


The Effectiveness of Self-Compassion Therapy on Reducing Parenting Stress and Improving Parent-Child Relationship Quality

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ABSTRACT

Objective: The aim of this study was to investigate the effectiveness of self-compassion therapy in reducing parenting stress and improving the quality of parent-child relationships.

Methods and Materials: This research was conducted using a quasi-experimental design with a pretest-posttest control group. The study population included mothers who were experiencing parenting stress and difficulties in their relationships with their children. A total of 30 parents were randomly assigned to either the experimental or control group. The research instruments included the Parenting Stress Index-Short Form (PSI-SF) and the Parent-Child Relationship Quality Questionnaire (PCRQ). The experimental group underwent 8 sessions of self-compassion therapy. Data were analyzed using analysis of covariance (ANCOVA).

Findings: The results showed that self-compassion therapy significantly reduced parenting stress and improved the quality of parent-child relationships in the experimental group compared to the control group ($p < 0.05$). Parents who practiced this approach demonstrated greater ability to manage parenting stress and improve their interactions with their children.

Conclusion: Overall, this study demonstrated that self-compassion therapy can be used as an effective intervention for reducing parental stress and improving the quality of relationships with children.

Keywords: Parenting stress, parent-child relationship, self-compassion, self-compassion therapy, relationship quality.

T¹. Introduction

he topic of parenting stress and the quality of parent-child relationships is one of the critical issues in psychology and child-rearing. Parents, as the primary caregivers and nurturers of children, bear a significant responsibility in raising and guiding their children. This responsibility may lead to stress due to various factors such as social, economic, and emotional pressures. On the other hand, the quality of the parent-child relationship is a key element in shaping children's personalities and their psychological and social development. Positive and healthy interactions between parents and children can facilitate the improvement of children's behaviors and social relationships. Given these points, finding effective strategies to reduce parental stress and improve the quality of relationships with children is essential. One emerging approach in psychotherapy that has garnered significant attention in recent years is self-compassion therapy. This approach, recognized as a subset of positive psychology, emphasizes self-acceptance and kindness, helping reduce negative emotions and stress. In self-compassion therapy, individuals learn to treat themselves as a kind friend, supporting themselves when faced with life's challenges and adversities instead of being self-critical or feeling guilty. This approach can be particularly beneficial for parents facing parenting stress, as they often criticize themselves and feel guilty for not fulfilling their parental duties adequately (Jones & Prinz, 2018).

Parenting stress is widely recognized as a common issue among parents, which can have many negative effects on parental mental health and the quality of parent-child relationships (Aprianti et al., 2024; Atar et al., 2024). Research has shown that parents who experience parenting stress often have less ability to respond positively and effectively to their children. In other words, high levels of stress can reduce parents' ability to listen, empathize, and respond to their children's emotional and behavioral needs. This issue can create a negative cycle in which parental stress increases children's challenging behaviors, and these behaviors, in turn, exacerbate parental stress (Smith et al., 2020). On the other hand, research has demonstrated that reducing parenting stress can help improve parent-child relationships. Parents who can manage their stress are more likely to engage in positive interactions with their children, which can lead to better behaviors, increased self-confidence, and strengthened social relationships in children (Jones & Prinz, 2018).

Self-compassion is recognized as one of the main components of positive psychology approaches. This

concept emphasizes self-acceptance, kindness, and a deep understanding of oneself, helping individuals focus on their strengths rather than their shortcomings and failures, particularly in the face of challenges (Karami, 2024; Neff & Germer, 2019; Vatanpanah et al., 2023). This approach is particularly effective in reducing various life stresses, as it helps individuals focus on self-compassion and kindness, thus lessening the negative impacts of stress. Instead of feeling guilty or self-critical, individuals seek effective solutions to problems. In the context of parenting, self-compassion therapy can play a crucial role. Parents who are kind to themselves are less likely to blame themselves for the problems and challenges of parenting and are more likely to look for solutions to improve the situation. These parents tend to interact with their children in a more kind and empathetic manner, which can help improve the quality of parent-child relationships (Sirois et al., 2021).

