

# Self-esteem, parenting stress, and burnout among parents of children with special needs

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Received: 20 July 2024  
Available Online: 15 August 2024

Revised: 13 August 2024  
DOI: 10.5861/ijrsp.2024.026

Accepted: 14 August 2024

ISSN: 2243-7681  
Online ISSN: 2243-769X

OPEN ACCESS



## ***Abstract***

The study investigated the psychological status quo of parents of Children with special needs in terms of their self-esteem, parenting stress and parenting burnout as well as the differences and influencing factors of various psychological symptoms. Specifically, it described the respondent's sex, age, education level, the type and extent of their children's diseases, as well as family composition and income level; determined the respondent's self-esteem, parenting stress and parenting burnout; tested whether variables are different when grouped according to their profile; established the correlation among the study variables; and proposed improvement plans based on the research results. In this study, 305 parents of children with special needs in Anhui Province, China were surveyed anonymously. The responses from the questionnaires were input and analyzed to understand the psychological status of parents of children with special needs and analyze its influencing factors. The results show that most parents of children with special needs have low self-esteem, high parenting pressure and parenting burnout, and the situation is not optimistic, and there is a close relationship with the parents' own education level and work situation, family structure and income, and the disease and degree of children. Therefore, the government, communities, schools and families should attach great importance to the mental health problems of this special population, strengthen policy support and publicity, provide more medical resources and psychological counseling, create an inclusive and integrated social environment and family environment, and improve the quality of life and happiness of children with special needs and their families.

***Keywords:*** parents of special needs children, self-esteem, parenting stress, parenting burnout

## Self-esteem, parenting stress, and burnout among parents of children with special needs

### 1. Introduction

The study investigates self-esteem, parenting stress, and burnout among parents of children with special needs. The respondents in this research comprise a diverse group of parents, encompassing various demographics including age, gender, education level, the type and extent of their children's diseases, as well as family composition and income level. Typically, these parents are responsible for children diagnosed with conditions such as autism spectrum disorder, cerebral palsy, or developmental delays. The diversity in the respondent pool allows for a comprehensive understanding of how these variables interact across different demographic groups, thus providing a broad perspective on the challenges faced by families raising children with special needs.

Self-esteem, a crucial psychological construct, refers to an individual's overall evaluation of their worth. According to Sabik et al. (2020), self-esteem is a measure of self-worth and personal value, and it significantly influences an individual's mental health and well-being. For parents of children with special needs, self-esteem can be particularly vulnerable due to the continuous demands and challenges associated with caregiving. Research by Won et al. (2019) indicates that lower self-esteem among these parents is associated with increased parenting stress. When combined with the demographic factors of the respondents, such as varying socioeconomic statuses and support systems, self-esteem levels may vary significantly, influencing how parents manage the stress of caregiving and their overall well-being. Parenting stress encompasses the difficulties and strain associated with the role of a parent, particularly when raising a child with special needs. Efstratopoulou et al. (2022) defines parenting stress as a condition where the demands of parenting exceed the parent's resources and coping abilities. For parents of children with special needs, this stress can be exacerbated by additional caregiving responsibilities and the need for specialized interventions. According to a study by Wahlberg et al. (2019), elevated parenting stress is closely related to the challenges in maintaining a positive self-image and managing burnout. When analyzing the respondents, the interplay between parenting stress and self-esteem can reveal significant insights into how these factors influence each other and affect overall parental well-being. Burnout refers to a state of emotional exhaustion and diminished personal accomplishment resulting from prolonged exposure to stress. Macía-Rodríguez et al. (2020) describe burnout as a syndrome marked by emotional exhaustion, depersonalization, and a reduced sense of personal achievement. For parents of children with special needs, burnout can be a significant issue due to the constant demands and lack of respite. Research by Johnson et al. (2020) shows that burnout is frequently linked to high levels of parenting stress and lower self-esteem. Analyzing the respondents in the context of burnout reveals how ongoing stress and self-esteem issues contribute to this condition, impacting overall quality of life and parenting effectiveness.

Despite substantial research on self-esteem, parenting stress, and burnout individually, there is a noticeable gap in studies examining the intersection of these variables specifically among parents of children with special needs. Existing research often treats these variables in isolation, lacking a comprehensive approach that integrates all three aspects. This study aims to bridge this gap by exploring how self-esteem, parenting stress, and burnout interrelate, providing a holistic view of the challenges faced by these parents. Understanding this interplay can lead to more targeted interventions and support strategies.

