

The role of self-compassion on parental stress and parenting satisfaction among Indian parents

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World Journal of Advanced Research and Reviews, 2026, 30(03), 078-090

Publication history: Received on 21 April 2026; revised on 25 May 2026; accepted on 28 May 2026

Article DOI: <https://doi.org/10.30574/wjarr.2026.30.3.1550>

Abstract

Parenting is one of the most fulfilling yet psychologically demanding roles in adulthood. Parental stress is consistently associated with lower parenting satisfaction, the mechanisms underlying this association is still not fully explored in Indian contexts. The present study examined the mediating role of self-compassion in the relationship between parental stress and parenting satisfaction among 252 Indian parents (aged 25-45 years) with at least one child aged 2-12 years, using a correlational design and purposive sampling method. Parental Stress, Self-Compassion and Parenting Satisfaction were measured using the Parental Stress Scale, Self-Compassion Scale-Short Form, and the Satisfaction Subscale of Parenting Sense of Competence Scale-Revised, respectively. Spearman correlations and Hayes' PROCESS macro were used for analysis. Results indicated significant negative correlations between parental stress and parenting satisfaction as well as between parental stress and self-compassion, and a significant positive correlation between self-compassion and parenting satisfaction. Mediation analysis indicated that self-compassion partially mediated the relationship between parental stress and parenting satisfaction, with parental stress retaining a significant direct effect. These findings suggest that parental stress undermines self-compassion, which further reduces parenting satisfaction, positioning self-compassion as a key modifiable resource for Indian parents. Limitations include the cross-sectional design, use of self-report measures, underrepresentation of fathers, which restrict causal inference and generalizability. Future research should employ longitudinal designs, diverse representative samples, incorporating qualitative approach for in-depth understanding of variables influence, and test culturally adapted self-compassion interventions to establish causal pathways and inform evidence-based parenting support programs in India.

Keywords: Parental stress; self-compassion; Parenting satisfaction; Mediation; Indian parents

1. Introduction

Parenting is considered to be one of the most fulfilling and psychologically demanding roles in adulthood, encompassing responsibilities such as nurturing, discipline, emotional support. The prolonged demands of addressing children's developmental needs, behavioral problems, and societal expectations make parenting a simultaneous source of meaning and stress (Berry & Jones, 1995; Deater Deckard, 2004). When exposed for so long, these stressors can lead to emotional exhaustion, decreased parental well-being, and decreased satisfaction in the role as a parent. Parental warmth and sensitivity, the critical determinants of children's cognitive, social, emotional, behavioral development (Bornstein, 2019; Bronfenbrenner & Morris, 2006), are particularly vulnerable to the burden of chronic stress.

Parental stress refers to the psychological disturbance which is the result of having the demands of parenthood surpass the perceived coping resources (Berry & Jones, 1995; Deater Deckard, 2004) and it is theoretically based on the transactional model of stress and coping developed by Lazarus and Folkman (1984). Parental stress levels which are chronically high have been associated with reduced parental warmth, physical or inconsistent discipline, emotional

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unavailability, and reduced sensitivity to the developmental needs of children (Cronic & Low, 2002; Deater Deckard, 2004; Pinquart, 2018).

Parenting satisfaction, the subjective sense of satisfaction, pleasure and positive assessment of parenting role (Johnson & Mash, 1989) is always and negatively correlated with parental stress where greater stress translates into lack of motivation, involvement and quality of parent child relationships. (Gilmore & Cuskelly, 2008; Johnston & Mash, 1989). The individual, child, and the contextual factors are the contributors to parenting satisfaction, including personality traits, self-efficacy, and social support (Ohan et al., 2000; Prinzie et al., 2005), child (temperament and health), and contextual (cultural norms and expectations) factors (Berry & Jones, 1995; Chronic & Low, 2002; Deater-Deckard, 2004).

Self-compassion, refers to being kind, non-judgmental, understanding and equanimous towards oneself regarding personal failures or sufferings as opposed to self-criticism or avoidance (Neff, 2003) has become a significant concept in parenting. Self-compassion entails three related terms, self-kindness, common humanity, and mindfulness (Neff, 2003), promotes healthy emotion regulation, less rumination, and psychological resilience (Neff, 2003; Neff & Germer, 2018; Sirois et al., 2015). Studies indicates that parental self-compassion has a negative relationship with parenting stress and a positive relationship with parenting satisfaction, self-efficacy, and warmth (Beer et al. 2013; Neff & Faso, 2015; Stenz et al., 2022), and that interventions based on self-compassion lead to decrease in parental anxiety, depression, and stress and increase in positive parenting behaviors (Jefferson et al., 2020). Theory suggests that self-compassion can mediate effect on parenting stress by lessening self-criticism (self-kindness) normalizing interpretation of parenting challenges (common humanity), preserving emotional balance (Cousineau et al., 2019; Whittingham, 2016), and directly contribute to parenting satisfaction by continuing to be engaged with the rewarding aspect of parenting.

