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Exploring the Prevalence, Risk, and Protective Factors of Parental Burnout among Mothers in the Ibadan Metropolis

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Abstract. Parental burnout, characterized by emotional exhaustion, detachment, and a sense of ineffectiveness, has emerged as a significant concern impacting the well-being of mothers worldwide. This study aims to explore the prevalence, risk, and protective factors associated with parental burnout among mothers in the Ibadan metropolis, Nigeria. The study employed a descriptive cross-sectional design. A sample of 357 mothers residing in the Ibadan Metropolis were conveniently selected and participated in the study by responding to the nine validated scales and demographic questions which assessed all the variables of interest. The findings reveal a 7% prevalence of parental burnout among mothers in the Ibadan Metropolis. Factors such as personality (neuroticism, conscientiousness and agreeableness), low emotional intelligence, and work status predicted or served as risk factors. On the other hand, resilience, marital satisfaction, and parental self-efficacy were significant protective factors mitigating the risk of burnout among mothers. The study underscores the urgent need for targeted interventions and the importance of raising awareness about burnout, promoting self-care practices, fostering social support networks, and implementing family-friendly policies in workplaces. The findings can guide policymakers, healthcare professionals, and community organizations in developing evidence-based interventions to support and empower mothers, ultimately enhancing their well-being and the overall quality of family life.

Keywords: Parental burnout, Mothers, Risk and Protective factors

1. Introduction

Parenting is one of the most challenging and demanding duties, but it is also a priceless period experienced by mothers. Children rely wholly on their parents to provide their physical, psychological, and social necessities, such as school and extracurricular activities, food and nutrition, safety, and care, which are largely provided by mothers (Swit & Breen, 2022). The daily tasks of caring for others, raising a child(ren), workplace demands and the accumulation of seemingly difficult situations among other factors are responsible for difficulty and exhaustion leading to burnout (Kawamoto et al., 2018). Extant studies have reported that parental burnout is a distinguishable and distinct pattern that differs conceptually and practically from other forms of burnout (Roskam et al., 2017; Roskam et al., 2018).

Parental burnout is described as a stress-related phenomenon characterized by emotional depletion experienced by a parent in diverse forms such as chronic fatigue that does not improve with rest, (thoughts that parenting involves a lot of commitment; emotionally taxing role as a parent), being fed up as a parent (i.e. having difficulty been with one's child/ren; dissatisfaction in one's parenthood), emotional distancing from children (i.e. the parent can perform only the instrumental aspects of parenting but the warmth fades, doing the bare minimum for the children and nothing more), and a contradiction from previous parental self (i.e. the parent feels he/she is not doing a good job, frequently associated with feelings of guilt and shame, lack of pleasure and fulfilment) and many parents report feelings of being stuck in a bad situation with no escape (Roskam et al., 2018; Hubert & Aujoulat, 2018). Parental burnout occurs when the demands of parenthood outweigh the resources available to meet those demands. It is a result of extended exposure to chronic parenting stress (Roskam et al., 2018; Mikolajczak & Roskam, 2018).

Consequently, parental burnout resulting from chronic parenting stress, irrespective of its source which could be environmental, child, and/or parental characteristics, has detrimental implications on the development of the child and the parent-child interaction as well as the marital relationship (Crnic et al., 2005). Furthermore, the deleterious consequences of parental burnout are enormous. It was reported that parents who experienced a higher level of parental burnout neglected and abused their child/ren (Szczygiel et al., 2020). Others include somatic complaints and sleep disorders, depression, chronic fatigue, illness, lack of concentration, suicidal ideation, addictive behaviours to substances, games, work as well as alcohol, anxiety and frustration (Ahola et al., 2006; Ersoy-Kart, 2009), marital difficulties leading to conflicts (Mikolajczak et al., 2018), difficulty in adjusting to the demands of their jobs, and the urgency to run away just to mention a few.

Previous research reported that about 8% (3.5 million) experience parental burnout in the United States of America (Roskam et al., 2017). Sanchez-Rodriguez et al. (2019) found that 2 out of 10 mothers suffer from parental burnout. A global prevalence rate of parental burnout at 5 to 8% was reported among English and French-speaking parents (Roskam et al., 2018); 2.1% among Dutch moms, 21% among Japanese mothers, 6.5% in Canada, 5.8% in Hungary and 6.6% among French mothers (Sanchez-Rodriguez et al., 2019). In more recent times, Roskam, et al. (2021) reported parental burnout between 6.2% and 6.7% in French parents and between 7.5% and 9.8% among parents in Belgium. However, there is a dearth of research on parental burnout in most developing countries in sub-Sahara Africa.

The role strain theory expatiated the process which leads to burnout. The theory posits that pressure or stress experienced by an individual is a result of certain roles, expectations, duties and actions by social structures on individuals (Goode, 1960). The inability to successfully carry out these tasks places a strain on the individuals. Some of the resources involved in these relationships include time, emotional favour or material resources (Goode,1960). For instance, a mother takes on multiple roles such as parenting, trading, managing, and writing among others. The individual is thus unable to perform these roles successfully compared to when they had fewer roles (Creary & Gordon, 2016). Mothers' experience of burnout can be a result of several risk factors and the absence of protective factors to mitigate the pressure and strain of parenting.

