

Research Paper

## Parenting Stress and Self-compassion among Mothers during COVID-19 in Urban India: Investigating the Mediating Role of Psychological Inflexibility

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### ABSTRACT

**Rationale.** With social distancing and work from home the COVID-19 (WHO, 2020) pandemic has created a new reality for parents worldwide and brought along significant challenges in their lives. In particular, the process of mothering has been affected during the COVID-19 pandemic with higher physical and emotional labour and a greater responsibility for managing care of the children and household without the usual support system in place. **Objective.** The primary objective of the current study was to explore the mediating role of Psychological Inflexibility (PI) between the relationship of Parenting Stress (PS) and Self-Compassion (SC) among Indian mothers with children aged under 10 years during the COVID-19 pandemic. **Design.** Self-reported measures of PI, PS and SC through respective scales were used to collect data from  $N=552$  Indian mothers. **Results.** The data analysis was indicative of a positive relationship between Self-compassion and Parental Stress and Self-compassion and Psychological Inflexibility. Psychological Inflexibility was found to positively mediate the relationship between Parental Stress and Self Compassion with the mediating effect being close to 31%. **Conclusion.** Increased parenting stress could have propelled mothers to be more self-compassionate in order to cope with the stress induced by the pandemic.

**Keywords:** Indian Mother, COVID-19, Self-Compassion, Parenting Stress, Psychological Inflexibility.

COVID-19 has had many ramifications of the psychological health of individuals - from those experiencing social isolation and pandemic associated stress (Birditt, Turkelson, Fingerman, Polenick, & Oya, 2021) to those at the frontlines facing the direct brunt of COVID-related demands and stressors along with all else (De Kock et al.,

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2021). Countries across the world had suspended all businesses and services apart from the essential services and their citizens were forced into adapting their lives into the reality of staying locked inside houses and working-from-home, working-for-home, attending school-at-home, entailing a gamut of deleterious mental health implications such as increased anxiety (Grover, Sahoo, Mehra & Nehra, 2020), losing a sense of control (Calarco et al., 2020; Janssen et al., 2020; Prime et al., 2020; Spinelli et al., 2020), sense of insecurity (Arafat et al., 2020), loneliness (Killgore, Cloonan, Taylor, & Dailey, 2020) adding to the overall losses of the pandemic. These challenges have created increased awareness among clinicians (Pfefferbaum & North, 2020), and public health organizations (WHO, 2020; Center for Disease Control and Prevention, 2020), and set researchers in motion to understand the context of exacerbated stress and well-being of parents across the world affected by the pandemic (Achterberg, Dobbelaar, Boer, & Crone, 2021; Masten & Stefanidi, 2020, Spinelli et al., 2020, Spinelli et al., 2021, Cusinato, et al., 2020).

COVID-19 has had detrimental effects on many people including mothers (O'Reilly & Green, 2021) who have been particularly vulnerable - especially with the lockdown, lack of resources and additional responsibilities. Mothers have been doing the bulk of household chores and managing childcare, particularly those with young children, as well as managing their office work, if they are professionally employed, all in isolation, to sustain their families and communities. This situation potentially impairs their ability to be supportive caregivers and is consequently detrimental for children's well-being (Achterberg, Dobbelaar, Boer, & Crone, 2021; Cusinato, et al., 2020; Davenport, et al., 2020; Masten & Stefanidi, 2020, Spinelli et al., 2020, Spinelli et al., 2021) and furthermore has great implications on their physical, mental and emotional health during the pandemic (O'Reilly & Green, 2021; Shidhaye, Madhivanan, Shidhaye, & Krupp, 2020). Additionally, with the pandemic raging on, mothers are burdened with the task of homeschooling, due to online classes - the juggling act of pulling together so many shifts in a day for a long pandemic has certainly had implications on mothers' mental health (Guy & Arthur, 2020; Hamel & Salganicoff, 2020; Jungari, 2020). Majority of urban Indian households, especially where the mother is professionally employed, are found to rely on domestic help for household chores, cooking, cleaning (Dickey, 2000) and extended family members, daycares for their child(ren). To remain engaged in the active process of mothering with zero or very little support in these forms of under close to near impossible situations on a daily basis result in a depletion of personal resources (Coyne et. al, 2020, Davenport et al., 2020).

