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Effectiveness of Mindfulness- and Emotion Regulation-Based Psychological Interventions on Parenting Stress, Quality of Life, and the Parent–Child Relationship in Mothers of Children with Intellectual Disabilities: A Systematic Review of the Evidence

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A B S T R A C T

The primary objective of this study was to systematically review the evidence on the effectiveness of mindfulness- and emotion regulation-based psychological interventions in reducing parenting stress and improving quality of life and the parent–child relationship among mothers of children with intellectual disabilities. To identify and explain the criteria and variables of the proposed model, a seven-year systematic review of the evidence based on the PRISMA framework was conducted, covering Persian-language studies published from 2020 to 2026 and English-language studies published from 2020 to 2026. One of the principal findings of the present study was that the model of the "effectiveness of mindfulness- and emotion regulation-based psychological interventions on parenting stress, quality of life, and the parent–child relationship in mothers of children with intellectual disabilities" was finalized on the basis of several constructs and criteria. The construct of "parental mindfulness" encompassed criteria such as present-moment attention, acceptance and nonjudgment, and mindful awareness in parenting. The construct of "parental emotion regulation" included criteria such as emotional appraisal, cognitive reappraisal, and impulse control. The construct of "parenting stress" comprised criteria such as parental psychological distress, parental fatigue, and feelings of parental helplessness. The construct of the "parent–child relationship" included criteria such as parent–child emotional intimacy, parent–child communication and dialogue, and parental encouragement and support. The construct of "parental quality of life" encompassed criteria such as the costs associated with child care, sacrificing personal needs, and parents' social relationships. Finally, the construct of the "status of children with intellectual disabilities" included mild, moderate, severe, and profound intellectual disability.

Keywords: *mindfulness, emotion regulation, parenting stress, quality of life, parent–child relationship, children with intellectual disabilities.*

1. Introduction

Parenting a child with an intellectual disability is associated with a distinctive and often prolonged set of psychological, relational, social, and practical demands. Intellectual disability is characterized by significant limitations in intellectual functioning and adaptive behavior that emerge during the developmental period and affect conceptual, social, and practical domains of everyday functioning (Schalock, 2021). Although the degree of support required varies considerably across mild, moderate, severe, and profound levels of intellectual disability, families frequently face long-term caregiving responsibilities that extend beyond those typically encountered in parenting. These responsibilities may include greater supervision, assistance with daily activities, management of behavioral and emotional difficulties, coordination with educational and rehabilitation services, financial strain, and uncertainty regarding the child's future. Consequently, the psychological health of parents is increasingly recognized as a critical component of family-centered care for children with intellectual and developmental disabilities. Evidence from meta-analytic and review studies indicates that caregivers of children with developmental disabilities may experience substantial burdens affecting their physical health, psychological well-being, social participation, and overall functioning (Jacob, 2026; Masefield, 2020). The effects of caregiving are particularly salient among mothers, who frequently assume a major share of daily caregiving responsibilities and may therefore experience persistent emotional strain, restricted personal time, and reduced opportunities for self-care and social participation. Qualitative evidence further suggests that parental quality of life in families of children with intellectual disability is shaped not only by caregiving difficulties but also by the psychological and practical costs of care, changes in family routines, reduced fulfillment of personal needs, and the coexistence of parenting burdens and rewards (Barratt, 2025).

Parenting stress is one of the most frequently investigated psychological outcomes in parents of children with disabilities. It refers to distress arising when the perceived demands of parenting exceed the parent's available psychological, interpersonal, and material resources. In families of children with intellectual or developmental disabilities, parenting stress may be intensified by behavioral difficulties, developmental delays, communication limitations, caregiving demands, financial pressure, insufficient social support, and uncertainty regarding treatment and educational outcomes. Research involving parents of children with intellectual disability has identified emotion regulation, distress tolerance, and other psychological resources as important correlates of parenting stress (Sobhani & Basharpoor, 2022). Similar findings have been reported in families of children with attention-deficit/hyperactivity disorder, autism spectrum disorder, learning disorders, and other developmental conditions, indicating that elevated parenting stress is not simply a consequence of the child's diagnosis but is also influenced by parents' psychological capacities and coping processes (Nazemi et al., 2024; Rouhi Dehkordi, 2021; Salmanvandzadeh, 2023). Comparative research further indicates that families of children with disabilities may differ from normative families in patterns of emotion regulation, parental stress, and family functioning, suggesting that the interaction between parental regulatory processes and caregiving demands deserves specific investigation (Priego-Ojeda & Rusu, 2023). Such evidence supports a conceptualization of parenting stress as a multidimensional and potentially modifiable outcome rather than an unavoidable consequence of raising a child with special needs.

Mindfulness has emerged as one of the most important psychological constructs in attempts to understand and reduce parenting stress. Mindfulness generally refers to purposeful attention to present-moment experiences accompanied by an accepting and nonjudgmental orientation. In the parenting context, mindful parenting extends this concept to parent–child interactions and includes attentive listening, emotional awareness, nonjudgmental acceptance, reduced automatic reactivity, and compassion toward both the child and the self. The distinction between general dispositional mindfulness and mindful parenting is theoretically important because a parent may demonstrate general mindful awareness in daily life while experiencing substantial difficulty maintaining such awareness during emotionally demanding interactions with a child. Recent evidence emphasizes mindful parenting as a relational process that can influence emotional exchanges within the family, including parents' capacity to regulate emotional responses and respond sensitively to their children (Al Adawiyah, 2026). Research has also linked parents' dispositional mindfulness, mindfulness in marriage, and mindfulness in parenting with children's emotion regulation, suggesting that parental mindfulness may operate across multiple relational contexts rather than solely as an

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individual psychological trait (Uygun & Erus, 2024). In addition, daily-process research indicates that mindful parenting may alter the association between parent–child conflict and parental stress, although its effects may vary according to contextual conditions and levels of conflict (Fang, 2026). These findings reinforce the need to conceptualize mindfulness as a dynamic regulatory process embedded within family relationships.

