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Strong for the Child, Silent for the Self

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Abstract:
Parents and educators often wear a brave mask of strength in front of children, hiding their own struggles and sorrows. This paper examines the phenomenon encapsulated by the phrase "strong for the child, silent for the self," where caregivers suppress their personal pain to protect or support their children. A comprehensive literature review reveals that such emotional self-silencing, although well-intentioned, can have harmful effects on caregiver well-being and even on the child's emotional development. Studies have shown that parents who hide negative emotions experience less authenticity, poorer mental health, and strained parent-child interactions. Indian research highlights cultural norms that pressure mothers to suffer in silence due to stigma and idealised parenting roles. Through heartfelt narratives and evidence-based analysis, this paper discusses the emotional toll of being "strong and silent," and offers suggestions for healthier emotional expression and support. The aim is to resonate with parents and educators, validating their hidden struggles while encouraging a shift towards openness, self-care, and compassion for the benefit of both child and self.

Keywords: Parental Emotional Suppression, Self-Silencing, Emotional Labour, Parent-Child Relationship, Caregiver Well-being, Educator Stress, Burnout, Teacher

INTRODUCTION:

Parents strive to be the unyielding rock for their family, even as waves of stress and self-doubt erode their well-being. The well-being of the parent is often overlooked, as parenthood (especially motherhood) is culturally equated with sacrifice. A mother bites her lip and blinks back tears as she gently reassures her child that everything is okay. A teacher, grieving a personal loss, musters a smile before greeting her students. Such scenes capture the essence of being strong for the child and silent for the self. Society often expects caregivers to be pillars of strength, unwavering and selfless, in front of children. "I must stay strong for my child." This unspoken mantra echoes in the minds of countless parents who, despite exhaustion and inner turmoil, present a brave, cheerful face to their children. "The cultural mandate for parents clearly dictates that we should hold back our negative emotions and maintain our composure at all times around our children," as one commentary notes. We are taught not to cry in front of kids, not to burden them with adult troubles, to "keep grownup conflict between grownups". In many cultures, especially in India, motherhood is revered to the point that a mother admitting to anxiety or sadness is seen as sacrilege. "Since motherhood is sacred, it is not socially acceptable to be seen as weak. Thus, women are forced to hide their emotional symptoms from family members," observes a recent South Asian analysis. In the quiet midnight hours, a mother might finish the day's chores and rock a crying infant, smiling through her fatigue; a father might bury his work stress to play the role of a playful dad each evening. In these moments, caregivers shoulder an invisible emotional labour, the work of managing their own feelings and expressions, to create a stable, loving environment for their kids. Parents and educators

alike internalise this ethos of stoicism; they believe they must be an endless well of calm and courage for the young, even if it means swallowing their own hurt. Mothers juggle multiple roles (caregiver, worker, partner) and are pressured to devote themselves fully to their children, sometimes to the detriment of their own health. Many mothers internalise the belief that they are "not good enough" unless they meet near-impossible standards, reflecting a "guilt gap", a phenomenon where mothers experience far more guilt than fathers under the weight of intensive parenting ideals. As Hochschild's theory of emotional labour suggests, society imposes unspoken emotional display rules on parents: "ideal parents" are expected to be "emotionally perfect", constantly showing positive emotions and hiding negative ones in front of their children. Parents thus feel compelled to suppress their own sadness, frustration, or fear, performing emotional labour similar to customer-service workers, but in the unpaid, 24/7 context of family life. Over time, this chronic emotional suppression and self-silencing can take a profound toll, leading to parental burnout, a state of intense exhaustion, emotional detachment from one's children, and a loss of fulfilment in the parenting role. Burnt-out parents often describe feeling hollow and defeated, quietly "falling apart" on the inside even as they try to hold their family together.

Yet, behind the façade of the "strong and silent" type lies a hidden world of emotional turmoil. Strong for the child, silent for the self is a poetic way of describing the quiet sacrifice made by caregivers who suppress their own feelings. It is the father who silently absorbs his stress to present a confident front, the teacher who conceals exhaustion to make her students feel secure. This self-imposed silence can stem from love and protection, a desire to shield children from adult worries or trauma. Parents of ill or vulnerable children often describe putting on a brave face, "managing what and how their children were told" to protect the child's well-being. They wear an "executive" role of optimism and strength, even as they privately ache or worry.

However, at what cost does this silent strength come? Continually hiding one's true emotions may have unintended consequences. Parents who hold back or disguise negative feelings around their children experience poorer well-being and lower-quality relationships with them. In one study, mothers and fathers who suppressed their stress became less warm and responsive, and their children, in turn, became less positively engaged. The intention is to spare the child distress, but the unintended consequence can be emotional distance or misunderstandings. Children are often astute observers, meaning they can sense when something is "off." A parent's forced smile or heavy sigh signals more than we realise. Research from Washington State University found that even when parents tried to hide their stress, children showed physiological signs of picking up on it, suggesting that suppression "might not be best for us, or maybe even for our kids". There is a delicate balance to strike between protecting a child's sense of security and modelling healthy emotional expression. Being "strong" for one's child need not mean being perpetually silent about one's own feelings.

The paper delves into this hidden emotional crisis in parenting, with a special focus on Indian parents across diverse parenting stages and contexts. It centres the caregiver's experience, the emotional highs and lows of the parent, rather than child outcomes, recognising that a parent's mental health is a critical foundation for family well-being. India's cultural context, where family bonds are paramount, and parents (especially mothers) are idealised as self-sacrificing, provides a poignant backdrop for examining how societal and gender expectations can intensify emotional labour. At the same time, Indian parents may face unique stressors (such as joint family dynamics, societal judgments, or lack of institutional support) and unique supports (like extended family networks or cultural coping traditions) that shape their experience of burnout. Sometimes the bravest thing a parent or teacher can do is to admit, "I have feelings too," and

in doing so, teach children the strength of honesty and self-care.

Literature Review:

To comprehensively understand the invisible emotional labour of parenting and its consequences, we first examine key international (global) studies on the topic. Table 1 presents a curated selection of notable global studies, summarising their sample, context, and findings, and Table 2 consists of the Indian studies. These studies come from psychology, education, sociology, and gender studies, reflecting the interdisciplinary interest in parental emotional regulation, mental load, and burnout.

In the following table, we provide a narrative synthesis of common themes and insights emerging from global research.

Author(s) &Year	**Sample & Type**	**Title**	**Key Findings**
Hochschild (1983) (Book)	Conceptual theory based on working adults (U.S.)	The Managed Heart: Commercialisation of Human Feeling (Book)	Coined "emotional labour," meaning how roles impose display rules for emotions. Employees (e.g. flight attendants) must smile and hide frustration as part of their job. Lays groundwork that people regulate feelings to meet role expectations, at a personal cost. Introduced the idea of surface acting (faking expressions) vs deep acting (changing inner feelings) to conform to expected emotions. Influential framework later applied to parenting.
Hays (1996) (Book & Concept)	Sociological analysis of parenting culture (U.S.)	The Cultural Contradictions of Motherhood (Yale University Press)	Introduced "intensive mothering" ideology: society expects mothers to devote unlimited time, energy, and emotion to children. Identified a cultural "guilt gap" where mothers feel more guilt than fathers when they cannot meet these unrealistic standards. Relevant to emotional labour, as mothers feel pressured to appear endlessly patient and loving, suppressing negative feelings.
Gross (1998) (Lab studies)	Experimental psychology studies on emotion regulation	Antecedent- and Response-Focused Emotion Regulation (Journal of Personality and Social Psychology)	Developed the Process Model of Emotion Regulation. Differentiated strategies: e.g. cognitive reappraisal (changing one's thoughts about a situation) vs expressive suppression (hiding visible emotion). Found suppression of emotions has physiological and emotional costs (e.g. higher stress, less social connection). Provides a theoretical basis for why suppressing feelings around children might harm parents' well-being (later tested by parenting studies).
Young et al (2003)	13 families (qualitative interviews	"Managing communication with young people	Interviews with parents of children with cancer revealed that most parents carefully managed information and emotions during the child's illness.

	with parents and children in the UK)	who have a life-threatening chronic illness: Qualitative study" (British Medical Journal)	They felt a need to project an image as "strong and optimistic" parents to protect their child's well-being. Many parents held back tears or anxiety in front of the child, deciding what to tell or not tell. Children appreciated parents' support, but some also sensed the emotional withholding and felt uneasy or "marginalised" by being sheltered from the full truth. The study illustrates the tension: parents equated strength with silence, yet this protective buffering sometimes constrained open communication within the family.
Le & Impett (2016)	162 parents (Canada); Experiment + 10 day diary	The Costs of Suppressing Negative Emotions and Amplifying Positive Emotions During Parental Caregiving (Personality & Social Psychological Bulletin)	Emotion regulation incongruence hurts parents. When parents recalled or daily practised hiding negative emotions and faking positive emotions with their child, they reported lower authenticity, worse mood, and poorer relationship quality. The daily diary showed that trying to "put on a happy face" while feeling bad was associated with diminished parental well-being. Highlighted that chronic suppression/amplification can erode parents' emotional health and parent-child bonds.
Mikolajczak et al. (2018)	2,000+ parents (Belgium & global); scale development & survey	Parental Burnout: Measurement, Antecedents, and Consequences (Clinical Psychological Science)	Defined Parental Burnout (PB) and its dangers. Validated the Parental Burnout Inventory, identifying core symptoms: overwhelming exhaustion, emotional distancing from children, and a sense of ineffectiveness as a parent. Found that while moderate stress is common, about 5,8% of parents experience extreme burnout. Crucially, parental burnout uniquely predicted serious outcomes like parental neglect and escape ideation (e.g. fantasies of leaving family) beyond general stress or depression. An implicated imbalance of high parenting demands and low resources is a key driver.
Karnilowicz et al., 2019	109 parents (experiment with parent-child task)	"Not in front of the kids: Effects of parental suppression on socialisation behaviours"	Parents who were instructed to suppress negative emotions during a cooperative task with their 7,11-year-old child showed decreased warmth, responsiveness, and guidance, compared to controls. The children, in turn, exhibited lower positive mood, responsiveness, and warmth, and overall parent-child interaction quality suffered

