

Talking with parents of children with learning disabilities: Parents' ideas about the Circle of Security parenting programme

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Accessible Summary

- The Circle of Security Parenting (COS-P) programme can be helpful for some parents of children with learning disabilities to think about their relationship with their child.
- Parenting a child with learning disabilities is different, and COS-P can highlight this difference.
- This can feel painful for parents and may stop them engaging with the programme.

Abstract

Background: Background: The promotion of secure attachment relationships in childhood leads to better outcomes in later life (British Psychological Society 2017, *Incorporating Attachment Theory into Practice: Clinical Practice Guideline for Clinical Psychologists Working with People who have Intellectual Disabilities*). The Circle of Security Parenting Programme (COS-P) provides a clear framework for reflecting on attachment relationships (Cooper et al 2009, *Zero to Three*, 37, 27).

Methods: Methods: Semi-structured interviews were conducted with parents of children with learning disabilities who attended a COS-P programme to find out about their experiences of the course and how applicable it was to them. The data were analysed using thematic analysis.

Findings: Findings: Four key themes were identified: these related to (1) COS-P concepts are relevant to all children but (2) parenting a child with a learning disability is different and (3) COS-P can create a focus on their child as different, which can be painful, and (4) changes recommended to make COS-P suitable for parents of children with learning disabilities.

Conclusions: Conclusions: This paper outlines the benefits and challenges of COS-P in sharing concepts related to attachment, whilst highlighting differences for parents of children and young people with learning disabilities, which can be painful.

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1 | INTRODUCTION

Rates of challenging behaviour are higher in children with learning disabilities than in typically developing children (Department of Health, 2004; Emerson, 2003; Emerson & Einfeld, 2010). Challenging behaviour can be thought about as a way of communicating unmet needs, and behavioural methods focus on trying to understand and respond to this communication through teaching new skills to the young person showing challenging behaviour, alongside modifying the environment to better meet the needs expressed (Gore et al., 2013). One vital part of the environment is the relationship(s) with key caregivers, commonly known as the attachment relationship (Bowlby, 1971). Attachment is considered to be secure when an attachment figure is used by an infant as a secure base from which they feel safe to explore their environment and seek comfort when needed (Ainsworth, 1978). Securely attached children have better outcomes in terms of self-esteem and emotional well-being, physical health and job stability (Gore, 1978; Nuckolls et al., 1972; Roberts et al., 1996).

Like all children, children with learning disabilities are certainly capable of forming secure attachment relationships. However, there is evidence of an increased incidence of insecure attachment relationships or a higher prevalence of disorganised attachment in children with learning disabilities, in comparison with peers without learning disabilities (Atkinson et al., 1999; Feniger-Schaal & Joels, 2018; Ganiban et al., 2000; Van Ijzendoorn et al., 1992). This research mostly focuses on children with Down syndrome so may not be generalisable to all children with learning disabilities. However, the more recent study by Feniger-Schaal and Joels (2018) included children with a nonspecific learning disability. There are challenges caring for a child with learning disabilities, which may affect the development of attachment relationships (Lindo et al., 2016). The atypical presentation of children with learning disabilities can make it difficult for parents to be sensitive to the child's needs (Janssen et al., 2002). For example, children with Down syndrome have been described as less reactive and less clear in affective responding and this may be challenging for parents trying to read these signals (Cicchetti & Serafica, 1981; Thompson et al., 1985). It can be particularly challenging for parents of nonverbal children with learning disabilities to reflect on their child's needs, cues and miscues (Ayres, 2005). Some parents may experience having a child with learning disabilities as a "loss of the healthy child" which may elicit a grief reaction in parents (Fletcher, 2016). These factors may impact on the attachment relationship; however, research suggests most parents adapt and are able to adjust their expectations (Fletcher, 2016).

