

Research Brief

Parenting Today in Victoria:

Parents' quality of life

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Key insights

- The overall quality of life of Victorian parents was similar to that of Australian adults generally, although parents were more dissatisfied with their lives in the area of community belonging.
- Parents of children with complex needs – for example, chronic medical conditions, learning difficulty or behavioural difficulties – reported significantly poorer overall quality of life than other parents.
- Parents' quality of life was positively linked to the support they received from their co-parenting partners, communities and employers.
- A parent's quality of life is strongly associated with their mental health and with their sense of parenting efficacy.
- Differences in parents' quality of life were not related to parents' gender, parent or child age, where parents lived (that is, metropolitan versus regional areas), the number of children in the family or parents' employment.
- Governments, organisations and institutions can contribute to parents' quality of life and children's wellbeing and development through increasing parents' access to, and knowledge of available supports, including community supports. This is especially important for parents of children with complex needs.

How does a parents' quality of life relate to other areas of family life?

This Research Brief explores how Victorian parents rate their quality of life, and how life satisfaction relates to other areas of family life. Understanding the factors that impact on parental quality of life, and the types of supports needed to improve parental quality of life, is important when considering how best to focus family support initiatives that aim to improve child development and wellbeing outcomes.

The findings reported here derive from the 2019 Parenting Today in Victoria Study, conducted and analysed by the Parenting Research Centre and funded by the Victorian Government. The findings paint a picture of Victorian parents' quality of life as measured by the Personal Wellbeing Index (PWI).



Context

About quality of life

Quality of life is about the extent to which a person feels healthy, comfortable and able to participate in and enjoy life. It is the colour of the lens that life is experienced through.

Quality of life is commonly derived from people's feelings of satisfaction across a range of life domains. For example, the Personal Wellbeing Index (PWI)¹ – the measure of quality of life used in this study – explores people's perceptions of their:

- standard of living
- health
- life achievements
- personal relationships
- safety
- community connectedness
- future security.



Parents' quality of life and child wellbeing and development

Previous research has found a link between parental quality of life and children's development and wellbeing. For example, mothers' life satisfaction has been found to be positively associated with the verbal and motor skills of their 2–3-year-old children² and their children's prosocial behaviours,³ and negatively associated with their children's conduct problems at preschool age.⁴ Parents' quality of life is also associated with their children's life satisfaction.^{5, 6, 7, 8}

This association makes sense, given that we know parenting is a 'two-way street', with caregiver and child in a mutually influential relationship.⁹ So it is likely that aspects of parenting and the parent-child relationship have an influence on the parent's quality of life. For example, a number of studies,^{10, 11, 12} have looked into the quality of life of parents raising children with disability and chronic medical conditions. These parents rate their quality of life lower compared with parents of children who do not have these conditions. For example, they are less satisfied with their physical health, psychological wellbeing and financial resources, and parents' quality of life appears to decrease with increasing severity of child disability. Parents of children with complex needs have also reported less access to support from friends and people in the community.¹³



Findings

How did the parents in our study compare with Australians generally?

In most areas of the Personal Wellbeing Index (PWI), Victorian parents reported satisfaction with their quality of life that was close to norms for Australian adults. There were three areas where we saw divergence from the community norms. Parents rated their personal safety higher, but were more dissatisfied in the areas of community belonging and future security than Australians as a whole.

What matters to parents' quality of life?

We also looked at parents' quality of life in light of what else they told us about themselves – their circumstances, their children and their parenting approach.

We did not find differences in overall quality of life between mothers and fathers, parents of children in different child age groups, or parents living in metropolitan and regional areas. Nor did parents' quality of life depend on their age, the number of children they had or whether the parents were full-time workers, part-time workers or not in paid employment.

Although living in a metropolitan or regional area didn't seem to affect quality of life ratings, the neighbourhood where parents lived did matter. Parents living in the most socio-economically advantaged areas were most satisfied with the overall quality of their lives generally, and in their standard of living particularly.

As you might expect, parents who reported a higher quality of life also had lower current levels of psychological distress (as measured using the K6¹⁴). Parents with higher quality of life also:

- had greater perceived work flexibility
- were more likely to regularly do things to help them relax and re-energise
- were more likely to be living with another adult with whom they shared parenting duties (either the child's biological parent or another involved adult)
- were less likely to say tiredness gets in the way of parenting
- were less likely to have a child with complex needs.



Parents' quality of life and children with complex needs

In a result that is consistent with previous studies,^{15, 16, 17} Victorian parents of children with complex needs reported significantly poorer overall quality of life than other parents, or Australian adults generally. Specifically, lower parental quality of life was associated with having a child who had a chronic physical/medical condition; sensory impairments or learning difficulties; and/or emotional and behavioural difficulties.

