

A Causal Model of Parenting Stress Based on Child Behavioral Problems, Parental Perfectionism, Psychological Inflexibility, and Family Conflict: The Mediating Role of Parental Self-Compassion

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ABSTRACT

Objective: The present study aimed to develop and test a causal model of parenting stress based on child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict, with parental self-compassion serving as a mediating variable among Canadian parents.

Methods and Materials: This study employed a cross-sectional correlational design using structural equation modeling (SEM). The statistical population consisted of Canadian parents with at least one child aged 6–16 years. Using purposive sampling, 620 parents were recruited from schools, community family centers, parenting organizations, and online parenting networks across several Canadian provinces. Data were collected using the Parenting Stress Index–Short Form (PSI-SF), Strengths and Difficulties Questionnaire (SDQ), Multidimensional Perfectionism Scale (MPS), Acceptance and Action Questionnaire-II (AAQ-II), Family Environment Scale (FES–Conflict Subscale), and Self-Compassion Scale (SCS). Data were analyzed using SPSS version 27 and AMOS version 24. Descriptive statistics, Pearson correlation coefficients, confirmatory factor analysis, and structural equation modeling were conducted. The mediating role of parental self-compassion was examined using bootstrap analysis with 5,000 resamples and 95% bias-corrected confidence intervals.

Findings: The proposed structural model demonstrated satisfactory fit to the data ($\chi^2/df = 2.58$, CFI = .95, TLI = .95, IFI = .95, GFI = .92, RMSEA = .051). Child behavioral problems ($\beta = .24$, $p < .001$), parental perfectionism ($\beta = .17$, $p < .001$), psychological inflexibility ($\beta = .31$, $p < .001$), and family conflict ($\beta = .22$, $p < .001$) had significant positive direct effects on parenting stress. Child behavioral problems ($\beta = -.16$, $p < .001$), parental perfectionism ($\beta = -.23$, $p < .001$), psychological inflexibility ($\beta = -.41$, $p < .001$), and family conflict ($\beta = -.19$, $p < .001$) significantly predicted lower parental self-compassion. Parental self-compassion had a significant negative effect on parenting stress ($\beta = -.46$, $p < .001$). Bootstrap analyses confirmed significant indirect effects of all predictor variables on parenting stress through parental self-compassion ($p < .001$). The model explained 68% of the variance in parenting stress and 57% of the variance in parental self-compassion.

Conclusion: The findings indicate that parenting stress is influenced by a complex interplay of child-related, parent-related, and family-system factors. Child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict increase parenting stress both directly and indirectly through reductions in parental self-compassion. Among the predictors, psychological inflexibility emerged as the strongest risk factor, whereas parental self-compassion functioned as a significant protective mechanism. These results highlight the importance of interventions targeting self-compassion, psychological flexibility, and family relationship quality to reduce parenting stress and promote parental well-being.

Keywords: Parenting Stress, Child Behavioral Problems, Parental Perfectionism, Psychological Inflexibility, Family Conflict, Parental Self-Compassion.

1. Introduction

Parenting stress has emerged as one of the most important areas of inquiry within developmental, family, and clinical psychology due to its profound implications for parental well-being, child development, family functioning, and long-term psychosocial adjustment. Parenting is inherently demanding, requiring caregivers to balance emotional, cognitive, financial, and interpersonal responsibilities while responding effectively to children's developmental needs. Although parenting can be a source of fulfillment and meaning, chronic parenting-related pressures may exceed available coping resources and result in elevated levels of parenting stress. Parenting stress is generally conceptualized as the psychological discomfort that arises when parents perceive that the demands associated with raising children surpass their personal, familial, or environmental resources. Elevated parenting stress has been associated with emotional exhaustion, parental burnout, reduced parenting effectiveness, impaired parent-child relationships, increased family dysfunction, and adverse developmental outcomes among children (Zhang et al., 2025).

Recent studies have increasingly emphasized that parenting stress does not emerge in isolation but rather develops through complex interactions among child characteristics, parental personality traits, psychological processes, and family environmental factors. Researchers have argued that comprehensive explanatory models are needed to capture the multifaceted nature of parenting stress and to identify both risk and protective factors that shape parental adjustment. Within this context, child behavioral problems, parental perfectionism, psychological inflexibility, family conflict, and self-compassion have received growing empirical and theoretical attention as influential determinants of parental functioning and psychological well-being.

Among child-related factors, behavioral and emotional problems represent one of the most consistently identified

predictors of parenting stress. Children who exhibit hyperactivity, conduct problems, emotional dysregulation, oppositional behaviors, or social difficulties often require greater parental monitoring, emotional regulation, and behavioral management. Such demands can place substantial strain on parents and increase the likelihood of stress-related outcomes. Research has demonstrated that problematic child behaviors often disrupt family routines, contribute to interpersonal tension, and undermine parental confidence in their caregiving abilities. Studies examining parent-child dynamics have repeatedly shown that behavioral difficulties among children are associated with elevated levels of parental distress, reduced family satisfaction, and increased risk of dysfunctional parenting practices. Furthermore, parental behavioral control and excessive monitoring have been linked to negative developmental outcomes among offspring, highlighting the reciprocal nature of parent-child interactions and stress processes (Zhang et al., 2025). Similar findings indicate that parenting styles and parental control strategies are closely associated with children's psychological adjustment, emotional difficulties, and stress experiences (Lin & Guo, 2024; Zheng, 2023). Consequently, child behavioral problems constitute an important contextual stressor that may directly contribute to heightened parenting stress.

