



# The Effectiveness of Mindful Parenting on Parental Burnout and Psychological Well-Being in Mothers of Female Students with Intellectual Disabilities

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## Abstract

**Background:** Raising a child with an intellectual disability poses significant challenges for families, particularly for mothers. The present study investigated the effectiveness of a mindful parenting program on reducing parental burnout and enhancing psychological well-being among mothers of school girls with intellectual disabilities.

**Methods:** This study was a quasi-experimental with a pre-test, post-test, follow-up design and control group. The participants were 93 mothers with school-age daughters facing intellectual challenges in Amol, Mazandaran Province, Iran in 2024. A total number of 32 qualifying participants were selected through accessible sampling technique from specialized learning centers and therapy sites. These individuals were randomly divided into a treatment arm (n=16) and a delayed-treatment reference arm (n=16). The treatment arm engaged in eight consecutive weekly sessions of an organized mindfulness parenting course, while the reference arm underwent no activities throughout the research timeframe. Key evaluations involved the Parental Exhaustion Evaluation and Ryff's Mental Health Questionnaire. Information was processed through iterative variance analysis (RM-ANOVA).

**Results:** RM-ANOVA revealed notable interactive influences between timing and grouping for both caregiver exhaustion and mental health ( $P < 0.001$ ). In the intervention group, mean parental burnout scores decreased significantly from baseline (Mean=59.31, SD=6.34) to post-test (Mean=51.93, SD=5.98), and this reduction was maintained at the three-month follow-up (Mean=52.00, SD=5.63). In contrast, the control group showed no significant changes across these time points. Similarly, mental health scores in the intervention group increased significantly from baseline (Mean=46.18, SD=7.48) to post-test (M=54.12, SD=7.88) and remained stable at follow-up (Mean=54.06, SD=7.97), while the control group's scores remained unchanged. Comparisons across arms highlighted substantial and sizable advantages for the treatment arm during both post-test and follow-up phases ( $P < 0.001$ ).

**Conclusion:** The mindful parenting intervention is an effective approach for alleviating parental burnout and enhancing psychological well-being among mothers of school girls with intellectual disabilities, warranting broader implementation.

**Keywords:** Mindfulness, Parenting, Psychological Well-being, Mothers, Intellectual Disability

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## 1. Introduction

According to the DSM-5-TR, intellectual disability involves significant limitations in intellectual functioning and adaptive behavior, with onset during the developmental period (1). The presence of a child with an intellectual disability creates numerous and profound challenges for the entire family system (2). Family dynamics often shift, with mothers typically experiencing a higher level of stress than fathers, largely due to their primary role in the child's care (3). These mothers frequently find themselves lacking effective support resources and become fully dedicated to their children, sometimes to the detriment of their own physical, psychological, spiritual, and social needs (4).

Parental burnout is a chronic condition that arises from persistent, unmanaged parenting stress, which occurs when the demands of raising a child exceed the resources available to the parent (5). The unique and often more intensive needs of children with intellectual disabilities mean their parents are particularly susceptible to experiencing greater and more chronic stress. As these children may take longer to achieve independence or may never become fully independent, the parenting demands are often sustained over a longer period (6). Thus, guardians of such kids encounter much higher chances of exhaustion as compared with parents with typical children. This condition features deep bodily tiredness and sentimental drain from extended caregiving demands (7). It raises concerns by impairing a guardian's interaction with their

children, fostering sentimental separation, and heightening chances of oversight or strict childcare methods. The intense caregiving load can result in guardians feeling alone, worn out, and unprepared to deliver essential aid and a supportive setting for their kids (8).

Psychological well-being reflects one's personal evaluation of the degree of congruence between their internal sense of self and the realities of their external environment. This process results in a continuous and relatively stable sense of inner satisfaction throughout one's life (9). It is a cognitive and judgmental process where individuals evaluate their overall quality of life against their personal standards. This sense of well-being is regarded as one of the most fundamental psychological needs, having a profound impact on personality development and, by extension, on an individual's performance across various life domains (10). Ryff (11) described mental health through six core aspects: independence, command over surroundings, self-improvement, healthy connections, life direction, and self-approval. These aspects form a strong basis for measuring peak emotional operation and are vital for aiding adaptation to situations plus general bodily and sentimental wellness (12).

