supervision.

My parents are always afraid whenever we have a trip organized by the school, even when the school confirms that there will be someone to assist me and that the place, for example, is accessible for my situation, they are still worried and sometimes my mom says she wishes she could go with me! imagine me going with my classmates and my mom with me! I am not a child anymore! (Noor)

While this extra attention is intended to help the child, it may also be interpreted by Norwegian standards as impeding children's ability to succeed on their own with the least amount of assistance.

There was a party planned by the school, and I asked my daughter to come at 10 pm, but then her teacher called me to ask if my daughter can stay till 11 pm, I said yes, because I do not want to be understood as I am controlling my daughter, but I was very worried (Sara's mom).

I cannot imagine that my girl will see that it is ok to drink alcohol soon or to have a boyfriend, she will see her classmates experiencing this and I am afraid that she is too young, and given her special condition, she is more sensitive (Noor's dad).

In addition, one of the issues that the parents continually raised was their inability to accept that several people interfere in how they raise their child. In Syria, parents have the greatest authority and influence over how their children may and should live.

> *I feel my child is not only my child, I feel that I always have to consult with many people to make a decision about my child's life. It is either the teacher, the psychologist, or someone working at the municipality. I know that I have to be grateful because they are paying attention to my daughter, but it is just not the way we do it. It is hard to feel that I do not have the final say in things that concern my child (Noor's mom).*
>
> *It is sometimes stressful because I feel that I have to consult with everyone in order to not be misunderstood, and if I do not, maybe I will be perceived as a bad mother and probably Barnevernet will knock on the door (Rami's mom).*

> *Me: but have you experienced any kind of misunderstanding? Or troubles?*
>
> *Not really, because I am careful to follow the roles, but I have heard stories that if the school decides that there is something wrong or the child is not eating or sleeping well, for example, they will inform Barnevernet, and they will come to observe how we are living!*

Each municipality in Norway has a local child welfare service *Barnevernet*; parents, relatives, and children are invited to call them if they have a problem or believe that the kid requires assistance. When a case is reported to Barnevernet, they investigate it and determine whether to assist and how. Further investigation begins with an observation and examination of the home setting, which includes talking to the kid, the parents, and anybody else who has regular interaction with the child. If Barnevernet determines that the kid is not receiving good enough quality care at home, they will develop a counseling plan, assign a support person, place the child in a day-care facility, or offer financial assistance for the child's activities, depending on the severity of the situation. In certain circumstances, by a judicial authority decision, the kid will be temporarily removed from their family and placed with other individuals in their network who they can trust, in foster homes or residential childcare homes. This happens when things don't get better, whether it's because parents aren't caring enough or because a special needs child isn't getting the attention he or she needs (Bufdir, n.d). However, there is a lot of discussion about Barnevernet’s *work,* especially in connection to migrant families, with numerous issues about whether there is prejudice against them or if their children are taken legally (Aure & Daukšas, 2020). Despite the lack of a definitive conclusion on racial disparities or disproportionality in Barnevernet cases, research reveals that immigrant families are more frightened and afraid of Barnevernet’s interference than Norwegian households (Aure & Daukšas, 2020). The speculations around these concerns might create a fear of misinterpretation or unwanted interference. The difference in responsibilities, rules, health, and educational systems between Norway and Syria, as well as the way some people advertise the child welfare organization as having an unjust and discriminatory system, might explain this lack of confidence.

> *I see and read on the internet scary stories about families who have been deprived of their children by Barnavernet, I am not saying that I take all what is on the internet for granted, but there must be a reason for the reputation. I understand that we should follow different standards here, but they should*

> *understand that things take time, and that parents also need help in such situations, so the help should be within the family and for all family members (Lama’s dad).*

However, some of the parents took a less negative position, stating that being able to consult with an expert has reduced the burden of parenting in a new country.

> *My child has a difficult temper, and because of his speech difficulties, he refused to go to school for a while and took a longer time to acquire the language than his siblings. So, right from the beginning, I met with the school and explained that he is very moody and that we want him to go to school and participate in all activities but he rejects, and they understood that. I believe that the fact that we initiated contact with the school built trust between us, and I never felt afraid that my child would be taken away from me, even in times when he was very angry, moody, and had some conflicts with his classmates (Lucas’s mom).*

I have to mention that the parents with positive experiences were the ones who faced fewer challenges related to language as they could speak English and learned Norwegian relatively quicker than others who struggled more in this regard. Therefore, I attributed the disparities in the two mentioned opinions to language barriers and more adaptability and acceptance of the cultural differences. Meaning that language barriers could also increase cultural disparities.

5.3 The Social life

When individuals relocate to Norway, they are exposed to several discourses stating how difficult it is to establish Norwegian friends, how important it is to respect Norwegian boundaries, and how Norwegians require personal space. I am personally against any forms of generalization in terms of social habits and personal qualities, and I learned from the participants' responses that such discourses made it difficult for them to form connections with Norwegians and to feel included. Furthermore, having special needs while also being an immigrant makes socializing even more difficult. In terms of social life, three subthemes were identified: challenges to inclusion, loneliness and friendships of the same ethnicity, and children’s favorite places.

5.3.1 Challenges to the social inclusion

The experience of being displaced and fleeing war-torn places is painful. The limits of the transit period, such as exposure to a new culture and language, impede adaptation and inclusion (Strømme et al, 2020).

We got little attention and our anxiety over the changes that happened in our lives upon displacement and immigration is not fully supported as it should be. Maybe they think that we should feel better once we arrive in Norway, but in fact, we have experienced a new set of challenges upon arrival (Rami's dad).

I feel sad when I see my mom tired; I need her to accompany me wherever I go, things get better after she started to speak Norwegian and we have some friends from Syria who visit us often (Noor).