Most studies on parental stress and self-compassion have been carried out in Western, individualistic cultures. The Indian cultural background is not much explored. The Indian parenting context, with its high collectivistic values, hierarchical family kinship, high academic achievement demands, and strongly rooted norms of parental self-sacrifice and devotion (Sharma, 2000) may contribute to self-criticism and feelings of inadequacy in a unique way when parents feel that they are not following the culturally-established standards (Rao & Venkatesan, 2020; Sharma, 2000). The long family relationships that provide can create more stress at the same time by providing conflicting parenting instructions and exerting pressure to follow old ways (de Wit et al., 2018). The conventional gender roles, enhanced by rising involvement of women in the workforce, also contribute to stress among Indian parents, especially mothers, because cultural aspects of self-sacrifice and constant presence still stand firm (Mazumdar, 2022). Further, Indian educational systems are competitive, which makes academic performance of children to be dependent on the perceived competence and status of parents, which increases the level of stress among parents significantly.

Even though future theoretical suggestions assume the role of self-compassion as the intervening factor between parental stress and parenting satisfaction and parenting satisfaction eroding by parenting stress through self-compassionate responding parenting stress reducing, this mediating role has never been empirically studied in non-clinical populations in India including both mothers and fathers. This gap is filled in by the current research which focuses on the relationship between parental stress and parenting satisfaction which is mediated by self-compassion in relation to parenting practices between Indian parents aged 25-45 years old having children aged between 2-12 years. The bridging of this gap has high implications to the establishment of culturally focused, evidence based self-compassion based interventions to promote parental well-being, decrease stress, enhance family functioning and educate citizens about health in India.

The intermediary effect that self-compassion has on the correlation between parental stress and parenting satisfaction can be conceived with the help of already-existing theoretical concepts like the Transactional Model of Stress and Coping (Lazarus and Folkman, 1984) and the Self-Compassion Theory (Neff, 2003). The Transactional Model postulates that individuals can experience stress when they feel that environmental demands surpass the available coping resources. Parenting role duties may be characterized by a lot of constant emotional and behavioral demands that can drive a long-term stress and emotional exhaustion. Chronic parenting stress can elevate self-critical thoughts, rumination, feelings of inadequacy and decrease the ability of parents to effectively regulate emotional responses.

The Self-Compassion Theory posits that self-kindness, mindfulness and awareness of common human experiences are protective psychological resources that shield individuals against stress-related hardships. The more parents show self-compassion, the more likely they will respond to challenges in parenting with patience, acceptance, and emotional balance. Conversely, lower self-compassion can further heighten negative emotional responses and diminish perceived competence in the parenting role. As such, self-compassion could be a major psychological process that connects

parental stress and parenting satisfaction. This hypothesis justifies the indirect impact of parental stress on parenting satisfaction via self-compassion as a theoretical explanation of why mediation analysis should be used.

Aim

The study aims to understand the relationship between parental stress, self-compassion and parenting satisfaction and to examine the mediating role of self-compassion on parental stress and parenting satisfaction among Indian parents aged 25-45 years old with at least one children between 2-12 years.

Hypothesis of the study

- H01: There is no significant relationship between parental stress and parenting satisfaction among Indian parents
- H02: There is no significant relationship between parental stress and self-compassion among Indian parents
- H03: There is no significant relationship between self-compassion and parenting satisfaction among Indian parents
- H04: Self-compassion does not significantly mediate relationship between parental stress and parenting satisfaction among Indian parents

Need and Significance of the study

Parenting is one of the main developmental processes of adulthood that has significant consequences of cognitive, emotional, and social development in children (Bornstein, 2019; Bronfenbrenner & Morris, 2006). High parental stress levels have been associated with reduced warmth, insecure discipline, lack of emotional availability, and lower quality of parent-child relationships (Deater-Deckard, 2004). It is thus an urgent psychological as well as public health concern to identify modifiable protective factors that improve parental well-being.

