An exploration of the experience and sense-making of refugee parents and children of the Positive Parenting Program (Triple P)

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By Areej Arif 2018

Supervised by Dr. Clifford van Ommen
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Abstract

According to the UNHCR (2015), the number of people forcibly displaced globally was 65.3 million by the end of 2015; the highest since World War II. The drastic increase of numbers in recent years makes research on refugees, displaced persons, and asylum seekers particularly important. As a contribution to help those affected by the global crisis, the current study qualitatively explores one of the challenges that refugees face after resettlement, parenting. The study is based in New Zealand, which has also increased its refugee quota in recent years. Seven mothers from refugee backgrounds were interviewed following their attendance at an evidence-based parenting program; the Triple P Discussion Group Series. During the interview, participants discussed their parenting experiences before and after they had attended the program. Their children were also involved in the study by being asked to respond to a series of vignettes related to the Discussion Groups in order to explore their sense-making of parenting situations. Data were analysed using thematic analysis, where four main themes emerged related to the parenting struggles which were not resolved after completion of the programme, the influences on parenting, the parenting strengths of participants, and the usefulness of the programme. While the study suggests that the Triple P Discussion Group Series was useful for the participants, it also proposes that additions to the program would make it more useful and relevant. Suggested additions include addressing parental mental status and mental health, changes to family dynamics, and the development of acculturation gaps between refugee background parents and their children.

Key words: Refugees; parenting; Triple P; New Zealand.
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Nga mihi ki a koutou!
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Chapter 1 Introduction

1.1 Context

Refugees in New Zealand

Refugees are individuals who have had to leave their country due to war and/or violence and have a well-founded fear of persecution if they remain in their country (United Nations Convention, 1951). Unlike immigrants, refugees are often forced to flee their countries without preparation. That is, leaving without their belongings, without the chance to farewell loved ones, and without a choice to where exactly they will be going. Therefore, when refugees arrive in their resettlement countries, they often do not know much (if anything) about the language and culture of the country (NZIS, 2004). An asylum seeker is a term given to an individual who has yet to be given refugee status in a country (UNHCR, 2017). In other words, their claims have not yet been processed. The current research will focus on former refugees in New Zealand (NZ); that is, individuals who came to NZ as refugees and have been granted permanent residence or citizenship.

NZ is part of the United Nations High Commissioner for Refugees (UNHCR) regular resettlement program. 750 refugees are accepted into NZ every year, with this number being increased to 1000 per year for 2016, 2017, and 2018 due to the Syrian crisis. Since World War II, over 33,000 refugees have resettled into NZ. Once they arrive in NZ, they stay at the Mangere Refugee Resettlement Centre in Auckland for six weeks, where they are given an orientation to life in NZ, English language classes, and undergo health (including mental health) assessments. Following the six weeks, they are resettled in different parts of NZ (Immigration NZ, n.d.). The current research will focus on former refugees resettled in Auckland.

In NZ, there are several service providers that work alongside refugees to support their needs. Refugees as Survivors New Zealand (RASNZ) is the only mental health service in NZ dedicated to refugees, and is located in the Auckland region. The New Zealand Red Cross offer practical community integration support to refugees through their Pathways to Settlement programme for up to 12 months after their arrival, and are located in 20 regions across NZ. Immigration New Zealand’s Refugee and
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Protection Unit works under the New Zealand Refugee Resettlement Strategy to support refugees to achieve self-sufficiency in areas such as employment, housing, education, and health.

Many refugees experience mental health issues and social difficulties. It has been found that the level of risk for developing psychiatric disorders is significantly higher for refugees than the general population (Kirmayer, et al., 2011; Schweitzer, Brough, Vromans & Asic-Kobe, 2011). Postmigration social difficulties, such as poor integration, decreased family support, difficulty with employment, and discrimination in access to education and housing, also significantly impact refugee mental health outcomes (Butcher, Spoonley, & Trlin, 2006; Lamkaddem, 2013; Schick, et al., 2016; Schweitzer et al., 2011). Mental health issues experienced include trauma-related disorders, chronic pain, depression, anxiety, and somatic syndromes, with the symptoms being more severe for refugees who have experienced severe trauma, and PTSD being more prevalent in victims of torture (Kirmayer et al., 2011; Taylor, et al., 2014). The challenges that refugees have faced in their home countries coupled with the challenges of adjusting in their host countries, make them a group that would benefit from research focusing on their unique experiences. One of the challenges for refugees is parenting their children alongside all the other difficulties they face.

**Triple P (Positive Parenting Program)**

Triple P is a parenting support system founded by Matthew Sanders, initially in New Zealand (Triple P, n.d.). The theoretical basis of the programme is that of social learning, behavioural, developmental, and cognitive principles. Through social learning, coercive family interactions can be maintained by children and, therefore, the programme teaches positive parenting strategies as a replacement for the coercive or ineffective parenting styles. Furthermore, behavioural ABC (Antecedent-behaviour-consequence) models have influenced the programme to embed strategies that focus on changing behaviour antecedents to promote behaviour change, such as teaching parents to provide engaging environments for children. Also, the topics in the programme are based on children’s behaviours in everyday contexts so that parents can teach their children developmental competencies as appropriate for their age. Higher levels of the programme utilize cognitive techniques to target parental coping skills and emotional well-being (Sanders, Markie-Dadds, & Turner; 2003).
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The strong evidence base of Triple P contributed to its ranking as the number one parenting programme by the United Nations (Asuncion & Fraser, 2016). There are over 240 studies investigating and evaluating its effectiveness in different contexts and with diverse cultures (Mejia, Leijten, Lachman, & Parra-Cardona, 2016; Morawska, et al., 2011; Sumargi, Sofronoff, & Morawska, 2015; Turner, Richards, & Sanders, 2007).

Triple P has a range of formats and levels of intervention that serve different purposes. Triple P providers can, therefore, select which format and level would be most suitable for the parents they are delivering to (Triple P, n.d.). The participants in the current study completed the Triple P Discussion Group series. The purpose of these groups is to facilitate a discussion on common parenting problems, explaining different pathways to such problems, and providing parents with a variety of parenting strategies to choose from depending on what they feel is appropriate for their family. Within this format, parents can give and receive support in a safe space from both the facilitator and other participating parents. The series comprises four topics, which are fighting and aggression, dealing with disobedience, hassle-free shopping, and bedtime routines.

Triple P with refugees

Triple P research focusing exclusively on its usefulness with refugees is limited, and the need for more research in this area has been identified (Koncar & Filus, 2014). In their quantitative pilot study evaluating Triple P among refugee families in Sydney, Koncar and Filus (2014) found that more assertive parenting strategies were being used after attending the programme, and that the parents’ understanding of their children’s misbehaviour improved, leading to an improvement in the relationship between parents and children.

At the end of 2016, RASNZ, the mental health care agency for refugees in New Zealand, began delivering Triple P Discussion Groups to refugee parents. The programme attracted a great deal of interest, and over 10 community groups from refugee backgrounds completed the Discussion Group series in 2017. This initiative and interest provided an ideal opportunity to conduct the current study to explore the experience of refugees with the programme, especially in terms of how useful it was and what adaptations may be necessary.
1.2 Literature Review

Refugee parenting experiences

Despite research examining Triple P with refugees being scarce, there has been previous literature examining general refugee parenting experiences (El-Khani, Ulph, Peters, & Calam, 2016; Grant & Guerin, 2014; Kimondo, 2013; Pham, 2016; Thabet, Ibraheem, Shivram, Winter, & Vostanis, 2009). The influence of the refugee journey on parenting for all types of refugees including intact, separated, and reunited families, as well as unaccompanied minors and pregnant women has been emphasised (Uwamaliya, 2015). Many factors come into play, for one, each family member may experience different struggles, such as depression, that can result in disconnections between one another. Also, feelings of survivor’s guilt may arise by those who resettled yet have missing family members left behind and, therefore, may not focus on parenting due to such preoccupations. Furthermore, children adapting to their new environment better than their parents can lead to acculturation gaps, gaps in communication and role reversals between them. Acculturation is when a person comes into contact with another culture and adopts some of its practices, while still maintaining their original culture (Cole, 2018). For example, a study on East African refugee women in the US found that mothers found it challenging to follow their cultural and traditional parenting practices as well as some American parenting practices; they struggled with the greater emphasis placed on the autonomy of children in the US compared with their own values. They also struggled to parent with the lack of family and community support that they were used to prior to displacement (Pham, 2016).

One of Uwamaliya’s (2015) recommendations is that a focus on parenting is also important in clinical services. As well as working with the distress of refugee parents, clinicians need to help them focus on their children’s current needs. Regaining confidence and control in parenting can empower refugee parents and enable them to move forward. It can also help the parent-child relationship and enable the children to live a more fulfilling life.

Other studies have considered the challenge of parenting in refugee camps (El-Khani, Ulph, Peters, & Calam, 2016; Kimondo, 2013). Kimondo (2013) interviewed four mothers in Liberia and found that the mothers’ parenting focus was related to the environment that they were surrounded by. For example, behaviours such as fighting
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and stealing were prevalent in the camp as a result of scarce resources, and therefore the mothers focused on teaching their children not to engage in such behaviours. The focus shifts when the environment changes. For example, there was a great focus on teaching the children to farm before coming to the refugee camp, however, as upsetting as it was for the mothers, they could not teach farming to their children in the camp, and therefore some shifted their focus to teaching them how to sell. Similarly, El-Khani, Ulph, Peters and Calam (2016) found that living conditions, exposure to dangerous people, lack of routine, and chaos in refugee camps presented as environmental challenges to parenting. Parents in the study reported behavioural changes in their children due to the changes in environment, as one parent states “they seem so aware of how to hurt each other” (p.104). Children also displayed signs of trauma such as bedwetting and screaming at night. Their communication with parents also changed, for example, listening less and speaking more aggressively. To add to the mix, parents experienced guilt, anger, stress, and a sense of abandonment, which made maintaining their families even more challenging. The researchers suggest that the provision of parenting support to refugees in such conditions is valuable in enabling them to better support and protect their children in their current situations and beyond (El-Khani, Ulph, Peters, & Calam, 2016). This point has also been highlighted in an interesting study by Thabet et al.(2009) which found that when children, who were exposed to war, perceive their parents as supportive, they are less likely to develop symptoms of trauma.

Limited research in this area has come from New Zealand (Deng & Marlowe, 2013; Guerin & Guerin, 2002; Judson, 2014; Mitchell & Ouko, 2012). Deng and Marlowe (2013) found several challenges experienced by solo refugee mothers. One challenge was the isolation that came from the absence of the father figure and being away from male relatives that can provide such a role. Another challenge was not being able to understand laws around child protection or not knowing about services available due to language barriers. Moreover, there was the added difficulty of parenting not being a community-based task in New Zealand. Mitchell and Ouko (2012) also shed light on the last point. As one participant states in their study (p. 101):

*The difference between here and Africa is in Africa the child is not the responsibility of one parent. A child is the responsibility of the whole big family... So, the child is seen as an asset to the whole community and the whole community is interested and keen on the
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*education of that child. ... While in Africa there’s a lot of support in relation to how we raise children, in New Zealand it’s really the individual parent’s responsibility.*

Furthermore, Guerin and Guerin (2002) found that parenting practices that were acceptable due to conditions of poverty in Somalia could be defined as abusive or neglectful in NZ. For example, children being left alone while the mothers walk a distance to find water and food. When Somali resettle in NZ, such parenting behaviours don’t immediately change. The above studies also looked at how these challenges can be overcome and suggested collaborative conversations around parenting practices with the parents including what is acceptable under the law of the resettlement country, and providing parenting support including alternative parenting strategies (Deng & Marlowe, 2013; Guerin & Guerin, 2002; Judson, 2014; Mitchell & Ouko, 2012). The current study would contribute to the growth of NZ-based research in this area.

**Conflict with laws in countries of resettlement**

Studies from several countries have looked at how different parenting practices by refugees have landed them in conflict with child protection services in their resettlement countries (Chang, Rhee, & Berthold, 2008; Critelli, 2015; Lewig, Arney, & Salveron, 2010; Williams, 2008; Xu, 2005). Other studies have also found that refugee mothers feared the legal system, which made them feel like they did not have control over their children (Pham, 2016). It is a tragic irony for a refugee parent to protect his/her children through dire conditions and struggles, only to be accused of not being a good enough parent once they resettle. The following section presents studies exploring the topic by country.

*United States of America*

A study examining 24 cases of immigrant and refugee children in US courts uncovered some interesting findings (Xu, 2005). The courts tended not to exercise cultural sensitivity or consider the unique family circumstances when assessing the children’s best interests. The courts expected parents to fulfil conditions similar to that of other parents, when in fact, many of the refugee/immigrant parents struggled with limited English language, financial instability, and problems with employment and housing. Terminating the rights of the biological parents was enforced for over half of the cases. Even though services, including parenting classes and anger management, were offered to the parents, they were not always in the parents’ native language or
The Positive Parenting Program (Triple P) with refugees culturally appropriate, and access to interpreters or viable ways of getting there were also not always available. The study highlights the necessity of improving communication between social workers and the courts to adequately represent the special circumstances of refugee and immigrant families, and to promote fairness (Xu, 2005).

Another study in the US examined the records of 15 families (13 of whom were refugees) in a preventive service programme designed for immigrant and refugee families and found that the main reasons for their referral included need for cultural orientation and lack of parenting skills (Critelli, 2015). The study concluded with recommendations for the success of such programmes, which included the importance of supporting parenting efforts. For example, helping parents become involved in their children’s schools can reduce acculturation gaps between parents and their children and therefore reduce conflict. Furthermore, Critelli (2015) as well as other researchers (Chang, Rhee, & Berthold, 2008; Williams, 2010), highlighted the value in acknowledging the strengths of the families, in that this can reduce resistance and enable open discussion of parenting issues.

Chang, Rhee, and Berthold (2008) examined 243 records of Cambodian refugee families held by the Los Angeles County Department of Children and Family Services. Astonishingly, all the cases involved separation, at least for some time period, of the parents and children, either by removing a parent from the home while the children stayed in the home, or vice versa. The findings also indicated that the most common reasons for reporting were alcohol abuse (mainly the father) and mental illness, commonly PTSD and depression (mainly the mother), and that this led to poor parenting, mostly child neglect. Most of the parents had limited English, and thus the researchers state that linguistic and cultural competence is critical for the success of interventions in such cases. They also offer suggestions, such as referral to parenting classes that take Cambodian refugee experiences and culture into account, and state that promoting communication skills and educating parents about alternative parenting strategies to physical punishment “may prove more effective in and compatible with the American context they find themselves in” (p. 157). Although Chang, Rhee, and Berthold (2008) have conducted an interesting study, their position on the matter is confusing. On the one hand, they encourage cultural sensitivity, but at the same time, refer to the parents as “perpetrators”. Also, their statement above gives the impression
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that assimilating to American norms is what is important, however it is rather more
important to find a balance where children are protected while parents’ own cultural
standings are also respected. I point this out in order to highlight the importance of
taking care not to unintentionally contribute to cultural intolerance.

Australia

In Australia, Williams (2008) and Lewig, Arney, and Salveron (2010) explored
the presence of refugees in the child protection system. Williams (2008) found that
definitions of appropriate parenting and child abuse are not universal. As one parent
states “. . . one might view Western culture as abusive or neglectful look at how
children are over sexualized. . . magazines with nearly naked women” (p. 207). The
researcher suggests a need for more appropriate services for South Australian
resettlement agencies dealing with child protection issues, and an international forum
that includes discussions on the effects of the refugee journey on parenting (Williams,
2008). Futhermore, Lewig, Arney, and Salveron (2010) identified strategies that may be
used to prevent refugee parents from being involved with child protection. The main
strategies identified were as follows:

- Encouraging parent-child communication which includes the regulation of
  emotions.
- Encouraging parent-school communication which also includes increased
  involvement of refugee parents in issues related to their children before others get
  involved.
- Providing parenting support through the provision of parenting information about
  alternative strategies, the laws in Australia, and the role of child protection.
- Assistance with culturally appropriate childcare to help with the absence of family
  members.
- Supporting cultural competence among practitioners by engaging with community
  leaders as well as experts in the field.

New Zealand (NZ)

In NZ, there is no information on the number of refugee children in state care.
Furthermore, Child Youth and Family (now Oranga Tamariki), indicated to the
researcher that they do not report on children from refugee backgrounds (personal
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communication), even though studies from NZ had indicated that CYFS had removed refugee children from their parents (Deng & Marlowe, 2013). Despite this, it is still important to reduce the number of reports of concern to Oranga Tamariki by developing appropriate parenting programmes and bridging gaps between differing understandings of acceptable parenting practices (Williams, 2010).