According to OECD (2020), Indian women spend an average of 536.6 min/d contrasted with an average of 442.3 min/d being spent by men on unpaid care work. Additionally, the International Labour Organisation reported the time poverty urban Indian women face while spending 312 minutes daily on unpaid care work compared to 29 minutes by men (ILO, 2018). Chauhan (2020) reported the gender disparities in care work in India with the sudden hike in overall workload of Indian women. Thus, with the disproportionate burden on the mothers especially during the COVID-19, it could be concluded that there are higher chances of the mother's stress being exacerbated.

Parenting stress (PS) has been defined as an aversive psychological reaction resulting from a mismatch between perceived parenting demands and available parenting resources (Deater-Deckard, 1998; Deater-Deckard & Scarr, 1996; Rantanen et. al. 2015). Many studies have discussed that parental stress has a long-lasting impact on the emotional and behavioural wellbeing of the child, inability to understand their child's needs and responding in sensitive

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ways (Abidin, 1992; Scaramella et al., 2008). Correspondingly, the everyday experiences of parents' stress and challenges of their roles as parents has been well documented (Abidin, 1997; Deater-Deckard & Panneton, 2017).

Even before COVID-19, parents have experienced stress in relation to their roles as parents, coupled with their inadequate access to the resources to meet the parenting demands and challenges (Crnic & Low, 2002; Deater-Deckard & Panneton, 2017). The global pandemic threw parents off-guard their usual parenting routines. Many of these daily routines played a protective role and could act as buffers for their mental health. Mothers have been disproportionately impacted by the transitions of working from home and performing their care work responsibilities during the pandemic (Yamamura & Tsutsui, 2021; Collins et al., 2020; Petts et al., 2020). Exposure to major and unpredictable stressful life events generally increases the risk of enhanced psychological distress for individuals in a parental role (Malia, 2006) impacting their mental health and well-being. A rapidly growing body of research on the impact of COVID-19 has noted clinically very high levels of parental stress (Calvano et al., 2021; Marchetti et al., 2020) along with high prevalence of depression and anxiety (Brown et al. 2020; Lee et al., 2021). Research on mothers highlighted higher stress levels, more parental burnout, and lower well-being, than their male counterparts (e.g., Cusinato et al., 2020; Kowal et al., 2020; Marchetti et al., 2020; Spinelli et al., 2020) during COVID-19. This was also associated with their perceived stress increasing as the number of children increased during the lockdown period (Kowal et al., 2020). To further this evidence, research needs to be conducted to see how parental stress has been impacted by the course of this pandemic.

Self-compassion (SC) put in simple words is compassion that is directed inwards and consists of mindfulness as opposed to over-identification with feelings, kindness to oneself as opposed to self-criticism, and common humanity or the phenomenon of being connected to the world-wide human experience of imperfection and torment rather than feeling isolated and alone (Neff 2003a; 2003b). It allows individuals to objectively examine their negative emotions and thoughts while keeping them from compulsively focussing on them (Neff, 2009). Self-compassion can become an important factor in challenging situations or when a person may be in distress, such as the COVID-19 pandemic. Few studies (Beato et. al., 2021; Kavakli et. al., 2020; Lau, et. al., 2020) conducted during the pandemic indicated that self-compassionate participants were found to have better mental health and be at less risk of depressive, anxious and stress symptoms during stressful life events such as COVID pandemic. Lau, et. al. (2020) found negative indicators of SC to intensify the impact of threat on psychological distress. Kavakli et. al. (2020) found SC to be an essential variable in coping with problems related to perceived threat and death anxiety associated with COVID 19. Nevertheless, these findings suggest the importance of SC as a healthy coping mechanism during COVID 19 pandemic.