Another factor that has gained considerable attention in recent years is parental perfectionism. Perfectionism refers to the tendency to establish excessively high standards, engage in harsh self-evaluation, and strive relentlessly for flawlessness. Although perfectionistic tendencies may sometimes promote achievement and conscientiousness, maladaptive forms of perfectionism are frequently associated with anxiety, depression, stress, burnout, and interpersonal difficulties. Contemporary conceptualizations distinguish between self-oriented, socially prescribed, and other-oriented perfectionism, each of which may exert unique influences on psychological functioning (Flett & Hewitt, 2022; Piotrowski et al., 2024). Growing evidence suggests that perfectionism plays a particularly important

role within family contexts because parents often internalize unrealistic expectations regarding their parenting performance, children's achievements, and family functioning.

Parental perfectionism may contribute to parenting stress through several pathways. Parents who strive to meet unrealistic standards often experience chronic dissatisfaction, excessive self-criticism, guilt, and fear of failure. These tendencies may increase emotional vulnerability and diminish adaptive coping capacities when parenting challenges arise. Research has shown that perfectionistic parents are more likely to experience burnout, parenting difficulties, and strained family relationships (Çerkez & Sorakin, 2023; Piotrowski, 2022). Similarly, investigations of parenting perfectionism have demonstrated associations with overparenting behaviors, excessive control, and heightened parental distress (Leung, 2026). Studies examining family functioning have further indicated that child-oriented and partner-oriented perfectionism contribute to different forms of family difficulties and relational strain (Piotrowski, 2020). Moreover, perfectionism has been linked to maladaptive emotional outcomes including anxiety, depressive symptoms, low self-esteem, and psychological distress across diverse populations (Hameed & Arzeen, 2023; Khanam et al., 2024; Larionow, 2024; Lea et al., 2023). Research also suggests that perfectionism is influenced by parenting practices and parental expectations, creating an intergenerational cycle through which perfectionistic tendencies are reinforced within families (Agarwal & Dhenwal, 2024; López et al., 2023; Nouri et al., 2024).

The significance of perfectionism in family contexts is further highlighted by studies demonstrating its mediating role between adverse experiences and psychological maladjustment. For example, maladaptive perfectionism has been found to mediate associations between childhood trauma and depression, suggesting that perfectionistic tendencies may represent an important vulnerability factor that amplifies stress responses (Michałowska et al., 2025). Educational and developmental research has similarly documented the role of perfectionism in stress, burnout, and emotional difficulties among adolescents and young adults (Chyu & Chen, 2022; Molnar, 2026; Saini & S., 2024; Sederlund et al., 2020). These findings collectively suggest that parental perfectionism may represent a significant contributor to parenting stress and family dysfunction.

In addition to perfectionism, psychological inflexibility has emerged as a prominent predictor of emotional distress

and maladaptive functioning. Psychological inflexibility refers to rigid patterns of responding characterized by experiential avoidance, cognitive fusion, and difficulties adapting behavior in accordance with situational demands and personal values. Individuals high in psychological inflexibility often struggle to tolerate uncomfortable emotions and become trapped in ineffective coping patterns. Such tendencies can impair emotional regulation and increase susceptibility to stress-related difficulties.

Within parenting contexts, psychological inflexibility may interfere with parents' ability to respond adaptively to children's needs and behavioral challenges. Parents who are unable to accept difficult emotions or tolerate uncertainty may experience greater distress when confronted with parenting demands. Theoretical perspectives derived from contextual behavioral science suggest that psychological inflexibility may intensify stress by promoting avoidance-based coping strategies and reducing psychological resilience. Research examining stress-related processes has consistently shown that rigid cognitive and emotional patterns contribute to poorer mental health outcomes and diminished adaptive functioning (Nazir, 2021; Wegerer, 2023). Moreover, studies investigating resilience have found that greater adaptability and psychological flexibility are associated with improved well-being and lower levels of stress and burnout (Peroš & Buljan, 2025). These findings suggest that psychological inflexibility may play a central role in explaining why some parents experience higher levels of stress when exposed to similar family challenges.

Family conflict represents another important contextual factor associated with parenting stress. Family systems theory emphasizes that individual functioning cannot be understood independently of broader relational dynamics. Conflictual family environments characterized by hostility, criticism, poor communication, and unresolved disagreements may undermine emotional security and contribute to chronic stress among family members. Persistent family conflict may reduce parents' access to social and emotional support while simultaneously increasing interpersonal strain and caregiving burden.