Most parenting interventions that have been adapted for parents of children with learning disabilities are skill- or behaviour-based and have been shown to be effective for reducing challenging behaviour, improving parenting strategies and reducing parental stress (Glazemakers & Deboutte, 2013; McIntyre, 2008.. Triple P and Incredible Years are two commonly used parenting interventions, which have an evidence base to support their effectiveness for improving behavioural problems in children with neurodevelopmental

disabilities and parent satisfaction and efficacy along with parental adjustment (Kleve et al., 2011; Tellegen & Sanders, 2013). Parents of children with learning disabilities have previously reported a benefit of meeting with other parents in group-based interventions, which provided a sense of relief and reassurance (Thompson-Janes et al., 2016). Groups such as Triple P and Incredible Years have been criticised for being largely facilitator-led with limited space to reflect on the impact of being a parent of a child with a learning disability and challenging behaviour (Thompson-Janes et al., 2016). Parents who attended Triple P, a programme focused on behavioural strategies for families, reported that they found there was too much content and not enough time for discussions (Ruane et al., 2019). No parenting interventions for children with learning disabilities appear to specifically target potential difficulties developing a secure attachment.

Circle of Security Parenting (COS-P) is an early intervention relationship-based group parenting programme for at-risk parent-child relationships, which was developed by Marvin et al. (2002). Circle of Security (COS) seeks to enhance caregiver sensitivity to children's communication, needs and attachment security (Mercer, 2015), thus decreasing the risk of disorganised and insecure attachment (Cassidy et al., 2017; Main & Solomon, 1986). This is particularly important for children with learning disabilities, as caregiver sensitivity has been shown to be key in developing secure attachments (Feniger-Schaal & Joels, 2018). The group format enables parents to use the programme as a secure base from which the parent can explore their relationship with their child. The programme aims to promote attachment and emotional security between parents and their children. By adapting internal representations of their child and self through developing parental reflective functioning, parents are more able to recognise and respond sensitively and appropriately when their child needs them as a secure base. This can lead to a reduction in the child's challenging behaviours and increased parental self-esteem.

Most research has focused on evaluating the effectiveness of the Circle of Security Intensive (COS-I) intervention. COS-I is a psychoeducational and psychotherapeutic early intervention that involves individualised video-based assessment and treatment (Huber et al., 2019). It requires facilitators to complete more intensive training to become licensed and the intervention is more intense, with weekly sessions for almost half a year, rather than an 8- to 10-week programme. COS-P is a preventative intervention, promoting attachment in all families, and is delivered using a manualised and DVD-based protocol. COS-P has the same goals as COS-I but is less labour-intensive and resource-heavy. COS-P is a scaled-down version of COS-I so it is applicable to the same populations, but, as it is less intensive, it may not be sufficient to promote secure attachments for some caregivers and their children. COS-I has been evaluated with parents of children who were at high risk of developing insecure attachments (Cassidy et al., 2010, 2011; Hoffman et al., 2006), children on the autistic spectrum (Fardoulis & Coyne, 2016) and children with behavioural difficulties (Huber et al., 2015). A meta-analysis of COS-I found a large effect for improved caregiver self-efficacy and medium effect size for child attachment

security, quality of caregiving and reduction in caregiver depression (Yaholkoski et al., 2016). Similarly, research has demonstrated that the shorter 8-week video-based programme can be effective in reducing negative feelings towards the child, parental stress and caregiver helplessness as well as increasing parental emotional availability and changing parents internal representations (Kohlhoff et al., 2016; Risholm Mothander et al., 2018). The authors of the COS suggest the group would be beneficial for parents of children with learning disabilities (Cooper et al., 2009). Utilising COS for parents of children with a learning disability seems apt as it seeks to enhance parental reflective functioning (Huber et al., 2016) in families where juggling competing demands of work, family life and caring for a child with a learning disability can be very challenging (Scott, 2010).

The study by Hoffman et al. (2006) included parents of children with special needs among other high-risk children (<http://www.picah.eadstart.org/eligibility.html>). However, specific analysis was not conducted to test whether the group was effective for this particular sample. More generally, attachment-based parenting interventions have been found to improve caregivers' efficacy in managing challenging behaviour (Gray, 2015), which is particularly pertinent as there are higher rates of challenging behaviour in children with learning disability (Pilling et al., 2015). To the authors' knowledge, no study has explored the impact of the COS-P group on parents of children with learning disabilities. Therefore, this evaluation aims to explore the thoughts of parents of children with learning disabilities about the applicability of COS-P.

