Evaluation of delivering the Circle of Security program in-language

EXECUTIVE SUMMARY

The attachment (the bond) between an infant and their caregivers serves as a basis for the development of future social relationships. Migration has the potential to disrupt the development of secure attachments between young children and their caregivers. Circle of Security (CoS) is a well-established program for assisting caregivers to raise a securely attached child and to prevent at-risk children from developing insecure attachments. To meet the call for providing culturally safe programs, the Illawarra Shoalhaven Local Health District's Multicultural and Refugee Health Service sought to evaluate the delivery of the CoS program using in-language translation to selected communities.

The in-language CoS program was delivered to Kinyamulenge, Karenni (Burmese) and Arabic speaking communities. The evaluation of the program involved a focus group and in-depth interviews with program facilitators and the CoS coach, and focus groups with community members who attended the program. The interviews and focus groups with the program facilitators were conducted in English, and focus groups with community members were conducted with a translator. The interviews and focus groups were transcribed verbatim and a content analysis was conducted from a social constructivist theoretical perspective.

Participants in the CoS evaluation included 4 facilitators, 1 CoS coach, 4 translators and 29 community members (13 Arabic, 13 Karenni and 3 Kinyamulenge). On average, the community members were aged 39 years (SD ± 6 years) and had a median of 2 children in the home (interquartile range 1, 3).

Three key themes were identified from the interviews and focus group with the facilitators and the CoS coach related to how the in-language CoS course had been adapted and structured to meet the needs of these refugee communities. Theme 1 involved the creation of a safe respectful setting for learning that was based on trust and a shared understanding of each group's language and culture. Theme 2 involved going beyond the literal translation of words to find culturally appropriate terminology for concepts and relevant examples of how these principles could be used in practice. Theme 3 involved the facilitators and community members being Partners in Learning with each bringing their knowledge and experience to the sessions.

The central theme identified from community member focus groups was that an in-language course resulted in better concept understanding. While community members valued courses delivered in English with translators for the opportunity to develop their language skills, improved understanding from an in-language course was due to more precise translation of points into equivalent terms, the use of more culturally relevant examples, and the inclusive supportive environment. Participation in this in-language CoS course had an impact on the way these parents communicated with, and related to, their children. Course impact was identified at individual, family, and community levels. Community members expressed a desire for future in-language courses, with special interests identified in parenting teenagers, parenting courses for fathers, and supporting maternal mental health.

Delivering the CoS program was time-intensive and emotionally-intensive for the facilitators. They needed to develop content expertise, to translate and adapt course materials to meet group-level and individual needs and skills, and to be comfortable with their own vulnerability when sharing personal stories with the group. Given the extent of training and effort to adapt the program to different communities, it is deemed important that facilitators deliver the program multiple times. Costs around parent remuneration, and the provision of child care and refreshments during sessions were deemed key to enhancing engagement, and would need to be budgeted for by service providers.

In conclusion, the in-language adaptation and delivery of the CoS program to Kinyamulenge, Karenni and Arabic communities was highly successful, with broad impacts for individual family units and their relationships, as well as broader community effects. The current study demonstrates the feasibility of this approach, to developing and delivering the CoS to small non-English speaking community groups.

Contents

Suggested citation

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Conflicts of Interest

The authors have no conflicts to declare.

INTRODUCTION

'Attachment' is the term used to describe the emotional connection between an infant or young child and their caregivers. The formation of secure emotional connections is necessary for immediate survival (e.g. for the caregiver to attend to the infants' physiological needs) and the basis for developing future social relationships.

Secure attachments require more than simply having a caregiver present. There are many occurrences that may disrupt the development of a secure attachment. Young children in families undergoing migration and/or with refugee status may be at risk of insecure attachment. During migration, upheavals, barriers and stressors may affect the health, wellbeing and interactions of the family unit. Other factors affecting migrating families may include the loss and separation from people and place in the home country, any traumatic experiences prior to, during or after migration, and the potential to feel disconnected through language and cultural differences of their new country (Signorelli, Gluckman, Hassan, Coello, & Momartin, 2017). Consistent with this, children and youth from refugee backgrounds are more likely to have an insecure attachment relationship with their caregivers (Juang et al., 2018).

Fortunately, the quality of the attachment between a young child and their caregiver is amenable to change. A well-established program for enhancing attachment relationships is the Circle of Security (CoS) program. The CoS is suitable for caregivers of children aged from birth to 12 years. The CoS intervention was designed to assist caregivers in raising a securely attached child, and to prevent at-risk children from developing insecure attachments. The idea behind the CoS intervention is to strengthen the caregiver's abilities to observe their child's cues and improve their caregiving skills to respond in an appropriate and timely way to those cues (Marvin, Cooper, Hoffman, & Powell, 2002; Zeanah, Berlin, & Boris, 2011). Although the original CoS program ran over 20 sessions with a small group of parents meeting weekly with a trained facilitator, the number of sessions has been condensed over time while still meeting the same goals and having a positive effect for at-risk families. In a meta-analysis of 10 CoS intervention studies, Yaholoski et al (2016) reported that the CoS intervention had medium sized effects on child attachment security and parenting quality, as well as large positive effects on parent self-efficacy (Yaholkoski, Hurl, & Theule, 2016). Despite the evidence of effectiveness of attachment programs, especially for at risk families, there continues to be discussions around "what works best for whom" in these interventions (Cassidy et al., 2017).