Empirical studies support the importance of family conflict in parental adjustment. Parenting conflict has been identified as a significant mediator linking perfectionism to parental burnout and psychological difficulties (Mousavi et al., 2025). Similarly, investigations of risky parental practices have demonstrated long-term associations between dysfunctional family interactions and psychological maladjustment (Năstase, 2021). Research examining

parental achievement pressure and family expectations has further highlighted the role of family dynamics in shaping stress, perfectionism, and psychological symptoms among family members (Haspolat & Yağcı, 2023; Seong et al., 2022). Consequently, family conflict appears to represent both a direct source of parental stress and a mechanism through which other risk factors exert their influence.

While substantial research has focused on risk factors associated with parenting stress, growing attention has been directed toward protective psychological resources that may buffer parents from adverse outcomes. One such resource is self-compassion. Self-compassion involves treating oneself with kindness during times of difficulty, recognizing that suffering is a common human experience, and maintaining balanced awareness of painful emotions. Unlike self-esteem, which often depends on evaluations of success or competence, self-compassion promotes unconditional self-acceptance and emotional resilience.

Theoretical and empirical evidence suggests that self-compassion may play a particularly important role in parenting contexts. Parents frequently encounter situations involving mistakes, uncertainty, and perceived inadequacies. Individuals who respond to such experiences with self-criticism and judgment are likely to experience heightened distress, whereas those who demonstrate self-compassion may cope more effectively with parenting challenges. Self-compassion has been associated with reduced stress, enhanced emotional regulation, greater resilience, and improved psychological well-being across numerous populations. Furthermore, self-compassion may counteract the negative effects of perfectionism by reducing self-criticism and promoting acceptance of personal limitations. Parents high in self-compassion may therefore be better equipped to navigate child behavioral difficulties, interpersonal conflicts, and parenting-related pressures without experiencing excessive stress.

Despite the growing literature on parenting stress, several important gaps remain. First, many previous studies have examined child behavioral problems, perfectionism, family conflict, or psychological factors independently rather than integrating them into a comprehensive explanatory framework. Second, relatively few investigations have simultaneously examined child-related, parent-related, and family-system variables within a single causal model. Third, although self-compassion has been identified as a protective factor in various domains of psychological functioning, its mediating role in the relationship between parenting stress and multiple family risk factors has received comparatively

limited attention. Finally, there remains a need for research conducted within contemporary Canadian family contexts, where diverse social, cultural, and economic pressures may influence parenting experiences.

Given these theoretical considerations and empirical findings, the present study aimed to develop and test a causal model of parenting stress based on child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict, with parental self-compassion serving as a mediating variable among Canadian parents.

2. Methods and Materials

2.1. Study Design and Participants

This study employed a cross-sectional correlational design using structural equation modeling (SEM) to investigate the direct and indirect relationships among child behavioral problems, parental perfectionism, psychological inflexibility, family conflict, parental self-compassion, and parenting stress. The study aimed to test a causal model in which parental self-compassion functioned as a mediating variable between the predictor variables and parenting stress. The target population consisted of parents residing in Canada who had at least one child between the ages of 6 and 16 years. Participants were recruited from schools, community family centers, parenting support organizations, and online parenting forums across several Canadian provinces, including Ontario, British Columbia, Alberta, and Quebec. Using a purposive sampling strategy and considering the requirements of structural equation modeling for adequate statistical power and model stability, a total of 620 parents were recruited. Eligibility criteria included being the primary caregiver of a child within the specified age range, having sufficient English language proficiency to complete the questionnaires, and providing informed consent. Parents who reported severe psychiatric disorders that could interfere with questionnaire completion or who submitted incomplete questionnaires exceeding 10% missing data were excluded from the study. Prior to data collection, ethical approval was obtained from the relevant institutional research ethics committee, and all participants were informed about the voluntary nature of participation, confidentiality of responses, and their right to withdraw from the study at any stage without penalty.

2.2. Measures

Data were collected using a battery of standardized self-report instruments with established psychometric properties. Parenting stress was assessed using the Parenting Stress Index–Short Form (PSI-SF) developed by Abidin (1995). The PSI-SF is a widely used 36-item measure designed to evaluate the degree of stress experienced by parents in relation to their parenting role. The instrument consists of three subscales, namely Parental Distress, Parent–Child Dysfunctional Interaction, and Difficult Child. Participants respond to each item on a five-point Likert scale ranging from strongly disagree to strongly agree. Higher scores indicate greater parenting stress. Numerous studies conducted in different cultural contexts have demonstrated satisfactory reliability and validity for the PSI-SF, with reported Cronbach's alpha coefficients generally exceeding .85.

Child behavioral problems were measured using the Strengths and Difficulties Questionnaire (SDQ) developed by Goodman (1997). The SDQ consists of 25 items assessing emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, and prosocial behavior. For the purposes of the present study, the total difficulties score derived from the emotional, conduct, hyperactivity, and peer problem subscales was used as an indicator of child behavioral difficulties. Items are rated on a three-point scale ranging from not true to certainly true. Higher scores reflect greater behavioral and emotional problems in children. Previous research has consistently supported the reliability, construct validity, and cross-cultural applicability of the SDQ among diverse populations.

