

THE EMOTIONAL AND MENTAL HEALTH CHALLENGES OF PARENTHOOD

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As a psychologist working with children and young people, I meet *parents* (for brevity I'll use 'parents' throughout this article, but I'm referring of course to all primary caregivers, biological parents or not) every week who are struggling with parenting related negative emotions and experiences such as parental stress, guilt, fatigue, frustration, anxiety and overwhelm. There is also a plethora of academic and research literature documenting the existence of these experiences.

For instance, many studies suggest that most parents experience worry and anxiety about their children/teen's well-being, safety, health, friendships, relationships, school performance, behaviour, and life choices. Parents also worry about the financial demands of parenting, their past parenting behaviours, and upcoming parenting decisions.

Surveys also find that many parents experience a high level of parenting related guilt, self-blame, or self-criticism. They feel guilty about getting angry, their children/young people's routines (e.g. time on technology is a common source of guilt), how much time they spend with their child and more intensely - about how their parenting might have contributed to children/young people's health, life, or psychological challenges. Sometimes this guilt/self-criticism morphs for parents into a more generalised sense of shame about their children's behaviours or choices.

Other research finds that parents/caregivers experience a high level of mental/physical exhaustion and fatigue. They feel there is simply more to do each day than they can manage and that they have no energy or resources to do the work of parenting. One study found that 2 in 5 parents reported experiencing extremely high levels of fatigue/exhaustion which then impacted on their perceived ability to parent.

There have also been numerous studies on parental irritability, anger, and frustration. While traditionally research on parental anger has been done through the lens of its impacts on children, recently more articles have focused on the aversive nature of feeling chronically irritated and angry for parents themselves. In the popular media there has seemed to be a special interest in the challenges that experiencing anger brings for mothers (google "postpartum rage" and "mum rage")

There are also a number of studies on parent chronic sorrow or grief – this has often been researched in the context of parents with children with disabilities, disorders, serious mental health conditions or significant life challenges (e.g. drug and alcohol use). Another area of research considers parental grief (although of course of an entirely different level of intensity) which occurs when children leave home (or when there are long term ruptures in relationships).

Many studies have investigated the experience of low parenting self-efficacy, when parents believe they simply do not have the skills, abilities, or knowledge to effectively parent, influence their child, or manage tasks related to parenting. Some writers assert that low parenting self-efficacy is one aspect of parental depression. Studies also consider parental loneliness or sense of isolation, whereby parents report being cut off from social supports, due to lack of time, resources, or energy.

Many studies show that parents experience *one* type of negative parenting psychological experience are more likely to experience another type of negative parenting emotion, and also to have poorer emotional and mental health in general. For example, studies have indicated that parents who have higher levels of parental guilt have higher levels of depression, that parents who report lower levels of parental confidence are more likely to report higher levels of mental exhaustion, that parents who experience higher levels of social isolation are more likely to experience higher levels of parental anxiety and so on.

Given the clustering of these experiences, some psychologists have attempted to create models linking negative parenting experiences together into a unified concept. For instance, many researchers have written about the concept of parenting stress. Deater-Deckard defined parenting stress as aversive psychological reactions to the task demands of parenting challenges in the parent-child relationship, and the child's psychosocial adjustment.

Other writers have discussed the concept of parental burnout – although traditionally thought of in a workplace setting, this concept has now been applied to parenthood. Parental burnout has been defined as the experience of three factors: mental/physical exhaustion, low parenting self-efficacy and the experience of “distancing self from child/young person”. One study concluded that using a parental burnout questionnaire finds between 40-60% of parents as meeting the criteria for being a ‘burnt out’ parent (which seems to me to suggest the concept skirts the edges of being a normal parenting experience).

While this all sounds pretty grim (incidentally, apologies to any first time expectant parents I assume are reading this article with dismay), there is also more cheerful research which I think is also worth noting here: that is studies which compare the incidence of *positive* emotions in parents compared to non-parents. Many of these studies suggest that on average, parents often experience more *positive* daily emotions (for example, sense of meaning, love, pride and joy) than non-parents.

This leads us to the “mixed bag theory” of parenting which suggests that parenting brings both more negative and positive emotional states compared to non-parenting. This sounds about right to me - it seems that parenting - like many other life experiences (e.g. work, relationships) brings both the very good – and the very bad!

What factors are linked to higher levels of parental negative emotional experiences?