Recently there has been a call by Juang et al (2018) for future work to "build on and modify existing attachment intervention programs, such as the Circle of Security, to be culturally responsive to specific immigrant and refugee communities". Families who have the most to gain from an intervention like CoS may not be well served if providers fail to consider different cultural lenses in parenting behaviours or language and social needs. For example, simply offering a CoS intervention in English with a translator present may not meet the cultural needs or circumstances experienced by refugee families. In line with this, our team from the University of Wollongong (UOW) and the Illawarra Shoalhaven Local Health District (ISLHD) Multicultural and Refugee Health Service recently completed a rapid review that identified the limitations of simply relying on translators when communicating between service users from refugee backgrounds and healthcare professionals. Although access to professional translators was found to help ensure accurate and confidential information was being communicated, there were concerns about translators ability to communicate in the same dialect (Leppälä, Lamminpää, Gissler, & Vehviläinen-Julkunen, 2022), the need to consider age and gender appropriateness for the service users that translators were communicating with (Behboudi-Gandevani et al., 2022; Billett, Vazquez Corona, & Bohren, 2022), and the increased length of appointments needed for information to be delivered in one language and translated into another language (Owens, Dandy, & Hancock, 2016; Pangas et al., 2019). For families from refugee backgrounds to benefit from services, not only do the barriers to access and utilisation need to be addressed, but it is necessary to build trust, and share and exchange knowledge and expertise with communities and families (Signorelli et al., 2017).

The ISHLD Multicultural and Refugee Health recently employed in-language facilitators who underwent CoS training. The facilitators then delivered the CoS program in-language to selected small community groups. The program was implemented over 5-6 sessions held once per week. The evaluation of the program was informed by attachment theory and interpersonal relationships research, using a community engagement model that utilizes focus groups. The purpose of this research was not to evaluate the CoS program, rather, the intent was to focus on the adaptations to respond to language and cultural needs, and what was perceived as having worked (or not) for the CoS in-language facilitators and community members who participated. Thus, we sought to explore the following:

1. What makes an in-language course unique? Specifically, how was this course structured and adapted by the in-language facilitators to meet the needs of these refugee communities?

2. What was the impact of the course?

METHODS

Study design

We applied a social constructivist perspective to understanding the experience of participating in delivering the CoS program in language. A social constructivist perspective assumes that the meaning an individual ascribes to the same phenomena (CoS program delivered in-language) is constructed differently according to an individuals' engagement (which could be interpreted differently, for example, according to facilitator, translator or community member roles) and is likely influenced by how an individual understands

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and interprets their experience as well as from their cultural and social perspectives. An openness to cultural interpretations was important given the different communities, cultural and language groups to which this research applies. The cultural differences were a particularly important consideration if the in-language CoS program were to be available in the future, if it requires further adaptations and if it was to be developed for other communities. For facilitators, the focus group were used to explore perceptions of commonalities and differences in how the program was culturally and linguistically adapted to each community group, and one-on-one in-depth interviews were to understand the individual-level perspectives from delivering the in-language program. Focus groups with community members were used to understand the meaning that participants placed on the course. The scope of the community member focus groups was open to the CoS program and possible wider impacts (on self, family and community).

Ethical approval

The study was approved by the joint University of Wollongong and Illawarra Shoalhaven Local Health District's Health and Medical Human Research Ethics Committee (approval number 2023/ETH01298). All participants were provided with a participant information sheet. For non-English speaking participants a translator was present to explain the study and was available to assist with responding to questions. All participants provided written informed consent prior to participating.

Sample and recruitment

CoS facilitators were appointed by the ISLHD Multicultural and Refugee Health Service, one each from Arabic, Karenni and Kinyamulenge speaking communities. Each facilitator was trained in the conduct of the CoS program, they adapted the program to suit their cultural/language context and then delivered the program to relevant community groups (two Arabic, one Karenni and one Kinyamulenge). Each facilitator's contribution to this research was included as part of and remunerated through their employment with the health service.

Purposive recruitment of community members was by invitation from the CoS session facilitators, such that only community members who attended the in-language CoS programs were eligible to participate. Each community member was informed that participation in the research was voluntary. Participation was open to community members regardless of whether they completed the program (i.e. if they attended all session) because understanding reasons for non-completion could inform future program delivery. Participants were remunerated with a $50 voucher for participating in the focus group. Refreshments were provided during focus groups and crèche facilities were provided if participants needed to attend with young children.

Data collection

Facilitators and the CoS coach participated together in a 1 hour in-person focus group with researchers, followed by an individual 1-hour interview over Zoom with a researcher approximately one week later. The focus group commenced with introductions followed by a series of broad questions on their group experiences with the CoS training, adapting the course content, and running the in-language CoS groups. The interview was designed to look at these topics in more depth and commenced with brief demographic questions followed by a series of semi structured interview questions (see Appendix A). Questions addressed topics related to the facilitator's experiences adapting and conducting their in-language sessions and the impact of participation they noticed for the community members. Focus groups and interviews were audio recorded.

Focus group sessions with community members began with introductions, followed by a short sociodemographic questionnaire about participants. For privacy, demographic data is presented as a summary and not by community groups. Translators assisted participants with completion of the demographic questionnaire. The focus group proceeded using a semi-structured topic guide (Appendix B). The topic guide was developed in collaboration with the health service to ensure the results would meet the evaluation aims of the service. Where possible, focus groups were audio recorded and complimented with researcher observations. The recording failed for the Karenni focus group however this was noticed shortly after the session. The translator and researcher wrote comprehensive field notes in the few hours after the session.

Data processing and analysis

Interviews were professionally transcribed, checked for accuracy and then analyzed according to a reflexive thematic analysis approach (Braun et al., 2019). An open iterative approach was used, which involved one researcher developing preliminary themes from reviewing past literature and through discussions with the research team. The preliminary themes were then evaluated and refined through coding and repeated revisiting of the data. Similar codes were collated with associated data and grouped into meaningful clusters. Themes were revised by the researcher until they could be clearly defined and comprehensively captured the data.

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RESULTS

Participant demographics

There were 4 facilitators (2 male, 2 female), and 1 CoS coach (female). They were aged 43-54 years and all had graduate degrees or diplomas.

Twenty-nine community members participated in four focus groups (two Arabic, one Karenni and one Kinyamulenge focus groups). Demographic information for the whole group has been provided in **Table 1**. In total, the focus groups involved 13 Arabic-speaking participants, 13 Karenni and 3 Kinyamulenge participants.

