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Support Programmes for Parental Burnout: An Analysis of Current Interventions and Directions for Future Development

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Summary

Objective: Parental burnout is a syndrome of parental exhaustion resulting from chronic stress and a lack of adequate support systems. It develops in situations where there is an imbalance between protective factors (considered as resources) and risk factors (Mikolajczak & Roskam, 2018; Roskam et al., 2021). Interventions for parents are designed assuming that they should focus on mitigating the impact of risk factors while strengthening and expanding resources (Brianda et al., 2019).

This article aims to critically analyse research on the effectiveness of support programmes for burned-out parents and to discuss directions for future development. Approximately 1 in 13 (7.7%) parents in Poland experiences burnout (Roskam et al., 2021), highlighting a significant need for support in this area.

Method: An analysis of relevant literature identified several studies on the effectiveness of interventions for burned-out parents. These encompass directive, non-directive, and hybrid interventions (Brianda et al., 2019, 2020; Piotrowski, Sanna et al., 2026), as well as those based on stress coping techniques (Urbanowicz et al., 2023), mindfulness practices (Bayot et al., 2024; Piotrowski, Sanna et al., 2026; Urbanowicz et al., 2024a), and positive psychology (Urbanowicz et al., 2024b).

Results: The proposed interventions are primarily based on a model of eight weekly sessions. The data obtained indicate a reduction in parental burnout levels across all interventions, with three- and six-month longitudinal follow-up assessments demonstrating the maintenance of this effect. The online (synchronous) interventions were effective, with effects comparable to those reported for in-person programmes.

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Conclusion: Despite promising results indicating an improvement in parents' condition following participation in an intervention programme, it remains unclear which of the proposed components can be considered the most effective. Given that the majority of participants were women with higher education, it remains unknown how effective these programmes are in other groups.

Keywords: parental burnout, intervention programmes, parenting, mindfulness, stress

Parenting is one of the most demanding developmental tasks, not only due to its prolonged duration but also because of the significant burdens parents have to bear (e.g. psychological, economic, and time-related) and the stress associated with raising children (Godawa, 2022; Mandecka, 2019). The parental role is unpredictable in many aspects and requires considerable flexibility and strong adaptive skills in dynamic situations (Urbanowicz, 2022). It also imposes immense pressure on the parent and demands a strong commitment to the child's well-being and development (Bakiera, 2013a, 2013b). Of course, being a parent is also associated with positive experiences; however, some parents perceive the balance of costs and benefits related to this role as unfavourable. A sense of over-involvement may emerge, leading to growing physical, emotional, and cognitive exhaustion. These, if accompanied by dissatisfaction with the parental role, emotional distancing from children, and an increasing sense of guilt related to the inability to live up to one's aspirations concerning the parental role, can be identified as symptoms of parental burnout (Mikolajczak et al., 2019; Schittek et al., 2024). It is a state of chronic imbalance between the demands of the parental role and the resources and support opportunities available (Mikolajczak & Roskam, 2018). The consequences of burnout affect the parent (e.g. a higher risk of suicidal ideation, anxiety and/or depression symptoms, sleep difficulties (Mikolajczak et al., 2018; Mikolajczak et al., 2019)), the child (e.g. poorer academic achievement, increased risk of mental health problems (cf. Chen et al., 2022; Song et al., 2024; Wang et al., 2023)), and the parent-child relationship (e.g. higher levels of aggression and violence (Hansotte et al., 2021)). Parental burnout also negatively impacts the relationship with the co-parent or partner, leading to increasing and more intense conflicts (Gillis & Roskam, 2019), and reduced desire to have another child (Bogdán et al., 2025).

Parental burnout emerges after a period of heightened stress. Following the onset of exhaustion (not only emotional but also physical and cognitive), the remaining symptoms—dissatisfaction with the parental role, emotional distancing, and the dissonance between the parent one aspired to be and the parent one actually is—escalate rapidly (Kalkan et al., 2023; Schittek et al., 2024).

Up to 1 in 10 parents in the general population of Western countries experiences parental burnout (Roskam et al., 2021), with the figure rising to 1 in 3 (36%) among parents of children with disabilities (Lindström et al., 2011). In Poland, approximately 7.7% of parents in the general population report experiencing burnout (Roskam et al., 2021), making it the third-highest prevalence among the surveyed countries. Further, Polish parents exhibit the highest mean

burnout scores (Roskam et al., 2021). Polish studies on parents of children with disabilities and chronic illnesses also confirm elevated levels of burnout among this group (Dzielińska et al., 2024). Given the significant percentage of parents experiencing burnout in Poland, this issue is actively addressed in research. Ongoing studies explore various parameters, including the relationship between regret and parental burnout (Piotrowski, Mikolajczak, Roskam, 2026), parental identity and burnout among parents of disabled children (Dzielińska & Piotrowski, 2026), perfectionism and its association with burnout (cf. Lin et al., 2022, 2023b), as well as mentalisation and burnout (Kamza et al., 2026). International, comparative, cross-sectional, and longitudinal studies are being conducted. The scope of this article does not permit a broader discussion of Polish scientists' research on parental burnout. The aetiology of parental burnout is most commonly explained by the model of an imbalance between resources and protective factors, and demands and risk factors (Mikolajczak & Roskam, 2018). Therapeutic programmes and various interventions aimed at burned-out parents are also based on this model. This approach stems from the assumption that parental burnout is a state of chronic stress that exceeds coping capacities, resulting from a prolonged imbalance between demands and resources. Optimising resources and mitigating risk factors can positively influence parents' well-being (Bayot et al., 2024; Brianda et al., 2019, 2020). However, it is crucial to determine what increases or decreases the likelihood of parental burnout, as well as the strength of the impact of individual variables. Reviews and studies (cf. Mikolajczak et al., 2018; Mikolajczak et al., 2023; Rén et al., 2024) indicate that sociodemographic factors (i.e. age, number of children, number of hours spent with children) are less important than individual-related variables (e.g. perfectionism, neuroticism) or family-related variables (e.g. breakdown of family bonds). According to M. Mikolajczak and her team (2018), approximately 3% of the variance is explained by sociodemographic variables, about 22% by variables related to parental traits (e.g. emotional stability), about 45% by variables concerning parenting practices (e.g. a sense of inefficacy, harsh parenting practices), and roughly 29% by variables describing the family (e.g. marital dissatisfaction). The multidimensionality of the studied variables and their mutual interactions are increasingly emphasised (cf. Lin et al., 2023). In summary, despite numerous studies in this field, many questions remain unanswered—for example, the extent to which the cultural environment alters the role of specific variables and whether the observed effects are causal rather than correlational remain unclear (Mikolajczak et al., 2023). Hence, selecting the variables on which programmes should be based presents certain challenges. Further, while there is significant interest in parental burnout research and the number of publications in this field is growing, only a few studies evaluate the effectiveness of programmes for burned-out parents.