2 | METHOD

2.1 | Participants

Participants were parents who attended the COS-P eight-week programme, omitting session 4, in three groups over a period of two years. Parents had a child with a learning disability who had been receiving services from the local Child and Adolescent Mental Health Service for children with learning disabilities. All children had a moderate-to-severe learning disability (see Table 1 for further demographic information). Referrals to COS-P were made by the professional working with the family and were discussed with the parents beforehand. The child with a learning disability had previously received an intervention from the team, which had highlighted that the COS-P intervention may be helpful. A discussion was had between the clinician working with the family and the parent(s) about what COS-P would look like, being clear that it focused on the attachment relationship, and that it would involve parents thinking about their own attachment relationships. A total of nine parents of children with learning disabilities (eight mothers and one father) completed the programme. All parents who attended the COS-P programme were invited to provide qualitative feedback on their experiences. Six of the mothers participated through individual interviews or a focus group. The remainder of the parents declined to participate due to other commitments. Pseudonyms have been used throughout

TABLE 1 Demographic information

Demographic information	N (%)
Participants' role	
Mother	6 (100%)
Father	0 (0%)
Child's age in years	
Mean	9.33
Range	5–14
Child's gender	
Male	5 (83.3%)
Female	1 (16.7%)
Additional neurodevelopmental diagnoses	
Autism spectrum disorder	3 (50%)
Sensory processing disorder	2 (33.3%)
Genetic disorder	2 (33.3%)
ADHD	1 (16.7%)
Epilepsy	1 (16.7%)

the paper. Anna, Bethany, Chloe and Danielle were part of the focus group. Elizabeth and Florence participated in individual interviews.

2.2 | Intervention

The COS-P programme was delivered to parents of children with learning disabilities. COS-P is an early intervention relationship-based group parenting programme for at-risk parent-child relationships, which was developed by Marvin et al. (2002). The eight-week shortened version was delivered in this study, and each course was facilitated by at least one person trained in COS-P. The eight-week course is DVD-based and involves educational and therapeutic content delivered through group discussions based on the DVD clips and handouts. The cornerstone of COS-P is making attachment theory accessible to caregivers through the use of engaging video clips and accessible language (Cooper et al., 2017). The DVD consists of eight chapters on different topics: one chapter is covered per session (see Table 2 for weekly sessions and key concepts). The DVD clips involve audio descriptions and videos of parent-child interactions in which participants are encouraged to reflect on during the sessions. In the delivery of the programme, one session was omitted, "Session Four: Being with infants." This was not directly applicable to the participants as all parents had children older than 5 years. If parents were unable to attend a session, due to unforeseen circumstances, the content of the session was delivered one to one so that parents covered the full programme.

2.3 | Procedure

All participants who had previously attended the COS-P group were invited to provide feedback on their experiences of the

Week	Session Content
1	Introducing the concept of the Circle. The circle graphic outlines a pair of hands ("the secure base"), with a young child facing away from this and climbing on something, along the top of a circle. This top half of the circle is titled "exploring my world." Along the bottom half of the circle is a young child reaching out to the hands, titled "filling my cup." This represents the child needing to go out to explore and learn and needing to come back for comfort and security.
2	Exploring our children's needs all the way around the Circle.
3	"Being with" on the Circle. Helping our children to manage their emotions. The programme focusses on parents being with their child, in happiness and in distress, to be their secure base and teach children emotional understanding. This includes parents needing to be comfortable with the variety of emotions, which may present in their children, to allow for them to be with their child effectively.
4	The path to security.
5	Exploring our struggles (including "Shark music"). Shark music is linked to the concept of "being with" and is what may get in the way of parents being with their child in an effective way. Shark music is described as the parent's background music to how they experience their child's emotions and in turn how they then respond to the child. This background music stems from the parent's own experience of caregivers attending to their emotional experience.
6	Rupture and repair
7	Summary

TABLE 2 COS-P weekly session content

group through either an interview or focus group. Individual interviews were conducted with two participants, and a focus group was conducted with the group of four parents who had recently attended the group. The focus group was completed for practical reasons as all participants of the most recent COS-P group were gathered together. As the members of the group had known each other for several weeks, the authors thought they would feel comfortable sharing their thoughts and experiences. The combination of both individual interviews and a focus group was believed to add to the data completeness as interviews may focus more on personal experiences of the group and a focus group may pull out opinions and beliefs about the group (Lambert & Loiselle, 2008). Semi-structured interviews were conducted based upon the following questions:

1. What do you remember about the Circle of Security group? What stood out for you?
2. What did you find helpful? What was not helpful?
3. Do you think the group was applicable for children with learning disabilities?
4. What would you advise for future facilitators?