Parents of children with complex needs reported significantly lower levels of satisfaction on every individual quality of life item on the PWI. The magnitude of this difference was often quite sizeable (see Figure 1).

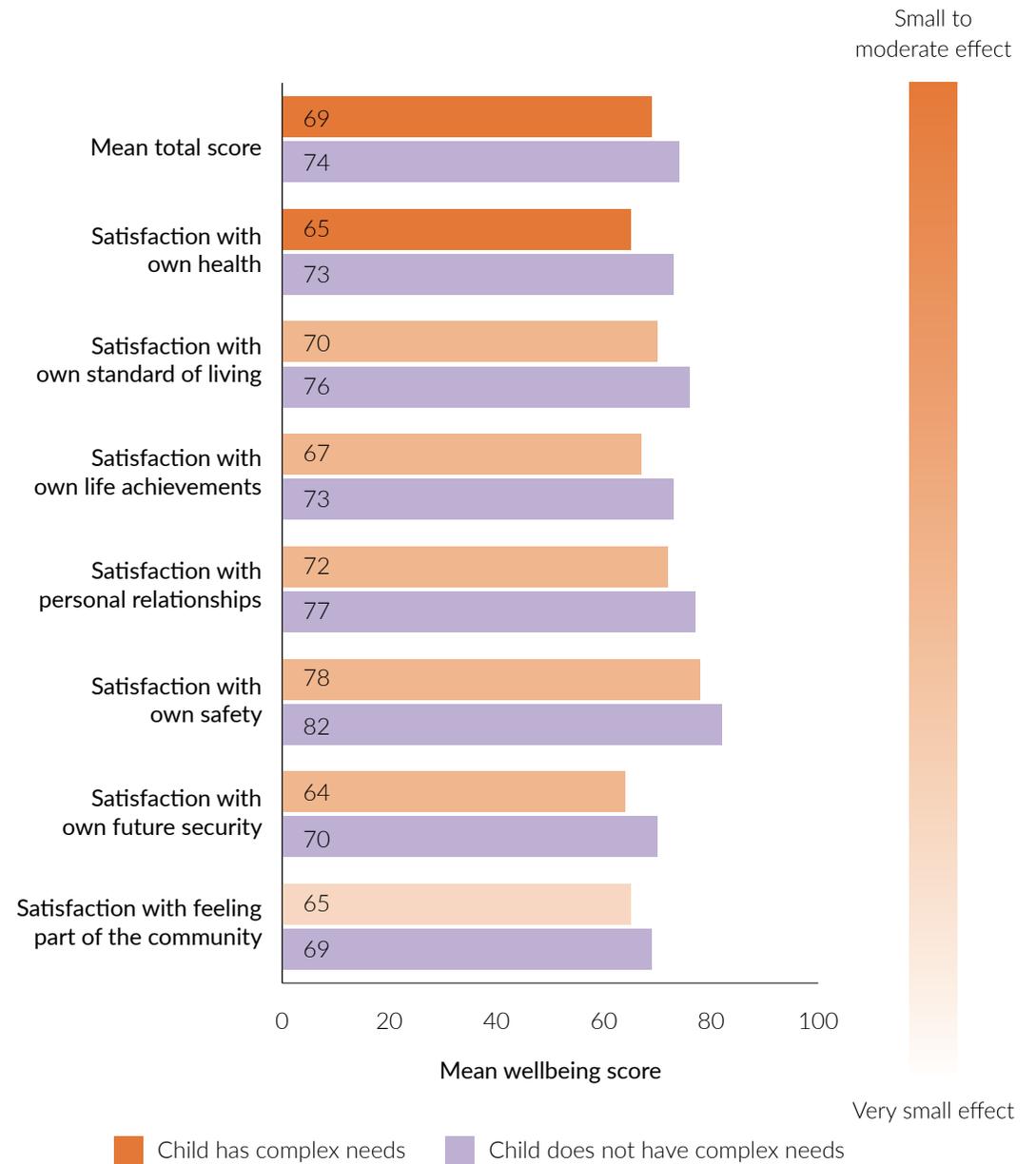


Figure 1. The size of the difference in Personal Wellbeing Index item scores between parents of children with and without complex needs¹⁸

Parents' quality of life and perceptions of supports

Parents' quality of life was linked to the types of support they accessed and the degree to which they found supports helpful.

For example, parents who reported greater satisfaction with their quality of life were more likely to perceive that their partner was supportive. Parents with higher quality of life were more likely to report that their current sharing of child care with their partner was fair and that they agreed more frequently with their partner on how to parent.

Parents who reported greater satisfaction with their quality of life were more likely to report they had someone they trust they could turn to for advice. We also found links between quality of life and perceived family support. Parents with greater life satisfaction were more inclined to say that they turn to family first when looking for help and support in raising children.

