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Introduction

Being a parent is one of the most significant and gratifying experiences in an individual's life, but it is also one of the most challenging and demanding tasks. Raising a child takes courage and commitment, time and dedication, and it is often exhausting physically and emotionally. In everyday life, parenting is often experienced more as a set of tasks to be accomplished than as pleasurable interaction with the child. Most parents make a concerted effort to reconcile work and family-related responsibilities and face numerous daily stressors associated with parenting (e.g., taking children to different activities on time, preparing meals, soothing a baby that will not stop crying, dealing with a toddler's tantrum or with a teenager's defiant behaviors). Thus, although in the relationship with children there are many moments of joy and deep connection, there are also many moments of stress that often lead parents to experience strong negative emotions such as anxiety, frustration, sadness, guilt, and even anger and resentment directed at both themselves and the child.

Experiencing high levels of parenting stress is becoming increasingly prevalent in modern society (Barroso et al., 2018; Roskam et al., 2021),

and all parents, regardless of their sociocultural background and mental health status, experience some degree of parenting stress at some point in their lives (Crnic & Greenberg., 1990; Deater-Deckard, 2004). Parenting stress is one of the strongest risk factors for a range of adverse parenting outcomes (e.g., Anthony et al., 2005; Niu et al., 2018), and consequently, it can seriously affect child development and increase the likelihood of psychopathology and adjustment problems (Deater-Deckard & Panneton, 2017; Deater-Deckard, 1998). For instance, among clinically referred and community samples, parenting stress was shown to be associated with children's externalizing problems (Schleider et al., 2015; Stone et al., 2016), internalizing problems (Stone et al., 2016; Rodriguez, 2011), lower quality of life (Moreira et al., 2015), aggressive behavior (Krahé et al., 2015), and decreased coping competence (Moreland et al., 2016).

Therefore, it is essential to identify modifiable resources that can help parents experience lower levels of parenting stress. Self-compassion and mindfulness are modifiable internal resources that can help parents feel less stressed and that can be developed through mindfulness- and compassion-based programs, such as the Mindful Self-Compassion program (MSC; Neff & Germer, 2013), Compassion-Focused Therapy (CFT; Gilbert, 2009b), the Mindfulness-Based Stress Reduction program (MBSR; Kabat-Zinn,

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1990), or Mindfulness-Based Cognitive Therapy (MBCT; Segal et al., 2002). In recent years, these programs and their adaptations have been offered to parents who experience high stress or specific challenges in parenting (e.g., Bazzano et al., 2015; Neece et al., 2019; Weitlauf et al., 2020), showing promising results in reducing parents' stress levels and in improving their well-being. The inclusion of mindfulness and compassion components in parenting interventions has also been found to increase the effectiveness of these interventions in reducing parental stress, anxiety, and depression and in promoting mindfulness and self-compassion skills (Jefferson et al., 2020; Coatsworth et al., 2014). At the same time, mindful parenting programs aimed at promoting a mindful approach to parenting (e.g., Mindful Parenting Training, Bögels et al., 2014; Mindful With Your Baby, Potharst et al., 2017, 2022, 2019) have also been shown to be effective in reducing parental stress and in improving several child outcomes (e.g., internalizing and externalizing problems; Burgdorf et al., 2019). Thus, while parenting stress can be a risk factor for negative parenting, several intervention studies have shown that it is possible to help parents better cope with stress by developing skills such as self-compassion and mindfulness.

In this chapter, we will review the empirical evidence that documents the role of parents' self-compassion in parenting. Then, we propose a conceptual model that describes how incorporating self-compassion and mindfulness into the parent-child relationship can help parents adopt more positive parenting behaviors and experience less parenting stress. In this model, we also propose that this parental approach contributes to a child's secure attachment and the development of important internal resources (e.g., self-compassion, emotional regulation) and, consequently, to a better child's mental health. The empirical evidence that supports the associations established in the model is thoroughly discussed.

Self-Compassion as an Inner Resource Associated with Better Parenting Outcomes

Self-compassion is an adaptive type of self-to-self relating that involves the recognition of and the desire to alleviate one's own suffering with kindness and care and in a nonjudgmental way. It is grounded in the recognition that we all share a common human condition (i.e., that all human beings are imperfect; Neff, 2003b). In recent years, research into the role of self-compassion in a variety of individual and interpersonal outcomes has grown exponentially. Self-compassion has been consistently associated with healthy psychological functioning (Neff et al., 2007, 2018) and, although with less empirical support, with adaptive interpersonal functioning (Neff & Pommier, 2013; Yang et al., 2019).

With regard to psychological functioning, there is already solid evidence from meta-analysis studies that self-compassion is strongly associated with lower levels of psychological distress in adolescents ($r = -.55$; Marsh et al., 2018) and with lower levels of psychopathology ($r = .54$; MacBeth & Gumley, 2012) and higher levels of well-being in adults ($r = .47$; Zessin et al., 2015). Increasing evidence suggests that self-compassion is not only associated with greater well-being (e.g., Neff et al., 2018) and healthy psychological functioning (e.g., Bluth et al., 2017; Krieger et al., 2013; Neff, 2003a) in non-clinical populations but it also seems to help individuals better cope with challenging life circumstances, including infertility (Galhardo et al., 2013), cancer (Pinto-Gouveia et al., 2014), trauma (Thompson & Waltz, 2008), pain (Wren et al., 2012), divorce (Sbarra et al., 2012), and HIV (Kemppainen et al., 2013).

With regard to interpersonal functioning, some studies have shown that self-compassionate individuals tend to exhibit more prosocial behaviors (Yang et al., 2019) and to be more compassionate toward other people (e.g., Crocker & Canevello, 2008; Gillath et al., 2005; Mikulincer et al., 2005; see Chap. 15 for a detailed discussion). In addition, it has been demonstrated that compassion toward the self and others stimulate

identical parts of the brain (Longe et al., 2010), which suggests that a common process may underlie both self-compassion and compassion toward other people, including toward one's own children. According to this view, Neff and Pommier (2013) found that among adults from the general population and practicing meditators, higher levels of self-compassion were associated with greater compassion for humanity, empathetic concern for others, and altruism. Among adults from the general population, practicing meditators, and undergraduate students, higher levels of self-compassion were also associated with higher levels of perspective-taking and forgiveness and lower levels of personal distress.

The results of studies that explored the contribution of self-compassion to romantic and other interpersonal relationships (Neff & Beretvas, 2013; Yarnell & Neff, 2013) also support the view that self-compassionate individuals are more likely to focus on others' concerns. For instance, Neff and Beretvas (2013) found that self-compassionate individuals were described by their partners as more caring, accepting, and supportive of their partner's autonomy. Despite the empirical evidence supporting the view that self-compassion and compassion or concern for others are positively related, it is important to note that in some studies this association was shown to be weak (Mills et al., 2018) or even nonsignificant (Gerber et al., 2015). This is because often people are very compassionate toward others but not toward themselves. A key finding, however, is that self-compassion training increases compassion for others (Neff & Germer, 2013). Furthermore, it is important to bear in mind that the measurement of compassion is still problematic, as different authors operationalize and assess compassion for others in different ways (Strauss et al., 2016). In addition, people might differ with regard to their fears of expressing and receiving compassion (for others, from others, and for self; Gilbert et al., 2011), which can make it easier for some people to feel self-compassion and more difficult to feel compassion for others and vice versa.