The first year was very difficult, my child did not have friends and he came every day from school complaining that he does not understand the jokes that other children make (Lucas's mom).

Social support has a direct impact on the well-being of the family, especially in the cases of having a child with special needs (Arfa, Solvang, Berg & Jahnsen, 2021; Jennings, Khanlou & Su 2014). Participants mentioned that being new in the country and not knowing anyone was very tiring. Syrians are social people and social communication in forms of emotional support and solidarity is essential for them as it is for all human beings but maybe to a larger extent for individuals coming from collective societies such as Syria. This part is lacking especially for families who have been in Norway for not so long and have not got the opportunity to master the language or to find a job, and this is creating psychosocial distress for all family members. Theories of social capital developed by Bourdieu (1986), present convincing arguments of how privileged families guarantee a higher quality of social and educational experiences than other disadvantaged and immigrant families. This is because social ties are not only sources of companionship and socialization, but also sources of knowledge and information, which is necessary for understanding and belonging to a new culture (Drange &Telle 2020). Participants talked about the difficulty of building social relationships with locals attributing that to cultural differences and language barriers.

Well, we grew up in a totally different worlds, it is hard for Norwegians to understand our experience in life, and we cannot. There are very few things to talk about. You know… burdens and stresses in life connect human beings, and we do not share the same stressors (Rami's dad).

There are some restaurants and activity centers, but they are expensive, and so one cannot afford to go there more than once a month, and even this one time is boring because we are the same people going together and we have no friends to go have fun with (Noor).

I do not speak English and my Norwegian is improving very slowly, the thing is, it is hard to learn the language if you do not have local friends and it is hard to get local friends if you do not speak fluently and so we have been stuck in this circle for a long time (Rami's mom).

Who would like to spend his Friday evening with a friend that always interrupts the conversation due to a lack of vocabulary?

Me: but have you tried?

Yes, and we ended up talking for an hour about the weather because this is something I can fluently talk about, believe me, you will not be able to understand how difficult this could be because you could speak English when you first arrived here, so you had a way to express yourself with others. And to be honest, it is not only that, there are more reasons.

Me: like what?

You should count to ten before inviting a Norwegian to your home, you can have coffee somewhere outside but inviting Norwegians home needs time, well, in our culture we do that out of respect, we like to cook and enjoy food and good times with others at home without necessarily having to be very close to them (Rami's mom).

Given the essential role the parents have in their children's lives, the effort to improve inclusion at different levels should be directed to both parents and children. Some parents are stuck in their loyalty to their culture, social expectations and understanding of disability and childhood and by doing so they are hindering their children's inclusion and acceptance of their disability, and their new life in a new country.

5.3.2 The Loneliness and friendships from the same ethnicity

Feelings of social acceptance and developing close friendships are highly influenced by the interactions with peers during the child's free time. According to research, school-aged children with special needs have a harder time developing friends and maintaining social relationships than their classmates who do not have special needs. They also have a lower social position among their peers and engage in less leisure and school activities (Wendelborg & Kvello, 2010).

I remember one day I was with my mom at the shopping center, and we saw my classmates eating at the restaurant, I got so angry and sad because no one invited me. I still feel bad when I remember (Sara).

I do have friends, we speak Arabic together, I do not like speaking Arabic a lot, we live in Norway, and we must speak like everyone (Sara).

What about your classmates or neighbors if there are any?

I spend time with them at school, but we do not visit each other, I visit Arab friends with my family because my parents are friends with their parents.

Unfortunately, I had to teach my child to not attach to anyone, I try to teach him to be good with everyone but not to put high expectations that a friendship will last and be very strong. Especially at this age, some of his classmates begin to have girlfriends and he feels sad sometimes because he is mostly alone (Rami's dad).

What children and parents mentioned points out how important it is to build ties with locals and how the lack of feeling of belonging can impact everyday life. Other than the economic capital, cultural capital, social capital, and symbolic capital are examples of different types of capital as explained by Bourdieu. This understanding of capital represents a multi-faceted approach to social phenomena. The cultural capital is made up of the skills, knowledge, privileges, expectations, and social position that education and training provide. The symbolic capital refers to the resources accessible to an individual as a consequence of certain traits such as honor, prestige, fame, and excellent reputation, which are recognized and cherished by community members. The symbolic capital is divided among other capitals and offers its owner a social rank in the group to which he or she belongs. It also gives the individual a voice or an opinion. The third type is the social capital, which is the focus of our attention here. It is defined by Bourdieu as the quantity of real or prospective resources received via the existence of a network of permanent connections based on mutual knowledge and awareness, within the context of membership in a group. It provides mutual trust and strength to each of its members. Bourdieu states that the social environment may be viewed as a multi-dimensional world shaped realistically by the dominance of various types of capital. While economic capital is directly tied to wealth, other types of capital constitute a sort of power in society. Social capital, according to Bourdieu, is a capital of solid relationships that provides individuals with significant support in times of need. Strong connections foster a sense of respect and reputation among group members, making them more successful in establishing and maintaining trust. Members of the group provide safety for one another. Physical and symbolic trade procedures (such as presents and the friendliness of individuals when they meet on the street) are used to preserve social links between members of the group, and these mechanisms both support and seek to adopt and socially institutionalize existing relationships (Bourdieu, 1986).