1.1 Risk Factors of Parental Burnout

Extant studies have reported that the accumulation of several risk factors rather than specific factors is responsible for parental burnout. For instance, a combination of demographic, situational, and dispositional risk factors could lead to the onset of burnout in parents (Mikolajczak et al., 2017; Roskam et al., 2017; Mikolajczak & Roskam, 2018). Demographic attributes such as number of children, age of mother and educational qualification have been found culpable as risk factors (Kawamoto et al. 2018). Having a higher number of children increases the risk of parental burnout (Gerain & Zech, 2018). Further, the nature of employment (full-time/ part-time or self-employed) appears to be a predicting factor (Mikolajczak et al., 2018a). Working part-time or more than 9 hours a day is capable of depleting one's emotional and temporal resources when handling child-related issues (Zick & Bryant 1996).

In the same vein, it was reported that having a child with disorders which could be behavioural, emotional, or learning (resulting in additional care/ cost attention, and patience), disability or chronic illness could lead to high parental burnout (Lindahl et al., 2014). Parents with autistic children are more prone to parental burnout, especially in instances when their children have both physical and mental disabilities (Kutuk et al., 2021). With respect to individual disposition, perfectionism, which is characterized as an individual’s tendency to set extremely high self-standards for self and strive for flawless performance, accompanied by critical self-evaluations has been linked to increased parental burnout (Frost et al., 1990). According to Lindström et al. (2011) parents who try to do "too well" risk burning out. The more meticulous, invested and perfectionist parents are, the higher the risk of developing burnout when confronted with the reality of unattainable objectives (Lindahl et al., 2014).

Further, personality traits (neuroticism, conscientiousness and agreeableness) have a significant impact on parental burnout (Mikolajczak et al., 2018a; Wang et al., 2023). Neuroticism which is characterized by frequent anxieties and increased emotional instability, as well as recurrent and vigorous adverse consequences (Finch et al., 2012) results in an overbearing, overly protective, and, at times, harsh parenting style. According to Prinzie et al. (2009), highly neurotic parents react to life events with a greater intensity which in turn negatively affects the individual and leads to parental burnout and sometimes more severe mental health issues such as anxiety or depressive disorders (Wang et al., 2023).

On the other hand, conscientiousness which is characterized by self-discipline, order, and planning results in lower negative effects, such as guilt which is reported to have improved automatic downregulation of negative affect. Prinzie et al. (2009) stated that parents high on conscientiousness follow childrearing norms and thus create a more ordered and cohesive atmosphere for their children. In addition, agreeableness characterized by friendly, warm, loving and empathic behaviours was reported as having a negative correlation with parental burnout (Mikolajczak et al., 2018a). Thus, parents high on agreeableness tend to make positive justifications about their children's behaviours and can recognize and react appropriately to their children's needs (Prinzie et al., 2009). Emotional intelligence is the individual's capacity to recognize, communicate, manage, and use their own and others' emotions. A low level of emotional intelligence among parents was reported to increase the likelihood of burnout (Mikolajczak et al., 2018b).

1.2 Protective Factors of Parental Burnout

Several constructs have been identified as protective factors of parental burnout. Marital satisfaction is described as having a nurturing healthy relationship with one's spouse, effective communication, and being happy with one's partner. According to Lindström et al. (2011), marital satisfaction is associated with reduced parental burnout as they experience a blossoming relationship with their spouse. Consequently, the level of cooperation and synchronization between parents as regards parenting goals, attitudes and methods of raising the children (Feinberg & Kan, 2008) serves as a protection against parental burnout. A positive co-parenting relationship is reflected in the extent of harmonious involvement of both parents in the care of a child. This builds consistency in goals and actions, parenting decisions and values of both parents concerning their children thus mitigating the risk of experiencing parental burnout (Durtschi et al., 2017). It is worth noting that, in some cases, the co-parent may not be the spouse, especially in the event of divorce, separation or death of either of the parent.

Bandura's (1982) social cognitive theory is the foundation for the concept of parental self-efficacy. It describes the degree to which parents believe they are competent and effective in their parenting tasks. Studies have linked high parental self-efficacy to high positive parenting, better adaptation to parenthood and consequently lower burnout. This means that the parents believe in their abilities to meet the demands of parenting and therefore develop adequate coping skills and resilience towards challenges (Albanese et al., 2019). Likewise, social support is the provision of emotional, informational, and instrumental assistance an individual perceives and receives from their social networks such as family and acquaintances (Mortensen & Barnett, 2015). It was reported to strongly protect from parental burnout (Lin et al., 2022). Similarly, resilience, defined as the capacity to recover from stress may guard against a broad range of adversities, from daily minor annoyances to significant traumatic events. It explains the survival and adaptability skills of individuals through difficult life experiences (Fletcher & Sarkar, 2013). Stanculescu et al. (2020) showed a negative association between parental burnout and resilience. Resilience provided adaptability skills to stressful situations leading to the reduction in burnout.

For the present study, we sought to explore the connections of various risk and protective factors as meaningful markers of parental burnout among mothers. Three potential risk factors (perfectionism, low emotional intelligence and personality traits such as neuroticism, agreeableness and conscientiousness) alongside some demographic factors such as the age of the mother, number of children, highest educational qualification, working status, having children with disability, and nature of work were hypothesized to influence parental burnout. Similarly, five potential protective factors (parental self-efficacy, social support, co-parenting relationship, resilience and marital satisfaction) were hypothesized as protective factors in mothers' parental burnout.

1.3 Research Objectives

- Explore the prevalence of parental burnout among mothers.
- Investigate the risk and protective factors responsible for parental burnout among mothers.

1.4 Research Hypothesis

We hypothesized that:

- The risk factors (perfectionism, low emotional intelligence and personality traits-neuroticism, agreeableness and conscientiousness, demographic factors: age of the mother, number of children, highest educational qualification, working status, having children with disability, and nature of work) will be directly associated with mothers' increased feelings of parental burnout.

