

**The Need to Target Parent Emotion Regulation in Child Mental Health Treatment:  
A Commentary on Brandão et al. (2023)**

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### **Abstract**

This systematic review and meta-analysis by Brandão and colleagues (2023) focused on the role of emotion regulation abilities in parental burnout. Their review highlighted that targeting parent emotion regulation holds promise for alleviating parenting stress, thus preventing parental burnout and improving parent and child mental health outcomes. It also underscored the need for more research, particularly longitudinal and intervention research, seeking to understand the link between parent emotion regulation, parental burnout, and both parent and child psychological functioning, and the need to consider multiple caregivers (i.e., not just including mothers). In this commentary, I reflect on these takeaways and the importance of simultaneously targeting parent emotion regulation and mental health during treatment for child mental health, and highlight some observational and intervention work in this area that can provide a springboard for future research and intervention efforts.

**Keywords:** emotion regulation; parenting; parental burnout; mental health; intervention

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As a parenting and emotion regulation researcher and clinical psychologist who delivers parenting interventions, becoming a mother was a humbling experience. Navigating postpartum depression, the strong emotions that result from hormonal changes, and the feelings of uncertainty and helplessness that come with being a new parent, I was certainly overwhelmed at times; especially in trying to find a new work-life balance and remain productive as a pre-tenured faculty member. Although I had an incredible partner, a strong social support system, was prepared for these experiences, and was equipped with cognitive-behavioral and emotion regulation strategies to help me manage the onslaught of emotions, I experienced high levels of parenting stress. These experiences were fresh on my mind when reading this new systematic review and meta-analysis by Brandão et al. (2020) on the role of parent emotion regulation abilities in parental burnout, and particularly thinking about how this review may relate to child outcomes and intervention research for children's mental health.

Prior research suggests that emotion regulation during parenthood is distinct from emotion regulation abilities during other periods of one's life (see Rutherford et al., 2015 for a review), with parents needing to maintain a regulated state themselves in addition to facilitating regulation in their child, particularly for younger children. Notably, during the transition to parenthood, emotion regulation abilities have been associated with parent coping, well-being, stress, and frustration (Russell & Lincoln, 2016), and parent emotion regulation has been linked to both parenting behaviors and children's adjustment (see Zimmer-Gembeck et al., 2021 for a review), with parenting stress mediating associations between parent emotion regulation and parenting behaviors. This suggests that by targeting parenting emotion regulation, we can have a

cascading effect of improving their parenting stress and parenting behaviors, and thus their children's well-being. Notably, a handful of studies in the Brandão et al. (2023) review would suggest that parent emotion regulation can mitigate the effect of parental burnout on youth mental health, or moderate the association between parental burnout and youth mental health, with parent expressive suppression emerging as a particularly salient risk-factor for child outcomes (despite cognitive reappraisal being linked to parental burnout).

Despite this, interventions targeting parent well-being have generally been conducted siloed from interventions for child mental health (i.e., with different therapists treating the parent and the child, often with minimal to no communication between each other, due to ethical and practical reasons). Fortunately, there has been growing recognition over the past decade on the need for better interventions that simultaneously consider parent and child mental health, with interventions specifically targeting parent mental health (e.g., depression, attention-deficit/hyperactivity disorder [ADHD]) through therapy or pharmacological treatment (e.g., Chronis-Tuscano et al., 2013, 2016) becoming more common. This is critical, particularly for disorders with high heritability such as ADHD and autism, especially since many parents of children with these neurodevelopmental conditions display both emotion dysregulation and increased risk for a range of psychological disorders (e.g., depression, personality disorders). This is also important for families of adolescents with personality disorder traits such as borderline personality disorder, which has modest heritability and is often characterized by emotion dysregulation and challenges in the parent-child relationship.

Encouragingly, there has been an increasing number of interventions specifically targeting parent emotion regulation abilities while simultaneously treating youth psychopathology and its associated impairments (e.g., Breaux & Langberg, 2020; Flynn et al.,

2023). In particular, emerging work utilizing Dialectical Behavior Therapy for Adolescents (DBT-A) has examined the utility of having parents participate in the skills group with their child. This research has been conducted with adolescents with borderline personality features, severe emotion dysregulation, and self-harm and/or suicidal ideation, including in adolescents who have experienced childhood trauma, with DBT-A lasting between 16 weeks to 6 months across these various studies. Results from this line of research is promising; for example, findings suggest that parents engaging in a 16-week skills group with their child can reduce parental stress, objective burden, subjective burden, and grief (Flynn et al., 2023).