Parenting has been thought to be a significant predictor of self-compassion (Pepping et al., 2015). Self-compassion is vital when it comes to mothering; since when a mother forgets to care adequately for herself, she may experience feelings of irritation, fatigue and maternal guilt - which could hinder her role as a mother (Bogels et al., 2010; Bogels & Restifo, 2014). Study by Neff & McGehee, (2010) has shown supportive and receptive parenting to be associated with the capability to be self-compassionate and self-soothing during periods of duress. Conversely, a lack of self-compassion and harsh self-critique have been related to stemming from clashing, cold and rebuffing family environments (Gilbert & Procter, 2006).

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Self-compassion has also been shown to be an important factor in greater and more stable psychological well-being, higher life satisfaction, reduced guilt along with lowering of stress levels in parents (Neff & Faso, 2015). A recent study by Whittingham & Mitchell (2021) found that lower levels of self-compassion correlated with reduced emotional availability; presence of self-compassion also lowered "burnout" and self-compassionate parents coped better (Bohadana, Morrissey & Paynter, 2019; Neff & Faso, 2015; Wong, Mak & Liao, 2016; Psychogiou et al., 2016).

Psychological inflexibility prevents humans from staying in the present moment and making changes according to their values (Hayes et al., 1999; Hayes et al., 2006). Through psychological inflexibility, individuals try to circumvent undesirable internal events like distressing emotions, negative thoughts and other private experiences. Post-Traumatic Stress Disorder (PTSD) symptom severity and psychological inflexibility have been tied together through multiple research studies (e.g., Cheng et al., 2021; Kashdan et al., 2009; Orcutt et al., 2005). Evidence (Hayes, Luoma, Bond, Masuda, & Lillis, 2006; Hayes et al., 2004; Jeffords et al., 2020) indicates that psychological flexibility acts as a protective factor in the prevention of PTSD and the development of other clinical conditions. Psychological inflexibility can interfere with recovery for traumatic experiences, thereby increasing stress levels in the individuals (Meyer et al., 2019). Research by Rueda and Valls (2020) has shown that in an American population with psychological disorders, patients adopted a denial coping mechanism to manage and regulate their experiences, having an indirect effect on psychological inflexibility. This lack of a healthy set of coping skills led to a worsening of physical and emotional duress amongst the individuals. Research (Wang, & Zhang, 2021) has shown and bolstered the importance of psychological inflexibility as a key variable in comprehending the phenomenon of psychological distress. Psychological inflexibility is strongly correlated with psychological distress, including depression, anxiety, stress and burnout (Sairanen, Lappalainen, & Hiltunen, 2018). Sairanen et al. (2018) studied parents of children with chronic conditions and found that psychological inflexibility is a potent indicator of psychological symptoms such as depression, anxiety, burnout, and stress. This data is congruent with numerous other studies (Kashdan et al., 2006), indicating that psychological flexibility in its reversed form, is a vital mechanism in psychological disorders.

Psychological inflexibility has been linked theoretically with the concept of self-compassion (Neff & Tirsch, 2013). Psychological inflexibility and self-compassion have been shown to mediate the outcome of emotional regulation amongst adolescents along with mindful parenting (Moreira & Canavarro, 2020). Boosting psychological flexibility enhances an individual's comprehension of human suffering. They are better able to take the perspective of another as well as themselves in understanding pain. This connects with Neff's (2003) discussion around common humanity as a component of self-compassion. Research (Ong et al., 2019) has indicated that psychological inflexibility and self-compassion as processes of change, have exact mediating effects on variables such as concern over mistakes and quality of life. Research with college student samples has shown a significant amount of shared variance between psychological flexibility and self-compassion across metrics of anxiety, depression and stress (Marshall & Brockman, 2016; Woodruff et al., 2014). Data (Meyer et al., 2018) also stipulates those higher levels of mindful awareness, which consists of mindfulness, self-compassion, and psychological flexibility, impact quality of life over time. The substantial and unprecedented increase in overall workload at both personal and professional fronts for mothers can adversely impact mothers' well-being (Calarco, et. al.,