- The protective factors (parental self-efficacy, social support, co-parenting relationship, resilience and marital satisfaction) will be directly associated with decreased feelings of parental burnout.

2. Research Methodology

2.1 Participants

The sample comprised 357 mothers who were recruited through convenience sampling at multiple locations within the Ibadan Metropolis such as community health centres, malls, schools, and childcare centres. The parental burnout scale, brief resilience scale, brief co-parenting scale, brief emotional intelligence scale, big five inventory, relationship assessment scale, multidimensional scale of perceived social support, parental self-agency measure and brief parenting perfectionism scales were adopted by the researcher. Data was drawn from a wide range of mothers in the Ibadan Metropolis with at least one live-in child. The mean age of mothers was 39.32 and the standard deviation was 8.49. From the participants, about 18.8% had one child, 34.2% had two children and 47.1% had more than two children. 62.7% of these mothers reported having at least a Bachelor's degree, 10.9% had SSCE, 23.8% M.Sc while 2.5% reported having a PhD degree. 13.2% of these mothers worked part-time while 86.8% worked full-time, 34.7% were self-employed and 65.3% were civil servants. 2% had children with disability.

2.2 Inclusion criteria

Mothers who are employed with at least one live-in child.

2.3 Measures

Demographic information such as mother's age, the number of children, educational qualification, working status, nature of work and having a child/ren with disability and its nature was collected through section A of the questionnaire. Section B comprises the following standardized measures:

2.3.1 Parental Burnout (Roskam et al., 2018)

Parental Burnout Assessment consists of 23 items and it is divided into three components: emotional and physical exhaustion consists of 8 items, emotional distancing with 8 items and loss of efficacy and accomplishment with 6 items. The scale has a 7-point Likert response format ranging from *0 (never) to every day (6).* Some of the items include: *I feel completely run down by my role as a parent, I have the sense that I am really worn out as a parent, I am so tired out by my role as a parent that sleeping does not seem like enough.* Cronbach's alphas for the original scale were 0.93 for the global score, 0.94 for Emotional Exhaustion, 0.88 for Emotional Distancing, and 0.86 for Loss of Efficacy and Accomplishment. The scale was revalidated at .92.

2.3.2. Perfectionism (Snell et al., 2005)

This scale was divided into two dimensions: perfectionistic concerns (PC; 3 items; e.g., "As a parent, if I failed in part, it's as bad as if I failed completely") and perfectionistic strivings (PS; 3 items; e.g., "As a parent, I expect nothing less than perfection"). The items are rated on a 5-point scale (Does not match me at all [1] to Matches me perfectly [5]) and averaged to form scale scores. The Cronbach's α of PC was .82; the Cronbach's α of PS was .87. The scale was revalidated at .82.

2.3.3. Big Five Inventory (BFI, John & Srivastava, (1999)

The scale is based on the five dimensions of personality which are: neuroticism, agreeableness, conscientiousness, extraversion and openness. It consists of 44 -items and is rated on a 5-point Likert scale from disagree strongly to agree strongly. However, for this study, the three subscales of Neuroticism (e.g. *I see myself as someone who is depressed*), Agreeableness (e.g. *I tend to find fault in others)* and Conscientiousness (*I do thorough jobs*) were used. The original scale reported Reliability, Agreeableness, .83 for Conscientiousness, and .85 for Neuroticism. The scale was revalidated at .63.

2.3.4. Brief Emotional Intelligence Scale (BEIS-10, Davies et al., 2010).

The scale was divided into five factors (utilization of emotions, own emotions, regulation of own emotions, others' emotions and regulation of others' emotions). It comprised 10 items and were rated on a 5-point Likert scale ranging from strongly disagree to strongly agree. Some of the items include: I know why my emotions change, I easily recognize my emotions as I experience them, and I can tell how people are feeling by listening to the tone of their voice. The psychometric property was reported at .83. The scale was revalidated at .85.

2.3.5. The Relationship Assessment Scale (Hendrick, 1988)

The scale comprised seven items and items are rated on a 5- point Likert format ranging from low satisfaction to high satisfaction. Some of the items include: how well does your partner meet your needs? How good is your relationship compared to most? How much do you love your partner? The scale reported a mean inter-item correlation of .49 and an alpha of .86. The scale was revalidated at .77.

2.3.6. Brief Co-parenting Scale (B-CRS, Feinberg et al., 2012)

The B-CRS consists of twelve items. Some of the items include: my partner and I have the same goals for our child, my partner pays a great deal to our child, and I believe my partner is a good parent. Items are rated on a 7-point Likert scale ranging from 0 = not true of us to 6 = very true of us. The B-CRS had good internal consistency (Cronbach's α =.86 at Wave 1 to .85 at Wave 2). Scale was revalidated at .70

2.3.7. The Parental Self-Agency Measure (PSAM, Dumka et al., 1996)

The scale was used to measure parental self-efficacy. The PSAM is a 10-item measure that assesses parents' overall perception of their ability to function as successful parents. Items are rated on a 5-point Likert scale ranging from Never (1) to Always (5). Some of the items include: I know I am doing a good job as a mother/father, I feel useless as a mother/father, and when my child gets upset with me, I usually give in). Internal consistency was at .83. the scale was revalidated at .70.