Table 1: Demographic characteristics of community members who participated in the CoS evaluation focus groups (n=29)

	Community focus group participants (n=29)
Female (n (%))	24 (83%)
Age* (mean ± SD)	39.0 ± 6.2
Years since arrival (range)†	1-24
Children <12 years in household (median (interquartile range))	2 (1-3)
People living in household (range)^	2-9
Education (n (%))	
None	9 (31.0%)
Primary	9 (31.0%)
Secondary	5 (17.2%)
Vocational	1 (3.4%)
Tertiary	5 (17.2%)
Difficulty speaking in English (n (%))	22 (75.9%)
Difficulty reading English (n (%))	24 (82.8%)

* Birth year was not reported for 2 participants;

† Years since arrival was not reported by 2 participants

^ Number of people living in household not reported by 1 participant

Unique course features

Reflexive thematic analysis of the facilitator and CoS coach interviews revealed three themes identifying how the in-language offerings of the CoS course were structured and adapted to meet the needs of these refugee communities. The three themes were 1) A safe respectful setting for learning, 2) Beyond literal translation, and 3) Partners in Learning.

Themes are organised in a chronological, hierarchical order for ease of interpretation. For example, facilitators described how they fostered trust and safety through the learning environment and session structure, so this theme is described first. Theme 2 refers to the way facilitators described adaptations made to course content for language, cultural or community reasons before or during the sessions, and is described next. Lastly, Theme 3 refers to cultural knowledge brought to the sessions by facilitators or community members that strengthened the relevance of the program and more logically points to impact and opportunities.

Theme 1: A safe respectful setting for learning

Facilitators discussed how the effectiveness of this course was dependent on creating a group environment where everyone was willing and able to engage in honest conversations about their "*parenting failures*", without blame or judgement, and be open to "*learning how to improve*". To create this environment, facilitators talked extensively about the establishing and maintaining of trust across the group, the setting of rules, and the role of the broader context in which to support the development of relationships and connection.

The community members invited to participate in this pilot evaluation were members of relatively small refugee communities in the region and were well-known to the refugee health service. For some facilitators this meant that they had a pre-existing trust

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relationship with their group members. For example, this facilitator spoke about how their role in the community was important from the outset in recruitment and engagement.

> *Because I'm a community leader, so they trust what I say and they usually come when I invite them to different information sessions. I have a good rapport with the participants and I speak the same language, I come from the same cultural background and I usually, also, provide a lot of supports outside my work.*

When a facilitator was not from the same community, their shared understanding of the language and culture of the community members helped create the foundations for a trusting relationship. As one facilitator explained, "*They trust me as the outsider who speaks their language.*" and "*I'm not from their community, so people trust me that I won't spread gossip.*" In general, the building of trust with these community groups was expressed by facilitators as a continual process easily disrupted through changes in the social setting:

> *It takes time to develop that trust and warm up, and I think every time there's someone new there is that bit of distrust because of their histories and experiences, so I see it as normal.*

As attendance rates were consistently high in these groups across sessions, this course had limited social disruptions.

Regardless of how well the facilitators knew the community members in their group, they all introduced group rules around confidentiality, respect, and valuing each other, to promote open honest discussions. The facilitator for a group containing more recent migrants explained "*A lot of them had never met each other before or seen each other before, and I thought it was very important to demonstrate, to truly talk about respect for each other and trust for each other in that first session.*" In a group that was more strongly interconnected ("*They have been in the same refugee camps, they grew up in the same environment and they know each other in the community*"), the facilitator had not introduced groups rules in the first session. In discussing this decision, the facilitator explained that they had been concerned that it would "*set a power imbalance straight away*" and "*puts me in charge*". However, after reflection on the imbalance in participation by the various members during the first session, the facilitator subsequently introduced group rules and viewed them as "*important because it sets the tone*".

Facilitators talked extensively about how they shared their own personal parenting and relationship stories with the group, modelling their trust in the group, and the importance of vulnerability and honesty for personal growth. One facilitator spoke about how they always gave themselves as an example first, highlighting "*all the things I did wrong in bringing up my children*", so that the community members would be more comfortable speaking about their own challenges. Another facilitator talked about how they sought for community members to recognise "*none of us are perfect parents and that we all struggle at times and we can make the following mistakes but we can also repair them*", and perceived that the sharing of their own personal information had "*freed them [the community members] up and opened them up to talk about their own scenarios*". Similarly, one facilitator expressed that their sharing of personal stories "*motivated them [the community members] to understand and to keep coming*" and that it showed that everyone was here "*to learn so that we don't repeat the same mistakes or we don't do the same thing. We try to improve.*" Although the fourth facilitator found the vulnerability in sharing of their own personal stories uncomfortable, they also identified it as an important way to provide more culturally relevant examples to the course "*So I had to really – and I had to bring in very relevant, very recent examples.*"

An important aspect of this course was to bring together a group of parents who have a common language and culture, and a desire to improve their skills around parenting. Facilitators commonly talked about how the opportunity for the group to meet and share conversations over food and drink (morning tea or lunch) encouraged continued engagement in the course beyond the lessons and built, or strengthened, relationships within the group. The provision of food was acknowledged to be an important factor in encouraging people to attend sessions, especially because "*food security is a big issue for some participants*". However, facilitators also used the choice of food available as a way to "*accept and acknowledge all the different cultures that are there*". For example, a facilitator working with the Arabic language group made a point of choosing culturally appropriate foods like nuts, dates and dried apricots to be readily available in sessions, as these basic foods are typically present "*when these women get-togethers happen*" and are well-suited for women who may be breaking their fast at days end. As well as providing treats like Turkish and Arabic pastries, she also made a point of asking what each individual wanted for the following week "*So I'd give them a list and say, 'What would you like in your kebab or what would you like in your pide?'*". While not all groups had such extensive food choices, the actions of group members towards each other at simple morning teas also showed the building of social bonds, for example in noticing that another person didn't have a drink, going and making them a cup of tea and sitting with them.