One such protective factor has been self-compassion that entails self-kindness, common humanity, and mindfulness (Neff, 2003). Studies showed that self-compassion has a negative correlation with parenting stress and a positive correlation with parenting satisfaction, emotional regulation, and adaptive coping (Neff, 2003; Moreira et al., 2015). The proposed emerging mediation models also indicate that self-compassion can be one psychological process that mediates the relationship between parental stress and parenting satisfaction to soften the impact of stress and maintain upbeat parenting ratings.

Most of this research however has been carried out in the Western individualistic culture. There is considerable disparity in regard to India, in which collectivistic beliefs, hierarchical families, academic demands, and ideals of parental self-sacrifice (Sharma, 2000) could be the only factors that exacerbate self-criticism and influences the mechanisms of self-compassion as a source of stress-buffering. The parents between 25-45 years old with children at the age of 2-12 years also encounter extra strain such as career, economic, and academic competitive pressures in which identity of parents is often connected to excellence of children.

Self-compassion as a mediator, particularly conducted on non-clinical community-based Indian populations, has rarely been empirically tested, and previous literature has mainly involved clinical populations or mothers per se, which excludes other populations. The current research fills this gap by discussing the mediating effect of self-compassion in the parental stress, parenting satisfaction pattern of Indian parents, both mothers and fathers, and therefore enhancing the representatives of the existing studies.

In theory, the mediation effect would contribute to the knowledge on the psychological processes between parental stress and parenting outcomes and synthesize the self-compassion and parental stress literatures. In practice, the results will be used to determine the culturally modified interventions and programs to improve self-compassion (example: Mindful self-compassion training and Compassion-focused therapy) and community health promotion to support the improved parental well-being, resilience, and positive family functioning in India.

1.1. Research Gap

The stressful effects and self-compassion of parenting have been broadly studied in Western, individualistic society where autonomy and self-focused coping are stressed. Nonetheless, there is a significant lack of empirical evidence based on community based samples of the Indian population. Indian parenting situation, in which collectivistic values, extended family concerns, academic demands, and concepts of parental self-sacrifice are highly valued, can have a

tremendous impact on the stress-inducing conditions of the Indian parent and the operation of self-compassion as a psychological resource, which results in a critical cultural generalizability gap.

The previous literature shows that parental stress has a negative effect on parenting satisfaction, and self-compassion as mediating in the relationship between parental stress and parenting satisfaction. Majority of the available literature utilizes direct correlations and mediation models have mostly been utilized in Western or clinical populations. The psychological mechanism by which stress experienced by parents has an impact on parenting satisfaction therefore is yet to be developed theoretically especially in non-clinical and culturally diverse samples.

Most of the research on parenting has been disproportionately on mothers, and studies on fathers was underrepresented. This gender imbalance in the Indian context where fathers are more and more involved in child-rearing restricts the knowledge about parenting behaviors in the dual-parent family and ignores the possibility of gender-specific differences in the perception of stress and coping mechanisms.

The literature mostly focused on parents of infants, adolescents, or children with special needs, so the 2-12 years age group is relatively underexplored in the general community samples. It is a stressful period of development, as it involves early and middle childhood with its unique requirements of academic performance, behavior control, and school adaptation, which has not been studied well yet especially in the context of the Indian sociocultural setting.

Although self-compassion is a psychological resource with adjustable modifiable ability that has shown an effective intervention in a Western setting it cannot be empirically supported that self-compassion plays the buffering effect in stress among Indian parents. It is important to establish the mediation role of self-compassion in the context of the parental stress-parenting satisfaction relationship to have the empirical basis of the program of cultural sensitive parenting interventions in India.

2. Method

2.1. Research Design

The study utilizes a quantitative correlational research design, allowing for statistical analysis of relationships among variables. Despite the fact that longitudinal designs are the most appropriate ways to test mediation models to achieve causal relationships among the variables, cross-sectional mediation analyses are commonly applied to exploratory studies to test theoretically plausible mechanisms that may explain relationships between variables. The current research design is cross-sectional and it aims at exploring the mediating effect of self-compassion on the relationship between parental stress and parenting satisfaction. Although causal interpretations have not been clearly determined, the results present initial evidence that can be used to inform future longitudinal and intervention-based studies.

2.2. Participants

A sample of 252 Indian parents was selected using a purposive sampling method for the study. The participants were between the ages of 25-45 years old with at least one child aged between 2-12 years old.

2.3. Sample

The population of the study was Indian parents aged between 25-45 years old and a purposive sampling method was used to collect the data. This is a non-probability sampling technique where intentionally select participants based on specific, relevant criteria or expertise to meet study goals, rather than using random selection.