This article aims to critically analyse research on the effectiveness of support programmes for burned-out parents and to discuss potential directions for future development. This review does not meet the criteria for a systematic review. To gather materials, available databases were searched using the keywords interventions, parental burnout, and support programmes, alongside the meta-analysis by Urbanowicz and colleagues in both its versions (Urbanowicz, 2022;

Urbanowicz et al., 2026) This article consists of two main sections: the first discusses interventions available to burned-out parents (specifically those aimed at reducing burnout symptoms), while the second discusses and identifies potential avenues for future development.

A meta-analysis of intervention programmes (Urbanowicz et al., 2026) identified 15 studies encompassing 18 interventions, including 13 published studies[2]. Compared with its earlier version, included in the doctoral dissertation (Urbanowicz, 2022), there has been a significant increase in the number of published studies for the general population, from two to six. The remaining studies targeted groups of parents of children with disabilities or chronic illnesses (cf. Lappalainen et al., 2021)—for example, type 1 diabetes (Lindström et al., 2016), cancer (Beheshtipour et al., 2016), intellectual disability (Bilgin & Gozum, 2009), chronic illness and/or disability (Anclair et al., 2018), or disability in general (Masoumi et al., 2020). In one study, the group of parents was heterogeneous, comprising parents of children with various conditions, including chronic illnesses, developmental disorders (e.g. autism spectrum), and genetic diseases (Sairanen et al., 2019). This intervention took the form of individual online sessions with the option to participate in a discussion forum. Generally, these interventions reduced burnout symptoms. Given that these studies were conducted among groups of parents facing specific difficulties (e.g. related to the necessity of providing care significantly exceeding the level of support required by typically developing children), they will not be discussed in detail. Further, parental burnout was conceptualised and measured differently across these studies.

To date, six studies evaluating the effectiveness of interventions targeted at parents from the general population have been identified. Key information regarding these studies is presented in Table 1.

The table does not include a study dedicated to the evaluation of the CBSM programme by burned-out parents. This study is unpublished and does not investigate a new intervention but focuses on the participants' evaluation thereof (cf. Urbanowicz, 2022).

Programmes for Burned-Out Parents: From "Parenting in Balance" to Mindfulness Techniques

The initial studies on programmes for burned-out parents were conducted between 2017 and 2018 in Belgium (Brianda et al., 2019). These studies evaluated the effectiveness of two types of intervention programmes, each consisting of eight weekly sessions lasting approximately two hours. Two interventions were compared: directive and non-directive. Directive intervention involved structured, well-defined activities led by therapists aimed at restoring balance

[2] Despite communicating with the first authors of the unpublished studies, including one from Poland, detailed data that would enable a description of the core components of the investigated interventions could not be obtained.

Table 1

Summary of Available Interventions for Burned-Out Parents

Authors	Evaluated Intervention	Total Participants in the Intervention Group* (pre-test/ post-test/follow-up)	Mean Level of Parental Burnout (pre-test/post-test/ follow-up)	Control Group	% with Higher Education (Bachelor's, Master's, or Higher)	% Female	Intervention Duration
Brianda et al., 2020	Directive (DI) vs. Non-Directive Intervention (Non-DI)	DI 77/ 60/ 49 Non-DI 65/ 47/ 47	DI *M* = 86.49 *SD* = 29.8 *M* = 61.4 *SD* = 33.7 *M* = 54.1 *SD* = 33.4 Non-DI *M* = 73.12 *SD* = 30.4 *M* = 64.25 *SD* = 35.3 *M* = 50.70 *SD* = 31.3	Waitlist Control Group	DI: 75.3% Non-DI: 67.7%	DI: 88.3% Non-DI: 89.2%	8 weeks, once a week
Urbanowicz et al., 2023	CBSM	86 / 67 / 35	*M* = 53.9 *SD* = 28.6 *M* = 42.9 *SD* = 27.6 *M* = 44.5 *SD* = 25	Waitlist Control Group	91%	94%	8 weeks, once a week + interviews
Bayot et al., 2024	MCA PBP	MCA 32/28/23 PBP 29/21/20	MCA *M* = 90.83 *SD* = 30.3 *M* = 70.12 *SD* = 30.1 *M* = 65.46 *SD* = 35 PBP *M* =87.2 *SD* = 31.68 *M* = 60.85 *SD* = 28.2 *M* = 57.35 *SD* = 32.9	PBP	MCA 92.8% PBP 90%	MCA 89.3% PBP 85%	8 weeks, once a week + follow-up after 3 months
Urbanowicz et al., 2024a	FOVEA	15/15 -	*M* = 61.3 *SD* = 29.7 *M* = 39.8 *SD* = 24.0 –	Waitlist Control Group	66.7%	80%	8 weeks, once a week
Urbanowicz et al., 2024b	CARE	17/17 / -	*M* = 50.7 *SD* = 32.1 *M* = 34.0 *SD* = 22.4	Waitlist Control Group	47.1%	94.1%	8 weeks, once a week
Piotrowski, Sanna et al., 2026	PBP online MBCT online	MBCT: 40 / 32 / 30 / 33 PBP 40 / 33/34/31**	*M* = 82.48, *M* = 53.06 *M* = 46.84, *M* = 37.82 PBP *M* = 77.38, *M* = 52.9 *M* = 43.83, *M* = 43.48	Waitlist Control Group	–	100%	8 weeks, once a week, online