The interviews and focus group were conducted by the assistant psychologist in the team, who did not deliver the COS-P programme in order to encourage openness. The interviewer introduced the project to parents and explained that their role was to assess the acceptability and feasibility of the COS-P programme for parents of children with learning disabilities. The interviews were audio-recorded and transcribed verbatim.

2.4 | Analysis

Following transcription, the interviews were analysed using thematic analysis, a means of identifying, analysing and reporting patterns in the data, using the approach outlined by Braun and Clarke (Braun & Clarke, 2006). An inductive thematic analysis was used within a critical realist framework. From a critical realist position, the existence of a reality is acknowledged, but the influence of culture, language and political interests is recognised. During analysis, to manage the different data collection methods, neither focus group nor individual interview data were favoured as better, and a combination of methods was considered useful to understand different representations of the ideas discussed (Lambert & Loiselle, 2008). When reviewing the transcripts, the unique addition of each form of data was recognised; the interviews contained more specific personal experiences, whereas in the focus group ideas developed through interaction between participants. The authors believe that the pre-existing relationship between focus group participants also allowed for the sharing of personal experiences. The interviewer and one of the course facilitators analysed the data; therefore, one had a good understanding of COS-P and the participants and the other were very familiar with the data. Prior to analysing the data, the two authors met to discuss what question they aimed to answer with their analysis. This question was "does COS-P fit for parents of children with learning disabilities and does anything need to change for these parents?". These two authors read and re-read through the transcripts and individually annotated them with ideas to familiarise themselves with the data, look for patterns in the data and begin to develop codes relating to the question. The two authors met to compare

findings and identify similarities and differences in their codes; any disagreements were resolved through discussion between the two authors conducting the analysis. The similar codes were grouped together to form themes by developing a central organising concept, a core idea to a number of codes. Through the process of developing themes, ideas were reviewed and reworked. The themes were then defined and given meaningful names to summarise what they covered. An inductive approach was used as this is a novel topic of research. Data were coded for and described at a semantic level.

2.5 | Ethics

The project was approved by the Research and Development team within the participating NHS Trust. The ethical considerations included participant well-being and managing potential distress. Written consent was obtained from all participants. Participants were debriefed after the interviews by explaining further the purpose of the project, and parents were given the opportunity to speak to a member of the team if they needed any further support. The authors had hoped to share the findings with participants and triangulate the results; however, this was not possible due to authors moving to new roles.

3 | RESULTS

Thematic analysis of parents' experiences of the COS-P programme revealed four key themes: (i) COS-P concepts are relevant to all children, (ii) parenting children with learning disabilities is different, (iii) COS-P can create a focus on my child as different and this can be painful, and (iv) recommended changes to make COS-P suitable for parents of children with learning disabilities.

3.1 | Theme 1: COS concepts are relevant to all children

When asked about their experiences of the COS-P programme, there was agreement among the participants that COS-P concepts are relevant to all children, and it has value for all mothers and fathers. Parents recognised that:

"It's a parenting course that every pregnant mother and father should do cause it's just, it's just really, it's really valuable humanising advice... And it's a really valuable way of interacting with any human being you come across" (Florence).

When appraising the overall COS-P experience, there was recognition among parents that COS-P helps adults reflect on their role, and changes they can make without necessarily expecting children to change. For example, one parent surmised that:

"This one's [COS-P] about you and about how you see things. It's about how you interpret the child's meltdown or the child's difficulties so it's making you reflect more so it's not necessarily the child that's going to change. It's about you and how you change to that situation" (Bethany).

Parents explained that they valued having time and space to reflect on their child's needs, acknowledging that the group provided an opportunity for:

"...standing back and understanding what [my child's] needs are really, emotionally" (Elizabeth).

In addition to valuing the reflective emphasis of the course, some parents shared how the COS-P programme helped them to feel validated and encouraged. For example:

"I think the important thing is that it encourages us to reflect on what we're doing, it validates what we're doing and makes us think 'hmm maybe I can do that'" (Chloe).