2.4. Inclusion Criteria

- Must currently live in India and identify as Indian
- Parent's age should be between 25-45 years
- Has at least one child aged between 2-12 years
- Able to read and comprehend English

2.5. Exclusion Criteria

- Have a diagnosed severe mental health condition
- Have children with major developmental or behavioral disorders

2.6. Measures

- **Parental Stress Scale (PSS).** PSS was developed by Berry and Jones in the year 1995 to assess the levels of stress and feelings about parenthood in parents. It consists of 18 items, including both positive and negative aspects of parenting. Items are rated using 5-point-Likert scale ranging from 1= Strongly disagree to 5= strongly agree. Total score ranges from 18 to 90. Internal consistency of the scale is 0.83.
- **Self-Compassion Scale- Short Form (SCS-SF).** SCS-SF is developed by Raes et.al., in the year 2011 based on the original SCS scale by Kristin Neff in the year 2003. The scale is used to measure an individual's tendency to respond with self-compassion when encountering difficulties, personal failures, or suffering. It is a 12-item scale abbreviated version of Neff's 26 item Self compassion scale. Items are rated using a 5-point-Likert scale ranging from 1= almost never to 5= almost always. Total score ranges from 12 to 60. Internal consistency of the scale is 0.86.
- **Parenting Sense of Competence Scale- Revised (PSOC-R).** PSOC-R was developed by Gillmore and Cuskelly in the year 2023 which was revised from the original PSOC by Johnson and Mash in the year 1989. The scale assesses two subscales: parental satisfaction and efficacy. It measures the degree to which parents feel competent, confident, emotionally satisfied in their role as a caregiver. It is a 16-item-scale which consists of 10 items under efficacy and 6 items under satisfaction. Parenting subscale will be used for the study. Items are rated using 6-point- Likert scale which ranges from 1= strongly disagree to 6=strongly agree. Internal consistency for the satisfaction sub-scale is 0.88.

2.7. Procedure

The sample for the research includes 252 Indian parents who were selected based on the inclusion and exclusion criteria. The type of sampling used is purposive sampling, which is a type of non-probability sampling. At first, google forms were made to collect data in online mode and hard copies of the questionnaire were distributed to participants who had difficulty filling the form through online mode. The participants were asked whether they wanted to participate in the study or not, and their consent was taken. After that, a briefing about the nature and purpose of the study was explained to the participants to develop rapport. They were assured that all information taken from them would be kept confidential. They were each given a questionnaire that asked about their stress levels, self-compassion and parenting satisfaction. After the completion of data collection, scoring of 252 responses were completed and the results were interpreted and discussed.

2.8. Data Analysis

- The data was checked for normality and further tests will be based on its results using SPSS software.
- Descriptive statistics was conducted to find the mean and standard deviation of the variables
- Correlation Analysis was conducted to examine the relationships between variables.
- Mediation analysis was conducted to examine the mediating effects of the variable using Hayes PROCESS

2.9. Research Ethics

The research stringently followed ethical principles to maintain participants' rights, dignity, and welfare. Before participating, participants gave online informed consent, affirming that they understood the purpose, procedures, and voluntary participation rights of the study. Participants were clearly informed of their right to withdraw at any time without any penalty. Privacy and confidentiality were ensured at all costs, and all data collected were de-identified and stored securely to protect confidential information. These ethical precautions preserved the integrity of the research and respected the rights of the participants. This research also adhered to the ethics proposed by the American Psychological Association (APA), which are imperative guidelines for ethical research. This included gaining informed consent, making sure participants were fully aware of the nature of the research, any risks involved, and their right to withdraw at any time without penalty. Confidentiality and anonymity were maintained to safeguard participants' privacy, and all data were treated and reported in a way that guaranteed no disclosure of personal identities. Furthermore, a firm commitment was ensured to maintain honesty and transparency during the research process. Data were presented accurately, and any limits or possible conflicts of interest were revealed when necessary. The research was structured to reduce harm to participants and society at large. By ensuring these ethical standards, this research will provide meaningful contributions to the discipline while ensuring the integrity and credibility of psychological research.

3. Result and Discussion

Table 1 represents the sociodemographic details of the sample. It includes the distribution of gender, age, educational qualification, and child's age.