Of course, not all parents suffer equally. An interesting question is what specific factors might be linked to more *frequent* or *intense* negative parenting psychological experiences - in other words, what parents might be most at risk for high parenting related distress? Research suggests there are a range of factors which might be associated with higher parenting distress. They include the following:

- Societal/community factors - for instance, some studies suggest when parents have greater financial challenges, and less social support – they will experience higher levels of parenting related distress.
- Psychological parent factors – it seems parents with lower confidence in their skills, with poorer reflective skills (ability to notice their and their child's emotions and the impacts of these on behaviours), who have less self-compassion, and other mental health diagnoses may experience more distress than other parents.

- Gender of the parent – Several of the studies I’ve read report that more mothers experience more parenting distress (and parental burnout) than fathers. It is worth noting however that many studies on parenting distress exclude fathers altogether. I also wonder whether mothers are more likely to be willing to *report* parenting distress than fathers. However, these caveats aside, it seems mothers are particularly at risk for parenting distress compared to fathers (and there of course I’m sure we can all identify plausible theories for this - related to possible gender differences in the amount of parenting care provided, the amount of daily social contact, societal expectations just to name a few)
- Age of the child – there are contradictory findings as to whether having younger or older children is linked with more parenting distress. Many studies have found that parents of younger children (especially under 5) experience higher levels of mental/physical fatigue for instance. Other surveys have found however that parents are more likely to report parenting in the teen years to be more ‘challenging’ than parenting younger children. Several studies suggest that parents of young adults seem to have lower levels of parenting stress overall, but only if those young adults have achieved some several life goals (having a job, moving out of home) – otherwise parenting stress continues!
- Number of children – there is little research on whether parents of more children are more distressed than those with less - but I did come across one study which suggested that the highest level of parenting stress is for parents with 2 to 3 children, with having four children not being more stressful than 3. Having 5 or 6 children or more was linked with the highest level of stress, which I’m assuming is not a complete shock to many of us.

Parent emotional well-being when caring for a child with challenges.

Despite the findings above indicating a number of parent and environment factors linked with higher parental distress, the *most* reliable - and definitely most investigated - factor linked with higher levels of parenting distress is the health and well-being of a parent’s children. Specifically - parental distress is reliably highest in those parents with children with mental, emotional, physical health or life challenges.

Studies have documented this phenomenon for parents of children/young people with many different types of challenges. For example studies show higher than average levels of parental distress for parents of children with: ADHD; Autism; children with higher levels of challenging behaviours; anxiety disorders, intellectual disabilities; drug and alcohol problems; suicidality and depression; developmental disabilities; physical health challenges or disease (e.g. diabetes, cancer) and many other types of challenges.

I haven’t found any detailed studies which helps us make any firm conclusions about *which* of these disorders or challenges in children might lead to the highest level of stress in parents. However, there have been meta-analyses (studies of studies) which suggest that on average parents with children with externalising (challenging behaviours) might experience more stress than children with ‘internalising symptoms’ such as anxiety).

What are the implications of parental distress?

Parental distress is considered to be an important area of research not just because of the suffering experienced by parents, but because of its links with other important factors. Below are the two of most researched of these.

Links between parental distress and children's well-being

Many studies have linked higher levels of parental negative psychological states to poorer mental health and functioning in the children/young people of these parents. For example, studies have documented relationships between: Higher parent anxiety and higher child anxiety; lower parental self-efficacy and more severe child behaviour problems; higher levels of parental depression and anxiety with higher levels of child/teen impulsiveness and lower levels of concentration; higher levels of parental irritability/frustration with higher levels of child/youth irritability and frustration – and the list could probably go on for some time. Some research has even documented higher levels of maternal stress in pregnancy with higher levels of anxiety and depression in their children many years later.

A simplistic reading of these research findings may be depressing and further guilt inducing (“my struggling is causing my child to suffer”). Therefore, it’s important for me to remind us all of the important difference between research which shows a relationship (correlation) and that which can show cause and effect. Given researchers can’t deliberately induce parental stress in parents, every one of the studies described above can only ever show a link not a cause, and it is very possible that it is children’s poorer well-being which leads to increased parental distress (a very plausible theory) not the other way around.

It is also very plausible that there are ‘third factors’ which cause both higher levels of parental distress and higher levels of child distress/difficulties (genes/biological factors and a host of many possible shared environmental factors).

Links between parent stress and parental behaviours

Higher levels of parenting distress are also linked with unhelpful parenting *behaviours*. For example, parents with higher parental distress are more likely to both use harsh parenting practices, to yell, use severe punishment, to (somewhat in contrast) use more permissive parenting strategies, do less monitoring of their children and to disengage with children more often.