While Triple P may not tackle all the aforementioned researcher recommendations on reducing involvement of refugee families with child protection services, it does tackle the recommendations around providing parental education and alternative strategies. If found to be useful for refugees in the current study, Triple P may have implications in the child protection sector’s involvement with refugees.

The child’s voice in parenting research

Parenting research including the child’s perspective is scarce (Dobbs, 2005; Nixon & Halpenny, 2010). Therefore, this is an additional gap that is deserving of research. Despite the scarcity of research in this area, the existing studies offer insightful findings. The main findings from Dobbs (2005) in NZ and Nixon and Halpenny (2010) in Ireland include reports by the children that, to increase their understanding of discipline, their parents’ disciplinary messages needed to be more consistent, specific, and fair. Regarding physical punishment, the older children (particularly boys) were more likely to justify its use; however, loss of privilege was viewed as more effective. Furthermore, older boys responded more to their fathers’ use of discipline than their mothers’. The findings motivate the continuation of including children in parenting research, such as for the current study. In terms of Triple P research, there is only one study intending to include the child’s perspective through quantitative child reports of parenting behaviour as part of a multi-informant approach to test the efficacy of Triple P for parents of children with diabetes (Lohan, Mitchell, Filus, Sofronoff, & Morawska, 2016). Only the methodology of the study has so far been published but not its findings.

The means of collecting data from the children in the aforementioned studies have their limitations. For example, Dobbs (2005) and Nixon and Halpenny (2010) employed focus group discussions which, despite their many advantages, can make it challenging for researchers to account for individual views within the group context and
The Positive Parenting Program (Triple P) with refugees control peer pressure. Also, when the questionnaire that Lohan et al. (2016) intend to use was initially validated, young children were more likely to have consistent response sets, that is, having either high or low responses on all items. Therefore, it is equally important to continually explore other creative means to engage with children regarding parenting. In the current study, the vignette methodology was undertaken with the children and will be described in greater detail in the methodology chapter.

1.3 Research aims

The aim of this research is to explore the experience and sense-making of refugee parents and children of Triple-P. More specifically, to explore the following questions:

- Are the Triple P Discussion Groups considered effective by refugee parents in helping them deal with parenting challenges?
- Are there indications that an adaptation of the programme is needed? If so, what adaptations are necessary?
- Does the parents’ use of Triple P strategies influence how children make sense of parenting situations?

Triple P has previously been adapted for specific parenting situations which have been found to need adaptations. Stepping Stones Triple P is an adaptation of the programme to suit parents of pre-adolescent children who have a disability (Sanders, Mazzucchelli, & Studman, 2004). Family Transitions is for parents whose separation or divorce is complicating their parenting (Stallman & Sanders, 2007). Lifestyle Triple P was developed for parents of overweight children and promotes healthier family eating and physical activity (Gerards, Dagnelie, van der Goot, de Vries, Sanders, & Kremers, 2012). Pathways Triple P was developed with a particular focus on helping parents manage and cope with their anger (Sanders & Pidgeon, 2005). Indigenous Triple P was created in consultation with elders from remote and urban Indigenous communities in Australia (Turner, Richards, & Sanders, 2007), and most recently, Te Whānau Pou Toru was established as an adaptation of Triple P Discussion Groups for Maori in New Zealand (The University of Auckland, 2017). The current study will, therefore, help determine whether there is a need to develop an adapted Triple P Discussion Groups series for refugees as well and, if so, what areas need to be addressed.
1.4 Outline of chapters

This thesis is structured into five chapters as follows:

Chapter 1 Introduction introduced the topic under study by providing context and background information, and by bringing to light insightful existing research findings related to the topic. It also described the research aims and questions.

Chapter 2 Methodology includes the ethics related to researching refugees and children that were considered in this study, the rationale for using qualitative interviews and vignettes as the data collections methods as well as how they were undertaken, descriptions of the process of recruitment and of the participants, the rationale for using thematic analysis as the data analysis method, and a detailed description of measures taken to ensure the trustworthiness (or credibility) of research findings. The chapter ends with a discussion of the limitations of the chosen methodology.

Chapter 3 Findings presents the major themes and subthemes that emerged from the parent participant data. The four main themes are specific parenting struggles, influences on parenting, strengths, and Triple P as useful. Several subthemes are presented under each main theme, and participant extracts are used to exemplify these. The chapter also includes the findings from the child study and how it ties into the parent study.

Chapter 4 Discussion examines the study’s findings in more detail. Acculturation gaps, changes in family dynamics, parental mental state, single parenting, coping mechanisms, and the gendering of parenting roles are elaborated on here. The chapter aims to provide practical suggestions on how to deal with the outstanding parenting issues presented by the participants.

Chapter 5 Conclusion, implications, and suggestions for future research summarises the key messages of the study, discusses implications for research and practice, and makes suggestions for future research.
Chapter 2 Methodology

2.1 Introduction

This chapter will discuss the data collection and data analysis methods employed in the current study. Alongside the chosen method, the data collection section will include information on participants, recruitment, and selection. The chapter will also discuss the ethical issues considered for the study, the limitations of the methods, and the efforts undertaken to ensure the trustworthiness of the research.

2.2 Ethical considerations

Massey University Human Ethics Committee (MUHEC) approval was obtained prior to the commencement of data collection (See Appendix A). The ethics application was extensive and required information on the purposes of the study, considerations of ethical principles, data collection procedures, and ensuring the cultural safety of participants.

Furthermore, when developing the current study, the researcher considered ethical principles recommended by other researchers regarding the inclusion of refugees and children in research (El-Khani, Ulph, Redmond, Calam; 2013; Powell & Graham, 2015). Previous researchers who have included refugees as participants in parenting research have considered whether asking recent refugees about an aspect of psychological need would evoke trauma-related distress (El-Khani, Ulph, Redmond, Calam, 2013). They found that a well-thought, semi-structured method enabled the parents to discuss their parenting with comfort. I therefore developed a semi-structured interview (See Appendix B) for the parents in the current study. Ethical guidelines for research in refugee populations have also been developed (Leaning, 2001). Certainly, the guidelines encompassed ethics that would also serve in complex, sensitive, and transit situations. Therefore, to the best of my abilities, I followed the guidelines that were relevant to my research. For example, “restrict studies to those that would provide important direct benefit to the individuals recruited to the study or to the population from which the individuals come” (p. 1432). The current study could provide direct benefit to the participants and refugees coming to NZ by exploring how a service
The Positive Parenting Program (Triple P) with refugees provided to them could be made more relevant and suited to their needs, and in turn, that might help empower their positions within their family units.

With regards to research with children, Powell and Graham’s (2015) chapter on the key ethical considerations of researching the experience of refugee children was my guide for the child part of this study. They argue that alongside the considerations that should be taken with children in general, there may be additional considerations in relation to refugee children. Also, although research including children shows the children that they are valued, and supports their right to participate, it still needs to be carried out by well-prepared researchers. Despite it being the case in my research that the majority of children interviewed were either born in New Zealand or arrived at a very young age (3 years and under), the ethical considerations by Powell and Graham (2015) were still relevant since the children were living with family members that were former refugees who had experienced significant challenges that, in turn, may have affected the children. Powell and Graham (2015) suggest that the vulnerability, competence, and dependence of the children should determine the way by which they participate in the research rather than determine whether they should or should not be included in the research. They centre the ethical considerations around four main areas, as follows:

- **Harms and benefits**: Major concerns in this area include the possibility of children becoming disturbed and burdened by the research process, and painful experiences becoming reactivated. Parenting may be a sensitive topic to discuss. I thought seriously about what questions were necessary for my study and what questions I could do without. Would asking the children directly about their parents parenting of them draw honest or socially desirable responses? Would they feel like they were “telling on” their parents, and how would that make them feel? Having read previous literature on potentially coercive parenting styles among refugees, the children in the current study may have been subject to such strategies, would painful experiences of the incidents be recalled, and would that disturb them? What if the parents did not wish to leave the room, what questions would the children be comfortable answering in front of them? My consideration of the above questions enabled me to choose an appropriate method of data collection to minimize risks of harm. The chosen data collection method will be described in detail in the data
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collection section.

- **Informed consent:** The main concern in this area is the inability to understand the research and procedures due to a limited ability to understand English, perceiving the actual signing of a form as threatening, being affected by adult-child power relations (for example, agreeing to participate out of respect for the adults such as their parents or the researcher), and establishing trust between the researcher and participants. In the current study, all the child participants had a good understanding of the English language. Written consent for the participation of the children was sought by both children and their parents (See Appendix C), and I made sure to clarify whether they had any issues with signing the form. The children signed the form in front of their parents, however, when parents left the room and before starting the interview with them, I made sure to ask them again if they were willing to participate. Furthermore, I was sensitive to cues which may indicate that the children were uncomfortable responding, and therefore, I went on to the next question when they took considerable time to answer a given question without coercing them to answer. Unfortunately, due to time constraints, I did not have an extended period of time to establish rapport with the children. However, before conducting the interview with their parents, I spent some time getting to know the family in general before addressing the study. Also, before starting the research-related discussions with the children, I asked them rapport-building questions such as what school they went to, and what their favourite pastimes were.

- **Privacy and confidentiality:** The main concern in this area was the possibility that parents would stay with their children in the room as they responded to my questions. In the current study, three parents did choose to stay in the room or move around the area that we were having the child discussions in. This was the right of the parent, and I could not deny them that. The children seemed comfortable with their parent’s presence and did not indicate that they wanted them to leave, but it is possible that they withheld responses due to feeling that their responses were no longer private. With regard to confidentiality, participants were assured that pseudonyms would be used on transcripts and reports, and identifiers would be removed.
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- **Payment/reimbursement:** The main concerns in this area are coercing participation by offering a payment or reimbursement, especially with vulnerable or poorer families, and creating more harm to the children if other family members who did not participate feel resentment towards the child. Therefore, reimbursement other than money, may be more suitable. In the current study, children were given a gift for their participation. The gifts were children’s games. Children who had other non-participating siblings, were given a game that could be shared, for example, a set of two tennis rackets and a ball.

2.2.1 Reflexivity

*Through the use of reflexivity, subjectivity in research can be transformed from a problem to an opportunity*

-Linda Finlay (2002, p.531)

In simple terms, reflexivity is the self-awareness of the researcher; the ongoing recognition that personal characteristics and positionality may play a role in the direction of the research (Berger, 2013). The transparency of the researcher enables the readers to make a more informed decision about the credibility of findings and whether they can be transferred to their own situations (Shenton, 2004). My positionality in this research appears in my ethnicity, my gender, my parental status, my journey to NZ, and my professional experience. I moved between insider and outsider throughout the process.

I was an outsider, by not being a former refugee, and not experiencing a similar journey to NZ that the mothers in this study had, however, coming to NZ as an immigrant, and sharing the same ethnicity and/or religious background as some of the mothers brought me closer to the insider position. I was an outsider by not facing all the same parenting challenges that the mothers did but, as a mother myself, I was able to appreciate the difficulties that come with parenting. Furthermore, my knowledge of global politics and issues, and refugee crises through my professional experience working alongside refugees in NZ for a few years, and my own pursuit of learning enabled me to grasp the experiences of the mothers more readily and be more sensitive to the way I communicated with them. Also, being a Triple P facilitator, I could ask them about what they gained from specific Triple P topics and understand the strategies
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they mentioned. I made sure they knew I did not have vested interest in Triple P and that I was more interested in exploring adequate parenting support for them. My insider positions facilitated the building of rapport with the participants, and in turn, they were more open and honest with their responses which was demonstrated when they shared, not only the aspects of their parenting that may be deemed socially desirable, but also the aspects that weren’t. To avoid being biased, I employed the measure of peer consultation, which gives colleagues (or supervisors, in my case) the opportunity to offer feedback on my process and analysis (Berger, 2013; Shenton, 2004).

2.3 Data collection

2.3.1 Recruitment

Participants in the current study were recruited through purposive sampling. Purposive sampling is a nonprobability sampling technique commonly used in qualitative research exploring the experiences of a particular group. The sampling technique chosen should depend on the research question (Tongco, 2007). The research questions of this study focus on the parenting experiences of former refugees; therefore, it is only befitting that the main criterion for inclusion was to be a parent from a refugee background. Furthermore, parents needed to have completed the Triple P Discussion Group series in 2017 and have at least one child aged between 7 and 12 years so that the child is able to participate in the child part of the study. The Massey University Human Ethics committee deemed the age of 7 to be the minimum age required for child participants to ensure that they can understand what was required for the study and give their assent. Participants were not excluded based on gender, age, ethnic origin, or socioeconomic status.

Parents who fit the inclusion criteria were approached by community facilitators about the study. Community facilitators are individuals that are both part of a community and employed by a service. Their role is to facilitate relationships between members of their own community and the service they are employed by, and at times they deliver the services themselves. They provide valuable insight into the culture and values of their community groups, which is an asset to services working alongside them. Parents that were interested in taking part in the study were then connected to the
The Positive Parenting Program (Triple P) with refugees researcher through the community facilitators. There were at least four community facilitators that assisted in mediating contact between the researcher and the participants. This approach was used as it was more likely to connect with former refugee parents in this way. From the researcher’s experience working alongside refugees, word of mouth is more effective in spreading information than advertisements. This is mainly because English is not the first language for these communities, and because they tend to be more accepting of information delivered directly to them through someone trustworthy.

Even though the sampling for this study was purposive, the selection was random in that the first seven eligible participants to express interest were recruited. Some believe that purposive sampling creates biased research; however, according to Shenton (2004), random selection of the purposive sample can counteract such allegations, and therefore, contribute to the credibility of the research.

2.3.2 Methods of data collection

Interviews

Data was collected from the parent participants through face-to-face semi-structured interviews. A semi-structured interview refers to the researcher developing an interview schedule with key questions that serve as a guide during the interview, however, the conversation can move away from the set questions when an appropriate topic of interest is raised by the participant (Cohen & Crabtree, 2006). Semi-structured interviews were used in this study as they are especially effective in exploring people’s behaviours, attitudes, beliefs, motivations, and choices (Raworth, Sweetman, Narayan, Rowlands, & Hopkins, 2012).

One interview was conducted with each participant after they had completed the Triple P Discussion Group series. The interviews took approximately one hour each. The interview schedule questions (see appendix B) were developed to reflect the research aims and included questions about the participants’ parenting experiences in general, their pre-Triple P parenting strategies, the strategies adopted or not adopted after attending Triple P Discussion Groups, and their experiences of the programme.
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The interviews were audio-recorded for transcription using a digital voice recorder, which the parents consented to. Using a digital recorder enabled me to stay more engaged with the participants than trying to take notes. It also ensured more accuracy as most responses could be transcribed verbatim (one interview was simultaneously translated and transcribed to English from Arabic).

**Vignettes**

Data was collected from child participants through vignette methodology. Vignettes can be texts or images which participants respond to (Hughes & Huby, 2012). For this study, texts were used. Discussions with child participants lasted approximately 15 minutes. The aim of using vignettes is to gain insight into the social experiences and acquired knowledge of participants (Jenkins, Bloor, Fischer, Berney, & Neale, 2010). In other words, the participants’ responses may or may not be an accurate reflection of reality, but they do provide a reflection of their interpretation/sense-making of reality.

One of the reasons why vignettes were selected for the child study was that their purpose fits with the aim of this research to explore how children make sense of parenting situations and whether their sense-making involves positive parenting, which could give insight to their exposure to Triple P strategies. Parenting can be a sensitive topic to discuss. Questioning children about their parents’ methods of parenting and how they interact with one another in their homes can be personal and children may resort to socially desirable responses. Therefore, another reason for using the current approach is that, by asking participants about a third party in the vignette rather than about themselves or those around them, social desirability can be reduced and sensitive topics desensitised (Barter & Renold, 2000). In the introduction of this thesis, research on conflicts between parenting styles of former refugees and the legal system of the resettlement country were addressed. Therefore, I took into account that the children in this study may have a fear that if they say negative things, authorities may be notified. After researching multiple ways of involving children, the vignette methodology stood out as the most appropriate method for the current study.