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2020). Mothering responsibilities such as caring for and loving their children are found to collapse under stress, especially in the face of a challenging time (Coyne et al., 2020; Corbett, Muscatello, Klemencic, & Schwartzman, 2021; Calvano et al., 2021). Elements of self-compassion have been proven to alleviate stress (Allen & Leary, 2010; Neff & Faso, 2015). The exponential increase in workload and stress that COVID-19 has brought in the lives of mothers has not been deliberated fully in the larger Indian psychosocial discourses. Self-compassion can however function differently across cultures and communities (Neff, Pisitsungkagarn, & Hsieh, 2008) and therefore there is a need to study the relationship in Indian (non-western) contexts observe whether the established patterns of self-compassion are common across cultures. Also, there is limited knowledge on the relationship between the psychological inflexibility, parental stress and self-compassion in Indian literature and further the association of these characteristics in the context of COVID-19 is the need of the time. It is imperative to study parental stress in the context of adaptive coping mechanisms such as self-compassion in mothers especially under the context of the pandemic. Therefore, the current study aims to investigate the relationship between Parenting Stress and Self-Compassion as experienced by mothers and to assess the mediating effect of Psychological Inflexibility between the two, during the second wave of the COVID-19 pandemic in India.

### **METHOD**

#### *Participants*

The participants of the study were 552 Indian urban mothers of children below the age of ten years living with them during the period of the lockdown (March 2021 - June 2021) enforced in India in response to the COVID-19 pandemic. Their socio-demographic details are provided in Table 1. The study received ethical clearance from the Institute Review Board of XXXX, University, India.

#### *Procedure*

Following the COVID-19 protocols of mobility restrictions in India, data were collected through an online survey between March 2021 - June 2021 using semi-structured questionnaire schedule. The survey schedule included information on socio-demographic characteristics followed by three scales (set of questions/items) used to measure PS, PI and SC of the Indian mothers. The survey form along with the web link was shared widely through the means of social media such as Instagram, Facebook, and Whatsapp. The respondents were selected through snowball sampling, by locating prospective participants. The benefit of using this method of sampling lies in being able to choose 'information-rich cases' (Patton, 1990), in this case, mothers of children aged ten and below residing in India. This process allowed for a wider reach of participants for the study, where the participants were identified, located and asked for referrals for respondents – the researchers reached out to friends, family and acquaintances to be part of the study by this process.

#### *Measures*

The study used self-reported measures to explore the psychological constructs by employing the following measures as below.

To measure Parenting Stress, the Parental Stress Scale developed by Berry & Jones, (1995) was used. It consists of 18 items that assesses positive components (e.g., emotional benefits, self-enrichment, and personal development) as well as negative components (e.g., resource demands, opportunity costs, and limitations) of parenthood through statements like "Caring for my child(ren) sometimes takes more time and energy than I have to give" the measure that assesses positive and negative components of parenthood. The items in the

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scale are rated using a 5-point Likert scale and therefore the parental stress scale ranges between 18 and 90. Cronbach's  $\alpha$  0.84 indicated adequate internal consistency.

PI was measured using the Acceptance and Action Questionnaire (AAQ-II, Bond et al., 2011); a seven-item questionnaire intended to assess psychological inflexibility. An example of items of the scale is "I worry about not being able to control my worries and feelings". The total score ranges from 7 to 49. Items are rated on a seven-point Likert scale ranging from 1 (never true) - 7 (always true). The total score is computed by adding responses for each item, higher score indicating more inflexibility. Cronbach's  $\alpha$  .84 was indicative of adequate internal consistency (Bond et al., 2011).