The motivation for conducting this research stems from a deep personal commitment to improving the lives of families with children who have special needs. Witnessing the daily struggles and immense dedication of these parents highlights the need for more nuanced research into their psychological well-being. By exploring the interconnectedness of self-esteem, parenting stress, and burnout, the study seeks to offer practical insights and contribute to creating a supportive environment for these families. The significance of this study lies in its potential to inform better support systems and interventions for parents of children with special needs. By

elucidating the complex relationships between self-esteem, parenting stress, and burnout, the research provides valuable insights that can guide the development of targeted resources and support mechanisms. This can ultimately enhance the well-being of parents, improve their quality of life, and foster a more supportive and effective care giving environment for their children.

**Objectives of the Study** - The study aimed to understand the psychological status quo of parents of Children with special needs in terms of their self-esteem, parenting stress and parenting burnout as well as the differences and influencing factors of various psychological symptoms. Specifically, it determined the respondent's self-esteem, parenting stress and parenting burnout; established the correlation among the study variables; and proposed improvement plans based on the research results.

## 2. Methods

**Research Design** - In this study, descriptive survey method was used, which is combination of quantitative research and correlation quantitative research. Quantitative research is a systematic investigation that primarily focuses on quantifying relationships, behaviors, phenomena, or patterns through the collection and analysis of numerical data. This type of research seeks to measure and analyze variables in a structured manner using statistical, mathematical, or computational techniques (Bhandari, 2023). Descriptive correlational research is a type of quantitative research that examines the relationships between variables without manipulating them. This approach focuses on describing the characteristics of a population or phenomenon and exploring how variables are related to one another (McCombes, 2023).

Quantitative correlational research was well-suited for the study of "Self-Esteem, Parenting Stress, and Burnout Among Parents of Children with Special Needs" because it examined relationships between variables without manipulating them. This approach involved collecting numerical data through standardized instruments to measure self-esteem, parenting stress, and burnout, and then using statistical techniques to analyze the correlations among these variables. The goal was to understand how these aspects were interrelated, providing insights into how low self-esteem might relate to higher stress and burnout levels, and identifying areas for potential interventions. This method enabled generalizable findings and ensured objective measurement of the studied variables.

**Participants of the Study** - The respondents of the study were parents of children with special needs from 11 cities in Anhui Province of China. There were 1470 parents in total. Using Raosoft sample size calculation, the research came up 305 sample size. In selecting the respondents, stratified random sampling was employed. It is a probability sampling technique used to ensure that different subgroups within a population are appropriately represented in the sample (McCombes, 2023). In the study of parents of children with special needs across 11 cities in Anhui Province, China, stratified random sampling was used to ensure a balanced and representative sample. The researchers divided the 1470 parents into strata based on cities, then randomly sampled within each city to achieve a total sample size of 305, proportionately allocated. This method ensured each city was represented, improved precision by reducing sampling bias, and provided insights that were generalizable to the entire population of parents across all cities.

In the study, the inclusion and exclusion criteria were carefully defined to ensure that the sample accurately represented the target population of parents with children who have special needs. Inclusion criteria required participants to be parents of children with special needs living in the 11 cities of Anhui Province, China. This criterion ensured that all respondents had relevant experience with the challenges and demands of parenting children with special needs. To be included, parents needed to actively participate in the study and provide informed consent, ensuring their willingness and ability to contribute valuable data. Exclusion criteria eliminated potential participants who did not meet these specific conditions. For instance, parents not residing in the designated cities, those without children with special needs, or individuals who were unwilling or unable to participate in the study were excluded. This approach helped to focus the research on the experiences of the

relevant parent demographic and avoid skewed data from individuals outside the scope of the study. By applying these criteria, the study aimed to gather accurate, relevant, and actionable insights into the experiences and challenges faced by the target population.

### *Measures*

**Demographics of families of Children with special needs.** It mainly includes the basic information of the family, the basic information of parents and the basic information of children. The purpose of the questionnaire is to collect the basic information of parents (age, position, education level, relationship with children), basic information of families (family location, family structure, economic income, time spent with children every day, and whether there are multiple families), and basic information of children (gender, age, type and degree of disorder).

**Self-esteem Scale (SES).** Because scholars have different understandings of self-esteem, there are more than 2000 kinds of measurement methods about self-esteem at home and abroad. Rosenberg (1965)' self-esteem scale was used to evaluate an individual's overall feelings of self-worth and self-acceptance, and is used by most researchers to assess the level of self-esteem. It is also the most used self-esteem measurement tool in the psychological field of our country. This scale mainly measures one-dimensional global self-esteem. It contains 10 questions, including 5 items for self-denial and 5 items for self-affirmation. The questions are simple and easy to understand. The scale adopts the Licott four-point score, 1 represents "very consistent", 4 represents "very consistent", and the higher the score, the higher the level of self-esteem of the individual. The internal consistency ( $\alpha$  coefficient) of the scale was 0.783, and the retest correlation coefficient was 0.51 to 0.75, with an average of 0.72. This scale was utilized by Orth et. al.,(2022) which found that higher self-esteem, as measured by the Rosenberg Self-Esteem Scale, was significantly associated with better mental health outcomes, including lower levels of anxiety and depression. Parents with higher self-esteem reported feeling more confident and less stressed, suggesting that fostering self-esteem can be a crucial component of mental health interventions for parents of children with special needs.