A growing body of intervention research has investigated whether mindfulness-based programs can reduce parenting stress and improve parental well-being. Systematic reviews and meta-analyses generally support the potential efficacy of mindful parenting and mindfulness-based interventions, while also demonstrating substantial heterogeneity across studies in populations, intervention formats, measurement tools, and outcome magnitude (Shorey & Ng, 2021; Yang et al., 2026). Mindfulness-based parenting programs have shown favorable effects in parents of children and adolescents with attention-deficit/hyperactivity disorder, although variability in intervention design and methodological quality limits unconditional generalization (Tumtham Marong, 2020). More recent randomized controlled trials have extended this evidence, including culturally adapted mindful parenting protocols for parents with elevated parenting stress and brief online or technology-delivered programs designed to increase accessibility (Cheung, 2025; Lam et al., 2025; Phasuke, 2026). Studies conducted with mothers of children with autism spectrum disorder, learning disorders, oppositional defiant disorder, and other developmental or behavioral conditions have similarly reported reductions in parenting stress following mindfulness-based cognitive therapy or mindful parenting training (Mehri et al., 2025; Varaei et al., 2020). Interventions combining parent management training with mindful parenting or acceptance-based approaches have also suggested that integrating mindfulness with broader behavioral or acceptance-oriented components may improve parental and child outcomes (Kowsari et al., 2023). These findings indicate that mindfulness interventions may be valuable, but they also raise questions regarding the specific mechanisms through which their effects occur.

Emotion regulation is one of the most plausible mechanisms linking mindfulness to parenting outcomes. Emotion regulation refers to the processes by which individuals monitor, evaluate, modify, and express emotional responses in accordance with situational demands and personal goals. Adaptive strategies such as cognitive reappraisal, acceptance, emotional awareness, and impulse control may help parents respond more flexibly to difficult caregiving situations, whereas maladaptive responses such as emotional suppression, impulsive reactions, avoidance, or persistent dysregulation may increase psychological distress and interpersonal conflict. Research on parents of children with developmental or behavioral disorders has shown that emotion regulation is associated with parenting stress and may be responsive to psychological intervention (Khoshkam & Honarparvaran, 2024; Shahrivar Sousehab et al., 2025). Training in cognitive emotion regulation strategies has also been associated with improvements in parenting stress and marital or family-related outcomes (Rouhi Dehkordi, 2021). Mindfulness-based stress reduction has been found to influence positive and negative cognitive emotion regulation strategies in mothers caring for children with chronic conditions, supporting the theoretical link between mindfulness practice and regulatory processes (Soltanizadeh & Tarafizadeh, 2021). More directly, mindful parenting training has been associated with improved emotional self-regulation alongside reduced parenting stress, suggesting that regulatory improvement may constitute an important pathway through which mindfulness affects parental functioning (Mehri et al., 2025).

The importance of emotion regulation is further supported by evidence showing that it may mediate or modify broader parenting processes. Longitudinal research has linked parental emotion regulation to children's mental health through pathways involving parenting stress and sensitive or challenging parenting behaviors (Iwanski, 2025). Other studies suggest that interpersonal emotion regulation tendencies may influence maternal access to social support and the quality of parenting-related adjustment, particularly among mothers with histories of adversity (Nakajima, 2025). In mothers of children with autism spectrum disorder, emotion regulation has been proposed as a mediating mechanism linking parenting style with parenting stress (Aslani & Abdollahi, 2026). Psychotherapeutic approaches directly targeting emotion regulation, including mentalization-based therapy, psychodrama, emotion-focused interventions, and emotional-cognitive resilience training, have also demonstrated potential benefits for parenting stress, cognitive flexibility, resilience, and regulatory functioning (Cesur-Atıntaş, 2026; Kheirkhah et al., 2025; Sarvi et al., 2026). Cognitive emotion regulation training has additionally been investigated in mothers of children with intellectual developmental disorder, with reported implications for both parenting stress and quality of life

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(Shojaei & Jafarnezhad, 2026). Collectively, these studies support the hypothesis that emotion regulation should be considered not only as an intervention target but also as a potential explanatory pathway in models of parenting stress and family well-being.

Quality of life represents another major outcome requiring attention. For parents of children with intellectual disabilities, quality of life extends beyond the absence of psychiatric symptoms and encompasses psychological well-being, physical health, social relationships, personal autonomy, financial conditions, participation in meaningful activities, and perceived balance between caregiving responsibilities and personal needs. Research examining mindfulness and psychological well-being in mothers of children attending exceptional schools has indicated meaningful associations between mindful functioning, well-being, and quality of life (Fasihi & Damghani Mirmahaleh, 2024). Intervention studies have likewise suggested that mindfulness and compassion-oriented therapies may improve quality of life in mothers of children with autism spectrum disorder and related conditions (Borji & Shokrollahi, 2024; Dabbagh & Haroun Rashidi, 2026). Nevertheless, quality of life has received less consistent attention as a primary outcome than parenting stress, and some studies use related constructs such as psychological well-being, resilience, self-efficacy, or general mental health. This inconsistency makes it difficult to determine whether improvements following psychological intervention represent changes in global quality of life or improvements in specific components of parental adjustment. Accordingly, systematic synthesis is required to distinguish direct evidence concerning parental quality of life from evidence concerning related but conceptually distinct outcomes.

The quality of the parent–child relationship is equally central to understanding the broader effects of psychological interventions. Parenting stress and emotion dysregulation can undermine emotional availability, reduce patience, intensify conflict, and increase harsh or reactive parenting behaviors. Conversely, mindful awareness and adaptive emotional regulation may facilitate emotional intimacy, attentive communication, acceptance, parental support, and more deliberate responses to child behavior. Research has shown that mindful parenting is related to maternal parenting stress and harsh parenting, suggesting that mindfulness may influence both parental internal states and observable interaction patterns (Sanders, 2026). Associations among children's emotion regulation, mindful parenting, parental stress, and coping have also been documented, highlighting reciprocal influences within family emotional systems (Moran, 2023). Importantly, a systematic review and meta-analysis of interventions directly targeting the parent–child relationship in families of children with intellectual disability found that such interventions can improve relational outcomes, emphasizing the clinical relevance of parent–child interaction as a distinct intervention target (Westlake et al., 2024). Thus, any evaluation of mindfulness and emotion regulation interventions should consider whether reductions in stress are accompanied by improvements in the relational quality of parenting rather than treating parental distress as the sole outcome of interest.