Parents also described gaining an appreciation of the importance of *being with* rather than constantly *doing*, which they recognised can be the *modus operandi* for parents of children with additional needs. For example, one parent said:

"...just being present with [my child] rather than thinking I need to do things with him. Just sort of be in his space, um, which was really useful" (Florence).

This demonstrated a shift in perspective for Florence, who explained that ordinarily:

"I want an outcome, I want a beginning, and end and I want to see something for my, for what I've put in, I'm definitely like that as a person, generally in all aspects of my life. So it's hard for me to just sit in [my child's] space when I know if he's not interested in engaging with me I could just be doing the washing up."

This resonated with other parents who shared the challenges of there not always being enough hours in the day to accomplish all parenting tasks.

When reflecting on COS-P concepts such as "shark music," parents had differing views. While some parents stated:

"I thought shark music didn't work for me, it just wasn't language that I felt, um, I felt like I could relate to" (Florence),

Others found it more useful, especially when thinking about how it related to anxiety, particularly when out and about. For example:

"...the shark music, which was a lot to do with my anxieties I think probably more than the situation. I've kind of taken that, that for me was probably the strongest thing that came out of it. It was kind of, you know, recognising that shark music when I'm out and about" (Elizabeth).

Although there was recognition among participants that COS-P concepts are relevant to all children, there was consensus that the act of parenting a child with a learning disability is different, as illustrated in theme 2.

3.2 | Theme 2: Parenting children with learning disabilities is different

Parents agreed that parenting children with learning disabilities is different from parenting children who do not have learning disabilities, with some parents making direct comparisons in how they parent differently to meet the individual needs of their children. For example:

"I feel so differently in my parenting towards [*my child with learning disabilities*] than I do to [*my other children*] so that's really such a different experience of parenting, it's entirely different..." (Florence).

When reflecting on why parenting children with learning disabilities is different, parents shared that their children express their emotional needs in different ways, which can sometimes be challenging to recognise:

"Because [*my child*] doesn't show any usual, normal signs of emotion, it's almost impossible for me to know..." (Florence).

The parenting role was likened to being an interpreter of needs, which parents recognised as being even more important with a child with learning disabilities. For example:

"[*My child with learning disabilities*] behaviour is a bit more complex behaviour, yeah really, so it's a lot more, he doesn't really demonstrate when he needs his cup filled or when you know um so it's more about really taking a step back and looking at what his needs are really" (Elizabeth).

Parents explained how there are additional considerations to think about, meaning that parents need to be better prepared, as there is

no scope for "automatic parenting." When discussing this, two parents shared:

"It makes you more thoughtful and you have to be more prepared" (Chloe)

"You can't do automatic parenting can you?" (Bethany)

"No" (Chloe)

"There's no automatic parenting because you can't just sit on your laurels" (Bethany).

Explaining further, parents spoke about the challenges of simply "being with" if there is a very real possibility of being physically hurt by their child's behaviour, when the child has difficulty in regulating their emotions. Anna, for example, explained how:

"[*My child with learning disabilities*] emotions can go from being excited to being off the radar in a split second so that's quite difficult to be with (*laughs*)."

Finally, it became apparent that there is some ambiguity for parents of children with learning disabilities in recognising shark music. This was especially true where there were parental fears about the child's vulnerability, making it hard to distinguish what constituted shark music compared with a sensible assessment of risk. Three parents questioned the definition of shark music, asking:

"What is actually shark music, and what is actually acting normally to a dangerous situation with a child that's, yeah, it's a bit hard to?" (Danielle),

"Yeah, cause my awareness of danger for my child is very different to his, he thinks he can do just what he wants" (Bethany),

"They have no sense of danger" (Chloe).

In general, parents felt that parenting a child with a learning disability required them to focus more on the concepts advocated by COS-P. One parent explained that:

"...we're already bigger, stronger, wiser and kind, so we're already doing that above and beyond what I would do for my neurotypical child, for my special needs child" (Bethany).

However, the parameters of the circle were identified as being different, especially if children are more vulnerable than their same-aged peers without a learning disability. Some children with learning disabilities may need to remain in the parent's safe hands. For example:

"[My child with learning disabilities] has to sit in my [safe pair of] 'hands', he can't go out and back, but maybe that will change, cause he's just so, I think that's the difference between parenting and caring potentially, he's never going to not need that security" (Florence).