There are three important messages for me to give here before again, this starts a cascading of further worry and guilt for some parents.

First, remember that **all** parents act in unhelpful ways towards their children very often. Although not the subject of this article, the concept of ‘good enough’ parenting is an extremely helpful one – in other words, unhelpful parenting behaviours are usually not damaging to children or young people, provided there is enough of the helpful parenting behaviours also mixed in when most needed.

Second, please go back to reread the sentences in the paragraph above on the distinction between correlation and causation and note again that we don’t know that parental distress *causes* unhelpful parenting. It is very possible that it may be a range of third factors leading to both parental distress and unhelpful parenting behaviours – for instance, societal factors, relationship factors or factors related to more difficult child behaviours.

Third, remember too that we are talking about ‘averages’ – there are many parents with high levels of parenting distress who do not act in unhelpful ways towards their child. It’s just that some do, and really, it’s not surprising that high distress leads to inability to do the hard work of helpful parenting at times.

Making parent distress real: What does this look like?

Many qualitative (focus on words, rather than numbers) studies have asked parents (usually of parents with children/teens with emotional/mental health and physical health challenges) to describe their parenting distress. A selection of comments from these studies are below, which I’ve included for you, in the hope that if you have felt some of this – you’ll see you are not alone.

- *As I faced these difficulties with my children, and saw the parts most horrible of me, I got so scared and destabilized that I completely stopped feeling confident as a mother.*
- *At times of crisis like that, I hate myself for not knowing how to manage.*
- *I’ve been told that I’m a lazy parent.*
- *The stress of having a child like that on your relationship is massive and unfortunately a lot of relationships don’t survive it.*
- *We’ve been child-free for one night in four years. No, there’s no one else who would dare to take on this problem.*
- *(After the self-harm) I went away and cried hysterically.*
- *And so that’s where I feel we’re unable to cope. So much with [the son] is really our own fault—we don’t know what to do.*
- *There were a few good days, yes, but the rest was just anger and frustration combined with inexplicable crying and a sense of being overwhelmed. In the aftermath of those episodes, I’d feel horrible, like I’m a horrible mother, wife and person.*
- *I’m going on to antidepressants at the end of the month because it’s just too stressful.*
- *I feel powerless. I feel like I’ve lost this.*
- *I try to be consistent, but at the same time I am alone, so it’s hard to be consistent all the time, because I just don’t have the energy.*
- *We don’t go away on any trips. Occasionally we get invited to visit our parents’ homes or to have dinner with someone, but we generally don’t go. Because it is so stressful for him.*
- *We feel that we have a child that requires monitoring twenty-four hours a day, in every situation.*
- *Should I talk about how hard it is? It is so hard that I hear him in my mind every night as I get ready to go to bed.*
- *Always being on duty, yes, and always being monitoring. Plus, the constant concern about what she was up to. Would she get through this day, or would she be taking an overdose? Would she be alive tomorrow? It’s that constant worry.*
- *(I have) no private life at all; (my) whole life was committed to just taking care of (my) daughter.*

- *Given that he was showing ADHD symptoms even as an infant, I became pretty old pretty quickly. Since he was born, I've always been old.*
- *I judge myself, all the time saying to myself 'wow, I did this wrong, and that wrong', and it burdens me.*
- *All the time there's this feeling of guilt, that something went wrong during the pregnancy that made her the way she is today ... It is something that is always there.*

Support for parental distress

The good news is that many researchers and psychologists have put together treatment packages designed to try to help parents. I have a separate article for mental health professionals in which I've covered these in more detail – but I thought parent readers might also be interested, so here is a brief summary of the main types here too.

Cognitive Behavioural Therapy (CBT) or Cognitive Behavioural Stress Management (CBSM)

CBT aims to help people see the links between their thoughts, feelings and beliefs, to identify unhelpful or unhealthy ways of thinking, evaluate these to try to use more helpful ways of thinking, and to also behave in more helpful ways. CBSM interventions use these CBT principles applied specifically to manage various life stressors (e.g. chronic illness and work-related stressors).

Mindfulness based parenting interventions

Mindfulness based parenting interventions aim to increase a parents ability to 'mindfully' and non-judgementally notice and kind acceptance of their own (and often their child's) thoughts and feelings without unhelpfully reacting to them and to experience less stress when they occur.