The current literature, however, remains fragmented across diagnostic groups, intervention types, and research designs. Studies have included parents of children with intellectual disability, autism spectrum disorder, attention-deficit/hyperactivity disorder, oppositional defiant disorder, learning disorders, epilepsy, and broader developmental disabilities. While this diversity expands the available evidence base, it also creates substantial heterogeneity in caregiving demands, child behavioral profiles, parental stress levels, and responsiveness to intervention. For example, resilience and psychological flexibility have been identified as mediators of the association between mindfulness and parenting stress among parents of autistic children, suggesting that mechanisms other than emotion regulation may also be important (Feng, 2025). Reviews of mindfulness- and acceptance-based interventions in parents of children with developmental disabilities similarly indicate that beneficial effects on parental mental well-being can occur through multiple therapeutic processes (Chua, 2022). Studies focusing specifically on parents of children with intellectual disability further underscore the importance of tailoring psychological interventions to the characteristics of this caregiving context rather than assuming that findings from other developmental conditions are directly transferable (Jacob, 2026; Kheirkhah et al., 2025). The clinical and conceptual heterogeneity of available studies therefore makes a structured synthesis particularly necessary.

Another challenge concerns the diversity of intervention approaches and measurement frameworks. Mindfulness-based cognitive therapy, mindfulness-based stress reduction, mindful parenting, compassion-based therapy, emotion-focused therapy, cognitive emotion regulation training, resilience training, mentalization-based therapy, psychodrama, acceptance and commitment-based interventions, and combined parent-management

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approaches may share some mechanisms but should not be treated as equivalent treatments. Similarly, general mindfulness, mindful parenting, emotion regulation capacity, emotion regulation difficulties, cognitive reappraisal, psychological flexibility, and resilience are related but nonidentical constructs. Recent studies have demonstrated meaningful effects of self-regulation programs, mindful parenting programs, and cognitive-emotional interventions on parenting stress in different parental populations (Ataei Rezvan & Lajvardi, 2024; Nazemi et al., 2024; Shahrivar Sousehab et al., 2025). At the same time, intervention outcomes may depend on cultural adaptation, delivery format, intensity, baseline stress, and the specific characteristics of the child and family. The effectiveness of brief digital programs (Lam et al., 2025), culturally adapted interventions (Cheung, 2025), and online mindful parenting programs (Phasuke, 2026) illustrates the growing diversity of intervention delivery methods and further emphasizes the need for careful comparative synthesis.

Finally, emerging evidence increasingly supports a multidimensional conceptual framework in which mindfulness and emotion regulation influence parenting stress, parent–child relationships, and parental quality of life through overlapping psychological and relational pathways. Mindfulness may promote present-moment awareness, nonjudgmental acceptance, reduced reactivity, and more compassionate parenting responses, whereas emotion regulation may facilitate emotional appraisal, cognitive reappraisal, impulse control, and tolerance of distress. These capacities may reduce the psychological burden of caregiving and support more adaptive parent–child interactions. At the same time, structural and contextual factors—including severity of disability, caregiving demands, social support, family resources, and child behavioral difficulties—may constrain or strengthen intervention effects. Research on mindful parenting, parental stress, family functioning, and intervention effectiveness increasingly supports this integrated perspective (Al Adawiyah, 2026; Fang, 2026; Janssen, 2026). Nevertheless, existing evidence remains dispersed across individual studies and reviews, and a comprehensive synthesis focused specifically on mothers of children with intellectual disabilities is needed to determine which intervention components and psychological mechanisms show the strongest and most consistent relationships with parenting stress, quality of life, and the parent–child relationship.

Therefore, the present study aimed to systematically review the evidence on the effectiveness of mindfulness- and emotion regulation-based psychological interventions on parenting stress, quality of life, and the parent–child relationship among mothers of children with intellectual disabilities.

2. Methods and Materials

2.1. Study Design and Participants

The research method adopted to examine the effectiveness of mindfulness- and emotion regulation-based psychological interventions on parenting stress, quality of life, and the parent–child relationship among mothers of children with intellectual disabilities was a mixed qualitative approach employing a seven-year PRISMA-based systematic review of the evidence.

PRISMA refers to a set of guidelines designed to facilitate transparent and systematic reporting of the process of reviewing scientific literature and conducting meta-analyses. In a systematic review of evidence, the PRISMA framework can be used to document the stages of searching, screening, eligibility assessment, and final selection of evidence. The stages of the PRISMA-based systematic review of evidence were as follows:

1. Formulation of the research question and development of the review protocol;
2. Identification of studies;
3. Removal of duplicate records;
4. Screening of titles and abstracts;
5. Full-text assessment of studies;
6. Assessment of methodological quality and risk of bias;
7. Data extraction and organization;
8. Synthesis and analysis of the evidence;
9. Development of the theoretical model flow diagram; and
10. Final reporting of the systematic review of evidence.

The study-screening process was conducted as follows:

- **Step 1: Identification:** Retrieval of records from Persian- and English-language databases.
- **Step 2: Duplicate removal:** Integration of retrieved records and identification of duplicate versions.
- **Step 3: Title and abstract screening:** Exclusion of irrelevant studies with documentation of the reasons for exclusion.

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- **Step 4: Full-text assessment:** Examination of inclusion and exclusion criteria and assessment of information quality.
- **Step 5: Inclusion of eligible studies:** Data extraction, quality assessment, and synthesis of the evidence.

The number of records at each stage and the reasons for excluding full-text articles were extracted from the actual search report. At this stage, the final number of included studies had not yet been definitively established. This study constituted a systematic review of quantitative, qualitative, and intervention studies related to mindfulness, emotion regulation, parenting stress, quality of life, and the parent–child relationship among mothers of children with intellectual disabilities. The PRISMA 2020 framework was applied to ensure transparent reporting of study identification, screening, eligibility assessment, and inclusion. Because the literature in this field includes correlational studies, randomized controlled trials, quasi-experimental studies, and previous reviews, the research design of each study was recorded during data extraction. Previous systematic reviews were used to identify relevant sources and compare findings; however, when synthesizing primary studies, data from the same original study were not counted more than once.