Mindful parenting constitutes an innovative extension of mindfulness-based practices within the field of mental health and offers a potentially effective strategy for enhancing psychological well-being among mothers raising children with intellectual disabilities (13). It involves strategies that focus on living in the present moment, adopting an accepting and non-judgmental stance, and responding to internal and external experiences with curiosity rather than reactivity (14). The goal of this approach is to train parents to remain focused on the present and the unfolding events, rather than being preoccupied with their own internal struggles, their children's problematic behaviors, or their personal stress (15). Mindful parenting entails consciously observing parent-child interactions, maintaining an open attitude, and practicing self-compassion while also recognizing thoughts, emotions, and needs of the child (16). The review of Shorey and Ng (17) showed that awareness caregiving can advance mental health, guardian-kid bonds, and household dynamics, while lessening sentimental and action-related issues in guardians and kids.

Earlier studies repeatedly proved the benefits of awareness caregiving programs (18, 19). For instance, Ebrahimi Rad and Sajjadian (18) found that joining such a program led to major enhancements in childcare approaches and notable drops in exhaustion for caregivers of kids with inward-focused issues. Likewise, some other investigations (19, 20) suggested that awareness caregiving surpasses mere information gain. Awareness caregiving profoundly influences caregivers' general mental health and awareness, thereby shaping their childcare style. The key idea in these programs is for guardians to embrace themselves and their kids as is, without bias. This embrace does not overlook issues but expands viewpoints to include all elements, good and bad, of guardians and kids.

The main goal of this study was to examine the effectiveness of a mindful parenting program on reducing parental burnout and improving psychological well-being in mothers of girls with intellectual disabilities.