Although the parent-child relationship is a particular type of interpersonal relationship in

which self-compassion may be important, the role of self-compassion in parenting has only recently begun to be explored. Among the extant literature, several studies suggest that parents' self-compassion can play a key role in how parents perceive and experience parenting and their relationships with their children (Jefferson et al., 2020). For instance, studies conducted among parents of school-aged children and adolescents from the general population have shown that higher levels of self-compassion are positively associated with lower parenting stress (Gouveia et al., 2016; Moreira et al., 2015) and with more authoritative and less permissive and authoritarian parenting styles (Gouveia et al., 2016). In a study that included parents with a history of depression, greater self-compassion was found to be associated with lower levels of mothers' child-directed criticism and with lower levels of fathers' distressed reactions to their children's negative emotions (Psychogiou et al., 2016). In addition, Psychogiou et al. (2016) have found that parents who reported higher levels of self-compassion tended to attribute the cause of their children's behaviors to external factors (such as situational demands and environmental constraints) rather than to internal factors (i.e., global and stable personal traits and attributes), which may have important implications for parenting as this external locus of control can promote a less critical and a more open stance toward the child's behavior.

Gilbert's tripartite model of affect regulation (Gilbert, 2005a, 2009a) can offer insight into why self-compassionate parents may feel less stressed by the daily challenges of rearing a child and be better able to be more compassionate toward their children and other people in general. This model postulates three evolved systems oriented toward threats (the threat and self-protection system, which is responsible for detecting threats and quickly selecting a response, such as fight, flight, or freeze), resources (the drive system, which guides resources seeking and goal attainment), and affiliation (the affiliative and soothing system, which guides attachment and caregiving behaviors and is responsible for generating feelings of contentment, soothing,

safeness, and connectedness). According to this model, capacities for compassion for oneself and others have the same physiological underpinnings; in other words, they are rooted in the affiliative and soothing system of affect regulation (Depue & Morrone-Strupinsky, 2005; Gilbert, 2005a, 2009a, b). Accordingly, those who are more able to access their affiliative/soothing system are more likely to experience higher levels of compassion for self and others. In addition, because (self-)compassion facilitates access to this soothing system and deactivates the threat system, self-compassionate individuals can more easily regulate their emotions and soothe themselves in times of stress and suffering (Gilbert, 2009b). In contrast, individuals with low levels of self-compassion usually find it difficult to access the soothing system, and the threat and/or drive systems can be easily and frequently activated. Therefore, in stressful moments with a child, self-compassionate parents may be better able to deactivate the threat system (which would most likely lead to a fight, flight, or freeze response, such as screaming, criticizing, or punishing their child or themselves) and more effectively counteract the negative emotions that may arise by soothing themselves and, consequently, responding in a more compassionate, calm, and regulated way.

Self-Compassion and Raising a Child in Challenging Circumstances

Many parents face major challenges in raising their children. For instance, caring for a child with a developmental problem (e.g., autism, intellectual disability) or with a chronic health condition is a demanding and potentially stressful task for parents that may result in substantial levels of parenting stress and adjustment difficulties (e.g., Kiami & Goodgold, 2017; Moreira & Canavarro, 2016; Moreira et al., 2013a, b). The results from a few studies suggest that self-compassion can play an important role in how parents cope with the unique challenges of raising a child with a developmental or chronic health problem (Cousineau et al., 2019). For instance, in a sample of parents and primary caregivers of children with a burn injury, self-

compassion was found to predict fewer symptoms of depression and of posttraumatic stress syndrome (Hawkins et al., 2019), while in a sample of parents of children with a range of chronic illness, self-compassion was inversely associated with parental burnout (Gerber et al., 2021). Together, these findings suggest that experimental studies examining the impact of self-compassion intervention on parental mental health and burnout are warranted, particularly among parents who have a child with additional needs.

There is also some evidence that self-compassion can help parents of children diagnosed with autism spectrum disorder be more emotionally resilient and better cope with the stress associated with raising an autistic child. For instance, Neff and Faso (2015) found that parents of an autistic child with greater self-compassion exhibited less parental stress and depression, were more satisfied with life and more hopeful about the future, experienced greater goal reengagement (i.e., were more willing to pursue new goals when prior ones are unattainable), and had a more functional relationship with their children. In two recent studies also conducted among parents of autistic children, self-compassion was associated with lower parenting stress, higher levels of subjective well-being, and better quality of life (Bohadana et al., 2019; Torbet et al., 2019). Similar results were found in a study that included parents of adults with an intellectual or developmental disability, in which self-compassion was shown to be associated with lower levels of depressive symptoms and stress (Robinson et al., 2018).

Self-compassion also seems to play an important role in how parents of autistic children experience different forms of stigma. Specifically, self-compassion seems to protect individuals against feelings of affiliate stigma (i.e., internalized stigma experienced by family members or primary caregivers of stigmatized individuals; Torbet et al., 2019; Wong et al., 2016), public stigma (i.e., negative perceptions directed toward individuals with a disability or with a mental or physical disease), and courtesy stigma (i.e., negative perceptions directed toward individuals

because of their association with stigmatized individuals; Torbet et al., 2019). It also seems to protect parents against psychological distress linked to affiliate stigma. For instance, Wong et al. (2016) found that affiliate stigma was significantly associated with greater psychological distress only when parents had lower levels of self-compassion; among those who exhibited high levels of self-compassion, affiliate stigma was not associated with psychological distress.

Taken together, the results of these studies suggest that self-compassion can serve as an adaptive coping strategy for parents of children with additional challenges, including developmental and/or health difficulties. These parents devote a large part of their time and energy to caring for their children and can often feel more exhausted and stressed than parents of typically developing children (Lindström et al., 2010; Pinquart, 2018). Arguably, self-compassion can help these parents create a healthier balance between the demands of caring for their children and caring for themselves. In addition, by cultivating self-compassion, parents may feel less isolated in their suffering because they recognize that suffering is part of the human experience and that many parents deal with similar difficulties and circumstances. They may also feel less guilty or responsible for their child's problems and distress and be better able to accept their mistakes and limitations as parents as well as their children's limitations and difficult behaviors.

A Mindful and Compassionate Approach to Parenting

Self-compassion is not only an internal resource that can help parents better deal with the challenges of parenting but it can also be a defining element of parenting itself. In recent years, there has been growing interest among clinicians, researchers, and the population at large in so-called "mindful parenting," a parental approach that applies mindfulness- and compassion-based principles to the parent-child relationship (Bögels & Restifo, 2014; Kabat-Zinn & Kabat-Zinn, 1997). Mindful parenting was first

described by Kabat-Zinn and Kabat-Zinn (1997) as a type of parenting characterized by being present and paying nonjudgmental attention to the child. Based on the work of Kabat-Zinn and Kabat-Zinn (1997) and subsequent research (e.g., Duncan et al., 2009; Bögels & Restifo, 2014), mindful parenting has been described as a parenting approach that involves not only bringing mindful awareness to the parent-child relationship but also adopting a compassionate stance toward oneself as a parent and toward the child. Although the designation *mindful parenting* highlights only the mindfulness dimension, it is important to note that this approach also implies greater acceptance and compassion for oneself and for the child. Accordingly, we consider that it can be better described as a *mindful and compassionate parenting approach*, a designation that we will adopt in the current work. Another important defining characteristic of this parenting approach is the parents' greater ability to regulate their emotions and behaviors in interactions with the child, as opposed to reacting automatically. Therefore, mindful and compassionate parenting can be described as a parenting approach that encompasses three essential components: (1) mindfulness (which allows parents to be truly present when they interact with their children, listening to them with full attention, and identifying their emotional changes even if they are subtle), (2) compassion (for oneself and the child), and (3) self-regulation (which allows parents to act calmly and in line with their values and goals and hinders them from reacting automatically).

