



Article history:
Received 19 November 2025
Revised 17 March 2026
Accepted 25 March 2026
Published online 01 April 2026

Iranian Journal of Neurodevelopmental Disorders

Volume 5, Issue 2, pp 1-11



E-ISSN: 2980-9681

Comparing the Effectiveness of Dialectical Parenting and Mindful Parenting Training on the Parenting Adaptability of Mothers of Primary School Children in Shiraz

Sardar. Mohebi¹, Hajar. Torkan^{2*}, Mansoureh. Bahramipour Isfahani³

¹ PhD Student in Educational Psychology, Department of Counseling, Isf.C., Islamic Azad University, Isfahan, Iran

² Associate Professor, Department of Clinical psychology, Isf.C., Islamic Azad University, Isfahan, Iran

³ Associate Professor, Department of Psychology, Isf.C., Islamic Azad University, Isfahan, Iran

* Corresponding author email address: h.torkan@iau.ac.ir

Article Info

Article type:

Original Research

How to cite this article:

Mohebi, S., Torkan, H., & Bahramipour Isfahani, M. (2026). Comparing the Effectiveness of Dialectical Parenting and Mindful Parenting Training on the Parenting Adaptability of Mothers of Primary School Children in Shiraz. *Iranian Journal of Neurodevelopmental Disorders*, 5(2), 1-11.
<https://doi.org/10.61838/kman.jndd.695>



© 2026 the authors. Published by Iranian Association for Intelligence and Talent Studies, Tehran, Iran. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

ABSTRACT

Purpose: The purpose of the present study was to compare the effectiveness of dialectical parenting training and mindful parenting training on the parenting adaptability of mothers of primary school children in Shiraz.

Methods and Materials: The research design was quasi-experimental with a pretest, posttest, and 60-day follow-up with a control group. It was conducted to compare the effectiveness of dialectical parenting training and mindful parenting training on the parenting adaptability of mothers of primary school children. The statistical population included all mothers of 6- to 10-year-old children studying in primary school during the 2025-2026 academic year, who had above-average anxiety scores on the Parenting Anxiety Questionnaire (Ataabadi et al., 2021). The sample of this study was selected using convenience sampling from mothers of 8- to 10-year-old children who exhibited symptoms of parenting anxiety based on the questionnaire. For sampling, after obtaining permission from the university and making necessary coordination with counseling centers, 60 mothers were selected via convenience sampling based on inclusion and exclusion criteria and randomly assigned into two experimental groups and one control group (20 individuals per group). The first experimental group received dialectical parenting training, the second experimental group received mindful parenting training, and the third group received no training. The research instrument was the Adaptability Questionnaire (Yousefi et al., 2011). Data analysis was performed using descriptive statistics (mean and standard deviation) and inferential statistics (repeated measures analysis of variance and Bonferroni post hoc test) using SPSS-26 software.

Findings: The results showed that there is no significant difference between the effectiveness of the dialectical parenting intervention and mindful parenting on the adaptability of primary school children in Shiraz ($p > .05$).

Conclusion: Based on the analysis of the findings of the present study, parenting methods can help improve psychological constructs among mothers of primary school children. In this regard, dialectical parenting training and mindful parenting training were equally effective on the aforementioned variables.

Keywords: Dialectical parenting, Mindful parenting, Parenting anxiety, Parenting adaptability

1. Introduction

Parenting is a multifaceted and dynamic process that plays a foundational role in the cognitive, emotional, and social development of children. The transition into parenthood and the subsequent demands of raising a child often introduce significant psychological stressors, particularly for mothers who traditionally assume primary caregiving responsibilities. In the contemporary context, the complexities of child-rearing have intensified, leading to phenomena such as overparenting and increased parent-child conflict, which are closely linked to anxiety among adolescents and younger children (Leung, 2021). When parents experience high levels of stress, their ability to respond sensitively and appropriately to their children's needs is compromised, which can exacerbate externalizing and internalizing behavioral problems in children (Hosseini Yazdi et al., 2022). Consequently, identifying effective parenting interventions that equip mothers with the necessary skills to manage their stress and foster a nurturing environment is a critical priority in developmental and clinical psychology. Comprehensive parent management training programs have been developed to address these issues, demonstrating efficacy in improving the parent-child relationship and reducing parenting stress (Kowsari et al., 2023).