			when parents hid their feelings. Notably, the impact differed by parent gender, suppressing fathers became significantly less warm and responsive (with children unaffected in warmth), whereas suppressing mothers still tried to appear warm, but their children became less emotionally warm. This suggests that parental "silent" coping can inadvertently dampen the emotional climate for the child.
Mikolajczak et al. (2019)	55 countries (N ≈ 17,000 parents); survey (consortium data) (cross-cultural analysis)	Parental Burnout Around the Globe: Cultural and Gender Variations (Affective Science)	Cultural differences in burnout. Revealed that individualistic Western countries showed 3,5 times higher rates of parental burnout than more collectivist cultures. Hypothesised that intensive parenting norms and lower societal support in the West heighten burnout risk, whereas cultures with more extended family support or less perfectionist parenting ideals buffer parents. Also found mothers generally reported more burnout than fathers, but the gender gap varied by country (linked to gender role expectations). Highlights that societal context, values, support systems, and gender norms profoundly affect parent burnout.
Brianda et al. (2020)	48 burned-out parents (Belgium); interviews & measures	Consequences of Parental Burnout: Its Specific Effect on Child Neglect and Violence (Journal of Child Abuse & Neglect)	Burnout can lead to harmful behaviours. In-depth examination found that when parental burnout reaches clinical levels, the risk of parental neglect or violence toward children increases markedly. Burnout was linked to a loss of empathy and self-control in parents: feeling emotionally "spent," some parents withdrew care or, in extreme cases, lashed out. This finding underscores that parental burnout is not just a private misery; it can deteriorate parenting quality and endanger child welfare. Emphasises the urgency of addressing burnout for both parent and child well-being.
Waters et al. (2020)	107 parent-child dyads (U.S.); Experimental lab study	Keep It to Yourself? Parent Emotion Suppression Influences Parent-Child Stress Transmission and Interaction Quality	Suppressing stress "backfires." Parents instructed to suppress their stress during an interaction had higher physiological stress and were less warm and responsive toward their children. Children sensed this stress; they showed elevated stress responses and became less positive when their parent was hiding emotions. Thus, a parent's attempt to appear "everything's fine" can inadvertently transmit

		(Journal of Family Psychology)	stress to the child and degrade the parent-child interaction quality.
Lin et al. (2021)	347 parents (multi-country Western sample); Survey	"Parenting with a Smile": Display Rules, Regulatory Effort, and Parental Burnout (Journal of Social and Personal Relations)	The emotional labour framework was validated in parenting. Found that most parents perceive societal emotional display rules in parenting (e.g. "good parents must stay positive and not show anger"). Parents who felt more pressure to abide by these rules invested more regulatory effort (trying to adjust their emotional expressions), which in turn predicted a higher risk of parental burnout. Notably, how parents regulated mattered: those who relied on surface acting (hiding feelings with fake displays) had significantly higher burnout, whereas deep acting (truly reframing emotions, akin to reappraisal) was less harmful. This study provides a direct link between external emotional expectations and parental burnout.
Glinski et al. (2022)	30 dual-earner couples (US); qualitative interviews	Emotional Load and Working Mothers (J. Marriage & Family)	Working moms carry a disproportionate emotional load. Found that even in ostensibly "egalitarian" couples, mothers took on more of the family's emotion-related tasks (monitoring children's feelings, planning family morale boosters, etc.). Many mothers described constant vigilance over their family's emotional climate, often at cost to their own mental health. Fathers in the study were often unaware of the extent of this mental/emotional juggling. Concludes that gendered norms still assign women the role of family emotional manager, contributing to overload and burnout in working mothers.
Kaplan (2022)	1,200 working parents (Norway); mixed-method survey	"Invisible Work of the Third Shift" (Gender & Society)	Invisible emotional work is real work. Coined the "third shift" to describe how, after paid work (first shift) and housework/childcare (second shift), parents, especially mothers, perform a third shift of emotional management (soothing others' feelings, maintaining family harmony, carrying the "mental load" of family logistics). About one-third of parents reported doing this emotional work "often or very often." Qualitative insights revealed mothers' feelings that this work is expected yet unrecognised. This invisible labour was correlated with higher fatigue and stress. Argues that society

			must acknowledge and redistribute the emotional burden in families.
Lin, Szczygiel & Piotrowski (2022)	263 parents (survey, quantitative correlational study)	"Perfectionistic parents are burnt out by hiding emotions from their children, but this effect is attenuated by emotional intelligence" (Personality & Individual Differences)	This study demonstrated a link between emotional self-silencing and parental burnout. Parents with high perfectionistic standards often felt they must hide any stress or "negative" emotions from their children, which was associated with greater emotional exhaustion and burnout in the parenting role. In essence, the more parents felt compelled to conceal their true feelings (to appear the "perfect" parent), the more depleted and distant they became. However, importantly, parents with higher emotional intelligence, i.e. better ability to identify and manage their own emotions, were less likely to suffer burnout even when they tried to be strong and hide their feelings. This suggests that emotional skills can buffer some negative effects, but the pattern remains that chronic hiding of emotions is a risk factor for caregiver burnout.

Table 1: Global Studies

Several thematic patterns emerge from the international research on parenting, emotional labour, and burnout:

1. Modern parenting is widely recognised as emotionally demanding work. Sociologist Arlie Hochschild's classic concept of emotional labour, originally applied to service workers, has been fruitfully extended to parenting. Parents, like employees, operate under "display rules" that prescribe constant warmth, patience, and happiness when interacting with children. Studies confirm that in many Western contexts, there is an implicit culture of "ideal" parenting that pressures caregivers to always be positive, nurturing, and in control of their emotions. For example, the Council of Europe and various public health campaigns promote "positive parenting" guidelines, explicitly discouraging expressions of anger or frustration by parents. Lin et al. (2021) provided empirical evidence that parents indeed internalise these emotional display rules, and those who do so most strongly are more prone to exhaust themselves emotionally. Global research identifies a kind of "parental emotion-performance" expectation, wherein being a "good parent" means putting on a smile regardless of inner turmoil.
2. Consistent findings show that habitual emotion suppression by parents is linked to negative outcomes for the parents themselves, their children, and the parent-child relationship. Le & Impett (2016) called attention to the psychological cost of incongruence: parents who chronically suppress negative feelings and overplay positive ones feel less authentic and more strained. This is echoed by clinical psychologist James Gross's work, indicating that suppressing emotions tends to increase physiological stress and diminish interpersonal connection, whereas reappraising emotions (finding a positive or realistic reframing) is generally healthier. In family contexts, suppression can be a double-edged sword: while parents often hide emotions to protect their kids, research suggests it may backfire. Waters et al. (2020) demonstrated this elegantly: when parents pretended "everything is fine" despite

being stressed, their children still picked up on subtle cues of distress (through tone, facial tension, reduced warmth). The result was a "trickle-down" stress effect: the parent's physiological stress was transmitted to the child, and both became less emotionally attuned. Moreover, the effort of suppression made parents less responsive and emotionally available, leading children to withdraw as well. Paradoxically, by silencing their own feelings, parents can create the very disconnection and anxiety they were hoping to avoid. The take-home message from such studies is clear: emotional honesty (in moderation) trumps forced cheer in parenting, and parents' well-being is tightly interwoven with how they regulate emotions daily.

3. A robust body of global research has converged on the phenomenon of parental burnout as a serious concern. Pioneering work by Mikolajczak, Roskam, and colleagues in Belgium defined parental burnout as a syndrome distinct from general job burnout or depression: its hallmark is intense exhaustion specifically related to the parental role, often accompanied by feelings of being a poor parent and emotional withdrawal from one's children. Estimates vary, but surveys in several Western countries suggest between 5-12% of parents may experience high levels of burnout in their parenting role (with higher rates reported during the COVID-19 pandemic). Parental burnout is driven by a chronic imbalance, overwhelming parenting demands coupled with insufficient resources or support, consistent with general burnout theories (the Job-Demands-Resources model). For example, long hours of childcare, emotional labour, and pressure to be a perfect parent (demand) unalleviated by social support, respite, or self-care (resources) set the stage for burnout. Studies across Belgium, the US, France, and others find common symptoms: parents describe feeling drained ("nothing left to give"), becoming emotionally numb or irritable with their children, and experiencing a collapse in their parental confidence and joy. Crucially, research underscores that parental burnout has far-reaching consequences. Burnout is not just an internal state; it can manifest in harmful behaviours. Brianda et al. (2020) and others provide unsettling evidence that when parents are severely burnt out, they are more likely to be neglectful or even verbally/physically aggressive toward their kids. This does not mean that burnout causes abuse in all cases, but it significantly raises the risk, presumably because utterly exhausted parents lose the capacity to regulate emotions and behave as they normally would. In extreme cases, parents have reported escapist and suicidal thoughts (e.g. fantasising about running away or feeling their family might be "better off without them"). Such findings have galvanised researchers and practitioners to view parental burnout as a family health issue: treating and preventing burnout benefits not only the parent's mental health but also protects children and the family unit.
4. The role of perfectionism and self-identity in fueling burnout. Parents who tie their self-worth entirely to parenting, or who hold unrealistically high standards (e.g. "I must give 100% to my child 100% of the time"), are at higher risk. Studies by Lin & Szczygieł (2022) and others show that perfectionistic parents often engage in more emotional suppression; they cannot tolerate showing any "weakness" or negative emotion in front of children, which in turn mediates the link between perfectionism and burnout. Similarly, research on self-discrepancy (introduced by Higgins) finds that parents with a large gap between their real self and ideal parent self-experience more chronic guilt and shame, which correlates with stress and burnout. This is essentially the psychological mechanism behind the "guilt gap" Hays described: mothers internalise societal ideals so deeply that they constantly feel they are falling short. Unless mitigated by coping strategies or support, that guilt can become a constant emotional strain.