* The number of participants refers to those who completed the baseline questionnaires, rather than those who initially enrolled in the study.
** This is the only study in which follow-up assessments were conducted at both 3 and 6 months post-intervention.

by reducing the impact of stressors and optimising the parent's resources. In contrast, non-directive intervention focused on the therapeutic role of group processes, enabling parents to share their experiences in a friendly, non-judgemental atmosphere. Merely being with those facing similar challenges had a therapeutic effect, alleviating feelings of guilt associated with negative thoughts about their children or parenting, as well as other difficult emotions. Further, parents had the opportunity to share not only their difficulties but also their solutions. Both programmes resulted in a reduction in parental burnout and other symptoms of chronic stress, including decreased cortisol levels (Brianda et al., 2020). Feedback from both facilitators and participants was positive, with therapists observing improvements in participants' conditions after the very first sessions. However, despite the overall positive tone, participants evaluated both interventions as incomplete; directive intervention lacked space for conversation and the exchange of experiences, while non-directive intervention did not provide specific techniques or tools for coping with stress. This feedback prompted researchers to develop a hybrid model that combined both approaches (Brianda et al., 2019).

This model was named Parenting in Balance. Like the programmes from which it was derived, it consists of eight sessions covering the following topics:

1) Being a parent in the 21st century;
2) How parental burnout develops;
3) Parental perfectionism;
4) Developing emotional competencies;
5) Re-evaluating the parent-child relationship;
6) Parents as a team;
7) Seeking help;
8) Relapse prevention.

This intervention is based on two core principles. The first is the creation of a friendly and safe space for parents, where they feel comfortable sharing their experiences. This requires facilitators to engage in active listening and appropriately manage the content disclosed by parents, including difficult and shame-inducing matters (such as spanking a child). The second principle involves introducing specific working methodology and techniques within each topic, alongside providing psychoeducation. It is also assumed that group sessions are co-facilitated by two individuals, and that partners should not participate in the same group. Each session follows a defined structure, outlining what should occur at the beginning, during, and at the conclusion. Specific exercises are suggested for therapists, enabling them to select those that best respond to the group's needs. Simultaneously, facilitators must ensure there is time and space for the mutual exchange of experiences. To date, this programme is the only intervention developed specifically for burned-out parents. It is considered effective in reducing parental burnout and accompanying symptoms, with observed effects maintained at a three-month follow-up post-intervention (Bayot et al., 2024).

Building upon the model described above, other solutions have also been proposed. Urbanowicz et al. (2023) demonstrated that the use of the Cognitive Behavioural Stress Management (CBSM) programme with burned-out parents reduces stress levels and parental burnout, while increasing self-compassion.

This programme consists of eight sessions covering diverse topics, including coping with stress and anger management. Parents learn to identify sources of stress and recognise their own stress responses. Relaxation and meditation techniques are introduced, along with cognitive-behavioural tools that enable the modification of maladaptive beliefs or behaviours. The content covered in the sessions is contextualised within parenting stress and parental burnout, based on the balance between risks and resources model (Mikolajczak & Roskam, 2018). The investigated intervention is thus derived from the CBSM model but has been adapted to the needs of parents and the challenges of parenthood. Each session consists of several elements that always appear in a specific order: an opening round where each parent has the opportunity to speak, relaxation, a theoretical-practical part dedicated to the discussed topic, a summary, and a closing round. Work on coping behaviours and adaptive coping strategies, as well as on modifying harmful beliefs, appears to be a promising direction. This programme was also positively evaluated by parents (Urbanowicz, 2022), although not every proposed activity was considered equally helpful. Participants found the sessions on anger management and cognitive reframing particularly useful. The former enabled the development of more effective emotion regulation strategies, while the latter facilitated a shift in the perception of everyday events and learning to gain psychological distance therefrom. Conversely, sessions regarding individual stress responses and social support elicited mixed reactions; for some parents, they were too obvious, while for others, they were helpful and deemed the most crucial of all proposed activities. In conclusion, CBSM not only improved parents' functioning and well-being but was also evaluated as effective by the parents themselves. Simultaneously, research evaluating this programme indicated that the parent group has diverse expectations and needs; therefore, it is worth considering how to tailor the applied techniques and tools to maximise their effectiveness. Notably, conversations with parents and the use of qualitative methods are rare practices in research on parental burnout and parent interventions.