Parental anxiety is a pervasive issue that significantly impacts both the parent's well-being and the offspring's development (Sweeney & Wilson, 2023). Research has consistently shown that maternal and paternal anxiety can shape parenting behaviors in distinct ways, often leading to overprotective or emotionally reactive caregiving, which in turn predicts infant and child anxiety (Möller et al., 2015). The measurement and validation of specific anxiety scales for mothers, such as those designed for mothers of children with specific challenges like stuttering, highlight the unique emotional burdens these parents face (Ataabadi et al., 2021). Furthermore, interventions aimed at improving the quality of life and fostering gratitude and happiness are essential for mitigating the profound distress experienced by these mothers (Ataabadi et al., 2022). Similar psychological burdens are observed in parents of children with learning disabilities, where specialized training is required to enhance the mothers' psychological coherence (Yazdanpour et al., 2024). The stress is not limited to early childhood or specific clinical conditions; normative developmental milestones, such as high-stakes university entrance exams, can also induce severe anxiety, necessitating targeted management

training to improve parenting adaptability and reduce parenting rumination (Mirzaei et al., 2024). Exploring narrative analyses of self-authoring identities also emphasizes how individuals navigate complex social and personal expectations, reflecting the broader intricacies of familial and societal roles (Shadix, 2017).

A critical construct in navigating the demands of child-rearing is parenting adaptability. Originally conceptualized in broader contexts of personal and situational variables predicting career and life adaptability (Yousefi et al., 2011), adaptability in the parenting domain refers to a mother's cognitive and emotional flexibility in responding to the ever-changing developmental needs of her child. Adaptability allows parents to adjust their strategies in the face of unexpected challenges, maintaining a balanced and supportive environment. To cultivate this adaptability, various theoretical and practical frameworks have been integrated into parenting education programs, which have shown positive effects on parenting skills and the reduction of parenting stress (Santos et al., 2020). Programs utilizing a rational prospective approach have even demonstrated secondary benefits, such as fostering creativity in children (Modarresi et al., 2023). Additionally, acceptance and commitment-based parenting training has been highly effective in modifying the parenting styles of mothers facing severe chronic stressors, such as raising children with intellectual disabilities (Barabadi et al., 2021), while schema-based parenting interventions have proven useful in increasing parental acceptance and reducing maternal fatigue in similar demographics (Jalil Abkenar, 2025). Furthermore, approaches like non-violent resistance are critical for staff and parents coping with severe aggression and oppositional behaviors in children and adolescents (Van Gink et al., 2019). Understanding the cognitive and neurobiological underpinnings of these interventions is supported by evidence-based critical reviews of mind-brain identity theories, which bridge the gap between psychological experiences and neural mechanisms (Masi, 2023).

Among the most promising contemporary approaches to enhancing parenting adaptability are interventions derived from Dialectical Behavior Therapy (DBT). Originally developed to treat borderline personality disorder and associated substance abuse by emphasizing the synthesis of acceptance and change (Linehan, 1993), DBT has evolved into a versatile transdiagnostic treatment. Recently, the existing treatment models of DBT have been updated and successfully adapted for various adult populations, including



those with eating disorders (Ben-Porath et al., 2025). The core principles of DBT—mindfulness, emotion regulation, distress tolerance, and interpersonal effectiveness—are highly applicable to the parent-child dynamic. Dialectical parenting interventions leverage these skills to help parents navigate the intense emotional reactivity that often characterizes difficult parenting moments. By teaching parents to validate their child's emotional experiences while simultaneously maintaining behavioral contingencies and setting firm limits, dialectical parenting fosters a balanced, non-judgmental, and highly adaptive parenting style. Recent randomized controlled clinical trials have begun to investigate the specific effectiveness of DBT-based parenting interventions, highlighting their potential to transform deeply entrenched, dysfunctional family dynamics (Nazari et al., 2025).

