

Research Brief

Parenting Today in Victoria:



Parental self-care and self-compassion

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Key insights

- A considerable proportion of parents – almost a quarter – did not regularly practise self-care
- Just over one-third of parents believed they were too critical of their own parenting
- When compared to mothers, fathers were more likely to practise self-care and less likely to be critical of their own parenting
- Parents of children with complex needs were more likely to be critical of their own parenting, as were parents from culturally and linguistically diverse backgrounds. Parents from culturally and linguistically diverse backgrounds were also less likely to practise self-care than other parents
- Better physical and mental health among parents was associated with greater self-care, and poorer physical and mental health were both associated with lower self-compassion
- Parents who practised self-care were more confident in their parenting role than parents who did not practise self-care. Parents who were self-critical were less confident in their parenting role than parents who were less self-critical.

What factors are associated with parents' practice of self-care?

This Research Brief derives from the 2019 Parenting Today in Victoria Study, conducted and analysed by the Parenting Research Centre and funded by the Victorian Government.



Context

The way parents look after themselves has a powerful influence on their children. Research suggests that when parents practise self-care, their mental health improves, and their levels of fatigue decrease.¹ These improvements can consequently lead to increased use of positive parenting strategies, which then leads to better outcomes for children.^{2,3}

Research also indicates that parents' self-compassion – the practice of being kind to oneself in the context of personal mistakes and failures – plays a role in parents' mental health and wellbeing.^{4,5,6,7} For example, high levels of self-compassion among the parents of children with autism spectrum disorder have been found to be associated with lower levels of parental depression and parenting stress.⁵ Other research demonstrates that parents of children with autism spectrum disorder who are self-compassionate are less likely to experience distress when faced with stigma and criticism.⁸ In other words, self-compassion helps buffer these parents from the impact of negative external judgements, leading to less psychological distress.



Self-compassion is not only important for parental wellbeing, it also appears to influence how parents interact with their children. Among parents with depression, mothers who report high levels of self-compassion are less likely to be critical of their children, and fathers are less likely to experience distress when dealing with their children's negative emotions.⁷

The data from the 2019 *Parenting Today in Victoria* survey is from a representative sample that provides valuable insights into the experiences of parents. We've used this data to explore how self-care and self-compassion practices are related to factors such as physical and mental wellbeing, gender, cultural background, parenting practices, beliefs and experiences among Victorian parents.

1 Ideal self-care strategies differ according to parents' needs and preferences. Strategies could include outdoor and group exercise activities, social activities, and supports and relaxation strategies such as meditation and mindfulness (see: <https://www.zerotothree.org/resources/3262-young-children-at-home-during-the-covid-19-outbreak-the-importance-of-self-care>).

2 Wade, C., Giallo, R., & Cooklin, A. (2012). Maternal fatigue and depression: Identifying vulnerability and relationship to early parenting practices. *Advances in Mental Health*, 10(3), 277-291.

3 Raynor, P., & Pope, C. (2016). The role of self-care for parents in recovery from substance use disorders: An integrative review of parental self-care. *Journal of Addictions Nursing*, 27(3), 180-189.

4 Bohadana, G., Morrissey, S., & Paynter, J. (2019). Self-compassion: A novel predictor of stress and quality of life in parents of children with autism spectrum disorder. *Journal of Autism and Developmental Disorder*, 49, 40390-4052.

5 Neff, K.D. & Faso, D.J. (2015). Self-compassion and well-being in parents of children with autism. *Mindfulness*, 6(4), 938-947.

6 Neff, K.D. (2003). Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity*, 2(2), 85-101.

7 Psychogiou, L., Legge, K., Parry, E., Mann, J., Nath, S., Ford, T., & Kuyken, W. (2016). Self-compassion and parenting in mothers and fathers with depression. *Mindfulness*, 7, 896-908.

8 Wong, C.C.Y., Mak, W.W.S. & Liao, K.Y. (2016). Self-Compassion: A potential buffer against affiliate stigma experienced by parents of children with autism spectrum disorders. *Mindfulness*, 7, 1385-1395.

Findings

Parental self-care

Only 55% of the parents participating in the study reported that they regularly practised self-care by doing something to help themselves relax and re-energise. Almost one quarter (24%) did not, and the remainder reported mixed feelings when asked about their self-care practices (see Figure 1).