5.3.3 Children’s favorite places.

Children were invited to either take photographs or make a list of their favorite places where they enjoyed spending time with friends or relatives. The children's favorite places and activities were going to the swimming pool and skiing. When asked about a memorable day or recollection from their time in Norway, one of the children said:

> *I remember the day I finally could ski like my classmates, we created a group and each of us showed their skills and how they could do different skiing moves, It was the first day I felt I have many friends, before, I used to hate the ski tour but then I decided to learn so I can enjoy the time with my classmates, I am happy I did that because now I have a friend who invited me this year to ski with his family (Lucas).*

I must admit that I was not anticipating such responses, considering that skiing is not very popular in Syria. Of course, children in Syria enjoy outdoor activities such as football with neighborhood friends, but this is more common in the summer than in the winter, and this is due to a preference for being outside rather than being directly related to nature as it is in Norway. Swimming is also a summer-related activity, and because Syria has a long hot summer, it is more popular to go swimming during summertime. The goal of asking about their favorite places was not just to discover them and to list them down, but also to gain an understanding of how diverse dynamics contribute to their overall social experience. The ability to share locations and activities with friends contributes to the development of solid friendships. This was supported not just by the examples of children who expressed their good experiences skiing and swimming, but also by the more unhappy experiences of other children who are unable to participate in similar things due to their special needs.

> *I do not have many friends, and, for me, there are not many places to go with friends anyway, I cannot hike or ski like others, so I spend weekends on my own. I can swim but only for a short time, so I do not go with the class to the swimming pool. To be honest, I do not like skiing, I just do not understand how one would enjoy being outside when it is very cold, I think even if I could ski, I would rather stay home (Rami).*

The attachment to nature and outdoor life is linked to the development of a healthy and normal childhood in Norway, which might lead to a sense of exclusion among children with special needs, preventing them from participating in such activities (Nilsen, 2008). Inspired by this viewpoint, I consider children's interactions with nature to be an act of "creating a place to belong," as phrased by Kjørholt (2004). In addition, I view it as an attempt to foster a shared interest, as nature and outdoor activities are highly appreciated in Norway. One of the reasons for their connection to nature stems from the fact that it helps them to form identities and friendships with their Norwegian classmates. This was evident in the way some of them described nature and outdoor recreation as their preferred places and activities, as well as how they felt included as a result of taking part in those activities and excluded when not participating. Meaning that children's choices have social and cultural implications, and they understand the necessity of sharing locations with others in order to build relationships.

5.4 The Educational Experiences

School is where children spend most of their time; it not only provides education but also fosters social ties and introduces children to the country's culture and social standards. School has a significant influence on the child's life, and I saw through interviews with children how a good school experience leads to better inclusion and wellbeing. Common points that were discussed in relation to the educational experiences are: the school system and educational interventions, barriers to obtaining services and information, and the significance of the language.

5.4.1 The school system and educational interventions in Norway

Children with or without special needs in Norway get an equal education in the same institutions (UNESCO, 1994); nevertheless, special education is offered in the form of out-of-class activities and teaching hours. Meaning that the special education teachers take children out of the classroom during school hours. The number of these separated sessions varies depending on the severity of the condition and the customized plan that the child should follow (Wendelborg & Tøssebro, 2008). When the inside-class following is required, it is done by assistants who may not necessarily have a special education background (Wendelborg & Kvello, 2010). Restricted school activities that separate children with and without special needs have both negative and positive sides, and in some cases, they may hinder relationships in other contexts and impede social competence development (Wendelborg & Kvello, 2010).

Some parents believe that segregation-based special education is not the best option for their children. They stated that they recognize the challenges of providing special education inside the classroom, but that they support a mix of in-class and out-of-class guidance and supervision with specialists.

> *I first thought that it is very good for my child to have the opportunity to sit with a special education teacher who can help him with his speech and reading difficulties, until the day he complained that he is missing the math lesson which is his favorite subject, and he misses the math games they do in the class. I talked to the special education teacher to see if she can change the schedule, she apologized and could not change it due to a busy schedule (Lucas's dad).*

Some children also expressed their discontentment with the special education teacher taking them out of the classroom:

> *In our classroom, we do lots of teamwork projects and activities, and I must be absent from school sometimes because I have regular appointments at the hospital, so when I come back, I feel I am falling behind and it is hard to catch up with the progress that happened when I was absent. I also need extra help in Norwegian and so I have to be*

> *out of the class two times a week and so I always feel I need help to stay updated with the class activities, this annoys me sometimes (Sara).*

Generally, all children seemed to be enjoying activity-based learning and, the no-grades system that Norwegian schools offer. They stated that the fact that there are no grades made it easier for them to start at school without having to be compared with others based on academic results:

> *In Syria, I always wanted to get 10 out of 10, and it was difficult for me because I need more time to finish, and there was only one teacher with many students in the class. Here, there are no grades, so no one can show off or say that they are the best in the class, this is what I like the most (Lama).*

> *There are many options, and no one is stressed about being a doctor or an engineer, everyone can succeed if they get the good help and guidance to choose what they are good at (Sara's mom)*.

However, regarding the no-grades system, some parents mentioned that there is a gap between the 7th and the 8th grades. Stating that exam grades and more difficult lessons begin in the eighth grade which could cause a kind of shock to the child. There are some cases in which parents can ask for an exemption from the assessment with grades in written exams. This right could be obtained when a student is unable to perform the exam due to illness, injury, or dysfunction diagnosed by an expert, has not completed the upper secondary level in Norwegian schools, has been entitled to special language training during the upper secondary level or upper secondary education, or when one has attended an international or foreign school in Norway (The Norwegian Directorate of Education, 2021). However, not all parents were aware of such options, this leads again to recognize the impact of the language barriers and the poor communication with the school.