There are a couple more things to consider in the development of vignettes; credibility and the participants (Hughes and Huby, 2012). In order for the vignettes to be considered credible, their content needs to reflect the research topic. Gould (1996)
The Positive Parenting Program (Triple P) suggests some ways to establish the credibility of the vignettes. Firstly, the researcher should draw on relevant material to develop the vignettes. For the current study, there were four vignettes and each one was based on one of the four discussion groups in the Triple P series. Furthermore, since both positive and negative behaviours are discussed in the Triple P groups, half of the vignettes had the main character engage in negative behaviour and half had the main character engage in positive behaviour. This ensured that the children were asked about a range of situations and behaviours. Secondly, the vignettes should be examined by other experts that can assess their suitability. With the current study, a Triple P consultant, the researcher’s academic supervisor, and the Massey University Ethics Board all judged the vignettes as appropriate. Thirdly, including the vignettes and questions in the thesis increases credibility. The vignettes and associated questions are thus included in Appendix D. Other than credibility, consideration of who the participants are is important when developing vignettes. In this case, the participants were children. Therefore, to keep them engaged, I only developed four vignettes and made them as simple and straightforward as possible. Furthermore, the children were asked to respond to only four questions for each vignette. The first two questions were about the characters in the vignettes and then the second two questions moved into the child’s own experience without being intrusive (Have you been in a similar situation? What did you like about your parents’ responses?). The reasons why I only asked what they liked about their parents’ responses rather than also including what they did not like, is again to avoid socially desirable responses, and because I wanted to explore the positive strategies that the children liked.

2.3.3 Participants

The parent participants of this study were seven mothers. According to Patton (1990, p. 185), “there are no rules for sample size in qualitative inquiry. Sample size depends on what you want to know, the purpose of the inquiry, what’s at stake, what will be useful, what will have credibility, and what can be done with available time and resources”. Based on Patton’s statement, a 7-participant sample size was deemed appropriate for the current research.

At the time of the study, all participants were stay-at-home mothers and identified themselves as the main carers for their children. Each mother had between one to four children. The age range of the children was 6 weeks to 21 years old, and 14
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of them were between the ages of 2 and 12 years, which is the age group that is targeted by *Triple P Discussion Groups*. Table 1 details further demographic data of the participants. The parents all had at least basic English language ability, and therefore interpreters were not used, in order to minimize interference. One parent spoke Arabic, the same language as the researcher, and therefore, spoke that language during the interview. The researcher simultaneously translated and transcribed that interview into English, and replayed the interview several times for accuracy.

The sample was heterogeneous in a number of ways; however, parenting was important for all the mothers, particularly those that spent the majority of their time with their children or did not have others in NZ to share the responsibility with.

Table 1

*Participant Demographic Data*

<table>
<thead>
<tr>
<th>Region of origin</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Middle East</td>
<td>1</td>
</tr>
<tr>
<td>Africa</td>
<td>2</td>
</tr>
<tr>
<td>South and South-East Asia</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Time in New Zealand</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2 years and under</td>
<td>1</td>
</tr>
<tr>
<td>Between 2 to 5 years</td>
<td>3</td>
</tr>
<tr>
<td>Over 5 years</td>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Living situation</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Married and currently living with husband</td>
<td>5</td>
</tr>
<tr>
<td>Separated after arrival to NZ/ living alone with child(ren)</td>
<td>2</td>
</tr>
</tbody>
</table>

There were eight child participants in this study. Each parent participant had one child participating, except one mother, who had two participating children. The children were aged between 7 to 12 years. All but one of the children (who was 9 years old upon arrival in New Zealand), were either born in New Zealand or arrived at a young age (under 3 years old). All the children had a good level of speaking and understanding English and were in education at the time of the study.
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2.4 Data analysis

Thematic analysis

Data collected in the current study were analysed inductively using thematic analysis according to the steps outlined by Braun and Clarke (2006). There are 6 main steps. Briefly, the first step is to transcribe the data and read it several times to become familiar with it. The second step is to organise the data into codes, which are ideas about what the data is about. The third step is to organise the codes into themes, which are ideas about what the codes refer to. The fourth step is to refine the themes by making sure that the themes adequately represent both the codes and original data. The fifth step is to concisely name the themes and generate sub-themes where necessary. The final step is to produce a thorough report that tells the story of the data through the themes (Braun & Clarke, 2006). In my experience of using this method in this study, I found the most important step to be the first one, despite it being the most time-consuming. Transcribing the data myself, replaying the audio, and re-reading the transcripts against the audio several times enabled me to establish connections between the data sets more readily. The subsequent steps then flowed more smoothly following on from that.

Thematic analysis was used in the current study for several reasons. Firstly, it is suitable for research questions related to experiences, such as the research questions of the current study, which explore the experiences of former refugees with parenting in general and Triple P in particular. Secondly, being an early-career researcher, it was important that I choose an accessible method of analysis that I would be confident and comfortable using instead of becoming perplexed by a more specified method without fully committing to its theoretical groundings.

2.5 Ensuring trustworthiness

Validity and reliability are important concepts in research, and often determine how trustworthy a piece of research is. However, they don’t always fit with qualitative research, which makes readers question how findings from qualitative research can be valuable. Shenton (2004) produced a practical article detailing strategies that can be used to ensure the trustworthiness of qualitative research. He discusses how, for the
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qualitative researcher, credibility, transferability, dependability, and confirmability are concepts congruent to internal validity, external validity, reliability, and objectivity. I will now provide a description of the strategies I employed for the current study under each of the concepts:

- **Credibility** is about considering how consistent the findings are with reality. It can be ensured through:
  - Selecting methods of data collection and analysis which have been used in similar studies. Many studies exploring the experiences of refugees, some discussed in the literature review, employed interviews for data collection which were also analysed through thematic analysis (Choumanivong, 2013; Deng & Marlowe, 2013; El-khani, Ulph, Peters, & Calam; 2016; Judson, 2015; Lewig, Arney, & Salveron, 2010). Furthermore, the vignette methodology has also been used in previous studies with children and young people (Barter & Renold, 2000; O’Dell, Crafter, de Abreu, & Cline, 2012; Simons & Wurtele, 2010).
  - Establishing a relationship of trust between parties, in this case, between myself and the participants. As discussed in the participant recruitment section, the use of the trusted community leaders helped in establishing initial rapport.
  - Using random selection, even when sampling is purposive. Selection was random in the current study in that the first seven participants who showed interest in the research and were ready to take part were recruited.
  - Triangulation via multiple informants, which in the current study included parents and children, to gain a deeper understanding of experiences.
  - Honesty of participants, which was ensured by clearly stating to them that they could refuse participation, not answer particular questions, withdraw at any time, and that withdrawal would not, in any way, affect their participation in the program.
  - Iterative questioning, which was used for clarification and for further inquiry of responses, for example, when they talked about a parenting strategy, questions such as “So did you use that before or after attending...
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Triple P?” were asked, as this was an important distinction to make in the study.

- Debriefing sessions, which took place when needed between the researcher and Academic supervisor.
- Peer scrutiny; the Academic supervisor gave continual feedback on the research, and the researcher discussed several non-confidential issues with a senior colleague during the course of the research.
- The background, qualifications, and experience of the researcher being relevant to the research topic. The researcher of the current study has a BA in Psychology and PGDip in Psychology and is, therefore, familiar with research methods and ethics. She also has several years’ experience, working alongside refugees in numerous roles, one of which is as a Triple P facilitator.
- Comparing findings from the current study with previous research findings, which will take place in the discussion section of this report.

- **Transferability** is about how much of the study’s findings can be transferred to other situations. With transferability, the researcher is responsible for providing adequate information on the context and boundaries of the study, for example in this current study, I provided the number of participants, their demographic data, what data collection and analysis methods were used, the number and length of the interviews, and over what period the data were collected. However, it is then the responsibility of the readers, whether practitioners or researchers, to transfer the findings onto their clients or participants by carefully examining how comparable their situation is to those in my study.

- **Dependability** is about how likely it is to attain similar themes if the current study was replicated. The responsibility, then, lies with the researcher to provide a detailed account of the study’s processes so that other researchers can replicate it, as I believe I have done in the data collection and methodology sections of this report. Furthermore, ensuring credibility also contributes to dependability.

- **Confirmability** is about how much the findings can be confirmed to be a reflection of the participants’ experiences than a reflection of the researchers’
preferences. Many qualitative methods, including thematic analysis, allow the researcher to have an active role in the interpretation of data (Braun & Clarke, 2006). Therefore, all adopted methods and justifications for using them, and any beliefs held by the researcher about the phenomenon under study should be stated clearly when reporting findings, as I have done throughout this report, so that readers can assess the confirmability of the study.

2.6 Limitations

There are several limitations to the current study. One limitation of the methodology of the current study is that there was one interview conducted with each parent participant post-group, and one discussion conducted with the children also after their parents had attended the Triple P Discussion Group series, rather than conducting pre-group and post-group interviews and discussions. I had initially set out to conduct pre- and post- interviews, however, due to time constraints and unanticipated delays in ethics board approval to confirm the safety of conducting research with refugees and children, I resorted to conducting post-group interviews only. Even though my findings are still valuable, parent responses may have been more accurate by asking them about their parenting strategies before they took part in the series rather than in hindsight afterwards. Particularly with the child vignette discussions, comparing their responses before their parents attended the groups as well as after their attendance may have been more insightful. I suggest future researchers employ both pre- and post- data collection methods. Another limitation is that, due to the time that I had to conduct the study, I tried to establish rapport with the children by asking them general questions about themselves right before presenting the vignettes. The majority of the children responded openly, however, some were shy. Ideally, spending more time with children may establish better rapport and make them more comfortable talking to the researcher.

2.7 Summary

This chapter presented the methodology of the current study. The ethical considerations of including refugees and children, that guided my development and undertaking of the research, were discussed. My positionality in the research was admitted. A thorough account of the recruitment of participants, their demographics, the interviews, vignettes, and the method of thematic analysis was reported. Steps taken to
The Positive Parenting Program (Triple P) with refugees ensure the trustworthiness of the current study were stated, and finally, the limitations of the methodology were outlined.
Chapter 3 Findings

3.1 Introduction

This chapter presents the themes that emerged during the thematic analysis of the data from interviews with the participants of this research; seven mothers of refugee backgrounds, following their completion of the Triple P Discussion Group Series. The main themes are: Specific parenting struggles, influences on parenting, strengths, and Triple P is useful. Each theme has a number of subthemes. Figure 1 illustrates a thematic map of the parent study findings. Findings from the child study are also reported in this chapter and illustrate the influence of the parent’s attendance of Triple P Discussion Groups on the children.

Extracts from the data will be used to exemplify the themes. The names of the participants have been changed to numbers, and identifiers have been removed. Three-point ellipses “…” have been used for sentence abbreviations.

Figure 1. Parent study thematic map
3.2 Specific parenting struggles

The seven parent participants in the study experienced many common parenting challenges that were addressed in the *Triple P Discussion Group Series* such as struggling with interference from others in their way of parenting, and their children fighting with each other, not sharing, and not listening. However, they experienced additional parenting challenges that were either not addressed in the series or not resolved following completion of the series. These included creating a balance between cultures and lifestyles, parental anger, and parental depression and separation. Each will be discussed in turn.

3.2.1 Creating a balance between cultures and lifestyles

Parents talked about needing to create a balance between their own cultures and the culture and way of life in NZ. The differences were mainly due to the collectivistic versus individualistic nature of the cultures:

*Parent: To be honest, and I’m not commenting in a bad way, but our culture is like that, we depend somehow on somebody, and other people. There’s no independence like here. But now it’s changed because I’ve been here for almost 15 years. I’m a bit different now. But before I didn’t have the freedom, or I don’t know how to say it, like the bravery to do things. Like shopping, I didn’t used to do before. I never did it, my parents did. So, I didn’t have the experience. But I came here, and suddenly I have to do it, and that was challenging for me, but now I am used to it. (P07)*

*Interviewer: What was the thing you most found challenging in parenting them here?*  
*Parent: Well, to be honest, the availability of the internet, because where we lived (before NZ), the electricity would switch off, and so the internet would disconnect. So, we would get together, and also, we had many friends there and we would go out to entertaining places a lot, especially in the evening. But here, no, there’s pressure and it’s the opposite, we have to go out in the mornings, and the evenings we stay at home, because there aren’t places open in the evening. Even shopping has to be during the day. So, it caused pressure on us, they get depressed in the evenings... I get stressed, I like them to come together rather than each one on their own device. Sometimes I switch it off myself. (P06)*
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Parent: If my daughter wanted to go to her friend’s house, I’d go with her, I wouldn’t let her go alone. I go and get to know her friend’s parents, and her friend’s parents do the same and come over to get to know us. I become friends with the parents of my children’s friends. But it’s not like that here (in NZ).
Interviewer: What’s it like here?
Parent: Here, it’s changed. I feel like their friend’s parents, don’t want to get to know me... So, when I felt that the other parents didn’t want to initiate a relationship, I stopped initiating. So, they see their friends only during school. (P06)

Another pressing challenge was parents having to create that balance within their own homes. The majority of their children aged between 2 and 12, the target age group for the Triple P DG Series, were either born in NZ or came at a very young age. Therefore, they were more influenced by the culture in NZ than their parents, creating an acculturation gap:

Parent: Compared to [Country in South East Asia #2], it’s different here. We have to make them happy and then they will listen [in NZ], but in our country, most of the time, the children they listen to their parents. Here, it’s different, I don’t know how to explain you know, but yes, it’s different. She [youngest] compares “you aren’t letting me do like them”. Even in school, last week they had a disco thing, so I didn’t let her go, and she questions it “why aren’t you letting me go?”, or “let me go sleepovers to my friends”. I say okay let them come here but you are not allowed to go. She says, “if they can come here, why can’t I go there?”. Lots of questions. (P05)

Compared to her youngest daughter who came to NZ at a young age, P05’s eldest daughter who arrived as a teenager, was more understanding of her mother’s practices:

Parent: My eldest daughter... when she graduated... she needed a computer for university, her dad bought it for her. At her school, all the girls graduating, their parents were getting computers. At one point, she told me, I know Ma, you haven’t grown like that, if I get excellence it’s okay, that’s a western thing [as in buying things for encouragement] ... She said, “I didn’t get everything, but I know you love me, I know you didn’t grow like that to gift your children for what they did”. Because we didn’t get anything from our parents. Whatever we do, it’s a normal thing. Okay you pass, it’s a normal thing, they will say okay you should do more! (laughs). But here it’s not like that.
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The different parenting approach that P05 took with her youngest daughter compared with her eldest created tensions between the siblings:

Parent: I have changed. As a mother, I have changed a lot... my other children say “we didn’t grow like this, you know, freedom and everything. You are giving too much freedom for [name of youngest daughter]” ... You know I had a routine, when the routine changes, everything will change. I have to do again, you know, it’s very difficult for me. I used to get angry and shout at them, most of those things with [name of youngest daughter] I just say, “okay fine” like that. So, I think yeah, I have changed...

Furthermore, the difference in cultures created a feeling of fear in the participant in that she might lose her youngest daughter if she did not change her way of parenting. Also, the people that she used to get advice from were no longer present, which contributed to the struggle:

Parent: I think in this country, I’m afraid. If I am tight on them, they will go far from me... Yes, very difficult for me because here there is no elder with us to advise. (P05)

The acculturation gap became more difficult with the development of language barriers between the parents and their children:

Interviewer: So, what are the biggest parenting challenges for you?
Parent: For me, it’s the language... because my first language is [name of language], so it’s hard for me to say details in English, so when I say it in my language, they don’t understand. Because they are like native English speakers now.
Interviewer: So, do they speak your language?
Parent: No. They understand, but not the hard words. They’re not used to that. (P07)

Parent: Sometimes I don’t know how to explain to her [youngest]. I go to my eldest daughter, she explains things very well. Language is not a problem for her. She tells me [eldest] “it’s okay mum, you say it in your own language, she’ll understand. (P05)

When asked if it would have been useful, as part of the programme, to discuss transitioning from one country to another country or the gap between the parent and their NZ-born child, P05 agreed and acknowledged the existence of the issue with other parents but that they still had not developed ways to deal with it:

Parent: Yeah, but even in the programme, we used to talk. It’s not part of the session but [name of facilitator] used to talk because we are all from [Country in South East
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Asia #2, and she knows it’s not like our country here, we have to think about everything.

Interviewer: So, did you get tips from the other mums about how to deal with the cultural gap?

Parent: ALL the parents have the same problem!

Interviewer: Do they have any solutions?

Parent: (Laughs) No, no solutions, but all the mums have the same problem. Here, we have to change a little, we can’t be “no I’m always correct”. We have to try balance (P05).