The Self-Compassion Scale-Short Form (SCS-SF; Raes et al., 2011) was used to measure SC. The scale consists of 12 statements divided over six subscales corresponding to six components of SC; Self-Kindness, Self-Judgement, Common Humanity, Isolation, Mindfulness and Over-Identification. An example of items of the scale is "When something painful happens I try to take a balanced view of the situation." The total score on this scale ranges from 12 to 60. Items are rated on a five-point response scale ranging from 1 (almost never) to 5 (almost always). A total self-compassion score is computed by reversing the negative subscale items and then adding all subscale scores. SCS-SF has demonstrated a near-perfect correlation with the long form of SCS ( $r \geq .097$ ; Raes et al., 2011). Thus, it has been found that the SCS-SF is a valid and reliable alternative to the long-form SCS, particularly when studying overall self-compassion scores (Raes et al., 2011). The Cronbach's  $\alpha$  for the current study was 0.85 indicating adequate internal consistency.

### **Analytical Plan**

The data were analysed using STATA version 16. Internal consistency of the items of each scale was examined using the Cronbach's  $\alpha$  statistics. Since the variables were continuous in nature, the normality of the distribution was assessed using the Shapiro-Wilk Test. The scales were not normally distributed and hence, were log-transformed to make the distribution normal. The descriptive statistics: mean and Pearson correlation coefficients were calculated for the scales used. The difference in the mean values of the scale was measured using t-test. This was followed by the simple unadjusted linear regression between SC (dependent variable) and PS and PI (independent variable). Furthermore, mediation analysis was used as a tool to explore the role of PI between the relationship of PS and SC. For the mediation analysis, SC was the dependent variable, and PS as the independent variable while PI was considered to act as a mediating variable between SC and PS. The significance of the association and relationship measured using the mediation analysis has been assessed using the Sobel test. All the significance were assessed at 5% level of significance.

## **RESULTS**

The sample for the current study consisted of 552 Indian mothers in the age range of 22 – 47 years ( $M = 34.45$ ,  $SD = 4.13$ ). The percentage distribution of the women with background characteristics is presented in Table 1. Of the respondents, the majority (around three-fourth) women were aged between 31-40 years. Around 62% of the selected women had educational level of post-graduation or above. Less than one-third of the women were homemakers and around 41% were working full time. Majority of the women were residing in the nuclear family (64%), and most of the household had one child (70%). More than half

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of the children residing were school going children. COVID-19 had impacted the daily routine of the majority of the children (93%).

**Table 1: Percentage distribution of Background characteristics of the selected women.**

<b>Characteristics</b>	<b>Percentage</b>	<b>N (=552)</b>
<b>Age of Woman</b>		
Less than 30 years	17.93	99
31 to 40 years	73.73	407
Above 40 years	8.33	46
<b>Educational Status</b>		
Graduation or below	37.68	208
Post-graduation	62.32	344
<b>Employment Status</b>		
Homemaker	32.61	180
Part time	26.81	148
Full time	40.58	224
<b>Whether Work from home</b>		
Yes	58.15	321
No	41.85	231
<b>Type of Family</b>		
Nuclear	63.59	351
Joint	36.41	201
<b>No. of children staying in Household</b>		
One	69.75	385
Two	27.54	152
more	2.72	15
<b>Age of Children</b>		
0-2 years	22.83	121
3-5 years	33.4	177
6+ years	43.77	232
<b>Children going to school</b>		
Yes	56.7	313
No	43.3	239
<b>Impact of COVID on Children routine</b>		
No change	7.25	40
Routine hampered	92.75	512
<b>Women spending time with Children</b>		
No	8.15	45
Yes	89.31	493
Child too young (less than one year old)	2.54	14

The mean value of log-transformed SC, PS and PI scale was 3.67, 4.15 and 3.17 respectively (Table 2). The difference in the mean values of the scale were statistically significant with the highest mean score for parenting stress. However, the dispersion (measured using the standard deviation) was higher for psychological inflexibility followed by self-compassion and parenting stress. The results of correlation analysis indicated that self-compassion was positively associated with both parenting stress ( $r=0.19$ ,  $p<0.001$ ) and psychological inflexibility ( $r=0.23$ ,  $p<0.001$ ). Also, a positive association between parenting stress and psychological inflexibility ( $r=0.32$ ,  $p<0.001$ ) was observed.