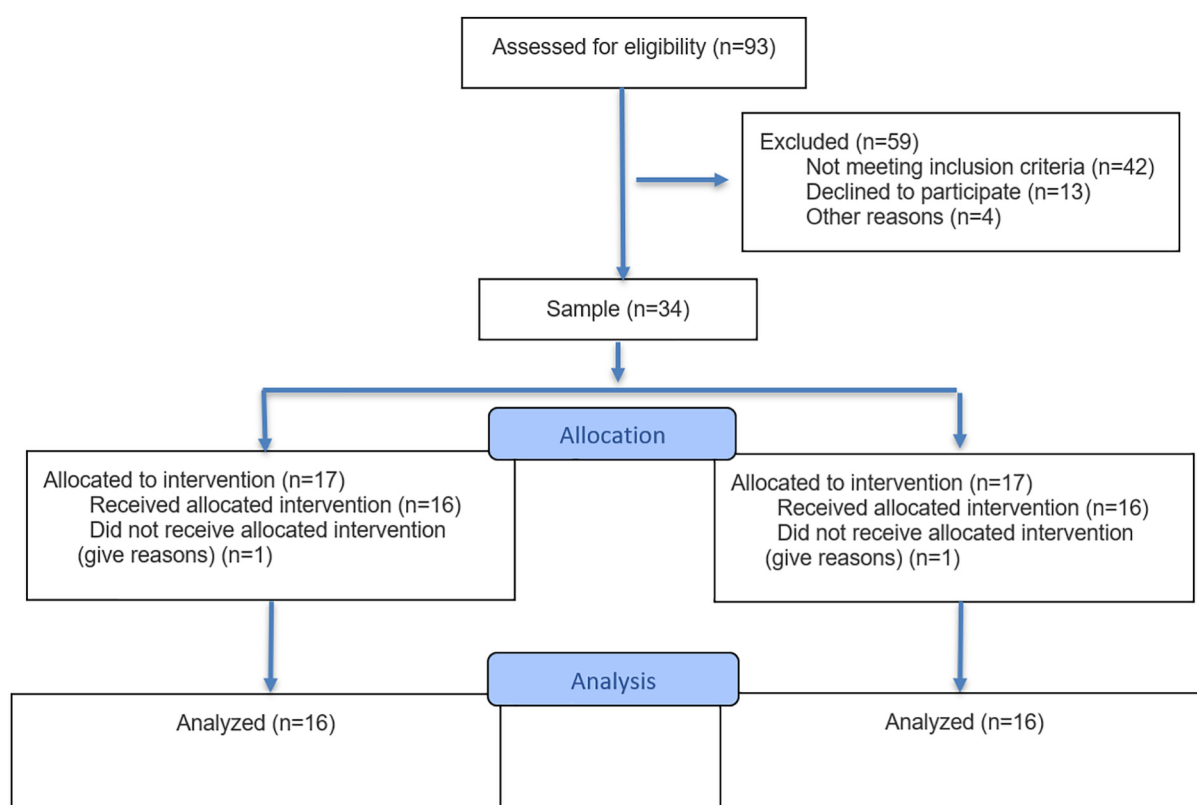
## 2. Methods

### 2.1. Design

This study was a quasi-experimental with a pre-test, post-test, follow-up design and control group conducted in Amol, Mazandaran Province, Iran in 2024.

### 2.2. Selection and Description of Participants

The population included all 93 mothers of girls with intellectual disabilities enrolled in schools of Amol, Mazandaran Province, Iran during the 2023–2024 academic year. Using convenience sampling technique, 34 mothers who attended special education schools or rehabilitation centers were recruited. The inclusion criteria required a minimum of middle school education, age between 30 and 45 years, and having exactly one daughter diagnosed with intellectual disability. The study participants were excluded if they missed more than two consecutive intervention sessions or chose to discontinue participation. Following recruitment, individuals were randomly allocated to either the experimental or control group through a simple randomization method (lottery draw), resulting in 17 participants per group. One mother withdrew from each group, yielding a final sample of 32 participants (16 per group) (Figure 1).



**Figure 1:** The figure shows the CONSORT flow diagram of the study.

The study adhered to all relevant ethical principles, including written informed consent from every participant and provision of free counseling services after completion of the study.

### 2.3. Sample Size Determination

Sample size was determined a priori via G\*Power software, setting alpha at 0.05 and desired power at 0.90. Effect size estimates were derived from previously reported post-intervention parental burnout values (21) including 51.93 (SD=5.98) in the experimental group and 59.00 (SD=6.04) in the control group.

### 2.4. Data Collection and Measurements

The Parental Burnout Assessment (PBA), developed by Roskam and colleagues (22), is a 23-item self-report tool measuring four key aspects of parental burnout including exhaustion in the parental role, emotional distancing from children, feelings of being fed up with parenting, and contrast with one's prior parental identity. Items are scored on a 7-point Likert scale (0=Never to 6=Every day), with higher total scores indicating more severe burnout. The scale shows strong psychometric properties, including a Cronbach's alpha of 0.86

in previous research (23). The Persian version used here demonstrated excellent content validity (CVR=0.92, CVI=0.98) (23) and very high internal consistency in this sample (Cronbach's  $\alpha$ =0.93).

The Ryff Scales of Psychological Well-Being (PWBS), created by Ryff (24), is an 18-item scale assessing six dimensions: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. Responses use a 6-point Likert format (1=Strongly Disagree to 6=Strongly Agree), where higher scores reflect greater well-being. The instrument has good reliability, with an overall Cronbach's alpha of 0.82 in prior research (25). The Persian adaptation exhibited strong content validity (CVR=0.97, CVI=0.99) (25) and high internal consistency (Cronbach's  $\alpha$ =0.89) in the present sample.

### 2.5. Procedure

Following random allocation to the experimental and control groups, baseline assessments were completed by using the Parental Burnout Inventory and the Psychological Well-Being Scale. The experimental group then participated in an eight-week mindful parenting training program, with sessions held weekly and each lasting 90 minutes (Table 1).