Grounded in theoretical and empirical research on mindfulness and mindfulness-based interventions (Baer, 2003; Kabat-Zinn, 2003), Duncan et al. (2009) proposed a theoretical model to explain how mindful parenting can have positive effects on the psychological functioning of parents and children. According to this model, mindful parenting can influence child psychosocial adjustment and functioning (e.g., self-regulation, psychological functioning) through its effect on several aspects of the parent-child relationship, including parenting (e.g., communication, parental self-efficacy), child management practices, parental well-being, and parent-child affection.

According to the authors, mindful parenting encompasses five interrelated dimensions: (1) listening with full attention to the child (i.e., directing complete attention to the child and being fully present during parent–child interactions); (2) nonjudgmental acceptance of the self and the child (i.e., accepting the characteristics and behaviors of the child, the self as a parent, and the challenges of parenting); (3) emotional awareness of the self and the child (i.e., noticing and correctly identifying one’s emotions when interacting with the child as well as the child’s emotions); (4) self-regulation in the parenting relationship (i.e., being able to regulate one’s own emotions and behaviors in parent–child interactions and being able to pause before reacting); and (5) compassion toward the self as a parent and toward the child (i.e., being kind to and supportive of the child, sensitive and responsive to the child’s needs, and compassionate toward oneself as a parent).

A Conceptual Model of a Mindful and Compassionate Approach to Parenting

To extend the previous work on mindful parenting, we propose an integrative conceptual model of a mindful and compassionate parenting approach that aims to highlight the main factors that may account for the individual differences in mindful and compassionate parenting and explain how this parenting approach can influence parenting behaviors and the socioemotional functioning of children and adolescents (see Fig. 16.1). In developing this model, we drew from the Duncan et al.’s (2009) model of mindful parenting, the process model of the determinants of parenting (according to which parenting is multidimensional and can be influenced by intersecting parent, child, and social variables; Belsky, 1984), and the existing empirical evidence on the determinants and effects of mindful and compassionate parenting. Starting from the mindful parenting model (Duncan et al., 2009) and taking into account subsequent studies that showed a clear separation between child-focused and parent- or parenting-focused mindful parenting dimensions (e.g., de Bruin et al., 2014; Moreira

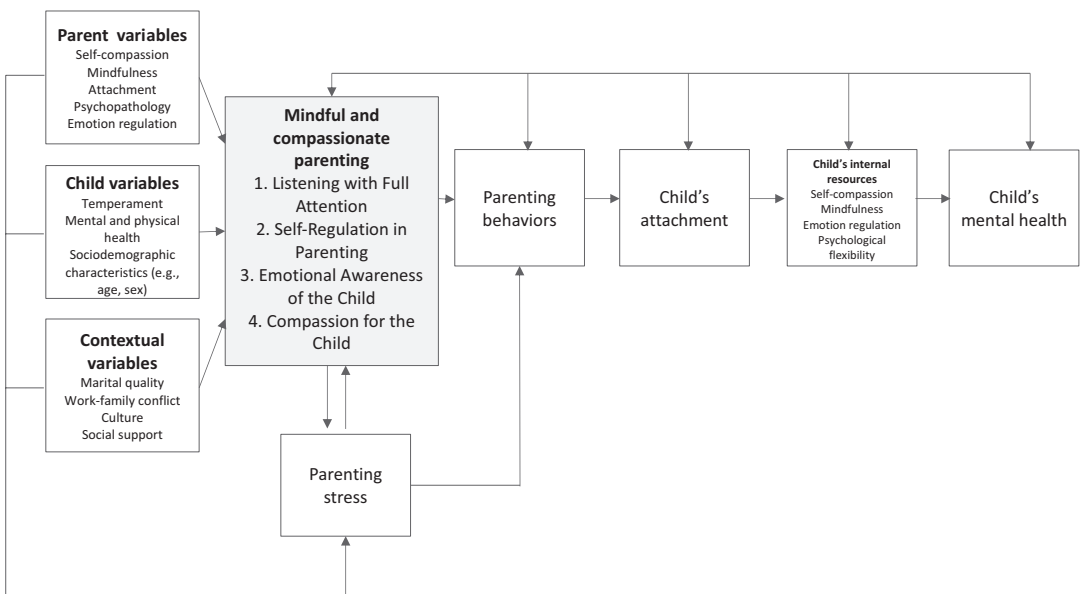


Fig. 16.1 Conceptual model of a mindful and compassionate approach to parenting

& Canavarro, 2017), we conceptualize mindful and compassionate parenting as a multidimensional construct that encompasses the following interrelated dimensions: (1) listening with full attention, which pertains to the ability to listen to the child with full attention; (2) self-regulation in parenting, which pertains to the ability to self-regulate in parent–child interactions; (3) emotional awareness of the child, which pertains to the ability to be aware of the child’s emotions; (4) compassion for the child, which pertains to an attitude of compassion toward the child (i.e., an attitude of kindness, sensitivity, and responsiveness to the child’s needs); and (5) nonjudgmental acceptance of parental functioning, which pertains to an attitude of nonjudgmental acceptance of parental functioning (i.e., accepting without judging the self as a parent and the challenges of parenting).

In the following sections, we will analyze in detail each component of the model as well as the empirical evidence supporting the proposed associations, as illustrated in Fig. 16.1.

Determinants of Mindful and Compassionate Parenting

According to the model, mindful and compassionate parenting, like other parenting styles and practices, is multidimensional and can be influenced by parents’ characteristics (e.g., personality and mental health), children’s characteristics (e.g., temperament), and contextual sources of stress and support (e.g., parents’ work context, marital relationship, and social networks/support; Belsky, 1984). Knowing which factors may account for the variability in this parenting approach and understanding why some parents are more likely to be mindful and compassionate in the parent–child relationship than others may contribute to a better understanding of this construct and may have important clinical implications, such as the identification of modifiable factors that can be targeted in mindfulness- and compassion-based parenting programs.

Parent Variables All parents have psychological, physiological, and experiential differences that interact with child characteristics to influence the parent–child relationship. Certain parental characteristics, such as self-compassion, mindfulness, attachment, emotion regulation, and mental health, may be particularly important determinants of the quality of mindful and compassionate parenting.

Self-Compassion and Mindfulness There is some evidence that parents who are more mindful with regard to their own experiences (Gouveia et al., 2016; Parent et al., 2016b) and have high levels of self-compassion (Gouveia et al., 2016; Moreira et al., 2016) are more able to enact mindfulness and compassion in their parenting relationships. While these associations are not surprising, since mindfulness and self-compassion are essential and defining elements of a mindful and compassionate parenting approach, they have important clinical implications, as they suggest that the cultivation of these individual resources or skills can spill over into the relational domain and influence the relationship between parents and children.

Each of the three positive components of self-compassion (i.e., self-kindness, common humanity, and mindfulness; Neff, 2003b) can help explain why self-compassion and mindfulness can contribute to mindful and compassionate parenting. First, higher levels of self-kindness (i.e., facing difficulties, failures, and suffering with a caring and understanding attitude rather than being self-critical and judgmental) may help parents accept without judgment, the shortcomings and limitations they perceive in themselves as parents and those they perceive in their children. Rather than criticizing themselves and criticizing the child, self-compassionate parents may more easily adopt an attitude of kindness and acceptance, particularly in times of parenting stress. For example, after yelling at her child who was having a tantrum, a mother with higher levels of self-compassion may more easily view the situation as a moment of suffering during which she

also deserves comfort and acceptance instead of criticizing herself for her behavior (“I am a terrible mother for screaming at my son”).