As mentioned in the background chapter, there are a variety of services provided to immigrant children, in general, upon arriving in Norway such as the introductory class and mother language teaching hours, and to children with special needs such as Child and adolescents' psychiatric clinic (BUP) and the Pedagogical-Psychological Service (PP-tjeneste). All children that I met have joined the welcoming introductory class for 1-2 years. This class is located at an ordinary school but does not follow the ordinary lessons. The focus of this class is on teaching Norwegian and introducing children to the culture by teaching them the language, songs, stories, games, and activities with the help of Norwegian teachers and teachers who speak the same mother language as the child (morsmålslærer). This class is dedicated to children of immigrant backgrounds, and it serves as a preliminary introduction to the Norwegian language and culture which facilitates the process of moving and inclusion in the ordinary Norwegian classroom. Parents and children mentioned that they appreciated a lot the offer of the introductory class (innføringsklasse) and that it was very important and helpful to have this opportunity before being exposed to an ordinary classroom. As described by the participants, in the introductory class all children are new in the country, and they are all learning the language so one does not feel shy to practice or make mistakes:

> *I was very stressed, and I did not want to go to school, I thought how am I going to spend 6 or seven hours a day without understanding what is going on around me, how would I communicate? But then two nice teachers, one who speaks Arabic, and one who speaks Norwegian welcomed us and I felt much better then (Lama).*

> *I was very happy that I was in the classroom with other children who cannot speak Norwegian, it was fair enough (Noor).*

> *No one made jokes of anyone of the way one speaks because we were all new and still learning the language (Lucas).*

> *I was not aware that there is such an offer, and my child is so sensitive so I was worried that he will not accept going to school if he feels that he cannot understand what is going around him. This option was a lifesaver for us (Lucas's mom).*

> *It was all ok, I was in a class with other children from all over the world, and there were many teachers who speak different languages. It was fun because no one could speak Norwegian, but we used to play with each other anyway (Rami).*

5.4.2 Barriers to accessing information and to obtaining the needed services

According to Norwegian political papers, children with special needs should be tested, diagnosed, and provided with a special educational plan as soon as feasible (White paper no 18, the Norwegian parliament, 2010-2011). participants pointed out that some municipalities are better equipped with necessary resources than others, and that the access to information and having a clear intervention plan is not at the same levels in all municipalities alike.

I was lucky to get the help we needed fast, I know people waited so long to get their child diagnosed due to a lack of specialists, especially in small municipalities (Sara's mom).

In such situations, parents felt as if they are left to negotiate their own route through competing parenting tasks and duties due to a lack of or little institutional help from professionals.

They treated us as if we were experts in the system, but in fact, even simple things like how to schedule an appointment with a family doctor caused us anxiety. We were unsure who to contact if our child had a problem at school, whether it was the teacher, the school nurse, or the family doctor. We had no idea who to ask or what to ask for, and we had no understanding of what our child was entitled to (Rami's dad).

In line with previous studies, I found here that immigrant parents have a variety of obstacles while communicating with experts in various public services, which impedes their inclusion into society owing to inadequate language skills and unfamiliarity with the system (Heino & Lillrank, 2020). This is an issue that the parents who took part in this thesis highlighted as well. The service system was described as fractured, and difficult to access. The delay and failure to acknowledge the cultural disparities affected their quality of life, added to their burdens, and exacerbated their stress.

We were aware of our child's needs and developmental delay when we arrived in Norway, but it took us a year and a half to get him referred to a specialist and receive an official diagnosis of the condition that allows him to receive extra attention at school. This was a very stressful time for us (Lucas's mom).

Uncertainty and prolonged waiting periods were frequently highlighted in connection to receiving the needed assistance, particularly during the early stages of the settlement in Norway.

Everyone is so nice and relaxed, so they listen to us and then pass our requests on to someone else. People ask us to wait everywhere we go, saying that this is how the *system works in Norway, that things take time and that we will receive what we need in the end. But we could not figure out if we were doing the right thing, which made us feel guilty for not getting our child the treatment he needed. We felt bad about ourselves (Rami's dad).*

However, some challenges could be also attributed to children's personal characteristics and implicit struggles. Children want to feel they have equal abilities with their classmates and therefore, some of them do not like having special needs education during the school day. This could make the special education teaching hours more challenging for the teacher and less beneficial for the child:

I was contacted by the school to be informed that my child did not agree to go out of the classroom to get the special education teaching. I appreciate the effort the school is providing but I wish most of those hours could be in class (Lucas's mom).

I do not like it when the speech specialist takes me out of the classroom to talk to me, some of my classmates begin to say, oh were you in therapy? What do you do there, they do not understand that I just need more time than them to speak (Lucas).

Furthermore, the economic situation plays a role here. Despite the fact that Norway's child welfare system is concerned with providing equal opportunities for all children, Drange and Telle (2020) argue that there is significant segregation in the access to activity centers in Norway, with evidence that children from wealthier families tend to group in higher-quality institutions. They also point out that low-income or immigrant families face barriers and inequalities in accessing to institutional services, such as high-quality childcare centers, concluding that a child welfare system based on universal participation and strict quality standards would not be enough to reduce social inequality and improve prospects for all children alike. Some parents also stated that their low financial resources restricted their ability to provide their children with the necessary support.

We were told that our child should take part in several after-school activities, which we couldn't afford during the first two years because we were unemployed (Lucas's dad).

5.4.3 The significance of the Language

Having a disability interacts with being an immigrant, leading to increased marginalization and inclusion challenges (Jennings, Khanlou, and Su's, 2014). Addressing challenges that immigrants face due to limitations in language proficiency was a topic of interest in many studies (Sagbakken, Spilker & Nielsen, 2018; Södeström ,2014; Heino & Lillrank, 2020). Research shows that mastering the language is a key factor in the process of integration and its limitation has a negative impact related to many aspects, such as understating the culture, building friendships, and seeking information (Morrice et al, 2021). Children explained that they were excited about moving to a new country but also worried about not knowing the language:

> *We were living in Lebanon before coming here, I remember the day my parents said we will move to Norway. We were all very happy and my parents were saying that we will finally be in a safe place, and we will not be forced to move unless we want. I was also happy until they started to talk about the new language, then I asked them, how I am I going to talk with people and go to school, and I started to cry (Noor)*.