As mindfulness techniques grow in popularity, they are increasingly being applied in programmes for burned-out parents. Bayot et al. (2024) compared two programmes: the previously discussed Parenting in Balance (PBP) programme and a programme developed based on mindfulness techniques, including self-compassion (the Mindfulness and Compassion-Based Approach, MCA). The elements of the MCA programme were integrated into the PBP sessions so as to preserve their original sequence and theoretical foundations. Generally, an improvement in the parents' condition was observed in both training groups; however, in the MCA group, six individuals (21% of the group) and in the PBP group, one individual (5%), exhibited higher levels of parental burnout post-intervention than at baseline. This finding confirms that parents experiencing burnout should be treated as a heterogeneous group. Particularly, the efficacy of mindfulness techniques may depend on individual characteristics. The authors, therefore, call for further research and the exploration of variables whose identification is crucial for the safe application of mindfulness-based programmes, such as the investigated MCA. For instance, the fear of failure (e.g. misunderstanding or misapplying the proposed techniques) may negatively impact

participants' well-being and, consequently, exacerbate rather than alleviate the level of burnout.

The question thus arises as to which mindfulness techniques are most suitable for burned-out parents. Urbanowicz et al. (2024a) categorised these techniques into formal (i.e. specific practices requiring daily commitment and dedicated time) and informal (i.e. applicable at various moments throughout the day and in diverse situations, relying on cultivating mindfulness of present-moment sensations and intentionally fostering a non-judgemental attitude toward one's experiences). The research demonstrated that the application of informal mindfulness practices positively impacts parental burnout levels. As with other interventions, parents participated in eight weekly sessions of approximately two hours each. The FOVEA protocol (Flexibility, Open monitoring, based on the Vittoz method, to enhance Experiential Awareness; Shankland et al., 2021) was used, albeit adapted to the challenges of parenthood. The intervention aimed to teach participants how to purposefully direct non-judgemental attention towards daily activities. By drawing on sensations from the five senses and bodily experiences, participants aim to heighten their awareness of everyday sensations anchored in the "here and now". Through this, they are expected to learn how to direct caring attention towards themselves, others, and their environment. By design, the proposed exercises are simple and easy to replicate, their practice intended to increase psychological flexibility, openness to various experiences, and non-judgemental attention. The sessions cover topics concerning sensory experiences, difficult emotions, and self-awareness, inter alia. Each session constitutes a self-contained module centred around a single theme—e.g. auditory sensations. The results confirmed the effectiveness of the applied intervention. However, notably, the sample studied was very small, consisting of 30 individuals distributed across two groups: experimental and waitlist control. Further, parents' well-being was assessed based solely on the level of parental burnout, with other variables, including biological ones, not controlled for.

Another investigated intervention was the CARE (Coherence, Attention, Relationship, and Engagement) programme (Urbanowicz et al., 2024b). This programme is derived from positive psychology and its objective is the development of greater cognitive flexibility, including the modification of mindsets and habitual behaviours. The intervention centres around three main axes. The first involves cognitive reorientation—i.e. learning to direct attention towards the rewarding aspects of daily life, individual functioning, or the environment. This aims to enhance the positive emotions derived from everyday experiences. The second axis focuses on cultivating gratitude, compassion, and a non-judgemental attitude towards oneself and others. The third axis emphasises engagement in activities that align with personal values while fulfilling basic psychological needs—such as those derived from Ryan and Deci's (2017) self-determination theory (SDT): the needs for autonomy, relatedness, and competence. The CARE programme lasted eight weeks, with weekly sessions of approximately two hours each. Topics covered included the consequences of a negative mindset and the possibilities for its modification, the development of the ability to savour the present moment, and the use of one's character strengths in coping with difficulties. The

intervention proved effective; participants exhibited lower levels of burnout post-intervention. However, notably, this study is described as preliminary due to the small sample size (17 participants per group).

Piotrowski et al. (Piotrowski, Sanna et al., 2026) first published research on the effectiveness of an online intervention. The study aimed to evaluate the effectiveness of the Parenting in Balance programme delivered synchronously online to a group of mothers. The comparison group participated in Mindfulness-Based Cognitive Therapy (MBCT). Effectiveness was assessed immediately post-intervention and at three- and six-month follow-ups. This is the only study with such a long longitudinal follow-up period. Both programmes demonstrated similar effectiveness. It was observed that the higher the level of parental burnout at baseline, the greater the effect (i.e. the more substantial the decline) at the six-month follow-up. No other variable was a significant predictor. Both interventions reduced not only burnout symptoms but also depressive symptoms. Only 49% of the mothers participated in all sessions, while 81.5% attended at least six. Those who missed sessions exhibited higher levels of depressive symptoms when assessed immediately post-intervention (but not at other time points), suggesting that some individuals may first require an intervention to help them cope with depression before addressing parental burnout. Interestingly, in the waitlist group of mothers, a decrease was observed in pre-mentalising modes between the first and second assessments (i.e. prior to the commencement of the intervention in this group). This finding is intriguing, indicating that the mere expectation of receiving help has a positive effect on mothers' functioning.

Toward a Synthesis: Future Directions

In conclusion, intervention programmes assume that building resources and reducing stressors will positively affect parents' functioning. This approach is indeed valid. The problem, however, lies in the lack of clarity as to which of the factors investigated translate most significantly into an improvement in parents' conditions. There is no consensus among researchers in this regard. Some (e.g. Mikolajczak et al., 2023) consider it crucial to determine the impact strength of these factors, while others emphasise embedding them in a broader context (Rén et al., 2024). The discourse on protective and risk factors for burnout overlooks the role of broadly understood digital well-being and the impact of modern technologies on parenting, including their contribution to the development of parental burnout. However, research on technoference, among other phenomena, demonstrates its negative impact on parenting (cf. Knitter & Zemp, 2020; Lederer et al., 2021; McDaniel, 2019; Vanden Abeele et al., 2020). Further, parents with higher levels of parenting stress more frequently use the internet as a form of relaxation and coping, which is associated with poorer parenting practices (Zhang et al., 2022). Additionally, retreating to the virtual space to cope with difficult parenting experiences (e.g. by seeking solitude, consuming entertainment media, playing games, or participating in forums) is linked to higher levels of parenting stress and guilt (Radesky et al., 2016; Torres et al., 2021).