Parental perfectionism was assessed using the Multidimensional Perfectionism Scale (MPS) developed by Hewitt and Flett (1991). This instrument contains 45 items distributed across three dimensions: Self-Oriented Perfectionism, Other-Oriented Perfectionism, and Socially Prescribed Perfectionism. Participants rate each statement on a seven-point Likert scale ranging from strongly disagree to strongly agree. Higher scores indicate stronger perfectionistic tendencies. The scale has demonstrated excellent psychometric properties across numerous studies, including high internal consistency coefficients and strong evidence of construct and convergent validity.

Psychological inflexibility was measured using the Acceptance and Action Questionnaire–II (AAQ-II) developed by Bond and colleagues (2011). The AAQ-II is a seven-item measure designed to assess experiential

avoidance and psychological inflexibility. Participants indicate the extent to which each statement applies to them using a seven-point Likert scale ranging from never true to always true. Higher scores represent greater psychological inflexibility. The instrument has been extensively used in psychological research and has demonstrated satisfactory reliability, test–retest stability, and construct validity in both clinical and non-clinical populations.

Family conflict was assessed using the Conflict subscale of the Family Environment Scale (FES) developed by Moos and Moos (2009). This subscale evaluates the degree of openly expressed anger, disagreement, and conflict among family members. The measure includes items reflecting the frequency and intensity of family disputes and negative interactions. Participants respond to statements describing family dynamics, with higher scores indicating greater family conflict. Previous studies have reported acceptable reliability coefficients and strong evidence of content and construct validity for the FES Conflict subscale.

Parental self-compassion was measured using the Self-Compassion Scale (SCS) developed by Neff (2003). The scale consists of 26 items organized into six components, including Self-Kindness, Self-Judgment, Common Humanity, Isolation, Mindfulness, and Overidentification. Responses are recorded on a five-point Likert scale ranging from almost never to almost always. Higher overall scores indicate greater levels of self-compassion. The SCS has demonstrated robust psychometric characteristics across diverse populations and has been widely employed in research examining parental adjustment, psychological well-being, and stress management.

2.3. Data Analysis

Data collection was conducted through an online survey platform. Participants first completed a demographic questionnaire that gathered information regarding age, gender, educational level, marital status, employment status, number of children, and child age. Subsequently, participants completed the study instruments in a randomized order to reduce potential response bias. Prior to the main analyses, the dataset was screened for missing values, outliers, and assumptions of multivariate analysis. Descriptive statistics, including means, standard deviations, skewness, and kurtosis indices, were calculated for all study variables. Pearson correlation coefficients were computed to examine bivariate associations among variables. Structural equation modeling was performed using AMOS version 24

and SPSS version 27. Model fit was evaluated using multiple fit indices, including the chi-square to degrees of freedom ratio (χ^2/df), Comparative Fit Index (CFI), Tucker–Lewis Index (TLI), Incremental Fit Index (IFI), Goodness-of-Fit Index (GFI), and Root Mean Square Error of Approximation (RMSEA). Direct, indirect, and total effects were estimated simultaneously. The mediating role of parental self-compassion was examined using the bootstrap resampling procedure with 5,000 bootstrap samples and 95% bias-corrected confidence intervals. Statistical significance was established at $p < .05$ for all analyses.

3. Findings and Results

A total of 620 parents participated in the study. The mean age of the parents was 39.84 years ($SD = 7.26$), ranging from 24 to 58 years. Among the participants, 372 (60.0%) were

mothers and 248 (40.0%) were fathers. Regarding marital status, 547 participants (88.2%) were married and living together, while 73 (11.8%) reported being separated, divorced, or widowed. In terms of educational attainment, 126 participants (20.3%) had completed high school education, 187 (30.2%) held a college diploma, 221 (35.6%) possessed a bachelor's degree, and 86 (13.9%) had postgraduate qualifications. The average age of the target child was 10.92 years ($SD = 2.81$), and 51.3% of the children were boys. The mean number of children per family was 2.14 ($SD = 0.93$). Preliminary data screening indicated no significant violations of normality assumptions. Skewness values ranged from -0.81 to 0.76 and kurtosis values ranged from -0.69 to 0.84 , indicating acceptable univariate normality. Missing data accounted for less than 2% of all responses and were handled using the expectation-maximization procedure.