There are many different dialects in Norway, and one could be able to communicate and speak long before being able to understand others. This worry accompanied children for a long time and impacted social and schooling experiences:

> *I still sometimes cannot understand all the jokes my friends make, they speak quickly and use some words that I have not learned at school, my mom tells me that it is normal, but it is still annoying for me (Lucas).*

> *My child is so obsessed with speaking Norwegian, and we try to explain that being multilingual is very good! He says I do not want to speak Arabic all the time at home, I do not want to forget Norwegian (Rami's mom).*

> *I am happy now because I can understand and speak the dialect, I remember when I first started in the ordinary school, some children made jokes about my accent and I felt really bad. They do not understand that I can speak Arabic very well, they thought that I cannot talk fluently at all (Sara).*

I do not like doing a presentation in front of the class, I speak fluent Norwegian, but it is not as good as my classmates, sometimes I am slow to explain my ideas not because I do not understand the topic but because I need to think about the words (Lama).

People with refugee status in Norway have the right to an interpreter while attending meetings pertaining to health, education, or parenting. However, having an interpreter has a limited role in alleviating the language barrier in health and follow-up sessions in which the interpreter might not be able to portray the meaning due to the lack of understanding of the situation and having different interpreters in different meetings. Parents said that inadequate translation assistance and a disparity in the perception of disability and childhood hindered interactions between parents and public services personnel.

Everything is in Norwegian; we do get a translator most of the time, but I wish I could communicate directly or find an Arabic-speaking teacher at the school that I could communicate with on a regular and simple base (Rami's mom).

The first school I was placed in was not fully accessible to me, there was a teacher who speak Arabic at school and that was good, but it was all in all difficult, now there is an assistant at school that accompany me most of the time and the school I am in now is more suitable to my situation (Noor).

Knowledge about how different systems operate through speaking fluent Norwegian is a prerequisite for enjoying the welfare system (Olsen,2018). So, the language barrier could cause a delay in getting the required intervention and it is extra challenging for minority group children with special needs to get the support they need compared with majority group children:

It took us a while to get a specialist to take care of our child because of the language, they could not find someone who speaks Arabic and so it was difficult for our kid to get the help he needed quickly (Lucas's dad).

Raising a child with special needs has a long-term impact on all family members since it adds extra obstacles to fulfilling the different demands. Economic circumstances, resource availability and access, as well as a lack or delay of social and professional support ,can all be issues that add stress to parents and so on children. Promoting parental knowledge and assistance to access and understand the different services increase the likelihood that the child will flourish (Tétreault et al, 2014; Valicenti-McDermott et al 2015). As several parents said, this may be created through creating mutual understanding and keeping the parents informed about the child's plans and progress:

> *We have been informed that our child is entitled and needs a special needs teacher. We trust the plan the school provided but we are finding a hard time to keeping communication as more than one teacher changed during one year for reasons that were not clarified (Lama's mom).*

5.5 Further reflections

Poor communication between parents and professionals, as well as misunderstanding of the roots of the problem, are two major issues I encountered while working as a teacher with immigrant children in Norway. In many situations, I've seen that the school's contact person underestimates language difficulties and cultural differences because an interpreter could be available. The problem is, that the interpreter might be asked to attend the "utviklingstid" (annual or semi-annual meetings with parents), which can be adequate when children do not require any extra assistance. However, in the case of children with special needs, a more intensive and ongoing follow-up through more sessions is necessary, and as the participants in my thesis pointed out, the translator was not always accessible, which posed a challenge in keeping them informed about their child's progress.

> *I know that we will be contacted in case things do not go well, and if we are not contacted that means everything is going as planned, but we would like to get more detailed information about month-to-month improvement if there is any (Rami's mom).*

Transparent communication between specialists at schools and seeking help from the parents are required for having successful educational interventions. However, many families are hesitant to make such demands. This might be due to a delay in diagnosis, a lack of awareness of the available resources, a complicated access procedure, or a fear of stigmatization or uneven treatment. However, each of the cases I met and interviewed was unique. Therefore, findings cannot be generalized, and I would here say that nothing related to children's lives should be taken for granted. Maybe this is an idea that we have heard about dozens of times, but what is important here is the way we translate it into practice through investigating the cultural backgrounds and understanding the situation of the family.

5.6 Summary

The discussion of the analysis shows that children and parents have mixed feelings about how they rate their quality of life in Norway. Conflicting cultural, and parenting practices, unclear roles, a lack of knowledge of how to accommodate and understand the way the Norwegian child welfare system operates, and a lack of openness about some of the challenges they face due to a fear of being misunderstood by the child protection services appear to be the causes of this ambivalence.

Chapter 6: Conclusions

6.1 Introduction

The aim of this thesis is to explore the social and educational experiences of Syrian children and parents living in Norway and in need of special support. Following a qualitative approach, I collected information from children and parents, in addition to reflecting on my own experiences as a Syrian living in Norway and working with immigrant children in need of special support at Norwegian schools. The analysis indicates that there is a complex interplay of factors shaping the experiences of Syrian children targeted in my thesis. A number of barriers were identified, they are related to cultural differences, poor social life, language barriers, and lack of understanding of how the educational and the health systems operate. In this chapter I give an overview of the analysis that I have formulated following the thematic analysis approach, I also present here recommendations and suggestions for further research in addition to highlighting the limitations of my thesis.