2.3.8. Multidimensional Scale of Perceived Social Support (Zimet et al., 2010)

This scale was used to assess the participants' social support. It comprises three components: support from friends, family, and significant others. Each item was evaluated on a 7-point Likert scale ranging from 1 (very strongly disagree) to 7 (very strongly agree). Some examples of the items are: I receive the emotional support I require, I have a friend with whom I can share my joys and sorrows, and I get the emotional help and support I need from my family. The scale had a reliability coefficient of .87. The scale was revalidated at .91.

2.3.9. Brief Resilience Scale (Smith et al., 2008)

The scale consists of six items which measure the ability to recover after stress. The items are rated on a 5-point Likert scale (1 =strongly disagree; 5 =strongly agree). Items 1, 3, and 5 are positively worded while items 2, 4, and 6 are negatively worded. Some of the items include: I tend to bounce back quickly after hard times, I have a hard time making it through stressful events, and it does not take me long to recover from a stressful event). The Cronbach alpha reliability for the scale was 0.85.

3. Data Analysis

Path models were calculated in SPSS Amos using full information maximum likelihood estimation to test the hypotheses. Stata was used to determine the correlation between variables. The Chi-square (goodness of fit) statistics were used to test the hypotheses. Root mean square error of approximation, RMSEA (Browne and Cudeck, 1993) proposed that values below .05 indicate excellent model fit and values of .06 to .09 indicate adequate model fit (Browne & Cudeck, 1993); and the comparative fit index (CFI; Bentler, 1990). The study specified two path models. One of the path models discussed all three risk factors (perfectionism, low emotional intelligence and personality traits such as Neuroticism, agreeableness and conscientiousness) alongside demographic factors such as the age of the mother, number of children, highest educational qualification, working status, having children with disability, and nature of work. On the other hand, the second path model discussed the five hypothesized protective factors (parental self-efficacy, social support, co-parenting relationship, resilience and marital satisfaction) of protective factors to parental burnout. Parental burnout was specified as the moderating variable between the risk and protective factors. They directly and indirectly predicted parental burnout. The Total, Direct and indirect effect was tested using a percentile bootstrap estimation approach with 5000 (4 model number) samples, implemented with the PROCESS macro-Version 4.2 beta (Hayes, 2017).

4. Results

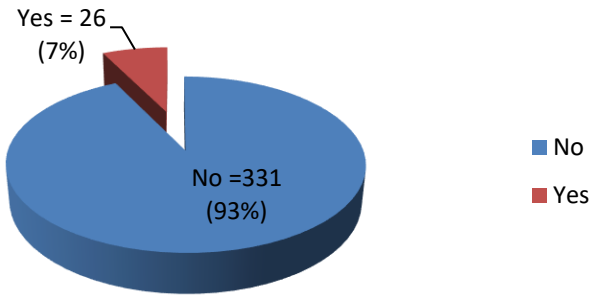

Figure 1: *Result on the prevalence of parental burnout*

The result on the prevalence of parental burnout reported that 7% of the parents tested positive for parental burnout.

For the first model (risk factors), the Chi-square (default model) df (53) = 477.472 was significant at 0.01. Root mean square error of approximation, RMSEA (*0.150*) > 0.05, indicating a poor fit (Browne & Cudeck, 1993). The Comparative Fit Index of approximately 0.342 did not meet the good fit standard (Schermelleh-Engel, Moosbrugger & Muller, 2003). For the second model (protective factors), the Chi-square (default model) df (7) = 80.718 was also significant at 0.01. The RMSEA (*0.172*) > 0.05, indicates a poor fit. The CFI of approximately 0.69 did not meet the good fit standard as it is below 0.95. The non-centrality parameter estimates and the Akaike Criteria also can be considered relatively high. Therefore, the overall estimation suggests that the model has a poor fit.

Table 1 displays descriptive statistics and correlations for the study variables. Parental exhaustion was linked to some risk variables.

Table 1: Correlations of the Dependent and independent variables

	1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**
1. PB	1.000											
2. Perfectionism	0.055	1.000	----									
3. Agreeableness	-0.427*	0.212*	1.000	-----								
4. Conscientiousness	-0.374*	0.218*	0.651*	1.000	------							
5. Neuroticism	0.337*	-0.181*	-0.355*	-0.375*	1.000	-----						
6. Low EI	-0.218*	0.164*	0.369*	0.475*	-0.208*	1.000	-----					
7. Nature of work	-0.081	-0.101	0.056	0.000	-0.053	-0.028	1.000	----				
8. Work status	-0.140*	-0.048	0.060	-0.037	-0.051	0.015	0.275*	1.000	----			
9. HEQ	-0.072	-0.098	0.064	0.000	-0.093	-0.005	0.203*	0.104	1.000	----		
10. No of children	-0.055	-0.033	0.066	0.078	-0.090	0.029	0.075	0.162*	0.009	1.000	----	
11. Age of mother	-0.069	0.012	0.131*	0.118*	-0.164*	0.086	0.168*	0.208*	0.041	0.536*	1.000	----
12. CWD	-0.041	-0.006	0.011	0.038	-0.052	0.031	0.009	0.017	-0.102	-0.012	0.087	1.000

**** p<0.01, ** p<0.05, * p<0.1*

In Table 1, there was a significant relationship between parental burnout and Agreeableness (r = *-0.427**, p<.05*); conscientiousness (*r = -0.374*p<.050*); neuroticism (*0.337* p<.05*); working status (*r = -0.140**, p<.05*). There is also inter-correlation among variables, such as agreeableness and perfectionism (*r = 0.212**, p<.05*); conscientiousness, perfectionism (r = 0.218, p<.05); number of children and age of mother (*r = 0.536, p<.05*) among other significant correlations.