**Parenting Stress Index Short Form 15 (PSI-SF-15).** The scale was revised by Roger and Wang Mengcheng and other scholars, with a total of 15 items, including three dimensions of parenting pressure, parent-child interaction disorder and difficult children (Luo et al., 2021). It uses a 5-level scoring system, where 1 means "strongly disagree" and 5 means "strongly agree". The higher the score, the higher the level of stress felt by the parents. The scale has good reliability and validity, and its internal consistency coefficient is 0.89. In this study, the Cronbach'a coefficient of this scale was 0.877, and the Cronbach'a coefficients of parenting stress, parent-child interaction disorder and difficult children were 0.735,0.820 and 0.839, respectively, with good reliability. In this study, KMO and Bartlett sphericity test were used to test the suitability of factor analysis. The KMO value of the scale was 0.872, and the Chi-square value of Bartlett sphericity test was 1623.395 (pG0.001), reaching a significant level, indicating that the scale was suitable for factor analysis. Specifically, this scale was utilized by Hatakeyama et al. (2022) which found that found that the Parenting Stress Index-Short Form (PSI-SF) demonstrated a three-factor structure: Parental Distress, Parent-Child Dysfunctional Interaction, and Difficult Child. These factors effectively captured the dimensions of parenting stress among Japanese parents. The PSI-SF was found to be a reliable and valid tool for assessing parenting stress in this population. Additionally, the study revealed that higher scores in these factors were associated with increased overall parenting stress, highlighting the tool's utility in identifying areas where parents might need additional support.

**Parenting Burnout Scale (PBA).** It was first developed by Roskam et al. (2018) and Chinese scholars Cheng et al. (2020) also revised the scale to form a Chinese version of the Parenting Burnout Assessment Scale to assess parents' burnout in the process of parenting. It contains 23 items, which are divided into four dimensions: the sense of exhaustion of the parental role, the self-comparison with the previous parental role, the sense of boredom of the parental role, and the emotional alienation from the children. The revised version has a single-factor structure with 21 entries. The Likert-7-level scoring method is adopted, with "1" representing

"never"; "2" means "several times a year"; "3" means "once a month or less a month"; "4" stands for "Several times a month"; "5" stands for "once a week"; "6" stands for "Several times a week"; "7" stands for "every day." The higher the score, the higher the degree of parenting burnout. Confirmatory factor analyses supported the theoretical four-factor structure of the PBA – emotional exhaustion in one's parental role, contrast with previous parental self, feelings of being fed up with one's parental role, and emotional distancing from one's children. Internal consistency for the total scale was excellent (Cronbach's  $\alpha \geq 0.90$ ) and for the subscales from acceptable ( $\alpha \geq 0.70$ ) to excellent. Roskam et al. (2018) employed the same scale. They found Parental Burnout Assessment (PBA) demonstrated strong validity. The study also confirmed factorial in-variance across different genders and languages. Additionally, the findings aligned with previous research, showing that psychological traits of parents, parenting dynamics, and family functioning contributed more significantly to variations in parental burnout than socio-demographic factors.

**Data Gathering Procedures** - Before the establishment of this research topic, the researcher had accumulated abundant research materials in practical work and life in thinking and discussing the mental health of parents of children with special needs. The researcher herself was the mother of an autistic child, and in the process of taking care of their child and getting along with parents of other children with special needs, she found that most parents of children with special needs often feel guilty, self-blame and helplessness, especially in the process of her children's education, she had a strong sense of frustration, and she was always under great pressure. It was difficult to feel the sense of harvest, expectation and happiness that parents should have, and even despair about the future. As a result, parents of children with special needs face more physical, psychological and social problems than parents of normal children and need more understanding and support from other family members, schools and society. In view of the above information, the researchers decided to investigate the status of self-esteem, parenting stress, and parenting burnout among parents of special needs children, and to explore the psychosocial factors associated with them. Through a review of a large number of relevant literatures, she found that parents of special needs children have low self-esteem, high levels of parenting stress and parenting burnout. The researcher believed that the family's economic situation and the child's illness are the key factors affecting parents' self-esteem, parenting stress and parenting burnout. Therefore, the research topic was determined by the researchers in consultation with the research supervisor.