Table 1

Descriptive Statistics and Correlations Among Study Variables

Variable	Mean	SD	1	2	3	4	5	6
1. Parenting Stress	93.47	17.26	1.00					
2. Child Behavioral Problems	17.84	5.43	.62**	1.00				
3. Parental Perfectionism	122.53	21.74	.51**	.39**	1.00			
4. Psychological Inflexibility	27.46	8.12	.67**	.42**	.54**	1.00		
5. Family Conflict	31.18	7.66	.59**	.47**	.45**	.56**	1.00	
6. Parental Self-Compassion	76.35	13.81	-.71**	-.48**	-.52**	-.69**	-.55**	1.00

Table 1 presents the descriptive statistics and bivariate correlations among the study variables. Parenting stress demonstrated significant positive correlations with child behavioral problems ($r = .62, p < .01$), parental perfectionism ($r = .51, p < .01$), psychological inflexibility ($r = .67, p < .01$), and family conflict ($r = .59, p < .01$). The strongest positive association with parenting stress was observed for psychological inflexibility, suggesting that parents who experienced greater difficulty adapting to internal psychological experiences tended to report substantially higher levels of parenting-related stress. Parenting stress was

also strongly and negatively associated with parental self-compassion ($r = -.71, p < .01$), indicating that parents with greater self-kindness, mindfulness, and acceptance reported lower levels of stress in their parenting role. Furthermore, child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict were all positively intercorrelated, while parental self-compassion showed significant negative associations with all predictor variables. These findings provided preliminary support for the proposed theoretical model and justified proceeding with structural equation modeling analyses.

Table 2

Measurement Model and Confirmatory Factor Analysis Results

Construct	Factor Loading Range	Composite Reliability (CR)	Average Variance Extracted (AVE)
Parenting Stress	.71–.89	.91	.63
Child Behavioral Problems	.68–.87	.88	.59
Parental Perfectionism	.66–.85	.89	.57
Psychological Inflexibility	.72–.90	.92	.66
Family Conflict	.69–.88	.90	.61
Parental Self-Compassion	.70–.91	.93	.68

The confirmatory factor analysis demonstrated satisfactory psychometric properties for all latent constructs. Standardized factor loadings ranged from .66 to .91 and exceeded the recommended threshold of .50, indicating adequate item representation of the underlying latent variables. Composite reliability coefficients ranged from .88 to .93, substantially exceeding the recommended criterion of .70 and indicating excellent internal consistency. Similarly, average variance extracted values ranged from .57 to .68,

surpassing the recommended threshold of .50 and supporting convergent validity. The overall measurement model exhibited excellent fit to the data, $\chi^2/df = 2.41$, CFI = .96, TLI = .95, IFI = .96, GFI = .93, and RMSEA = .048. Collectively, these findings confirmed that the latent constructs were measured reliably and validly, providing a robust foundation for testing the structural relationships proposed in the conceptual model.

Table 3

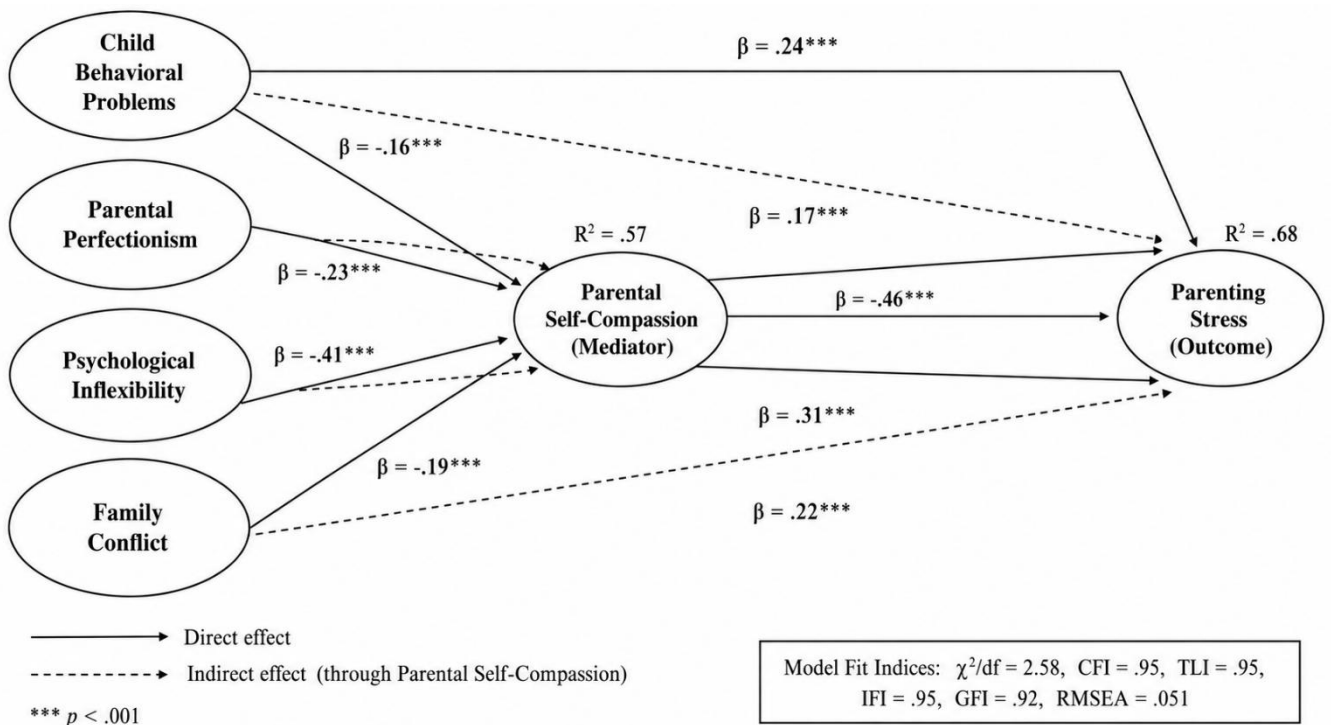
Direct Effects of Predictor Variables on Parenting Stress and Parental Self-Compassion