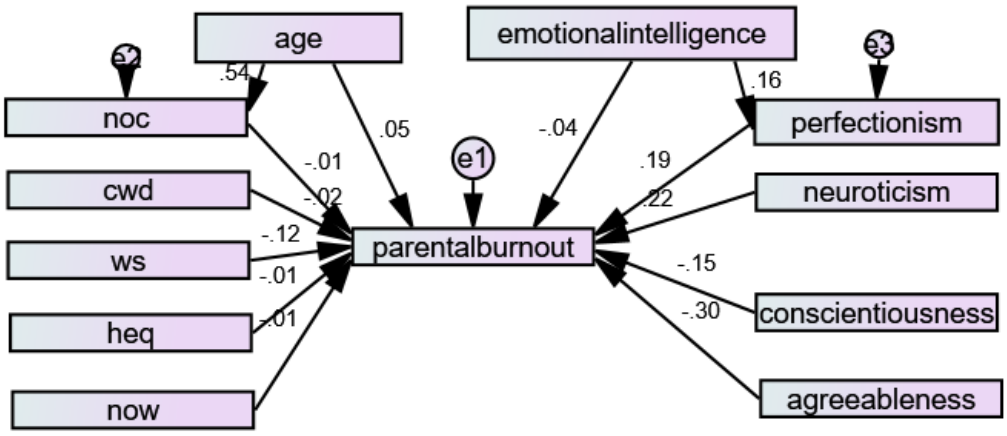

Figure 2
Path model of risk factors on parental burnout

As shown in Fig 2. the standardized beta coefficient representing the direct association between the number of children and the age of the mother to parental burnout based on the estimations showed that there was no significant effect of the number of children and, the age of the mother on parental burnout, the hypothesized mediation was not significant. On the other hand, perfectionism revealed the indirect effect ($\beta = .0534$), although less than the direct effect. This shows that partial mediation exists between perfectionism and parental burnout.

Table 2: Relationship among all related protective factors of parental burnout

	1	2	3	4	5	6
1. Parental burnout	1.000					
2. Resilience	-0.278**	1.000				
3. Co-parenting	-0.047	0.058	1.000			
4. Marital satisfaction	-0.280**	0.070	0.398**	1.000		
5. Social support	-0.082	0.150**	0.172**	0.284**	1.000	
6. Parental self-efficacy	0.407**	-0.206**	-0.184**	-0.297**	-0.116*	1.000

*** $p<0.01$, ** $p<0.05$, * $p<0.1$*

Table 2 shows the existing correlation between parental burnout resilience ($r = -0.278^{**}, p<.05$); marital satisfaction ($r = -0.280^{**}, p<.050$); parental self-efficacy ($0.407^{**} p<.05$). There were inter-correlations among protective factors, such as social support and resilience ($r = 0.150^{**}, p<0.05$); self-efficacy and resilience ($r = -0.206^{**}, p<.05$); marital satisfaction and co-parenting ($r = 0.398^{**}, p=0.05$) etc.

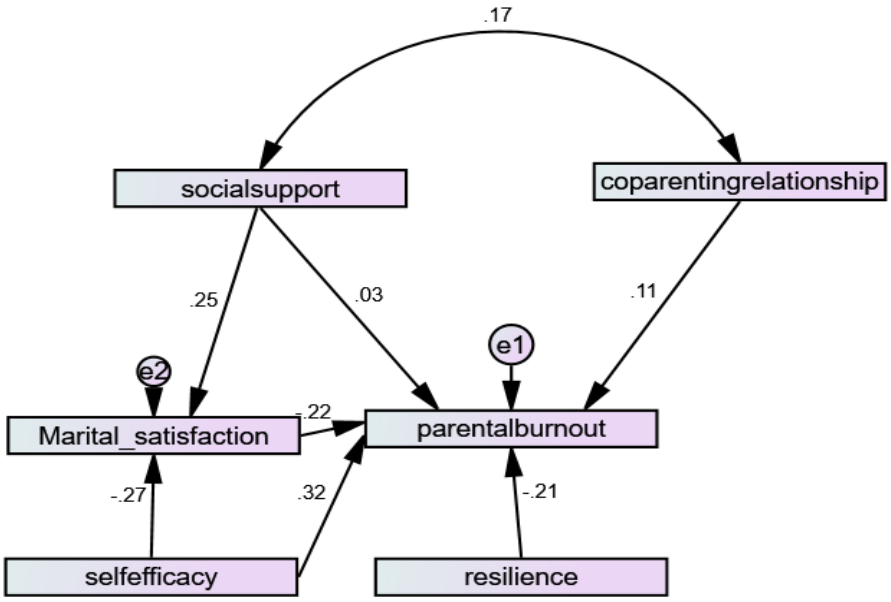

Figure 3: Path model of protective factors on parental burnout

The standardized beta coefficient representing the direct association between parental self-efficacy and marital satisfaction according to the hypothesized mediations was significant. The indirect (*β= .1800*), direct effect (*β= 1.2359*) of parental self-efficacy on parental burnout through marital satisfaction was confirmed. The same result was obtained for social support through marital satisfaction (*β= .0148*).

5. Discussion of findings

The current study aimed to identify the risk and protective factors of parental burnout, as well as its prevalence among a sample of women in the Ibadan Metropolis. The findings of this study add significantly to the body of literature on parental burnout.