Second, a greater sense of common humanity (i.e., acknowledging that one’s painful experiences are part of a common human condition rather than feeling isolated, ashamed, or different) can help parents understand that difficulties and suffering are part of parenting, rather than interpreting their struggles as unique personal failures. By understanding that *all parents fail, suffer, and make mistakes*, self-compassionate parents may be able to more easily accept their limitations and imperfections as parents without criticizing themselves and feeling isolated. In addition, they may be less likely to react to child misbehavior with anger or punishment as they are less likely to interpret these behaviors as a parenting “failure.”

Third, the greater capacity of self-compassionate individuals to be mindful of their painful emotions and thoughts instead of denying, avoiding, or ruminating about them can help them to have a greater ability to decenter and not overidentify with negative thoughts about their children or their parental role. For example, such parents might think of a time when they were unable to validate their child’s emotions without engaging in ruminative thoughts about that specific behavior or other negative aspects of their parenting and without automatically believing that moment reflects poor parenting skills. In addition, this greater capacity for mindfulness may help parents become more aware of their own emotional states and of the emotional states of their children, allowing them to more easily regulate their behaviors and emotions in interactions with the child. As will be discussed later, this greater capacity for self-regulation is essential in enabling parents to be less reactive in interactions with the child and to act in accordance with their true parenting values by adopting more sensitive and responsive parenting behaviors.

Parents’ Attachment Experiences Parents’ insecure attachment with their own parents has been shown to predict increased difficulties in practicing mindful and compassionate parenting

(Moreira et al., 2016; Moreira & Canavarro, 2015). These results are consistent with many studies that demonstrate that a secure attachment is an important determinant of a caring and supportive relationship with one’s children (for a review, see Jones et al., 2015a, b). In general, secure attachment has been consistently related to a wide range of positive parenting characteristics and outcomes, such as higher parental sensitivity, responsiveness, and supportiveness; less parenting stress; and stronger feelings of closeness to one’s children. Conversely, parents’ insecure attachment (i.e., high levels of attachment-related avoidance and/or anxiety) has been associated with more negative parental caregiving behaviors, emotions, and cognitions (Jones et al., 2015a, b). Specifically, it has been suggested that because avoidant individuals have more difficulty in assuming caregiving roles (Gillath et al., 2005; Mikulincer et al., 2005), they tend to experience more stress in their parenting roles (e.g., Moreira et al., 2015; Nordahl et al., 2020; Rholes et al., 2006), perceive parenthood as less meaningful and satisfying (Cohen & Finzi-Dottan, 2005; Vieira et al., 2012), and behave in a less mindful (Moreira & Canavarro, 2015; Moreira et al., 2015, 2016), warm, close, and supportive manner toward their children (Edelstein et al., 2004; Rholes et al., 1995) compared with securely attached parents. Avoidant parents may also feel more uncertain about or less interested in having children (Rholes et al., 1997, 2006) and they may lack confidence in their parenting abilities (Rholes et al., 1995). In comparison, anxiously attached individuals tend to be self-centered, worry about their own attachment needs, and feel distressed when other people, including their children, need their assistance (Gillath et al., 2005; Mikulincer et al., 2005). Like avoidant parents, they may also report more negative attitudes toward parenthood than secure parents do (Rholes et al., 1997), experience increased parenting stress (Moreira et al., 2015; Rholes et al., 2006), and behave in a less mindful and compassionate manner toward their children (Moreira & Canavarro, 2015; Moreira et al., 2015, 2016). In contrast to avoidant individuals, they are less able to provide a secure base for

their children's exploration behaviors (Adam et al., 2004) and they tend to have more idealized and perfectionist conceptions of themselves as future parents (Mikulincer & Shaver, 2016).

Emotion Regulation Relatedly, some studies point to emotion regulation as a key variable influencing one's tendency to enact mindful and compassionate parenting practices. Specifically, emotion regulation difficulties such as rumination can significantly interfere with parents' ability to practice mindful and compassionate parenting. One study has shown that higher levels of self-critical rumination, a specific type of rumination focused on the content of self-critical thoughts (Smart et al., 2016), predicted higher levels of parenting stress and that this association was mediated by two dimensions of mindful and compassionate parenting: emotional awareness of the child and nonjudgmental acceptance of parental functioning (Moreira & Canavarro, 2018a).

The hypothesis that rumination interferes with this parenting approach is also supported by studies showing that parents who tend to experience negative affect more frequently and persistently (i.e., who present higher levels of neuroticism; Moreira et al., 2020) and who experience more anxious and depressive symptoms are less able to be mindful and compassionate in their relationships with their children (Fernandes et al., 2021; Moreira & Canavarro, 2018b). In fact, individuals high in neuroticism or who experience depressive and/or anxious symptomatology tend to ruminate and worry about negative events and to get caught in downward spirals of negative mood and thinking (Muris et al., 2005). Rumination and worry may occupy the attention and consume cognitive resources, thus making it difficult for parents to redirect their attention to the environment and, consequently, to be fully aware of the present moment when interacting with the child (Beebe et al., 2007; DeJong et al., 2016; Moreira & Canavarro, 2018a; Stein et al., 2012). Hence, rumination may affect parents' ability to process children's cues (Beebe et al., 2007; Stein et al.,

2012), leading them to experience greater difficulty in perceiving their children's emotional expressions and to be less responsive and sensitive to their children's needs.

In addition, rumination is associated with greater attentional bias toward negative information (Donaldson et al., 2007). This attentional bias may, on the one hand, lead parents to focus more on their perceived limitations and shortcomings as parents, contributing to lower levels of nonjudgmental acceptance of parental functioning, and, on the other hand, lead parents to focus on the negative aspects of their child's behaviors, contributing to lower levels of compassion for the child. Based on Gilbert's (2010) tripartite model of affect regulation, one might think that this greater focus on the negative aspects of the self or the child may continually stimulate the threat system, as self-critical dialogue and rumination are often perceived as (internal) threats. This constant stimulation creates a difficult-to-break internal feedback loop between the content and focus of thoughts and the threat system, which maintains the sense of threat (Gilbert, 2010), making it very difficult for parents to implement a mindful and compassionate style of parenting that calls for the activation of the soothing system.

Parent Mental Health Some studies have suggested that experiencing more anxiety and depressive symptoms (Moreira et al., 2019; Fernandes et al., 2021) as well as more stress in the parental role (Cheung et al., 2019; Fernandes et al., 2021; Moreira et al., 2019) can predispose parents to more reactive parenting, which is consistent with previous research that has consistently shown that parents with psychopathology struggle to engage in optimal parenting (Lovejoy et al., 2000). Distressed parents might be more ruminative (Dar & Iqbal, 2015; Nolen-Hoeksema et al., 2008), and, as explained above, this may lead them to be less able to bring mindful attention and awareness to interactions with their children. In addition, anxiety and depression increase parents' focus on their own needs and promote self-focused attention (Dix & Meunier, 2009; Ingram, 1990). By focusing their attention on

themselves and on their own needs, distressed parents are less likely to direct their attention toward their children and to be sensitive and responsive to their needs. Distressed parents may also be more self-critical and, consequently, they may be more likely to endorse a negative view of themselves as parents (Goodman & Gotlib, 1999). They may therefore struggle to accept their perceived shortcomings and limitations as parents and feel that they fail to meet their self-defined high standards in their relationships with their children.