**Table 1:** Summary of mindful parenting intervention sessions

Session	Topic
1	Introduction to mindful parenting, differences between mindfulness and mindful parenting, and the connection between thoughts and emotions
2	Training on focusing on the present moment, practicing mindful breathing, and non-judgmental observation
3	Practicing self-acceptance and compassion in the parental role, and identifying negative thoughts and emotions
4	Responding instead of reacting: learning to pause and observe before responding
5	Practicing mindful communication with children, empathetic listening, and being fully present
6	Managing difficult emotions in both parents and children through practical relaxation exercises
7	Paying mindful attention to the needs of both the child and oneself, and fostering positive relationships
8	Summarizing the sessions, reviewing techniques, and applying mindful parenting in daily life

During this period, the control group received no active intervention. Immediately after the final session, both groups were re-administered the same measures for the post-test evaluation. To examine the durability of any observed effects, a follow-up assessment was conducted one month later, when the participants once again completed the Parental Burnout Inventory and Psychological Well-Being Scale.

### 2.6. Data Analysis

All statistical analyses were performed in SPSS version 26. Descriptive statistics (mean and standard deviation values) were used to summarize the data. Baseline demographic and clinical variables were compared between groups using chi-square tests (for categorical data) and independent t-tests (for continuous data). Before conducting repeated-measures ANOVA, key assumptions were checked. Normality was verified for each variable at all time points via skewness/kurtosis values (within -1 to +1) and the Kolmogorov-Smirnov test. Levene's test confirmed homogeneity of variances across groups for all outcomes ( $P > 0.05$ ). Mauchly's test evaluated sphericity was satisfied for parental burnout but violated for psychological well-being; thus, the Greenhouse-Geisser correction was applied to the latter. Repeated-measures ANOVA then tested differences in parental burnout and psychological well-being scores across the three time points (pre-test, post-test, follow-up) and between the two groups. Statistical significance was set at  $\alpha = 0.05$ .

### 3. Results

Demographic features of the participants, including age, educational attainment, and employment status, were compared between the experimental and control groups. The mean age of mothers in the experimental group was 38.25 years ( $SD = 4.52$ ), compared with 37.67 years ( $SD = 5.31$ )

in the control group. With respect to education level, the experimental group consisted of 7 mothers (43.75%) with a high school diploma and 9 (56.25%) with a university degree, while the control group included 8 mothers (50%) with a high school diploma and 8 (50%) with a university degree. For employment status, 11 participants (68.75%) in the experimental group were homemakers and 5 (31.25%) were employed, whereas in the control group, 10 (62.5%) were homemakers and 6 (37.5%) were employed. These statistics indicated that there were no significant differences in demographic variables between the two groups (Table 2).

Descriptive statistics (mean and standard deviation values) were calculated for parental burnout and psychological well-being scores at the pre-test, post-test, and follow-up stages, reported separately for the experimental and control groups (Table 3).

As shown in Table 3, the mean scores for parental burnout in the experimental group decreased from the pre-test to the post-test and remained relatively stable during the follow-up phase. Conversely, the mean scores for psychological well-being in this group increased. In the control group, the mean scores for both variables showed no significant changes across all three stages.

Repeated-measures ANOVA demonstrated highly significant main effects of time and group on both parental burnout and psychological well-being ( $P < 0.001$ ). Bonferroni-corrected post-hoc tests identified the sources of within-group differences across time points (Table 4). In the experimental group, parental burnout decreased substantially and significantly from pre-test to post-test (mean difference = 7.38,  $P < 0.001$ ) and from pre-test to follow-up (mean difference = 7.31,  $P < 0.001$ ), with no notable change between post-test and follow-up ( $P = 0.929$ ).