Greater work flexibility that allowed parents to fulfil their parenting responsibilities was also linked to greater reported quality of life.

These relationships between quality of life and support hold true for all parents, including parents of children with complex needs.

What is the relationship between quality of life, parenting self-efficacy and parenting experiences?

We found that parental self-perceptions, beliefs and experiences made a contribution to parental quality of life, independent of external influences. After controlling for socio-economic variables, and physical and mental health, parents who reported greater satisfaction with their quality of life were more likely to:

- report higher levels of self-efficacy in relation to their parenting
- perceive parenting as more enjoyable
- perceive parenting as less frustrating.

Of all these, parenting self-efficacy had the strongest relationship to overall quality of life. Self-efficacy refers to the feeling that parents feel competent and confident in their parenting.



Conclusions and implications

Parental quality of life is an important issue in child development because of the links between parent and child wellbeing.¹⁹

Parents' overall quality of life compares favourably to Australian adult norms.

Only in respect to their sense of community belonging and future security, do parents differ significantly from non-parents. These findings may reflect the unavoidable changes to responsibilities, priorities and activities that come with having children. Yet, they also serve to reiterate the importance of initiatives that help connect parents socially, such as first-time parent groups, peer support groups, early childhood education and care, and playgroups. Social connections play a crucial role in quality of life, and services taking a more proactive role to connect families with each other and with opportunities and support within their local community, could simultaneously be taking steps to improve parents' quality of life and enhance child outcomes.

This research also points to ways we might bolster or enhance parental quality of life. Our findings reinforce the importance of addressing structural and social impacts on quality of life, such as workplace flexibility. The link between work and parental quality of life provides further support for policy settings that promote greater workplace flexibility. Not only do flexible workplace practices have positive benefits for workers' mental health, they are likely to have important - if indirect - effects on child wellbeing and development.

Our findings may also be useful to the services and practitioners who work directly with families. The link between parental self-efficacy and quality of life suggests that enhancing quality of life may be another mechanism by which parenting support programs ultimately produce good outcomes for children. The importance of the co-parenting relationship in parental quality of life provides further support for the need to help families create and sustain positive and supportive inter-parental relationships between the adults in the family, as well as addressing parenting skills. In circumstances where parents are parenting alone there is a need to identify, create and sustain relationships with other adults who can provide this support. Mental health is important for parents' quality of life. Self-care is likely to be a factor here.



Assisting parents by providing strategies to reduce psychological distress, including increasing their self-care practices, are some areas that may promote parental quality of life. And finally, the role of positive self-perception and self-care in quality of life suggests that parenting support initiatives need to consider ways of actively promoting and building parents' skills in self-care and self-compassion.

The most concerning aspect of these findings relates to the quality of life of parents raising a child with complex needs. The marked differences between parents of children with complex needs and other parents on all dimensions of quality of life reflect our society's ongoing struggle to provide comparable and effective support to families who have children with complex needs. The good news, however, is that the kinds of factors that are important in sustaining high quality of life for all parents hold true for parents of children with additional needs. On the basis of this, we could expect strategies that strengthen families, adult relationships and parental skills and confidence could make a substantial difference in the lives of children with complex needs as well.

Finally, we believe that further consideration of the use of quality of life measures in assessing outcomes of child and family services is warranted. This study provides valuable normative data for services working with Victorian families who are using or considering including quality of life measures in their program evaluations.



Footnotes

- 1 International Wellbeing Group (2013). *Personal Wellbeing Index: 5th Edition*. Melbourne: Australian Centre on Quality of Life, Deakin University.
- 2 Berger, E. M., & Spiess, C. K. (2011). Maternal life satisfaction and child outcomes: Are they related? *Journal of Economic Psychology*, 32, 142–158.
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- 13 Leung, C. Y. S., & Li-Tsang, C. W. P. (2003). Quality of life of parents who have children with disabilities. *Hong Kong Journal of Occupational Therapy*, 13(1), 19-24.
- 14 The K6 is a widely used brief measure of psychological distress, Reference: Kessler, R., Andrews, G., Colpe, L. J., Hiripi, E., Mroczek, D. K., Normand, S. L. T., ... Zaslavsky, A. M. (2002). Short screening scales to monitor population prevalences and trends in non-specific psychological distress. *Psychological Medicine*, 32, 959–976.
- 15 Leung & Li-Tsang (2003), op cit.
- 16 Aktan, Orakci & Durnali (2020), op cit.
- 17 Seliner, Latal & Spirig (2016), op cit.
- 18 All comparisons showed a statistically significant difference between parents of children with and without complex needs, $p < .001$.
- 19 Richter, N., Bondü, R., Spiess, C.K., Wagner, G.G. & Trommsdorff, G. (2018). Relations among maternal life satisfaction, shared activities, and child well-being. *Frontiers in Psychology*, 9, 739.





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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