Child Variables Children's characteristics, particularly their temperament, can also influence parenting behaviors. For instance, research has shown that children with a difficult temperament or who are highly reactive tend to elicit less optimal parenting behaviors, including harsh control (Kyrios & Prior, 1990; Porter et al., 2005), punitive and distressed reactions to children's negative emotions (Eisenberg et al., 1999), or inconsistent discipline (Lengua & Kovacs, 2005; Lengua, 2006). Conversely, fearful or behaviorally inhibited children tend to elicit more acceptance and protective responses from their parents (Kiel & Buss, 2012; Shamir-Essakow et al., 2005). There is also preliminary evidence that child-related factors can play a role in parents' capacity to enact mindful and compassionate parenting. For instance, one study found that mothers who have a more negative perception of their infant's temperament presented lower levels of mindful parenting (Fernandes et al., 2021). Consistent with our model, this relationship was shown to be both direct and mediated by parenting stress. Similar results were found among parents of school-aged children, with children's negative reactivity predicting lower levels of mindful parenting (Moreira et al., 2020). These findings are consistent with the previous research showing that a child's negative affectivity or reactivity may evoke more negative parenting, such as more controlling or hostile parental behaviors (Rothbart & Bates, 2007). Parents of children who frequently express strong and negative emotions (e.g., irritation, frustration, anger,

sadness) may excessively focus on the child's negative behavior and thus find it difficult to adopt an attentive and compassionate stance in their parenting interactions or to regulate their emotions and behaviors when the child has, for example, an outburst of anger or a tantrum. In these situations, it can be particularly difficult for parents to regulate their emotions and to not act automatically in an attempt to regulate their child's behavior. Moreover, one may think that parents of children who display high levels of challenging behavior may be more critical of their own parental functioning and blame themselves for their child's behavior. Future research should investigate the role of other important child variables on mindful and compassionate parenting, including their mental and physical health and sociodemographic characteristics such as age and sex.

Contextual Variables The context in which parents are embedded also shapes their parenting behaviors (Belsky, 1984). For example, the support that parents receive from family and friends (Anglely et al., 2015), the marital relationship (Gao et al., 2019), and the work context (Perry-Jenkins et al., 2017) have a considerable impact on parenting behaviors and on the overall quality of family life. Research on the role of contextual variables in mindful and compassionate parenting is still scarce; however, it stands to reason that parents who experience higher levels of environmental stress may experience more challenges to mindful and compassionate parenting. Accordingly, a study that explored work-related variables shown that parents with flexible work schedules presented significantly higher levels of self-regulation in parenting and nonjudgmental acceptance of parental functioning than parents with a shift work schedules (Moreira et al., 2019). This study also found that higher levels of work-family conflict (i.e., a conflict between the competing responsibilities and demands of work and family contexts, which leads to participation in the family role being hampered by participation in the work role; Weer & Greenhaus, 2014) were associated with lower levels of all mindful par-

enting dimensions. These relationships between work–family conflict and mindful parenting were mediated by anxiety/depression symptoms and parenting stress, which is congruent with the conceptual model we propose. This study shows that experiencing work-related stress can spill over into the parenting context, leading parents to experience higher levels of parenting stress and, in turn, engage in less mindful and compassionate parenting (Moreira et al., 2019). Less is understood about the role of macro-level stressors (such as socioeconomic stress) or protective factors (such as social support or healthy marital relationships) in adopting this parental approach.

Mindful and Compassionate Parenting and Parenting Stress

As presented in Fig. 16.1, and consistent with previous studies (Beer et al., 2013; Bögels et al., 2014; Fernandes et al., 2021; Gouveia et al., 2016; Moreira & Canavarro, 2018a), we propose that mindful and compassionate parenting creates favorable conditions for parents to experience lower levels of parenting stress. However, we also consider that the association between parenting stress and mindful and compassionate parenting is bidirectional and that parenting stress can impair the ability of parents to adopt a mindful and compassionate stance in parenting. Experiencing high levels of parenting stress may lead parents to experience parenting as more stressful and taxing than rewarding, which is not conducive to them being mindful and compassionate in their relationships with their children. Therefore, it can be particularly helpful for these parents to learn mindfulness and self-compassion skills. For instance, mindful parenting training (Bögels & Restifo, 2014), an 8-week program for parents with high levels of parenting stress, based on the MBCT (Segal et al., 2002) and on the MBSR (Kabat-Zinn, 1990), has been shown to be effective in reducing parenting stress in parents of infants (Potharst et al., 2017), toddlers (Potharst et al., 2021), and children/adolescents (Bögels et al., 2010, 2014).

Mindful and Compassionate Parenting and Parenting Behaviors

Based on prior research (e.g., Duncan et al., 2015; Parent et al., 2016a; Wang et al., 2018), we propose that mindful and compassionate parenting can influence other parenting practices and behaviors. We consider that bringing the qualities of mindfulness and compassion to parenting can help parents establish a relationship with their children guided by greater sensitivity, responsiveness, acceptance, and connection. For instance, *listening with full attention* can help parents to be more attuned to their child’s verbal and nonverbal communication, which may help them to be better able to notice and respond more accurately to their children’s needs. Developing greater *awareness of the child’s emotional states* can assist parents in correctly identifying their child’s emotional states and reducing automatic patterns of response that may negatively affect parenting practices. By practicing greater *self-regulation in interactions with the child*, parents might be better able to avoid negative cycles of reactivity and maladaptive parenting interactions in stressful situations and to choose parenting behaviors that are consistent with their parenting values (Duncan et al., 2009). Mindful parenting is the opposite of automatic or reactive parenting, as mindfulness prevents automatic reactions to parenting stress and creates a “space” between the stressful event and the response in which parents can intentionally choose how to respond to the stressful situation (Bögels, 2020; Bögels & Restifo, 2014). Greater *compassion for themselves as parents* helps parents to accept their mistakes and limitations more easily and to realize that all parents struggle and make mistakes in their relationships with their children. Finally, greater *compassion for the child* may allow parents to accept their behaviors, thoughts, and emotions without judging them and automatically reacting to them. This greater acceptance helps parents to truly *see* and understand their children and, consequently, to act in a more sensitive and attuned way with the child (Bluth & Wahler, 2011). However, it is important to note that although being a mindful and compassionate par-

ent entails adopting an attitude of compassion and kindness in the relationship with the child, it also entails imposing limits and boundaries that teach children social rules (Bögels, 2020; Bögels & Restifo, 2014).

A growing evidence base suggests that mindful and compassionate parenting is associated with more positive parenting styles and practices, such as more authoritative and less authoritarian styles (Gouveia et al., 2016; Williams & Wahler, 2010), greater warmth and affection (Duncan et al., 2015; Parent et al., 2016a; Wang et al., 2018), and positive reinforcement (Parent et al., 2016a). It has also been shown to be associated with less dysfunctional disciplinary practices, such as laxness, overreactivity, and verbosity (de Bruin et al., 2014) or harsh and inconsistent discipline (Duncan et al., 2015; Parent et al., 2016a). Similarly, intervention studies suggest that mindful parenting training can help parents adopt parenting styles characterized by less rejection and greater autonomy encouragement (Bögels et al., 2014), endorse a less overreactive parenting style (Emerson et al., 2021; Potharst et al., 2017, 2019), and be more responsive and affectionate and less hostile toward the child (Potharst et al., 2017). Mindful and compassionate parents seem also to be more likely to employ supportive emotion socialization practices (e.g., encouraging emotional expression, comforting the child, and assisting the child in problem-solving) when the child expresses a negative emotion and less likely to employ nonsupportive emotion socialization practices (e.g., being distressed, exhibiting punitive reactions, and minimizing the child's distress; McKee et al., 2017).