Parent-child relationships are a key element in shaping children's personalities and social development (Cerniglia, 2024; Ferreira et al., 2024). Positive and healthy interactions between parents and children can have positive effects on children's social, academic, and emotional behaviors. Conversely, poor-quality parent-child relationships can lead to behavioral, emotional, and academic problems in children (Mottaghi, 2024; Tabrizi et al., 2023). Therefore, improving the quality of these relationships is one of the primary goals in the field of child and family psychology (Sanders & Turner, 2018). Self-compassion therapy can help improve the quality of parent-child relationships. Parents who practice self-compassion are more likely to empathize and be kind to their children. They are capable of focusing on their children's emotional and behavioral needs, rather than the problems and challenges, and they interact with their children in a positive and supportive manner. These positive interactions can improve children's behaviors, reduce family tensions, and strengthen emotional bonds between parents and children (Neff & McGehee, 2020).

Many recent studies have explored the effects of self-compassion on various aspects of life, including parenting. One recent study showed that parents who practice self-compassion are less likely to experience parenting stress and are more inclined to engage in positive and supportive interactions with their children (Lee et al., 2020). Another study found that parents with higher levels of self-compassion were less likely to criticize themselves and instead sought ways to improve their relationships with their children (Tesh et al., 2020). These studies highlight the importance of self-compassion approaches in reducing stress

and improving parent-child relationships, showing that this approach can be used as an effective tool to enhance the quality of life for both parents and children.

In conclusion, parenting stress and the quality of parent-child relationships are two important and complex issues that can have profound impacts on the mental and behavioral health of both parents and children. Since parenting stress can reduce the quality of parent-child relationships, finding effective strategies to reduce this stress and improve these relationships is of particular importance. Self-compassion therapy, as one of the effective approaches in this field, can help parents manage their stress with kindness and empathy toward themselves, thereby fostering better relationships with their children. New evidence suggests that this approach can improve children's behaviors, reduce family tensions, and serve as an effective tool in enhancing the quality of life for families.

2. Methods and Materials

2.1. Study design and Participant

This study employed a quasi-experimental design with a pretest-posttest control group. To assess the impact of the intervention, participants were randomly assigned to either the experimental or control group. The experimental group underwent self-compassion therapy, while the control group did not receive any intervention. The study population consisted of mothers who visited family counseling centers in District 2 of Tehran in 2023, reporting high parenting stress and difficulties in relationships with their children. From this population, 30 individuals were selected through convenience sampling and were randomly divided into two groups of 15 (experimental and control). The inclusion criteria for the study were: parents with children aged 6 to 12, willingness to participate in therapy sessions, and not participating in any similar treatment programs. The exclusion criteria were: missing more than two therapy sessions and having severe psychiatric disorders based on self-report and confirmation by a counselor.

Before the intervention, both the experimental and control groups completed the Parenting Stress Index and the Parent-Child Relationship Quality questionnaires. The experimental group then underwent 8 sessions of self-compassion therapy. Each session lasted 90 minutes and was conducted weekly. The control group received no intervention during this period. After the therapy sessions, both groups completed the questionnaires again. One month after the posttest, the participants completed the

questionnaires again to assess the stability of the intervention effects. All participants provided informed consent to participate in the study. Their personal information was kept confidential, and they were allowed to withdraw from the study at any time.

2.2. Measures

2.2.1. Parenting Stress

The Parenting Stress Index-Short Form (PSI-SF) was developed by Abidin (1995). This questionnaire consists of 36 items measuring parenting stress across three subscales: parental distress, parent-child dysfunctional interaction, and difficult child characteristics. In a study by Richards et al. (2019), the test-retest reliability of the questionnaire was reported as 0.85 (Richards et al., 2019). Additionally, its construct validity was confirmed using confirmatory factor analysis (Atar et al., 2024).

2.2.2. Parent-Child Relationship Quality

Parent-Child Relationship Quality Questionnaire (PCRQ) was developed by Fine et al. (1983) and consists of 40 items measuring various aspects of the parent-child relationship. In a recent study by Lee et al. (2020), the Cronbach's alpha coefficient for the entire scale was reported as 0.90 (Lee et al., 2020). Both content validity and construct validity were confirmed using confirmatory factor analysis (Kakabaraee, 2016).