As they were approaching the end of the course, facilitators identified the need to formally recognise the time and effort community members had invested in their learning, and the knowledge they had gained. Although not originally planned for this program, groups were bought together again for an end-of-course celebration. Laminated course completion certificates were awarded, photos were taken, and food was shared. For individuals with limited educational experiences, these certificates were a particular source of pride, as explained by this facilitator:

> *A lot of our participants or my participants were people who'd been married at 15 and 16, or never went to school, or they'd also been in a war situation where they were never able to continue, so it was such a big thing for them to be able to show off that certificate.*

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Given the strong value placed on education in many immigrant families, this certificate also provided parents with evidence to show younger family members that they too were actively engaging in educational opportunities and learning new skills to support their successful adaption to family life in Australia.

> *I remember they wanted to take their certificates and show them to their teenagers and discuss, "Look, you can be proud of us, you're not the only one who has all the knowledge," and how we actually know things, and they felt their self-esteem went away and they felt that they were once again equipped to pair it and have that – we have a framework, we know what we're doing and we want more.*

Theme 2: Beyond literal translation

The extent to which group sessions could be conducted fully in-language varied based on the languages supported by the developers of the CoS program, the linguistic and educational diversity present within each community member group, as well as the general evolution of language use across time and experience. Course content was available with partial translations (full video translations but not all materials) in Arabic. However, the Arabic facilitators talked about needing to further adapt the Arabic dialect used in these translations to meet group needs:

> *And so while it is in the video, it's not colloquial. It's proper spoken Arabic. So then, you know, and a lot of our clients have a wide-ranging level of education. So you've got to think, okay, what word is gonna be universally understood?*

For the Kinyamulenge and Karenni groups, there were no existing translated resources related to this training, so the English language versions were used. These facilitators therefore needed to function as a translator for resources in class, at times having to work across multiple languages to find a suitable vocabulary for the key words and concepts, as expressed by this facilitator

> *Karenni was the main language. And sometimes or most of the time, I also, because some of the participants do not understand Karenni, they understood very little Karenni, so I had to use Burmese as a second language in the group.*

The Karenni facilitator spoke about how the focus was to ensure the key content was understood, with the CoS coach helping with this prioritizing by a "*make sure you do this"* review of concepts and activities before sessions.

All facilitators had additionally developed or adapted in-language handouts and worksheets to provide additional support for learning in sessions, and for members to take home for continued opportunities for course engagement. However, as the inclusion criteria for this course did not require individuals to be literate in their home languages, written resources were not effective learning tools for everyone. A major issue for facilitators to address was that within the same language group there was a wide range of educational backgrounds. For example, in one group the facilitator described the range as being from not allowed to finish more than year 7 or 9, to having finished university. Facilitators and the coach spoke about how they catered for lower literacy levels "*We individually supported*," including one-on-one discussions for complex linguistically based concepts such as a feelings cloud. As one facilitator explained that their group, in which a number of individuals could not read or write in their home language, had mostly talked through ideas: "*we never really used the handouts as much, but we verbalised, we talked, and I think that's why mine maybe took so long because each person talked about their experience rather than wrote it down."*

Beyond the overall language the sessions were presented in, a key task identified by the facilitators was to clearly convey the course's technical psychological content while adapting the language used to meet group and individual needs. The complexity of this task is eloquently expressed in this statement from the CoS coach:

> *Language is developed very differently in different communities based on their experiences and some concepts don't exist, so you have to take a different pathway to take people on that particular journey.*

All facilitators discussed the extent to which the various dialects, cultures, literacy levels and migration journeys represented within their community member groups affected the terminology they used in leading the course. Facilitators referred to "*trying to find the right words",* and the need to work in "*proper terms*" that were culturally sensitive and sensitive to trauma experiences, not just the "*terms to convert"* directly from English. An example given was the CoS concept of background experiences from the past triggering a parent and drawing them away from the here-and-now with their child. In the CoS program this is referred to as "shark music", derived from a reference to the music in the movie Jaws. Two facilitators had questioned "*is it [shark music] necessarily suitable for refugees who've been coming across in a boat and people drowned in their families or in their group*?". After consulting with their community member groups, one facilitator used this term, while the other identified a replacement term. A third facilitator expressed that the reference to a shark was not meaningful to their group as they were recent migrants from land-locked countries at war, who had not yet been to the beach or seen the ocean and were unfamiliar with the names of various sea creatures. This facilitator also discussed the difficulties experienced in finding suitable home language alternatives to "*relatively modern psychology buzzwords*" from Western Society like empathy or gaslighting which did not yet have equivalents when they migrated from the Middle East to Australia a few decades earlier. To explain some of these English terms in a way that was understood clearly in a home language often took many words and a lot of time in the sessions, as expressed by this Arabic facilitator as their biggest challenge in providing this training for their group

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If you try to convert in a language to make sure they understand, so just simple words in English, you may find out you have like five lines of sentences to make sure they understand that one single word, which means you've been talking and talking, you're finished, like all your thought is.

The complex task faced by the facilitators of adapting this course to meet the cultural and linguistic needs of the community member groups was aptly described by the Kinyamulenge facilitator as "*So, it's not about translating, but it's about taking the concept, understand it, and then try to find how can fit with this particular culture for them to guide the proper concept*". As such facilitators were seeking to combine content expertise with sensitive, responsive, language and cultural environments to meet the holistic needs of the community members.

Theme 3: Partners in Learning

Facilitators commonly expressed that they and the community group members were partners in learning. They discussed how a rich understanding of the relevance and utility of attachment principles was developed in sessions through the sharing of personal stories within the group and the drawing in of linguistic, cultural, and community knowledge. One facilitator reflected on how their own novice status in teaching the course was an effective way to bring community members into this collaborative opportunity:

I even kept saying, "This is not me teaching you, this is us learning from each other because I'm learning the same way that you guys are learning. I'm learning just as much. I've only done this once before." I actually made it very important for them to know I've only done this once before, so I'm learning, so that they felt that this was a conversation rather than an instruction to them.