5.1 Risk factors of parental burnout

The findings of the current study reported that the number of children did not predict parental burnout which implies that a mother having a child or more did not predict parenting burnout. Similarly, Okelo et al. (2023) reported that the number of children within the care of either mother or caregiver was not associated with parenting stress. However, this is in contrast with studies such as Sorkkila and Aunola (2019), who reported an association between the number of children and parental burnout, in addition, the age of the parent and having a child with special needs increased the possibility of parental burnout. This was also supported by the study of Le Vigouroux and Scola (2018) that the number of children predicted parental burnout, the more children an individual has, the more predisposed the parent becomes to parental burnout. With respect to the age of mothers, this study reported that it is not significantly associated with parental burnout although this study did not ascertain whether being an older or younger mother predicted parental burnout. In general, the age of mothers did not predict parental burnout. However, there was an indirect association between the number of children and the age of the mother on parental burnout. In contrast, Kawamoto et al. (2018) and Le Vigouroux and Scola (2018) reported that parents of younger children are more prone to parental burnout as they experience difficulty balancing living optimally alongside their parenting commitments while older parents may find it easy to raise their children.

Furthermore, with regards to parents' nature of employment (self-employed or civil servants), the study recorded that it did not predict parental burnout This means that whether parents are self-employed, work with the government or others did not increase parenting burnout. This corroborates the findings of LebertCharron et al. (2018). Whereas work status predicted parental burnout, whether parents work full-time or part-time employment increased parenting burnout levels. Results of this study showed that parents' educational qualification did not in any way predict parental burnout, whether attaining a PhD, Master's, Bachelor's or Senior School Certificate Examination (SSCE). This corroborates the findings of Lindstrom et al. (2011) that there is no association between parental burnout and parent's education. On the other hand, having a child with special needs from

the findings of the study did not predict parental burnout. That is child's disability did not affect or influence the burnout level of the parent. This is in contrast with Lindstrom et al. (2011) and Mbatha and Mokewena (2023) who found that having children with special needs or developmental disorders was associated with parental burnout as there is a higher level of investment and chronic stress.

Perfectionism which is setting overly high standards by a parent in this study did not predict parental burnout, although the dimensions of perfectionism were not investigated in this study. That means, no matter the standard or demands parents place on themselves, it cannot influence parental burnout. This corroborates the findings of Kawamoto et al. (2018) that perfectionism is not a predicting factor for parental burnout. In contrast, Lin et al., (2021) reported that parental perfectionism exposes parents to parental burnout but that there are other mitigating factors. The low emotional intelligence of parents in this study was reported to increase the risk of parental burnout among mothers. This implies that these mothers find it difficult to regulate their emotions and that of others around them. Turk (2020) findings also supported the findings of this study while Mikolajczak et al. (2018) report was in contrast to this. They reported that emotional intelligence did not protect against parental burnout.

In addition, the dimensions of personality were considered in this study and the findings showed that neuroticism, conscientiousness and agreeableness all predicted parental burnout. Parents who are frequently anxious and emotionally unstable show neurotic traits, conscientious parents are self-disciplined, orderly as well and follow child-rearing rules while highly agreeable parents are usually empathic and loving. This is in agreement with a study by Le Vigouroux et al. (2017) that neuroticism, low agreeableness and low conscientiousness as predicting factors of parental burnout. Obasi et al. (2022) found that a high level of conscientiousness exposed parents to a high degree of parenting stress. In addition, Wang et al. (2023) reported that neuroticism was positively correlated with parental burnout. That is an increase in neurotic traits led to an increased level of parental burnout.

5.2 Protective factors

In terms of the protective factors, resilience was hypothesized as a protective factor to parental burnout. The findings of the study reported that resilience protected against parental burnout, the more resilient a parent is the less burned out they become thereby living optimally. The result corroborates the reports of Chidi et al. (2018) and Stanculescu et al. (2020) that resilience significantly alleviated stress in the parenting domain. These parents are able to bounce back from difficulties and maintain a positive disposition through difficult challenges. The co-parenting relationship is another variable considered in this study. It reported that co-parenting relationships did not protect against parental burnout. This implies that the other parent's involvement in the care and nurture of the child or non-involvement does not influence the feelings of parental burnout. This is in contrast with previous findings as it has been associated with decreased parenting burnout experience. This indicates that the more involved partners or the other parent is, the burden of parenting is alleviated thereby enabling the other parent to live optimally (Favez et al., 2023; Durtschi et al., 2017).

In addition, marital satisfaction experienced by mothers was hypothesized as a protective factor to parental burnout and the result from this study confirmed this hypothesis. The more satisfied mothers become with their spouses and relationships, the less burned out they become. This was supported by the findings of Lindström et al. (2011) that marital satisfaction is linked with reduced experience of parental burnout. In contrast, Neem et al. (2023) and Robinson and Necee (2014) study discussed that females reported a higher level of parental burnout despite marital satisfaction. Regardless of the quality satisfaction received, it was not able to mediate parental burnout. With respect to self-efficacy as a protective factor against parental burnout, this study reported that self-efficacy significantly moderated parental burnout. The more confident a parent becomes about her parenting skills, the lower the experience of parental burnout. Such parents believe in her ability to successfully carry out the parenting tasks. Jones and Prinz (2005) study supported the findings of this study that parental self-efficacy predicted the level of parental competence as parents with higher parental self-efficacy effectively coped with parenting challenges. In addition, parental self-efficacy and marital satisfaction indirectly had an effect on parental burnout.