2.3. Intervention

2.3.1. Self-Compassion Therapy

The self-compassion therapy intervention is designed to reduce parenting stress and improve the quality of parent-child relationships by fostering self-kindness, mindfulness, and effective emotional regulation. This protocol consists of eight sessions, each aimed at addressing specific aspects of self-compassion and its application in parenting. The sessions involve guided exercises, discussions, and practical activities that help participants cultivate self-compassion and improve their interactions with their children. Below is a detailed outline of each session (Gilbert, 2014; Neff & McGehee, 2020).

Session 1: Introduction and Relationship Building

In the first session, the participants are introduced to the concept of self-compassion and the structure of the therapy program. The session begins with getting to know the

participants and establishing a supportive environment. The therapist explains the meaning of self-compassion, emphasizing its role in reducing self-criticism and fostering kindness toward oneself. The goals of the therapy are outlined, and participants are encouraged to reflect on their own experiences with parenting stress and self-criticism.

Session 2: Understanding and Accepting Self-Criticism

The focus of this session is on identifying and accepting patterns of self-criticism. Participants engage in exercises to recognize their inner critical voices and explore how these thoughts contribute to parenting stress. The therapist introduces techniques for self-acceptance and encourages participants to practice self-kindness in moments of self-criticism. Exercises are given to practice self-compassion throughout the week, helping participants become aware of their inner dialogue and its impact on their parenting.

Session 3: Developing Mindfulness

In this session, participants are introduced to mindfulness techniques that help them stay present in the moment without judgment. The therapist guides mindfulness exercises aimed at increasing awareness of thoughts and emotions, particularly during stressful parenting situations. Participants learn to observe their feelings and thoughts without being overwhelmed by them, and practice mindful breathing as a tool to manage stress.

Session 4: Practicing Self-Kindness in Parenting Stress

The fourth session focuses on applying self-compassion to specific stressful parenting situations. Participants are asked to identify moments when they feel overwhelmed or stressed by their parenting responsibilities. The therapist then guides them through exercises that encourage self-kindness in these situations, helping participants manage their stress with compassion rather than self-criticism. Participants practice these techniques at home and share their experiences in the next session.

Session 5: Empathy and Effective Communication with Children

This session introduces the importance of empathy in parent-child relationships. Participants learn how to empathize with their children's emotions and behaviors and practice effective communication strategies that foster positive interactions. Role-playing exercises are used to help participants practice empathetic listening and expressing themselves in a kind and supportive manner, improving their ability to connect with their children on a deeper emotional level.

Session 6: Managing Negative Emotions

The sixth session focuses on identifying and managing negative emotions related to parenting. Participants are guided to recognize emotions such as frustration, guilt, or anger, and learn techniques to manage these feelings constructively. The therapist introduces self-compassionate ways to handle difficult emotions, such as using breathing exercises and self-soothing techniques to reduce emotional intensity.

Session 7: Strengthening Parent-Child Relationships

This session emphasizes activities that strengthen the bond between parents and children. Participants engage in practical exercises designed to improve the quality of their interactions with their children, such as joint activities that promote connection and understanding. These exercises are intended to create positive shared experiences and foster mutual trust and empathy between parents and their children.

Session 8: Review and Future Planning

In the final session, participants review the lessons and techniques learned throughout the therapy. The therapist encourages reflection on how self-compassion has impacted their parenting and reduced their stress. A practical action plan is developed to help participants continue practicing self-compassion and mindfulness beyond the therapy sessions. The program concludes with a group discussion about long-term strategies for maintaining and enhancing self-compassion in daily parenting.

2.4. Data Analysis

Data were analyzed using SPSS version 26. The Kolmogorov-Smirnov test was used to check for data normality. ANCOVA was used to compare the pretest and posttest means between the two groups. The significance level for the tests was set at 0.05.