Similarly, research I have conducted with the RELAX (Regulating Emotions Like An eXpert) intervention, has examined the utility of equipping adolescents with ADHD and their parents with emotion regulation, communication, and conflict management skills, with separate 60-minute parent and adolescent skills groups, and 30-minute combined parent-adolescent problem-solving activities that address coping skills and conflict management tailored to each family (Breux & Langberg, 2020). Notably, we have found small-to-moderate improvements in parent emotion regulation and decreases in parenting stress and large decreases in family conflict through this 8-week intervention delivered both in-person and through telehealth. When given the chance to provide feedback on such groups, some parents highlighted the benefit they experienced through participating (e.g., “I am sad that the class has ended, it was therapy for me as mom, I learned so much, esp. coping techniques.”), whereas others commented more on the growth their adolescent has made and a recognition of how this has benefited their interactions with their child and how it relates to their own emotion dysregulation (e.g., “I have experienced great benefits from the sessions. I have watched my son handle hard situations because of the skills that are learned during the RELAX sessions. Even in times where I have forgotten some

strategies learned and as a result lost my cool, I have watched my son maintain his composure, to include deep breathing and asking for several breaks.”

In addition to this work with adolescents, there have also been a handful of emotion socialization-focused interventions for parents of young children (i.e., ages 0-6 years) that while primarily targeting parenting behaviors, also seek to equip parents with better emotion regulation (see England-Mason & Gonzalez, 2020 for a review). Specifically, these interventions focus on teaching parents how to coach their young children in emotion regulation, and interventions have been associated with improvements in parent emotion regulation, parenting behaviors (i.e., increases in emotion coaching and decreases in emotion dismissing), and improvements in child emotion regulation and behavior problems. Notably some of these studies have specifically targeted parents with mental illnesses, and most have focused on children at-risk for behavior problems (e.g., ADHD, early-onset conduct problems)

Collectively, these studies provide strong support for the utility of focusing on parent emotion regulation abilities in treating youth mental health. To my knowledge however, none of these studies have directly examined whether such interventions can reduce parental burnout, or if parental burnout is itself a moderator of treatment response, though some studies have looked at the related factor of parenting stress. Given that parental burnout is the result of extreme and prolonged parenting stress, it will be critical for these two areas of research to align in future intervention studies, as there may be significantly poorer prognosis for families where parents are experiencing burnout (e.g., failing to initiate treatment, premature dropout, failure to comply with intervention components such as homework completion).

Another consideration for intervention research that the Brandão review highlighted was the need to consider multiple caregivers, not just mothers in our research and clinical work. The

intervention studies just mentioned largely (Breux & Langberg, 2020; Flynn et al., 2023) or exclusively (Chronis-Tuscano et al., 2013, 2016) focused on mothers; however, the England-Mason and Gonzalez (2020) review highlighted some work being done exclusively with fathers through the Dads Tuning in to Kids intervention. This is important given the field's growing recognition of the role fathers play in shaping children's social-emotional development through their parenting practices, and differences in the frequency and benefit of various practices for mothers and fathers (Nelson et al., 2009).

Given that there is the potential for spillover, crossover, and compensatory effects across caregivers (Nelson et al., 2009) it is critical that study designs and analyses provide opportunity to assess how the family unit may interact in influencing parent and child outcomes. That is, prior theoretical work and research has suggested the presence of parent or family stress may result in spillover effects with such stress influencing parenting behaviors and thus child outcomes. In addition, partner effects are present such that having one parent who is experiencing high levels of stress/burnout may influence the parenting behaviors of the other partner or caregivers in the home (e.g., having a father experiencing parental burnout may result in the mother utilizing less adaptive parenting practices); alternatively, there is some evidence that having one parent who is well-regulated and is able to help socialize a child in emotion understanding and regulation may be able to compensate for another parent who is highly dysregulated or experiencing high levels of stress. Given that most parenting interventions and interventions for child mental health broadly only require the presence of one caregiver, there is need for both observational and intervention work that aligns with involving and considering the family system. It is likely that individual differences in parents (e.g., the presence of parental

depression) may influence the presence of these various effects, and/or a family's engagement with and benefits from interventions.

In conclusion, Brandão and colleagues (2023) are to be commended for highlighting the critical role parent emotion regulation can play both in their own experiences as a parent (e.g., parental burnout, parenting behaviors) and the well-being of themselves and their children. Given that studies included in the review largely only focused on cognitive reappraisal and expressive suppression, more research examining specific regulation strategies is needed. Additionally, it will be critical for future research to elucidate how (e.g., if certain emotion regulation strategies are particularly salient for parental burnout and child outcomes) and when (e.g., prevention strategies as part of parent preparation/child birth classes, intervention once parents have been screened as elevated on parenting stress) to target parent emotion regulation, and to longitudinally examine the impact of such interventions on parenting behaviors, parenting stress/burnout, and parent and child mental health outcomes. Such work is important for all parents, but may be particularly so for parents with pre-existing mental health disorders given the transdiagnostic role of emotion dysregulation.



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