**Table 2:** Demographic characteristics of the participants

Variable	Experimental Group (n=16)	Control Group (n=16)	P
Education			
High School Diploma	7 (43.75%)	8 (50%)	0.721
University Degree	9 (56.25%)	8 (50%)	
Employment Status			
Homemaker	11 (68.75%)	10 (62.5%)	0.713
Employed	5 (31.25%)	6 (37.5%)	

**Table 3:** Means (SD) of parental burnout and psychological well-being scores by group and time point

Variable	Stages	Experimental Group	Control Group	P (between-group)
		Mean (SD)	Mean (SD)	
Parental Burnout	Pre-test	59.31 (6.34)	59.06 (6.52)	0.913
	Post-test	51.93 (5.98)	59.00 (6.04)	0.001
	Follow-up	52.00 (5.63)	57.43 (5.94)	0.001
	P (within-group)	0.001	0.466	-
Psychological Well-being	Pre-test	46.18 (7.48)	46.81 (6.23)	0.798
	Post-test	54.12 (7.88)	47.43 (5.95)	0.001
	Follow-up	54.06 (7.97)	47.37 (5.72)	0.001
	P (within-group)	0.001	0.793	-

SD: Standard Deviation

**Table 4:** Bonferroni post-hoc tests for parental burnout and psychological well-being scores

Variable	Comparison	Mean Difference	SE	P
Parental burnout				
Experimental Group	Pre-test - Post-test	7.38	0.22	0.001
	Pre-test - Follow-up	7.31	0.22	0.001
	Post-test - Follow-up	-0.07	0.22	0.929
Control Group	Pre-test - Post-test	0.06	0.22	0.938
	Pre-test - Follow-up	1.63	0.22	0.769
	Post-test - Follow-up	1.57	0.22	0.774
Psychological Well-Being				
Experimental Group	Pre-test - Post-test	-7.94	0.30	0.001
	Pre-test - Follow-up	-7.88	0.30	0.001
	Post-test - Follow-up	0.06	0.30	0.948
Control Group	Pre-test - Post-test	-0.62	0.30	0.508
	Pre-test - Follow-up	-0.56	0.30	0.551
	Post-test - Follow-up	0.06	0.30	0.948

SE: Standard Error

The control group showed no significant changes at any time point. For psychological well-being, the experimental group displayed significant increases from pre-test to post-test (mean difference=-7.94,  $P<0.001$ ) and from pre-test to follow-up ( $P<0.001$ ), remaining stable thereafter ( $P=0.948$ ). No significant changes occurred in the control group across the three phases.

#### 4. Discussion

This study aimed to investigate the effects of a structured mindful parenting program on parental

burnout and psychological well-being among mothers of girls with intellectual disabilities. The findings indicated that the intervention led to significant and sustained positive changes in both variables. Mothers in the experimental group showed reductions in burnout levels and increases in well-being, with these changes largely maintained at the one-month follow-up. These findings are consistent with previous evidence on mindful parenting interventions.

A key finding of this study was the marked reduction in parental burnout among mothers

in the experimental group. This aligns with the fundamental tenets of mindful parenting, which emphasize enhanced present-moment focus, non-judgmental acceptance, and self-compassion to better cope with the ongoing, high-demand stressors of parenting a child with intellectual disability (26). Parental burnout is generally characterized by three main components including emotional exhaustion, emotional distancing from the child, and perceived parental ineffectiveness (8). The mindful parenting program likely mitigated these factors by equipping mothers with tools to manage their emotional reactions and to cultivate a more accepting relationship with themselves and their children (14). This is consistent with previous research (18), which also found a significant effect of a mindful parenting program on reducing parental burnout. Our findings expand on this by demonstrating the durability of these effects in a long-term follow-up.

Another finding of this study is the marked enhancement in psychological well-being observed among mothers in the experimental group. The mindful parenting program, with its emphasis on cultivating non-judgmental awareness and acceptance, likely contributed to stronger self-acceptance and a clearer sense of purpose in life—two central dimensions within Ryff's framework of psychological well-being (11). Through sustained practice of being fully present with their emotions and daily realities, these mothers appear to have developed greater autonomy and improved environmental mastery, enabling them to experience increased confidence and control in their lives despite the ongoing demands of caregiving (20). This pattern is consistent with prior research demonstrating that mindful parenting interventions exert a deep and transformative influence on mothers' psychological well-being and mindfulness levels (19, 27). Specifically, some previous studies (19, 27) similarly showed that such programs go beyond simply imparting knowledge, instead promoting substantial and enduring shifts in mothers' psychological functioning. These results strengthen this evidence base and underscore the particular relevance of mindful parenting approaches for mothers raising children with intellectual disabilities.