3. Findings and Results

In this section, a seven-year PRISMA-based systematic review of the evidence was conducted using Persian-language studies published from 2020 to 2026 and English-language studies published from 2020 to 2026 in order to identify research similar to the present study, entitled “Effectiveness of Mindfulness- and Emotion Regulation-Based Psychological Interventions on Parenting Stress, Quality of Life, and the Parent–Child Relationship in Mothers of Children with Intellectual Disabilities.” The proposed databases for the English-language search were ScienceDirect, Scopus, Web of Science, and SpringerLink. Persian-language studies were searched in SID, Magiran, Noormags, Irandoc, and Civilica. The time interval extended from January 1, 2020, to the final search date in 2026. Because 2026 was not yet complete, evidence from that year included only studies published or available up to the final search date. An example of the English-language search strategy was as follows:

("mindfulness" OR "dispositional mindfulness" OR "mindful parenting" OR "mindfulness-based intervention")

AND

("emotion regulation" OR "emotion regulation difficulties" OR "emotion dysregulation" OR "emotion regulation strategies")

AND

("parenting stress" OR "parental stress" OR "parental distress")

AND

("parenting quality of life" OR "parental quality of life" OR "mother quality of life")

AND

("children with intellectual disabilities" OR "children with mental disabilities")

AND

("parenting stress" OR "parental stress" OR "parental distress")

This search string covered the initial search for the principal constructs. To avoid excluding studies that examined only two constructs, supplementary searches were also conducted. In the Persian-language search, combinations equivalent to “mindfulness and parenting stress,” “emotion regulation and parental stress,” “mindful parenting,” “parents’ cognitive emotion regulation,” “mindfulness and quality of life,” “emotion regulation and quality of life,” and “children with intellectual disabilities” were used. The inclusion and exclusion criteria for studies addressing mindfulness, emotion regulation, parenting stress, quality of life, and the parent–child relationship among mothers of children with intellectual disabilities were as follows.

Table 1

Inclusion and Exclusion Criteria for the Studies

Criteria	Publication Period	Topic	Population	Document Type	Language	Duplicate Status
Inclusion criteria	2020–2026, up to the final search date	Examination of at least three of the principal relationships among the six constructs or an intervention related to them	Parents, mothers, fathers, or caregivers performing a parental role	Peer-reviewed research articles and other studies eligible according to the review protocol	Persian or English	Valid and complete version of each study

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Exclusion criteria	Publication outside the specified period	No clear relationship with the study variables	Studies focusing exclusively on children or non-parent adults without parenting-related data	Editorials, non-research notes, and reports lacking sufficient data	Languages other than Persian or English	Duplicate records of the same article

An important consideration is that restricting the review to studies examining several variables simultaneously may exclude a substantial portion of the relevant evidence. Therefore, studies directly addressing each of the two principal relationships were also included in the assessment stage, after which their findings were classified according to their relevance to the research questions.

Of the 472 articles identified through database searches, application of two- and three-variable filters based on the terms “mindfulness and parenting stress,” “emotion regulation and parental stress,” “mindful parenting,” “parents’ cognitive emotion regulation,” “mindfulness and quality of life,” “emotion regulation and quality of life,” and “children with intellectual disabilities” reduced the number of articles to 211. Application of the seven-year time filter covering 2020–2026 reduced the number to 84. Finally, after applying the case-specific filter concerning children with intellectual disabilities, 42 highly relevant and valid articles remained. The list of these studies is provided at the end of the article.

For each article, the following information was recorded:

- Bibliographic characteristics and country in which the study was conducted;
- Study objective, research design, population, sample size, and characteristics of parents and children;
- Instruments used to assess mindfulness, emotion regulation, parenting stress, quality of life, and the parent–child relationship among mothers of children with intellectual disabilities;
- Dimensions and criteria associated with each construct;
- Correlation coefficients, effect sizes, confidence intervals, significance levels, and results of mediation or moderation analyses, when reported;
- Intervention duration, type of control group, and follow-up outcomes in intervention studies; and
- Limitations, risk of bias, and overall quality of evidence.

Appropriate design-specific assessment tools were to be used for randomized controlled trials, nonrandomized intervention studies, and observational studies. The methodological quality of previous systematic reviews also needed to be assessed separately.

The findings were primarily synthesized using narrative and thematic synthesis. Meta-analysis was considered defensible only when the included studies were sufficiently comparable in terms of constructs, measurement instruments, populations, research designs, and outcomes. Otherwise, statistical pooling could generate misleading results.

In this section, studies were ranked according to their degree of relevance to the subject of the article. Studies examining multiple constructs were distinguished from those investigating only one of the proposed relationships. This distinction was necessary to prevent overgeneralization of the findings.

The available evidence supports a potential association of mindfulness and emotion regulation with parenting stress; however, the strength of these relationships is not consistent across all studies. The findings depend on the type of intervention, characteristics of the child, measurement instruments, duration of follow-up, and research design. Moreover, studies that simultaneously examine mindfulness and emotion regulation in relation to parenting stress are particularly important for answering the central research question of this review.

Based on the constructs under investigation, the following preliminary model was developed to guide evidence synthesis. This model represents a proposed conceptual framework and should not be interpreted as the final validated model of the systematic review prior to completion of study extraction and assessment. The following criteria constitute the preliminary data-extraction framework. Inclusion of each criterion in the final table must be confirmed by the instruments and findings of the selected studies.

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Table 2

Dimensions and Criteria Extracted from the Reviewed Studies

Main Variables	Emotion Regulation	Quality of Life	Parent–Child Relationship
Extracted criteria	Emotional appraisal and awareness: identification of emotions, awareness of triggers, and recognition of emotional responses. Cognitive reappraisal: reinterpretation of difficult situations and modification of interpretations of the child's behavior. Emotional acceptance: tolerance of unpleasant emotions and acceptance of feelings without immediate reaction. Impulse control: anger regulation, reduction of impulsive responses, and maintenance of goal-directed behavior.	Difficulties and rewards of parenting; psychological and practical costs of caregiving; sacrificing personal needs in the course of caring for the child; parents' social relationships.	Parent–child emotional intimacy; parent–child communication and dialogue; parental acceptance and support; parent–child conflict.
Sources	(Kheirkhah et al., 2025); (Shojaei & Jafarnezhad, 2026); (Khoshkam et al., 2024); (Rouhi, 2021); (Soltanizadeh & Tarfizadeh, 2021); (Sarvi et al., 2026); (Al Adawiyah et al., 2026); (Moran et al., 2023); (Uygun et al., 2024); (Mehri et al., 2025); (Nakajima, 2025); (Priego & Rusu, 2023)	(Fasihi et al., 2024); (Shojaei & Jafarnezhad, 2026); (Barratt et al., 2025); (Chua et al., 2022); (Dabbagh et al., 2026); (Westlake et al., 2024); (Iwanski et al., 2025); (Nakajima, 2025)	(Westlake et al., 2024); (Fang et al., 2026); (Dabbagh et al., 2026); (Borji et al., 2024)