Facilitators talked about how this partnership approach served to help tailor and strengthen the relevance of course content for the groups. For example, this Arabic facilitator spoke about how they integrated attachment principles into ideas from Islamic faith that were originally mentioned by a group member:

I didn't even think to refer to faith until one of the participants, on two or three occasions referred to something said in the Quran about bringing up children, or something brought up about the practices of Prophet Muhammad (pbuh) and how that says about bringing children that I realised the connection they had, and how they felt so much stronger whenever anything we learned in Circle of Security was brought back to religion.

The facilitators and CoS coach reflected on how these comments encouraged them to explore how to integrate the universal principles of attachment, that are presented in this course developed in Western society, with ideas of faith and religion that were important to their community. Key topics within CoS, such as the role of the parent as the child's first teacher, the importance of speaking with and playing with your child, and having patience with your child, were then given the additional context that aligned to the values and beliefs of group members, as this facilitator discussed in relation to the Islamic stages of parenting:

Islamic concepts 0 to 7, 7 to 14, 14 to 21 [years]. So we talked about – and people were like, "Oh, yeah, yeah, but no, it says this," you know, so it helped engage in conversation. And so when we when we were doing Circle of Security, I related that 0 to 7 age group of, you know, this is when you've got to play with the kids, make time for the children, actually engage with them on their level. And then from 7 to 14, Islamically, it says you teach your children. So this is the time where we talk about how behaviours impact, how our behaviour impacts on them and how their behaviour impacts on the household. And then from 14 to 21, you've got to befriend your children.

The CoS coach reflected on how she and each facilitator further considered spiritual, religious, or cultural ideas that could strengthen connections for other groups to the course content. For example, ideas around the "*Deja vu feeling*" and feelings associated with "*spirits trying to let you know stuff*", became important links for the Burmese (Karenni) community. Awareness of community norms around parenting and children's role in society were also valuable discussion points within groups, as spoken about by this Arabic facilitator:

Usually in our culture, everyone jumps in with a comment and everybody makes a comment about what's wrong with the child, why they're crying, why their emotions are the way they are, and that's the wrong thing. We should actually allow the child to express their feelings because, in our culture, a child is not usually allowed to express their feelings.

The way facilitators thought about and presented course content was shaped as they responded to the typical family situations present within their community member groups. For example, facilitators talked about a course limitation being that the video examples reflected Western society norms of family size, stating "*all the scenarios were with a one-child family, and in multicultural communities, four, five, six, seven children sometimes*" it being "*very common…to have four children aged under five years*", and often with older children having responsibility for looking after younger ones. With this as the background reality, facilitators worked together with community members to identify how one-on-one time could be created for each child in the family, such as when they were at the playground, improving opportunities for positive attachment interactions.

While much of the language and cultural adaptation for the course rested on the shoulders of the facilitators, a wealth of knowledge was also brought by the community members. In a particularly striking example, one of the community members provided the Arabic word "hanan" for what was needed by everyone towards their children. As the facilitator recalled this story, she explained "*I can't translate it to English because it encompasses words like empathy, compassion, kindness and love. That one word encompasses*

all those meanings." That word was then picked up by the entire group (and spread to the other Arabic group), serving to support each other on this new journey in parenting while still valuing their own cultural background and knowledge.

> *So they all started using her word, dosage of hanan, aljurea hanan, so that became the group's motto, I guess. When our kids come home angry and frustrated from school, instead of yelling at them or reacting to them, we're going to give them a dose of compassion, kindness and love.*

Course experiences

Community member focus group data was collated around their experiences of course participation. References made that were related to the experience of participating in an in-language course (as opposed to a standard translated course) were examined for common themes. A main theme of understanding concepts was identified. References made that were related to the impact of participating in this in-language CoS course were examined for common themes. Three themes were identified around the impact of the CoS course on 1) the participating individual, 2) their family, and 3) the broader community. A community member-driven discussion on topics of interest for future course offerings was also included to further develop discussions around in-language course acceptance and opportunities.

Main Theme: Understanding concepts

Overall, there was some variability in the extent to which community member groups expressed a preference for having a course presented in English compared to in their home language, perhaps reflecting the extent to which the current course materials (e.g., worksheets, diagrams, videos) had been translated. For the Kinyamulenge and Karenni groups, where program resources were only available in English, some community members expressed that both options (English and in-language) were "*equally good*" and that they valued the opportunity to practice their English, for example "*I also improved my English and vocabularies as I learned some new concepts and parenting tips during the sessions.*" In the Arabic groups, where program resources were more fully translated, there was a clear preference expressed for receiving in-language courses. Community members spoke about how "*always you learn more, understand with your best language*" and that having the course presented in their mother tongue helped ensure everyone was able to learn, despite the considerable variability in the English fluency and education levels within the group.

Many community members discussed their appreciation of the adaptions that were made to the course, beyond whether the program resources were translated from English into their home language. For example, one woman stated, "*The language for me, not just like word and vocabulary, it's like connect with histories of culture and experience.*" Community members from all groups valued the work their facilitator and the CoS coach had put in to adapting the course language and providing examples to make course content more relevant and accessible for them. Community members commonly discussed how professional translators use very formal words, interpret word-for-word without adding anything to what the presenter is saying, and that it "*feels boring*" and they "*feel forced to sit and listen*". They spoke about how words and their meaning can get lost in translation making it harder for them to understand concepts taught (e.g., "*we all speak Arabic, but different accents. Maybe the interpreter [is] from Syria and someone from Iraq told him one word. He doesn't know what does that mean, so maybe it's delivered [with] different meaning.*") and less able to contribute fully to the conversations themselves ("*I speak ten words. He will deliver two or three or five. He will choose what he wants to deliver.*"). These experiences contrasted sharply with their discussion about how the in-language CoS facilitators "*knew how to make us listen*". Community members highlighted how they had "*fun*" in their conversations, that points were explained slowly with each point translated into equivalent terms, and relevant examples were given to them, including the facilitator's own experiences of growing up or raising a multicultural family living in Australia. As one woman described the benefits of this approach for her:

> *So the fact that it was someone that spoke the language and can explain each of the points and give examples related to us, that made it easier. So although we can sometimes just translate, it doesn't make the same, it's a difference having someone who speaks the language.*

A popular aspect of the course was that it was interactive and inclusive, with everyone being encouraged to contribute knowledge and experiences to the discussions. A number of community members spoke about how they enjoyed and benefited from discussing parenting in a common language with people from different countries and with different experiences. For example, one woman commented "*although we're all from an Arab background, we're all actually from very different countries but the examples here were very diverse as well*". This inclusive partnership approach to learning enabled ideas to be explored in more depth, with better concept understanding as a result, as expressed by this community member "*We can add some from here and from there and we can go deeply for the idea and we can understand more.*". Everyday discussions on parenting challenges were normalized, along with the shared desire to learn more and to continue to improve in parenting skill.