The sustained effects observed at the one-month follow-up are particularly encouraging, suggesting that the mindful parenting skills learned during

the program were effectively integrated into the mothers' daily lives. This indicates that the intervention did not provide a temporary relief but rather a lasting change in coping mechanisms and psychological resources. The decrease in parental burnout and the simultaneous increase in psychological well-being suggest a reciprocal relationship; as mothers became more mindful and less burned out, they were better able to engage in self-care and personal growth, further enhancing their overall well-being (28). This is a critical insight, as it points to the potential for mindful parenting to break the cycle of chronic stress and neglect that often affects these caregivers.

In light of the central importance of mothers to family well-being and the unique pressures associated with parenting a child with an intellectual disability, the present findings carry important practical implications. They offer compelling support for incorporating mindful parenting interventions into both clinical practice and community-based support systems tailored to this group. Widespread adoption of such programs has the potential to reduce maternal distress, strengthen the quality of the parent-child bond, and ultimately foster a healthier and more supportive family atmosphere.

#### *4.1. Limitation*

This study had several limitations that should be considered when interpreting the results. Participants were recruited through convenience sampling from special education centers in Amol, Iran, which may limit the generalizability of the findings to the broader population of mothers of children with intellectual disabilities. In addition, the study was conducted in only one city in northern Iran, reducing the external validity and transferability of the results to other regions or cultural contexts. Furthermore, the reliance on self-report measures may have introduced social desirability bias.

## **5. Conclusions**

The present study provides evidence that a mindful parenting program can effectively decrease parental burnout while simultaneously enhancing psychological well-being among mothers of girls with intellectual disabilities. These results advocate for the incorporation of mindful

parenting strategies into clinical and community-based support services aimed at this group, presenting a practical and enduring approach to improving maternal mental health and overall family functioning. It is recommended that future studies examine the persistence of intervention effects over extended periods. Furthermore, future studies with larger, randomly selected, and more diverse samples across multiple locations are recommended to confirm the present findings.

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### Authors' Contributions

Roja Yahyapour: Substantial contributions to the conception and design of the work; acquisition, analysis, and interpretation of data for the work; drafting the work. Marzieh Talebzadeh Shoushtari: Substantial contributions to the conception and design of the work; supervision of data acquisition, analysis, and interpretation; reviewing the work critically for important intellectual content. Afsaneh Farashbandi: Substantial contributions to the design of the work; interpretation of data; reviewing the work critically for important intellectual content. Sasan Bavi: Substantial contributions to the conception and design of the work; interpretation of data; reviewing the work critically for important intellectual content. All authors have reviewed and approved the final manuscript and take responsibility for all aspects of the work, including questions regarding the accuracy or integrity of any part.

**Conflict of Interests:** None declared.

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### Ethical Approval

The Ethics Committee of Islamic Azad University, Ahvaz Branch, Ahvaz, Iran approved the present research with the code of IR.IAU.AHVAZ.REC.1403.042. Also, written informed consent was obtained from the participants.