Path	β	SE	CR	p
Child Behavioral Problems → Parenting Stress	.24	.04	6.18	< .001
Parental Perfectionism → Parenting Stress	.17	.03	4.95	< .001
Psychological Inflexibility → Parenting Stress	.31	.05	7.46	< .001
Family Conflict → Parenting Stress	.22	.04	5.88	< .001
Child Behavioral Problems → Self-Compassion	-.16	.03	-4.87	< .001
Parental Perfectionism → Self-Compassion	-.23	.04	-5.91	< .001
Psychological Inflexibility → Self-Compassion	-.41	.05	-8.54	< .001
Family Conflict → Self-Compassion	-.19	.04	-5.16	< .001
Self-Compassion → Parenting Stress	-.46	.05	-9.82	< .001

The structural model revealed statistically significant direct effects among all hypothesized pathways.

Figure 1

Structural Model of the Study



Child behavioral problems exerted a positive effect on parenting stress ($\beta = .24, p < .001$), indicating that higher levels of emotional and behavioral difficulties among children were associated with greater parental stress. Parental perfectionism also significantly predicted parenting stress ($\beta = .17, p < .001$), suggesting that unrealistic parental standards and excessive self-evaluation contribute to elevated parenting burden. Psychological inflexibility emerged as the strongest predictor of parenting stress ($\beta = .31, p < .001$), emphasizing the central role of rigid psychological functioning in parental distress. Family

conflict likewise demonstrated a significant positive effect on parenting stress ($\beta = .22, p < .001$). Regarding the mediator, all predictor variables significantly and negatively predicted parental self-compassion. The strongest negative effect was observed for psychological inflexibility ($\beta = -.41, p < .001$), followed by parental perfectionism ($\beta = -.23, p < .001$), family conflict ($\beta = -.19, p < .001$), and child behavioral problems ($\beta = -.16, p < .001$). In turn, parental self-compassion significantly reduced parenting stress ($\beta = -.46, p < .001$), confirming its protective role within the proposed model.

Table 4

Indirect Effects Through Parental Self-Compassion and Overall Structural Model Fit

Indirect Path	Indirect Effect (β)	95% Bootstrap CI	p
Child Behavioral Problems → Self-Compassion → Parenting Stress	.07	.04 – .11	< .001
Parental Perfectionism → Self-Compassion → Parenting Stress	.11	.07 – .15	< .001
Psychological Inflexibility → Self-Compassion → Parenting Stress	.19	.14 – .25	< .001
Family Conflict → Self-Compassion → Parenting Stress	.09	.05 – .13	< .001

Bootstrap analyses based on 5,000 resamples confirmed the significance of all indirect effects, as none of the 95% confidence intervals included zero. The indirect effect of child behavioral problems on parenting stress through parental self-compassion was significant ($\beta = .07, p < .001$), indicating that part of the impact of children's behavioral difficulties on parental stress operates through reductions in self-compassion. Similarly, parental perfectionism exerted a significant indirect influence on parenting stress via self-compassion ($\beta = .11, p < .001$). The largest mediated effect was observed for psychological inflexibility ($\beta = .19, p < .001$), demonstrating that psychologically inflexible parents experience lower self-compassion, which subsequently contributes to higher parenting stress. Family conflict also showed a significant indirect association with parenting stress through diminished parental self-compassion ($\beta = .09, p < .001$). Examination of the model fit indices indicated excellent correspondence between the hypothesized model and the observed data. The χ^2/df ratio remained below the recommended threshold of 3.00, while the CFI, TLI, IFI, and GFI values exceeded .90. Furthermore, the RMSEA value of .051 indicated a close approximation of the model to the population covariance matrix. The final structural model accounted for 68% of the variance in parenting stress and 57% of the variance in parental self-compassion, demonstrating substantial explanatory power. Taken together, these findings support the proposed mediational framework and suggest that parental self-compassion serves

as a significant psychological mechanism linking child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict to parenting stress among Canadian parents.

4. Discussion

The present study aimed to develop and test a causal model of parenting stress based on child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict, with parental self-compassion serving as a mediating variable among Canadian parents. The findings supported the proposed model and demonstrated that all hypothesized pathways were statistically significant. Child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict exerted direct positive effects on parenting stress, while parental self-compassion showed a significant negative association with parenting stress. Furthermore, parental self-compassion partially mediated the relationships between each predictor variable and parenting stress. The final structural model accounted for a substantial proportion of variance in parenting stress, indicating that the combination of child, parent, and family-related factors provides a comprehensive explanation of parental stress experiences.