Immersion in the virtual world also affects parents' reactions when interrupted by their children; these reactions tend to be more abrupt and characterised by higher levels of negative emotions (Radesky et al., 2016). Although the problematic use of modern technologies by parents is increasingly addressed in both scientific and popular discourse (cf. Wiśniewska-Nogaj, 2025), this line of inquiry has not been integrated with parental burnout. Investigating the relationship between digital well-being and parental burnout and initiating a discussion on using it as a parenting resource may prove worthwhile.

Regardless of the adopted model, a decline in parental burnout levels is observed across all investigated interventions. While encouraging, this outcome raises several concerns. The first concern was raised by the authors of the Parenting in Balance programme, pertaining to the extent to which the improvement in parents' conditions is attributable to the specific type of intervention versus the mere fact that any intervention is occurring (Brianda et al., 2019). This concern is echoed by other researchers (cf. Urbanowicz, 2022), who highlight the significance of the group process itself (Piotrowski, Sanna et al., 2026).

Another challenge concerns the target demographic for these programmes. Across the nine groups studied, the mean baseline level of burnout ranged from approximately 51 to approximately 91 and fell into three distinct bands (Table 1, p. 91). In three groups it exceeded 85 (Bayot et al., 2024—both interventions; Brianda et al., 2020—the directive intervention), indicating a remarkably high risk of burnout. In three further groups it fell between 73 and 83 (Brianda et al., 2020—the non-directive intervention; Piotrowski, Sanna, et al., 2026—both online interventions). In the remaining three it ranged from approximately 51 to approximately 61 (Urbanowicz et al., 2023, 2024a, 2024b), levels considered to indicate moderate to elevated risk (cf. Urbanowicz, 2022). Consequently, it remains unclear how effective these interventions are among individuals with varying baseline levels of burnout, and whether interventions tested in moderate-risk groups will be equally effective in very high-risk groups. An analysis of the participant profile—predominantly highly educated women—raises the question as to whether these programmes will be equally effective in groups with different sociodemographic characteristics, particularly considering emerging doubts regarding the homogeneity of the burned-out parent group (cf. Bayot et al., 2024). Focusing on overlooked or underrepresented populations, such as fathers, individuals with lower levels of education, or those experiencing economic hardship, may be worthwhile.

Another concern relates to how parents' well-being is assessed post-intervention: whether it is sufficient to rely solely on self-report data, or whether it would be justified to include biological markers or data obtained from collateral sources. While this approach is methodologically justified, it may increase intervention costs and the attrition rate. In the described interventions, attrition was a significant issue, despite the relatively short duration of the programmes.

All available interventions for parents from the general population are based on a model of eight weekly sessions, each lasting approximately two hours. The first observed problem is the withdrawal of initially interested participants, who drop out even before the intervention begins. Dropout also occurs

during the programme, with rates ranging from approximately 12.5% (for the MCA programme; Bayot et al., 2024) to around 27% (PBP; Bayot et al., 2024). Withdrawal from the programme was also noted in the online intervention (Piotrowski, Sanna et al., 2026). When recruiting participants for such studies, one should anticipate a dropout rate of approximately one in five participants who commence the intervention. Only two programmes (FOVEA and CARE) had no dropout; however, both interventions had small samples—comprising 15 and 17 individuals, respectively (Urbanowicz et al., 2024a, 2024b). Investigating the individuals who dropped out of the programme may provide an interesting avenue for research. Piotrowski et al. (Piotrowski, Sanna et al., 2026) found that these individuals did not differ from the rest of the group, but those who missed sessions exhibited higher depressive symptoms.

Due to dropout rates, longer interventions raise serious concerns. Conversely, the proposed model appears insufficient for the development of certain competencies, such as emotion regulation skills (Urbanowicz et al., 2023). It is therefore pertinent to ask what number of sessions is optimal for parents and how to support them post-intervention.

Another issue concerns the sustainability of the obtained effects—such assessments were conducted in only four of the six programmes. The maintenance of the effect was evaluated at a three-month follow-up (three studies) and at both three- and six-month follow-ups (one study), with the collected data confirming that the achieved effect was maintained. In three programmes, a further decline in burnout levels was observed, whereas in one (CBSM), there was a slight increase. However, these differences were not statistically significant; thus, it can be concluded that post-intervention, the burnout level remains stable and significantly lower than at baseline. In one study, a decline occurred in the control group, while the effect was maintained for the group participating in the Parenting in Balance programme. Nevertheless, between the conclusion of the intervention and the follow-up assessment, further attrition occurred among parents—ranging from 0% to nearly 50% for in-person interventions, and approximately 10% for the online intervention. The question therefore arises as to how to motivate parents not only to complete the programme but also to participate in follow-up assessments. Further questions relate to how long the effects persist and what happens after a period longer than three or six months.

Another concern relates to the cultural context—the discussed studies originate from three countries: France (three studies), Belgium (two), and Poland (one). A question thus arises regarding the generalisability of these findings to other populations. Increasingly, in the discourse on parental burnout, attention is drawn to the significance of the societal context in which individuals function, as well as how parenting is evaluated or judged in that society (cf. Mikolajczak et al., 2023).