Although parents were already well aware that parenting children with learning disabilities is different, there was a prominent theme that emerged from the interview and focus group data: that COS-P can emphasise differences in children with learning disabilities and this can be painful for parents.

3.3 | Theme 3: COS-P can create a focus on my child as different and this can be painful

Parents agreed that in its current format, the COS-P programme highlights unique differences in parenting children with learning disabilities, which can be a painful experience for parents. This was particularly prominent when watching the video clips, which all contained clips of typically developing children. Parents discussed how difficult it is when faced with comparisons between their child and other children in daily life, but it is especially painful when asked to reflect on this. For example:

"It's really hard, cause it's quite hard in everyday life looking at typically developing children and then seeing that your child's not and then sitting down for a whole course watching it" (Elizabeth).

This constant comparison seemed to really impact on parents' view of COS-P as a whole. During the focus group, parents explained how the programme did not seem to be a good fit for parents of children with learning disabilities, as it failed to capture aspects of their shared experiences. Parents stated that:

"My most overwhelming feeling about the Circle of Security course is that I'm not convinced it's appropriate for parents of children with special needs" (Chloe).

Interviewer: "Could you say a bit more about that and why you think that's the case for you?"

"I think the videos, the whole, you know, what you're watching is not, it's not dealing with..." (Anna)

"...The situations that you're in" (Chloe).

Parents focused on how the current COS-P programme highlighted the different trajectories that children with learning disabilities may be on compared with their siblings and peers. Parents explained how, prior to the COS-P programme, they coped by not thinking about it. For example:

"...you just do it you know, you just do it, you don't, you try not to think about it cause if you think about it, it can be upsetting and it makes you realise how different your life is" (Anna).

However, having the time and space to reflect on these differences was difficult for parents, who explained:

"I don't know whether it's this course that's made me think more about... (how) their lives are moving on and ours aren't and that's, I don't know if you feel the same way, you know other children are sort of going off doing their things, going out on their bikes, going to play football" (Anna).

Meanwhile, other parents recognised that the gaps become more noticeable as children grow older:

"The older they get the more apparent that becomes to you and the more upsetting it becomes" (Chloe).

Having identified aspects of the COS-P programme that did not seem applicable to parents with children with learning disabilities, parents identified a number of suggestions to improve the programme, as illustrated in Theme 4.

3.4 | Theme 4: Recommended changes to make COS-P suitable for parents of children with learning disabilities

Parents were in agreement that parenting a child with a learning disability brings additional challenges that were not captured in the COS-P material. For example, parents recognised that their diverse caring responsibilities resulted in them having less free time, and parents acknowledged that they may be starting the course already feeling overwhelmed. Parents identified that clear communication about the aims of the course was key, because:

"it helps you know if that's the right course that you should be doing" (Chloe).

Parents acknowledged that they may need more support from the facilitators. For example:

"it also helps if you need support in place before, during and after the course, rather than diving straight in, cause I think that's, you know, a risky thing to do" (Chloe).

Parents agreed that the video clips, in particular, needed to be revised for the COS-P programme in order to be suitable for other parents of children with learning disabilities. In its current form, parents identified that the video clips were barriers to them accessing the COS-P concepts as they did not resonate with parents' experiences. For example:

"You gotta really think about it haven't you, you've gotta really think, you've gotta think harder to put it with what your situation is" (Danielle).

While other parents identified aspects of parenting that were common to the group but not evident in the video clips, including:

"There's nothing about smearing or, you know, there's nothing about no sleep and, you know, stuff that affects us all the time" (Florence).

And:

"It felt quite contrived cause it was all in that controlled environment, cause all the issues that we have are not in a controlled environment" (Chloe).

Parents suggested that changing the video clips to make them more relevant would enable them to absorb the content more easily and would save the extra effort and time where parents are:

"Doing extra work as you're constantly thinking, how does this apply to me?" (Florence).

Parents recognised that it would be a big, but important, undertaking to adapt the content to make it suitable for parents of children with learning disabilities but suggest that the programme needs to:

"Just redo it with children with special needs (which) would be brilliant but obviously it would also be a massive project" (Florence).