### References

1. Regier DA, Kuhl EA, Kupfer DJ. The DSM-5: Classification and criteria changes. *World Psychiatry*. 2013;12(2):92–8. doi: 10.1002/wps.20050. PubMed PMID: 23737408; PubMed Central PMCID: PMC3683251.
2. Mestre TD, Lopes MJ, Mestre DM, Ferreira RF, Costa AP, Caldeira EV. Impact of family-centered care in families with children with intellectual disability: A systematic review. *Heliyon*. 2024;10(7):e28241. doi: 10.1016/j.heliyon.2024.e28241. PubMed PMID: 38560242; PubMed Central PMCID: PMC10981057.
3. Doosti S, Hooman F, Bakhtiyar Pour S, Bavi S. Reliability and Validity of the Persian Version of the Quality of Life Questionnaire for Mothers of Children with Disabilities. *Women Health Bull*. 2025;12(1):1–9. doi: 10.30476/whb.2024.103597.1306.
4. Alsamiri YA, Alaghdaf AA, Alsawalem IM, Allouash BA, Alfaidi SD. Mothers of children with disabilities: exploring lived experiences, challenges, and divorce risk. *Front Psychol*. 2024;15:1399419. doi: 10.3389/fpsyg.2024.1399419. PubMed PMID: 39583001; PubMed Central PMCID: PMC11581941.
5. Griffith AK. Parental Burnout and Child Maltreatment During the COVID-19 Pandemic. *J Fam Violence*. 2022;37(5):725–731. doi: 10.1007/s10896-020-00172-2. PubMed PMID: 32836736; PubMed Central PMCID: PMC7311181.
6. Mohammadipour S, Dasht Bozorgi Z, Hooman F. Association of Distress Tolerance and Mother-Child Interaction with Children's Behavioral Disorders in Mothers of Children with Learning Disabilities: Mediating Role of Marital Quality. *Women Health Bull*. 2022;9(3):181–189. doi: 10.30476/whb.2022.95929.1184.
7. Roskam I, Mikolajczak M. Parental Burnout in the Context of Special Needs, Adoption, and Single Parenthood. *Children (Basel)*. 2023;10(7):1131. doi: 10.3390/children10071131. PubMed PMID: 37508628; PubMed Central PMCID: PMC10378352.
8. Findling Y, Itzhaki M, Barnoy S. Parental Burnout—A Model of Risk Factors and Protective Resources Among Mothers of Children with/Without Special Needs. *Eur J Investig Health Psychol Educ*. 2024;14(11):2883–2900. doi: 10.3390/ejihpe14110189. PubMed