3.2.2 Parental depression and separation

Parental depression and separation are grouped together in this sub-theme because they were found to be closely related. The term, depression, was used by the participants themselves, as opposed to the researcher using the term as an interpretation of participant descriptions. Separation, particularly among refugees in general, can include separation from their homeland, their spouses, parents, friends, or children. In our sample, two participants had separated from their husbands after arrival to New Zealand. For one of the participants, the separation had not impacted on her parenting as much as leaving her family did, however she did agree that talking about parenting through separation or single-mother parenting more explicitly during the Discussion Group series would have been more useful for her. For the other participant (P01), the separation did have a significant impact on her parenting. Below are extracts from P01 that illustrate her rumination about the separation, how it relates to her depression, and unhelpful attributions of her children’s behaviour:

Interviewer: Okay so, looking at your life right now, what do you think has been the biggest challenge to parenting?

Parent: The kids they want all the time to go outside. But sometimes I can’t. I have depression, and I said no no. They said Mum you said always no why! ... I want to take them but sometimes I have problems, yeah

Interviewer: ... were you depressed over there [Country in Africa]?

Parent: No. over there is family so, with the children. But over here, everything you do by yourself. So, you have to manage. Home, you manage. It’s a bit hard. (P01)

Parent: Sometimes (parenting) too difficult because when you have a husband just helping at home, you know, we share. But at the moment I’m just doing it myself
everything. So, it’s hard, you know. Because the children they don’t see him, so it’s hard. Sometimes I’m angry.

Interviewer: ... your separation from your husband, do you think that makes a difference to your parenting?

Parent: Yes, that’s why I’m angry, you know. That’s why I’m a little bit angry and hitting them, you know. When they disturb me, you know, just I’m doing everything by myself. And then I’m thinking my husband, why he left, why he left children. You know, he likes children more than me, but you know he left them. Even he didn’t come, and buy stuff, or helping. He’s not helping, by that, I have depression, you know. (P01)

Interviewer: ... Was that talked about? Dealing with depression while parenting?

Parent: Yeah, she told us that we have to tell them. Like, “not now, maybe on the weekend”. Not straight away, but by telling them again and again, they will understand... For example, all the time you know, five days, they want to go out. After school, mum we want to go. But then we have to tell them what we do, like today we have to do this and that. Then slowly they learn. Oh, today my mum did this, oh she has to do this. After one or two times, they understand.

Interviewer: So, you also told me that you think a lot about your separation from your husband and that gets to you. Was that talked about? Or parenting as a solo mum?

Parent: I didn’t really tell her, we didn’t explain that one. Just she focused on the children.

Interviewer: Do you think it would be useful to talk about these things?

Parent: Yes, yes. It’s good, of course. You know, how to manage and raise the children as single mum. Especially if you’re hurt by your husband. All the time if the children are disturbing you, you remember the husband’s one. I say “don’t disturb me! You are like your dad”. (Giggles) I say that, you know, but the children they don’t know. So, it will be useful, you know, how to deal with that. (P01)

### 3.2.3 Parental anger

Parental anger here refers to the parent’s own anger. Following the completion of the *Triple P DG Series*, the issue of parental anger was still common across the majority of the parents (5 of the 7 participants) and impacted on their parenting. When asked if adding a group about dealing with parental anger would be helpful, all five participants agreed. The anger originated from different circumstances for different participants. Although the *Triple P Discussion Groups* may not, on their own, resolve the original circumstances, they could be expanded to help the parents cope with their
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anger, avoid displacing anger onto their children, and equip them with positive
strategies to use in parenting situations that trigger their anger.

The anger led parents to engage in unhelpful parenting strategies, which also created guilt for them:

Parent: ... I want to change. I want to learn. Why am I shouting, why am I angry?
Because sometimes if I hit them, my inside is hurting. All the time, when I breathe, my heart is hurting, even I go to the hospital, they check me, and all is good you know. But inside it’s hurting me, because always I’m shouting, always I’m angry. (P01)

Parent: Still till now he wants to sleep in my bed, but I talk with him gently, no bubba you should go sleep in your sister’s room because she’s alone there, she will cry and get scared, if you sleep with me where will dad sleep. I explain to him. If not listening, I start anger... I am trying to stop myself and not hit them, but I can’t sometimes. I really really can’t control myself sometimes. But not too much to my daughter, because she’s big now, but especially to my son. So, my husband always comes and says why are you doing like this, and I say they are not listening to me. But my husband doesn’t do that, he just talks. (P04)

Parent: Like from how angry I am, there are things that they want to tell me, but they get scared to, because I might get angry at it, so they try to avoid me. Sometimes they ask me “are you relaxed?” so that they can see if I’m not angry and they can ask me what they want. It has reached that extent, yes. So, it would be good to know some way to calm my anger. (P06)

Two participants spoke about finding the breathing exercises taught to them during the Discussion Groups as a way to calm down helpful. I found this intriguing as breathing exercises were not part of the existing strategies in the series. Upon further enquiry, it was found that they both attended the same group and that a community facilitator attending that group had previously trained in relaxation techniques and when the topic of anger was raised, she taught them these techniques:

Interviewer: You said that you wanted to learn about why you get angry and that sometimes that anger might come out on your children. Was dealing with anger as a parent talked about?
Parent: Yes, she taught us how to breathe like this [does slow and paced inward and outward breathing]. And then you calm down, and then after that you have to talk to
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Interviewer: So, you found that useful?
Parent: Yes, well she taught us, but you know, it takes time. (P01)

Parent: Yeah when I am angry sometimes, you know I’m talking loudly, but now I [does inward/outward breathing] and get calm. Like this she told us [demonstrates again], breath. (Laughs). (P02)

Some participants felt that the anger was embedded in them, or takes time to change:

Parent: You know, from the blood it comes sometimes we can’t change it, the angriness. (P05)

Parent: Sometimes you know, you can change slowly. Sometimes, I hit them. But then “oh my god, why I hit them”. I’d try by telling, but sometimes I’d be angry and it takes time to change. (P01)

Anger was one of the traits, which many of the participants felt that they acquired from their own parents. The influence of the parents’ own upbringing on their parenting will be discussed in the next section.

3.3 Influences on parenting

Apart from the influence of learned Triple P strategies, there were several other factors that influenced the way the participants parented their children. These influences should be taken into account when working with refugee background families as some may create obstacles to the implementation of parenting strategies. In order to increase the usefulness of a parenting programme, obstacles to implementation need to be addressed. The influences include the upbringing of the parents, conflicting parenting styles between family members, the support systems that the parents have, and the surrounding environment. Each will be discussed in turn.

3.3.1 Upbringing of parents

The parent participants in this study spoke of how they were brought up by their own parents, and that sometimes the parenting strategies used by their parents were carried over to the next generation to be used on their own children. Some of these strategies were considered helpful, however, some were not.

Helpful influences
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There were many helpful strategies acquired by the participants from their own parents. These existing positive strategies should be affirmed by practitioners and built upon:

*Parent:* We would watch TV together, eat dinner, lunch together. At prayer time, we go pray. My mum and dad taught me good things like how I teach my daughter now. (P04)

*Parent:* Routine, timing. I learnt from my mum. She was very accurate and structured. (P05)

*Parent:* With my parents, if a problem happened with any of us, we would all sit together and discuss it, and everyone would give their opinion on it, not just one person. It was very democratic.

*Interviewer:* Is that something you do with your children now?

*Parent:* Yes, I am following that now with them. If I want to make a decision about something, I have to take their opinion. When I wanted to buy the car, I took them with me and we chose it collectively. We also went to buy a lounge set, and I took them to choose one. I also include them in other decisions, not just decisions for house items. (P06)

**Unhelpful influences and breaking the unhelpful cycle**

Alongside the acquired helpful strategies, the participants also acquired unhelpful parenting strategies from their own parents. However, some participants actively tried to change those strategies and break the unhelpful cycle:

*Parent:* My mum is actually like me, anger. Of course, I am like my mum, not my mum like me! (Laughs). Yeah, she’s angry you know, I was really scared to her. My dad is like my husband, gentle and doesn’t talk too much, sits quietly... I am trying to stop myself and not hit them, but I can’t sometimes. I really really can’t control myself sometimes. (P04)

*Parent:* My parents were very strict. Sometimes I think “I should have done for you [daughter] like grandma did for me” ... I did my high school and everything, my dad said you learn whatever you want, but you’re not going to work. Now here, I’m not a mum like that, [I say] you all can do whatever you all want to do, you learn, achieve something, and do something. I am very different from my mum. Sometimes when I get angry I see my mum inside myself! I say no I need to control myself.

*Interviewer:* So, when you were a child and did something not very good, what would have been your parents’ responses?
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Parent: Dad never touched me, but mum [did]! I think I learned from my mum this, that’s why I think I shouldn’t be like this, you know, from generation to generation, some bad things keep going. (P05)

Parent: Rules, I took from my parents. But that’s been tiring, I even told my mother, I couldn’t help but take some of your rules to my home. But she told me that I have to change them because things differ from one generation to the next, and that you were raised in a certain way but that this generation is more open, and so you have to go with it and try to change things. So, I do try. (P06)

Parent: Me and my family is different. Because when I came here, I learn a lot of things, that my family they don’t know. There, hitting each other, even you did something wrong, they didn’t tell you because you did this and this isn’t good, they didn’t teach you, just you do wrong, they hit you, yeah, but you don’t know why they hit you. They don’t tell you anything ...

Interviewer: You said your parents have a different style of parenting, did they use that style with you?

Parent: Oh, my goodness, just hitting, you know. Until you tired, they hit! (laughs).

Interviewer: and when you did good?

Parent: Something good, it’s just verbal you know. They said good girl or something...

Interviewer: So, did wrong like? break something?

Parent: If you broke something, if you lost something outside, lost your paper, your book. If you didn’t listen also. Just hitting. Not by talking, you know, not why you do this. If you lost your book, if they said from where I bring the money? by talking, then you understand, by the third time you understand. But in our one, they just hitting and you don’t understand.

Interviewer: So, sometimes you act in the same way, sometimes you hit. But you are also different in that you explain to your children why you’re hitting them.

Parent: Yes. Because sometimes you can’t control your anger, you know. After that, “oh my god, why I hit him? (P01)

The thought processes and the reflections used by participants to successfully break the unhelpful parenting cycles could be used to help other parents in making changes:

Parent: That’s a good question you asked you know about how I was raised. Most parents don’t think about how we were raised, but that influences us. I think, most of the time, okay I shouldn’t do this. It didn’t help me, so it won’t help them [children] either, so I shouldn’t follow this way. (P05)
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Parent: I changed, because my parents had strict parenting. Not only me, we were four children. My father was like “you have to do it”, strict parenting. We don’t have a choice. That was good thing for us because now we are like this, but for my children nowadays, I can’t do that. Me and my husband are both letting them have independence, but at the same time like uh...Control.

Interviewer: So why did you decide to change that method, why did you not just use what your parents used to do?

Parent: Because I realized that if I talked during that time [childhood], I would have learned more, and would have had more independence, and got more confidence, because I’m now struggling to talk to people because we were quiet.

Interviewer: So, because, as children, you were quiet, you think that affected you?

Parent: Yeah, because that parenting affected me, but I don’t want them [children] to be the same as me.

Interviewer: and has it been hard to change that type of parenting to your new style?

Parent: No, no because that parenting, the way I was raised by my parents, it was okay for them, but I didn’t like that parenting. At that time also, I thought to myself, when I grow up I will never do that to my children. (P07)

The unhelpful cycle can also be changed by observing others and modelling what they do:

Interviewer: So, some people say, this is the way that my mum raised me so I am just going to use this way, but what made you not?

Parent: Especially I have to thank my mother in law for that. She doesn’t like hitting children and yelling at them. She always used to talk with them, tell them. Behave like a grown up, don’t behave like children, so tell them continuously, one day they will listen. With hitting, that’s not going to happen.

Interviewer: So, you got convinced by your mother in law’s way.

Parent: Yes. Also, I have seen my sister in law, she has two children, and she never hits her children. So, I thought okay from her mum, she learnt. (P05)

The differences in upbringing between partners can also create conflict as illustrated by P06:

Parent: Sometimes clashes with my husband as he sometimes goes back to his old ways ... The one that he was raised with.

Interviewer: Okay, what was he raised with?

Parent: There is some strictness, I don’t know how to explain it to you, but they were different than our household. They didn’t have friendships together like us. It’s like
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“respect the older brother, listen to the older sister”. We didn’t have that. They are a bit more intolerant.

Interviewer: Okay so you’re saying that he uses that way of parenting sometimes towards your children?

Parent: Yes, but I am trying to change it. Like for example, if he’s upset at me, he doesn’t tell me directly “you did this, and I’m upset”, no, he just says it to the other person in front of him to indirectly pass that message to me.

Interviewer: Okay so he might tell the children so that the point comes across to you?

Parent: Yes, exactly, and he might give consequences to the children as a consequence to something I did, unrelated to them. His family had that thing too. And what would be the cause of their upset? Something you did five decades ago (P06).

Further conflicts in parenting styles between partners will be discussed in the next subtheme.

3.3.2 Conflicting parenting styles

Family members who play a role in a child’s life may have different ideas on how to best parent the child. When a middle ground cannot be reached, conflict can occur. Although Triple P identifies parental inconsistency as contributing to children’s misbehaviour, the participants still experienced such conflicts following the completion of the programme. They described how this conflict between themselves, their partners, and/or other involved family members had influenced their parenting in NZ.

Between parents

To give some context; as mentioned earlier, all the participants in the parent study were mothers that identified themselves as stay-at-home mothers. Six of the seven participating mothers acknowledged that, on average, they spent more time with their children than the children’s fathers did. One mother (P05) indicated that she and the father spent similar amounts of time with their children.

Participants were asked whether they had a similar style of parenting to their children’s fathers, and they responded with the following descriptions of their situations:

Parent: Mum and dad is different. When he [son] went his house, he just everything he listen him. Respect him, everything. When he come to me, it’s different. With me, he’s like my friend (laughs)… He tells him something, he just does it straight away not like
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me, sometimes I say do like this, he says no mum please. When his dad, not like this, yeah (laughs)… His dad is, you know, when he look him, he see his face [makes a rigid gesture]. With me, no. Mum and Dad is different always (P02).

Parent: Different ideas, yes, two ways… (Laughs) when I want him to do something, he doesn’t do it… I have more rules, he doesn’t have that much (P03).

Parent: No, no there is always a clash… For example, if we want to make a decision like about the children going out, I say yes, and he says no, and vice versa. It’s mostly when it comes to my son. I don’t like him to go out a lot, I don’t like him to mix a lot with the kids outside, like maybe just for an hour and I keep my eye on him, but my husband just leaves him outside and forgets, and I have to keep telling him “he’s late”, “go check on him”, “go see who he is hanging out with”. I have to keep directing that. (P06)

The importance of the fathers attending the programme as well as the possible reasons behind them not attending was indicated and described by some of the participants. The responses reflect a gendering of parenting roles:

Parent: Different. Yeah, I asked this to [name of Triple P facilitator] also that next time if they were going to do it again, to please also invite the dads. Yeah, because what we’ve learned from there, they don’t know. So, what we want to teach to the kids, and husband comes and says “no” and “not like that”. So, when I have an idea from there and I want to do it at home, sometimes he’s quiet and doesn’t say anything, but sometimes he says no, he comes and says, “don’t do like this”. Ah I’m stuck! I just want to say, “stay quiet, just leave it to me” (laughs) … if we also invite the dads to come with the mums, I don’t think they will, because they’ll say why do we need to go there? These things are just for mums. So, if a man and woman have that [as in facilitate] together, yeah maybe they will come. (P04)

Parent: As soon as I come back from the programme, I said you should have come today! [name of facilitator] said I mentioned parents, which means mum and dad. When I went to the first session, my eldest daughter said, why are you only going? Take dad and go. Sometimes when we [the mums] are so calm with the child, they [the dads] aren’t. Sometimes they don’t know for what to give freedom. Sometimes for everything they say okay, and sometimes for no reason they will yell at the child… Interviewer: … why did he decide not to go? [to the sessions].

Parent: I don’t know. He might think, okay this is your duty, right? Raising your children. You are the one that’s spending time with the children, so you should know.
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That’s true also because most of the time, he won’t interfere between me and my children – You’re mum. Mostly, they go to dad to get some permission only. [He says] they are with you, so it will be useful for you to go [to the programme], I don’t think it’s useful for me. After I went to the session, I thought okay, that’s good for them [the fathers] too, because raising children is not only our thing. (P05)

Explaining, to their husbands, the reasons why they wanted change for the family helped reduce the parenting discrepancy between them:

Parent: So, I asked him [husband] please, you can’t live like this, you know, we need to change for our kid’s futures ... I’m like this - , he’s still a little bit - (puts one hand a bit higher than the other) ... But now, when I had the third child, he’s changed. He can see how hard it is to look after them. Before we got married, husband said maybe 5 or 6 children enough, now I ask him, you want more children? He said no! (laughs). (P04)

Interviewer: Are there any strategies you learned in the programme that you wanted to use, that he [husband] didn’t agree with?