3. Findings and Results

This section presents the results from the analysis of data collected during the pretest and posttest for both the experimental and control groups. Analysis of covariance (ANCOVA) was employed to examine the effect of self-compassion therapy on reducing parenting stress and improving the quality of parent-child relationships. The mean scores and standard deviations of the variables of parenting stress and parent-child relationship quality in both the experimental and control groups, in the pretest and posttest phases, along with detailed statistical analysis, are provided below. [Table 1](#) displays the mean and standard

deviation scores for parenting stress in the experimental and control groups during the pretest and posttest phases.

Table 1

Mean and Standard Deviation Scores for the Experimental and Control Groups

Variable	Group	Phase	Mean	Standard Deviation	Minimum Score	Maximum Score
Parenting Stress	Experimental	Pretest	86.40	10.12	70	105
		Posttest	66.13	8.47	50	80
	Control	Pretest	84.20	9.78	69	102
		Posttest	82.93	9.85	68	101
Parent-Child Relationship Quality	Experimental	Pretest	102.50	11.85	85	125
		Posttest	119.87	9.65	105	135
	Control	Pretest	101.80	10.95	87	122
		Posttest	102.40	11.12	88	121

As shown in Table 1, the mean parenting stress scores in the experimental group significantly decreased after the self-compassion therapy intervention. In contrast, no significant change in stress scores was observed in the control group. Table 1 shows the mean and standard deviation scores for parent-child relationship quality in the experimental and control groups during the pretest and posttest phases. The results indicate that the mean scores for the quality of parent-

child relationships in the experimental group significantly increased following the intervention, whereas no significant change was observed in the control group. ANCOVA was used to evaluate the effect of self-compassion therapy on the dependent variables of parenting stress and parent-child relationship quality. The results of this analysis for each variable are presented below. Table 2 shows the results of ANCOVA for the parenting stress variable.

Table 2

ANCOVA Results for Parenting Stress

Source of Variation	Sum of Squares	Degrees of Freedom	Mean Square	F	Significance Level
Pretest	192.45	1	192.45	2.67	0.115
Group (Intervention)	1534.12	1	1534.12	21.36	0.001
Residual Error	2120.30	27	78.53		

The ANCOVA results show that, after controlling for pretest scores, the effect of the self-compassion therapy intervention on reducing parenting stress was significant ($F = 21.36$, $p = 0.001$). In other words, the intervention

significantly reduced parenting stress in the experimental group. Table 3 shows the ANCOVA results for the parent-child relationship quality variable.

Table 3

ANCOVA Results for Parent-Child Relationship Quality

Source of Variation	Sum of Squares	Degrees of Freedom	Mean Square	F	Significance Level
Pretest	134.78	1	134.78	1.54	0.226
Group (Intervention)	1023.50	1	1023.50	16.52	<0.001
Residual Error	1672.85	27	61.96		

The ANCOVA results indicate that, after controlling for pretest scores, the effect of the self-compassion therapy intervention on improving parent-child relationship quality

was significant ($F = 16.52$, $p < 0.001$). Therefore, the intervention significantly improved the quality of parent-child relationships in the experimental group.

4. Discussion and Conclusion

This study aimed to investigate the effectiveness of self-compassion therapy in reducing parenting stress and improving the quality of parent-child relationships. The results indicated that self-compassion therapy significantly reduced parenting stress in the experimental group compared to the control group. Additionally, the quality of parent-child relationships in the experimental group showed a significant improvement. In this section, the findings are discussed in light of existing theories and previous research, and limitations and suggestions for future studies are provided.

One of the most important findings of this study was the significant reduction in parenting stress in the experimental group. This result is consistent with previous studies. For instance, earlier research has shown that parents who practice self-compassion experience less parenting-related stress, particularly those facing difficult parenting challenges (Moreira et al., 2019). In self-compassion therapy, parents learn to treat themselves kindly, rather than focusing on self-criticism and guilt, and manage their emotions and needs with greater acceptance and respect (Neff & Germer, 2019). These practices help parents manage the stress of their parenting role more healthily. Self-compassion allows parents to support themselves rather than blame themselves when facing difficulties, thus reducing parenting-related stress. According to self-compassion theory, parents who treat themselves kindly feel more empowered and competent when faced with parenting challenges, which enhances their ability to manage difficult situations (Sirois et al., 2021).