Main Variables	Mindfulness	Parenting Stress	Children with Intellectual Disabilities
Extracted criteria	Present-moment attention: attention to current experience, awareness of thoughts and feelings, and attention to the child's needs. Acceptance and nonjudgment: acceptance of unpleasant experiences, reduction of self-blame, and avoidance of immediate judgment. Reduced reactivity: pausing before reacting, decreasing impulsive responses, and responding thoughtfully to the child's behavior. Mindful awareness in parenting: mindful listening, present-centered awareness during interaction, and attention to the emotions of both parent and child. Compassion and parenting attitude: self-kindness, empathy toward the child, and acceptance of the difficulties associated with the parenting role.	Parental distress: psychological strain, fatigue, feelings of helplessness, and difficulty coping with the parenting role. Parent–child interaction: conflict, reduced satisfaction with interaction, and difficulty responding to the child's needs. Child characteristics: behavioral difficulties, special needs, and level of caregiving demands. Resources and support: social support, coping resources, and access to assistance.	Mild intellectual disability; moderate intellectual disability; severe intellectual disability; profound intellectual disability.
Sources	(Fasihi et al., 2024); (Shahrivar et al., 2025); (Soltanizadeh & Tarfizadeh, 2021); (Sanders et al., 2026); (Shorey et al., 2021); (Moran et al., 2023); (Phasuke et al., 2026); (Yang et al., 2026)	(Nazemi et al., 2024); (Kowsari et al., 2024); (Rouhi, 2021); (Sarvi et al., 2026); (Tumtham et al., 2020); (Janssen et al., 2026); (Lam et al., 2025); (Neece et al., 2023); (Cheung et al., 2025); (Mehri et al., 2025); (Cesur et al., 2026)	(Kheirkhah et al., 2025); (Nazemi et al., 2024); (Shahrivar et al., 2025); (Varaei et al., 2020); (Barratt et al., 2025); (Phasuke et al., 2026); (Feng et al., 2025); (Schalock et al., 2021); (Jacob et al., 2026); (Masefield et al., 2020); (Aslani & Abdollahi, 2026); (Ataei et al., 2024); (Salmanvandzadeh et al., 2023); (Sobhani & Besharpour, 2022)

General mindfulness and mindfulness in parenting should be coded separately. For example, instruments such as the Mindful Attention Awareness Scale (MAAS) generally assess everyday awareness and attention, whereas parenting-specific interpersonal mindfulness scales focus on the quality of mindful presence within parent–child interactions.

The dimensions of emotion regulation do not necessarily constitute subscales of a single measurement instrument. Some studies employ models of difficulties in emotion regulation, whereas others assess cognitive emotion regulation strategies or specific processes such as cognitive reappraisal and expressive suppression. Therefore, final data extraction should distinguish among "emotion regulation capacity," "difficulties in emotion regulation," and "use of a specific emotion regulation strategy."

The categorization of parenting stress criteria represents a preliminary extraction map rather than a single structure replicated across all measurement instruments. For example, the Parenting Stress Index (PSI) and its Short Form (PSI-SF) have their own specific factor structures. Therefore, the dimensions specific to one instrument should not automatically be regarded as completely equivalent to those of another instrument without appropriate conceptual and psychometric comparison.

In addition to these criteria, resilience, psychological flexibility, social support, child behavioral problems, and special caregiving needs may be examined as contextual or potential moderating variables, provided that the theoretical and statistical evidence from the selected studies supports such classification.

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The available evidence supports improvements in certain aspects of parental mental health and well-being following psychological interventions; however, direct and specific evidence regarding quality of life as an independent outcome is more limited. A 2025 systematic qualitative review involving 17 studies identified three principal themes in the experiences of parents of children with intellectual disabilities: the difficulties and rewards of parenting, the psychological and practical costs of caregiving, and the sacrifice of personal needs in the course of caring for the child. These findings underscore the importance of addressing mental health, social support, and opportunities for respite and self-care within intervention programs. Nevertheless, this review alone does not establish the causal effectiveness of mindfulness or emotion regulation interventions in improving quality of life.

A 2026 meta-analysis reported improvement in the parent–child relationship following mindfulness-based interventions; the standardized effect size was reported to be approximately [value not provided in the source text], which, in the direction reported by the researchers, represented a small-to-moderate effect. In addition, the systematic review and meta-analysis conducted by Westlake et al. (2024), which examined 27 articles involving 1,325 participants, showed that interventions directly targeting the quality of the parent–child relationship were associated with significant improvements in this relationship. Because not all interventions included in the latter review necessarily involved mindfulness or emotion regulation, its findings primarily support the importance of relationship-focused interventions rather than demonstrating the exclusive effectiveness of any single intervention approach.

The discussion and interpretation of the findings are presented below.

Mindfulness and parenting stress: Findings from previous reviews and intervention studies indicate that mindful parenting programs may be associated with reduced parenting stress under certain conditions. However, divergent findings reported in the meta-analysis by Shorey et al. and in some more recent studies indicate that equivalent effectiveness cannot be assumed across all intervention programs. One possible explanation is that mindfulness may alter how parents appraise difficult situations and how they respond to their child's behavior without immediately eliminating external sources of stress, such as caregiving burden, insufficient support, or child behavioral problems. This explanation should be verified in the final discussion section using direct evidence from the included studies.

Emotion regulation and parenting stress: Parents who experience difficulty identifying emotions, controlling impulses, or selecting adaptive emotion regulation strategies may experience greater psychological tension when confronted with challenging child behaviors. Conversely, cognitive reappraisal and deliberate responding may prevent escalation of conflict during parent–child interactions. Studies examining emotional self-regulation and parenting stress, including the research by Barratt et al., provide a basis for investigating this relationship. However, correlation must be distinguished from causality. In a cross-sectional study, it is unclear whether emotion regulation difficulties produce greater stress or whether high levels of stress undermine the capacity for emotion regulation. Longitudinal and intervention studies are more appropriate for determining the direction of these relationships.

The mediating role of emotion regulation: One of the central questions of this review is whether emotion regulation explains part of the mechanism underlying the association between mindfulness and parenting stress. To answer this question, it is insufficient merely to observe a significant relationship between mindfulness and emotion regulation and another significant relationship between emotion regulation and parenting stress. Studies must directly test the indirect effect. Furthermore, the relationship may be explained through other variables, including psychological flexibility, resilience, or the quality of parent–child interaction. The findings of Feng et al. (2025) highlight the importance of investigating alternative mediating mechanisms.

Studies involving parents of children with autism spectrum disorder, developmental disabilities, behavioral problems, or special caregiving needs should not be combined indiscriminately with studies involving parents of typically developing children without separate analysis. The nature of the child's needs, intensity of caregiving demands, and availability of family support resources may influence both baseline stress levels and responsiveness to intervention. Reviews focusing on families of children with autism spectrum disorder and studies of mindful parenting demonstrate the importance of considering these differences.