Parental reflective capacity interventions

Parent reflective capacity (PRC) is defined as the ability of a parent to be aware of the thoughts, feelings, beliefs and intentions of both themselves and their child – and to understand how this impacts on their behaviour and the behaviour of their child. A number of studies have linked higher levels of PRC to greater child and parent well-being.

PRC interventions use reflective questions/discussion to help parents be more aware of their (and their child's) thoughts, emotions, and the impact of these on behaviours and also are designed to help parents feel less stress.

Acceptance and commitment therapy (ACT) interventions for parents

ACT approaches focus on the *function and context* of (in contrast to the *content* of) thoughts, feelings, and sensations and supports people to see these thoughts/feelings/sensations as just brain workings and not harmful. ACT supports people to accept them and focus on *acting* in ways which are important to them,

regardless of the thoughts/feelings they are experiencing at any one time. This is thought to improve 'psychological flexibility' (the ability to behave in ways which are helpful to self and others rather than be stuck in rigid, rule following, unhelpful ways)

ACT parenting interventions are accordingly designed to increase mindful and flexible parenting, and for parents to take a 'step back' from their (and their child's) distressing emotions/feelings/sensations and focus on doing things which are important to them.

Self-compassion interventions for parents

Self-compassion is defined as perceiving our own challenges in understanding (including being aware of the normality of these challenges) and non-judgemental ways and acting kindly towards oneself. A number of studies have found that higher levels of self-compassion in parents is related to lower levels of depression, harsh parenting and child behaviour problems. As a result there have been a number of interventions designed to increase self-compassion in parents so they feel more kindly towards themselves (and their children).

Problem solving skills training

Problem solving Skills Training (PSST) is designed to teach the skills involved in effective problem-solving. PSST for parents is similarly designed to help parents to do effective problem solving and also build skills that address practical problems faced by caregivers – not to worry about parenting problems, but take more practical to manage them.

Parent-child relationship focussed interventions (attachment/emotion focussed)

There have been many interventions designed to improve parent child relationship using principles of attachment, emotion acceptance and emotion coaching. These programs help parents to be aware of their own feelings and experiences as a parent and where they come from, and to notice how the child/young person feels and how to respond to them with sensitivity. Although these programs have been designed to increase strength of the parent-child relationship (and increasing child well-being) rather than parent distress specifically, I've included them in this list of interventions for parent stress because these treatments have often been found to also improve parental well-being.

Collaborative Problem Solving

Collaborative Problem Solving (CPS) posits that children and young people's challenging behaviour occurs when they do not have the capacity or skills to respond to expectations or demands, rather than due to the child's lack of motivation or to other more complex psychological processes such as disrupted parent/child attachment. CPS calls these failures to respond to expectations "unsolved problems" and helps parents use a highly structured mediation/conversation process to discuss and problem solve how to manage those problems in the future.

Again, although the CPS intervention isn't solely aimed at reducing parent distress, it is included here in this list of parent distress interventions as CPS has also been found to have a helpful impact on parent stress.

Parent management training (PMT)

Parent management training (sometimes called Behavioural parent training) interventions are those which focus on supporting parents to more effectively use social/behavioural learning strategies to support their children's use of positive behaviours. These strategies include more effective instructions, use of praise, more effective monitoring of young people, positive time with children, use of routines, use of negative consequences – and for adolescents – increasing autonomy supportive parenting and improving parent-adolescent communication and problem solving. PMT programs are usually targeted at reducing children's disruptive behaviours and are one of the most effective types of treatment for this presentation.

Many studies have also found these programs are effective in reducing parental stress and depression.

Does that mean there are “cures” for parental distress? If I'm struggling with parent distress should I see a psychologist?

As you can see, the good news is that there have been many types of approaches (and hundreds of individual studies) which can be implemented by psychologists working with parents with parenting distress – and they do seem to be effective for many parents.

It is worth keeping in mind however, that these approaches don't work for everyone – and even with therapy to reduce parenting distress, many parents do have some ongoing challenges and struggles in this area. Unfortunately we don't have 100% effective treatments for any psychological challenge as yet – and parenting distress is the same.

As always, it's important to weigh up the costs and benefits of therapy, know that there are no guarantees and talk with your GP about it.

What else can I do to manage parenting distress?

Other than getting professional help – there are some self-help strategies parents can use themselves to cope with parenting distress. I've outlined some of these strategies below.

A warning first - I'm sorry to say there are probably not going to be any ideas in this list that you've never heard of – in fact you might read through this list of strategies and feel like you've tried it all before.