In conclusion, working with parents experiencing burnout is crucial due to the severe consequences that burnout entails. Unfortunately, the number of investigated interventions is limited. Questions also arise regarding their duration, session structure, and cultural context, opening up avenues for future research. According to Urbanowicz et al. (2026), effective programmes for burned-out parents share five common features:

1) psychoeducation regarding stress, burnout, and coping strategies—recognising that burnout is distinct from parenting stress allows parents' experiences to be embedded in a coherent theoretical framework (i.e. the imbalance between resources and demands model), thereby facilitating the development of coping strategies;
2) self-regulation and self-compassion—elements related to developing emotion regulation strategies, mindfulness, and self-compassion are considered crucial in working with burned-out parents;
3) values and a sense of identity—recognising that burnout constitutes a specific crisis of the parental role enables the re-interpretation of parental identity and core values;
4) homework assignments—the programmes entail practising the acquired skills beyond sessions, which may prove crucial for consolidating the occurring changes;
5) social network—the group process itself seems to play a key role (e.g. by reducing guilt or shame and normalising the experienced emotions), while proposing joint family activities and teaching parents how to spend time with their children also significantly contributes to reducing burnout symptoms.

Perhaps future programmes should focus on developing those elements that have not been sufficiently represented thus far.

Declarations

Declaration of conflict of interest
The author declares no potential conflicts of interest with respect to the research, authorship, and/or publication of this article. The author has no relevant financial or non-financial interests to disclose, nor any competing interests related to the content of this article. The author also confirms that she is not affiliated with or involved in any organisation or entity with any financial or non-financial interest in the subject matter or materials discussed in this manuscript.

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Lidia Wiśniewska-Nogaj: Conceptualisation, Funding acquisition, Resources, Investigation, Visualisation, Writing – original draft, Writing – review & editing.

References

Anclair, M., Lappalainen, R., Muotka, J., & Hiltunen, A. J. (2018). Cognitive behavioural therapy and mindfulness for stress and burnout: A waiting list controlled pilot study comparing treatments for parents of children with chronic conditions. *Scandinavian Journal of Caring Sciences*, *32*(1), 389–396. https://doi.org/10.1111/scs.12473

Bakiera, L. (2013a). *Zaangażowane rodzicielstwo a autokreacyjny aspekt rozwoju dorosłych* [*Engaged parenting and the self-creative aspect of adult development*]. Difin.

Bakiera, L. (2013b). Zaangażowane rodzicielstwo: problemy definicyjne, wskaźniki i pomiar [Engaged parenting: definitional problems, indicators and measurement]. *Społeczeństwo i Rodzina*, *36*(3), 19–34.

Bayot, M., Brianda, M. E., van der Straten, N., Mikolajczak, M., Shankland, R., & Roskam, I. (2024). Treating parental burnout: Impact and particularities of a mindfulness- and compassion-based approach. *Children*, *11*(2), Article 168. https://doi.org/10.3390/children11020168

Beheshtipour, N., Nasirpour, P., Yektatalab, S., Karimi, M., & Zare, N. (2016). The effect of educational-spiritual intervention on the burnout of the parents of school age children with cancer: A randomized controlled clinical trial. *International Journal of Community Based Nursing and Midwifery*, *4*(1), 90–97.

Bilgin, S., & Gozum, S. (2009). Reducing burnout in mothers with an intellectually disabled child: An education programme. *Journal of Advanced Nursing*, *65*(12), 2552–2561. https://doi.org/10.1111/j.1365-2648.2009.05163.x

Bogdán, P. M., Varga, K., Tóth, L., Gróf, K., & Pakai, A. (2025). Parental burnout: A progressive condition potentially compromising family well-being. A narrative review. *Healthcare*, *13*(13), Article 1603. https://doi.org/10.3390/healthcare13131603

Brianda, M. E., Roskam, I., & Mikolajczak, M. (2019). *Comment traiter le burn out parental? Manuel d'intervention clinique* [*How to treat parental burn-out? Clinical intervention manual*]. De Boeck Supérieur.

Brianda, M. E., Roskam, I., Gross, J. J., Franssen, A., Kapala, F., Gérard, F., & Mikolajczak, M. (2020). Treating parental burnout: Impact of two treatment modalities on burnout symptoms, emotions, hair cortisol, and parental neglect and violence. *Psychotherapy and Psychosomatics*, *89*(5), 330–332. https://doi.org/10.1159/000506354

Chen, B. B., Qu, Y., Yang, B., & Chen, X. (2022). Chinese mothers' parental burnout and adolescents' internalizing and externalizing problems: The mediating role of maternal hostility. *Developmental Psychology*, *58*(4), 768–777. https://doi.org/10.1037/dev0001311

Dzielińska, M., Lasota, M., & Piotrowski, K. (2024). Wypalenie rodzicielskie wśród rodziców dzieci z niepełnosprawnościami i chorobami przewlekłymi [Parental Burnout Among Parents of Children with Disabilities and Chronic Diseases]. *Psychologia Rozwojowa*, *28*(2), 115–133. https://doi.org/10.4467/20843879PR.23.019.19856

Dzielińska, M., & Piotrowski, K. (2026). Parental identity development in emerging adult parents raising children with disabilities and chronic illnesses: A one-year longitudinal study. *Identity*, 1–18. https://doi.org/10.1080/15283488.2026.2643722

Gillis, A., & Roskam, I. (2019). Daily exhaustion and support in parenting: Impact on the quality of the parent–child relationship. *Journal of Child and Family Studies*, *28*(7), 2007–2016. https://doi.org/10.1007/s10826-019-01428-2

Godawa, G. (2022). Między zaangażowaniem a wypaleniem rodzicielskim. Znaczenie wspólnoty [Between Engagement and Parental Burnout: The Importance of Community]. *Roczniki Pedagogiczne*, *14*(4), 25–38. https://doi.org/10.18290/rped22144.3