Table 1 Sociodemographic Characteristics of Participants

Socio-demographic Variables	Category	Frequencies	Percentage
Gender	Male	88	34.9
	Female	164	65.1
Age	20-25	3	1.2
	26-30	42	16.7
	31-35	83	32.9
	36-40	52	20.6
	41 and above	70	27.8
Educational Qualification	Graduate	105	41.7
	Post graduate	114	45.2
	Others	33	13.1
Child's age	0-5 years	73	29.0
	6-10 years	101	40.1
	11-15 years	70	27.8
	16 years and above	6	2.4

Table 2 represents the reliability of the measurements used. The Parental stress scale yielded a Cronbach's alpha of .759, the Self-Compassion Scale yielded .753, and the Satisfaction subscale of PSOC-R yielded .895, all of which are exceeding the threshold reliability value of .70. The Shapiro-Wilk test indicated that all the variables significantly deviated from normal distribution. Accordingly, non-parametric statistical tests were employed for subsequent analyses. The descriptive statistics shows that the mean score of parental stress was 41.50 (SD= 8.015), indicating moderate level of parental stress. Self-compassion showed a mean score of 3.305 (SD= .429), indicating a moderate level of self-compassion with relatively low variability. Parenting satisfaction showed a mean score of 30.65 (SD=5.714), showing a moderate level of satisfaction with some degree of variability across the sample.

Table 2 Reliability Statistics, Normality and Descriptive Statistics of the Data

Variable	No. of Items	Cronbach's Alpha	Mean	SD	Normality Statistic	Sig.
Parental Stress	18	.759	41.50	8.015	.949	.000
Self-Compassion	12	.753	3.305	.429	.932	.000
Parenting Satisfaction	6	.895	30.65	5.714	.834	.000

3.1. Hypothesis Testing

H01: There is no significant relationship between parental stress and parenting satisfaction among Indian parents

Table 3 shows the Spearman's correlation between parental stress and parenting satisfaction among Indian parents. The results indicate that there is a significant negative correlation between parental stress and parenting satisfaction. The obtained ρ value is $-.182$, p value is $.004$ which is less than $.01$, indicating that the correlation is significant at $.01$ level (2-tailed). This indicates that higher levels of parental stress are associated with lower levels of parenting satisfaction but the relationship is relatively weak. With regards to the hypotheses stated, the findings lead to the

rejection of the null hypothesis which implies that there is a significant relationship between parental stress and parenting satisfaction.

H02: There is no significant relationship between parental stress and self-compassion among Indian parents

Table 3 shows the Spearman’s correlation between parental stress and self-compassion among Indian parents. The results indicate that there is a significant negative correlation between parental stress and self-compassion. The ρ value is $-.375$, p value is $.000$ which is less than $.01$, indicates that there is a significant relationship at $.01$ level (2-tailed). This shows a moderate negative relationship between the two variables. Therefore, the findings suggest that higher levels of parental stress are associated with lower levels of self-compassion and conversely, parents who have higher self-compassion tend to experience lower stress. With regard to the stated hypothesis, the findings lead to the rejection of the null hypothesis which shows that there is a significant relationship between parental stress and self-compassion.

H03: There is no significant relationship between self-compassion and parenting satisfaction among Indian parents

Table 3 shows the Spearman’s correlation between self-compassion and parenting satisfaction among Indian parents. The results indicate a moderate positive correlation between self-compassion and parenting satisfaction. The ρ value is $.350$, p value is $.000$ which is less than $.001$. This emphasizes that higher levels of self-compassion are associated with higher levels of parenting satisfaction. The result is statistically significant at $.01$ level (2-tailed) thus, rejecting the null hypothesis which shows that there is a significant relationship between self-compassion and parenting satisfaction.

Table 3 Spearman Correlation between the variables Parental Stress, Self-Compassion and Parenting Satisfaction

Variables	1	2	3
1. Parental Stress	—		
2. Self-Compassion	$-.375^{**}$ ($p<.001$)	—	
3. Parenting Satisfaction	$-.182^{**}$ ($p=.004$)	$.35^{**}$ ($p<.001$)	—

** Correlation is significant at the 0.01 level (2-tailed).

H04: Self-compassion does not significantly mediate the relationship between parental stress and parenting satisfaction among Indian parents

Table 4 shows the mediation analysis on whether self-compassion mediating the relationship between parental stress and parenting satisfaction among Indian parents. The total effect of parental stress on parenting satisfaction was statistically significant, $B= -.1938$, $SE= .0434$, $t= -4.4649$, and p less than $.001$, within 95% confidence interval $(-.2792, -.1083)$. This indicates that parental stress significantly and negatively predicts parenting satisfaction. The direct effect of parental stress on parenting satisfaction, after including self-compassion as a mediator, remained significant, $B= -.1267$, $SE= .0460$, $t= -2.7562$, $p= .0063$ within 95% confidence interval $(-.2712, -.0362)$. The indirect effect of parental stress on parenting satisfaction through self-compassion was $B=-.0671$, $SE= .0285$, with a 95% confidence interval $(-.1308, -.0190)$. Since the confidence interval does not include zero, indirect effect is statistically significant indicating the presence of mediation.