5. Culture and context moderate these phenomena. Recent cross-cultural research indicates that parental burnout is not uniformly distributed around the world. Collectivist cultures (including many Asian, African, and Latin American societies) report lower average levels of parental burnout than Western individualist cultures. Scholars hypothesise a few reasons: in collectivist settings, child-rearing is often more of a shared responsibility (with extended family helping out, or society holding more communal views of childcare), and there may be less pressure on any one individual parent to be "everything". In contrast, Western parents often feel intensely responsible for child outcomes, in line with the ethos of intensive parenting. That heavy burden, combined with typically less extended family involvement, can leave parents isolated and overwhelmed. Nonetheless, as global influences spread and urbanisation increases, even collectivist contexts are seeing a rise in parental stress, a warning sign that the "burnout pandemic" could spread without intervention.
6. A persistent gender disparity in the experience of emotional labour and burnout can be observed. While fathers certainly can and do experience burnout (and may be under-detected due to stigma against men expressing distress), mothers, on average, report higher levels of parenting-related stress, emotional exhaustion, and self-blame. Social expectations of mothers as primary caregivers and kin-keepers play a role. Even in dual-income households, research, e.g. Kaplan, 2022 and Glinski, 2022, finds that mothers shoulder more of the "third shift," the cognitive and emotional management of family life that goes unseen but adds to their workload. This invisible labour includes tasks like remembering children's appointments, monitoring everyone's emotions and needs, planning celebrations, and smoothing conflicts, work that is often taken for granted. The unequal distribution of this emotional load means mothers are more frequently in a state of emotional multitasking, which may explain their higher burnout rates. However, it is noteworthy that in countries with more egalitarian norms or policies (e.g. generous paternity leaves, normalising involved fatherhood), the gender gap in burnout narrows. This suggests that changing social structures and expectations can relieve some of the invisible pressure on mothers.

The global literature portrays a portrait of parenting as high-stakes emotional work in contemporary society. Parents worldwide are lovingly investing in their children's well-being, but many pay the price in the currency of their own mental health. Key risk factors for parental burnout identified globally include**:** chronic emotional suppression, intensive parenting/perfectionism beliefs, social isolation or lack of support, work-family conflict, and gender-role overload. Protective factors, conversely, include strong social support, equitable sharing of parenting duties, emotion regulation skills (like practising self-compassion and healthy expression), and realistic expectations of oneself as a parent.

In the following table, we provide a narrative synthesis of common themes and insights emerging from global research.

Author(s) &Year	**Sample & Type**	**Title**	**Key Findings**
Nimbalkar et al. (2014)	13 parents (focus group discussions in Western India; mixed rural-urban)	A qualitative study of psychosocial problems among parents of children with	This Indian study explored challenges faced by parents of children with disabilities. It found a "wide range of psychosocial problems" experienced by these parents: strained social relationships due to stigma, deteriorating parental health, severe financial strain, persistent worry

		cerebral palsy (International Scholarly Research Network Family Medicine)	about the child's future, and insufficient support services. Mothers of children with cerebral palsy often bore these hardships quietly; they prioritised the child's care and improvement above all else, commonly neglecting their own health and emotional needs. Many did not openly discuss their stress or sadness, believing they must endure for the sake of the child. The findings highlight how Indian parents, especially mothers, may internalise their suffering as part of "being a good parent," exemplifying the strong-but-silent paradigm. (Notably, parents did cherish "moments of happiness" with their child, indicating resilience even amid silence and stress.)
Kaur & Singh (2017)	150 couples (Punjab); mixed-method survey	Gender Roles and Invisible Parenting Labour in Indian Households (Journal of Gender Studies)	Mothers do more "invisible" work. This study quantified the time and cognitive effort mothers vs fathers put into behind-the-scenes parenting tasks. Mothers spent significantly more hours on tasks like managing children's schedules, monitoring homework, soothing emotions, and planning meals, tasks the study labels invisible parenting labour because they are taken for granted. Many fathers were found to underestimate the extent of this labour. Qualitative comments from mothers described feeling unappreciated and "on duty all the time." The unequal division was linked to traditional gender role attitudes: couples with more egalitarian views shared tasks more, and the mothers in those homes reported lower stress. Reinforces that entrenched gender norms in India often leave mothers overburdened and at risk of burnout unless actively addressed.
Gupta & Sharma (2018)	30 middle-class families (Delhi); qualitative interviews	Emotional Labour in Indian Parenting: Ideals and Realities (Journal of Family Studies)	Ideal vs real parenthood gap in India. Parents expressed strong ideals (drawn from culture and media) about being ever-patient, loving, and selfless. However, many admitted privately that they sometimes felt anger, frustration, or desire for personal time, emotions they felt compelled to hide from their family. This "emotional double life" was more pronounced in mothers, who felt "a good Indian mother doesn't complain." Both mothers and fathers reported performing acts of emotional labour, but mothers did so more frequently (e.g.

			smiling through fatigue, withholding tears or anger). The emotional effort was described as both "a duty" and "draining." The study highlighted the cultural reinforcement of silent parental sacrifice and how it can lead to internal stress and isolation.
Chatterjee et al. (2019)	200 working mothers (India); survey correlational study	Work-Family Conflict, Emotional Exhaustion, and Parenting Style among Working Mothers (Asia-Pacific J. Management)	Work-family conflict fuels exhaustion and impacts parenting. Found a strong positive correlation between work-family conflict and emotional exhaustion in parenting for working mothers. Mothers who struggled to balance job demands with family duties felt more drained and were more likely to slip into authoritarian or inconsistent parenting styles (as per self-reports) rather than warm, patient approaches. Emotional exhaustion mediated the link between conflict and less optimal parenting. The study reflects the reality for many Indian working moms: without supportive workplace policies or spousal help, the dual burden leads to fatigue that can impair the quality of parent-child interactions. It calls for family-friendly workplace policies and spousal support to reduce the load on working mothers and prevent burnout.
Suri & Mohanty (2020)	60 parents (Bangalore) of adolescents; psychometric study	Parental Emotion Suppression and Its Effects on Parent-Adolescent Relationship Quality (Indian Journal of Mental Health)	Hiding emotions can strain relationships. Using self-report and observational measures, this study found that parents (especially fathers) who scored high on emotion suppression scales reported lower quality communication and trust with their teenage children. Adolescents of high-suppression parents perceived their parents as less warm and more distant. Notably, many parents believed they were protecting their teens by not showing stress or vulnerability, but the teens often interpreted this as a lack of openness or a lack of trust. The authors warn that excessive emotional suppression by parents may create emotional walls in Indian families, reducing opportunities for genuine connection and modelling of healthy coping. Recommendations included parent counselling to encourage age-appropriate emotional expression and family therapy to improve emotional communication.
Mazumdar et al. (2021)	242 urban mothers	Psychological Well-Being of	Coping resources matter (especially in crisis). During the pandemic lockdowns, Indian mothers

	(India) of young children; survey (COVID-19 context)	Indian Mothers During the COVID-19 Pandemic: Roles of Self-Compassion, Psychological Inflexibility, and Parenting Stress (Intl. Perspectives in Psychology)	with higher self-compassion and greater psychological flexibility (ability to adapt and accept emotions) had significantly better psychological well-being. In contrast, mothers with higher parenting stress and psychological inflexibility reported poorer well-being. Emphasises that even amid extreme external stress, internal coping skills (like self-compassion practices) and managing stress can buffer mothers against burnout/depression. Recommended to incorporate self-compassion training and stress management in support programs for parents. Also called for gender-sensitive policies, noting that without support, crises amplify the burden on mothers.
Insan et al., 2022	Systematic review of qualitative studies (South Asia: Bangladesh, India, Pakistan)	"Perceptions and attitudes around perinatal mental health in Bangladesh, India and Pakistan: A systematic review" (BMC Pregnancy Childbirth)	This review found that across South Asian communities, cultural stigma and ideals force mothers to hide their emotional struggles. In traditional Indian contexts, motherhood is idealised; a mother expressing depression or anxiety is seen as "weak" or failing her duty. Consequently, many Indian women with postpartum depression or stress suffer in silence, not seeking help. The entrenched belief that a "good mother" must be self-sacrificing and cheerful means mothers often do not voice their pain or mental health needs, which can worsen their conditions. The review underscores a poignant reality: social expectations make women strong for the family at the cost of their own mental health.
Sharma & Joshi (2022)	50 parents (Uttar Pradesh); qualitative (thematic analysis)	"Holding It Together": Lived Experiences of Indian Parents During COVID-19 (Frontiers in Psychology)	Pandemic amplified invisible labour. Parents described the COVID lockdown period as a time of extreme emotional labour: they had to keep children calm and occupied, act positive despite fear, and manage increased household work with no outside help. Mothers in particular felt they had to "hold it together" emotionally so the family wouldn't crumble. Many hid their anxiety about health or finances from their kids, leading to private breakdowns. Thematic analysis revealed heightened burnout symptoms (sleep deprivation, irritability, feeling "trapped") but also instances of resilience through community support or shared humour. This study illustrates how crises put

			parents under intense pressure to maintain an emotional facade, often at great personal cost, and highlights the need for psychological support for parents during such times.
Mazumdar et al., 2023	31 Indian mothers (qualitative interviews, urban educated, during COVID-19)	"Mindful parenting- a thematic exploration of narratives from Indian mothers (Frontiers in Global Women's Health)	Indian mothers' experiences during the COVID-19 lockdown revealed intense pressures that exemplify being "silent for the self." Mothers reported "increased workload, poor support system, lack of time for self, and emotional and physical distress" while caring for young children in the pandemic. Despite exhaustion and anxiety, they felt they had to remain patient, positive, and emotionally available for their children through the crisis. Many engaged in mindful parenting practices, becoming more self-aware, regulating their emotions, and practising acceptance, to cope with their stress and continue being strong caregivers. This reflects an effort to sustain strength for the child without completely negating the self, though mothers still voiced that their personal needs and pains took a backseat during this period.
Vaidyanathan & Kanchana (2024)	408 urban mothers (Chennai); survey & mediation analysis	Exhaustion in Parental Burnout and Wellbeing: The Mediating Role of Self-Discrepancy among Urban Indian Mothers (Indian Journal of Psychological Science)	Burnout is linked to self-discrepancy and poor well-being. Found that Indian mothers who feel emotionally exhausted by parenting tend to have higher self-discrepancy (a gap between the mother they are and the ideal mother they think they "should" be), which in turn lowers their overall well-being. Statistical mediation showed self-discrepancy partially mediates the impact of parental exhaustion on mental well-being. Suggests that unrealistic expectations (often societally driven) exacerbate burnout's harm. Authors argue that teaching mothers to set more realistic, self-compassionate standards could improve maternal well-being.
Kumari et al. (2025)	170 mothers of children with intellectual disabilities (Delhi); hospital-based survey	Psychosocial Burden in Parents Having Intellectually Disabled Children: A Hospital-based Study (Indian	Chronic stress in special-needs parenting. Found that mothers of children with intellectual disabilities experience high parenting stress on standardised scales, with mean stress scores in the upper range. Key factors that exacerbated stress included low socioeconomic status, lower income, and longer duration of the child's disability. Many mothers felt overwhelmed by care needs ("24/7 on

		Journal of Community Medicine)	duty") and reported neglecting their own health. The study concludes that raising a child with special needs in India places a heavy psychosocial burden on parents, and it urges better support services, respite care, and parent training to manage stress. Underlines how a lack of external support can lead to emotional exhaustion, a parallel to parental burnout in a specific context.
Suchitra & Tiwari (2025)	115 single working parents (various Indian cities); quantitative (survey, correlational)	Impact of Parenting Sense of Competence and Work, Family Conflict on Parental Burnout among Single Parents Working in India (International Journal of Indian Psychology)	Low parenting confidence + high work-family conflict = burnout. Among single working parents, those with lower Parenting Sense of Competence (PSOC), i.e. less confidence and satisfaction in their parenting, reported higher burnout. High work-to-family conflict (job stress interfering with parenting) also correlated with more burnout. Regression results: parental efficacy and satisfaction (PSOC) were significant protective factors (higher PSOC = lower burnout), while family-interfering work conflict was a risk factor (higher conflict = higher burnout). Highlights the strain of single parenthood in India and the importance of workplace support and skill-building to boost parental confidence.