Hansotte, L., Nguyen, N., Roskam, I., Stinglhamber, F., & Mikolajczak, M. (2021). Are all burned-out parents neglectful and violent? A latent profile analysis. *Journal of Child and Family Studies*, *30*(1), 158–168. https://doi.org/10.1007/s10826-020-01850-x

Kalkan, R. B., Blanchard, M. A., Mikolajczak, M., Roskam, I., & Heeren, A. (2023). Emotional exhaustion and feeling fed up as the driving forces of parental burnout and its consequences on children: Insights from a network approach. *Current Psychology*, *42*(26), 22278–22289. https://doi.org/10.1007/s12144-022-03311-8

Kamza, A., Luyten, P., Duras, J., Carone, N., Dzielińska, M., & Piotrowski, K. (2026). Exhausted minds: Maternal reflective functioning and parental burnout in mothers of young children in a one-year longitudinal study. *Journal of Marriage and Family*. https://doi.org/10.1111/jomf.70080

Knitter, B., & Zemp, M. (2020). Digital family life: A systematic review of the impact of parental smartphone use on parent-child interactions. *Digital Psychology*, *1*(1), 29–43. https://doi.org/10.24989/dp.v1i1.1809

Lappalainen, P., Pakkala, I., Strömmer, J., Sairanen, E., Kaipainen, K., & Lappalainen, R. (2021). Supporting parents of children with chronic conditions: A randomized controlled trial of web-based and self-help ACT interventions. *Internet Interventions*, *24*, Article 100382. https://doi.org/10.1016/j.invent.2021.100382

Lederer, Y., Artzi, H., & Borodkin, K. (2021). The effects of maternal smartphone use on mother–child interaction. *Child Development*, *93*(2), 556–570. https://doi.org/10.1111/cdev.13715

Lin, GX., Roskam, I., & Mikolajczak, M. (2023a). Disentangling the effects of intrapersonal and interpersonal emotional competence on parental burnout. *Current Psychology*, *42*, 8718–8721. https://doi.org/10.1007/s12144-021-02254-w

Lin, GX., Szczygieł, D., Hansotte, L., Roskam, I., & Mikolajczak, M. (2023b). Aiming to be perfect parents increases the risk of parental burnout, but emotional competence mitigates it. *Current Psychology*, *42*(2), 1362–1370. https://doi.org/10.1007/s12144-021-01509-w

Lin, G.-X., Szczygieł, D., & Piotrowski, K. (2022). Child-oriented perfectionism and parental burnout: The moderating role of parents' emotional intelligence. *Personality and Individual Differences*, *198*, 1–6. https://doi.org/10.1016/j.paid.2022.111805

Lindström, C., Aman, J., & Norberg, A. L. (2011). Parental burnout in relation to sociodemographic, psychosocial and personality factors as well as disease duration and glycaemic control in children with Type 1 diabetes mellitus. *Acta paediatrica* (Oslo, Norway: 1992), *100*(7), 1011–1017. https://doi.org/10.1111/j.1651-2227.2011.02198.x

Mandecka, N. (2019). Wypalenie rodzicielskie – nowe spojrzenie na przemęczonych rodziców. Przegląd literatury oraz badań [Parental Burnout – a new look at the 'exhausted parent' – A review of the literature]. *Kultura i Wychowanie*, *2*(16), 23–33. https://doi.org/10.25312/2083-2923.16/2019_02nm

Masoumi, Z., Abdoli, F., Esmaeilzadeh, S., & Sadeghi, T. (2020). The effect of supportive-training intervention on the burnout of mothers with disabled child: A randomized clinical trial. *Journal of Caring Sciences*, *9*(3), 133–139. https://doi.org/10.34172/jcs.2020.020

McDaniel, B. T. (2019). Parent distraction with phones, reasons for use, and impacts on parenting and child outcomes: A review of the emerging research. *Human Behavior and Emerging Technologies*, *1*(2), 72–80. https://doi.org/10.1002/hbe2.139

Mikolajczak, M., Aunola, K., Sorkkila, M., & Roskam, I. (2023). Fifteen years of parental burnout research: Systematic review and agenda. *Current Directions in Psychological Science*, *32*(4), 276–283. https://doi.org/10.1177/09637214221142777

Mikolajczak, M., Brianda, M. E., Avalosse, H., & Roskam, I. (2018). Consequences of parental burnout: Its specific effect on child neglect and violence. *Child Abuse & Neglect*, *80*, 134–145. https://doi.org/10.1016/j.chiabu.2018.03.025

Mikolajczak, M., Gross, J. J., & Roskam, I. (2019). Parental burnout: What is it, and why does it matter? *Clinical Psychological Science*, *7*(6), 1319–1329. https://doi.org/10.1177/2167702619858430

Mikolajczak, M., Raes, M.-E., Avalosse, H., & Roskam, I. (2018). Exhausted parents: Sociodemographic, child-related, parent-related, parenting and family-functioning correlates of parental burnout. *Journal of Child and Family Studies*, *27*(2), 602–614. https://doi.org/10.1007/s10826-017-0892-4

Mikolajczak, M., & Roskam, I. (2018). A theoretical and clinical framework for parental burnout: The balance between risks and resources (BR^2). *Frontiers in Psychology*, *9*, Article 886. https://doi.org/10.3389/fpsyg.2018.00886

Piotrowski, K., Mikolajczak, M., & Roskam, I. (2026). Longitudinal links of parenthood regret and parental burnout at the between-person and within-person levels. *Journal of Marriage and Family*, *88*(1), 115–129. https://doi.org/10.1111/jomf.13127

Piotrowski, K., Sanna, K., Szramka-Pawlak, B., Kamza, A., Michałowski, J., Gutkowska-Maciejuk, A., Roskam, I., & Mikolajczak, M. (2026). Effectiveness of online group interventions in reducing parental burnout in mothers. *Journal of Child and Family Studies*, *35*(1), 182–196. https://doi.org/10.1007/s10826-025-03241-6