Unfortunately, as with all 'self-help' type articles it's usually the implementation of the ideas in the article rather than the learning about them which will probably make the difference. And of course, that's MUCH easier said than done when everything feels hard, and nothing feels like it will be particularly useful (a common feeling for anyone who is dealing with any kind of poor emotional health, including parenting related distress).

In order to avoid being overwhelmed, it might be worth reading this list with the view that you will just choose one of the below to put in place – just for a week – and see if it makes any difference. Here's the list.

Write down and keep a list of the most upsetting parenting related thoughts and beliefs you have (I can't do this, my child is too hard, I've failed, they are a bad kid/teen, they never listen) etc. Actually writing down the distressing or upsetting ideas which go through our head can make us look at these more objectively.

When you feel a bit more positive, **look at this list and see if you can notice any inaccuracies or unhelpful parts of the thoughts above.** Are they all true? Is there another way of looking at these situations? Put a circle around some of your thoughts which you think may be unnecessarily unhelpful or inaccurate.

Start to **notice these thoughts and feelings when they come up each day** – and try to feel kind and self-compassionate towards yourself that they happen to you. It's not your fault that you have these thoughts and feelings. Give these distressing thoughts a name like "my XXX story" or "Aunt/Uncle XXX". Noticing and naming these when they arrive, and being kind to yourself when you have them, can help you 'stand back' from them and feel a little less caught up in them.

On some occasions, look at the most upsetting thoughts you have – **and write down some more optimistic, 'kind to yourself' alternative thoughts/beliefs** – even if you don't 100% believe them, still write them down (don't just reassure yourself verbally – the writing bit is important). Ask a trusted friend or partner to help you with this if you can.

Notice the times of day or week that you spend a lot of time going over and over your parenting related upsetting feelings. With a friend, problem solve some more helpful things you can do with your brain in those situations instead – listening to music, a podcast, talk on the phone, do something with a friend if possible - to avoid excessive worry and rumination (which only perpetuates the problem).

Identify some self-care actions which we know are good for mental and physical health. Specifically consider social connection activities, physical exercise activities, and time in nature. I know it feels impossible to fit this in during the midst of busy parenting days – but think about what you can give up or do at the same time. Ask a friend to help you find a few minutes each week to put these in.

Reduce the expectations you have for yourself – if you feel there is absolutely no time for self-care activities, try to let some other activities 'go' for a while. I know this is very hard to do – one thing which might help is to try imagining that you've broken your leg – in this case you probably would do less laundry and skip a parent=teacher night – it can help to imagine you are not doing this for long, just 6 weeks. After that time, you might have found the ability to do it for longer periods of time.

Reach out to other parents. On the basis of the research, around half of the parents you know are probably experiencing high levels of parenting distress of some kind. They will know how you feel. Tell someone you trust about the worst feelings you are managing and ask them for reassurance, ideas or just a listening ear.

If you think this would suit you, consider downloading some mindfulness apps and practicing the exercises regularly. Some of them are only 5 minutes. Look for “loving kindness” meditations too – these might be particularly helpful if you have a lot of self-criticism.

Write down a few of the specific parenting related problems you experience (perhaps morning routines, worries about parenting differences with your partner, your child doing a certain behaviour). Make sure you are writing a specific problem, not a general one – in other words exactly what happens, why it happens and what should be different. Then spend a few minutes writing as many actions you could take that you can think of (even if they are outlandish solutions) which might make the problem 5% more bearable – try to get at least 10 actions. Pick one to try and see what happens.

Do a parenting course online or read a parenting related book. This might be helpful for your young person but more importantly – may reduce your own parenting distress as you will possibly learn about the normality of your experience and learn some strategies which make things easier for you too.

Increase the number of empathy statements (I’m sorry you are feeling that; I can see you are feeling X) **you give to your child**. Increasing your empathy and compassion towards your child can help us increase the empathy and compassion we give to ourselves.

Keep a written list of the things you are proud of about your child/teen and update it weekly. Do the same for the things you are proud of or think you do well as a parent, record moments you think you have been helpful, kind or connected. Remember we are aiming for “good enough” parenting – that’s all we need to do.

Remember to just pick **one** of the above strategies to try. Alternatively, pick one other strategy not on this list that you’ve used in the past that you think was helpful for you. It takes a little effort to actively manage your parenting stress unfortunately – and the last thing you need is another job I know - but in the long run it’s often worth it (and our children/teens benefits too).

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