4 | DISCUSSION

Parents expressed the view that the COS-P programme is relevant for all children, including children with learning disabilities. They understood the aims of COS-P and the value of the approach. Taking a more reflective stance and focusing on the relationship with the child was felt to be useful. Some, but not all, parents felt they could relate specifically to some of the concepts such as "shark music" and "being with." However, parents felt that there are differences in parenting children with learning disabilities, which make it difficult to apply some of the COS-P concepts. For example, it can be more challenging for parents to read the cues of children with learning disabilities. Children with learning disabilities may express emotional need in a different way to children without a learning disability. This relates to research, which suggests that there are differences in children's affective responding (Cicchetti & Serafica, 1981; Thompson et al., 1985). These differences mean parents have to adapt the way they parent. Parents reported having to be hypervigilant to the needs of their child. Ultimately, they felt that this meant they engaged in some of the COS-P concepts to a greater degree, such as

being "bigger, stronger, wiser and kind." Parents found it hard to differentiate between reasonable concern for their child's safety and "shark music" due to their feeling that their children with learning disabilities were more vulnerable. The vulnerability of these children could also result in "the circle" being different and more contained.

The programme requires parents to reflect on their interactions with their child, and this can be both challenging and painful for some parents. Due to the lack of representation of children with learning disabilities in the videos, parents were reminded that their child is not typically developing and this could bring up painful emotions. This relates to the concept of "chronic sorrow" in family members where they are aware that their child fails to conform to cultural norms (Wikler et al., 1981). These painful emotions experienced through making comparisons with typically developing children may relate to parents "loss" of normal life for them and their family (Todd & Shearn, 1996). This also links to the literature on disabled children's childhoods, which highlights the impact of disabling cultural discourses on a child's ability to become a fully valued member of their community and parent's sense of what is "normal" and "acceptable" (Curran & Runswick-Cole, 2013). If the course had additionally been facilitated with parents of typically developing children, this may have posed further challenges for some parents of children with learning disabilities who struggle with comparing their situation.

Parents suggested changes to COS-P to make it more accessible to parents of children and young people with learning disabilities; for example, including more information and discussion about the course before it starts and changing the video clips to include children and young people with learning disabilities. The video clips raised painful emotions in parents by highlighting what they saw as differences between their children and a cultural norm. Although COS-P provides a space for reflection on painful emotions, it was felt that the video clips sometimes prevented parents from being able to process the COS-P concepts due to the way they highlighted difference in the eyes of the parents. The need for relatability of video clips has been highlighted by previous research on interventions for parents of children with learning disabilities (Ruane et al., 2019).

4.1 | Limitations of this study

Several limitations should be considered when interpreting the findings of this evaluation. First, the small sample of parents included in the study may not be representative of all parents' experiences of the group. It was not possible to continue collecting data until data saturation was reached so more themes may have emerged with further interviews. Second, when parents occasionally completed sessions one to one rather than in the group, this may have prevented parents learning from wider group discussions with other parents. While this may constitute a limitation of the study, attendance could be considered typical for this population as parents are required to juggle multiple medical, social and health commitments (Sharkey et al., 2016). Third, parents completed seven rather than the full eight-session COS-P programme, as "Session Four: Being with infants" was excluded as none

of the parents in the group had small infants and it was not deemed appropriate to include this session. A shorter course may have impacted on the outcomes for parents. Fourth, parents attending the course had children over the age of five and the COS-P programme is aimed at parents of younger children. Parents of younger children may have engaged differently with the course content.

4.2 | Recommendations for the future

Parents suggested adapting COS-P so it has the same content but includes different images and challenging behaviour that is more diverse, including images of children with disabilities. This adaptation might allow parents of children with learning disabilities to engage more readily with the course content. Co-producing the course with parents would help to design it in a way that was sensitive to their needs. Although parents were told about the content of the course and that it would involve thinking about the ways they were parented themselves, feedback from participants suggests that parents of children with learning disabilities may need extra support to process and reflect upon their thoughts and feelings before, during and after the programme. In addition, as some parents identified attending the programme as potentially “risky,” a clear assessment and formulation of need are recommended to ensure that parents are well prepared for the possible emotional impact of reflecting on their experiences of attachment. It would also be important to conduct a further study with a larger group of parents of children with learning disabilities of different ages in order to further understand how the COS concepts can be most usefully shared with this population.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author and the request must be approved by the participating NHS Trust. The data are not publicly available due to privacy or ethical restrictions.

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