6.2 Summary of the analysis

6.2.1 Cultural differences:

The disparities in the construction of childhood and disability between Syria and Norway seemed to have both positive and negative sides. Negative in the sense that participants are not familiar with the construction of children as competent and equal to adults and with the relational and contextual understanding of disability and what those ideas imply; and positive in the sense that it pushed parents and children to be more open and positive about children’s need to special support and about the fact that each child can succeed in his or her own way and base. Furthermore, when comparing life in Syria to a more disability-friendly society like Norway, dissatisfaction, unpleasant memories, and a sense of inferiority were noted in relation to the experience of raising a child with special needs in Syria.

The differences in parental practices between Syria and Norway are experienced to be stressful and children sense this difference and struggle to find a balance to satisfy parents’ expectations and the Norwegian norms. The discussion of the analysis highlights that when disability is seen as a stigma it prevents parents from seeking the help they need because they think that their child would be treated differently or that they will be blamed for the negligence of their parental responsibilities.

6.2.2 Social life:

I found that outside of the school context, social life was regarded as weak, with a low feeling of belonging and few connections with classmates. The extent of social inclusion and assimilation to Norwegian society is influenced by disparities in cultural norms and parental standards. Conflicting cultures and traditions are stressful indeed, but when this idea becomes the prevailing discourse in the family, it will jeopardize the ability to live a normal social life because it will make individuals fearful of establishing interaction with others. This is especially important when raising children because parents pass on their traditions and beliefs to their children, and while this may not fully prohibit children from practicing their agency and having an active social life, it will certainly exacerbate their difficulties to socialize. Findings suggest that it is crucial to communicate with peers of the same ethnicity and linguistic groups in order to feel secure and welcomed, but it is even more significant that children experience a sense of belonging by becoming a member of the Norwegian community and having more contact with Norwegian friends.

6.2.3 Educational experiences

There are major differences in the educational system between Syria and Norway, but children seem to generally enjoy school life especially after being able to speak and understand the Norwegian language. Offers such as activity and team-based learning, the introductory language class and having a contact person who speaks Arabic at school proved to be very helpful. Children and their parents appreciate the special plan offered by the school; however, they wish for more in-class instead of out-of-class special education hours as they feel they lose track of some activities and in-class participation when they are taken out of the classroom.

6.2.4 Major challenges

Despite the distinctiveness of each story, which provided diverse views, common patterns were identified, particularly regarding social problems and linguistic limitations. The absence of social capital and the limited language proficiency seem to have the greatest influence on children’s everyday lives, causing them to face significant social, emotional, and educational challenges. Parents highlighted that there were delays in giving assessments and assigning a special education teacher and that they wish for more continuous updates on their child’s condition and progress. The data also revealed that language is a significant barrier and interpretation services are not always available and so parents are not fully aware of the available services and sometimes are afraid to seek help in order not to be seen as unqualified parents. Accordingly, families who can communicate in Norwegian and are aware of the role of Barnevernet were more satisfied and relaxed, and this has a direct impact on children’s quality of life.

6.3 Implications and Recommendations

Children are the ones who should be contacted when we are attempting to get insight into their lives, no matter how much we “adults” believe we know about their experiences. Their daily experiences and reflections on those experiences are what get us closer to understanding their reality if this can be comprehended at all. Various discourses on childhood and children have different outcomes and impact how people view and treat children. It influences the development of normality and abnormality, as well as inclusion and exclusion practices.

To recognize and appreciate diversity and encourage inclusion, monocultural educational and social research should be broken. This entails acknowledging minority language children with special needs as members of linguistic and ethnic minorities with educational requirements that are comparable to but distinct from those who belong to the linguistic and ethnic majorities.

The importance of this thesis is in bringing to light and pushing for a better understanding of how complex institutional and cultural variables influence immigrant children's experiences in Norway, as well as advocating for more collaboration and open communication between children, parents, and stakeholders.

The sample is small and therefore, the results are not representative of the population. Nevertheless, the aim of conducting qualitative research is to get an in-depth perspective of individuals’ experiences rather than a generalization of the findings. The data revealed in this thesis gives a good indication of how Syrian children with special needs and their families experience life in Norway. Further, the thesis gives some information regarding the medical services, but it would have been more comprehensive if there was a section that gives detailed information about the medical services available and the related advantages and issues. Also combining the views of the teachers and other caregivers would add to the significance of the study.

The findings also highlight the changes that children and parents would like to see, which are less bureaucracy, more understanding of the cultural differences in terms of parenting and understanding of disability, as well as more effort to enhance children's social lives and connection with Norwegian mates outside the school context.

More research focused on disability in the migration contexts is needed (Heino & Lillrank, 2020). Research that takes children's best interest and participation rights as guiding principles to get children's perspectives and to get insights into their lives as they describe them. The CRC's participation rights are unquestionably a crucial initiative for promoting children's well-being and esteem and acknowledging them as right holders who deserve full respect and recognition. Furthermore, those entitlements signify a transition in the way children are perceived as capable and independent, rather than as fragile, dependent, and in need of protection (Kjørholt, 2017).

I would finally say that I am glad that I chose this topic for my thesis because I spent a long time engaged in the process of writing it and, each day, it was getting clearer to me how important it is to investigate more in this field and I am ambitious to go further in the analysis of this topic by doing Ph.D. research within the same scope.

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Appendices

Appendix A (NSD approval)

NORSK SENTER FOR
FORSKNINGSDATA

NSD Personvern 29.10.2020 09:00

Det innsendte meldeskjemaet med referansekode 185608 er nå vurdert av NSD.

Følgende vurdering er gitt:

Our assessment is that the processing of personal data in this project will comply with data protection legislation, so long as it is carried out in accordance with what is documented in the Notification Form and attachments, dated 28.10.2020, as well as in correspondence with NSD. Everything is in place for the processing to begin.