Another key finding was the significant improvement in the quality of parent-child relationships in the experimental group. This finding is also in line with previous research. For example, studies have shown that parents who practice self-compassion are more likely to engage in empathetic and positive communication with their children, which leads to improved relationship quality (Neff & Germer, 2019; Neff & McGehee, 2020). The parent-child relationship is one of the most important factors in children's psychological and emotional development. Positive and healthy interactions between parents and children can improve children's behavior and social relationships, while fostering a sense of security and self-confidence in them. Parents who practice self-compassion are less likely to feel guilty when faced with

parenting challenges, allowing them to approach their children with greater kindness and patience. This positive approach strengthens emotional bonds and improves relationships (Tesh et al., 2020). These findings suggest that self-compassion can serve as an effective tool for enhancing the quality of parent-child relationships. Parents who practice self-compassion tend to exhibit greater empathy and acceptance, which directly reflects in their interactions with their children.

Self-compassion therapy has broad effects on various psychological and emotional aspects of parents. One of the most significant effects is the reduction of self-criticism and the increase in self-acceptance. Parents who constantly blame themselves for their parenting failures typically experience higher levels of stress and anxiety. However, self-compassion therapy helps them break this negative cycle and treat themselves with more kindness. According to self-compassion theory, practicing self-kindness leads to reduced anxiety, depression, and stress (Gilbert, 2014). Additionally, self-compassion therapy helps parents better manage negative emotions such as anger and frustration. Parents who effectively manage their negative emotions during parenting challenges are more likely to interact empathetically with their children, which improves children's behavior and reduces family conflicts (Neff & McGehee, 2020).

Compared to other interventions, such as parenting skills training or behavioral psychotherapy, self-compassion therapy uniquely emphasizes the parent's relationship with themselves. While many parenting interventions focus on modifying parents' and children's behaviors, self-compassion therapy teaches parents to first attend to their own feelings and needs, supporting themselves as human beings with limitations. This approach not only improves parent-child relationships but also enhances the mental health of parents (Gilbert, 2014). Unlike cognitive-behavioral approaches, which focus on changing thought and behavior patterns, self-compassion therapy helps parents respond to negative thoughts with kindness and acceptance. This approach enables parents to support themselves in managing the stresses and challenges of parenting more effectively.

Overall, the results of this study suggest that self-compassion therapy can be an effective method for reducing parenting stress and improving the quality of parent-child relationships. Parents who use this method are better able to manage their stress and negative emotions, leading to

improved interactions with their children and strengthened emotional bonds.

5. Limitations and Suggestions

Despite the positive results, there are some limitations that should be considered when interpreting the findings. One of the main limitations is the use of a small, non-random sample, which may limit the generalizability of the results. Additionally, the use of self-report questionnaires may have introduced reporting biases. To enhance the validity of the findings, future research should use more objective assessment tools, such as observing parent and child behaviors. Furthermore, the follow-up period was only one month, so the long-term sustainability of the intervention effects is unclear. Future studies should include longer follow-up periods to examine the long-term impact of self-compassion therapy. Given the findings of this study, future research should also explore the effects of self-compassion therapy on other psychological aspects of parents, such as depression and anxiety. Additionally, the impact of this approach on children's behaviors and social functioning could be investigated. Another suggestion is to conduct comparative studies between self-compassion therapy and other therapeutic approaches. For example, comparing the effectiveness of this approach with cognitive-behavioral or mindfulness-based therapies could provide new insights into the efficacy of different therapeutic methods in the field of parenting.

Given the importance of the parental role in the psychological and social development of children, the use of interventions that improve parents' mental health and the quality of their relationships with their children is essential. Self-compassion therapy, with its emphasis on kindness and acceptance toward oneself, can help parents cope more effectively with parenting challenges, ultimately improving the quality of life for both parents and children.

Authors' Contributions

Authors contributed equally 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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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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