The researcher conducted a data review on the self-esteem, parenting stress and parenting burnout of parents of children with special needs in the study, and randomly selected dozens of parents of children with special needs to ask them whether they currently had self-esteem setbacks, parenting stress and parenting burnout. On this basis, draft the research plan of the research topic, submit it to the supervisor for revision and discussion, and finally ask the supervisor for approval. The supervisor patiently guides the researcher to write the introduction of the paper researcher, reviews the relevant literature and methods, and finds the measurement tools that can be used as part of the research. The researcher also sent emails to the authors of the measurement tool he used, asking for their consent to use the questionnaire in his study. Then, taking into account the Chinese cultural background and language habits, the researchers will try to use the Chinese version of the relevant scale, or translate the English scale into Chinese to make it easier for Chinese participants to understand. At the same time, some parents were preliminarily interviewed to understand their willingness to participate in the study. After completing the above preparatory work, the researcher began to randomly distribute questionnaires to parents of children with special needs in 11 cities in Anhui Province, China, and plan to collect data from more than 300 parents in hospitals, rehabilitation facilities, and communities. After data collection, the respondents' answers were carefully recorded for statistical calculation, and then SPSS software was used to analyze the data. Finally, the data results are discussed and summarized.

**Data Analysis** - SPSS 1.0 was used for statistical analysis of the data. The statistical description of the counting data was expressed by frequency and percentage, the statistical description of the measurement data was expressed by mean  $\pm$  standard deviation, the comparison between groups of the counting data was performed by t- test, and the comparison between groups of unidirectional rank ordered data was performed by non-parametric test. Independent sample t test or one-way analysis of variance were used for inter-group

comparison of measurement data.  $P < 0.05$  was statistically significant.

**Ethical Considerations** - The study design was reviewed and approved by the University of the Philippines' Batangas Campus Ethics Committee before the study can proceed. This study resolutely protected the rights of the subjects and strictly followed the principles of ethics, voluntarism, confidentiality, and benefit without harm. The relevant ethical issues were taken into account. Before the questionnaire was issued, the subject test emphasized that the survey is anonymous and that the results were for the purpose of the study only and did not affect the respondents. Therefore, in doing this study, the researcher believed that parents of Children with special needs should be free to participate in the study without any pressure or coercion. They were able to withdraw from the study at any time without penalty and be fully informed of the nature of the study, the risks and benefits of participation, and their rights as study participants before agreeing to participate. This information should be provided in a clear and understandable manner. Similarly, the identities of the parents involved in the study were kept as confidential as possible. This meant that their names and other identifying information were shared with anyone outside the research group without their consent. In addition, the researcher carefully considered the potential harm to parents participating in their studies which was mostly the psychological damage. If there was any potential for harm, the researcher should take steps to minimize it.

### 3. Results and discussion

**Table 1**

*Respondent's Self-Esteem (n= 305)*

	Self Esteem			
	Mean	Std.	Rank	Interpretation
1.I feel that I am a valuable person, at least on the same level as others.	2.11	0.68	7.5	Inconsistent
2.I feel that I have many good qualities.	2.11	0.67	7.5	Inconsistent
3.At the end of the day, I tend to feel like a failure.	2.31	0.74	3	Inconsistent
4.I can get things done like most people.	2.07	0.60	10	Inconsistent
5.I don't think I have much to be proud of.	2.62	0.71	2	Consistent
6.I feel positive about myself.	2.08	0.63	9	Inconsistent
7.On the whole, I am satisfied with myself.	2.18	0.67	5	Inconsistent
8.I wish I could earn more respect for myself.	3.10	0.59	1	Consistent
9.I do often feel useless.	2.22	0.72	4	Inconsistent
10.I often think that I am nothing.	2.14	0.74	6	Inconsistent
<b>Self Esteem</b>	22.95	4.02		Below average
	( <i>md=23</i> )			

*Legend: 1.00 – 1.49 very inconsistent, 1.50 – 2.49 inconsistent, 2.50 – 3.49 consistent, 3.5 – 4.00 very consistent. Higher score indicates higher self esteem*

Table 1 shows the self-esteem levels and scores of parents with special needs children surveyed. Parents of children with special needs had the highest average score (2.620) on the self-esteem scale in order of "I don't think I have anything to be proud of"; "At the end of the day, I always feel like a failure" averaged 2.310; "I do often feel worthless" averaged 2.220; The average score of self-esteem of the 305 parents of children with special needs was 22.95, and the score of Standard Deviation was 4.02, which was lower than the average score and lower than the Chinese norm ( $T=25$ ). "I don't think I have much to be proud of" suggests that a significant number of respondents consistently feel they do not have much to be proud of, indicating a negative aspect of their self-esteem. Also, "I wish I could earn more respect for myself" indicates that many respondents consistently wish they could earn more respect for themselves, suggesting a prevalent desire for higher self-esteem and respect.