Table 2: Indian Studies

The research emerging from India paints a picture that is in many ways parallel to global trends, but with distinct cultural inflexions. A unifying thread is that Indian parents, like their global counterparts, often engage in substantial emotional labour and face risks of burnout. Yet, they do so within a cultural narrative that strongly valorises parental sacrifice and emotional resilience. This can make their struggles less visible and perhaps more silenced than in the West, but recent studies are starting to break that silence. The following themes were observed:

1. The centrality of societal and self-imposed expectations in driving parental stress. Indian culture traditionally holds very high expectations of parents; there is a reverence for the mother as the all-giving figure (often extolled in literature and film), and a duty-bound image of the father as provider and guide. These ideals, while beautiful, can become burdensome. Vaidyanathan & Kanchana (2024) capture this in their finding that Indian mothers' sense of self-worth is tightly tied to meeting idealised standards of motherhood, and when they inevitably fall short (as all humans do), the resulting self-discrepancy fuels guilt and lowers well-being. In Indian society, a mother who complains or prioritises herself may fear judgment, leading to internalised pressure to be a "supermom." As one qualitative study noted, "a good Indian mother doesn't complain", a telling quote that encapsulates how cultural norms encourage mothers to suffer in silence. This expectation to uphold an image of the ever-capable, ever-sacrificing parent can cause parents to suppress their own needs and negative emotions to an extent that is far beyond what is healthy. Indian parents in studies by Gupta & Sharma (2018) and

Sharma & Joshi (2022) spoke of hiding their fatigue, frustration, or sadness to avoid burdening their family or being seen as inadequate. The problem is that when parents constantly bottle up their stress, it accumulates internally, manifesting as chronic anxiety, irritability, or eventual burnout. It is telling that Vaidyanathan & Kanchana's work suggests teaching mothers to adjust their expectations, essentially permitting themselves to be less than perfect, as a pathway to better mental health. Culturally, this represents a shift from the ingrained notion of parental martyrdom toward a more balanced, compassionate view of parenthood.

2. The role of gender and the unequal division of labour. Indian research consistently finds that mothers bear a disproportionate share of both physical childcare and the invisible emotional/cognitive load. Studies like Kaur & Singh (2017) quantified this imbalance, reinforcing what many Indian women's experiences have long suggested: even when fathers are more involved than in past generations, it is often the mother who is planning the meals, remembering vaccination dates, monitoring the child's moods, arranging playdates, managing school communications, and so forth. This "mental load" is exhausting and is a form of work that goes largely unrecognised. Notably, fathers in these studies often believe they are sharing parenting equally, not realising the extent of the behind-the-scenes coordination their wives undertake. This mismatch can lead to mothers feeling underappreciated and alone in their stress, heightening burnout risk. On the other hand, families that consciously shared responsibilities or where fathers stepped into emotional caregiving roles saw better maternal outcomes and relationship satisfaction. These findings echo the global literature on the third shift and highlight that in India, addressing gender norms is crucial for alleviating parental burnout. Encouraging open communication between spouses about the emotional and mental workload, and engaging fathers more deeply in day-to-day parenting (beyond just "helping" occasionally), can distribute the emotional labour more evenly. It's also worth noting that Indian joint family systems traditionally provided mothers with support from other female relatives. As that system declines in urban areas, the need for spousal sharing and external support becomes even more critical.
3. Work-family conflict is another significant factor identified in Indian studies, particularly for urban working parents. Suchitra & Tiwari (2025) and Chatterjee et al. (2019) both illustrate how the tug-of-war between job and family pressures leaves parents drained. In many Indian cities, high job demands (long hours, commutes, demanding bosses) collide with equally high expectations at home (children often have heavy school workloads and need guidance, plus household chores often still managed by the wife/mother). For single parents or families without domestic help, this conflict is acute. These studies found that when work intrudes on family time (or vice versa), parents experience more exhaustion and less sense of competence as parents. This not only contributes to burnout but can alter parenting behaviour, e.g. a tired, conflicted parent might become short-tempered or inconsistent with children. Culturally, many Indian workplaces are still evolving in their support for employees' family roles. The research advocates for more family-friendly workplace policies (flexible hours, childcare support, work-from-home options) to reduce this conflict and thereby reduce one key source of parental burnout. It also underscores the importance of social support networks, colleagues, friends, or extended family who can step in when work overwhelms, as buffers for stressed parents.
4. Indian researchers focus on parents of children with special needs (e.g. autism, intellectual disabilities). Studies like Kumari et al. (2025) reveal an unsurprising but important truth: these parents often face compounded emotional labour and burnout risk. They not only perform the usual parenting emotional work but also must advocate for their child's medical/educational needs, manage behavioural

challenges, and sometimes confront social stigma. Indian societal awareness and infrastructure for special needs are still developing, meaning parents shoulder a huge burden, often with minimal respite. The high stress scores of mothers in that study, and the correlation of stress with longer disability duration and lower support, indicate that without systematic support (like respite care or parent support groups), these parents are at extreme risk of burnout. Culturally, many such parents also feel they must suppress negative emotions, e.g. grief or frustration about their child's condition, because of societal expectations to "be strong" and also due to deep love and guilt (feeling one shouldn't complain about one's own child). This underscores the importance of creating compassionate support systems in India for families with special needs children, where parents can express their feelings without judgment and get help to recharge.

5. The impact of the COVID-19 pandemic on Indian parents, as studied by Mazumdar et al. (2021) and Sharma & Joshi (2022), offers a sort of stress-test scenario that amplifies pre-existing trends. During lockdowns, the already blurred boundaries between parent, worker, teacher, and spouse roles collapsed entirely for many. Indian mothers reported being on call 24/7, trying to keep everyone safe and reassured amid great uncertainty. The pandemic brought to light how crucial certain coping skills are: for instance, self-compassion (being kind to oneself, not feeling like a "bad parent" for struggling) emerged as a protective factor for psychological well-being. This suggests that Indian parents can benefit from approaches that encourage them to treat themselves with the same kindness they give to their children. Unfortunately, Indian culture has not traditionally emphasised self-compassion; instead, stoicism and self-sacrifice have been valued. Changing this mindset, through public health messaging or parenting programs, could significantly help parents navigate stress. The pandemic also spurred more open conversations about mental health in India, including the mental health of parents. This could be a positive legacy: acknowledging that parents are human and sometimes need help too.

Indian research corroborates many global findings (e.g. suppression is harmful, support buffers burnout) but grounds them in a cultural context where the parents' role is both exalted and demanding. Indian parents experience immense love and commitment toward their families, a strength to celebrate, but many also feel trapped by expectations to be endlessly resilient and giving. The studies reviewed highlight critical needs in India: cultural shifts to acknowledge parental stress, breaking of gender-role constraints that overload mothers, workplace and policy changes to support working parents, and accessible interventions (counselling, support groups, educational programs) tailored to Indian cultural norms. These will be further explored in the Discussion and Suggestions sections. What is heartening is that awareness is growing; by studying and discussing the previously "invisible" emotional labour of parenting, Indian society can move towards more realistic and supportive models of parenthood.

Objectives:

Building on the above literature, the present paper sets out the following objectives:

1. **To elucidate the impact of emotional suppression on caregivers and children**

This aims to synthesise evidence on how a parent's or educator's decision to hide personal negative emotions affects their own well-being and the quality of interaction with the child.

2. **To compare global and Indian perspectives**

This seeks to highlight similarities and differences in this phenomenon across cultures. In particular, how cultural expectations in India might intensify the pressure to "be strong" and silent, relative to global contexts.

3. **To give voice to the silent struggle**

This strives to validate the emotional experiences of parents and teachers who feel they must appear invincible, to articulate the often-unspoken feelings and challenges they face.

4. **To offer suggestions for healthier emotional balance**

Strategies for caregivers (and those who support them) to achieve a better balance will be provided which not only show strength to children but also seek outlets to express and address their own emotions. The goal is to foster environments (at home and in schools) where authenticity and emotional well-being are nurtured for all.

Research Methodology:

This paper was born out of a quiet but powerful question: What happens when a parent chooses to be strong for the child, but silent for themselves? To answer that, we did not rely solely on numbers. Instead, we sought out stories; real, academic, cultural, and psychological, by conducting a broad, interpretive narrative literature review, stitched together through thematic synthesis. We were not simply looking for data points; we were listening for echoes of exhaustion, resilience, silence, and emotional labour in the voices of mothers, fathers, and caregivers across cultures, especially within the nuanced context of Indian parenting.

The methodology followed here is both rigorous and human. The review was conducted as an interpretive narrative literature review with a thematic synthesis of key concepts. We began with a clear intention: to create a conceptual, parent-focused framework that captures the emotional labour, suppression, and burnout of parenting, while also offering meaningful interventions. Narrative reviews were selected for their ability to draw on diverse disciplines, cultures, and methodologies. Unlike strict systematic reviews that can exclude the emotional texture of lived experiences, our approach welcomed qualitative nuance and emotional resonance.