Based on the preliminary evidence, several gaps require closer examination in the final systematic review:

Limited number of simultaneous multivariable studies: Some studies have investigated mindfulness and parenting stress or emotion regulation and stress separately.

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Consequently, direct evidence supporting the proposed multivariable model may be relatively limited.

Heterogeneity of measurement instruments: The use of different scales for mindfulness, emotion regulation difficulties, and parenting stress complicates direct comparison of findings across studies.

Limitations of cross-sectional studies: In cross-sectional correlational studies, neither the direction of the relationship nor causality can be established conclusively.

Differences in intervention type: General mindfulness programs, mindful parenting interventions, mindfulness-based cognitive therapy, and combined programs incorporating emotion regulation training are not equivalent interventions.

Limited long-term follow-up: Follow-up assessments are essential for determining whether intervention effects are maintained over time.

Cultural and familial differences: Evidence obtained from one population is not necessarily generalizable to another, particularly when family structure, social support, and cultural expectations regarding parental roles differ.

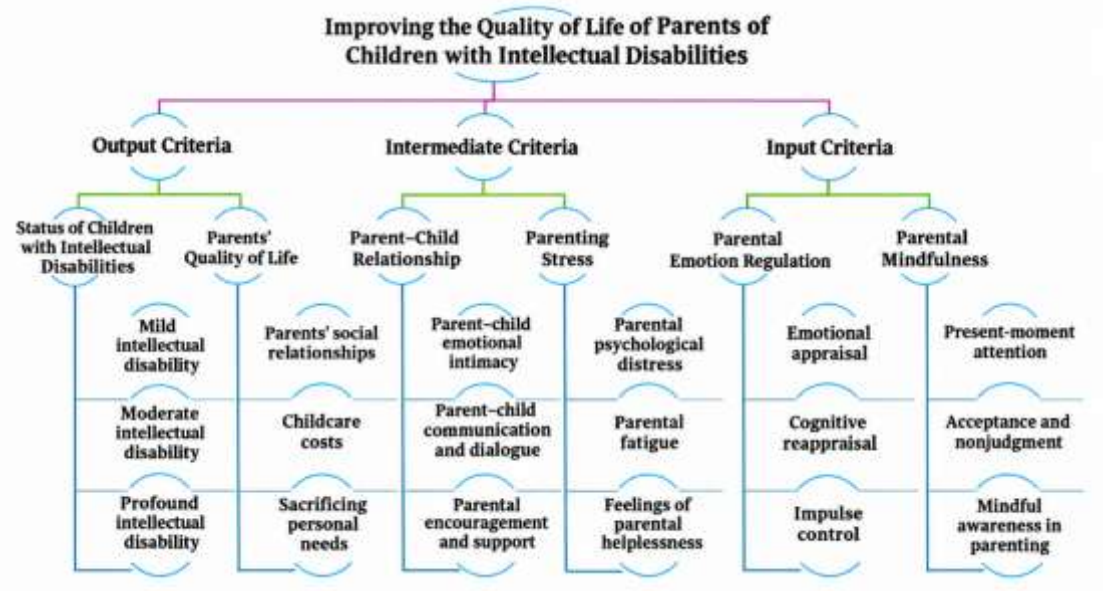
Need to distinguish between outcomes: Parenting stress, general stress, parental anxiety, and parental burnout are related but distinct constructs and should not be used interchangeably in the final analysis.

At present, these issues represent potential gaps identified on the basis of preliminary evidence. Their interpretation as definitive findings of the review requires completion of the systematic search and screening process.

Mindfulness and emotion regulation are two important constructs for examining individual differences in the experience of parenting stress. Preliminary evidence suggests that mindfulness-based interventions have been associated with reductions in parenting stress in some populations, although findings have not been consistent across all studies. Emotion regulation may also represent one of the mechanisms explaining this association; however, its mediating role should be evaluated on the basis of direct evidence and statistical mediation analyses reported in the selected studies. The added value of the present review lies in distinguishing general mindfulness from mindful parenting, differentiating adaptive from maladaptive emotion regulation strategies, and categorizing parenting stress according to the actual instruments and dimensions used for measurement. Integration of this information can provide a foundation for developing a more precise conceptual model, selecting valid measurement instruments, and designing interventions tailored to the needs of families.

Figure 1

Final Theoretical Model of the Study



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4. Discussion

The present systematic review synthesized evidence on the effectiveness of mindfulness- and emotion regulation-based psychological interventions in relation to parenting stress, parental quality of life, and the parent–child relationship among mothers of children with intellectual disabilities. Overall, the findings suggest that mindfulness and emotion regulation represent two closely related but conceptually distinct psychological processes that may contribute to improved parental adjustment. Across the reviewed evidence, mindfulness was consistently associated with present-moment attention, acceptance and nonjudgment, reduced reactivity, and greater mindful awareness during parenting, whereas emotion regulation was most frequently represented through emotional awareness, cognitive reappraisal, acceptance of emotional experiences, and impulse control. Parenting stress emerged as a multidimensional outcome involving parental psychological distress, fatigue, helplessness, strained parent–child interaction, caregiving demands, and limited coping resources. Quality of life was reflected in social functioning, caregiving burden, practical and psychological costs, and the extent to which parents were forced to sacrifice their own needs. The parent–child relationship was characterized mainly by emotional intimacy, communication, parental support, and conflict. These findings support a multidimensional conceptual model in which psychological interventions may influence parental functioning not only through direct reductions in stress, but also through improvements in emotional self-regulation, relational quality, and broader psychosocial adjustment.

One of the clearest findings of the review was that mindfulness-based interventions have the potential to reduce parenting stress, although their effectiveness is not uniform across all populations and intervention formats. This pattern is consistent with prior systematic and meta-analytic evidence showing that mindful parenting and related mindfulness-based approaches can reduce parental stress and improve parental well-being, while also demonstrating substantial between-study heterogeneity (Shorey & Ng, 2021; Yang et al., 2026). Similar benefits have been observed in families of children with attention-deficit/hyperactivity disorder, autism spectrum disorder, and other developmental conditions (Phasuke, 2026; Tumtham Marong, 2020; Varaei et al., 2020). The present review therefore supports the interpretation that mindfulness may be useful not because it directly removes objective caregiving demands, but because it modifies how those demands are perceived, appraised, and responded to. Parents who are more capable of remaining attentive to the present moment, observing difficult emotions without immediate judgment, and pausing before reacting may be better able to prevent escalation of stress during challenging interactions with their children. This interpretation is also consistent with findings indicating that mindful parenting is associated with lower maternal stress and less harsh parenting behavior (Sanders, 2026) and that mindful parenting may alter the association between parent–child conflict and parental stress in daily life (Fang, 2026).