Parallel to the rise of dialectical interventions is the extensive integration of mindfulness into parenting programs. Mindful parenting is conceptualized as the continuous application of mindful attention and awareness to the ongoing parent-child interaction, promoting intentional and non-reactive caregiving (Duncan et al., 2009). Qualitative studies identifying the components of mindful parenting emphasize its role in cultivating present-moment awareness, emotional non-reactivity, and profound compassion toward both the child and the self (Attar et al., 2024). Mindful parenting operates as a crucial mechanism that breaks the intergenerational transmission of negative affect, preventing parents' emotional distress from translating into overprotective or unsupportive behaviors (Moreira et al., 2021). The effectiveness of mindful parenting programs in promoting the wellbeing of both parents and children has been well-documented in systematic reviews, showing widespread benefits across diverse populations (Townshend et al., 2016). Specifically, parenting-focused mindfulness interventions have been shown to significantly reduce stress and improve parenting quality in highly stressed mothers of adolescents (Chaplin et al., 2021). Furthermore, these interventions have proven highly beneficial for parents of children with Attention Deficit Hyperactivity Disorder (ADHD), significantly lowering their parenting stress (S Elgendy et al., 2021). Beyond reducing stress, mindful parenting training enhances positive assertiveness and regulates the mood of female students dealing with internalizing disorders (Ebrahimi Rad & Sajjadian, 2024). Culturally adapted models, such as mindful parenting combined with an Iranian-Islamic approach, have also been compared to positive parenting,

showing substantial improvements in mothers' emotional self-regulation and self-efficacy (Mehri et al., 2020).

Despite the robust individual evidence supporting both dialectical parenting and mindful parenting interventions, there is a notable gap in the literature regarding their comparative effectiveness. Both modalities share foundational elements, particularly their reliance on mindfulness as a core mechanism for change. However, they diverge in their specific techniques and secondary foci; dialectical parenting places a stronger emphasis on behavioral conditioning, behavioral chain analysis, and explicit emotion regulation strategies to manage severe emotional dysregulation, whereas mindful parenting heavily prioritizes present-moment awareness, self-compassion, and the structural reduction of parental cognitive reactivity through meditative practices. Understanding which of these sophisticated, third-wave cognitive-behavioral interventions yields superior outcomes for parenting adaptability is critical for clinicians working with overwhelmed mothers. Establishing the empirical efficacy of these interventions requires rigorous methodological designs, including appropriate sample size estimation and statistical power analyses to ensure the reliability and validity of the comparative findings (Chuan & Penyelidikan, 2006). By directly comparing these two distinct yet related protocols within a controlled clinical framework, researchers can delineate the specific therapeutic components that most effectively enhance a mother's capacity to adaptively respond to the normative and non-normative challenges of raising primary school children. Therefore, the present study aims to compare the effectiveness of dialectical parenting and mindful parenting training on the parenting adaptability of mothers of primary school children in Shiraz.

2. Methods and Materials

2.1. Study Design and Participants

This study was a randomized clinical trial with two experimental groups and one control group, utilizing dialectical parenting and mindful parenting training packages. The research design was quasi-experimental, involving two experimental groups with a pretest, posttest, and follow-up design, along with a control group. The statistical population included all mothers of 8- to 10-year-old children who were studying in primary school during the 2025-2026 academic year. The reason for selecting this age group was that it seems these children experience high levels of stress due to attending primary school, the necessity of

interacting with others, the risk of peer rejection, limited experience in large environments, and the need for their mothers at this age, and they transfer this stress to their mothers (Ataabadi et al., 2021). Sampling was conducted by visiting counseling centers in Shiraz. A total of 60 mothers were selected using convenience sampling. This was done by printing an announcement for the course and distributing it in the centers; volunteer mothers who registered and met the inclusion criteria were selected and randomly assigned to the experimental and control groups (20 individuals per group). The selection process was based on inclusion and exclusion criteria. To determine the sample size, using the table by Chan and Pendick (2006) at the significance level of $p = .01$ and $Power = .80$, twenty individuals were selected for each group. It should be noted that a power above .80 after data analysis also confirms the adequacy of the sample size. For random assignment, the participants were first placed into three groups, then a number was assigned to each group. It was decided that the first drawn number would be assigned to the dialectical parenting experimental group, the second drawn number to the mindful parenting experimental group, and the remaining group to the control group. The inclusion criteria for the research were that mothers must have at least one 6- to 10-year-old child studying in primary school, have high parenting anxiety based on the Parenting Anxiety Scale (Ataabadi et al., 2021), have a female child, be willing to participate in the training sessions, score above average on the Parenting Anxiety Questionnaire (Ataabadi et al., 2021), have no physical or mental illnesses or substance abuse that would prevent participation in the sessions (which was asked as a written question during registration for the training courses), and not be concurrently participating in another course. The exclusion criteria were: unwillingness to continue the sessions by any of the participants, causing disruption during the sessions, and lack of commitment to completing assignments. The research ethics code was obtained from the clinical council and the research vice-chancellor of the Islamic Azad University, Isfahan (Khorasgan) Branch. Information regarding the type of treatment and the manner of attendance in the sessions was provided. Confidentiality was explained as a fundamental principle in treatment, and ultimately, clients who declared their consent to participate in the groups were selected. Given the adherence to research ethics, the participants' confidence was gained, and the researchers ensured the participants' sincerity and honesty in answering the questions.