Results were aligned in the study of Sowislo et. al.,(2018) which revealed that individuals with high self-esteem have strong adaptability, the ability to better regulate their own psychological state, and are easy to experience positive emotions and feelings such as happiness, health and success. On the contrary, the lower the individual's self-esteem, the less the individual can adjust his or her psychological state, the more unpleasant emotions, depression, depression and so on. Studies have shown that the self-esteem of depressed patients is

lower than that of the control group. In addition, Yan (2023) confirmed that the lower the self-esteem of patients with bipolar depression and uni-polar depression, the more likely individuals are to appear pessimistic, hopeless, and even self-ideation, indicating that the lower the patient's self-esteem, the lower the patient's evaluation of self, will produce low self-esteem, self-blame, cannot accept themselves, on the contrary, if the patient's self-esteem is higher, the higher the evaluation of self, can better accept themselves. To make full use of self-protection strategy, in the face of the pressure and setback more able to take positive coping styles, can reduce the risk of suicidal.

Table 2

*Respondent's Parental Stress (n= 305)*

	Parental Stress			
	Mean	Std.dev.	Rank	Interpretation
Parenting Pressure	2.76	0.83	2	Not sure
Parent – child interaction disorder	2.43	0.94	3	Disagree
Difficult children	3.10	0.87	1	Not Sure
<b>Parental Stress</b>	<b>42.82</b>	<b>11.26</b>		<b>Below Average</b>
	<b>(md=44)</b>			

*Legend: 1.00 – 1.49 strongly disagree, 1.50 – 2.49 disagree, 2.50 – 3.49 not sure, 3.5 – 4.49 agree, 4.5 – 5.00 strongly disagree*

*Higher score indicate higher stress*

Table 2 shows the parenting stress and scores of parents with special needs children surveyed. The mean value of parenting pressure of children with special needs is 42.82, which is lower than the average level, indicating that parents of children with special needs do not have high parenting pressure. The finding that the mean value is lower than the average suggests that, contrary to common assumptions, parents of children with special needs in this sample do not experience high levels of parenting stress. This could indicate that these parents have effective coping mechanisms, support systems, or resources that help them manage the challenges of raising children with special needs. This result challenges the often-held assumption that parents of children with special needs invariably face higher levels of stress. It highlights the need for a nuanced understanding of the factors that contribute to or alleviate parenting stress in this context. Stated results contradict the study of Fu (2023) which pointed that parent of children with disabilities had shown above average level of parenting stress. Besides, Vess et. al.,(2022) emphasized that parents of children with special needs bear the least pressure in parent-child interaction disorder, which indicates that most parents can accompany their children more and form a good interpersonal relationship with their children.

Table 3

*Respondent's Parental Burnout (n= 305)*

	Parental Burnout			
	Mean	Std.	Rank	Interpretation
Exhaustion in one's parental role (contrast with previous parental self)	3.21	1.48	1	Once a month or less
Feelings of boredom of parental role	2.68	1.64	2	Once a month or less
Being fed up with the parental role	2.55	1.61	4	Once a month or less
Emotional distancing from one's children	2.63	1.59	3	Once a month or less
<b>Parenting Burnout</b>	<b>66.75</b>	<b>33.69</b>		<b>Above Average</b>
	<b>(md=58.00)</b>			

*Legend: 1.00 – 1.49 never, 1.50 – 2.49 several times a year, 2.50 – 3.49 once a month or less, 3.5 – 4.49 several times a month, 4.50 – 5.49 once a week, 5.50 – 6.49 several times a week, 6.50 – 7.00 every day*

*Higher score indicate higher degree of parenting burnout*

Table 3 shows the parenting burnout of parents with special needs children surveyed and their scores on various dimensions. The total mean of parenting burnout among children with special needs was 66.75, which was higher than the average. Parenting burnout includes four dimensions: parental burnout, parental self-contrast, parental burnout, and emotional alienation from children. Among the four dimensions of parenting burnout scale, parental burnout has the highest mean score (3.207). The second is the self-contrast of parents, both worth 2.682; Emotional distancing from children, both worth 2.633; The mean level of parental boredom was 2.545. The

higher-than-average total mean score of parenting burnout among parents of children with special needs underscores significant levels of exhaustion, self-doubt, emotional disconnection, and boredom. These insights emphasize the necessity for targeted, holistic support interventions to alleviate burnout and enhance the well-being of these parents.