Radesky, J. S., Kistin, C., Eisenberg, S., Gross, J., Block, G., Zuckerman, B., & Silverstein, M. (2016). Parent perspectives on their mobile technology use: The excitement and exhaustion of parenting while connected. *Journal of Developmental and Behavioral Pediatrics*, *37*(9), 694–701. https://doi.org/10.1097/DBP.0000000000000357

Rén, X., Cai, Y., Wang, J., & Chen, O. (2024). A systematic review of parental burnout and related factors among parents. *BMC Public Health*, *24*(1), Article 376. https://doi.org/10.1186/s12889-024-17829-y

Roskam, I., Aguiar, J., Akgun, E., Arikan, G., Artavia, M., Avalosse, H., Aunola, K., Bader, M., Bahati, C., Barham, E. J., Besson, E., Beyer, W., Boujut, E., Brianda, M. E., Brytek-Matera, A., Carbonneau, N., César, F., Chen, B-B., Dorard, G.… Mikolajczak, M. (2021). Parental burnout around the globe: A 42-country study. *Affective Science*, *2*(1), 58–79. https://doi.org/10.1007/s42761-020-00028-4

Ryan, R. M., & Deci, E. L. (2017). *Self-determination theory: Basic psychological needs in motivation, development, and wellness*. Guilford Press. https://doi.org/10.1521/978.14625/28806

Sairanen, E., Lappalainen, R., Lappalainen, P., Kaipainen, K., Carlstedt, F., Anclair, M., & Hiltunen, A. (2019). Effectiveness of a web-based acceptance and commitment therapy intervention for wellbeing of parents whose children have chronic conditions: A randomized controlled trial. *Journal of Contextual Behavioral Science*, *13*, 94–102. https://doi.org/10.1016/j.jcbs.2019.07.004

Schittek, A., Mikolajczak, M., & Roskam, I. (2024). Parental burnout stages and their link to parental violence: A longitudinal study. *Journal of Applied Developmental Psychology*, *95*, Article 101717. https://doi.org/10.1016/j.appdev.2024.101717

Shankland, R., Tessier, D., Strub, L., Gauchet, A., & Baeyens, C. (2021). Improving mental health and well-being through informal mindfulness practices: An intervention study. *Applied Psychology: Health and Well-Being*, *13*(1), 63–83. https://doi.org/10.1111/aphw.12216

Song, T., Wang, W., Chen, S., & Li, Y. (2024). Mothers' parental burnout and adolescents' social adaptation and security: The mediating role of parenting style. *Current Psychology*, *43*, 23144–23155. https://doi.org/10.1007/s12144-024-06045-x

Torres, C., Radesky, J., Levitt, K. J., & McDaniel, B. T. (2021). Is it fair to simply tell parents to use their phones less? A qualitative analysis of parent phone use. *Acta Paediatrica*, *110*(9), 2594–2596. https://doi.org/10.1111/apa.15893

Urbanowicz, A. (2022). *Preventing and reducing parental burnout: A clinical trial of three interventions based on cognitive behavioural therapy, second wave positive psychology, and informal mindfulness practices*. [Doctoral dissertation, Swansea University].

Urbanowicz, A. M., Shankland, R., Rance, J., Bennett, P., Leys, C., & Gauchet, A. (2023). Cognitive-behavioral stress management for parents: Prevention and reduction of parental burnout. *International Journal of Clinical and Health Psychology*, *23*(4), Article 100365. https://doi.org/10.1016/j.ijchp.2023.100365

Urbanowicz, A. M., Shankland, R., Rance, J., Bennett, P., & Gauchet, A. (2024a). Informal mindfulness practices: A new approach to the prevention and treatment of parental burnout. *The Family Journal*, *32*(4), 580–586. https://doi.org/10.1177/10664807241230048

Urbanowicz, A. M., Shankland, R., Rance, J., Bennett, P., & Gauchet, A. (2024b). Second-wave positive psychology in the prevention and reduction of parental burnout: The CARE intervention. *The Family Journal*. https://doi.org/10.1177/10664807241286809

Urbanowicz, A. M., Verger, N. B., Shankland, R., Rance, J., Bennett, P., & Gauchet, A. (2026). A meta-analysis of parental burnout interventions. *Journal of Affective Disorders*, *399*, Article 121022. https://doi.org/10.1016/j.jad.2025.121022

Vanden Abeele, M. M. P., Abels, M., & Hendrickson, A. T. (2020). Are parents less responsive to young children when they are on their phones? A systematic naturalistic observation study. *Cyberpsychology, Behavior, and Social Networking*, *23*(6), 363–370.

Wang, W., Chen, S., Wang, S., Shan, G., & Li, Y. (2023). Parental burnout and adolescents' development: Family environment, academic performance, and social adaptation. *International Journal of Environmental Research and Public Health*, *20*(4), Article 2774. https://doi.org/10.3390/ijerph20042774

Wiśniewska-Nogaj, L. (2025). Zaangażowane rodzicielstwo w erze przeciążenia informacją a autonomia rodzica: refleksje psychopedagogiczne [Engaged Parenting in the Era of Information Overload and Parent Autonomy. Psychopedagogical Reflections]. *Studia z Teorii Wychowania*, *16*(1[50]), 151–164. https://doi.org/10.5604/01.3001.0055.0571

Zhang, J., Madigan, S. & Browne, D. (2022). Caregivers' psychological distress, technology use, and parenting: The importance of a multidimensional perspective. *Computers in Human Behavior*, *134*, Article 107324. https://doi.org/10.1016/j.chb.2022.107324.