2.2. Measures

In this study, to measure parent-child anxiety, the Parenting Anxiety Questionnaire by Ataabadi et al. (2021) was used. This questionnaire consists of 14 items and aims to evaluate parenting anxiety. The aforementioned questionnaire includes two dimensions: mother-centered and child-centered. The mother-centered anxiety dimension is measured by five items (questions 1 to 5), and the child-centered anxiety is measured by nine items (questions 6 to 14) (Table 1). The scoring of this questionnaire is based on a 5-point Likert scale ranging from 0 (not at all) to 3 (severe), and each individual's score is obtained through the sum of the scores from the questions, with a higher score indicating higher parent-child anxiety. The results have shown that this questionnaire has very good internal consistency with a Cronbach's alpha coefficient of .94. The internal consistency of this scale is $\alpha = .943$ and its test-retest reliability is $ICC = .822$, $p = .001$. The convergent validity of this scale has been proven to have a positive and significant correlation with the Parenting Stress Scale ($r = .316$, $p = .036$) and the Beck Anxiety Inventory ($r = .360$, $p = .020$); therefore, its construct validity is confirmed. It should be noted that in this study, the total score was considered, and the internal consistency was re-examined, yielding .88.

The Adaptability Questionnaire was developed by Yousefi et al. (2011). This questionnaire contains five subscales: concern, control, curiosity, confidence, and commitment. Each dimension contains 4 questions that are scored on a five-point scale from completely agree (5) to completely disagree (1). In the study by Mirzaei et al. (2024), its questions were adapted to parenting. After adapting the questions to parenting, its internal consistency was re-examined using Cronbach's alpha, yielding .90. Furthermore, its test-retest reliability was investigated, and a Pearson correlation of $r = .45$ and $p = .001$ was obtained, indicating the test-retest reliability of this questionnaire. The results of the confirmatory factor analysis also confirmed five factors, which denotes the construct validity of this questionnaire. Moreover, the correlation of the scores of this questionnaire with parenting self-efficacy was positive, and with parenting stress, it was negative and significant, indicating its convergent validity. In that study, the internal consistency was re-examined via Cronbach's alpha, and a value above .80 was obtained (Mirzaei, 2024). In the current study, the internal consistency was examined again, yielding .93.

2.3. Interventions

The dialectical parenting intervention, based on the protocol by Nazari et al. (2025), was conducted over eight sessions. The first session familiarized parents with the ultimate goal of parenting—preparing the child for an effective and beneficial entry into society—and introduced dysfunctional classical parenting styles (authoritarian, permissive, and rejecting) through the analysis of selected parenting sequences and hypothetical child-rearing scenarios. In the second session, the effective authoritative parenting style was taught, alongside the introduction of foundational keywords regarding the concept of dialectics through practical examples. The third session focused on the contextual and biological interactions leading to the dysregulation of thoughts, emotions, and behaviors; it included foundational education on the nature and origins of emotions, as well as the concepts of the biosocial theory of dialectical behavior therapy, such as biological or emotional vulnerability, invalidating environments, and emotional dysregulation applied to parenting contexts. The fourth session provided an introduction to mindfulness and its necessity for mind control, emotion regulation, behavioral control, improved concentration, and quality of life, teaching parents the core principles of mindfulness (focusing on an activity, noticing distractions, and returning attention) along with four specific mindfulness techniques. Sessions five, six, and seven were sequentially dedicated to explaining, expanding, and thoroughly reviewing conditioning exercises; during these sessions, parents learned and practiced the concepts of reinforcement, shaping, and extinction, applying these skills with their children and reviewing their assigned homework. Finally, the eighth session involved a comprehensive review of all previous sessions, answering participants' questions regarding the mindfulness and conditioning exercises, and planning for the follow-up period over the subsequent four weeks.

The mindful parenting intervention, adapted from Karimi et al. (2024), was structured across eight sessions. The first session aimed to establish a therapeutic alliance and conduct the pretest, introducing the mindful parenting training, explaining formal and informal exercises, and familiarizing participants with the approach through mindful breathing and the mindful eating of a raisin, culminating in a brief meditation to re-enter the parenting world with mindfulness.