The above results are consistent with the research results of Piotrowski et al. (2023) which revealed burnout of 0–6-year-old infants is at the medium level, and the mean level of parental exhaustion is significantly higher than other dimensions, while the mean level of emotional alienation from children is relatively low. This shows that compared with other dimensions, the main parenting burnout of parents of special needs children comes from the sense of exhaustion in the role of parents, which is because parents have to finish their work and support the family on the one hand, and take care of their children as parents on the other hand, so they are tired of the role. Moreover, Ren et al. (2020) disclosed the emergence of parenting burnout is mainly due to the long-term imbalance between risk factors and protective factors in the parenting process, and the mental stress, lack of sleep, physical labor and other risk factors easily caused by parenting burnout in daily life. In most cases, this is balanced to varying degrees by protective factors, including family support and understanding, and having enough time for relaxation.

**Table 4**

*Correlation Matrix of the Variables of the Study (N=305)*

	Parental Burnout			Parenting Stress		
	r	p-value	Int	r	p-value	Int
Self Esteem	.507	.000	HS	.525	.000	HS
Parental Burnout	-	-	-	.704	.000	HS
Parenting Stress	.704	.000	HS	-	-	-

*Legend: Correlation is significant at 0.05 alpha level,*

Table 4 shows the correlation between Self Esteem, Parental Burnout and Parenting Stress. It can be seen from the table that Self Esteem has a significant positive correlation with Parental Burnout ( $r=0.507$ ,  $P=0.000$ ). Self Esteem was positively correlated with Parenting Stress ( $r=0.525$ ,  $P=0.000$ ). Many studies have found that parents' own personal characteristics are highly correlated with parenting anxiety and parenting stress. The strong statistical significance ( $p=0.000$ ) suggests that these correlations are not due to random chance. Additionally, the researcher acknowledges that previous studies have similarly found a strong link between parents' personal characteristics, such as self-esteem, and their experiences of parenting anxiety and stress. This underscores the importance of considering individual psychological factors when addressing parental burnout and stress.

Results were aligned to the study of (Stenz et al., 2022). which revealed that parents' sense of parenting self-efficacy is an important factor influencing parenting stress level, and parents' belief in their own effective parenting can also be affected by stress level. Self-care is negatively correlated with parental stress, indicating that parents with lower levels of self-care have higher parenting stress. Moreover, this was attested by the study of Biclar et al. (2022) which revealed that the level of self-efficacy and self-care is strongly related to the level of self-esteem. Biclar et al. (2022) studied the psychological resilience of family caregivers of children with special needs and found that the level of psychological resilience of parents of children with special needs is generally low, the strength of internal psychological resilience factors can effectively predict the level of psychological resilience of caregivers with special needs children, and the level of individual self-esteem is the main factor of individual internal psychological resilience.

Parental Burnout was positively correlated with Parenting Stress ( $r=0.704$ ,  $P=0.000$ ). This suggests that as parental burnout increases, parenting stress also increases significantly. The high correlation coefficient (0.704) signifies a strong relationship between these two variables, and the extremely low p-value (0.000) indicates that this finding is statistically significant and not likely due to chance. This result highlights the interconnected nature of burnout and stress among parents, suggesting that interventions aimed at reducing parental burnout



could also help in alleviating parenting stress.

The result is consistent with Cheng et al.,(2023) findings that parenting stress in children with special needs is closely related to parenting burnout (Cheung et al., 2022). Parenting pressure will have a negative impact on the mental health of parents, and the psychological distress of parents will increase with the increase of parenting pressure (Thomas, 2024). Pinquart (2018) found that parenting stress of children with chronic diseases was significantly correlated with their mental health. Parents of children with ASD experience more psychological distress, parenting stress, and attachment-related anxiety than children without ASD. Studies have also shown that if parents' parenting pressure is not effectively dealt with and alleviated for a long time, it may also lead to parenting burnout (Roskam et al., 2019). Parenting burnout is the result of long-term failure to cope with parenting stress. Fathers' parenting stress is positively correlated with parenting burnout, and negatively predicts adolescents' mental health (Ping et al., 2022).

**Table 5**

*Regression Analysis of the Variables of the Study (n=305)*

Predictor	Dependent Variable	Std.error	Beta	Sig.	Interpretation
Self Esteem	Parental Burnout	.395	.191	.000	Predictor
Parenting Stress	Parental Burnout	.141	.603	.000	Predictor
Parental Burnout	Parenting Stress	.131	.227	.000	Predictor
Self Esteem	Parenting Stress	.016	.588	.000	Predictor

With Self Esteem and Parenting Stress of children with special needs as independent variables and Parental Burnout as dependent variables, multiple regression analysis was conducted. The results are shown in Table 9, and the regression equation of Parental Burnout for children with special surface needs has statistical significance.