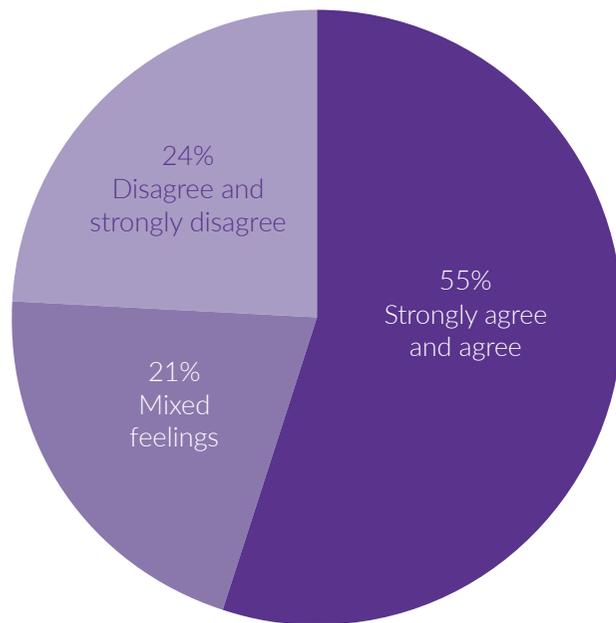


Figure 1. Parents asked if they regularly practised self-care by doing something to help themselves relax and re-energise (2019 data)

Fathers were more likely to participate in activities that helped them relax and re-energise than mothers (62% and 50% respectively; see Figure 2).

Neither parents' income nor their levels of education influenced whether they practised self-care.

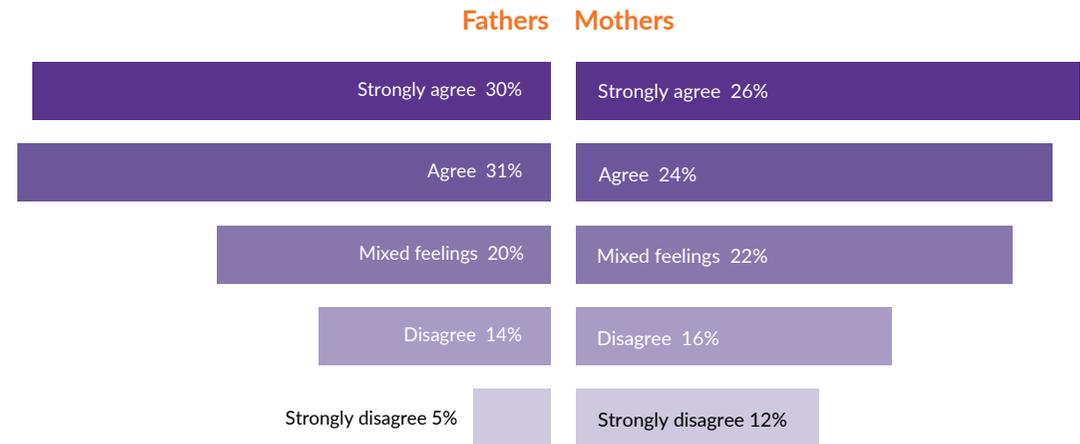


Figure 2. Proportion of fathers and mothers who regularly relax/re-energise (2019 data)

Parental self-criticism

Just over one-third of parents (37%) felt they were often hard on themselves as parents, and a slightly higher proportion (39%) felt they were not. The remainder (24%) had mixed feelings about whether they were too hard on themselves as parents.

Mothers reported being more critical of themselves than fathers did, and parents of children with complex needs were also harder on themselves when compared to other parents. Almost half of the parents of children with complex needs agreed or strongly agreed that they were too hard on themselves as parents (45%), compared to one-third of parents who did not have a child with complex needs (34%) (see Figure 3).

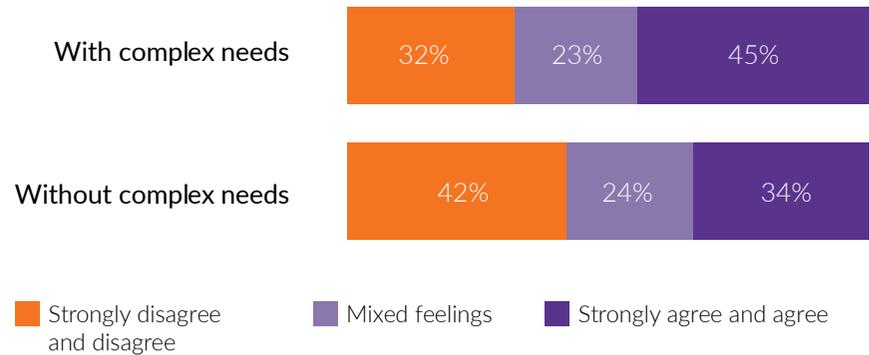


Figure 3. Parents' responses to the item 'I am often hard on myself for not being the kind of parent I really want to be' for children with and without complex needs (2019 data)

Neither the parents' income nor their levels of education influenced whether they were critical of their own parenting.