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**Table 2: Correlation coefficient and descriptive statistics of self-compassion, parenting stress and psychological inflexibility scales.**

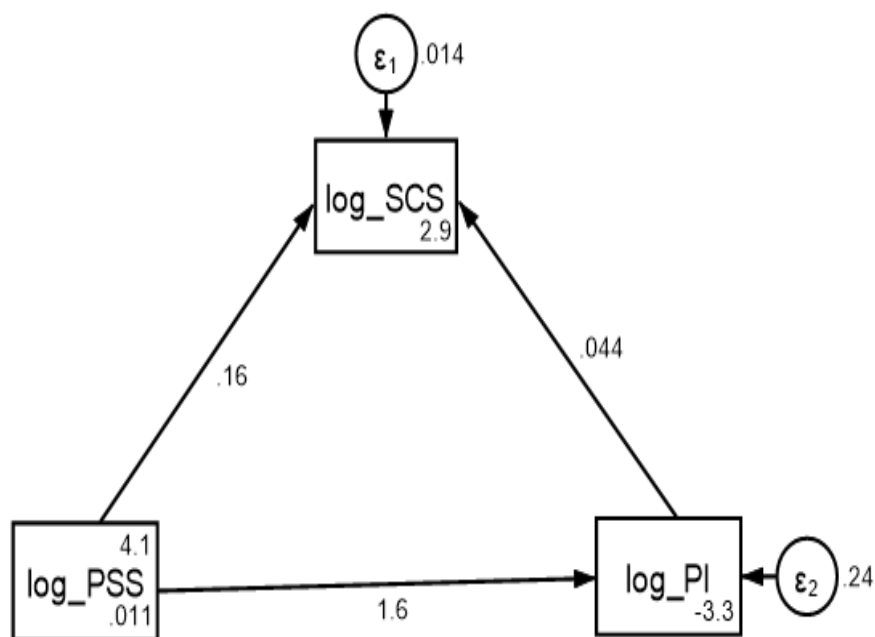
Scales	Correlation Coefficient			Descriptive Statistics	
	log(PI)	log(SC)	log(PS)	Mean	SD
log(PI)	1	0.23*	0.32*	3.17	0.51
log(SC)		1	0.19*	3.67	0.12
log(PS)			1	4.15	0.11

\* $p$ -value < 0.05; SD=Standard Deviation; SC= Self-Compassion; PI= Psychological Inflexibility; PS= Parenting Stress

The simple linear regression result indicated a positive relationship of both parenting stress and psychological inflexibility with self-compassion (result not shown).

According to the mediation analysis, an increase in one unit of log value of PS and PI results in an increase of 0.22 (95% CI: 0.13, 0.32) and 0.04 (95% CI: 0.02, 0.06) units increase in log-SC score (Figure 1 and Table 3). Also, an increase in one unit of log-PS resulted in an increase of 1.57 units (95% CI: 1.19, 1.95) of log-PI. Further, the mediation analysis indicates that PS has not only the direct effect on SC ( $\beta=0.16$ ; 95% CI: 0.06, 0.25) but has indirect effect ( $\beta=0.07$ ; 95% CI: 0.03, 0.11) through PI as well. The mediation analysis indicates the mediation of the relationship between SC and PS through PI. Around 31% of the effect of PS on SC is mediated due to PI. Further, the mediated effect of PI is 0.4 times as large as the direct effect of PS on SC

**Figure 1: Mediation model of Self-compassion with Parenting stress and Psychological inflexibility.**





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**Table 3: Regression coefficients of relationship of parenting stress and psychological inflexibility with self-compassion.**