Other studies suggest that higher levels of mindful and compassionate parenting may help parents adopt a less controlling parenting approach. Lippold et al. (2015) observed that adolescents whose mothers reported higher levels of mindful parenting viewed their mothers as less overcontrolling, which, according to the authors, may suggest that these parents may be better able to accept children's need for autonomy and privacy and feel more comfortable giving their children more independence. Likewise, in a study with mothers of school-aged children,

Moreira et al. (2020) found that higher scores in the mindful and compassionate parenting dimension pertaining to the nonjudgmental acceptance of parental functioning were negatively associated with overprotection behaviors. These results suggest that parents who feel more compassion for themselves as parents and are better able to accept their limitations and imperfections in the parenting role may feel more confident in their parenting skills and, thus, more secure about granting their children more autonomy. Interestingly, the results of this study also showed that being better able to notice the child's emotions and to adopt a compassionate attitude toward the child can contribute to higher levels of overprotection behaviors. Mindful and compassionate parents are usually more attuned to the child; consequently, they may be better able to detect distress in their child and to connect to the child's suffering and thus feel more compelled to protect the child from situations perceived as threatening or that provoke distressing emotions in the child. Although overprotection is considered a nondesirable and intrusive parental behavior, it has a component of warmth that derives from parents' intention to protect their child from potential threats (Holmbeck et al., 2002). Hence, overprotection often reflects sensitive parenting (Buss & Kiel, 2011), which may explain why more compassionate parents can also be more overprotective.

By promoting higher quality parenting, the adoption of this present-centered, compassionate, and nonreactive parenting approach is a vehicle for promoting positive interactions between parents and children and higher quality parent-child communication. A study has shown that parents with higher levels of mindful parenting were more likely to ask their adolescent child for information (e.g., about school) and that children were more likely to disclose routine information about their activities with them (Lippold et al., 2015). In a more recent study, Lippold et al. (2019) corroborated that mindful parenting may foster better parent-child communication by showing longitudinally that mindful parenting predicted increased levels of adolescent disclosure and parental solicitation.

Mindful and Compassionate Parenting and Children's Outcomes

Attachment Considering the effect that mindful parenting may have on parental behaviors and, consequently, on the quality of the parent–child relationship, it has been suggested that mindful parenting is an important pathway for the development of a secure attachment relationship between the child and his or her parents (Duncan et al., 2009). There is some preliminary evidence from cross-sectional studies that mindful and compassionate parenting, and particularly the dimensions of listening with full attention and compassion for the child, can contribute to more positive and secure representations of their relationships with their parents in preschool and school-aged children and adolescents (Moreira et al., 2018; Medeiros et al., 2016; Zhang et al., 2019). Although most studies are cross-sectional, the effect of this parental approach on child outcomes seems to be both direct and indirect, occurring through parenting behaviors (Parent et al., 2016b) and child attachment (Moreira et al., 2018).

As will be explained below, secure attachment lays the foundation for the development of important psychological resources for the child's mental health, such as dispositional mindfulness, self-compassion, emotion regulation, and psychological flexibility. This hypothesis, and our model in general, is consistent with a recent intergenerational model that explains how self-compassion develops in the context of the parent–child relationship (Lathren et al., 2020). This model explains that parents with a secure attachment orientation have higher levels of self-compassion and, consequently, tend to exhibit more supportive responses when their child experiences difficult emotions (e.g., anger, sadness, shame). These responses, in turn, promote the development of a child's secure attachment, resulting in higher levels of self-compassion and more positive socioemotional and behavioral outcomes across several domains.

Children's Internal Resources In our model of mindful and compassionate parenting, we consider that this parenting approach can provide the necessary and fundamental foundations for the development of important internal resources (i.e., characteristics that, when present, help the child better cope with difficult emotions and suffering), such as emotion regulation, mindfulness, self-compassion, and psychological flexibility. We highlight these variables because they are well-known psychological resources that have a strong protective effect on children's and adolescents' psychological functioning and mental health (e.g., Bluth & Blanton, 2015; Bluth et al., 2017; Kashdan & Rottenberg, 2010; Livheim et al., 2016; Muris et al., 2016, 2017; Neff & McGehee, 2010) and because their relationships with this parenting approach has already received empirical support. Nevertheless, we recognize that other variables may be influenced by parenting and the perception of security that the child develops in the parent–child relationship and in turn influence the child's mental health.

Emotion Regulation Emotion dysregulation or difficulty-regulating emotions has been consistently identified as a transdiagnostic vulnerability factor that is linked to numerous difficulties and forms of psychopathology across the lifespan (Berking & Wupperman, 2012; Riediger & Klipker, 2014; Sheppes et al., 2015). Among children, maladaptive strategies of emotion regulation (e.g., rumination, catastrophizing) were shown to be associated with children's emotional problems and psychopathology, whereas adaptive strategies (e.g., positive reappraisal) seem to have a protective function with regard to children's mental health (e.g., Chan et al., 2016; Garnefski et al., 2007; Legerstee et al., 2010; Liu et al., 2016; Orgiles et al., 2018).

Research indicates that although the transmission of emotion regulation strategies from parents to children may have a genetic basis (Goldsmith et al., 2008), the family context, particularly parenting practices and behaviors, plays a critical role in the development of adaptive

emotion regulation ability during childhood and adolescence (Eisenberg et al., 1998; Jaffe et al., 2010; McEwen & Flouri, 2009; Melnick & Hinshaw, 2000; Morris et al., 2007; Rutherford et al., 2015; Zeman et al., 2006). A few studies have shown that a mindful and compassionate approach to parenting may play an important role in shaping this capacity. For instance, in a study with parents of children aged between 3 and 7 years, mindful parenting and the quality of parent–child attachment mediated the association between parents’ dispositional mindfulness and children’s emotional lability/negativity and emotion regulation (Zhang et al., 2019). According to the authors, mindful parents tend to accept children’s emotions and fulfill their emotional needs, which are factors known to facilitate secure attachment and the development of adaptive emotion regulation skills (Gottman et al., 1996; Morris et al., 2007). Similarly, in a study that included mother–adolescent dyads, Moreira and Canavarro (2019) found that higher levels of mindful parenting, particularly in the dimensions of compassion for the child, listening with full attention, and nonjudgmental acceptance of parental functioning, were associated with lower levels of emotion regulation difficulty in adolescents.

The processes through which mindful and compassionate parenting may foster adaptive emotion regulation in children and adolescents can be diverse. Morris et al.’s (2007) tripartite model of the impact of the family on children’s emotion regulation and adjustment postulates that the family context may affect the development of children’s emotion regulation via three processes: (1) parenting practices, (2) the emotional climate of the family, and (3) observation. First, parenting practices, particularly emotion-related practices (i.e., the way parents socialize their children with emotions; Eisenberg et al., 2003), may have a profound impact on children’s regulatory ability. The existing research suggests that parents who employ supportive parental emotion socialization practices (i.e., those who allow children to express their emotions and who comfort, encourage, and help the child solve problems) usually have children who are better

able to regulate their emotions (e.g., Jin et al., 2017), whereas nonsupportive reactions to children’s negative emotions (e.g., punishing or minimizing children’s emotional expression) are usually associated with children’s emotional dysregulation and internalizing symptoms (e.g., Sanders et al., 2015). As already mentioned in a previous section of this chapter, a study has shown that mindful parenting is associated with more supportive emotion socialization practices (e.g., greater encouragement of children’s emotional expression; more emotion-focused responses, such as comforting the child; and more problem-focused responses, such as helping the child solve a problem) and fewer nonsupportive practices (i.e., minimization of child distress, punitive reactions, and experience of distress; McKee et al., 2017). Thus, it can be hypothesized that mindful and compassionate parenting, as a parenting approach that facilitates appropriate emotion socialization, can also contribute to the development of more adaptive emotional regulation throughout development.