Course Impact

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INDIVIDUAL IMPACT

Consistent with the focus of the CoS program, community members provided many examples of changes in the way that they related to, and communicated with, their children as a result of course participation. Across all groups, a key area of change they identified was an increase in the amount of time and individual attention they gave to their children. A few mothers from a group that had experienced complex traumas prior to settling in the Illawarra region spoke about attending to their children in terms of being more vigilant about providing them with a safe environment. One mother spoke about how previously when she took her kids to the park, she would be "*doing her own thing*" on her phone once they were playing. Now, after this course, she stays more attentive "*to take care of them, look after them, making sure that they're safe.*" Other women from this group also talked with reference to "*paying attention*", "*observe*", "*be conscious*" to their children for the purpose of identifying what might be dangerous for them. In comparison, parents from other groups spoke about being more attentive and engaged with their children in terms of wanting to "*build a good, positive relationship*" with them. This was actioned through spending more time with their children, talking together, or engaged in joint activity, and with physical closeness. For example, one mother stated that when her kids come home "*I give all my attention, something I never used to do. So I sit with them and all my focus is with them.*"

With younger ages, parents spoke most commonly about how they were now engaging in more play with their children. In these families, play was being spoken about as an opportunity to have fun together, and to "*listen to their children, spend time with them*". One mother talked about the positive affect her engagement in joint play activities was having on her children as well as herself, "*Before it was just like, "Oh, you're playing, give them a toy." But now, because you're playing with them, they enjoy it more and we enjoy it more.*" Another mother spoke about how the children's father used to be the one who played with their children, but now she also enjoyed playing more with the children, joining in for "*either toys or maybe basketball or something, or football play altogether*". The effect she happily noted was that "*Before, they prefer their dad. Now they prefer mum and dad.*"

Along with spending more time with their children, many parents spoke about having become better at "*recognising*" or "*focusing on*" how their child was feeling. Parents discussed how they were better able to talk to their children about their feelings (*"I ask them in detail how they're feeling what they're doing"*), to use cues such as their expressions or the way they were interacting with other children to understand their feelings, and to then find ways to support their child with those emotions. One parent discussed how she now thinks through a number of different possibilities for her son being upset at the end of the day "*Now we realise it could be that he's had a bad day at school or he's been bullied or he couldn't do his exam or his homework or there's another underlying reason why he's actually crying.*" With some CoS activities focused on understanding the progressive nature of brain development across childhood, another mother talked about how she now appreciated the importance of understanding the feelings of her 14-year-old and discussing them with him. This was new insight for her because "*in our culture when someone's at that old…he's a grown man*".

A few parents discussed changes in the way they disciplined their children. One mother spoke about how "*Instead of scolding and shouting at them, I try to be patient and explain to them…. Instead of saying 'no' to their request straight away, I take time to explain to them as to why I cannot fulfil their requests*", while another spoke about the importance of talking through problems after the event "*when everything has calmed down*". One mother also spoke about the use of corporal punishment back in their home country and how she had learnt that talking to her children was more useful for finding out what happened. Many parents referred to having learnt to be more patient with their children, including one mother who said "*before, I count for five. Now I count to ten or to a hundred.*"

Finally, several parents talked about their plans around parenting in the future. Two fathers talked about a new desire to "*be friends*" with their children, and how they were gaining more control over their own emotions. For example, one father spoke about his anger now being more controlled and how he had wanted to calm down to help keep his family together, saying "*We're family, we love each other, support each other, we stay together.*" Two of the mothers also reflected on their own activities in their homes and how they used their time, with one explaining how "*culturally, it's always like housework cooking, cleaning*" as how they show their love for their family. She said that a lot of them had learnt through the course "*that there are more important things than just finishing the housework,*" an opinion that was similarly voiced by this mother:

> But what I learned more before, my only importance was like making sure their clothes are clean, they've got their food, they're looked after and leave the house for cooking, clean and going to appointments, doing whatever I have to do. Now I've realised more so how important it is that not just it, they're not just the only important things, but I need to give the time to my children, actually give them my attention 'cause that will help even mentally.

FAMILY IMPACT

Community members discussed how the mood at home had changed as they had begun to implement the skills they had learnt on the CoS course. Children were referred to as being "*very happy that I attended this program*", "*calmer*" "*playing more*" and siblings were "*fighting less*". There were also examples given of how the increase in parental enthusiasm to engage in playful activities had changed the things that children wanted to do in their spare time. For example, one mother discussed how her son "*used to always be playing on his phone*", but now when given the choice of the phone or playing with her, he chooses her. Another mother said that her

daughter always told her, "*You don't talk with us, you don't play with us, only that Dad*" but that now it was different. She felt her children had started "*loving me more and liking me more*", making the home a happier environment.

For couples where the partner/husband had not been able to attend the CoS session, women commonly reported sharing the skills they had learnt with them after each lesson. One woman discussed how when her husband became angry or talked in a nervous way with the children she told him, "*No, this is not that. I think you need to do this to that*." and he had listened to her. Other women discussed how they used their new skills around communication and relating to each other on their partners. For example, one woman said "*Even though the program focuses on children, we can also apply what we have learned from this program to our partners or husbands. I have already applied some principles to my husband to improve our relationships.*"

There was also some discussion from community members around the intergenerational impact of the parenting skills they had learnt on the course. Some community members with older children reflected on how they "*might have done things wrong*" in their former parenting, but that they were learning so that they could personally "*do better things with their grandchildren*". However, for at least one of the community members, the goal was clearly to improve things for her children so that they would grow up to be good parents too:

> We had lots of new information and it's good for us and it's good for children and also, it's in the future, it's gonna be good for our grandchildren as well, so children to right their children as well.