Path	Coefficient	Std. Error	95% CI
log(PI) --> log(SC)	0.044*	0.010	0.023 - 0.064
log(PS) --> log(SC)	0.155*	0.050	0.057 - 0.254
log(PS) --> log(PI)	1.570*	0.196	1.186 - 1.953
Sobel test	0.059*	0.015	0.029 - 0.090

*\*p-value < 0.01; Std. Error=Standard Error; SC= Self-Compassion; PI= Psychological Inflexibility; PS= Parenting Stress; Coefficient of Sobel test is the indirect effect.*

## DISCUSSION

Research has found that despite the lockdown making both Indian men and women spend more hours on their daily chores, women, particularly mothers, were responsible for shouldering the larger chunk of household and childcare duties (Deshpande, 2020a). The raging pandemic has magnified the already existing inequality of care-work and household responsibilities, where Indian women are pushed towards choosing or prioritising family roles over professional ones (Aryee, et. al., 2005; Buddhapriya, 2009) along with their identities being tied intrinsically to their roles as mothers (Oxfam India, 2020). The increased physical and emotional labour coupled with this disproportionate burden on mothers (Alon et al., 2020; Calarco et al., 2020; Deshpande, 2020a, 2020b; Power, 2020; United Nations [UN], 2020), without having access to much external help in the form of domestic workers (Basnet & Sandhya, 2020) or schools and day-care. All of these have had implications on a mother's mental health (Hamel & Salganicoff, 2020; Jungari, 2020).

Research studies on the impact of COVID-19 are indicative of clinically high levels of parental stress (Calvano et al., 2021; Marchetti et al., 2020) along with high depression and anxiety (Brown et al. 2020; Lee et al., 2021). Research on mothers specifically, highlighted higher stress levels, more parental burnout, and lower well-being, than their male counterparts (e.g., Cusinato et al., 2020; Kowal et al., 2020; Marchetti et al., 2020; Spinelli et al., 2020). Although studies have explored dimensions of concerns from the Indian context such as the perinatal mental health care for women with severe mental illness (Nagendrappa et al., 2021), family planning and abortion services during COVID-19 (Sharma, Zangmo, Kumari, Roy & Bharti, 2020), perceived stress and psychological well-being among working mothers (Kapoor et al., 2021), maternal mental health (Jungari, 2020), women's burden of unpaid care work during the pandemic (Chauhan, 2020), there have not been any studies conducted on Indian mothers towards investigating their PS and SC through the mediating effects of PI to the knowledge of the authors of this paper and thus highlighting its seminal nature.

Over two-thirds of the mothers in the study were professionally employed, and the majority were employed full-time, while more than one-fourth were employed part-time and nearly one-third were homemakers. Findings from the current study indicated a positive association of self - compassion with parenting stress. Data for the current study was collected between March 2021- June 2021 which was a period associated with high stress due to COVID-19 and that might have contributed to increased PS. Mothers had to adapt to transitions of

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working from home and performing their care work responsibilities (Yamamura & Tsutsui, 2021; Collins et al., 2020; Petts et al., 2020) coupled with inadequate access to the resources to meet the parenting demands and challenges (Crnic & Low, 2002). Recent literature on parents noted the changes in stress and well-being of parents across the world affected by the pandemic (Achterberg, Dobbelaar, Boer, & Crone, 2021; Babore et al., 2021; Cusinato, et al., 2020; Masten & Stefanidi, 2020, Spinelli et al., 2020, Spinelli et al., 2021) which may have a long-lasting impact on the emotional and behavioural well-being of the child, inability to understand their child's needs and responding in sensitive ways (Abidin, 1992; Babore et al., 2021; Chung, Chan, Lanier, & Wong, 2020; Scaramella et al., 2008).