Factors associated with parental self-care and self-criticism

Overall, practising self-care was associated with better physical and mental health among parents. Lower rates of self-care were reported by: parents experiencing time pressure ('I don't have enough time to get what I need done'); parents of a child under five years of age; parents from a culturally and linguistically diverse background; and parents who were critical of themselves as parents.

Self-criticism was associated with poorer parental mental health, but also – to a lesser extent – with poorer physical health. Parents who do not regularly practise self-care or come from a culturally and linguistically diverse background were also more likely to be self-critical.

Fatigue

Self-care and self-criticism were also associated with fatigue in parents, which was associated in turn with parental physical and mental health. Parents who reported higher levels of fatigue were more likely:

- to be self-critical
- not to participate in self-care activities
- to have poor physical health and wellbeing or
- to experience current psychological distress.

Self-care, self-criticism and parenting efficacy

Self-care and self-criticism were associated with parents' confidence in themselves as parents. Parents who regularly engage in self-care were more likely to feel skilled and confident as parents and more likely to report the ability to focus on parenting tasks despite external stressors. Parents who are self-critical were more likely to feel less skilled and confident as parents and they felt less able to focus on parenting tasks.

There are several factors, however, that influence the strength of the relationship between self-care and parenting confidence. For example, fatigue, self-criticism, psychological distress, physical health, and having sufficient time weaken the association between self-care and parenting self-efficacy. This suggests that self-care makes a relatively small contribution to a parent's confidence in their parenting and that a range of other factors are important here as well.

However, for self-criticism, even when we consider the influence of fatigue, self-care, psychological distress, physical health, and having sufficient time, the association between self-criticism and parenting confidence remains strong. Of all these potential influences on parenting confidence, self-criticism remains the strongest influence.



Self-care, self-criticism and parents' experience of parenting

Parents who engage in self-care activities were more likely to report enjoying parenting and less likely to view it as a demanding and frustrating task. However, it is important to note that the associations between self-care and aspects of parenting experience were relatively small, and in the case of seeing parenting as frustrating, the association disappeared entirely when parental fatigue, self-criticism, psychological distress and available time were taken into account. Again, this suggests that self-care makes a relatively small contribution to a parents' overall experience of parenting.

For self-criticism the results were once again a little different. The role of self-criticism in parenting remains strong even when accounting for other factors (fatigue, self-care, psychological distress and time available).

Parents who are self-critical are less likely to report that they enjoy parenting and more likely to view parenting as demanding and frustrating.

Parents who reported being hard on themselves (more self-critical) were also more likely to report being hard on their children and more likely to argue with or yell at their child. They were also more likely to report dissatisfaction with their parenting practices, such as wishing they were less impatient and less critical of their child.



Conclusions and implications

Our research confirms the relationship between parents' wellbeing and self-care, and shows that parents who practise self-care tend to feel skilled and confident as parents. Parents who participate in self-care are also more satisfied with their physical health and less likely to experience psychological distress. Self-care is good for parents which, based on what we know from previous research, is also good for children.

Although many parenting interventions emphasise the importance of self-care, there is typically less focus on self-compassion. Yet our research shows that self-care and self-compassion go 'hand-in-hand': parents are less likely to practise self-care if they are self-critical, and more likely to be self-critical if they don't practise self-care. In fact, self-criticism is one of the factors that can 'cancel out' some of the benefits of self-care. In some circumstances, therefore, interventions that focus solely on self-care without addressing self-compassion may have a limited impact on parents and parenting.