Parent: No, no, because I made him understand that I am going to a parenting programme to improve my relationship with my son, in particular, and to get closer to him so that the dislike between me and him [son] goes. So, he [husband] has not interfered at all. (P06)

The change in the behaviour of the fathers after coming to NZ was noted by several participants (P04 above, P01 and P05 below). Future studies interviewing fathers about these changes would be insightful.

Parent: It [husband’s change in behaviour] started here [in NZ]. Sometimes when the people they came from Africa or something, different country, they change you know, they improve. But sometimes, it’s a lot of change, you know. (P01)

Interviewer: Has his [husband] role with the children changed since living in [Country in South East Asia #2]?

Parent: Yes. Even in our community here [in NZ], I have seen most of them [fathers] are helping... there’s no one else. It’s 50/50, even in the home, they are helping, because they don’t have anyone else. In [Country in South East Asia #2], they will stay with their parents, someone is there. (P05)

**Between parents and other involved family members**
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In many cultures, particularly collectivistic cultures, it is common for other family members, such as grandparents, to be part of raising children. For P01, although appreciating their presence, the interference of her parents with her parenting style proved to be problematic:

*Interviewer:* So, you have rules with your children, do they [grandparents] also have rules with your children? ...

*Parent:* (giggle) because they just came 3 years ago, so still the same they still think like Africa. So, it’s a bit hard. The children they’re confused, you know. (P01)

When asked whether her parents use the parenting methods they used with her as a child, on her children now, P01 responded:

*Parent:* A little bit they change. They are already old, you know, my mum and dad are 75. Sometimes they do that to my children, you know. They shout, “why he do like this!”. I say dad he’s small, they are children, what are you doing, why you say like that. He said, “they are not children, sometimes when they talk, like adult they talk!”... My daughter (5 years old) and my 13-year-old sister in [African country], they think same you know, so they think no she’s (daughter) is not children (laughs).

*Interviewer:* Sometimes you said they [grandparents] come and they say don’t do this, don’t do that, but do they consider themselves like their parents?

*Parent:* Yeah, I want. I want them to be same like me. But they don’t know. Because they grow like that so they can’t change now, because they are old. I said Dad don’t shout because in New Zealand there is no shouting, if they shout, they confuse “what they doing?”. That’s why. Sometimes, they speak in [an African language], my country language, and my son he’s confused because he don’t know. But my dad he doesn’t understand that maybe he doesn’t know what I said. “Bring this! I said bring it!” but my son he don’t know what he said. Sometimes he doesn’t understand our language, he forget... And when I tell him [dad] that, he says “no he knows it!”... My god he’s angry when I say that. “but dad he don’t know that [African language]”. He said “before he knows, why he forget now”. In the school, all is English, so (P01).

Despite interference from family members creating conflict in parenting, family is an important support system for refugee-background families in NZ. The value of support systems for parents is described in the next subtheme.
3.3.3 Support systems

Family support and community support were the two main support systems discussed by participants of this study. Some participants enjoyed both support systems, some had one or the other, while some did not have either.

P01 did have first-degree family in NZ as well as good connections with her own community group, which she found helpful. However, as also described earlier, she still believed that having a supportive partner is valuable to parenting, and her separation from her husband had affected her parenting:

Parent: Sometimes too difficult [parenting] because when you have husband just helping at home, you know, we share. But at the moment I’m just doing it myself everything. So, it’s hard, you know. Because the children they don’t see him, so it’s hard. Sometimes I’m angry. (P01)

P02 and P06, however, had no other close family in NZ and were not particularly socially involved. Furthermore, P02 was also separated from her partner and had only one child, meaning that it was only her and her child together most of the time, which was difficult for her in comparison to her own upbringing, where many family members raised her:

Parent: You know, I went a lot of places [as a child]. I go to my grandparents, with my mum, with my auntie, everywhere (P02).

Parent: When I lived in [African Country], I lived with my parents, now I live by myself. And have children, have a kid. You know that one, it’s difficult. (P02)

She did want her parents with her in NZ, but couldn’t due to immigration difficulties. When asked if she felt better in NZ or in [African country] as a person, in terms of happiness and satisfaction, P02 responded:

Family is good there, but something is different in NZ too, everything, life is easier. In my country is, you know, some difficult.

P02 demonstrates a high level of personal resilience which is an important strength to build upon. P04, P05, and P07 also did not have close family members, other than their partners and children, in NZ, however, they did have good community support and involved partners. All participants had a close connection to their faith, and
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the majority regularly attended their places of worship, which signifies the importance that they place on those connections.

P03 was the only participant that had an involved partner, other family members in NZ (siblings with families), and good community support. She did, however, note a difference in support in NZ versus the country she lived in before arriving to NZ:

*It’s not the same because in [South East Asian country] the friends help you take care of the children more, and the whole family lives together. (P03)*

Other participants also noted the increased family support where they used to live:

*Parent: My husband and my mum, all the time they felt jealous towards each other. When my husband used to come back from work, and my daughter wasn’t at home, my mum would take her, so my husband felt like not happy, you know. But now here [in NZ], my husband just waiting when they [my parents] will come. I asked him, why do you want them to come here in a hurry? He said, because I can send the kids to them! (laughs). (P04)*

*Parent: Yes, everyone [lived] together, happy family (laughs).  
Interviewer: So, you raised the children together?  
Parent: Together yes. (P05)*

However, according to the participants accounts of their pre-migration experiences, there were advantages and disadvantages to the collective parenting of children. Advantages included having someone else to look after the children or the home when needed, and disadvantages included an inability to maintain rules when other family members did not also follow them:

*Parent: She [youngest child] didn’t spend much time with her grandparents, but my eldest, sometimes it’s very easy for me when we are going out somewhere to keep them [with the grandparents]. Sometimes grandparents, you know, if we say something like “don’t do this” [to the children], they won’t allow us to do. But sometimes it’s very difficult with grandparents, they won’t let you do things, they love their grandchildren. Sometimes it’s difficult, but most of the time, it’s easy for me. My mums side is okay for me, just lets me do whatever, but in laws, no.  
Interviewer: Do you sometimes feel like you want the support from them again?  
Parent: Yes of course, I think she [youngest] needs her grandparents support, she misses them. (P05)*
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Parent: Over there, it’s not only me controlling my kids, but the family. Like my parents and my sisters, and my husband’s side. So that’s hard too, to deal with.

Interviewer: So, you all lived together?

Parent: Not together, but close, so they are usually visiting. So, here there’s a routine, but there no, it’s not like that. So, I think here better to deal with the kids.

Interviewer: were there any advantages to having family over there?

Parent: Like with the household stuff, having family, they can help me to cook or clean, those stuff. But I don’t think that it’s good with parenting children.

Interviewer: Okay so you like having them there, but you don’t really like the interference [in parenting].

Parent: Yes, that’s the thing. (P07)

3.3.4 The surrounding environment

The environment that people find themselves in can sometimes influence their mentality. Participants in this study acknowledged the influence of their surrounding environment on their parenting attitudes; from changing the tone that they speak to their children with to being more vigilant with their children in the new environment.

Parent: I don’t like what my family do, so when I came to New Zealand… wherever you go, you learn something. When I go to the park, they [people in NZ] kneel down and say, ”you know how to do this one sweetie” and then oh my god in my country it’s ”do by yourself! I don’t know go!” Even if they [people in NZ] are busy with, for example, friends, they talking, if their children come, they talk to their children. (P01)

Parent: If you go to the nice country with nice growing, you also change like that.

Interviewer: So, you’re saying it’s about the environment.

Parent: Yes. (P01)

Parent: If I see that the parenting of those around me is logical, then yes, I could become like them. But if I don’t find it logical, then no.

... Interviewer: and have you changed as a person since you came here to NZ?

Parent: Yes

Interviewer: In what way?

Parent: You know, the environment has changed. The whole situation is different, a Western country to an Eastern country. So, it’s more pressure on me in the sense that I have to keep my eyes open and be with them constantly. (P06)
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*Interviewer:* Is there anything in your life that you’ve experienced that has influenced the way you parent your children?

*Parent:* Most of the time, I see other parents how they are raising their children. So, for the good ways, I think okay this might help for my daughter. One of my husband’s close friends, his wife, sometimes I learn some things from her. Sometimes she actually gives too much freedom, and you know giving too much freedom, sometimes that comes back.

*Interviewer:* So, you think the environment and watching how other people do things, influences your parenting?

*Parent:* Yes, I think it happens slowly. I think I don’t have patience like them, oh my god, okay we’ll try. It takes time. (P05)

### 3.4 Strengths

The previous two themes considered the challenges that the participants faced with parenting their children, whether they were personal struggles or external influences. This current theme focuses on a positive aspect of the participants’ parenting; their strengths. Two sub-themes will be discussed, that show that, despite the rather difficult refugee journeys of the mothers, they demonstrate tremendous personal resilience and care for their children and family unit.

#### 3.4.1 Caring for children’s future

Participants spoke about undertaking the refugee journey in search of a better and safer life for the sake of their children:

*Parent:* [Southeast Asian country] is not good, because we are refugees, so we can’t go to school, and you know for our kids that’s not good. What I see in New Zealand is that we have a good future for them. (P04)

*Parent:* [We left] Because my husband [felt in danger]. So, we thought, it’s not a good time to live here, it’s not good for the future, it’s not good for the children. (P05)

P01 separated from her husband to protect herself and her children following his use of harmful substances and changes in his behaviour. Her own father also undertook a difficult journey to protect her and her siblings when she was younger, showing an intergenerational commitment to the family:

*Parent:* [we left country of birth] Because of my dad, you know they want to take him to the war. Because my dad has children, so he told them who is going to look after my
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children, they are young. So, they said I don’t care just their mum look after them and then you go. But dad he doesn’t like, and then he went to [African country]. And he working there. And then he sent the money, and then we went to [African country].

The participants also showed that they cared for their children’s future through their willingness to change their parenting methods and become more positive parents. All parent participants exhibited this willingness to change by successfully completing all four Triple P Discussion Groups, and most requesting more sessions of parenting support.

Parent: When we first came here, we were just three. After 2 – 3 months, we were four, and after 3 years, five. So slowly slowly, we’re getting bigger, so we need to change. So, I asked him [husband] please, you can’t live like this, you know, we need to change for our kid’s futures. (P04)

Parent: Yeah, I want to use the strategies you know. But my older one is already grown so I don’t know but I will try my best to change. (P01)

3.4.2 Identifying positives in children and parenting

All parent participants identified positives in their children and rewarding aspects of parenting, which shows that they find their experiences with their children valuable despite the difficulties they may encounter in parenting them. In response to “what do you find rewarding about parenting?”, the mothers said that they enjoyed having their children around them and being a part of their lives, that they feel lucky at how their children generally are, and feel rewarded by their achievements:

Parent: How we are all together as a family, and spending time with the children. (P03)

Parent: This is new to me, because I didn’t study here, I didn’t go to school here. Raising children, taking them to kindergarten and school, and ceremonies at schools that happen. So, from the start I’m struggling, it’s all new to me. But after that, they are getting certificates at the end of the day, so it makes me happy. (P07)

In response to “what is something special about your son/daughter?”, the mothers said that they liked that their children still cared for them, they appreciated personal attributes such as being clever, good at reading, and helpful around the house. They also acknowledged their children helping them with things they did not know very well such as English.
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Parent: When I’m sick, or when I’m depressed, mum he said, and then he come, and he hug me, kiss me. (P01)

Parent: ... I listen him and I talk with him, and sometimes it’s good for me also, “mum not like that, don’t say like that”, but he teaches me the English, you know... oh sometimes he’s laughing. (Laughs). (P02)

Parent: That they are still close to me. If I am upset, they want to know what it is that has upset me. If something is going on for them, they come tell me. Before, my relationship with my son was not very good, but now after the programme, we have become close to each other. Thank god. (P06)

When seeking parenting support, it is natural for parents to focus on their children’s problematic behaviour and other aspects of their lives that contribute to their parenting struggles. Therefore, it is important for practitioners to ask questions that enable parents to reflect on what they are doing well as parents, and what their children are doing well. As mentioned in the introduction of the thesis, acknowledging the strengths of parents, and building on them, makes them less resistant and more open to change. Similarly, when parents acknowledge the strengths of their children, it makes it more likely that the children will respond positively to their parenting methods.

3.5 Triple P is useful

The findings suggest that there are adaptations, or at least considerations, that can take place to make the Triple P Discussion Groups more relevant to parents from refugee backgrounds. However, Triple P, in its current form, was still identified as useful to the participants of this study in several ways. Triple P did change parenting attitudes and behaviours, as well as children’s behaviours, and helped build confidence in parenting. The flexibility of the Triple P strategies also allowed the parents to adapt them to suit their own lives and families. Furthermore, the group format was particularly helpful for the parents. The usefulness of Triple P will be detailed in the following sub-themes.
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3.5.1 Triple P changes parenting attitudes and behaviours

As mentioned earlier, participants were interviewed once following their completion of the Triple P Discussion Group Series. Therefore, in order to capture the changes that occurred, they were asked to describe the strategies that they used before attending the programme, as well as after the programme.

When asked what she would usually do when her son upsets her, before the programme, P01 responded:

*Sometimes I’m angry, I hit him. But sometimes I’m not buying anything, you know, for short period, I told him okay, for example, he likes chips or he likes McDonalds, I didn’t buy for 2 weeks.*

However, after completing the programme, she responded with the following:

*The programme is good, you know, it’s helping us from before like in our country, we think that by hitting, they know everything, but now just by giving advice and encouraging them, they will know.*

Before what I do if my daughter and son are fighting over one toy, because in my country just we give to the small one…. But what I learnt from the group was just they play with sharing. If they are not sharing, we take the toy for a little time like 5 minutes and we put it somewhere and then after that they learn. Then after 5 minutes, you give it back to them and tell them to play together. If they do it again, I will take it away again.

... The shopping one. We have to tell them what to do, we can’t just say no don’t do this, don’t do this. We can give them the shopping list and say can you read it for me, can you help me to pick the things. So, they are busy at that time, they can’t go wherever they want.

Other participants also particularly benefited from the Hassle-Free Shopping Discussion Group:

*Parent: Most of the time when I go shopping, that session gave me a lot of confidence because she got lost twice [before the programme] when I was shopping... I learnt from the session, before you go shopping, to prepare everything. When we go shopping, she’s enjoying it because she’s the one that’s pushing the trolley, and taking things we want, then she sticks with me. (P05)*
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**Parent:** Yeah, the shopping. I give him the list, he said mum I got this one, this one. Before, you know, he used to take all of the things and put in the trolley (laughs). Mum, I want this one... I don’t want to go shopping. All like that. Now, he’s okay. (P02)

**Parent:** When I’m shopping, I show her some stuff, like the colours, shapes. So, while I’m going, I’m talking with her so she’s busy, and her time is passing like that... that one was very useful for me. The shopping I need to do, because my husband is a full-time worker. So, that was very important... After the shopping session, I realized that I need to continue this programme, because I need to learn more, it’s not finished my parenting, I need to learn more, so like the sleeping session, that also helped me a lot, and the aggressive behaviour one. (P07)

Participants also gained and started using strategies from the Fighting and Aggression, and Dealing with Disobedience Discussion Groups, and the changes from before and after the programme are quite evident in their accounts. Parents described being more patient with their children, talking more calmly to them, being more specific with instructions, and using strategies such as encouraging them to take turns, helping them to engage in alternative activities, and time-out:

**Parent:** Even fighting, if he fights with his friends or something, you know I talk nicely and that they have to take turns playing, sharing... Like you know, patience. Now I’m okay, but before I can’t do. And sometimes when he’s talking to me, I ignore him, so now he listens to me. (P02)

**Parent:** Like I have a set rule now that when [youngest daughter] finishes playing with her toys, she has to tidy them up and put them back where they belong. We have agreed to that, not in a commanding way, but like “come let’s tidy up the floor so it stays clean and no one trips up on the things on the floor”, so she has accepted that. My son, we decided on a time limit together for his video games, and then I would take time to engage in activities with him. (P06)

**Interviewer:** Before you attended, when she wasn’t listening, what did you used to do? **Parent:** Ah, don’t ask me that (laughs). But I’ll tell you, to tell you the truth I (whispers) shout at her, most of the time ... Even her nowadays, she’s raising her voice, shouting. [I say] okay if you want to say something can you please say it nicely? ... Sometimes, I’m thinking she might have learnt from me. Me shouting, they learn, right? So, for that, I feel very sorry for her, because we are shouting and scolding for her, but we don’t think how she learnt to shout ... another thing... when I’m in the kitchen and she is in the room, I used to call her from the kitchen, and after the programme, I learnt
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that no I have to go to them and make them understand what I am going to say. I will stop working and go to them and look at their eyes and ... get their attention and then they listen to me... (P05)

Parent: Like it’s very hard for me, you know... they always fighting, I don’t have any idea how to control them. So, after that, I enjoyed the programme and felt good ... I also do other things, like if she doesn’t listen or being naughty or something, I ask her to go to her room and sit there, until I tell her you can come back.