The review also indicated that mindfulness should not be treated as a unitary construct. General dispositional mindfulness and parenting-specific mindfulness appear to represent overlapping but distinguishable psychological processes. This distinction is important because a mother may exhibit relatively high everyday mindfulness but still experience difficulty maintaining nonjudgmental attention during emotionally demanding interactions with a child who has substantial caregiving needs. The relational nature of mindful parenting has been emphasized in recent systematic work showing that mindfulness in parenting involves a reciprocal process combining attentional control, emotion regulation, empathy, and responsiveness within parent–child interactions (Al Adawiyah, 2026). Likewise, mindfulness in marriage and mindfulness in parenting have been shown to mediate associations between dispositional mindfulness and children's emotion regulation, suggesting that the effects of mindfulness may unfold through multiple relational contexts within the family (Uygun & Erus, 2024). The current findings therefore justify separate coding of dispositional mindfulness and mindful parenting in future systematic reviews and intervention studies.

Emotion regulation was another central construct in the reviewed evidence and appears to be particularly important for understanding individual differences in parenting stress. Mothers who have difficulty identifying emotions, tolerating distress, controlling impulses, or reappraising stressful situations may experience greater emotional overload when confronted with persistent caregiving demands. In contrast, adaptive strategies such as cognitive reappraisal, emotional awareness, acceptance, and deliberate behavioral control may reduce the likelihood that distress develops into reactive or conflictual parenting. The present findings are consistent with studies showing that cognitive emotion regulation training can reduce parenting stress and improve family-

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related outcomes (Rouhi Dehkordi, 2021), that emotion regulation and distress tolerance predict parenting stress in parents of children with intellectual disability (Sobhani & Basharpoor, 2022), and that self-regulation-oriented interventions can reduce parenting stress among mothers of children with behavioral and developmental difficulties (Nazemi et al., 2024). Similar results have been observed following mentalization-based, resilience-oriented, and other emotion-focused interventions (Cesur-Atıntaş, 2026; Kheirkhah et al., 2025; Shahrivar Sousehab et al., 2025). These converging findings support the conclusion that emotion regulation is not simply a secondary outcome but may constitute a core intervention target.

The evidence further suggests that emotion regulation may function as one pathway through which mindfulness affects parenting stress. Mindfulness can increase awareness of internal emotional states and reduce automatic reactivity, thereby creating greater opportunity for adaptive reappraisal and impulse control. This theoretical interpretation is consistent with intervention findings showing simultaneous improvements in mindful parenting, emotional self-regulation, and parenting stress (Mehri et al., 2025). It is also supported by research linking parental emotion regulation to children's mental health through pathways involving parenting stress and sensitive parenting behaviors (Iwanski, 2025). However, the current review also indicates that mediation should not be assumed merely because mindfulness, emotion regulation, and parenting stress are statistically associated. Direct tests of indirect effects are required to establish mediation. Indeed, other psychological factors such as resilience and psychological flexibility may also explain the relationship between mindfulness and parenting stress, as demonstrated in parents of autistic children (Feng, 2025). Thus, the present findings favor a multidimensional mediation model rather than a single-mechanism explanation.

The reviewed evidence also suggests that improvements in parenting stress may contribute to better parent–child relationships. Parenting stress can reduce emotional availability, patience, and sensitivity, thereby increasing conflict and limiting constructive communication. Conversely, greater mindful awareness and emotion regulation may allow parents to respond more calmly, listen more attentively, and maintain emotional closeness during difficult interactions. This interpretation is supported by evidence linking mindful parenting with reduced harsh parenting (Sanders, 2026) and by research showing interrelationships among parent stress, parent coping, mindful parenting, and children's emotion regulation (Moran, 2023). Particularly important is the systematic review and meta-analysis demonstrating that interventions directly targeting the parent–child relationship in families of children with intellectual disability can significantly improve relational outcomes (Westlake et al., 2024). These findings indicate that the parent–child relationship should be considered an independent outcome rather than merely a by-product of stress reduction. They also suggest that psychological interventions may be most effective when they include explicit relational components in addition to intrapersonal skills such as mindfulness and emotion regulation.

Parental quality of life emerged as another important but less consistently examined outcome. The results suggest that quality of life among mothers of children with intellectual disabilities is influenced by the psychological and practical burden of caregiving, social relationships, financial demands, and the extent to which personal needs are neglected. These findings closely align with the systematic qualitative synthesis by Barratt, which showed that parents of children with intellectual disability experience parenting as a combination of burden and reward and frequently report psychological strain, practical caregiving costs, and the sacrifice of personal needs (Barratt, 2025). The present review also identified evidence that mindfulness and psychological well-being are associated with quality of life among mothers of children with special educational needs (Fasihi & Damghani Mirmahaleh, 2024) and that mindfulness- or compassion-based interventions may improve quality of life among mothers of children with autism spectrum disorder (Borji & Shokrollahi, 2024; Dabbagh & Haroun Rashidi, 2026). Cognitive emotion regulation interventions have likewise been associated with better quality of life among mothers of children with intellectual developmental disorder (Shojaei & Jafarnezhad, 2026). Nevertheless, the overall evidence remains less developed for quality of life than for parenting stress, suggesting that future interventions should assess quality of life as a distinct outcome rather than infer it from reductions in psychological distress.

The findings also emphasize the importance of distinguishing between diagnostic and caregiving contexts. The reviewed literature includes parents of children with intellectual disability, autism spectrum disorder, attention-deficit/hyperactivity disorder, oppositional defiant disorder, epilepsy, learning disorders, and broader developmental disabilities. Although these populations share certain

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challenges, the intensity and nature of caregiving demands differ substantially. Parents of children with intellectual disabilities may encounter enduring limitations in adaptive functioning, communication, autonomy, and educational participation, which can shape both baseline stress and responsiveness to intervention. Evidence showing adverse health effects among caregivers of young children with developmental disabilities supports the broader significance of these caregiving demands (Masefield, 2020). Similarly, systematic review evidence indicates that psychological interventions can improve mental health outcomes among caregivers of children with intellectual disability, but the magnitude and nature of effects vary across intervention types and study populations (Jacob, 2026). The current results therefore support subgroup analysis rather than indiscriminate pooling across all developmental conditions.