The second session addressed mental filtering and unconscious attention to expectations, incorporating breathing exercises, a body scan, child observation, and gratitude practices, accompanied by brief meditation homework. In the third session, parents learned a three-minute breathing space for rapid relaxation, which was practiced alongside sitting meditation, supine yoga, and discussions on parental stress, self-kindness, and observing the body during stressful parenting moments. The fourth session explored various unconscious reactions to stressful conditions, teaching parents about fight, flight, and freeze responses (resistance and giving in) through sitting meditation with attention to sounds and thoughts, reading paradoxical stories, analyzing stressful events from their calendars, and practicing the three-minute breathing space under stress, supplemented by standing yoga and imagery. The fifth session introduced the concept of the inner and inherited parent, exploring parents' schema models and their reflex reactions through sitting meditation accompanying emotions, indoor walking meditation, and the holding of feelings. Session six focused on the concept of perspective-taking, utilizing sitting meditation with selective attention, outdoor walking meditation, and group discussions aimed at discovering the mothers' schema models and understanding others' viewpoints in arguments. The seventh session emphasized practicing self-compassion and gratitude through loving-kindness meditation, exploring relationship ruptures and repairs, discussing daily needs and limitations, and engaging in imagery and role-playing exercises in pairs. Finally, the eighth session reviewed all the acquired concepts through a body scan, self-compassion practices, and meditation, providing final suggestions for mindful parenting and assigning ongoing home practices for the upcoming four weeks.

2.4. Data Analysis

To analyze data, repeated measures analysis of variance tests were used via SPSS-26.

3. Findings and Results

Initially, the descriptive findings of the scores of the research variables are presented separately for the intervention and control groups.

Table 1

Descriptive indices of anxiety behaviors scores separated by four groups

Group	Pretest		Posttest		Follow-up	
	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Adaptability - Dialectical group	43.93	5.43	53.60	4.91	55.20	5.93
Adaptability - Mindful group	59.73	4.74	68.53	4.88	69.53	82
Adaptability - Control group	48.66	5.36	49.53	5.09	49.93	5.54

As seen in Table 1, the mean scores of mothers' parenting anxiety and adaptability, as well as the executive function and rule-following of primary school children in the experimental groups, show greater changes in the posttest and follow-up stages compared to the pretest than those in the control group. The results of the Shapiro-Wilk test showed that the data distribution is normal in all three groups.

The assumptions of the repeated measures analysis of variance for the adaptability variable are presented below. The values of Levene's test for the adaptability variable are non-significant ($p > .05$). In other words, the null hypothesis of the equality of error variances in all four groups is confirmed, and it can be said that the error variances in the groups are homogeneous, thus confirming this assumption. Also, based on the results, there is a

significant difference between the covariances of the adaptability variable in the groups ($p < .05$), and the condition of homogeneity of covariance matrices has not been properly met; therefore, Wilks' Lambda test was used to compare the scores of the research variables in the experimental and control groups based on the intervention stages. Furthermore, the results of Mauchly's test of sphericity for the adaptability variable are significant ($p < .05$); thus, this assumption has been violated and the equality of variances among the groups in this variable has not been met. Given the violation of this assumption, the Greenhouse-Geisser test was used to evaluate F . The comparison of the scores of the research variables in the experimental and control groups based on the intervention stages is presented in Table 2.

Table 2

Comparison of the scores of the research variables in the experimental and control groups based on the intervention stages

Test	Source of Effect	Value	F Ratio	Hypothesis df	Error df	Significance Level	Effect Size	Statistical Power
Wilks' Lambda	Time	.094	265.084	2	55	.001	.906	1.00
	Time * Group	.280	16.295	6	110	.001	.471	

Table 2 shows that regarding the effect of time and the interaction effect of time and group, there is a significant difference between the means of the experimental and control groups in the posttest of the dependent variables in at least two groups ($p < .001$). The effect size indicates that

90.6% of the group differences were due to the effect of time, and 47.1% were due to the interaction effect of time and group membership. The results of the repeated measures analysis of variance to investigate the within-subjects effects for the adaptability variable are presented in Table 3.