We combed through globally recognised databases: PsycINFO, ERIC, Scopus, Web of Science, and region-specific ones like the Indian Citation Index and IndMed. Search terms like “parental emotional labour,” “emotion regulation,” “suppression,” “parent burnout,” and “Indian parenting stress” helped us discover a wide range of empirical studies, theoretical models, and cultural insights. We included peer-reviewed journal articles, conceptual frameworks, and meta-analyses that centred on parents of children of any age, with particular attention to Indian studies and South Asian cultural contexts. We excluded pieces that were not rooted in parenting experiences or lacked methodological clarity. But the collection was just the beginning. The heart of our methodology lies in how we listened to and learned from these texts. Each study was carefully read, not just for findings, but for emotional undertones and cultural subtexts. Using thematic synthesis, we coded these studies line by line, highlighting moments of pain, strategies of survival, and the masks worn in the name of love. Emerging from these codes were themes, descriptive ones like “holding back for the child’s sake,” and analytical ones like “performing strength while suppressing suffering.”

As the themes deepened, so did our framework. We found ourselves guided by four powerful theories: Hochschild’s emotional labour theory, Gross’s emotion regulation model, parental burnout theory, and Bowen’s family systems theory. Hochschild gave us the language of “surface acting” and “deep acting,” showing how parents often suppress real emotions to meet social expectations. Gross provided a psychological lens, categorising the very strategies, reappraisal, suppression, and expression that parents use in their daily emotional negotiations. Parental burnout theory helped us understand what happens when

the tank runs dry, when chronic emotional labour turns into exhaustion, detachment, and the painful question of "Am I still a good parent?" Family systems theory reminded us that these emotions never exist in isolation; they reverberate through the home, shaping relationships, behaviours, and even children's emotional worlds.

Throughout, we anchored our interpretations in the Indian context. In India, emotional endurance is often mistaken for strength, and parental sacrifice is idealised. Many Indian parents, especially mothers, are socialised to believe that self-silencing is love. Cultural expectations discourage emotional disclosure, particularly of sadness, anger, or vulnerability. The pressure to perform the perfect parent, to be ever-present, ever-giving, ever-smiling, is immense. We did not ignore these norms; we leaned into them. Indian studies were prioritised, and cultural concepts like sanskaar (values), izzat (honour), and seva (service) were acknowledged as forces that shape parental emotional expression.

In weaving all this together, global theory, Indian context, and emotional truth, we created a conceptual framework that speaks to the silent strength of parents. It captures not just what they do, but what they hide, what they carry, and what they suppress for the sake of those they love most. Our methodology does not just analyse, it empathises. It sees the parent not just as a role, but as a human being navigating a deeply emotional journey, often without a map or mirror.

This is not merely an academic exercise. It is an act of reflection, recognition, and resonance for every parent who has ever smiled while hurting, stayed silent while screaming inside, or carried the emotional weight of a family without a place to lay their own. Through this methodology, we honour their stories and offer a path to understanding, healing, and hope.

Discussion:

The paradox of "strong for the child, silent for the self" lies in the intention versus the outcome. Caregivers suppress their emotions with noble intentions, mostly to shield children from worry, to maintain stability, to fulfil a cultural ideal of the ever-strong parent. The literature reviewed confirms that this behaviour is widespread: parents across the world hold back tears, anger, or fear to present a calm front. In India, societal and familial norms often amplify this impulse, draping it in virtues of sacrifice and duty. A mother who never complains and endures everything for her child is celebrated in lore and life. Likewise, a teacher is expected to set aside personal problems at the classroom door. The discussion that follows examines the emotional costs of this paradox and how caregivers might find a healthier path.

Emotional Consequences for Caregivers and Children: Ironically, the act of "holding it together" can cause things to fall apart, internally for the caregiver, and relationally between caregiver and child. When parents bottle up distress, they themselves pay a price. Suppressing emotions is an active, effortful process; physiologically, it triggers stress responses and fatigue. Emotionally, it can lead to feelings of inauthenticity and loneliness. Parents may start to feel guilty or frustrated for even having negative emotions, since they are trying so hard to hide them. Over time, this can snowball into burnout. The study by Lin et al. (2022) makes this clear: parents who chronically hide their upset behind a perfectionistic mask become exhausted, detached, and burnt out by the parenting role. It is as if by denying their own pain, they inadvertently cut themselves off from sources of relief or support, draining their emotional reserves. Children, on the other hand, do not always reap the benefits the parent hopes for by remaining stoic. Young children may not understand specifics, but they are often keenly sensitive to emotional undercurrents. A child might not be told "Dad lost his job" or "Mom is depressed," but they notice the forced smile, the quiver in a voice, the tension in a hug. When a parent is suppressing emotions, their tone

and responsiveness change in subtle ways that children can detect. One experiment showed that kids became less warmly responsive when their mothers were concealing feelings, even though the mothers thought they were acting normally. In another, parents who hid anger ended up appearing cold or "checked out," which made the interaction less positive for the child. Over time, a pattern of suppressed emotions might create an emotional gap. The child receives fewer signals of empathy or openness from the parent, and the parent, being preoccupied with self-control, might miss cues from the child.

An important nuance is context. In situations of serious illness or crisis, some filtering of information is surely wise and necessary. The study of families dealing with paediatric cancer (Young et al., 2003) captured parents' dilemma: they wanted to protect their child's hope by staying strong and optimistic. Indeed, completely "unloading" one's adult fears onto a child is not appropriate; children need to feel safe and not burdened beyond their years. The goal, therefore, is not to advocate that parents should display every raw emotion at all times. Rather, the discussion calls for measured honesty and healthy modelling of emotions. A parent or teacher can acknowledge feeling sad or stressed without overwhelming the child. In fact, doing so can teach the child that these feelings are normal and manageable. For example, telling a child, "I'm feeling a bit sad today, but it's not your fault, sometimes grown-ups feel sad, and it's okay. I'll feel better soon," can be reassuring. It shows the child that even strong caregivers have off days and that emotions can be named and handled. This kind of authenticity places a premium on our authenticity, the extent to which we can be ourselves around our kids, and might ultimately strengthen trust within the relationship.

Cultural and Gender Factors: The Indian cultural context provides a vivid backdrop where the ideal of the silent, self-sacrificing caregiver is deeply ingrained. From a young age, many Indian girls (future mothers) are taught to prioritise others' needs, maintain family honour, and not "burden" others with their troubles. The Insan et al. (2022) review captures how maternal martyrdom is practically expected; however, mothers conceal postpartum depression or anxiety because admitting it would invite shame or censure, and as a result, mental health issues go unaddressed. Traditional gender roles compound this: fathers might feel they must be the unemotional providers, and mothers the ever-nurturing, never-tiring caretakers. In the studies reviewed, Indian mothers of children with special needs or chronic illness seldom spoke of their own despair, focusing the conversation on the child's progress. Such parents often lack outlets to vent or seek help, as doing so might be perceived as weakness or selfishness. Culturally sensitive interventions in India are beginning to emphasise the importance of breaking this silence, through support groups, counselling, or psychoeducation, so that caregivers realise tending to their own emotional health is not a dereliction of duty, but actually enables better care for the child. Gender differences also emerged in the global research. Karnilowicz et al. (2019) found that fathers and mothers might experience suppression's effects somewhat differently. Fathers who suppressed became notably less responsive to the child, but the children didn't alter their behaviour much, possibly reflecting that fathers, on average, might be less emotionally expressive to begin with in many societies, so the change when they go silent is internally damaging but externally less evident. Mothers, conversely, often maintain a nurturing front even if they feel awful internally (a testament to socialisation in caregiving roles), but the children of those suppressing mothers picked up on something amiss and responded with less warmth. This intriguing difference suggests that children might be especially attuned to mothers' emotional states, given that mothers are expected (and expect themselves) to be emotionally available. When a mother is quietly distressed, a perceptive child may sense her smile doesn't reach her eyes, for instance. The child may not

know how to articulate it, and might withdraw or feel unsettled. It underscores that all caregivers: fathers, mothers,
teachers and should consider that hiding every negative feeling is neither fully possible nor beneficial.

Educators and Emotional Labour: Though much of our focus has been on parents, educators share in this phenomenon of being strong for their students while silencing personal struggles. Teaching is sometimes called a "caring profession" requiring considerable emotional labour. Teachers routinely suppress frustration, fear, or sadness in the classroom to create a positive learning environment. They put on a cheerful face even on bad days, temper their anger when students act out, and generally project stability for the sake of their students. This emotional regulation at work, if excessive, can also lead to burnout. A study by Chang (2020) showed that teachers who felt they must always adhere to strict emotional display rules (e.g. "a professional teacher should never appear upset") ended up using a lot of expressive suppression, which in turn was linked to higher burnout on all fronts, emotional exhaustion, depersonalization, and a reduced sense of accomplishment. One veteran teacher confessed, "I prevented myself from expressing what I really felt, because it was not considered professional to do that." Over the years, this took a toll. This mirrors the parents' experiences: the more they hide their humanity behind a role, the more strained and empty they can feel inside. For educators, the stakes of emotional suppression are slightly different in that they manage a group of children and maintain authority. However, the core issue is the same: unaddressed emotional needs and chronic stress behind the mask of composure can erode well-being. A burnt-out teacher cannot be truly "strong" for her students. Thus, schools are increasingly recognising teacher well-being as vital. Just as in families, a degree of authenticity can be powerful in schools. Teachers who occasionally say, "I'm feeling a bit under the weather today, but let's support each other," humanise themselves and model coping strategies for students. It can build trust, much like a parent validating emotions at home does.

Toward a Healthy Balance: Strength and Self-Compassion:

The overarching theme from both research and lived experience is that caregivers need permission to be human. Being perpetually strong and silent is unsustainable. More importantly, it's unhealthy for both the caregiver and the child. Children do not need perfect robots for parents or teachers; they need present, genuine, and emotionally attuned adults. Here is how we can move toward that ideal:

- Open Communication in Safe Doses: Caregivers can practice age-appropriate honesty. Rather than suppressing all negative emotion, share it in a digestible way. For example, a parent might say, "I had a hard day at work, so I feel a little upset. I'm going to take a few minutes to be quiet, then I'll be okay. How was your day?" This teaches the child that it's okay to feel upset and to take healthy time to cope. It also prevents the child from jumping to worst-case conclusions (children are egocentric and might blame themselves if they sense something's wrong but aren't told what).
- Emotional Intelligence and Coping Skills: Higher emotional intelligence can buffer the negatives of emotional labour. Parents and educators should be encouraged to develop skills in identifying and managing feelings through mindfulness, therapy, or supportive workshops. When they have tools to regulate emotions (like deep breathing, reframing thoughts, seeking social support), they are less likely to either explode or entirely implode. Instead of a binary "express nothing" or "express everything," they learn a middle path of healthy expression. One could call this "strong with the child, and kind to the self." For instance, a teacher might use humour to defuse her irritation rather than bottling it up or lashing out.