Another important finding concerns heterogeneity in intervention characteristics. Mindfulness-based cognitive therapy, mindful parenting, mindfulness-based stress reduction, acceptance-based approaches, compassion-focused programs, resilience training, cognitive emotion regulation training, psychodrama, mentalization-based therapy, and combined parent-management interventions do not represent identical treatment models. The evidence suggests that each may influence parental outcomes through partially overlapping mechanisms. For instance, mindful parenting and acceptance-based approaches appear to improve parental awareness and reduce reactivity (Cheung, 2025; Kowsari et al., 2023), whereas resilience and emotion-focused interventions may act more directly on coping capacity and emotional processing (Kheirkhah et al., 2025; Sarvi et al., 2026). Brief technology-assisted programs may also reduce parental stress while increasing accessibility and reducing logistical burden (Lam et al., 2025). These findings indicate that the active ingredients of successful interventions remain insufficiently isolated and that intervention labels alone should not be treated as evidence of equivalent mechanisms.

The systematic review also highlights the relevance of contextual and interpersonal factors. Social support, family functioning, child behavioral difficulties, caregiver resources, and previous adverse experiences may influence both parental stress and the effectiveness of intervention. For example, interpersonal emotion regulation tendencies have been associated with social support in parenting among mothers with histories of childhood maltreatment (Nakajima, 2025), while emotion regulation and family functioning have been shown to differ between families of children with disabilities and normative families (Priego-Ojeda & Rusu, 2023). Similarly, research examining maternal emotion regulation in relation to parenting style and stress suggests that parental regulatory functioning may interact with broader parenting patterns (Aslani & Abdollahi, 2026). These findings support the inclusion of contextual moderators in future conceptual models and suggest that intervention effects should not be interpreted independently of family and social environments.

A further implication of the present review is that psychological outcomes should be clearly differentiated. Parenting stress, general stress, anxiety, depressive symptoms, parental burnout, emotional exhaustion, and caregiver burden are related but non-equivalent constructs. Likewise, resilience, psychological flexibility, self-efficacy, and quality of life should not be treated interchangeably. The diversity of measurement instruments across studies contributes to conceptual overlap and may partly explain inconsistent findings. For example, studies of mindful parenting have assessed parenting stress using different scales and subscales, while emotion regulation has been operationalized as cognitive reappraisal, difficulties in emotion regulation, emotional self-regulation, or cognitive emotion regulation strategies. Recent research on the five domains of mindful parenting further demonstrates that different components of mindfulness may show different associations with parenting stress (Janssen, 2026). Accordingly, the present review supports a construct-specific approach to evidence synthesis in which outcomes and mechanisms are classified according to their actual conceptual and psychometric definitions.

Overall, the evidence reviewed in this study supports an integrated framework in which mindfulness and emotion regulation influence parenting stress directly and indirectly, while also contributing to parent–child relationship quality and parental quality of life. Mindfulness may facilitate present-moment awareness, acceptance, nonjudgment, compassion, and reduced reactivity, whereas emotion regulation may enhance emotional awareness, reappraisal, acceptance, and impulse control. These processes may reduce subjective distress and improve relational functioning, but their effects are conditioned by the severity of caregiving demands, the child's behavioral characteristics, social support, intervention design, and cultural context. The findings are therefore broadly consistent with existing evidence demonstrating the effectiveness of mindfulness-based interventions for parents of children with intellectual or developmental disabilities

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(Yang et al., 2026), while also showing that psychological interventions more broadly can improve caregiver mental health (Jacob, 2026). At the same time, the evidence does not justify assuming that all mindfulness- or emotion regulation-based interventions are equally effective. Rather, intervention effects appear to depend on the specific mechanisms targeted, the population studied, and the outcomes assessed.

5. Limitations

This systematic review has several limitations. First, the included studies were heterogeneous in terms of population, intervention format, measurement instruments, research design, sample size, and follow-up duration, which limits direct comparability across findings. Second, some of the available evidence was derived from parents of children with developmental and behavioral conditions other than intellectual disability, and such evidence may not be fully generalizable to mothers of children with intellectual disabilities. Third, several studies were cross-sectional or quasi-experimental, limiting strong causal inference. Fourth, the diversity of measures used for mindfulness, emotion regulation, parenting stress, quality of life, and parent–child relationships created conceptual and psychometric heterogeneity. Fifth, quality of life and parent–child relationship outcomes were examined less frequently than parenting stress, resulting in an uneven evidence base. Finally, the inclusion of Persian- and English-language studies may have excluded potentially relevant evidence published in other languages.

6. Suggestions for Future Research

Future research should prioritize well-designed randomized controlled trials specifically involving mothers and fathers of children with intellectual disabilities and should include sufficiently large samples, clearly defined intervention protocols, active control conditions, and long-term follow-up assessments. Researchers should directly compare general mindfulness interventions, mindful parenting programs, and emotion regulation-focused interventions in order to determine their distinct and shared mechanisms of action. Future studies should also test mediation and moderation models involving emotion regulation, psychological flexibility, resilience, social support, child behavioral characteristics, and severity of intellectual disability. Greater consistency in measurement is recommended, particularly through the use of validated and theoretically aligned instruments for parenting stress, mindful parenting, emotion regulation, quality of life, and parent–child relationships. Future systematic reviews should also conduct subgroup analyses according to disability severity, intervention format, cultural context, parent gender, and duration of treatment.

7. Suggestions for Practice

In clinical and family-support settings, psychological interventions for parents of children with intellectual disabilities should incorporate both mindfulness and emotion regulation components rather than focusing solely on general stress reduction. Programs should teach parents present-moment attention, nonjudgmental acceptance, cognitive reappraisal, emotional awareness, impulse control, and strategies for responding deliberately rather than reactively during difficult parent–child interactions. Intervention planning should also address practical caregiving burdens, social support, opportunities for respite, and the preservation of parents' personal and social needs. Because families differ considerably in caregiving demands and available resources, interventions should be individualized according to the severity of the child's disability, behavioral difficulties, parental stress level, and family support system. Whenever possible, programs should also include relational exercises aimed at strengthening emotional intimacy, communication, parental support, and constructive conflict management within the parent–child relationship.

Authors' Contributions

Authors equally contributed to this article.

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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