Second, the emotional climate of the family, which is determined by several processes and dynamics, including the parent–child attachment relationship, the parenting style, the marital relationship, and the emotional expressivity of family members (Morris et al., 2007), also plays an important role in how parents influence their children’s emotion regulation abilities. In a positive family climate, children feel secure in feeling and expressing their emotions because they expect to be accepted and understood and they know that their emotional needs will be validated and satisfied. In contrast, when the emotional climate of the family is negative (e.g., due to negative parenting practices such as psychological control or negative affective interactions), children feel less secure and may experience greater difficulty adaptively regulating their emotions (Sim et al., 2009). Mindful parents seem to create a positive family climate, adopting parenting styles characterized by emotional validation, warmth, and affection (Duncan et al., 2015; Parent et al., 2016a; Wang et al., 2018), which in turn facilitates the development of a secure relationship with their children (Medeiros et al., 2016; Zhang

et al., 2019) and creates the ideal foundation for the development of adaptive emotion regulation.

Third, children can learn emotion regulation strategies through observation or modeling. By repeatedly observing how their parents respond verbally and behaviorally to situations that elicit emotions (i.e., how they usually regulate their emotions), children can internalize these regulatory strategies and begin to use them in the same emotion-eliciting situations (Rutherford et al., 2015). Research has shown that mindful and compassionate parents are more likely to employ adaptive emotion regulation skills (Gouveia et al., 2019). In addition, they tend to present higher levels of self-compassion (Gouveia et al., 2016; Moreira et al., 2016) and dispositional mindfulness (Gouveia et al., 2016; Han et al., 2021), characteristics that likely help them to regulate their negative emotions more adaptively in times of stress or suffering (e.g., Chiesa et al., 2013; Fogarty et al., 2015; Roemer et al., 2015), particularly those that arise in interactions with their children. In fact, mindfulness is associated with a greater ability to attend to internal and external events, which in turn promotes the individual's ability to detect the need to implement emotion regulation strategies (Roemer et al., 2015). By promoting greater sensitivity to affective cues and an early awareness of subtle changes in emotional states that signal the need for control, mindfulness can enhance executive control and emotion regulation (Teper et al., 2013). In addition, as mindfulness involves nonjudgmental acceptance of emotions and thoughts and psychological flexibility rather than avoidance, it may also decrease the intensity of emotional responses and increase the tolerance of negative affect, which are important aspects of emotion regulation (Roemer et al., 2015) that children can learn through observation. Previous studies have also found a consistent link between self-compassion and self-report measures and biological indices of emotion regulation (Diedrich et al., 2014; Svendsen et al., 2016). Being self-compassionate entails not avoiding or repressing negative emotions and, instead, acknowledging them, viewing them as part of the human condition, and experiencing a true desire to alleviate

one's own suffering (Neff, 2003b). Therefore, self-compassion allows individuals to have a more balanced perception of negative emotions and to cope with negative emotions without avoiding them, amplifying them, or overidentifying with them. In addition, self-compassionate individuals are less likely to criticize, blame, or judge themselves in difficult situations and are more likely to view painful situations as a normal part of life. Therefore, they usually cope better with stress and negative emotions and may consequently be better able to effectively regulate negative emotional states when they arise (Allen & Leary, 2010).

Therefore, we propose that because of their self-compassion and mindfulness skills, mindful and compassionate parents may be better able to regulate their emotions and behaviors in stressful moments, particularly those that arise in interactions with their children. They may also be less likely to criticize or blame themselves during difficult times with the child. As they observe their parents coping with stressful situations in an accepting and nonjudgmental manner and without acting impulsively, children may learn and internalize this adaptive way of regulating negative emotions. In contrast, if children observe their parents being self-critical or unable to regulate their emotions and behaviors in an adaptive manner, they may learn and internalize the maladaptive strategies their parents use to regulate their negative emotions (Moreira et al., 2018).

Dispositional Mindfulness As depicted in Fig. 16.1, mindfulness is another psychological resource that can be developed in the context of a mindful and compassionate parenting, both directly and indirectly through parenting behaviors and, particularly, through the development of a secure attachment in children. According to this hypothesis, some cross-sectional studies with parent–adolescent dyads have already shown that mindful and compassionate parenting is associated with higher levels of adolescent dispositional mindfulness (Moreira et al., 2018; Moreira & Canavarro, 2018b) and that this association can be mediated by the degree of security the adolescent perceives in the parent–child relation-

ship (Moreira et al., 2018). These results are in line with previous studies that suggested that the capacity for mindful awareness is related to the quality of one's early relationships with attachment figures (Caldwell & Shaver, 2013; Pepping & Duvenage, 2016; Ryan et al., 2007). Individuals who were raised by sensitive and responsive caregivers (i.e., who were attuned to, mirrored, and empathized with the child's experiences) and who developed a secure attachment seem to be more likely to develop the reflective, regulatory, and self-observing capacities that characterize dispositional mindfulness (Caldwell & Shaver, 2013, 2015; Melen et al., 2017; Pepping et al., 2013, 2015; Ryan et al., 2007; Shaver et al., 2007). For instance, Pepping and Duvenage (2016) found that adolescents' recollection or current experiences of parental warmth and rejection were associated with their current levels of dispositional mindfulness through their attachment orientations. Although prior research has suggested that mindfulness skills have their roots in family dynamics and parent-child interactions, further studies are needed to establish that mindful parenting can lead to the development of mindfulness skills in children/adolescents.

Self-Compassion The way parents interact with their children may also have a strong impact on the development of children's self-compassionate or self-critical inner dialogues (Gilbert & Procter, 2006; Lathren et al., 2020; Neff, 2011). Although limited, existing research found that children of mindful and compassionate parents also tend to report higher levels of self-compassion (Moreira et al., 2018; Moreira & Canavarró, 2019). In fact, it has been argued that self-compassion develops in the context of positive and security-boosting interactions with attachment figures (Gilbert, 2005a; Gilbert & Procter, 2006; Neff & McGehee, 2010; Neff & Beretvas, 2013; Shaver et al., 2017). In an optimal caring environment with a consistently supportive and caring attachment figure, the child may develop internal working models of the self and others as being reliable and worthy of care and love (Collins et al., 2004), and the soothing system of affect regulation may

develop adequately, allowing the child to cultivate compassionate self-to-self relationships (Gilbert, 2005b; Gilbert & Procter, 2006). These positive experiences promote the development of emotional memories of being soothed, protected, and cared for (Lee, 2012), allowing the individual to regulate his or her emotions with affection, warmth, and care when needed. In contrast, when parents are unresponsive or inconsistently responsive or are even neglectful or abusive, they do not provide the fundamental conditions for the development of secure attachment (Mikulincer & Shaver, 2016) and, consequently, for the development of self-compassion (Shaver et al., 2017). In such a relational context, the soothing system is underdeveloped and understimulated, and the child/adolescent is likely to become more self-critical and less self-compassionate (Gilbert, 2005a; Gilbert & Procter, 2006). Individuals raised in these relational contexts may have fewer available emotional memories of being loved and soothed when they need to regulate their emotions in difficult moments (Lee, 2012).

There is empirical evidence of the associations among early experiences with caregivers, attachment styles, and levels of self-compassion. For instance, some studies have shown that an individual's level of self-compassion is associated with his or her attachment orientation (Moreira et al., 2015, 2016; Neff & Beretvas, 2013). Neff and McGehee (2010) also found that adolescents with low levels of self-compassion are more likely to have critical mothers, dysfunctional family environments, and insecure attachment styles. Based on these results, the authors concluded that self-compassion can be viewed as an "internal reflection of the parent-child relationship" (Neff & McGehee, 2010, p. 236), which means that children with cold and critical parents may internalize a cold and critical internal dialogue, whereas those with warm and caring parents are more likely to internalize a self-compassionate way of relating to themselves.