NOTIFY CHANGES

If you intend to make changes to the processing of personal data in this project it may be necessary to notify NSD. This is done by updating the Notification Form. On our website we explain which changes must be notified. Wait until you receive an answer from us before you carry out the changes.

TYPE OF DATA AND DURATION

The project will be processing special categories of personal data about health and ethnicity, and general categories of personal data, until 01.08.2021.

LEGAL BASIS

The project will gain consent from data subjects/the parents to process personal data. We find that consent will meet the necessary requirements under art. 4 (11) and 7, in that it will be a freely given, specific, informed and unambiguous statement or action, which will be documented and can be withdrawn.

The legal basis for processing special categories of personal data is therefore explicit consent given by the data subject, cf. the General Data Protection Regulation art. 6.1 a), cf. art. 9.2 a), cf. the Personal Data Act § 10, cf. § 9 (2).

NSD
NORSK SENTER FOR
FORSKNINGSDATA

PRINCIPLES RELATING TO PROCESSING PERSONAL DATA

NSD finds that the planned processing of personal data will be in accordance with the principles under the General Data Protection Regulation regarding:

- lawfulness, fairness and transparency (art. 5.1 a), in that data subjects will receive sufficient information about the processing and will give their consent

- purpose limitation (art. 5.1 b), in that personal data will be collected for specified, explicit and legitimate purposes, and will not be processed for new, incompatible purposes

- data minimisation (art. 5.1 c), in that only personal data which are adequate, relevant and necessary for the purpose of the project will be processed

- storage limitation (art. 5.1 e), in that personal data will not be stored for longer than is necessary to fulfil the project’s purpose

THE RIGHTS OF DATA SUBJECTS

Data subjects will have the following rights in this project: transparency (art. 12), information (art. 13), access (art. 15), rectification (art. 16), erasure (art. 17), restriction of processing (art. 18), notification (art. 19), data portability (art. 20). These rights apply so long as the data subject can be identified in the collected data.

NSD finds that the information that will be given to the parents about the processing of their and their child's personal data will meet the legal requirements for form and content, cf. art. 12.1 and art. 13.

We remind you that if a data subject contacts you about their rights, the data controller has a duty to reply within a month.

FOLLOW YOUR INSTITUTION'S GUIDELINES

NSD presupposes that the project will meet the requirements of accuracy (art. 5.1 d), integrity and confidentiality (art. 5.1 f) and security (art. 32) when processing personal data.

Zoom is a data processor for the project. NSD presupposes that the processing of personal data by a data processor meets the requirements under the General Data Protection Regulation arts. 28 and 29.

To ensure that these requirements are met you must follow your institution's internal guidelines and/or consult with your institution (i.e. the institution responsible for the project).

FOLLOW-UP OF THE PROJECT

NSD will follow up the progress of the project at the planned end date in order to determine whether the processing of personal data has been concluded.

Good luck with the project!

Contact person at NSD: Kajsa Amundsen
Data Protection Services for Research: +47 55 58 21 17 (press 1)

Appendix B (Information letter and consent of the parents)

Do you want to participate in the master’s thesis research?

The social and educational experiences of immigrant children in need of special support in Norway: A qualitative study with children and parents.

This is a question for you and your child to participate in a master’s thesis research where the purpose is to explore the social and educational experiences of immigrant children in need of special support in Norway. In this letter, I give you information about the goals of the project and what participation will mean for you.

Purpose

With this letter I ask for your participation and for your permission of the participation of your child in the master’s thesis research about social and educational experiences of immigrant children in Norway. After reading this letter and giving your consent for your participation and the participation of your child, you are asked to seek the child’s consent to join. After your permission, your child should have the final say whether he\she would like to join or not.

This research is conducted by Dima Mohamad in the interest of her master research at NTNU (Norwegian University of Science and Technology). The goal of this research is to listen to children’s and parents’ stories and discover children’s educational and social experiences and how they are adapting to the educational and social life in Norway.

Information about the supervisor and the researcher:

Supervisor: Prof. Anne Trine Kjørholt is a professor in Child and childhood research at the Norwegian University of science and Technology. NTNU.

Researcher: Dima Mohamad is a master’s student, originally from Syria and studying master’s in childhood studies at NTNU.

Why are you asked to participate?

You and your child are asked to participate because your child's experiences are relevant to the study.

What is expected from you upon participation?

If you choose to participate, you will be asked to meet with the master student 2-3 times. Each meeting will take approximately 45 minutes. The purpose of the meetings is gaining an understanding of the child's social and educational experiences in Norway. Before starting the interview, you will be asked your permission to record your voice or to take notes.

What is expected from your child upon participation?

If you agree on the participation of your child, then Dima Mohamad will meet the child 2-3 times. In the first meeting Dima will have a dialogue with the child on his\her everyday life including educational and social experiences. The dialogue will take approximately 30-45 minutes. The aim of this initial dialogue is to build a sense of familiarity between the child and the researcher and to ensure that the child understands the aim of his participation and that it is voluntary, which can facilitate and encourage the child to actively participate. The child could be also asked to draw, take photos of areas they like, write diaries or notes describing aspects related to his\her life. You have the right to check the questions and the activities. After completing the activity, the master student Dima will have a discussion with the child. The aim of this discussion is to give the children the opportunity to explain the task they completed. You and your child will be asked your permission to record the child's voice.

It is voluntary to participate!

It is voluntary to participate in the project. If you choose to participate, you can withdraw your consent at any time without giving any reason. All the personal information about you and your child will then be deleted. It will not have any consequences for you if you do not want to participate or later choose to withdraw.

Your privacy - how we store and use your information

We will only use the information about you and your child for the purposes we have described in this letter. We treat the information confidentially and in accordance with the privacy regulations. The recorded data will be processed only by the researcher Dima

Mohamad and the supervisor Prof. Anne Trine Kjørholt and will be deleted immediately after the research is completed.