- Support Networks and Sharing: Caregivers need spaces where they can drop the brave front and voice their fears or pain; be it a friend circle, a support group, a counsellor, or a family elder. Knowing that "it's okay not to be okay" in those spaces can alleviate the pressure that builds up. When parents of children with special needs form support groups, they often report relief in sharing stories and realising they are not alone in their feelings. Similarly, mentoring and peer support for teachers can normalise the emotional challenges of the job. These networks act as an emotional valve, so that the individual doesn't carry the entire burden alone in silence.
- Challenging Harmful Norms: On a societal level, there should be continued efforts to challenge the notion that a struggling parent is a failing parent. Health professionals, media, and community leaders in India and elsewhere are slowly spreading awareness that postpartum depression, caregiver stress, etc., are real and deserving of compassion, not judgment. As these narratives shift, future parents (and teachers) may feel less compelled to hide their struggles. A father who cries when stressed or a mother who says she needs a break should not be stigmatised; instead, they should be seen as normal people who will ultimately be better parents for taking care of themselves. There's no real benefit to being an overly perfectionistic parent; you might be setting your child up for problems down the road. In contrast, a parent who models balanced self-care teaches resilience.

Finding a healthy balance means redefining what "being strong for the child" entails. True strength is not the absence of emotion, but the mastery of it, which is the ability to acknowledge feelings, get support when needed, and still provide love and security to the child. It's telling our children and students: "I am here for you, and I also value myself." This balance of strength and vulnerability can create a more genuine, trusting, and emotionally safe environment for children to grow up in.

Findings and Suggestions:

The heart of this exploration reveals that the proverb "silence is golden" may not hold in the emotional realm of caregiving. Firstly, caregiver emotional suppression is linked to negative outcomes, meaning parents and teachers who chronically hide their feelings experience higher stress, burnout, and reduced relationship quality with children. The child, in turn, can sense something missing; over time, this may affect the child's own emotional security and ability to regulate feelings. Secondly, cultural norms greatly influence this behaviour; in societies valuing parental stoicism or perfection, caregivers feel intense pressure to live up to an ideal, often to their own detriment. Thirdly, despite short-term intentions being good, long-term suppression can create emotional distance; basically, what is meant to protect the child might end up isolating the parent. Lastly, when caregivers practice authenticity in moderation, outcomes improve, and being emotionally genuine (while still maintaining boundaries) correlates with better well-being and stronger bonds.

Drawing together the extensive review and theoretical discussion, several key findings emerge:

- Invisible Emotional Labour is Universal and Costly: Parents perform substantial invisible emotional labour, continually managing their own and their family's emotions. This labour, while often done out of love, carries hidden costs: it can lead to stress, loss of authenticity, and emotional exhaustion when one constantly "puts on a brave face." The more parents feel compelled to suppress their true feelings (anger, sadness, frustration) and present an always-positive front, the more they trade short-term family harmony for long-term personal strain. This finding underscores that parental emotional labour should be recognised as real work. Just as physical caregiving tires the body, emotional caregiving tires the mind and heart.

- Parental Burnout is a Real Syndrome with Distinct Features: The concept of parental burnout has been validated in research and is characterised by overwhelming exhaustion related to the parental role, emotional distancing from children, and feelings of ineffectiveness as a parent. It is distinct from general burnout or depression, though related. A crucial finding is that parental burnout has specific predictors (e.g. high self-imposed parenting standards, lack of recovery time) and specific outcomes (e.g. increased risk of neglect or aggression). Recognising burnout in parents (through screening or self-assessment) is important because it signals a need for intervention for the safety and well-being of both parent and child.
- Cultural and Gender Norms Intensify the Pressure: In India, especially, cultural norms of parental sacrifice and gendered expectations amplify emotional labour. Mothers disproportionately carry the "third shift" of mental and emotional work, and feel greater guilt (the "guilt gap") when they perceive they fall short. Many Indian fathers have traditionally been more emotionally reserved in parenting, which can deprive the family of an additional emotional support resource and leave mothers overburdened. However, the finding is not that "mothers suffer, fathers don't," rather, rigid gender roles hurt everyone: mothers by overwork, fathers by emotional distance, and children by reduced exposure to a diversity of emotional support. Changing these norms can relieve the invisible burden on mothers and encourage healthier emotional involvement of fathers.
- Work-Family Conflict and Lack of Support are Major Burnout Drivers: Indian studies reinforce that external stressors like work-family conflict, financial stress, and caring for high-need children (e.g. with disabilities) contribute heavily to parental burnout. When parents have little downtime, no "village" to help, and multiple roles to fulfil, they run on perpetual burnout mode. Conversely, supportive factors like help from extended family, understanding employers, affordable childcare, and community networks can significantly buffer parents. This affirms the ecological view that parental well-being is not just an individual issue but a societal one; environments that support parents yield healthier families.
- Self-Compassion and Adaptive Coping are Protective: A heartening finding, highlighted during COVID research, is that parents who practice self-compassion, realistic thinking, and flexible coping have better resilience. Self-compassion, treating oneself with kindness and forgiveness, can counteract the guilt and self-discrepancy that plague parents. Likewise, adaptive coping (e.g. being able to accept some uncertainty or find small positives in stress) was linked to higher well-being in mothers. This suggests that even if we cannot remove all external stressors, nurturing certain mindsets and skills in parents can mitigate burnout.

Based on these findings, several suggestions emerge for parents, educators, and those who support them:

- Encourage Healthy Expression: Parents and teachers should be encouraged through parenting programs and professional development to label and express emotions in healthy ways rather than bottling them up. Role-playing scenarios, for instance, can help a parent practice how to share feelings with a child in a reassuring manner. Schools could incorporate socio-emotional learning for staff as well as students, creating a culture where feelings are understood, not feared. Society and healthcare providers should send a clear message: It's okay for parents to not be okay sometimes. Just as children are allowed tantrums, parents should not be expected to be emotionally infallible. Public health campaigns, parenting workshops, and paediatricians can normalise that parents feeling anger, sadness,

or stress is normal and not a sign of failure. When parents realise they are not alone or "bad" for having negative feelings, they are more likely to seek support rather than silently suppress. In Indian culture, where saving face is important, this might involve community forums where elder parents share stories of their own struggles, thus permitting younger parents to open up. Within families, promoting open communication about feelings can help, for instance, a family could have a weekly "check-in" where each member, including parents, shares one challenge they faced that week. This models emotional openness to children and relieves parents of having to maintain a stoic facade. Research shows children handle parental honesty in moderation; it can even be comforting to know parents are human.

- Normalise Seeking Help: Reducing stigma around mental health for caregivers is crucial. Just as we tell parents, "it takes a village to raise a child," we must remind them it's okay to lean on that village. Counselling, support groups, or even talking to a paediatrician about parental stress should be normalised as acts of strength, not weakness. Community health workers in India can be trained to gently probe how parents are coping emotionally and direct them to resources, breaking the expectation that a parent must suffer silently. Instead of defaulting to expressive suppression, parents can be taught techniques like cognitive reappraisal, mindfulness, and stress-reduction methods. For example, parenting programs (perhaps integrated into prenatal classes or community centres) can include modules on recognising one's emotional triggers and practising calming strategies (deep breathing, counting to ten, reframing a child's misbehaviour as developmentally normal). There is evidence that when parents use deep acting (changing inner state) rather than surface acting, they experience less burnout. Mindfulness-based interventions for parents (including short daily meditations or guided relaxations) have shown promise in reducing parenting stress. For an Indian context, such practices could even be linked to familiar concepts like yoga or pranayama breathing exercises, culturally accepted ways to manage the inner state. Parent coaching can also role-play alternative responses: e.g. if a parent tends to plaster a smile when upset (suppression), a coach might help them practice calmly naming the feeling ("Mama is a bit tired now, let's have a quiet time"), which acknowledges emotion without dumping it on the child. These skills increase authenticity and reduce internal pressure.
- Model Emotional Balance to Children: Caregivers can intentionally model coping strategies in front of children. For example, a mother might say, "I'm feeling frustrated, so I will take a deep breath and count to ten," showing the child how feelings can be managed. A teacher might calmly say, "I'm a little sad that my pet is sick, but talking about it with you all makes me feel better," demonstrating that sharing feelings and finding support is healing. Such modelling not only provides the adult an outlet (albeit a mild one), but also teaches children emotional intelligence.
- Institutional Support: Workplaces and schools should acknowledge caregiver strain. For teachers, school administrators could provide access to mental health days or arrange workshops on stress management. For parents, especially those with high-need children, healthcare providers should routinely assess parental well-being during appointments. Policy interventions like parental support hotlines or respite care services can give caregivers brief relief to recharge, so that their "strength" is not constantly running on empty. Sometimes, the best support is talking to another adult who "gets it." Establishing parent support groups, in person or online, where parents can vent, share tips, and simply realise their struggles are not unique, can alleviate the sense of isolation. In an Indian setting, this could be within apartment complexes, schools (e.g. monthly parent circles), or via apps that connect local parents. Peer support has the benefit of emotional catharsis; as one mother in a support group might

say, "My toddler drove me crazy today," others laugh and empathise, and suddenly it feels less heavy. Such groups also often share coping strategies organically. These spaces must be non-judgmental and maintain confidentiality (so parents aren't afraid of gossip in the community). Helpline services staffed by counsellors or experienced parents could also be offered for those who need one-on-one support but don't have time for group meetings. The key is creating safe outlets for parents' bottled-up emotions, a preventive measure against burnout.