Interviewer: So that was after the programme?

Parent: Yes after.

Interviewer: Okay so before you attended the programme, were you doing other things to deal with their behaviour?

Parent: Other things. like I didn’t know how to teach the kids or anything. Before the programme, I busy with my mobile, they busy with their tablet watching cartoons, and my husband with his mobile busy. So, after this programme, I have ideas you know. Like I can’t let these things happen anymore. So, I just give it to them [electronics] because I want them to be quiet. Now, I give them for a while then I take it. You know, because it’s not good for them. (P04)

The response of P04 (above) regarding the strategies she used before attending the programme, shows that being equipped with practical parenting strategies, also helped in regaining control as a parent. This was similar for P06:

Parent: Before the programme, I would get confused, I didn’t know how to make them understand. I couldn’t understand their point of view. I didn’t give them a chance to talk. But now, I give and take with them...Here I tolerate them more. We weren’t this pressured in [Middle Eastern country #1], we used to just go out, we didn’t just stay at home like here. So here I tolerate them more, this is after attending the parenting programme though. (P06)

Participants also started to focus more on their children’s positive behaviour by praising or rewarding them:

Parent: Praising yes, sometimes I forget to praise her. But in the programme, every session, the four sessions, they say if they behave well, we have to appreciate them like “you behaved very well today”. I learnt that from the programme only, because most of the time, we don’t do that. We think it’s just a small thing. We think if she didn’t behave well, what will happen [rather than if she did behave well. (P05)
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Parent: Yes, I am praising him more on his good behaviour like “thank you for doing this”. I didn’t used to do that before. (P06)

Interviewer: So, when they do things that you like, how do you respond to their good behaviour?

Parent: I praise them, and also sometimes I hug them... and if they do more like that, then I buy something for them. So, I say “You did this, I’m so happy, that’s why I’m buying this for you”. So, they learn.

Interviewer: So, the praising and attention, did you do that before the programme or after?

Parent: No, after the programme, the praising. I normally don’t do it, I just thought oh they did it, and just say something like oh you did it. Only my reaction was showing. So, after the programme, I realized no I have to do that... and also, I realized that giving a small gift is good, after the programme. (P07)

3.5.2 Triple P changes children’s behaviour

Triple P helped change parenting attitudes and behaviours, which in turn, lead to changes in the behaviours of the children:

Parent: First part was about shopping... So that part is a very hard part for me with my younger one. Before her, I used to take what I want quickly, but after she was born, it takes time because I need to control her. So, when she’s demanding, I give her a treat and tell her listen if you behave good, I’ll give you this thing. So that helped me to handle her easily. So, whenever I go shopping, she’s happy, she knows she needs to behave nicely, and mother will give things. So that is helping a lot.

Interviewer: Do you feel like her behaviour has changed to the better now that you’ve been using that?

Parent: Yeah, especially the shopping thing, it worked a lot, and also the sleeping patterns with the timing. After the dinner, and change the nappy, she knows it’s time to go to bed. (P07)

Parent: After I went to this programme, the quiet time was very helpful for me. She didn’t get a chance to be in it [as in quiet time], but if I tell her “you’re going to get the quiet time”, okay then she stops and listens”.

Interviewer: So, have you seen changes in her after using these strategies?

Parent: Yes, because you know, when I go to her level, she’s with me. Whatever we want to take from her, we can take. If I yell from far, she won’t respond, she’ll say “ya? Ya?”. (P05)
Interviewer: So, do you feel your children’s behaviour has become better?
Parent: Yeah, I just make a rule. Before they just go to sleep with us at the same time but now no, they have their dinner, and go to sleep early. (P04)

Parent: Yeah, even the Sleep Routines, before he [8-year-old son] can’t sleep you know. When he sleeps, he “mum I want water, mum I want eat” everything. But now because I try early to sleep.

Interviewer: ... So, you’d set a time for him to go to sleep, and then get things ready, and every time he calls out to you, what do you do?
Parent: Just ignore (laughs). After that, he sleeps.

Interviewer: ... and how have you felt about using all these new things? Have they helped in changing behaviour?
Parent: Yeah. (P02)

As previously mentioned, out of all the children of the 7 parent participants (aged between 0 – 12 years), P06’s son was the only one who came to NZ as an older child aged 9, and therefore, his changes in behaviour since arriving to NZ are worth noting, as well as the usefulness of Triple P in tackling those changes:

Interviewer: Do you feel like, with your son, for example, that since you moved to NZ that he’s changed or is he still the same?
Parent: He changed.

Interviewer: In what way?
Parent: He has become angrier, more aggressive. He has his own room now, and all his computer devices that he plays with, so I feel like he has become more isolated than what he was like in [Middle Eastern country #1].

Interviewer: What was he like in [Middle Eastern country #1]?
Parent: He wasn’t like this. When we were there, if we needed something from the store, he would go get it happily on his bicycle. Like breakfast or anything, he knew the area and he would go get it. Everything was close. He would go and play with his friends outside in the afternoon or evening. It’s changed a lot here.

Interviewer: When you came here, and your son’s behaviour started changing, how did you respond to his increased anger?
Parent: I used to get even more angry. I didn’t adapt to his angry episodes, when he got angry, I would get angrier.

Interviewer: Did he used to tell you why he was angry? Or did you ask him?
Parent: No. I didn’t used to ask him because his anger was unnecessary. So, I used to ignore him, or sometimes I would also be upset and, so I would get more upset at him.
When asked whether attending *Triple P Discussion Groups* helped her with her son’s behaviour, P06 responded with the following statements:

*Before, my relationship with my son was not very good, but now after the programme, we have become close to each other. Thank god.*

*Thank God, he has started being on good terms with me, and more respectful towards me, he wasn’t like that before.*

*Like the other day, he was upstairs, and we were about to have lunch and I kept calling him to come down, but he didn’t. Then he came down and kissed me, and said “I apologise that I didn’t come down, I was watching a show and I wanted to finish it first before coming”. I told him yes, but you know I like you to come down for lunch. So, the next day, he came down for lunch and said, “I switched the TV off and came”, and when he finished eating, he asked if he can go finish his show. So, he understood what I like. Thank god, it’s a big progress. This programme helped me a lot, to change our ways.*

These extracts suggest that Triple P helped with the child’s anger, aggression, and isolation. However, they also indicate the need for further research exploring the usefulness of Triple P strategies with other behavioural changes in older children arriving in NZ, and whether including specific strategies would best suit those behavioural needs.

### 3.5.3 Triple P helps build confidence in parenting

All seven parent participants answered yes to the question “*Do you feel confident in parenting your children after the programme?*”. The presented extracts under the previous two sub-themes suggest that changes in the behaviours of the participants and their children led to an increased confidence in parenting. Below are further extracts that exemplify this theme:

*Interviewer: Can you describe your parenting experience before attending Triple P?*
*Parent: I was very stressed with parenting them before I went to the programme, but after I went, that changed, and it was useful for me to be honest. I feel comfortable on the inside. (P06)*

*Interviewer: Okay before attending Triple P, were you confident in raising your children in NZ?*
*Parent: I was, because I raised two children already so after that I went to Triple P. But*
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*my two older daughters are different, they are quiet and don’t tantrum, kind of peaceful. But my younger one, she’s opposite to them. So, after Triple P, I realized it’s not hard, and I can do it.* (P07)

*Parent: Before, I struggled [with youngest], and I didn’t know what to do. Sometimes I thought maybe what I am doing is wrong, and I am just hurting my children’s feelings or something like that. Now, I’m like different, like no I’m doing the right thing.* (P07)

Another thing that seems to have contributed to the parents’ confidence is that they were given several parenting options to choose from for different behaviours. Therefore, they could choose the option that they were most comfortable with and that best suited their family. To give an example, if their child continued to misbehave while playing, they could either take the toy away for a period of time, or place the child in quiet time, or place the child in time-out. Parents also adapted certain strategies to fit better with their lives and families, as described in the following subtheme.

### 3.5.4 Parents adapt and choose strategies to suit their own lives/families

Instead of discarding a strategy that did not immediately fit in their lives, the parents tended to think of other ways of adapting the strategy so they could still use it:

*Parent: [Talking about time-out], [facilitator name] said keep it [the room used for time-out] empty. But there is no place empty, all is full of things. So sometimes you think they are in time-out but they are playing, they enjoy! But she said you can put them in any corner, like here [points to an empty corner of the room], but not with any toys.* (P01)

Strategies from the *Bedtime Routines Discussion Group* were also brought up by the participants as useful, even though there were cultural differences with regard to sleeping norms in that Western culture places greater emphasis on the independence of children than their cultures do. However, participants adapted the strategies to suit them:

*Parent: Yeah like with the sleeping patterns, there is like a cultural difference.*

*A: Like what kind?*

*Parent: Like, they let them sleep alone and stuff, so I can’t do it now. So that kind of thing, sometimes I can’t do. But I realized to turn off the light or make the room darker and those things, they help to show this is the night time... So that thing, made it easy to also take time for myself. That’s why it’s good.* (P07)
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Parent: Before, when she [daughter] was born, I just make her sleep with me. But my husband says no our daughter is now big, it’s not good for her or us, so you should give her another room. But I would say, not yet later on later on. Because you know in [South East Asian Country], when the child is 7 or even 10 years old still can sleep with the parents, so that rule I followed here. But now I am happy they have the other room. (P04)

Interviewer: So, I remember we talked about sleeping routines, and some of the ladies there felt that it wasn’t relevant to their lives because they enjoyed sharing rooms, so did you feel that way as well?
Parent: Yes, we all sleep in the same room, sometimes [Eldest daughter] goes to her room.
Interviewer: So, you sleep in the same room even if you have other spaces to sleep.
Parent: Yes. (P03)

3.5.5 The group format as useful

Having found that participants in this study had specific parenting struggles, I anticipated that practitioners may be inclined to suggest one-on-one support to tackle those outstanding issues. For this reason, I asked the participants whether they would have preferred one-on-one parenting support. All seven participants indicated that they preferred the group format as it had advantages beyond just its content, such as getting parenting tips from the other parents, not feeling isolated in problems, and being able to share their parenting experiences with others:

Interviewer: What do you think makes the group better than one on one?
Parent: One on one also is good, but you know, from the group we learn more from what they say from their experience. But one on one is just only you talking about you only. In the group, you share from all of them. (P01)

Parent: Group is better, because I am talking to you now about myself and my kids, but when I talk with the others and [name of facilitator], they listen, and I listen. (P04)

Parent: The group was great. Because I don’t stay with only my way of thought, I can see how others think and how they deal with things, and I can try their ways, if it works for me, then that’s great. Like I said before, what [name of other parent in group] said to me kept ringing in my head, that maybe my son sees how I treat my daughters and how close I am to them, and that affects his behaviours. So, after that, I started getting
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close to him too, and even my daughters noticed and say, “what’s changed here?”, and I started calling him nice things more, which I used to only call my daughters. (P06)

Parent: I like the group, and it also gave me like free time to enjoy with other parents and talking with other parents. So, I realized why I didn’t do that before, like when I had my other children… talking to others about their experience and how they deal with things, also helped to deal with my situations… Before the programme, I thought I am the only one struggling, sometimes I can’t talk about it because I thought oh it’s just happening to me, you know. But after I went to the programme, the videos they show, and the other parents also talking too, I realized oh they are having the same thing. So that helped me a lot, especially for my younger one. (P07)

P07 also conveyed an interesting point about how parenting can be a sensitive topic that one can’t normally openly ask about, but that the parenting groups gave them a space to be able to do that:

Parent: … here we are like lonely, we can’t talk about everything, some things we can’t talk to others about. So, in that programme, other mums are talking about their problems, so I’m talking too...

3.6 Child Study Findings

As mentioned in the methodology section, eight children participated in the child study. Four vignettes reflecting each of the Triple P discussion topics were read to each child individually, and then they were asked to respond to questions after each vignette. All child participants were able to identify whether the behaviours of the vignette characters were positive or negative, and give a good reason of why they labelled them as such.

We concluded from the responses of the parent participants that the programme was useful in, not only introducing them to new parenting strategies, but also in getting them to implement the strategies at home, where changes in behaviour and attitudes occurred as a result. The responses of the children further ascertained the parents’ implementation of the strategies. Although some children did suggest some non-positive strategies for some of the vignettes, six children responded with positive parenting strategies for the majority of the vignettes, and two were able to with half of the vignettes.
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The following are responses for each of the vignettes to the question, “What do you think his/her mother should do?”:

**Vignette 1 – Hassle-Free Shopping (negative child behaviour)**

The response of C07 describes the idea of accidental rewards, as well as the shopping strategy of keeping the child busy, both presented in Triple P:

*Child: Try to calm her down but I don’t think it’s a good idea to buy the lollipop because then she’ll learn that she can do the same thing each time... But maybe her mum could get something for her like a little ball or something from home and then bring it to her so she can play with that (C07).*

Children also suggested explaining the issue to the daughter which includes what to stop doing and what to do instead, as also proposed in Triple P:

*Child: She should say next time, when you’re behaving, I’ll probably buy it for you (C02).*

*Child: She should tell her to stop, and talk to her to tell her don’t do that. She should try and get her to listen to her (C08).*

*Child: Tell her to stop crying and ask the person on the counter for a tissue and wipe her tears away, and then tell her why because she might not know and then she’ll be better (C05).*

C01, following some reasoning, concluded that the mother should not give her daughter what she wanted after crying loudly and should resort to leaving the shop. Leaving the shop until the child is quiet is a consequence presented in Triple P when a child continues to misbehave:

*Child: umm, just buy it for her.*

*Interviewer: Okay, and what do you think of Maria’s behaviour?*

*Child: Not good.*

*Interviewer: ... Okay, so if Maria’s behaviour is not good, why do you think her mother should buy the lollipop for her?*

*Child: (pause) oh wait, that’s not right. Maybe she just grabs it off her.*

*Interviewer: So, you think she should or should not buy it for her?*

*Child: Should not.*

*Interviewer: What do you think the mother should do instead?*

*Child: Just take the lolly off her and take her in the car and go home (C01).*
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Vignette 2 – Dealing with (Dis)obedience (positive child behaviour)

Praising and rewarding children for good behaviour are parenting strategies advocated for by Triple P with the justification that they lead to positive reinforcement:

Child: She should say a good thing about him, so he behaves the same way every day (C08).

Child: His mother should be really proud because he listened and shared his toy... She should say keep up the great work (C03).

Child: Maybe because he’s being a good boy, maybe give him a treat. Or maybe say you’re being a really good boy or great job or something (C07)

Furthermore, ignoring good behaviour is considered a parenting trap, and giving children at least some attention while behaving well is recommended:

Child: She should probably tell them that she’ll be nearby, and if you want anything you can call us (C05)

Vignette 3 – Fighting and Aggression (negative child behaviour)

In the programme, one of the strategies for managing fighting and aggression was time-out; placing the child in a well-ventilated safe space for a period of time, which was suggested by some child participants:

Child: What! Their mother should not let Jane have a turn, I mean whoever hit. One of them should just stay in their room and like read a book or something (C02).

Child: Maybe have a little corner for timeout and say you have to go to timeout, and think about your mistake (C07).

Another strategy was to remove what they are fighting about for five minutes then return it to give them a chance to behave well, as described by C05:

Child: Tell her to stop, and change the channel to what you [the mother] want and watch that channel for 5 minutes and then change it for the rest of the time (C05)

Vignette 4 – Bedtime Routines (positive child behaviour):

As previously mentioned, praising and rewarding good behaviour is recommended by Triple P:
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*Child:* Read him a story.

*Interviewer:* What do you think about John’s behaviour?

*Child:* Good.

*Interviewer:* ... So, do you think she should read him a story as a reward for him listening?

*Child:* Yes (C01).

*Child:* Maybe if he’s been a good boy today, then maybe “you’ve been a good boy today” and “keep it up” (C07).

*Child:* His mother should say how proud she is today and do the same the other days (C08).