Regression analysis showed that Self Esteem of parents of children with special needs had a significant positive predictive effect on Parental Burnout ( $B=0.191$ ,  $P<0.001$ ). The regression coefficient (B) of 0.191 indicates that for each unit increase in self-esteem, parental burnout increases by 0.191 units, holding other variables constant. The p-value being less than 0.001 ( $P<0.001$ ) signifies that this predictive effect is highly statistically significant, suggesting a very low probability that this result is due to random chance. This finding implies that higher levels of self-esteem are associated with higher levels of parental burnout, which might indicate that parents with higher self-esteem might also experience higher expectations and pressures, leading to greater burnout. Results were aligned with the study by Roskam et al.,(2023) which revealed that parents with a child with special needs displayed higher burnout and lower balance between risk and resources than the control group; parents with an adopted child had similar levels of both parental burnout and balance; and single parents had higher parental burnout but similar balance. These were affected the parents' level of self-esteem. Also, the study by Yuan et al. (2022) confirmed that parental burnout of the parents whose children were suffering from autism spectrum disorder was mediated or predicted by their self-esteem.

Regression analysis showed that Parenting Stress of special needs children had an extremely significant positive predictive effect on Parental Burnout ( $B=0.603$ ,  $P<0.001$ ), which was consistent with the results of most studies. The regression coefficient (B) of 0.603 indicates that for each unit increase in parenting stress, parental burnout increases by 0.603 units, assuming all other variables are held constant. The p-value of less than 0.001 ( $P<0.001$ ) signifies a very high level of statistical significance, indicating that the likelihood of this result being due to chance is extremely low. This strong positive relationship between parenting stress and parental burnout is consistent with the findings of most other studies, reinforcing the idea that higher levels of stress experienced by parents significantly contribute to higher levels of burnout.

Through Amos path analysis, Chinese scholar Ping et al. (2022) found that parents' parenting stress has a positive predictive effect on parenting burnout, and a large number of relevant studies on parenting burnout also support this view (Cheng et al., 2020), that is, the stronger the parenting pressure, the greater the degree of

parenting burnout of fathers. It is widely accepted that parenting is one of life's greatest joys and becoming a parent is one of life's most meaningful experiences (Pollmann-Schull, 2018). Indeed, many studies have shown that parental roles are associated with positive emotions and contribute to a person's happiness (Shoshani et. al.,2022). However, other studies have shown that parenting is a complex and arduous activity that can place a heavy burden on parents (Nomaguchi et. al.,2020) and ultimately lead to parenting stress (Roskam et al., 2019). Parenting stress is an inevitable part of parenting activities, but from a professional perspective, prolonged exposure to excessively stressful situations can lead to burnout when there are not enough resources to compensate for its negative effects (Mikolajczak et. al.,2018). Therefore, when the parenting pressure and coping resources of parents of special needs children are unbalanced for a long time, that is, when the pressure exceeds the resources, the parents are no longer satisfied with the role of the caregiver, and on the contrary, they feel bored, which will lead to a higher risk of parenting burnout.

**Table 6***Psychological Intervention Program*

Key Result Area	Program Objectives	Strategies/ Activities	Persons Involved	Success Indicators
Self-Esteem (Low)	Raise the level of self-esteem of parents with special needs children	<ol style="list-style-type: none"> <li>1. Strengthen the protection of the rights and interests of persons with disabilities through legislation and policy measures.</li> <li>2. Education and training courses for caregivers of exceptional children can be provided.</li> <li>3. Establish dedicated mental health support services.</li> <li>4. Establish a family support system to care for and assist the primary caregiver.</li> <li>5. Strengthen parents' self-care.</li> <li>6. set some reasonable goals and gradually achieve them.</li> </ol>	Government ; Family; Parents.	Parents of special needs children have higher levels of self-esteem.
Parenting Pressure (High)	To relieve the parenting pressure of parents of children with special needs.	<ol style="list-style-type: none"> <li>1. Strengthen the protection of the rights of children with special needs through legislation and policy measures, and provide economic assistance or subsidies to reduce the economic burden of families.</li> <li>Provide psychological counseling, psychotherapy and other services to families of special children.</li> <li>3. Establish support groups or networks for caregivers.</li> <li>4. establish effective home-school cooperation mechanisms.</li> <li>5. Foster open and honest communication within the family.</li> </ol>	Government ; Communities Schools; Family.	There is no significant difference in parenting pressure between parents of special needs children and parents of ordinary children.
Parenting Burnout (High)	Reduce parenting burnout among parents of special needs children.	<ol style="list-style-type: none"> <li>Provide education and training courses for caregivers.</li> <li>Recruit and train volunteers to provide family services such as family counseling, domestic service and short-term care.</li> <li>Regularly carry out rich family activities such as games, outings, and Tours to enhance feelings and connections.</li> </ol>	Government ; Communities Family.	There is no significant difference in parenting burnout between parents of special needs children and parents of ordinary children.