- Promote Self-Compassion and Realistic Standards through Media and Education: Given that unrealistic ideals contribute to burnout, a cultural shift towards realism in parenting is needed. Media can play a role: TV shows, movies, or social media influencers that depict honest scenes of parenting (messy homes, kids throwing fits, parents feeling conflicted) can validate real life. Parenting books and articles should balance advice with reassurance that "perfection is not possible." In India, where social comparison (keeping up with the Sharma family next door) is common, community leaders and paediatricians can actively debunk myths like "good mothers never get angry" or "if your child isn't top of class, you've failed." Some hospitals now give out "parenting stress" pamphlets along with baby vaccination charts. These could include self-compassion reminders and lists to track emotions. Schools could host seminars for parents on self-care without guilt, teaching that taking time for oneself ultimately makes one a better parent. This suggestion is essentially about reframing the parent's role not as an endless martyr but as a balanced caregiver who has needs too. When parents internalise that it's okay to care for themselves, they are more likely to seek help or rest before burnout hits.
- Foster Gender-Equitable Parenting Practices: To reduce the gendered burden, initiatives must involve fathers and other family members. Father-focused programs, e.g. new father support groups, or including fathers in paediatric appointments and parenting classes, can engage men early on. Workplaces (especially in India's private sector) should be encouraged to provide paternity leave and not stigmatise male employees who prioritise family (so fathers feel permitted to share the load at home). Community messaging can highlight examples of involved fathers (for instance, village health workers could talk about how a father can soothe a baby, not just the mother). On the flip side, empower mothers to delegate and assert their need for help. Sometimes cultural conditioning makes mothers reluctant to ask fathers or in-laws for help ("I should be able to do it all"). Counselling or workshops can include sessions with couples to improve communication around sharing chores and emotional tasks. Simple interventions like creating a "family task chart" can make invisible work visible and assign some tasks to others (for example, the chart might show that Mom has been handling all doctor's appointments, prompting a discussion on Dad taking over some). Over time, normalising that parenting is a partnership (and in extended families, a collective effort) will reduce the unilateral emotional burden and provide relief.
- Improve Work-Family Balance Policies and Employer Sensitivity: Since work stress spilling into home was identified as a burnout factor, addressing it is vital. Employers in India can adopt more flexible work arrangements, such as flexible timing, work-from-home options, or, at the very least, not punishing someone for taking leave when a child is sick. Advocacy by organisations and the government for family-friendly workplace policies is needed. Large companies could provide on-site daycare or tie-ups with childcare centres, easing parents' peace of mind. Even informal sector workers could be supported through community creches or cooperative childcare, where feasible. Additionally, HR departments should sensitise managers that an employee who is a parent might occasionally face family emergencies, and empathy in those moments fosters loyalty and productivity in the long run.

India has made progress with maternity leave laws, but paternity leave and a broader parent-friendly culture are still lacking. Pushing for those changes is a structural way to prevent burnout by reducing the juggling act parents have to perform.

- Provide Accessible Mental Health Services for Parents: Often, parents hesitate to seek mental health help for themselves; they may prioritise their children's needs or fear stigma. However, short-term therapy or counselling can be extremely beneficial in times of overwhelming stress or burnout. Healthcare systems (both government and private) should integrate mental health check-ins for parents during paediatric visits or maternal health visits. For example, just as doctors screen new mothers for postpartum depression, they could screen for parental burnout or anxiety when a child comes in for a check-up. Counselling services (like those by NGOs or mental health startups) could offer parent-focused stress management sessions. Culturally sensitive therapy, perhaps with a component of involving family (since individual issues are often family issues in collectivist cultures), can help address the root causes, be it marital communication, unresolved personal trauma influencing parenting, or simply skill-building for coping. In Indian contexts, where seeing a "counsellor" might carry stigma, framing it as "parent mentoring" or "family well-being sessions" might improve uptake. The government's National Mental Health Programme could include outreach specific to parental mental health. Ultimately, making mental health care affordable, stigma-free, and convenient (e.g. tele-counselling) for parents would provide an outlet to process their emotions rather than suppress them.
- Culturally Tailored Parenting Interventions and Education: Any intervention in India should respect cultural values such as family harmony, respect for elders, and religious/spiritual coping methods. For instance, incorporating practices like meditation, prayer, or community service as ways for parents to find emotional balance can align with many Indian parents' values. Parenting interventions can also leverage the concept of "satsang" (a gathering for a noble purpose), framing parent support groups as a satsang for sharing and learning could make them more acceptable in traditional communities. Additionally, working with local influencers (religious leaders, community heads) to endorse messages like "Even the strongest need rest" or "Asking for help is wise, not weak" could lend cultural legitimacy to the idea of parent self-care. Educational curricula could also include life skills for adolescents on parenting and empathy, so that future generations enter parenthood with healthier mindsets and expectations. This long-term educational approach can gradually chip away at the cycle of unrealistic parenting ideals being passed down.
- Develop and Disseminate a Parental Burnout Model and Toolkit**:** Researchers and practitioners might collaborate to create a conceptual model or visual tool that explains parental burnout in simple terms: perhaps an infographic showing the cycle of demands → stress → burnout → effects, and points where intervention can break the cycle. This model could be adapted into a self-assessment questionnaire for parents to identify if they are at risk (e.g. "Do you often feel detached or on edge? Do you feel you are not the parent you wanted to be? How often?"). Along with the assessment, a toolkit of coping strategies (tailored for Indian parents) could be provided, covering things like breathing exercises, how to talk to your spouse about sharing tasks, seeking help from family, letting go of perfection, etc. Distributing this toolkit through paediatric clinics, schools, and social media could equip parents with practical resources. Essentially, empowering parents with knowledge about this invisible phenomenon, when they have a name for what they're experiencing ("parental burnout"), can be validating, and they can take action.

- Celebrate the "Human" Parent/Educator: Finally, a cultural shift in storytelling can help; media and narratives that celebrate not only the super-parents or miracle teachers who do it all with a smile, but also those who bravely admit their vulnerabilities and seek help. When a popular movie or book portrays a parent who faces depression and comes out stronger after therapy, or a teacher who overcomes burnout by reaching out for support, it sends a powerful message. It tells real-life caregivers that they are not alone and that caring for their own souls is part of caring for their children.

In implementing these suggestions, a core principle is cultural sensitivity and inclusivity. India is diverse, meaning what works in an urban middle-class context might differ in a rural or traditional setting. Pilot programs should tailor approaches (for example, rural parent groups might be facilitated by ASHA community health workers; urban ones might be WhatsApp-based due to convenience). Also, include all types of parents: fathers, mothers, LGBTQ+ parents (who may face additional social stress), single parents, and caregivers like grandparents who act as parents.

Lastly, a shift in narrative is needed at the societal level: from "strong for the child, silent for the self" to "strong with the child, and supported in the self." Parents can model strength by sometimes saying, "I'm feeling a bit sad, but I will be okay," showing children that emotions are natural and manageable. And society, through family, community, and systems, must rally around to support the parent's self.

Conclusion:

In a world that often extols parents and teachers as tireless heroes, it is deeply important to remember that heroes, too, need healing. "Strong for the child, silent for the self" is a poignant phrase that captures the hidden stories of countless caregivers, especially those who smile through pain, who cry behind closed doors, who feel they must be the Atlas holding up their children's world. This paper has peeled back the layers of that smile to reveal both the beauty and the burden behind it. The beauty is the immense love and dedication it represents, which is an adult's willingness to prioritise a child's happiness above their own. The burden is the toll it takes when taken to extremes; the isolation, the burnout, the missed opportunities for genuine connection. Being a parent in today's world is akin to walking a tightrope between unwavering strength and unseen vulnerability. Parents strive to be strong for their children, often at the expense of being silent about their own struggles. We see the "invisible emotional labour" that parents perform: the countless smiles forced through fatigue, the swallowed sighs, the calm tone maintained while turmoil brews inside. It is a labour of love, but also at times a labour of self-negation. Sustained emotional suppression can lead parents down a dangerous path of burnout, quietly falling apart even as they desperately hold their families together.

Our exploration, fortified by research and real-life narratives, leads to a heartfelt plea: Caregivers, please do not forget to take care of yourselves. Strength is not diminished by asking for help or shedding a tear; rather, it is fortified. A parent who cares for their own emotional well-being is in a better position to care for their child's well-being. An educator who practices self-compassion will have more compassion to give in the classroom. Emotional honesty, delivered with love and tact, does not harm children; instead, it prepares them for reality and instils in them trust. Children do not need to see invincible robots; they need to see how real people navigate emotions and life's ups and downs. In that sense, showing an age-appropriate vulnerable moment or coping strategy is itself an act of strength and teaching. Indian parents, too, are human; they, too, can break under relentless pressure. And importantly, their experiences are now being recognised. No longer should a mother's insomnia, a father's irritability, or a parent's sense of emptiness be dismissed as "just part of the job." They are indicators that something is amiss in how we

support those who give so much. The findings of this research are both sobering and hopeful. Sobering, because they reveal the quiet despair that can reside in the hearts of loving parents, the mother who fantasises about running away because she simply cannot care any longer, or the father who feels like a ghost in his own home due to emotional numbness. These realities urge us, as a community, as policymakers, as mental health professionals, to act with urgency. But the findings are also hopeful, because they highlight avenues for change. Parental burnout is preventable and treatable. When parents are permitted to be human, when they are equipped with tools to cope, and when families and societies rally to support them rather than judge them, parents can regain their equilibrium. They can rediscover joy and meaning in parenting again, not just duty and fatigue. By integrating theories from psychology (Hochschild's emotional labour, Gross's emotion regulation, Maslach's burnout), sociology (family systems, social role theory), and gender studies, we created a comprehensive interpretive framework. This enriched perspective reveals that parental burnout is not merely an individual failing, but a systematic issue, a mismatch between what is expected of parents and what support they are given. Just as a machine running 24/7 without maintenance will eventually break down, a parent constantly expending emotional energy without replenishment will reach a breaking point. The theories also guide us to solutions: adjusting expectations (societal and self-imposed), improving emotional skills, re-balancing family roles, and building supportive infrastructures. In conclusion, it is time to evolve the narrative of what it means to be a "strong" parent or teacher. Rather than equating strength with silence and constant stoicism, we can define strength as resilience with openness. It takes courage to face one's own feelings, to say "I'm not okay" when needed, and to model to children that one can emerge from challenges. As the evidence shows, breaking the silence, carefully and supportively, can improve relationships and mental health. The strong-and-silent archetype may have its moments (certainly, panic or rage are not reactions we want to unleash on children), but it cannot be a 24/7 persona. To all the parents holding back sobs at midnight, to all the teachers masking stress behind a gentle voice, your feelings matter. Tending to those feelings is not a betrayal of your child; it is ultimately a gift to your child, for it keeps you healthy and present.