The following are some responses under each of the vignettes to the question, “Have you been in a similar situation? What did you like about your mother’s response to that?”. Seven of the children responded with positive parenting strategies being used by their parents for the majority of situations that applied to them, while one child was quite shy about answering:

**Vignette 1 – Hassle-Free Shopping (negative child behaviour):**

*Child:* Yeah ... she didn’t hit me or she didn’t yell at me or anything, she says next time I’ll buy for you when I have money (C02).

*Child:* For my little sister, yes... They started talking to her, like take her away from the lollipop, and put her mind on something else (C07).

**Vignette 2 – Dealing with (dis)obedience (positive child behaviour):**

*Child:* Yes... She said can you please play nicely and I say yes. And she said thank you (C01).

*Child:* Yes... I like how they don’t yell [the rules] at me and how they just gently say it (C03).

*Child:* Yes... She says that she’ll be nearby, and I don’t have to go all the way to the hallway because she’s nearby, and I like when she’s nearby because sometimes I get really scared when I’m alone (C05).

*Child:* They tell me to have fun and go to the park or something like that (C06).

**Vignette 3 – Fighting and Aggression (negative child behaviour)**
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Getting the child’s attention by getting down to their level to explain things to them is a strategy presented in Triple P, and suggested by two child participants:

Child: Uh, yes... Like she just sits down, and she explains to me, she says that’s bad, you don’t do this, if you have an argument, you just tell the teacher, or try to stop it or find an adult (C02)

Child: Yes... They just talked about it, and we all sat in place to talk about what’s happened (C07).

C06 provides a good example of how children don’t necessarily enjoy having consequences to their behaviours but can still understand them:

Child: They just told me to go to my room, and wait for them to tell me to come back. Interviewer: And were you happy with that? Child: No
Interviewer: What would you rather have them do? Child: Just change the channel for me (C06).

Vignette 4 – Bedtime routines (positive child behaviour):

Child: Yes... I like how they respect me and they don’t shout at me if I did something wrong. I like just how they treat me well (C03).

Child: They stay with me for a little while because they know I’m scared a little bit. Sometimes I get nightmares (C05).

Child: Goodnight and good listening, thank you for listening, and not just staying outside and playing (C06).

Child: Yes... Because they keep encouraging us, we can keep on doing it (C07).

These findings suggest that the children had been exposed to positive parenting strategies, and that this exposure has influenced the way they make sense of parenting situations. It is important to note that the children were not, in any way, prompted to talk about any of the Triple P strategies.

Another interesting finding is that parent participants indicated that the use of praising and rewards for positive behaviour was not common before attending the programme, and this was also reflected in the responses of some of the children, where they indicated that either their own parents or the parents of the vignette characters do/should react when a negative behaviour occurs (above), but do not/should not act
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when a positive behaviour occurred (below), even when they labelled the behaviour as positive. This indicates that certain behaviours, such as praising good behaviour, might take time to change:

In response to Vignette 1

Child: I say can I please buy this, and she [mum] just says no, and I just put it back.
Interviewer: So, when you put it back, do they say or do anything?
Child: No (C06).

In response to Vignette 2

Interviewer: What do you think his mother should do?
Child: Nothing, he did the right thing (C01).

Interviewer: What do you think his mum should do?
Child: Nothing.

Interviewer: Okay, what do you think of Tom’s behaviour?
Child: Respectful.

Interviewer: Respectful, Okay. So, since he’s respectful, his mother shouldn’t do anything?
Child: Yeah, because she told him something and he did it (C02).

In response to Vignette 3

Interviewer: So, when you listen to [your parents], what do they usually say or do?
Children: They don’t usually say anything. They just smile and like how I listen to them (C03).

In response to Vignette 4

Interviewer: What else [other than goodnight] do you think his mother should say to him?
Child: Goodnight is enough.

Interviewer: Enough, okay. What do you think of John’s behaviour?
Child: He’s doing good listening to his parents (C02)

Interviewer: What else do you think his mother should say to him?
Child: Nothing

Interviewer: What do you think of John’s behaviour?
Child: Good
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*Interviewer: Why do you think it’s good?*

*Child: Because he followed his mum’s rules (C04).*

### 3.7 Summary

We can see from the parent participant responses that family dynamics can change following big changes such as forced migration and resettlement in a new country. Losing or being separated from key family members, children acquiring the new language faster than their parents, cultural norms or personal values being different than those in the resettlement country all contribute to the change in family dynamics. This has made parenting a more challenging task for the participants, however, being part of a parenting programme that enables them to discuss their experiences and get support from the facilitators as well as other parents, appears to be beneficial for their entire family unit.

It is clear that the *Triple P Discussion Groups* can be made to be more suited for refugee-background families; however, they still appeared to be useful for the participants in their current form. The parents seemed to be able to use the strategies with their children as evidenced by both their responses, as well as the responses of their children to the vignette questions. Using the strategies appeared to create healthy changes for the families.
Chapter 4 Discussion

As described in the introduction of this thesis, previous researchers investigated the challenges that refugee families face in their journeys through resettlement. Many studies have found that parenting challenges were prevalent for the families and identified the need for relevant and appropriate parenting support as a preventative measure for the development of further problems such as amplified acculturation gaps, distant parent-child relationships, child protection involvement, and mental health issues (Critelli, 2015; Deng & Marlowe, 2013; El-Khani, Ulph, Peters and Calam, 2016; Uwamaliya, 2015). By using Triple P Discussion Groups as an example, this study aimed to identify what parenting support for refugee background families might look like, which issues might be addressed, and what practitioners might need to consider.

The first research question was “Are the Triple P Discussion Groups considered effective by refugee parents in helping them deal with parenting challenges?” As discussed under the final theme of the parent study findings, the brief answer based on the accounts of the sample of participants interviewed is yes.

Furthermore, a programme’s usefulness is maximised by how much of it can actually be implemented. The second research question “Does the parents’ use of Triple P strategies influence how children make sense of parenting situations?” helped us, in the first instance, to further explore the parents’ implementation of Triple P strategies with their families. The responses of the children to the vignette questions suggested that the positive parenting strategies could be passed down to them through observing their parents and influence the way they made sense of parenting situations.

The first and second research questions take us to the third research question “Are there indications that an adaptation of the programme is needed? If so, what adaptations are necessary?”, for which the brief answer is also yes. The adaptations to be considered are:

- To address the issue of parental anger more directly in the programme and how parents can appropriately channel and cope with anger. This would also fit with the developmental principles of Triple P in that children would benefit from appropriate development of affect and arousal regulation and so, helping parents regulate their
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own emotions would most likely also benefit the children.

- To develop and discuss ways to mitigate parent-child conflicts arising from acculturation gaps. Under the social learning theoretical principles of Triple P, it makes sense that the children in the study are learning from the society which now surrounds them just as the parents described the influence of the surrounding environment on their parenting.

- To recognize the separation from family and community that can occur in refugee background families and discuss, in group, the challenges (such as single-parenting and depression) that may arise from that.

- To engage in exercises with the parents about their use of particular parenting strategies. Parent participants in the study reported learning parenting strategies from their own parents, and so, it is likely that their children will also learn parenting strategies from them. We started to see this occurring through the child study findings. The idea of getting the parents to reflect on the effects that their parenting may have on their children fits with the social learning direction of the programme.

- To understand the gendering of parenting roles and develop ways to reduce conflicted parenting between parents and other involved family members. Fitting with the behavioural theories underpinning Triple P, the parents reported that when they changed their parenting behaviours, their children's behaviours also changed; when they engaged more positively with them, the problem behaviours reduced. Therefore, it would seem likely that including strategies to reduce conflicted parenting behaviours would also have a positive impact.

- To acknowledge the existing strengths of refugee parents, such as undertaking the refugee journey for the sake of their children’s futures, in order to promote further change.
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- To encourage attendance of group parenting programmes before suggesting one-on-one parenting support as the group format was found to have additional benefits beyond the content.

- To emphasise to parents their autonomy to choose whichever strategies in the programme they are comfortable with and to adapt them according to their situations and cultures.

The next sections will discuss, in more detail, ways that the above adaptations may be pursued in *Triple P Discussion Groups*.

4.1 Acculturation gaps

According to Berry (2007), acculturation can occur along a spectrum with separation on one extreme, and assimilation on the other. Parents and their children may vary in the rate and extent of adopting the practices of the new culture and be on different levels of the acculturation spectrum, and that is where an *acculturation gap* may develop. As mentioned in the introduction of the thesis, acculturation gaps can develop between refugee parents and their children (Pham, 2016; Uwamaliya, 2015).

For some of the participants in the current study, an acculturation gap had already developed, while for some, it was starting to. The gap was exacerbated by the children learning the new language at a faster rate than their parents and forgetting their original language. This gap could then lead to intergenerational conflict, such as children finding it difficult to accept their parents’ rules which, as shown in the current study as well as previous research with refugee background families, made parenting a more challenging task (Judson, 2014; Merali, 2004).

Intergenerational conflict is more likely to occur as a result of acculturation gaps, when the original culture and the new culture are further apart in terms of cultural values (Judson, 2014). Hofstede (1980) calculated scores for 40 different countries on key cultural dimensions, one of which is the individualism versus collectivism dimension (IC). He defined an individualist society as one where there are loose ties between individuals, while a collectivist society as one where the ties are quite strong. Based on Hofstede’s research, figures 2 and 3 illustrate the difference between the IC scores of NZ and other regions where the participants of the current study came from (HofstedeInsights, n.d.; TargetMap, 2015). We can see in figure 2 that NZ (green bar)
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scores significantly higher on individualism than the other regions. Similarly, in figure 3, the blue circles indicate where NZ and the regions that the participants came from are on the map, and regions in red, such as NZ, indicate high individualism.

Figure 3. Comparison of individualism scores between NZ and other participant regions of origin

Figure 2. Map illustration of individualist vs. collectivist countries

What the difference in scores means for refugee parents is that if their children start adopting the individualistic values of NZ more than they do, then conflict between them may develop. For example, P06 mentioned that she only lets her children see their friends during school as the friend’s parents do not share the same customs as her of getting to know each other first. If P06’s children start finding the introduction of parents unnecessary, then conflict between them and their mother could develop. Being
equipped with strategies to deal with such conflict would be helpful in creating more harmonious relationships between the parents and their children.

It is worth noting that the NZ sample used in Hofstede’s research is unclear. It could be that a sample with a majority of NZ European/Pakeha was used, given that NZ is a bicultural society, with NZ European/Pakeha being more individualist than NZ Māori, who are more collectivist (Harrington & Liu, 2002; Podsiadlowski & Fox, 2011; Tassell, 2004). Although this would be reflective of the population of NZ, 68% NZ European versus 14.9% Māori (Statistics New Zealand, 2013), it would have been interesting to compare the participant regions with Maori on a collectivism scale. If scores are close, it could provide an avenue for parents from collectivistic cultures to feel more connected to NZ through shared understandings of concepts such as Manaakitanga or the importance of connections to whanau and whenua. This could possibly narrow the acculturation gap between the parents and their children as they explain to them that there are others in NZ that share similar values.

**Introducing cultural brokering to Triple P**

Cultural brokering is a process, described by Spiegel (1971), that encourages members of a family to reattribute their explanations of one another’s behavioural changes to the cultural changes that have taken place. In her study with Hispanic refugee parents and their children, Merali (2004) found that both sides were not aware that each of their cultural changes was related to the development of intergenerational gaps between them. She describes how this lack of awareness can lead to parents attributing their children’s changes to disobedience, and children attributing their parent’s reactions to abuses of authority. Merali suggests cultural brokering as a means to manage the parent-child cultural conflict, and describes steps for practitioners to effectively go about the process. The following is my adaptation of Merali’s steps to fit with Triple P:

1) Normalising the occurrence of intergenerational and acculturation gaps in immigrant and refugee families to enable parents to realise the commonality of their conflicts.

2) Shifting the focus from the child’s behaviour to the process of acculturation itself, and helping parents explore why they and their children have either held
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onto or abandoned the cultural practices that have created conflict between them.
The child could also be involved in this process.

3) Supporting parents to reinterpret their child’s situation in order to develop a new plan for dealing with their behaviour. For example, P05 interpreted her daughter’s questioning her for not allowing her to go to certain places as a lack of listening by children in New Zealand to their parents. However, it could be that the daughter feels that she is left out when her friends talk about these events at school. One way of dealing with this issue could be giving the daughter alternative events to attend that the mother is comfortable with.

P05 also talked about how all the parents in her discussion group had the same problem of trying to balance between cultures but no one had solutions, and so cultural brokering could be a way to get them to think more constructively about solutions. Children acculturating to the new culture faster than their parents, can also contribute to changes in family dynamics, as discussed in the next section.

4.2 Changes in family dynamics

Typically, parents have authority over their children in the daily running of the household, rather than the other way around. This mainly comes from the fact that parents are more experienced and more knowledgeable than their children. However, what happens when the children become more knowledgeable in their surrounding environment and its cultural practices than the parents? Do the children then have more authority in the household? Does this affect parenting?

This seemed to be the case for the participants in the current study when they indicated that their children had grasped the new language more readily than they did and most were more engaged in out-of-home activities than they were, and when they discussed changes in behaviour in them and their children in NZ compared to before they had arrived. Furthermore, the participants had also spoken about Triple P helping them increase their confidence in parenting their children in NZ and regain control over them.
In her research on the resettlement of refugee families in NZ, Judson (2014) confirms the changes in family dynamics that can occur. Children can start becoming more involved in family matters that were previously only taken care of by their parents. For example, she found that children often interpreted for and gave advice to their parents due to knowing the language and culture better than they did. The interpretation sometimes occurred in uncomfortable situations such as school parent-teacher meetings. Furthermore, in terms of dealing with disobedience, children can undermine their parent’s roles in this area by misusing their understanding of child protection laws and their parents’ fear of the systems, and therefore, acquire more authority (Renzaho, McCabe & Sainsbury, 2011). Role reversals have been linked to stress and anxiety in both parents and children (Puig, 2002; Pumariega & Rothe, 2010).

Being prepared to discuss these issues in Triple P as they come up is important. Making parents aware that, relying on children to help them understand things is convenient and understandable, but can overtime lead to diminished parental authority if no other measures are taken to maintain their parenting role in the family. Diminished parental authority can contribute to changes in the parent’s mental state such as increased anger and depression (Judson, 2014), elaborated on below.

### 4.3 Parental mental state

*As is inherent to parenting, the lives of parents and children are tied together, interwoven; it almost strikes as a natural consequence that the wellbeing of parents affects their children.*

- Blankers, 2013, p. 241

### Anger as a sign of PTSD

Parental anger was a key theme that emerged from the data as part of the specific challenges to parenting for the participants. Several previous studies have also found anger, including family-directed anger, to be prevalent among refugees (Hinton, Rasmussen, Nou, Pollack & Good, 2009; Rees & Silove, 2011; Spiller et al., 2016). However, what these studies also found was that anger was strongly associated with Post-Traumatic Stress Disorder (PTSD). Traumatisation in refugee parents can influence parenting by contributing to insensitive or insecure parent-child attachments,
The Positive Parenting Program (Triple P) with refugees and therefore, disrupt children's development such as their ability to regulate affect and arousal (Blankers, 2013). The current study did not go so far as to establish the presence of PTSD among the participants as this was not one of the aims, in fact, some of the participants did not even wish to speak about any negative events when they did come up. For example, P04 shared:

*I am so happy here [NZ], because they can go to school. But in [Southeast Asian country], they can’t. But I don’t want to think about that, you know. Leave what happened there, you know. There’s bad things in [Southeast Asian country].*

However, the participants were happy and open to talk about parenting and their children and, from that, several other issues emerged such as the anger. It makes sense, from a collectivistic perspective, that they would be more open to engaging in activities that would also directly benefit others rather than just the self; in this case, to learning new parenting strategies for the sake of the family unit rather than focusing on the negative experiences that they were exposed to and how they have been affected by them. What we can derive from this finding is that parenting programmes can potentially be a bridge to other mental health interventions, such as the treatment of PTSD, as well as Depression (discussed below).