Table 4 Mediation analysis of Self-Compassion on Parental Stress and Parenting Satisfaction

Effect Type	Effect	se	t	p	LLCI	ULCI
Total effect of X on Y	$-.1938$	$.0434$	-4.4649	$.0000$	$-.2792$	$-.1083$
Direct effect of X on Y	$-.1267$	$.0460$	-2.7562	$.0063$	$-.2172$	$-.0362$
Indirect effect of X on Y	$-.0671$	$.0285^*$	-	-	$-.1308$	$-.0190$
SCC Total						

4. Discussion

The present study examined the mediating role of self-compassion in the relationship between parental stress and parenting satisfaction among 252 Indian parents aged 25–45 years with children between 2 and 12 years of age. All four null hypotheses were rejected based on Spearman's correlations and mediation analysis.

Parenting Satisfaction and Parental Stress (H01). Parental stress was significantly negatively correlated to parenting satisfaction ($\rho = -.182, p = .004$), which points out that an increase in stress of parents leads to a decrease in parenting satisfaction. This is in line with Berry and Jones (1995), who determined them as inversely related aspects of parenting experience, Gilmore and Cuskelly (2008), who also found that satisfaction is especially sensitive to stress levels, and Oyarzun-Farias et al. (2021), who also described a similar inverse relation among Chilean parents of children aged 2–12 years. Even though the correlation was small, this can be explained by the non-clinical nature of the sample and high educational level of the participants and the presence of the other moderating factors like co-parenting support and involvement in the extended family. The result, however, is in accordance with the Deater-Deckard (2004) transactional model and Belsky (1984) process model, which proves that parenting stress significantly reduces the subjective fulfillment even in high-functioning samples of the Indian community.

Stress and Self-Compassion in Parents (H02). Parental stress and self-compassion were also correlated significantly in a moderate negative way ($\rho = -.375, p < .001$), which forms the strongest bivariate relationship in the study. In line with the theoretical framework used by Neff (2003), the high levels of parenting stress reduce the self-kindness, common humanity, and mindfulness aspects of self-compassion to promote self-criticism and rumination. This result overlaps with the meta-analysis conducted by MacBeth and Gumley (2012) who found significant negative effects between self-compassion and psychological distress, with Jefferson et al. (2020) meta-analysis of 31 parenting studies, Stenz et al. (2022) between clinical and non-clinical parent groups, and Wallisch-Prinz (2020) at the daily level, the buffering effect of trait self-compassion is stronger.

Self-Compassion and Parenting Satisfaction (H03). The self-compassion and parenting satisfaction showed a significant moderate positive correlation ($\rho = .350, p < .001$), which means that more self-compassionate parents can sustain emotional equanimity, experience perceived failures without self-blame, and engage with the rewarding aspects of parenting (Bogels et al., 2020; Moreira et al., 2015). The results are similar to Gouveia et al. (2016), who connected parental self-compassion with authoritative parenting and satisfaction with mindful parenting, and with Jefferson et al. (2020), who also reported positive correlations between parental self-compassion and satisfaction in a wide range of samples. Zessin et al. (2015) also affirmed strong positive links between self-compassion and subjective well-being through 79 samples and Sirois et al. (2015) indicated that self-compassion encourages adaptive coping mechanisms that maintain positive parenting reassessment.

Mediating Self Compassion (H04). Parental stress was observed to be mediated by self-compassion partially to parenting satisfaction. The indirect effect was statistically significant ($B = .0671, 95\% \text{ CI } [-.1308, -.0190]$) which means that the higher the parental stress level, the lower the level of self-compassionate responding which consequently reduces the level of parenting satisfaction. The direct effect was also important taking into consideration self-compassion ($B = -.1267, p = .006$), meaning that there are other unmeasured determinants of such an association such as social support (Crnic and Low, 2002), parenting self-efficacy (Johnston and Mash, 1989), co-parenting quality (Oyarzun-Farias et al., 2021), and emotion regulation strategies (Finlay-Jones et al., 2015). These results are consistent with De La Vega Castelo et al. (2025), Moreira et al. (2015), and Candenias Rios et al. (2024), and are directly clinically important, since Jefferson et al. (2020) affirm that self-compassion-incorporating parenting interventions have always produced a positive effect on parental self-compassion with effect sizes of $g = .372$ to $.690$.