Although our research cannot show causation, clearly self-criticism is not good for parents' physical or mental health, their confidence or self-perception. Supporting parents to exercise greater self-compassion would be a worthwhile aim



that would benefit parents and, in turn, their children. The finding that parents of children with complex needs tend to be more self-critical than parents of typically developing children is especially concerning and highly relevant to services providing support to these families. It's possible that the perceived stigma and additional challenges associated with having a child with complex needs may cause those parents to judge their parenting more harshly. Our research supports the notion that supporting parents of children with complex needs to develop greater self-compassion could have multiple benefits: less self-criticism and a stronger 'buffer' against external stigma and criticism – both of which are likely to lead to better outcomes for their children. The positive association between self-care and parents' physical and mental wellbeing is also especially important for these parents considering the unique demands of their caring role and their increased risk of mental and physical health difficulties.^{9 10 11}

⁹ Lee, H. L., Park, C., Matthews, A. K., & Hsieh, K. (2017). Differences in physical health, and health behaviors between family caregivers of children with and without disabilities. *Disability and Health Journal*, 10(4), 565-570.

¹⁰ Masefield, S. C., Prady, S. L., Sheldon, T. A., Small, N., Jarvis, S., & Pickett, K. E. (2020). The caregiver health effects of caring for young children with developmental disabilities: A meta-analysis. *Maternal and Child Health Journal*, 24, 561-574.

¹¹ Matthews, J., Millward, C., Forbes, F., Wade, C., & Seward, A. (2018). Parenting Children with Additional Needs (Research Brief). Available at: <https://www.parentingrc.org.au/publications/parenting-today-in-victoria/>

Conclusions and implications (continued)

Specific attention may also need to be given to enhancing self-compassion among parents from culturally and linguistically diverse backgrounds. Investigating the factors that lead parents from diverse cultural backgrounds to be more self-critical is needed. For example, racism has been shown to negatively affect people's physical and mental health^{12 13} which may, in turn, lead to higher rates of self-criticism among parents from diverse backgrounds.

Any intervention that incorporates strategies to enhance parents' self-compassion and reduce self-criticism needs to also consider the role and impact of fatigue. Our research demonstrates there is an association between fatigue and self-criticism and, in some circumstances, fatigue can 'cancel out' some of the benefits of self-care, including how parents' feel about their role as parents. Without directly addressing the problem of fatigue, the outcome of interventions designed to enhance self-compassion may be limited.

When it comes to self-care and self-compassion, one of the dominant themes that emerges is gender. Compared to men, women are less likely to practise self-care and more likely to be self-critical. Although this can be addressed at the individual level through interventions that, for example, encourage women to be more self-compassionate, clearly there are broader socio-economic factors at play.

For example, our research shows that having the time to do the things they need to do is a factor that influences whether parents practise self-care. It is widely acknowledged that among heterosexual couples with dependent children in Australia, mothers shoulder the burden of unpaid work, even when their level of participation in the paid workforce is similar to their male partners.¹⁴

It may be that mothers are less likely to practise self-care than fathers because they have less time in their day to do so. The burden of unpaid work may also increase the risk of fatigue for women, which is associated with a higher likelihood of self-criticism, which is also more common among mothers. Gender stereotypes which cause women to expect more of themselves as mothers, than men expect of themselves as fathers, may also contribute to the gendered discrepancy in self-criticism.

Self-compassion is a skill that can be developed and therefore should be considered by those designing and delivering parent and parenting support. Our findings, however, suggest that parents would also benefit from social change that address some of the cultural and practical barriers parents – particularly mothers – experience in adequately caring for themselves as well as their children.

12 Lee, H., Turney, K. (2012). Investigating the relationship between perceived discrimination, social status, and mental health. *Society and Mental Health*, 2(1), 1–20.

13 Pascoe, E.A. & Richman, L.S. (2009). Perceived discrimination and health: A meta-analytic review. *Psychological Bulletin Journal*, 135(4), 531–54.

14 Wilkins, R. Lass, I., Butterworth, P., & Vera-Toscano, E. (2019). *The Household, Income and Labour Dynamics in Australia Survey: Selected Findings from Waves 1 to 16*. Melbourne Institute: Applied Economic & Social Research, The University of Melbourne.



Study details

The 2016 and 2019 Parenting Today in Victoria surveys used computer assisted telephone interviewing to randomly survey 2600 Victorian parents and carers of children aged 0-18 years in each year. In each family, one parent was interviewed in their preferred language and asked questions about one child (the focus child). Each sample was weighted to match Victorian parents in the Australian Census (using the 2011 Census for the 2016 survey, and the 2016 Census for the 2019 survey), with key characteristics of our samples adjusted in 2016 and 2019 for education level (sample education was lowered) and residential location (sample was adjusted towards more metro/city dwellers), and also for parent age in 2016 (sample age was adjusted upwards).

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