Social support which was hypothesized as a protective factor to parental burnout was rejected as social support did not protect against parental burnout. This means that despite the support both perceived and received from family and friends it was not able to protect against the increase in parental burnout. This was in contrast with previous findings that social support protected against parental burnout (Lin et al., 2022 & Lindstrom et al., 2011). Parents who received limited practical support from their circle were prone to score higher on parental burnout than those who

received sufficient support. Chidi et al. (2018) found that social support had a significant relationship with parenting stress indicating that as social support increased, parenting stress reduced. However, social support and marital self-efficacy indirectly affected parental burnout.

6. Conclusion

Results from the findings of this study indicate that there is a 7% prevalence rate of parental burnout among mothers in Ibadan, Nigeria. Amongst the various risk factors hypothesized, it was reported that perfectionism, nature of work, highest educational qualification, the number of children, the age of the mother and having a child with a disability did not predict or serve as risk factors for parental burnout. Other factors such as personality (neuroticism, conscientiousness and agreeableness), low emotional intelligence, and work status predicted or served as risk factors for parental burnout. The result from the second hypothesis revealed that co-parenting relationships and social support did not serve as protective factors to parental burnout while resilience, marital satisfaction, and parental self-efficacy were significant to parental burnout. There was no direct effect of the number of children and age of the mother on parental burnout while there was a partial mediation between perfectionism and parental burnout. There was a direct effect of parental self-efficacy and marital satisfaction as well as social support and marital satisfaction on parental burnout.

Despite the contributions of this study to literature, some limitations have been acknowledged. The major limitation of this study is the low outcome of responses from parents (mothers). Many mothers were reluctant to participate in the study as most requested incentives before they could partake in it as a result the researcher could not cover a larger sample size. This means that the prevalence rate of parental burnout recorded was low. There is a lack of localized (African) scales to assess the variables. In addition, the silence culture in Africa and Nigeria specifically was observed. Many parents who spoke about the burden of parenting failed to acknowledge the experience while filling out the questionnaire to avoid being tagged “bad parents”.

References

Albanese, A., Russo, G., & Geller, P. (2019). The role of parental self-efficacy in parent and child well-being: A systematic review of associated outcomes. *Child Care, Health and Development,* 45(3), 333–363. https://doi.org/10.1111/cch.12661

Bandura, A. (1982). Self-efficacy mechanisms in Human Agency. *American Psychologist*, 37, 122-147.

Creary, S. J., & Gordon, J. R. (2016). Role conflict, role overload, and role strain. Encyclopaedia of family studies, pp 1-6.

Crnic, K. A., Gaze, C., & Hoffman, C. (2005). Cumulative parenting stress across the preschool period: Relations to maternal parenting and child behaviour at age 5. Infant and Child Development, 14, 117–132.

Durtschi, J. A., Soloski, K. L., & Kimmes, J. (2017). The dyadic effects of supportive co-parenting and parental stress on relationship quality across the transition to parenthood. *Journal of Marital and Family Therapy*, 43, 308–321. doi: 10.1111/jmft.12194.

Favez, N., Max, A., Bader, M. & Tissot, H. (2023). When not teaming up puts parents at risk: Co-parenting and parental burnout in dual-parent heterosexual families in Switzerland. *Family Process*; 62:272–286. doi/10.1111/famp.12777

Finch, J. F., Baranik, L. E., Liu, Y., & West, S. G. (2012). Physical health, positive and negative affect, and personality: A longitudinal analysis. *Journal of Research in Personality*, 46(5), 537–545.

Fletcher, D., & Sarkar, M. (2013). Psychological resilience: A review and critique of definitions, concepts and theory. *European Psychologist,* 18(1), 12–23. https://doi.org/10.1027/1016-9040/a000124

Gérain, P., & Zech, E. (2018). Does Informal Caregiving Lead to Parental Burnout? Comparing Parents Having (or Not) Children with Mental and Physical Issues. *Frontier of Psychology*, 9, 884. doi: 10.3389/fpsyg.2018.00884

Hubert, S., & Aujoulat, I. (2018). Parental burnout: When exhausted mothers open up. Frontiers in Psychology, 9, 1–9. https://doi.org/ 10.3389/fpsyg.2018.01021

Jones, T. L., & Prinz, R. J. (2005). Potential roles of parental self-efficacy in parent and child adjustment: A Review. *Clinical Psychology Review,* 25(3), 341–363. https://doi.org/10.1016/j.cpr. 2004.12.004

Kawamoto, T., Furutani, K., & Alimardani, M. (2018). Preliminary validation of Japanese version of the parental burnout inventory and its relationship with perfectionism. *Frontiers in Psychology*, 9, pp 1–10. https://doi.org/10.3389/fpsyg.2018.00970

Kutuk, M. O., Tufan, A. E., Kilicaslan, F., Guler, G., Celik, F., Altintas, E., et al., (2021). High

depression symptoms and burnout levels among parents of children with autism spectrum disorders: a multi-centre, cross-sectional, case-control study. *Journal of Autism Development Disorder,* 51, 4086-4099. doi:10.1007/s10803-021-04874-4

Lebert-Charron, A., Dorard, G., Boujut, E., & Wendland, J. (2018). Maternal Burnout Syndrome: Contextual and Psychological Associated Factors. *Frontiers in Psychology*, 9(June), 1–12. https://doi.org/10.3389/fpsyg.2018.00885

Le Vigouroux, S., Scola, C., Raes, M., Mikolajczak, M., Roskam, I. (2017). The big five personality traits and parental burnout: protective and risk factors. P*ersonality and Individual Differences,* 119, 216-219. doi:10.1016/j.paid.2017.07.023