COMMUNITY IMPACT

As well as benefiting from the course content, many community members talked about the community connections that occurred through their participation, using terms like "*made connections*" and "*made more friends*". Participants reported that they were continuing to meet up socially with their group now the sessions had finished, with opportunities for social connection being inclusive of those who are not able to drive. One group stated "*We speak on the phone with each other for us as well*", while another group had formed a WhatsApp group so they can stay in regular contact.

As the adults on this course have become more interconnected, they have also been sharing information with each other about community activities that might be beneficial for their children to participate in. For example, a community member who has been resident in this district for several years spoke about how she and her husband have been passing on information to one of the newer migrants in their group about children's holiday programmes and a local youth program run for girls that her daughter might benefit from.

A few women spoke directly about having shared their course knowledge about how to relate to and communicate with children to others in their wider community. For example, one woman discussed visiting a friend recently arrived in Australia who had disclosed using corporal punishment with her children. "*I told her that it is not the right thing to do in Australia, and we need to be gentle with children.*" Another example was given by one woman of how she talks to other families about what she learnt about taking care of children and how she treats her children now because she "*want[s] other people's children to be treated in the same way*".

PROPOSED FUTURE LEARNING

A number of community members asked if there would be future learning opportunities in a similar format, with one stating "*We are open to any other program that that can be in language.*" Community members identified three key areas of interest for possible offerings. 1) Parenting of teenagers. A number of the community members had older children and talked about feeling unprepared for the unique challenges of bringing up teenagers in Australia. They were interested in topics such as supporting their teenagers' mental health, safe social media use, dealing with consumerism, as well learning "*things that we can do with our teenagers to improve our relationship*" beyond those skills that they had learnt in the CoS course. 2) Parenting courses for men. A few women on the course expressed that it would be good if partners/husbands were encouraged to attend the current course. Although couples had been invited to attend these CoS sessions together, only a handful of men had taken up this offer. One woman expressed "*It would be a lot easier for us to put the ideas or principles into practice together as a couple. Men also need to know the parenting tips*", although she didn't think men would come to this course. However, another woman spoke about how it was "*good enough*" that just she attended as she usually shared what she learnt with her husband. 3) Supporting maternal mental health. A number of community members talked how they spend most of their time supporting their family and bringing up their children, with little attention paid to their own wellbeing. One female community member verbalised this as:

> We need something like about mental health for the ladies because we all had depression, we all had lots of things. You have to be strong for your family. We have to be strong for your husband, have to do this, you have to do that." What about us? 'Cause If you're not strong, strong inside or if you're not comfortable, if you're not healthy, you can't keep nothing, so that's the most important.

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DISCUSSION

Based on the thematic analysis described in this body of research, the in-language adaptation of the CoS program described here can be considered acceptable to both facilitators and community members. Facilitators set about establishing a respectful environment to enable learning, where possible they adapted the CoS program to the language and educational capabilities of their diverse community member groups, and facilitators delivered the CoS program using a partnership model. Partnership models of learning such as 'Students as partners' are built on inclusivity, trust, responsibility, shared emotional connections and a supportive learning community (Estacio, Oliver, Downing, Kurth, & Protheroe, 2017; Healey, Flint, & Harrington, 2014; Mercer-Mapstone et al., 2017). Such models are thought to improve engagement and provide more transformative learning experiences. These were experiences reflected in the community member responses which centred around the facilitators ability to engage them inclusively in learning the CoS concepts and their transformative experience of applying the learnings at individual, family and community levels. The partnership model is also strongly complimented by the community members seeking further educational experiences.

The CoS is used widely across Australia, often in health and community settings, and there has been at least one qualitative evaluation of the CoS program that involved both facilitators and families (Maxwell et al., 2021). Maxwell et al (2021) proposed that further evaluation of CoS is required to build the evidence base around which elements of the program are most effective and for whom. A positive finding is that the experiences of Australian parents and facilitators (presumably delivered in English) were very consistent with the findings from the current study involving the in-language adaptation of the CoS program. For example, themes arising from the study involving Australian community members included how parents shifted their focus from responding to a child's behaviour to the parent's role in supporting the child and their emotional regulation, developing empathy, enjoying playtime with their child, increasing their confidence in parenting, and the process of continual learning of how to be a better parent. For both the in-language and original (English-language) CoS programs, facilitators were central to successful delivery, in particular an emphasis was placed their ability to create safe spaces for conversation. Interestingly, some of the most challenging aspects of the CoS in the current study were also raised in the study with Australian parents. Examples included the core concept delivered during the "shark music", being ill-equipped or inexperienced to undertake self-reflection, having significant other problems (e.g. mental health problems or having experienced trauma). Maxwell et all (2021) described how the CoS program may not be a good fit for parents who lack the resources (both tangible (ability to attend weekly sessions) and intangible (e.g. where trauma, past experiences or mental health problems may interfere with the ability to garner the full benefits of the program)). Maxwell et al (2021) also described how, in the Australian CoS sessions, facilitators adapted their delivery to suit different cultural contexts. Examples included simplifying the language or delivering the program in-language, with additional cultural anecdotes or examples. The fact that the current study reported similar benefits and challenges to the Australian study suggests fidelity of the adapted program.