Table 6 describes psychological intervention programs for parents of special needs children with low self-esteem levels, high parenting stress, and parenting burnout. It is worth noting that in a large number of research literature and theoretical explanations, attribution style has a great impact on parents' self-esteem, parenting stress and parenting burnout. Therefore, this psychological intervention plan will also discuss the application of attribution style training.

In view of the low self-esteem of parents of children with special needs: (1)the government can strengthen the protection of the rights and interests of persons with disabilities through legislation and policy measures, ensure that children with special needs and their families can enjoy equal rights and opportunities, and reduce the social discrimination and unfair treatment they face; Education and training courses for caregivers of exceptional

children can be provided to help parents accept and understand their situation, including their child's special needs and possible challenges; Specialized mental health support services can be established, and when parents have severely impaired self-esteem or are unable to improve their self-esteem through self-regulation, counselors or psychologists can provide support and guidance to help them establish positive self-awareness and emotional regulation strategies that can improve their self-esteem. (2) The family can actively establish a support system to care for and help the main caregiver of the special needs child, thank him for his hard work, and affirm the child's progress and the caregiver's effort as much as possible. (3) For parents themselves, it is important to focus on self-care, including maintaining good health, actively participating in personal hobbies and interests, and keeping in touch with friends and family. At the same time, it is possible to set some reasonable goals and gradually achieve them, which can be related to the child or personal or professional for the parents, and when they achieve these goals, they can feel a sense of accomplishment and pride, thus boosting self-esteem.

In order to effectively alleviate the parenting pressure of parents of children with special needs:(1) the government can help families of children with special needs cope with the additional financial burden by providing economic assistance or subsidies, strengthen the protection of the rights of disabled persons to special education, medical security, employment rights and other rights through legislation and policy measures, and establish special mental health support services. Provide psychological counseling, psychotherapy and other services to families of special children. (2) Communities can establish support groups or networks for caregivers of exceptional children that provide a safe space for parents to share experiences, seek advice, and provide emotional support to each other, and can promote awareness and inclusive community and cultural activities to promote understanding and acceptance of exceptional children and their families. Improve social participation and integration of children with special needs and their families. (3) Schools can establish effective home-school cooperation mechanisms, maintain close contact with families of special children, share students' learning and behavior in a timely manner, and jointly develop learning goals and support plans. (4) Families can actively build support systems that foster open and honest communication within the family, allowing all members to express feelings, needs, and concerns, and allowing primary caregivers to talk, share experiences, and share caregiving responsibilities, thereby reducing stress.

In order to effectively alleviate the parenting burnout of parents with special needs children:(1) the government can provide education and training courses for caregivers of special children to help them master scientific knowledge and skills in nursing, education, mental health and other aspects. (2) The community can provide family services and resources, such as family counseling, domestic services, short-term care, etc., recruit and train volunteers to help caregivers of special children reduce the burden of care and provide them with rest and recovery time. (3) Families can regularly carry out rich family activities such as games, outings, and Tours to enhance feelings and connections, strengthen family relations, and create a positive family atmosphere and good memories.

#### **4. Conclusions and recommendations**

Self-esteem of parents of children with special needs were below average; parental stress was below average; and parental burnout was above average. There is a significant positive correlation between the self-esteem level of parents of children with special needs and parenting stress and parenting burnout, and there is also a significant positive correlation between parenting stress and parenting burnout, which means that higher parenting pressure will cause higher parenting burnout. Psychological intervention program for parents of children with special needs was proposed.

Employers may develop more flexible work policies, including telecommuting, flexible working hours, paid sick leave, etc., so that parents of children with special needs can better balance work and care responsibilities. Family members may share the responsibility of caring for children with special needs, assign specific tasks and responsibilities according to their respective abilities, strengths, interests and time, and jointly participate in the care work to reduce the burden of the primary caregiver. Education and training courses for caregivers of

Children with special needs may be provided to help parents accept and understand their situation, including their child's special needs and possible challenges. Specialized mental health support services may be established, and when parents have severely impaired self-esteem or are unable to improve their self-esteem through self-regulation, counselors or psychologists can provide support and guidance to help them establish positive self-awareness and emotional regulation strategies that can improve their self-esteem.

The government may help families of children with special needs cope with the additional financial burden by providing economic assistance or subsidies, strengthen the protection of the rights of disabled persons to special education, medical security, employment rights and other rights through legislation and policy measures, and establish special mental health support services. The government may provide education and training courses for caregivers of special children to help them master scientific knowledge and skills in nursing, education, mental health and other aspects. The community may provide family services and resources, such as family counseling, domestic services, short-term care, etc., recruit and train volunteers to help caregivers of special children reduce the burden of care and provide them with rest and recovery time. Future researcher may investigate the underlying mechanisms through which self-esteem influences parental burnout, may conduct longitudinal studies to track changes in self-esteem, parenting stress and burnout over time.

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