Le Vigouroux, S., & Scola, C. (2018). Differences in parental burnout: Influence of demographic factors and personality of parents and children. *Frontiers in Psychology,* 9, 1–8. https://doi.org/10.3389/fpsyg.2018.00887

Lin, G., Goldenberg, A., Arikan, G., & Brytek-Matera, A. et al., (2022). Reappraisal, Social Support, and Parental Burnout. *British Journal of Clinical Psychology.*

Lin, G. X., Szczygiel, D., Hansotte, L., Roskam, I., & Mikolajczak, M. (2021). Aiming to be perfect parent increases the risk of parental burnout, but emotional competence mitigates it. *Current Psychology.* doi:10.1007/s12144-021-01509-w

Lindahl, N. A., Mellgren, K., Winiarski, J., & Forinder, U. (2014). Relationship between problems related to child late effects and parent burnout after pediatric hematopoietic stem cell transplantation. *Pediatric Transplantation*, 18(3), 302–309.

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, 100, 1011–1017. doi:10.1111/j.1651-2227.2011.02198.x

Mbatha, N. L., & Mokwena, K. E. (2023). Parental Stress in Raising a Child with Developmental Disabilities in a Rural Community in South Africa. *International Journal of Environmental Research and Public Health*, *20*(5), 3969. https://doi.org/10.3390/ijerph20053969

Mikolajczak, M., & Roskam, I. (2018). A theoretical and clinical framework for parental burnout: The balance between risks and resources (BR2). *Frontiers in Psychology*, 9, 886. https://doi.org/10.3389/fpsyg.2018.00886

Mikolajczak, M., Raes, M. E., Avalosse, H., & Roskam, I. (2018a). Exhausted Parents: Sociodemographic, Child-Related, Parent-Related, Parenting and FamilyFunctioning 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., Raes, M. E., Avalosse, H., & Roskam, I. (2017). Exhausted parents: 15 Sociodemographic, child-related, parent-related, parenting and family-functioning correlates of 16 parental burnout. *Journal of Child and Family Studies*, 26(10), 1–13.

Mortensen, J. A., & Barnett, M. A. (2015). Risk and Protective Factors, Parenting Stress, and Harsh Parenting in Mexican Origin Mothers with Toddlers, Marriage & Family Review, 51:1, 1-21, DOI: 10.1080/01494929.2014.955937

Naeem, N., Sadia, R., Khan, S., Fatiima, Z. (2023). Parental burnout and marital satisfaction of married individuals during COVID- 19: Role of gender and family system. *Human Nature Journal of Social Sciences,* 4, pp 151-160

Obasi, C.C., Osinowo, H.O. & Fashola, T.M. (2022). Personality traits as predictors of parenting stress among caregivers of children with autism in Lagos, Nigeria. *Journal of Social Issues*, 21(2).

Okelo, K. O., Auyeung, B., King, J., Murray, A. L., Kitsao-Wekulo, P., Onyango, S., & Wambui, E. (2023). Sociodemographic predictors of parenting stress among caregivers in disadvantaged settings: evidence from Kenya and Zambia. https://doi.org/10.21203/rs.3.rs-2532887/v1

Prinzie, P., Stams, G. J. J. M., Deković, M., & Reijntjes, A. H. a, & Belsky, J. (2009). The relations between parents' big five personality factors and parenting: A meta-analytic review. *Journal of Personality and Social Psychology*, 97(2), 351–362.

Robinson, M. & Necee, C. (2014). Marital satisfaction, parental stress and child behaviour problems among parents of young children with developmental delays. *Journal of Mental Health Research in Intellectual Disabilities. doi:10.1080/19315864.2014.994247*

Roskam, I., Aguiar, J., Akgun, E., Arikan, G., Artavia, M., & Avalosse, H. (2021). Parental burnout around the globe: A 42-country study. *Afective Science,* 2, 58–79.

Roskam, I., Raes, M. E., & Mikolajczak, M. (2018). A step forward in the conceptualization and measurement of parental burnout: The parental burnout assessment (PBA). *Frontiers in Psychology*, 9, 1-12, 758. https://doi.org/10.3389/fpsyg. 2018.00758

Roskam, I., Raes, M. E., & Mikolajczak, M. (2017). Exhausted parents: development and preliminary validation of the parental burnout inventory. *Frontiers of Psychology*, 8, 163.

Sánchez-Rodríguez, R., Perier, S., Callahan, S., & Séjourné, N. (2019). Revue de la littérature relative au burnout parental [Review of the change in the literature on parental burnout]. *Canadian Psychology*, 60(2), 77–89. https://doi.org/10.1037/cap0000168

Sorkkila, M., & Aunola, K. (2019). Risk factors for parental burnout among Finnish parents: The role of socially prescribed perfectionism. *Journal of Child and Family Studies*, 29, 648–659. https://doi. org/10.1007/s10826-019-01607-1

Stanculescu, E., Roskam, I., Mikolajczak, M., Muntean, A., & Gurza, A. (2020). Parental burnout in Romania: Validity of the Romanian version of the parental burnout assessment (PBA-RO). *Child & Adolescent Development,* 1–18. DOI: 10.1002/cad.20384

Swit, C. S. and Breen, R. (2022). Parenting During a Pandemic: Predictors of Parental Burnout. *Journal of Family Issues*. Vol. 0(0) 1–21. DOI: 10.1177/0192513X211064858

Wang, W., Liu, X., Wang, S., Li, Y., & Li, Y. (2023). Personality Traits and Parental Burnout Among Fathers: A Moderated Mediation Model. *Journal of Child and Family Studies*, 32, pp1655–1665. https://doi.org/10.100