Many of the main findings from this research are also consistent with the broader literature on parenting programs, which includes programs other than CoS. For example, a scoping review on parenting programs for families from refugee and asylum seeker backgrounds noted the importance of tailoring the program to the specific cultural group and that immigrant families may also have very individual needs (Hamari et al., 2022). Two important cultural adaptations were to meet the linguistic and religious needs of the target community. Our evidence reinforces these findings for the CoS program in the Australian refugee and asylum seeker context. In the current study, facilitators discussed challenges such as how to find culturally relevant ways to convey parenting concepts when, for example, there may be no English-language equivalent words, or using a religious lens that participants were familiar with that would aid understanding. Hamari et al (2022) reported that high retention rates were a feature of parenting programs and were considered an indicator of program feasibility. They also discussed that programs built on trust and incentives were more likely to engage participants and facilitators, and were particularly important for enabling safe spaces for learning and discussion. The facilitator's knowledge of the cultural background and values of the community was essential, which was also reiterated in the current study. Another enabler to participation was the provision of remuneration and food. In our research, this was an important issue for some communities more than others and, where relevant, the facilitators' cultural knowledge alerted the teams to this in advance. Despite many similarities, not all literature in this area is consistent. Hamari et al (2022) highlighted that, in contradiction to most findings, one group of researchers has shown that comprehensive cultural adaptation is not necessary if an effective parenting program such as the Incredible Years program is used (Gardner, Hutchings, Bywater, & Whitaker, 2010; Gardner et al., 2019; Leijten, Melendez-Torres, Knerr, & Gardner, 2016). The evidence underpinning this claim was built around families with children who were experiencing problematic behaviour rather than a general population. This view is not supported by the qualitative experiences of the facilitators and participants who participated in the current study and many other studies of parenting programs. However, we acknowledge that the effectiveness of the in-language delivery of the CoS program on outcomes important to parents was not within scope of the evaluation.

What does it mean to deliver a program 'in-language'? The extent to which language and cultural adaptations of parenting programs are required for efficacy and engagement is not clear. In fact, the cultural adaptations that are needed for engagement and efficacy may be dependent on the unique language, cultural and educational needs and contexts (country of origin, country of settlement) of the target communities. Parenting programs that involve deeper more structural adaptations to culture are considered more effective in improving parenting than superficial (e.g. language only), or no cultural adaptation (van Mourik, Crone, de Wolff, & Reis, 2017). However, most literature lacks specific information on the precise adaptations made. Even within the three language groups involved in the current study, elements of adaptation extended from superficial (translation from English) to deeper structural elements that

involved more cultural and religious elements. The depth of the adaptation taken for the current research was not prescribed *a priori* and was dependent upon the facilitator, their cultural knowledge, time and resources. Thus, the adaptations that occurred in each group differed. Since it is not practical to conduct cultural adaptations for all immigrant communities in all contexts, adapting parenting programs to diverse cultural contexts will be driven by resources and ideally by immigrant communities that are most in need.

The current research demonstrates facilitator and community member acceptability of an in-language culturally adapted CoS program. However, if the culturally adapted CoS program is to be implemented more broadly, then evidence of efficacy is needed on outcomes relevant to families, children, and services. From a service provider perspective, full resourcing of the adaptation is an important aspect as this was a major challenge for the facilitators. Facilitators need to be trained in CoS delivery and would ideally have a background or have relevant qualifications that are suited to this role (e.g. psychology, counselling, social work). Given the investments in training and effort to adapt the program to different communities, there is much to be gained by facilitators delivering the program multiple times. Such an experience would also allow the adapted CoS programs to be further developed and refined for the cultural group. Feedback from parents was overwhelmingly positive and they sought more training across different topics suggesting the program was perceived as beneficial. However, it is likely that the parents who participated in the focus groups were the most highly engaged and valued the program. Although not voiced directly by these parents, remuneration, child care, and refreshments are key to enhancing engagement, and that would also need to be budgeted by service providers. An additional benefit of the conducting programs in community facilities (such as library rooms) is that it welcomes immigrant families to new and free spaces.

In conclusion, the in-language adaptation and delivery of the CoS program to Kinyamulenge, Karenni and Arabic communities was highly successful with broad impacts for individual family units and their relationships, as well as broader community effects. The current study demonstrates the feasibility of this approach, to developing and delivering the CoS to small non-English speaking community groups.

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APPENDIX A

CoS Program Facilitators

Weekly reflection questions
- What went well in this week's cos session? How do you know?
- What was a situation in this week's cos session that could have done better? How?
- Did the group work well together? Upon reflection, what could have been done differently?
- How can you improve the materials and resources used in future sessions?

Interview questions for facilitators after cos program complete
- What do you think may have influenced participants' uptake of this program? Were any related to language or cultural lens?
- How did your cultural background help you to modify this cos program to be delivered *in language* (kinyamulenge, burmese/karenni, arabic)?
- Can you give some examples of how you adapted the cos program for the *in-language* offering?
- What do you think are the benefits for consumers of this program being delivered *in language*?
- Understanding of content?
- Social/community benefits?
- Were there any obvious advantages to the participants receiving this program in their first/preferred language? What were they?
- Were there any comments, stories or input from participants from your debrief sessions that tell a story about the uptake and impact of the program?
- Were there any challenges for you in applying this program in (language)?
- Would you do anything differently next time?
- Is there anything else you would like to share about your experiences of running this program?

APPENDIX B

CoS Participant Focus Group Topic Guide

- Thinking about the cos program you recently completed, why did you choose to participate in this program?
- Have you been in a program like this before?
    - If yes, how did this experience differ?
    - If no, what is unique or how did this differ from other programs and services that you access? (E.G., GP, mental health services, NDIS, early childhood services, playgroups)
- Does it make a difference that the program was delivered in (*language*)? Can you please explain your answer?
- How do you think this program would have been different if it had been offered in english or with an interpreter?
- Have you noticed any changes for you and your family as a result of taking part in this program?
- What aspects of the program have 'stuck' with you / what aspects of the program do you continue to use, including during challenging moments? Can you please provide an example of a recent moment?
- Are there any other impacts of the program that you noticed because it was delivered in (*language*)?
    - E.G., Have you connected to new/other people since completing this program?
    - Have you been in contact with anyone in the program since its completion?
- Is there anything else you would like to share about your experiences of taking part in this program?