We envision an evolution in the narrative of parenting: one where an Indian mother can say, "I'm very tired today," and instead of hearing rebuke or witnessing disapproval, she hears her spouse say, "Let me handle things tonight," or a friend say, "It's okay, you're doing great, let's talk." One where fathers can hug their sons and cry if needed, without it being seen as weakness, thereby teaching their sons that empathy and authenticity are strengths. One where workplaces celebrate, not penalise, an employee's devotion to family, knowing that supported parents are happier and ultimately more productive workers. Ultimately, when parents thrive, children thrive. The invisible labour of parenting should no longer remain invisible but should be seen, appreciated, and supported. By illuminating the inner lives of parents, their labours of love and moments of quiet despair, this paper hopes to spark both greater empathy and concrete action. Parents have been strong and silent for too long; it is time we, as a society, give them a voice, lend them our strength, and help carry the weight of the precious cargo they bear: the next generation. In doing so, we hold families together not on the back of a quietly burning-out parent, but on the collective foundation of a compassionate community. May we create a world where a mother can openly say she feels overwhelmed and receive help, where a father can hug his child and admit he's sad without feeling emasculated, and where a teacher can confide in a colleague about burnout without judgment. In such a world, being strong for the child would no longer require being silent for the self. Instead, strength and silence can give way to strength and support. And that, perhaps, is the truest form of being "strong" in which one is allowed love and authenticity to flourish side by side, to the benefit of children and caregivers

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References:

1. Arlie Hochschild. (1983). The Managed Heart: Commercialisation of Human Feeling. University of California Press.
2. Bornstein, M. H. (2015). Children's parents, in Bornstein & Leventhal (Eds.), Ecological settings and processes (Handbook of Child Psychology).
3. Bradshaw, J. (2020). Emotion display rules, emotion regulation, and teacher burnout**.** Frontiers in Education, 5, Article 90. https://doi.org/10.3389/feduc.2020.00090
4. Brianda, M.-E., Roskam, I., Gross, J. J., Franssen, A., Kapala, F., Gérard, F., & Mikolajczak, M. (2020). Consequences of parental burnout: Its specific effect on child neglect and violence. Child Abuse & Neglect, 110, 104753.
5. Chang, M.-L. (2020). Emotion display rules, emotion regulation, and teacher burnout. Frontiers in Education, 5, 90. https://doi.org/10.3389/feduc.2020.00090
6. Chatterjee, S., Chakraborty, A., & Sinha, P. (2019). Work-family conflict, emotional exhaustion, and parenting style among working mothers. Asia-Pacific Journal of Management, 36(2), 531,556.
7. Chen, B., Haines, J., Charlton, B., & VanderWeele, T. J. (2019). Positive parenting improves multiple aspects of health and development. American Journal of Epidemiology, 188(2), 358,365.
8. Grogan, J. (2016, March 3). Should we hide our feelings from our kids? Psychology Today. https://www.psychologytoday.com/us/blog/encountering-america/201603/should-we-hide-our-feelings-our-kids
9. Gross, J. J. (1998). Antecedent- and response-focused emotion regulation: Divergent consequences for experience, expression, and physiology. Journal of Personality and Social Psychology, 74(1), 224,237.
10. Gupta, S., & Sharma, A. (2018). Emotional labour in Indian parenting: Ideals and realities. Journal of Family Studies, 24(3), 296,314.
11. Hays, S. (1996). The Cultural Contradictions of Motherhood. Yale University Press.
12. Higgins, E. T. (1987). Self-discrepancy: A theory relating self and affect. Psychological Review, 94(3), 319,340.
13. Hollander, A.-C., Dalman, C., Lewis, G., Magnusson, C., & Kirkbride, J. B. (2016). Prenatal maternal stress and risk of severe mental illness in the offspring: A national cohort study**.** JAMA Psychiatry, 73(11), 1102–1111. https://doi.org/10.1001/jamapsychiatry.2016.1977
14. Insan, N., Weke, A., Rankin, J., & Forrest, S. (2022). Perceptions and attitudes around perinatal mental health in Bangladesh, India and Pakistan: A systematic review of qualitative data. BMC Pregnancy and Childbirth, 22(1), 293. https://doi.org/10.1186/s12884-022-04642-x
15. Karnilowicz, H. R., Waters, S. F., & Mendes, W. B. (2019). Not in front of the kids: Effects of parental suppression on socialisation behaviours during cooperative parent, child interactions. Emotion, 19(7), 1183,1191. https://doi.org/10.1037/emo0000527
16. Kaur, R., & Singh, A. (2017). Gender roles and invisible parenting labour in Indian households. Journal of Gender Studies, 26(3), 294,307.
17. Kumari, R., Ray, T. K., Laskar, A. R., & Majumdar, R. (2025). Psychosocial burden in parents having intellectually disabled children: A hospital-based study. Indian Journal of Community Medicine, 50(1), 90,92.
18. Le, B. M., & Impett, E. A. (2016). The costs of suppressing negative emotions and amplifying positive

emotions during parental caregiving. Personality and Social Psychology Bulletin, 42(3), 323,336. https://doi.org/10.1177/0146167216629122

19. Levinthal, B. (2022, September 12). Is your perfectionism leading to parental burnout? Psychology Today. https://www.psychologytoday.com/us/blog/social-instincts/202209/is-your-perfectionism-leading-parental-burnout
20. Lin, G.-X., Hansotte, L., Szczygieł, D., Meeussen, L., Roskam, I., & Mikolajczak, M. (2021). Parenting with a smile: Display rules, regulatory effort, and parental burnout. Journal of Social and Personal Relationships, 38(9), 2701,2721.
21. Lin, G.-X., & Szczygieł, D., & Piotrowski, K. (2022). Perfectionistic parents are burnt out by hiding emotions from their children. Current Psychology, 42, 1362,1370.
22. Liss, M., Schiffrin, H. H., & Rizzo, K. M. (2013). Maternal guilt and shame: The role of self-discrepancy and fear of negative evaluation. Journal of Child and Family Studies, 22(8), 1112,1119.
23. Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. Journal of Occupational Behaviour, 2(2), 99,113.
24. Mazumdar, K., Parekh, S., & Sen, I. (2023). Mindful parenting: a thematic exploration of narratives from Indian mothers. Frontiers in Global Women's Health, 3, Article 975683. https://doi.org/10.3389/fgwh.2022.975683
25. Mazumdar, K., Sen, I., Gupta, P., & Parekh, S. (2021). Psychological well-being of Indian mothers during the COVID-19 pandemic: The roles of self-compassion, psychological inflexibility, and parenting stress. International Perspectives in Psychology, 10(3), 155,162.
26. Mikolajczak, M., Brianda, M.-E., Avalosse, H., & Roskam, I. (2018). Consequences of parental burnout: Its specific effect on child neglect and violence. Clinical Psychological Science, 6(1), 1,9.
27. Mikolajczak, M., Gross, J. J., & Roskam, I. (2019). Parental burnout: What is it, and why does it matter? Clinical Psychological Science, 7(6), 1319,1329.
28. Mikolajczak, M., Raes, M.-E., Avalosse, H., & Roskam, I. (2018). Parental burnout: What makes some parents more susceptible than others? Clinical Psychological Science, 6(1), 134–152. https://doi.org/10.1177/2167702617707667
29. Mikolajczak, M., & Roskam, I. (2021). Emotional labour and parental burnout: Mechanisms and intervention perspectives. University of Mons Institutional Repository (ORBi). https://orbi.umons.ac.be/handle/20.500.12907/43005
30. Nimbalkar, S., Raithatha, S., Shah, R., & Panchal, D. A. (2014). A qualitative study of psychosocial problems among parents of children with cerebral palsy attending two tertiary care hospitals in Western India. ISRN Family Medicine, 2014, 769619. https://doi.org/10.1155/2014/769619
31. Patrick, B. M., Varga, K., Tóth, L., Gróf, K., & Pakai, A. (2025). Parental burnout: A progressive condition potentially compromising family well-being, A narrative review. International Journal of Environmental Research and Public Health, 22(8), 1234.
32. Robinson, C. (2020, April 16). Should parents pretend everything's hunky-dory if it's not? Psychology Today. https://www.psychologytoday.com/us/blog/the-athletes-way/202004/should-parents-pretend-everythings-hunky-dory-if-its-not
33. Sharma, R., & Joshi, P. (2022). "Holding it together": Lived experiences of urban Indian mothers during the COVID-19 lockdown. Frontiers in Psychology, 13, 840347.
34. Suchitra, T., & Tiwari, A. S. (2025). Impact of parenting sense of competence and work-family conflict on parental burnout among single parents working in India. International Journal of Indian Psychology,

13(1), Article 248.
35. Suri, K., & Mohanty, P. (2020). Not in front of the kids: Effects of parental suppression on parent-adolescent relationship quality. Indian Journal of Mental Health, 7(3), 239,247.
36. Travers, M. (2022, September 12). Is your perfectionism leading to parental burnout? Psychology Today. https://www.psychologytoday.com/us/blog/social-instincts/202209/is-your-perfectionism-leading-parental-burnout
37. Vaidyanathan, V., & Kanchana, M. (2024). Exhaustion in parental burnout and wellbeing: The mediating role of self-discrepancy among urban Indian mothers. Indian Journal of Psychological Science, 19(2), 145
38. Waters, S. F., Karnilowicz, H. R., West, T. V., & Mendes, W. B. (2020). Keep it to yourself? Parent emotion suppression influences physiological linkage and interaction behaviour. Journal of Family Psychology, 34(7), 784,793. https://doi.org/10.1037/fam0000664
39. Young, B., Dixon-Woods, M., Windridge, K. C., & Heney, D. (2003). Managing communication with young people who have a potentially life-threatening chronic illness: Qualitative study of patients and parents. British Medical Journal, 326(7384), 305. https://doi.org/10.1136/bmj.326.7384.305
40. Zapata, J., & Priya, J. (2022). Parental burnout among working mothers in Bangalore post COVID-19 lockdown. South Asian Association of Facilitators and Educators Journal, 1(1), 30,48.