**Extending Pathways Triple P to refugee background parents**

Participants in the current study agreed that they would have benefited from discussing their anger and strategies to cope with it during the parenting programme. While the *Triple P Discussion Groups* do not address parental anger directly, *Pathways* - a more intensive programme in the Triple P suite, does have a focus on coping with and managing anger (Sanders & Pidgeon, 2005), and can be delivered in a group format. Modules that could have helped participants in the current study, and with further research, might be found to help refugee background parents in general involve encouraging parents to become aware of the assumptions, beliefs and attributions they hold about their children, and to understand how these can influence their own parenting behaviour. For example, P01 stated that she attributed her son’s behaviour to being just like his dad (who she separated from and still feels hurt towards). Her son’s self-image may be affected by such statements and he may start embodying that persona, and as long as that attribution remains, she may keep viewing her son that way even when it is not the case.
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The *Pathways* programme also introduces parents to some of the relaxation techniques that participants in the study (P01 and P02) mentioned they had learned and found helpful in managing their anger. All the *Pathways* strategies are based on well-established cognitive behavioural and social learning models (Bandura, 1978; Beck, 1995; Bourne, 1990; Bugental, 1987; Burns, 1980; Cautela, 1977; Franklin, 1986; Meichenbaum, 1977).

Several studies, mentioned in the introduction, found depression to be prevalent among refugees, particularly mothers (Chang, Rhee, & Berthold, 2008; Kirmayer et al., 2011; Taylor, et al., 2014; Uwamaliya, 2015). *Pathways* can also be useful for parents, such as P01, that identify themselves as depressed. Integrating a cognitive component with behavioural parenting interventions can reduce maternal depression more than behavioural interventions alone (Sanders & McFarland, 2000). Furthermore, a review of studies investigating environmental associations between parental depression and child outcomes found that maternal depression is an environmental risk factor in children’s development of affective, emotional, behavioural, and neurobiological dysregulation. These findings are promising as they suggest that treating parental depression can buffer its impact on children (Natsuaki et al., 2014). Discussing the effects of depression on children to the parents in a non-confrontational way may prove useful in creating a bridge to seeking mental health support as discussed previously.

To conclude, *Pathways* could be used as an extension to *Discussion Groups* as they can complement each other by parents learning strategies to understand and deal with their own emotions as well as managing their children’s behaviour.

4.4 Other coping mechanisms

Other than the coping mechanisms related to anger and depression that can be introduced to refugee background parents, there were existing coping strategies employed by the participants that could also influence their well-being, quality of life, and thus, their parenting. One such mechanism is religious-spiritual coping and the other is community support.

**Religious-spiritual coping**

As mentioned under the support systems subtheme, all participants emphasised the importance of their family’s connection to their religion/spirituality. The majority
The Positive Parenting Program (Triple P) with refugees highlighted this by regularly attending their places of worship, sending their children to extra classes related to their faith, or expressing parenting concerns about living in a country where the majority did not share similar religious values. Just to note, the participants came from three different religious backgrounds. Religion and spirituality are often core to one’s identity, and therefore a route for coping with challenges, especially when other parts of one’s identity such as land and language feel lost, as in the case of our participants. This is in line with other studies which have also found the reliance of refugees, across different religious groups, on their faith after challenging circumstances, and the positive and protective effects of such coping (Ai, Peterson & Huang, 2003; Zaytoun, 2016). It would have been interesting if the current study further investigated this notion. Future research in this area would be valuable to uncover how religion and spirituality enhance refugee coping resources and affect parenting.

**Community support**

Community support was one of the main support systems discussed by participants of this study. Participants, such as P03, who reported more support, also reported less parenting challenges, whereas participants, such as P06, who reported more social isolation, indicated more parenting challenges. This finding does not infer a causal relationship between low community support and parenting problems, but rather an association between them. As described in the introduction, previous research on refugee parenting experiences also found that a lack of community support presents a challenge to parenting (Deng and Marlowe, 2013; Mitchell & Ouko, 2012; Pham, 2016). Helping refugee background parents to become part of a community network could, therefore, be beneficial for them as well as their children. This connection can be especially helpful for single parents.

**4.5 Single parenting**

At the time of the study, there were no statistics on the amount or percentage of refugees that arrived as single parents to NZ (Refugee Quota Branch NZ, personal communication, April 30, 2018) to give an indication of whether this was a high proportion or not. My personal experience working with refugee background families is that there are many refugee single mothers living in NZ. The two single mothers in this study were separated, however generally, there are also mothers who have been widowed or have missing partners. Further research may find added parenting issues
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associated with the latter two statuses. The two single mothers in the current study agreed that discussing being a sole parent, in the program, would have been useful. Previous research on single mothers in general (Brodsky & De Vet, 2000; Hamid & Salleh, 2013; Kavas & Gündüz-Hoşgör, 2013) and refugee-background single mothers in specific (Lenette, Brough, & Cox, 2013; Tsai, Barr, & Welch, 2017) found that the mothers tended to engage in the following to help them in their situations:

- Giving more attention to achieving the everyday tasks that they set for themselves, even if they were minor, rather than only focusing on bigger goals.
- Connecting with their faith to get through difficult times.
- Reaching out to family for support.
- Using TV shows that illustrate single-parent families to normalise the parental situation to children. For example, the movie Finding Nemo.
- When getting into conflict with children about their rights in the resettlement country, focusing on teaching the children the responsibilities that come with their rights and how they need to behave under those rights, rather than being focused on whether they have rights or not.
- Focusing on teaching the children values to prevent problems from occurring rather than only being focused on correcting misbehaviour. Children would then know what was expected of them.

Such strategies could be incorporated into parenting discussion groups with refugee background single mothers.

Apart from not finding statistics for solo refugee parents in NZ, undertaking this research also uncovered many missing statistics related to this population, such as the amount of refugee background children in state care (even though previous research has found this to occur as mentioned earlier), and the amount of refugee young persons arriving without parents/non-sibling relatives, even though I have personally worked with such young persons. It raises the question; how can we provide adequate services when the population is invisible? I, therefore, strongly advocate for more equitable reporting and publishing of refugee statistics in NZ.
4.6 Gendering of parenting roles

The gendering of parenting roles for the current study’s participants is evident across several themes. Firstly, the majority of the mothers identified spending more time with their children than fathers did. Furthermore, all participants were mothers because at the time of recruitment no refugee background fathers had fully completed the Triple P Discussion Group Series. This starts to give us an idea of which parent tends to assume a greater role in the day to day parenting of children. Six of the seven mothers described the differences in parenting roles between them and the fathers of their children, and some reported that the reason their partners did not attend the programme was their partners’ belief that attendance is the mother’s role. Under the subthemes of parental anger and upbringing of parents, we can see further support for this idea. However, in saying that, some participants did notice changes in the behaviours of fathers after arriving to New Zealand; some left the parenting role entirely up to the mother by leaving the family unit while some started participating more in it. This could be attributed to individual differences in adaptation to changes.

Noting the gendering of parenting does not necessarily mean that something needs to be done to change it, but that facilitators can exercise sensitivity when working with parents from families that hold traditional parenting values. For one, facilitators need to be careful not to impose their own parenting values on the parents attending the programme as this may lead to the worsening of marital conflict in the home for parents. Instead, other ways to promote parenting harmony should be explored. In the first instance, exploring ways to engage fathers in parenting programmes so that they can get the new information first-hand rather than through their partners would be helpful, as well as replicating this current study with fathers to get their perspectives. Parenting programmes globally seldom make substantial efforts to include men or to sufficiently report on their participation, despite research showing the impact of fathers on their children (Panter-Brick et al., 2014). According to Panter-Brink et al. (2014), the gendering of parenting should be expected and they advocate that, instead of homogenizing parenting, changes in the delivery and design of parenting programmes need to be made to account for gender differences. For example, a simple suggestion by P04 was that having a male facilitator also present might have encouraged her husband to attend the programme.
4.7 Summary

Table 2 summarises the discussion chapter by providing an illustration of the discussed parenting challenges and suggested solutions for addressing them.

Table 2

*Challenges and Solutions*

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acculturation gaps</td>
<td>Introduce adapted form of cultural brokering.</td>
</tr>
<tr>
<td>Changes in family dynamics</td>
<td>Raise parents’ awareness on effects of diminished parental authority as a motivation to access parenting support to regain control of parenting role.</td>
</tr>
<tr>
<td>Anger and depression</td>
<td>Offer <em>Pathways Triple P</em>, which can also be a bridge to accepting other mental health interventions.</td>
</tr>
<tr>
<td>Other coping mechanisms</td>
<td>Practitioners can build upon the parents’ existing religious-spiritual coping resources or community support.</td>
</tr>
<tr>
<td>Single parenting</td>
<td>Collection of more data on refugee demographics is needed to develop relevant services.</td>
</tr>
<tr>
<td>Gendering of parenting</td>
<td>Exercise sensitivity when working with families that hold traditional family values. Engage fathers in parenting programmes by considering changes in delivery and design. Conduct research with fathers to get their perspective.</td>
</tr>
</tbody>
</table>
Chapter 5 Conclusion

The current research explored the experience and sense-making of refugee background parents and children of Triple P. Through the use of qualitative interviewing with the seven mothers after they had completed the *Triple P Discussion Group Series* and the use of the vignette methodology with their children, the research contributed to our understanding of what aspects of this evidence-based parenting programme work for this population and what aspects need work. We conclude that the programme, in its current form, is useful for changing parenting attitudes and getting parents to implement new positive parenting strategies, reducing children’s misbehaviour, increasing parenting confidence, and allowing parents to regain control in their family unit. However, in order to provide more comprehensive parenting support to refugee background parents, parental mental health, parental anger, separation, and the development of acculturation gaps between parents and children need to be specifically addressed. Furthermore, particular influences on parenting need to be considered, such as parents’ own upbringing, conflicted parenting styles and support systems, as they may either impede or help facilitate changes in parenting behaviours. Suggestions for addressing the additional challenges that were not resolved by the *Triple P Discussion Groups* were detailed in the discussion chapter and summarized in Table 2. Overall, the study contributes to the idea that parents can be agents of change.

5.1 Implications and suggestions for future research

The findings of the current study have implications, not just for the adaptation of *Triple P Discussion groups* to better support refugee background parents, but also for all practitioners and agencies working with refugee background parents. For example, as described in the introduction, there is much research on the conflict of refugees with child protection services after resettlement. Both parties; parents and child protection services, would benefit from the increased knowledge provided by the current study.

Suggestions for future research were proposed throughout this report, but will be reiterated here for the convenience of readers:
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- Interviews with refugee background fathers to establish changes in design and delivery that can be made to the programme to promote their engagement
- Replicating the current study with fathers
- Replicating the study and gathering pre-intervention data, as well as post-intervention data
- Investigating how religion and spirituality enhance refugee coping resources and affect parenting
- Piloting the suggested additions to the *Triple P Discussion Groups* and exploring outcomes.
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Appendix A

Massey University Human Ethics Committee approval

Date: 17 August 2017

Dear Areej Arif

Re: Ethics Notification - NOR 17/37 - An exploration of the experience and sense-making of refugee parents and children of the Triple-P programme

Thank you for the above application that was considered by the Massey University Human Ethics Committee: Human Ethics Northern Committee at their meeting held on Thursday, 17 August, 2017.

Approval is for three years. If this project has not been completed within three years from the date of this letter, reapproval must be requested.

If the nature, content, location, procedures, or personnel of your approved application change, please advise the Secretary of the Committee.

Yours sincerely

Dr Brian Finch
Chair, Human Ethics Chairs' Committee and Director (Research Ethics)
Appendix B

Interview guide for parent participants

General demographic information

1. How many children do you have?
2. How old are they?
3. Where did you live before coming to New Zealand?
4. How long have you been in New Zealand?
5. What is your marital status? (If clarification needed, are you married, in a relationship, single, divorced, widowed?)
6. What is your living arrangement?
7. Do you have any other family members in New Zealand?
8. Are you a stay-at-home mum, or do you also have other commitments such as work/study?
9. Do you have friends/people that you regularly see?
10. Are there any classes or social events/gatherings that you usually attend?

Parenting experiences:

1. Firstly, on average, how many hours per day are your children with you? (Ask about weekdays vs. weekends).
2. Tell me about what you usually do with your children when they are with you during the weekdays?
3. How about the weekends?
4. How would you describe your parenting experience before attending Triple P? (Prompt: enjoyable, difficult?) – Follow up with, do you feel the same way now or different? How so?
5. Looking at your life, what were the biggest challenges and rewards to parenting before and after attending Triple P?
6. What are some things that your children do that annoy/upset you?
7. What are some things that you love about your children?
8. (If children are born outside of NZ) Do you feel that your children’s behaviour had changed since leaving the country that they grew up in? In what way?
9. Do you feel like you had changed since leaving that country? In what way?

**Pre-Triple P parenting strategies:**

1. How confident did you feel in raising your children before attending Triple P? (Clarification: what did you think of your ability to raise your children?)

2. Who else has a parental role for your children? (e.g. partner, grandparents, etc).

3. Do you and (other parental figure) agree on the way you would like to raise your children? Do you have similar styles of parenting?

4. You mentioned previously that it annoys/upsets you when your child/ren ______________. What do you do when they do that? Has this changed in any way since attending the programme?

5. You also mentioned previously that you love how your child/ren ____________. What did you usually say/do when they did that?

6. How is your way of parenting similar and different to how you were raised? (Follow with, what has led you to use the same strategies/not use the same strategies?)

7. Is there anything else that you experienced in your life that you feel may have influenced the way you parent(ed) your child/ren?

**Content of Triple P:**

1. What did you hope/expect to gain by attending the programme before you started?

2. Were those expectations met?

3. Overall, did you feel like the programme was useful and relevant to your parenting needs?

4. What was the most useful discussion group topic to you?

5. What are some topics that you would have liked to discuss, but weren’t part of the programme?

6. Is there anything that was discussed that you felt was not appropriate for you and your family? Could you tell me more about that?

7. Do you feel like attending this programme was enough or do you think you need more parenting support? (If yes, what areas of parenting do you need support in?)

**Strategies adopted/not adopted:**

1. Have you started using any strategies? If so, which one’s?

2. How did you feel about using these strategies?

3. How did your children respond to them?
The Positive Parenting Program (Triple P) with refugees

4. How did other family members respond to them?

5. How did you implement those strategies? (Clarify: How did you introduce them to your children/family, how did you overcome obstacles, if there were any?)

6. What strategies have you not used?

7. What are the reasons behind not using those strategies?

8. Were there any strategies that you changed slightly to better meet your needs? If so, which ones and how did you change them?

9. How confident do you feel about parenting your children now?

10. Describe any changes you see in your children after using the strategies.

11. Describe any changes you see in yourself after using the strategies.

**Delivery and logistics:**

1. What did you think about being part of a group and discussing parenting issues? (Prompts: did you feel confident participating, were you shy, were you made to feel welcomed and comfortable, did you feel like you could trust the group?)

2. Did you find it easy or hard to get to the venue and to make time to attend the groups?

3. What did you think about the way the programme was presented? (Prompts: what did you think about my use of DVD clips, role-playing, etc).
Appendix C

Participant consent forms

An exploration of the experience of refugee parents and children of Triple P

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I agree/do not agree to the interview being sound recorded.

I wish/do not wish to have my recordings returned to me.

I agree to participate in this study under the conditions set out in the Information Sheet.

I understand that all information I give will be kept confidential to the extent permitted by law, and my name will be replaced by a pseudonym in transcripts and the thesis.

I agree/do not agree that my child participates in this study.

Signature: ___________________________________________________________ Date: ________________________________

Full Name – printed

Full Name of child - printed

Child Participant
The Positive Parenting Program (Triple P) with refugees

Circle one of the following:

I want to take part in this study       I do not want to take part in this study

Full Name – printed ________________________________

Date ________________________________

Te Kunenga ki Pūrehuoa

School of Psychology – Te Kura Hinengaro Tangata

Private Bag 102904, North Shore Mail Centre, Auckland 0745  T +64 9 414 0800  extn 43116  F +64 9 414 0831

www.massey.ac.nz
Vignettes and associated questions for child participants

Vignette 1:

Maria goes to the supermarket with her mum. She sees a lollipop and takes it. Her mother tells her to put it back, but Maria yells “NO!” and starts crying loudly.

Vignette 2:

Tom is playing with his toy at home. His cousin Ben comes to his house and wants to play with him. Tom’s mum tells Tom to share his toy with Ben. Tom listens to his mum and shares his toy.

Vignette 3:

Lucy and her sister Jane are watching TV. Jane wants to change the channel, but Lucy doesn’t. Their mum tells them to leave the channel for 5 minutes then Jane can change it. Jane is not happy and smacks Lucy on her head with the remote.

Vignette 4:

John is playing in the garden. It is 6.30 pm and his mum likes him to go to bed at 7 pm. She tells him to get ready for bedtime. John comes inside, has his dinner, brushes his teeth, and gets into bed. His mum comes into his room to tell him goodnight.

Questions:

1. What did you think her/his mother should do?
2. What do you think of (child’s name)’s behaviour?
3. Have you been in a similar situation?
4. What did you like about your parent’s response?