One of the most notable findings was the significant positive relationship between child behavioral problems and parenting stress. Parents who reported higher levels of

emotional and behavioral difficulties in their children also experienced significantly greater parenting stress. This finding is consistent with developmental and family systems perspectives, which suggest that children's behavioral challenges increase parental caregiving demands, emotional labor, and monitoring responsibilities. Children who exhibit oppositional behaviors, emotional dysregulation, hyperactivity, or interpersonal difficulties often require more intensive parental intervention, which can overwhelm parental coping resources. The present findings are consistent with research indicating that problematic child behaviors are associated with greater parental burden and psychological distress. Previous studies have demonstrated that parenting practices and behavioral control are closely linked with children's adjustment outcomes and parental well-being (Zhang et al., 2025; Zheng, 2023). Similarly, investigations into adolescent mental health have emphasized the reciprocal influence between child difficulties and parental functioning, suggesting that behavioral problems often contribute to elevated parental stress and reduced family harmony (Lin & Guo, 2024). The current findings therefore reinforce the importance of child behavioral characteristics as major contributors to parenting stress.

The results further revealed that parental perfectionism significantly predicted parenting stress. Parents who reported higher levels of perfectionistic tendencies experienced greater stress in their parenting role. This finding is theoretically consistent with models of maladaptive perfectionism, which emphasize the role of unrealistic standards, excessive self-criticism, fear of failure, and chronic dissatisfaction in generating psychological distress. Perfectionistic parents often perceive routine parenting challenges as evidence of personal inadequacy and may evaluate their parenting performance according to unattainable standards. Consequently, even minor parenting difficulties may be interpreted as failures, leading to elevated stress levels. These findings align with previous research demonstrating strong associations between perfectionism and psychological maladjustment. Studies have shown that perfectionism contributes to anxiety, depression, stress, and emotional difficulties across different populations (Khanam et al., 2024; Larionow, 2024; Lea et al., 2023). Research specifically focusing on parenting contexts has found that parenting perfectionism is associated with overparenting behaviors, parental burnout, and family difficulties (Leung, 2026; Piotrowski, 2020, 2022). Likewise, parental perfectionism has been linked to parenting conflict and

emotional exhaustion among parents of children with special needs (Mousavi et al., 2025). The present study extends this literature by demonstrating that perfectionism remains a significant predictor of parenting stress even when child behavioral problems, family conflict, and psychological inflexibility are simultaneously considered.

Another important finding was that psychological inflexibility emerged as the strongest direct predictor of parenting stress. Parents who demonstrated greater psychological rigidity reported substantially higher levels of stress. This result is consistent with contemporary contextual behavioral theories, which propose that psychological inflexibility limits individuals' ability to adapt effectively to challenging situations. Parenting frequently involves uncertainty, frustration, emotional discomfort, and unexpected demands. Parents who struggle to accept difficult emotions or who engage in experiential avoidance may become overwhelmed when confronted with these inevitable challenges. Instead of responding flexibly and adaptively, psychologically inflexible parents may become trapped in maladaptive coping cycles that intensify stress. Although the studies included in the reference list did not directly investigate psychological inflexibility, related research has consistently shown that rigid cognitive and emotional processes are associated with increased vulnerability to stress, burnout, and psychological symptoms (Nazir, 2021; Wegerer, 2023). Moreover, evidence linking resilience to better psychological outcomes suggests that adaptive flexibility serves as an important protective factor against stress-related difficulties (Peroš & Buljan, 2025). The current findings indicate that psychological inflexibility may represent a central mechanism through which parenting challenges are transformed into chronic stress experiences.

The results also demonstrated that family conflict was positively associated with parenting stress. Parents who reported higher levels of conflict within the family environment experienced greater parenting-related distress. This finding is consistent with family systems theory, which emphasizes the interconnected nature of family relationships and individual well-being. Family conflict often creates emotionally demanding environments characterized by hostility, criticism, and reduced emotional support. Such environments may deplete parents' coping resources while simultaneously increasing interpersonal demands. The current results align with previous findings indicating that parenting conflict plays a significant role in parental burnout and psychological distress (Mousavi et al., 2025). Furthermore, studies examining risky parental practices

have highlighted the long-term psychological consequences of dysfunctional family interactions (Năstase, 2021). Research investigating parental pressure and family expectations has similarly emphasized the importance of family relational dynamics in shaping stress experiences and emotional adjustment (Haspolat & Yalçın, 2023; Seong et al., 2022). The present findings provide further support for the view that family conflict functions as a significant contextual risk factor contributing to parenting stress.