Your identities will not be identified, I will replace your name and contact information with a code that is stored on a separate name list separated from other data, and all the data you share will be deleted after the study is completed. The study is expected to be completed by August 2022. So long as you can be identified in the collected data, you have the right to access, correct or delete the personal data that is being processed about you and your child. If you have complaints on the processing, you have the right to contact The Norwegian Data Protection Authority.

Where can you find out more?

If you have questions about the study, or want to exercise your rights, please contact:

Supervisor: Prof. Anne Trine Kjørholt.

By email anne.trine.kjorholt@ntnu.no or phone: 91897607

Researcher: Dima Mohamad**.**

email dimam@stud.ntnu.no phone: 93996522

NSD - Norwegian Center for Research Data AS has assessed that the processing of personal data in this project is in accordance with the privacy regulations. If you have questions related to NSD's assessment of the project, you can contact:

- NSD - Norwegian Center for Research Data AS by email (personverntjenester@nsd.no) or by phone: 55 58 21 17.

With best regards

Declaration of consent

I have received and understood information about the master thesis [The social and educational experiences of immigrant children with special needs: A qualitative study with children and parents] and have had the opportunity to ask questions. I understand that my participation and my child's participation is voluntary and that we are free to withdraw at any time, without giving a reason. I understand that I will be given a copy of this consent form and that my signature indicates that my child and I will participate. My child and I voluntarily agree to take part in this study. I am aware that the data, including copies and records, from the interviews, diaries, drawings, and photos will be kept anonymous and confidential. They will be destroyed after having been used for the transcription for the study. I am however allowed to keep the originals of the drawings and diaries I have created. I have been assured that the data will be presented in a way that will make it impossible to be traced back to me. I agree that my information will be processed until the project is completed.

Hereby I confirm that I agree to the following methods. Please click the ones you agree on!

☐ **Interviews**

Hereby I confirm that I agree that my child will participate in following activities. Please click the ones you and your child agree on!

o Diaries

o Lists

o Photos

o Interviews

Name/code of the participant:____________________________ Name/ code of the child: ____

Participant's signature: ____________________________________ Date: ______

Appendix c : Informed Consent of the Children

I have been informed about the study and I understand the provided information and have had the opportunity to ask questions. I understand that participation is voluntary and that I am free to withdraw at any time, without giving a reason. I understand that I will be given a copy of this consent form.

I am aware that the data will be kept anonymous and confidential. They will be destroyed after having been used for the analysis of the study. I am assured that the data will be presented in a way that will make it impossible to be traced back to the participants.

Name of the child: _____________________________

Date: __________

Appendix D: Standard Observation Sheet

Tool used:

Date: __ / __ / ____

Time: From _______ to _______ Place:

Age:

- Child/situation

- Location:

Comments:

Appendix E: Interview Guide (Parents' interview)

Children's everyday life:

How would you describe your migration experience?

Which type of special support does your child need?

What would you like to tell me first about your child?

How was it to raise a child with special needs in Syria?

How is it to raise a child with special needs here?

How do you describe your life and your child's life here?

How does your child usually spend his day?

Do you remember an activity your child used to enjoy at your home country, and he\she no longer doing it here?

What changes in the daily routine have you observed since your child moved to Norway?

Would you like to add anything?

Children's social life

How would you describe your child's social life in Norway?

What activity does your child enjoy the most? with whom?

Would you like to add anything?

Children’s school life

How can you describe your child’s overall adjustment to the school in Norway?

Can you describe what does your child like or enjoy the most about the school life?

Can you describe what does your child like the least about school?

What interventions or special plans are provided to your child at school? And how do you evaluate them?

Would you like to add anything?

Recommendations

Which interventions have been implemented to facilitate the inclusion of your child?

Which school, social or cultural experiences (Negatively or positively) affect your child the most?

What the other resources should be available to your child?

Do you have any recommendations or thoughts to add?

Appendix F

Interview Guide (with children)

Which day of the week do you like best?

What can make your day good?

Tell me a little about your friends?

Tell me about something you are looking forward to?

Tell me about something you like to do in your spare time?

What do you like to do this weekend?

If you had got three wishes, what would you have wanted?

What is a good friend for you?

When were you last in a bad humor, why?

When were you last in a good humor, why?

How do you best learn new things?

Who do you want to have more time with? Why?

Say at least one thing that is important to you.

Describe your dream school.

Appendix G (Hei tool)

Fortell om noe du gleder deg til.

Når du er redd, hva er det best for deg at andre gjør da?

Når var du sist i dårlig humør?

Hvis du hadde vært en superhelt, hvilken superkraft ville du ha?

Fortell om en gang du ikke følte deg god nok.

Appendix H (Questions guide with children)

Writing diaries (free choice)

Get inspired and write a short description about a week in your life. Write at least one sentence (preferably more) to describe each day during the coming week. You can write about something that has happened, or something you have thought about, felt or maybe dreamed of?

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

Appendix I
(Guided writing)

Before I leave my home country:
How did you think it would be to come to Norway?

When I arrived
what was your first impression? what did you think about the weather, the landscape, and the people?

School experiences
Is the school different than you had imagined? Teachers, homework, exams, grades, subjects?

Is it different from what you have experienced at school before?

Leisure and friends
How do you experience friendships? Do you think that your time with friends and activities you do in Norway are different than your home country? why? how?

The language
What was it like to come to Norway without knowing the language? how is it now?

Cultural differences
What is the biggest difference between Norway and your home country?

What is the smallest difference between Norway and your home country?

Food, time, how loud people talk, children's roles, gender roles?

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