SC across various studies has been associated with lower negative emotional experiences like anxiety, depression and stress (Beato et. al., 2021; Lau, et. al., 2020; Kavakli et. al., 2020) and an important factor in experiencing stable psychological well-being, higher life satisfaction, reduced guilt along with lowering of stress in parents (Neff & Faso, 2015). SC has also been proposed to be one of the most promising individual resources to coping adaptively with COVID - 19 (Beato et. al., 2021). Research (Neff & McGehee, 2010) has shown supportive and receptive parenting to be associated with the capability to be self - compassionate and self - soothing during periods of duress. Presence of self - compassion also lowered "burnout" and self-compassionate parents coped better (Bohadana, Morrissey & Paynter, 2019; Neff & Faso, 2015; Wong, Mak & Liao, 2016; Psychogiou et al., 2016). While mothers in the study experienced tremendous stress in these trying circumstances, it is possible that they may have made attempts to cope with it by being self-compassionate.

Findings also indicated a positive association between self-compassion and psychological inflexibility and parenting stress and psychological inflexibility. PI has not been studied extensively in literature. There are very limited studies that explore PI with other psychological variables, especially with PS and SC. PI has often been linked with distress across studies (Cheng et al., 2021; Hayes et al., 1999; Hayes et al., 2004; Hayes et al., 2006, Kashdan et al., 2009; Orcutt et al., 2005; Sairanen, Lappalainen, & Hiltunen, 2018) consistent with current findings. High psychological flexibility has been shown to aid with countering risks and overcoming challenges (Jeffords et al., 2020). However, there are few studies that explore the association between PI and SC. PI and SC have been studied as mediating variables between other psychological variables (Ong et al., 2019; Moreira & Canavarro, 2020).

Mediation analysis from the current data indicates that PS not only has the direct effect on SC but also has indirect effect through PI; close to 31% of mediating effect which is 0.4 times as large as the direct effect of PI on SC. Findings are indicative of the possibility of the effects of psychological inflexibility, which is maladaptive in nature, potentially increasing parental stress, thereby propelling mothers to be more compassionate towards themselves. However, authors identified the highly stressful situation during which the data was collected towards such a result. Therefore, it is recommended to employ qualitative methods to understand the relationships between the variables better and further studies across different situations to appreciate the interplay of the variables across varying levels of stress.

## CONCLUSION

Findings were indicative of a positive relationship between Self-compassion and Parental Stress and Self-compassion and Psychological Inflexibility. Psychological Inflexibility was also found to mediate the relationship between Parental Stress and Self-compassion with the mediating effect being around 31%. Self-Compassion is known to be a promising coping mechanism in times of duress. Owing to the high amount of stress mothers experienced during the pandemic, high Self-compassion scores could be indicative of their efforts to be self-compassionate. Psychological Inflexibility has been associated with distress, which in the current situation could have added to the stress experienced, thereby requiring higher need for adaptive coping.

### *Limitations*

The present study was subjected to some limitations. First, the data collected from a sample of educated mothers largely from urban areas during a period of immense stress limits the generalizability of the findings in diverse populations in the community samples. Future research may examine if the findings of this study can be generalised with the clinical sample of mothers suffering from common mental health disorders such as depression, stress, and anxiety. Second, since the study is based on self-reported cross-sectional data, the findings should be interpreted with usual caution in place. Future research can be conducted from a longitudinal perspective to establish the results. Through this paper, we have presented preliminary evidence of the interactions between the variables - self-compassion, parenting stress and psychological inflexibility. We hope future research is going to be conducted to join the current stream of literature and add to the study findings through different methodologies.

### *Implications and Future Research*

Studies in less stressful situations can help understand the interaction of the variables in other contexts. Further qualitative analysis could help understand these micro-processes better in mothers who are prone to experiencing stress and challenges during the early years of their parenting journeys. Psychological inflexibility can be investigated further in the context of mindfulness-based interventions and self-compassion (Hayes et al., 1999; Sharif Mohammadi, Chorami, Sharifi, & Ghazanfari, 2020). Longitudinal studies may be required to measure the protective power of self-compassion over time. It may be helpful to conduct a qualitative analysis to understand the underlying mechanisms behind the relationships between variables. It may also offer some insights specific to the unique experiences of each Indian mother.

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