A central contribution of the present study was the identification of parental self-compassion as a significant mediator. The findings showed that child behavioral problems, parental perfectionism, psychological inflexibility, and family conflict were all associated with lower levels of parental self-compassion, which in turn predicted higher parenting stress. This result suggests that self-compassion serves as an important psychological resource that helps parents cope more effectively with parenting-related challenges. Parents who are self-compassionate are likely to respond to difficulties with understanding, kindness, and emotional balance rather than self-criticism and harsh judgment. Consequently, they may be less vulnerable to the negative psychological effects of parenting stressors.

The mediating role of self-compassion was particularly notable in the relationship between perfectionism and parenting stress. Perfectionistic individuals tend to engage in self-criticism and evaluate themselves according to unrealistic standards. Such tendencies are conceptually incompatible with self-compassion, which emphasizes self-kindness and acceptance. Therefore, perfectionistic parents may experience elevated stress partly because their perfectionistic tendencies reduce their capacity for self-compassion. This interpretation is consistent with studies showing that maladaptive perfectionism contributes to emotional distress and psychological difficulties through self-critical cognitive processes (Hameed & Arzeen, 2023; Michałowska et al., 2025). The findings also align with research demonstrating that perfectionism is associated with lower psychological well-being and increased vulnerability to stress-related outcomes (Piredda et al., 2025; Saini & S., 2024; Sederlund et al., 2020).

Similarly, the mediating role of self-compassion in the relationship between psychological inflexibility and parenting stress suggests that flexible and accepting attitudes toward oneself may protect parents from the harmful effects of rigid psychological processes. Parents who are psychologically inflexible may become entangled in self-

critical thoughts and negative emotional experiences, reducing their ability to extend compassion toward themselves. Lower self-compassion may then contribute to greater parenting stress. This finding is theoretically consistent with acceptance-based approaches that emphasize the importance of mindfulness, acceptance, and self-kindness in promoting psychological resilience (Wegerer, 2023).

The indirect effects involving child behavioral problems and family conflict also provide valuable insights. Parenting children with behavioral difficulties or functioning within conflictual family environments may expose parents to repeated experiences of frustration, perceived failure, and emotional strain. These experiences may undermine self-compassion and increase self-blame. In contrast, parents who maintain compassionate attitudes toward themselves may be better able to tolerate these challenges without becoming overwhelmed by stress. The significant indirect effects observed in the present study suggest that self-compassion functions as a protective psychological mechanism that buffers the impact of multiple risk factors on parenting stress.

5. Conclusion

Overall, the findings support an integrative framework in which parenting stress is influenced by the interaction of child characteristics, parental personality traits, psychological processes, and family environmental factors. The results further suggest that self-compassion represents a key resilience factor capable of mitigating the effects of multiple parenting-related stressors. By identifying both risk and protective factors within a single structural model, the present study contributes to a more comprehensive understanding of parenting stress and highlights potential targets for intervention.

6. Suggestions and Limitations

The present study has several limitations that should be considered when interpreting the findings. First, the cross-sectional design prevents definitive conclusions regarding causality among the study variables. Although structural equation modeling permits the testing of theoretically informed causal pathways, longitudinal research is needed to establish temporal precedence. Second, all variables were assessed using self-report measures, raising the possibility of common method variance and social desirability bias. Third, the sample consisted exclusively of Canadian parents, which

may limit the generalizability of the findings to other cultural contexts. Fourth, potentially important variables such as parental mental health history, socioeconomic stressors, marital satisfaction, and social support were not included in the model. Finally, although the model explained a substantial proportion of variance in parenting stress, additional contextual and developmental factors may further enhance explanatory power.

Future research should employ longitudinal and prospective designs to examine how parenting stress develops over time and to clarify causal relationships among child behavioral problems, perfectionism, psychological inflexibility, family conflict, self-compassion, and parenting stress. Researchers may also investigate whether the proposed model differs across developmental stages, family structures, socioeconomic groups, and cultural settings. Experimental and intervention-based studies could examine whether increasing self-compassion directly reduces parenting stress and improves family functioning. Future investigations may further explore additional mediators and moderators such as emotional regulation, resilience, parental identity, attachment styles, and social support. Comparative studies involving mothers and fathers separately may also provide a more nuanced understanding of gender-specific pathways to parenting stress.

The findings of this study have several practical implications. Parenting programs should incorporate components designed to reduce perfectionistic expectations and promote realistic parenting standards. Mental health professionals working with parents may benefit from assessing psychological inflexibility and teaching acceptance-based coping strategies that encourage adaptive emotional regulation. Family interventions should focus on improving communication patterns and reducing family conflict in order to strengthen relational functioning and decrease stress. Most importantly, self-compassion training may represent a highly effective intervention target. Programs that cultivate self-kindness, mindfulness, and emotional acceptance could help parents respond more adaptively to parenting challenges, thereby reducing stress and enhancing overall family well-being. Educational institutions, community organizations, and healthcare systems may also contribute by providing accessible resources that foster parental resilience and promote healthy family environments.

Authors' Contributions

All authors have contributed significantly to the research process and the development of the manuscript.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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