- PMID: 39590026; PubMed Central PMCID: PMC11592539.
9. Tahvilian M, Foroozandeh E, Banitaba SM. Comparing the Effects of Psychodrama with Cognitive Behavioral Therapy on Psychological Well-being of Women with Marital Conflicts. *Women Health Bull.* 2023;10(1):23–31. doi: 10.30476/whb.2023.97031.1202.
  10. Byra S. Forgiveness and well-being in mothers of children with disabilities. *J Pediatr Nurs.* 2024;77:e531-e537. doi: 10.1016/j.pedn.2024.05.019. PubMed PMID: 38797646.
  11. Ryff CD. Psychological well-being revisited: advances in the science and practice of eudaimonia. *Psychother Psychosom.* 2014;83(1):10–28. doi: 10.1159/000353263. PubMed PMID: 24281296; PubMed Central PMCID: PMC4241300.
  12. Bourke-Taylor HM, Leo M, Tirlea L. Health, Wellbeing and Empowerment E-workshops for Mothers of Children with Disabilities: A Non-randomised Comparison Study. *J Autism Dev Disord.* 2025;55(4):1465–1480. doi: 10.1007/s10803-024-06287-5. PubMed PMID: 38520587; PubMed Central PMCID: PMC11933236.
  13. Meppelink R, de Bruin EI, Wanders-Mulder FH, Vennik CJ, Bögels SM. Mindful Parenting Training in Child Psychiatric Settings: Heightened Parental Mindfulness Reduces Parents' and Children's Psychopathology. *Mindfulness(NY).* 2016;7:680–689. doi: 10.1007/s12671-016-0504-1. PubMed PMID: 27217845; PubMed Central PMCID: PMC4859846.
  14. Ahemaitijiang N, Fang H, Ren Y, Han ZR, Singh NN. A review of mindful parenting: Theory, measurement, correlates, and outcomes. *Journal of Pacific Rim Psychology.* 2021;15:18344909211037016. doi: 10.1177/18344909211037016.
  15. Acet P, Oliver BR. Determinants of mindful parenting: a cross-cultural examination of parent and child reports. *Current Psychology.* 2024;43(1):562–574. doi: 10.1007/s12144-023-04327-4.
  16. Sherwood A, Paynter J, Emerson LM. A brief online mindful parenting program: Feasibility and initial effects pilot in a community sample. *J Child Fam Stud.* 2023;32(5):1532–1545. doi: 10.1007/s10826-023-02571-7. PubMed PMID: 37250756; PubMed Central PMCID: PMC10066963.
  17. Shorey S, Ng ED. The efficacy of mindful parenting interventions: A systematic review and meta-analysis. *Int J Nurs Stud.* 2021;121:103996. doi: 10.1016/j.ijnurstu.2021.103996. PubMed PMID: 34175531.
  18. Ebrahimi Rad H, Sajjadian I. Effectiveness of Mindful Parenting Training Package on Parental Care and Parenting Burnout of Mothers of Students with Internalizing Disorder. *Rooyesh.* 2023;11(11):145-154. Persian.
  19. Hassani M, Khodabakhshi-Koolae A, Jafari A. The Effects of Cultivating Mindful Parenting Interventions on Satisfaction, Efficacy, and Conflict Over Emotional Expression in Mothers of Bullying Sons: A Quasi-experimental Study. *Int J High Risk Behav Addict.* 2025;14(2):e161328. doi: 10.5812/ijhrba-161328.
  20. Sharif Mohammadi F, Chorami M, Sharifi T, Ghazanfari A. Comparing the Effects of Group Training of Mindful Parenting Skills and Psychological Capital on Stress and Psychological Flexibility in Mothers with Blind Girl Students. *Int J School Health.* 2020;7(3):31–8. doi: 10.30476/intjsh.2020.86895.1091.
  21. Mounesi Taniyani F, Seyyed Noori SZ, Hojjat Shamami M, Yahyazadeh A. The Effectiveness of Internet-Based Mindfulness Training on Parental Burnout and Self-Compassion of Mothers with Children with Specific Learning Disorder. *J Child Ment Health.* 2024;10(4):1-16. doi: 10.61186/jcmh.10.4.2.
  22. Roskam I, Brianda ME, Mikolajczak M. A Step Forward in the Conceptualization and Measurement of Parental Burnout: The Parental Burnout Assessment (PBA). *Front Psychol.* 2018;9:758. doi: 10.3389/fpsyg.2018.00758. PubMed PMID: 29928239; PubMed Central PMCID: PMC5998056.
  23. Mousavi SF, Mikolajczak M, Roskam I. Parental burnout in Iran: Psychometric properties of the Persian (Farsi) version of the Parental Burnout Assessment (PBA). *New Dir Child Adolesc Dev.* 2020;2020(174):85–100. doi: 10.1002/cad.20369. PubMed PMID: 33029877.
  24. Ryff CD. Psychological Well-Being in Adult Life. *Current Directions in Psychological Science.* 1995;4(4):99-104. doi: 10.1111/1467-8721.ep10772395.
  25. Bayani AA, Koochekya AM, Bayani A. Reliability and Validity of Ryff's Psychological Well-being Scales. *Iranian Journal of Psychiatry*

- and *Clinical Psychology*. 2008;14(2):146-151. Persian.
26. Burstein O, Teshale Zevin Z, Geva R. Integrative mindfulness-based infant parenting program: theoretical foundations and a novel intervention protocol. *Front Psychol*. 2025;16:1524008. doi: 10.3389/fpsyg.2025.1524008. PubMed PMID: 39989632; PubMed Central PMCID: PMC11842442.
27. He J, Rahman MNBA, Xu M, Jiang M. The impact of maternal mindful parenting on preschoolers' emotional regulation abilities: The mediating role of depression and the moderating role of the parent-child relationship. *Acta Psychol*. 2025;252:104685. doi: 10.1016/j.actpsy.2024.104685. PubMed PMID: 39754996.
28. Acet P, Oliver BR. Perspectives of Maternal Mindful Parenting: Development and Initial Validation of the Mindful Parenting Inventories for Parents (MPIP) and Children (MPIC). *Mindfulness*. 2023;14(5):1219–1233. doi: 10.1007/s12671-023-02078-8.