Parents who adopt a compassionate and mindful approach in parenting tend to be more caring, available, and responsive to their child's needs,

thereby creating the necessary foundation for the development of a secure attachment (Duncan et al., 2009; Medeiros et al., 2016) and, consequently, for the development of self-compassion (Gilbert, 2005a; Gilbert & Procter, 2006). In addition, as already mentioned, as these parents tend to have higher levels of self-compassion (Gouveia et al., 2016; Moreira et al., 2016) and of dispositional mindfulness (Gouveia et al., 2016; Parent et al., 2016b; Zhang et al., 2019), they may also model an adaptive way of coping with stressful life events and with difficult thoughts and emotions. According to Neff (2011), being self-compassionate in front of a child is one of the most powerful ways to help children develop self-compassion. If children see their parents coping with difficult situations in a mindful and compassionate manner, they may learn this adaptive self-to-self relating through observation. In contrast, children whose parents usually cope with difficult situations with self-criticism do not have a compassionate and mindful model to follow and, instead, may learn that difficult situations and moments of suffering should be handled with negative emotions and harsh self-judgment.

Psychological Flexibility Finally, our model also predicts that mindful and compassionate parenting may foster children's psychological flexibility, which is another psychological resource known to be associated with several indicators of emotional well-being (Kashdan & Rottenberg, 2010; Livheim et al., 2016; Muris et al., 2017). Psychological flexibility has been described as one's ability to stay in contact with the present moment and to change or persist in a certain behavior based on personal values (Hayes et al., 2006). The inability to remain in contact with the present moment and to engage in patterns of effective action that are linked to one's life values (i.e., psychological inflexibility) results from several processes, including experiential avoidance (unwillingness to experience certain unwanted private events, including thoughts, memories, emotions, and bodily sensations, and efforts to avoid, suppress, or eliminate those unwanted private experiences or otherwise control their frequency, form, or situational sen-

sitivity; Hayes et al., 2012) and cognitive fusion (a process that refers to an attachment or entanglement with the content of private events and responding to the content of private events as if they were accurate representations of reality; Greco et al., 2008).

The limited research conducted on the relationship between mindful and compassionate parenting and children's psychological flexibility suggests that this parenting approach, particularly the dimension of listening with full attention, can indeed foster adolescents' psychological flexibility (Moreira & Canavarro, 2019). Parents who are mindfully aware in interactions with their child may model an attitude of being present, that is, an attitude of nonjudgmental awareness of psychological and environmental events as they occur, which contrasts with experiential avoidance. In addition, as already mentioned, mindful and compassionate parents seem to help their children develop mindfulness skills (Moreira et al., 2018), which may enable their children to better notice and observe their thoughts and feelings without becoming entangled in the content of those private events and behaving as if they were literally true.

Mental Health The ultimate outcome in our conceptual model is the child's mental health. From our perspective and based on the findings of various empirical studies, mindful and compassionate parenting can have a beneficial effect on a child's mental health by enabling the child to develop secure attachment and internal resources such as adaptive emotion regulation strategies, mindfulness, self-compassion, or psychological flexibility, which are known to promote adaptive psychological functioning and child mental health (Bluth & Blanton, 2015; de Bruin et al., 2011; Muris et al., 2016, 2017; Neff & McGehee, 2010). In fact, mindful parenting has been associated with diverse positive adjustment outcomes, including lower levels of internalizing (e.g., depression, anxiety) and externalizing (e.g., behavior problems) problems in children (Calvete et al., 2020; Han et al., 2021; Parent et al., 2016b), better generic or disease-specific quality of life

(Medeiros et al., 2016; Moreira et al., 2018; Serkel-Schrama et al., 2016), and a lower likelihood of adolescent substance use (Turpyn & Chaplin, 2016). Studies assessing the effects of mindfulness-based parenting programs on children's psychological functioning also support the role of this parenting approach on children's adjustment (Bögels et al., 2010, 2014; Coatsworth et al., 2010; van der Oord et al., 2012). For instance, Bögels et al. (2014) found that after completing a mindful parenting program, parents of children with a diagnosed psychiatric disorder reported that their children less often presented internalizing and externalizing difficulties.

Despite the increasing evidence demonstrating a positive association between this parenting approach and children's positive psychosocial adjustment, only a few studies have attempted to understand which mechanisms might be responsible for this relationship. As highlighted in the previous sections of this chapter, and consistent with our model, different variables (parental behaviors, child attachment, and child internal resources) may explain why mindful parenting can have such an important effect on children's mental health. Understanding these mechanisms can not only contribute to a significant advance of the scientific knowledge in this area, but also guide the development of parenting interventions. Therefore, future studies should continue to explore the processes linking this parental approach to the child's mental health, and particularly the processes that explain the therapeutic change observed in the psychological adjustment of children whose parents participated in a mindfulness- and compassion-based parenting intervention.

Conclusions

In this chapter, we have sought to demonstrate how parents' self-compassion can influence their parenting. Although research into the role of self-compassion in parenting is still in its infancy, there is preliminary empirical evidence that self-compassion can help parents experience less par-

enting stress and adopt more positive parenting styles and practices. Based on existing research and previous theoretical contributions, we proposed a conceptual model that seeks to explain how a parenting approach characterized by high levels of (self-)compassion and mindfulness (i.e., a mindful and compassionate parenting approach) can promote better mental health in children through a set of processes. This model stresses the importance of perceiving parenting as a process resulting from the influence of several inter-related factors, namely, parenting factors (e.g., parents' self-compassion), child factors (e.g., temperament), and contextual factors (e.g., work context). According to this model, this parenting approach fosters lower levels of parenting stress and parental behaviors that are more sensitive and responsive to the child's needs and that promote the development and strengthening of a secure attachment. In turn, a secure attachment establishes the necessary and essential basis for the development of critical internal resources, such as mindfulness, self-compassion, psychological flexibility, and emotional regulation, that protect the child's mental health throughout development.

The proposed model is an intergenerational model that highlights the importance of parenting practices as a privileged vehicle for conveying important skills such as self-compassion and mindfulness. In fact, theory and research have shown that we tend to treat our children and ourselves in the same way that we were treated as a child. Parents who had sensitive caregivers and developed a secure attachment learned to regulate their emotions more adaptively and were able to develop a compassionate intrapersonal relationship. These individual characteristics decisively influence the way parents later relate to their children. Secure and compassionate parents are more likely to adopt a mindful and compassionate stance in parenting, thereby providing the ideal conditions for the development of a secure attachment and for the flourishing of compassion and other protective factors of their child's mental health. Therefore, learning to be more mindful and compassionate, both in the relationship with oneself and children, can help

parents break the maladaptive intergenerational cycles that perpetuate attachment insecurity, negative parenting styles, and poorer psychological functioning in children, who may later become parents and maintain or break these cycles.

The early stages of life represent an extraordinarily important opportunity to promote lifelong mental health. Considering the significant impact that the parent–child relationship has on children’s development and mental health, helping parents to reduce parental stress and adopt more positive parenting behaviors through the development of greater self-compassion and of mindful and compassionate parenting could be an extraordinarily effective way to promote more adaptive developmental trajectories for future generations. Thus, future research should continue to focus on the study of the role of self-compassion in parenting as well as on the study of the different associations presented in the conceptual model described in the present work. It is also essential to continue to develop and study the effectiveness of parenting interventions designed to promote a mindful and compassionate parenting approach.

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