The results of the current research can be discussed in the framework of the existing theories, including the Transactional Model of Stress and Coping and Self-Compassion Theory. With these models, people with adaptive emotional regulation resources have a greater capacity to cope with stress and be psychologically well. Self-compassion can also be a coping mechanism within themselves that enables parents to recognize the problem of parenting without excessive self-criticism. This is an adaptive coping strategy that can lessen emotional distress and lead to positive parenting experiences, thus increasing parenting satisfaction.

Cultural Context. The results should be explained within the framework of the Indian culture, with the collectivistic values, hierarchical families, high expectations of education, and the perception of self-sacrifice of parents, which leads to the situation when parenting issues are often converted into personal failures, self-criticism is intensified, and satisfaction is reduced. This is in line with the observation of Joshanloo (2014) who finds interrelatedness in suffering to be a characteristic of the Eastern tradition of philosophy and proposes cultures to be compatible with self-compassion

as a psychological resource. Most of the participants (65.1) were female, which is why the mediation of self-compassion techniques might be specifically applicable to the Indian mothers who become especially susceptible to culturally prescribed self-criticism (Rao and Venkatesan, 2020; Oyarzun-Farias et al., 2021). Extended family support and religious/cultural coping, may also be other mediating pathways through which parenting stress can have an impact on satisfaction in the Indian cultural context, as ecologically embedded parenting is in the context of larger social and cultural units (Bronfenbrenner & Morris, 2006; Rao and Venkatesan, 2020).

Significant implications within an Indian cultural context include high parental academic expectations, a great deal of family involvement in childrearing, and a societal of 'success' regarding children achieving optimal performance. The combination of these cultural factors may increase stress related to parenting and therefore the psychological resources provided by self-compassion may be extremely beneficial for sustaining parental wellness. Therefore, the present research examines the relationships noted in previous studies to contribute to the global literature regarding parenting and the cultural implications of parenting research.

5. Conclusion

The current paper described the mediating effect of self-compassion in the links between parental stress and parenting satisfaction in 252 Indian parents aged 25-45 years and showed a correlation with their children between the ages of 2 years and 12 years. None of the four null hypotheses were accepted. Parenting satisfaction was negatively but significantly correlated with parental stress ($\rho = -.182$, $p = .004$), whereas self-compassion was found to be correlated with parenting satisfaction ($\rho = .350$, $p < .001$). It was established in the mediation analysis that self-compassion mediates the stress-satisfaction relationship (indirect effect $B = -.0671$, 95% CI $[-.1308, -.0190]$) such that high levels of parental stress kills self-compassionate responding, which consequently kills the level of parenting satisfaction. The other direct effect is that there are other causes like social support, the quality of co-parenting and the self-efficacy of parents that also have an independent contribution to this relationship.

These results determine that parenting stress is a major psychological strain not only in the case of clinical populations but also in the general parenting populace in India. The concept of self-compassion is identified as a changeable and cross-culturally appropriate resource of psychology that can mitigate the negative impact of parental stress and maintain parenting satisfaction. The results are used to present an empirical basis upon which culturally tailored interventions of self-compassion can be developed to facilitate parental well-being and positive family functioning in India.

5.1. Implications

Theoretical Implications. The partial mediation result generalizes the transactional model by Lazarus and Folkman (1984) to the parenting context, where self-compassion plays an important role as a central internal coping factor in the stress-satisfaction correlation. The other direct effect shows that there are other mediating processes that should be given theoretical consideration other than self-compassion. Neff (2003) self-compassion framework is applicable to an Indian collectivistic parenting population, which increases its cross-cultural validity, which is in line with the fact that eastern philosophical traditions provide a culturally compatible source of self-compassion (Joshnloo, 2014). The results also affirm the ecological systems theory proposed by Bronfenbrenner and Morris (2006) since they show that the effects of macrosystemic factors, such as pressure to succeed academically, gender role norms and cultural constructs of parental dedication, influence psychological processes at individual level, such as self-compassion and parenting satisfaction.

Intervention Implications. Self-compassion is an intervention targeting the reasons of Indian parents that can be altered and psychologically proximate. Already existing interventions like the Mindful Self-Compassion training (Neff and Germer, 2018) and Compassion-Focused Therapy can be culturally modified to accommodate the barriers of Indian culture, such as the perceived incompatibility of self-focus with the principles of selfless parenting or the stigmatization of admitting to the personal lack of suitability in family situations.

Public Health Implications. The result that parental stress has a profound effect on self-compassion and parenting satisfaction even in a non-clinical, educated community sample demonstrates that parental psychological distress is not limited to high-risk groups. The issue of parental well-being should also be addressed in maternal and child health systems, school-based parenting programs, and community mental health programs, and universal self-compassion training should be added to antenatal programs, early childhood centres, and parent-teacher networks.

Clinical Implications. Use of self-compassion psychoeducation by mental health professionals engaging Indian parents should be placed into therapeutic practice, with explicit focus on self-critical thinking, normalization of parenting challenges as normal experiences in human life, and development of mindful emotional regulation skills. Since 65.1% of the sample included women, self-compassion interventions could be especially helpful to Indian mothers, who have a disproportionate burden of care and experience culturally approved self-sacrifice demands that undermine the response to self-compassion.

Implications in the Workplace/Policy. The results provide an empirical backing on organizational and workplace policies that combat work-parenting role conflict since they identified it to be a major cause of parental stress and lower parenting satisfaction among Indian parents. Helping working parents with flexible working policies and parental well-being programs is a significant structural complement to self-compassion interventions directed to an individual.

Practical implications. The results of the current research have significant practical implications to the mental health professionals, educators and policymakers dealing with parents. Intervention programs to improve self-compassion skills can assist parents to better cope with stress and become more satisfied with their parenting role. Mindfulness-based interventions, stress management, and self-compassion training are some of the strategies that can enhance emotional resilience in parents. Implementing self-compassion-oriented interventions in parenting workshops and counseling sessions can thus lead to better parental life and healthier parent-child relationships.

5.2. Limitations

Although the current research has made its contribution to the field, there are a number of limitations that should be mentioned. First, a cross-sectional research design allows one to determine only the relationships rather than causality between parental stress, self-compassion, and parenting satisfaction. Despite the fact that mediation analysis has been used to test theoretically plausible relationships, longitudinal research designs are required to establish causal directions as well as to test the change in these variables as time goes by. Second, the research depended on self-reports which can be subject to response bias like social desirability and recall bias. Further research can be enhanced by using a combination of data collection techniques such as observational or multi-informants' technique. Third, purposive sampling can restrict the applicability of results to larger populations. To enhance external validity, future studies need to take into account more diverse and representative samples. Lastly, other mediating variables like parenting self-efficacy, social support, and emotional regulation are some of the other variables that should be studied in the future to gain a better insight into the mechanisms that involve parenting satisfaction.

Recommendations on Future Research

Future studies need to use longitudinal designs and experience sampling methodology in order to determine the temporal sequence in which the proposed mediation pathway occurs and at which time within-person variability occurs. Better generalizability would be achieved by using more representative samples such as rural, socioeconomically heterogeneous, and regionally heterogeneous Indian parents recruited using probability-based approaches. To establish whether or not self-compassion mediates the relationship between stress and satisfaction among mothers and fathers, gender balanced samples or father-oriented research are required. Given that structural equation modeling offers a superior method to test the effect of self-efficacy, co-parenting quality, marital satisfaction, child temperament, and culturally specific factors (parenting guilt and religious coping) on parenting outcomes, expanded measurement frameworks should be considered to offer a more comprehensive understanding of parenting outcomes. The least urgent, but most urgently required, are randomized controlled trials that would test culturally modified self-compassion interventions, including Mindful Self-Compassion training and Compassion-Focused Therapy, to test their efficacy in stressed Indian parents. The qualitative research and mixed-method one would shed more light on the lived experience of Indian parents and guide the creation of culturally attentive interventions.

Compliance with ethical standards

Acknowledgments

I would like to acknowledge Dr. Smitha A.G, Associate Professor, Department of Psychology, Kristu Jayanti (Deemed to be University) Bangalore, for her guidance and supervision throughout the progress of this study.

Statement of informed consent

Participants consented to give information for the study by agreeing to the informed consent form provided to them through the online survey. Participants were allowed to exit the survey on disagreement to give their information, hence

no data is collected from those participants. The informed consent is approved by the department and institution with which I am affiliated.

Author's contribution

The author has solely contributed to the writing, review of literature, data collection and statistical analysis of this study.

Data Availability Statement

The data that supports the findings of this study are available from the author upon reasonable request.

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