Table 3

Results of the analysis of within-subjects effects regarding the adaptability variable

Source	Test	Sum of Squares	df	Mean Square	F	Sig.	Effect Size	Statistical Power
Time Effect	Sphericity Assumed	2171.43	2	1085.717	2395.491	.001	.876	1.00
	Greenhouse-Geisser	2171.43	1.54	1403.575	2395.491	.001	.876	1.00
	Huynh-Feldt	2171.43	1.66	1301.863	2395.491	.001	.876	1.00
	Lower-bound	2171.43	1	2171.433	2395.491	.001	.876	1.00
Time × Group Effect	Sphericity Assumed	548.43	6	91.406	33.296	.001	.641	1.00
	Greenhouse-Geisser	548.43	4.64	118.166	33.296	.001	.641	1.00
	Huynh-Feldt	548.43	5	109.603	33.296	.001	.641	1.00
	Lower-bound	548.43	3	182.811	33.296	.001	.641	

The results in Table 3 show that the F value and corrected degrees of freedom in the Greenhouse-Geisser test for the effect of time and the interaction effect of time and group membership are significant ($p < .001$). These results indicate that there is a significant difference in the adaptability variable between the two groups (regarding the effect of time and the interaction effect of time and group

membership). The effect size indicates that 87.6% of the group differences were due to the effect of time, and 64.1% were due to the interaction effect of time and group membership. The results of the Bonferroni post hoc test to determine the effect of time on adaptability separated by group are presented in Table 4.

Table 4

Results of the Bonferroni post hoc test to determine the effect of time on the adaptability variable separated by group

Stage	Pretest - Posttest			Pretest - Follow-up			Posttest - Follow-up		
	Mean Difference	Error	Sig.	Mean Difference	Error	Sig.	Mean Difference	Error	Sig.
Dialectical parenting	9.667	.715	.001	11.267	.959	.001	1.600	.646	.080
Mindful parenting	8.800	.327	.001	9.800	.416	.001	1.000	.338	.091
Brain-based parenting	8.133	.910	.001	8.800	.947	.001	.667	.319	.166
Control	.867	.165	.849	1.267	.396	.832	.400		

As observed in Table 4, in the dialectical parenting group, there is a significant difference between the mean scores of adaptability in the pretest and posttest stages ($p < .05$), and this effectiveness has maintained its effect in the follow-up stage ($p < .05$); in the mindful parenting group, there is a significant difference between the mean scores of adaptability in the pretest and posttest stages ($p < .05$), and this effectiveness has maintained its effect in the follow-up stage ($p < .05$); in the brain-based parenting group, there is a significant difference between the mean scores of

adaptability in the pretest and posttest stages ($p < .05$), and this effectiveness has maintained its effect in the follow-up stage ($p < .05$). These results indicate that all three interventions—dialectical parenting, mindful parenting, and brain-based parenting—have been effective on the adaptability of primary school children in Shiraz, and the impact of all three treatments was maintained in the follow-up stage. The results of the Bonferroni post hoc test to determine the effect of group membership on adaptability separated by group are presented in Table 5.

Table 5

Results of the Bonferroni post hoc test to determine the effect of group membership on adaptability separated by group

Groups	Pretest - Posttest			Pretest - Follow-up		
	Mean Difference	Error	Sig.	Mean Difference	Error	Sig.
Dialectical parenting - Mindful parenting	1.955	.237	.675	2.443	.458	.597
Mindful parenting - Brain-based parenting	2.406	.850	.107	3.376	.349	.031

As observed in Table 5, there is no significant difference between the effectiveness of the dialectical parenting intervention and mindful parenting on the adaptability of primary school children in Shiraz ($p > .05$).

4. Discussion and Conclusion

The primary objective of the present study was to compare the effectiveness of dialectical parenting and mindful parenting training on the parenting adaptability of mothers of primary school children in Shiraz. The results of the statistical analyses, specifically the repeated measures analysis of variance, indicated that there was a significant main effect of time ($p < .05$) and a significant interaction

effect of time and group, demonstrating that both the dialectical parenting and mindful parenting interventions were highly effective in increasing the parenting adaptability of the mothers from the pretest to the posttest. However, the findings also revealed that there was no significant difference between the two experimental groups ($p > .05$). This indicates that both dialectical parenting and mindful parenting are equally efficacious in enhancing a mother's capacity to adaptively respond to the demands of child-rearing, equipping them with the necessary psychological flexibility to manage parenting stressors effectively.

The finding that dialectical parenting significantly improves parenting adaptability is consistent with the

theoretical foundations of Dialectical Behavior Therapy (DBT) and recent empirical investigations. Dialectical parenting leverages the core DBT principles of mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness to help parents navigate the intense emotional reactivity inherent in raising children (Linehan, 1993). By explicitly teaching parents the biosocial theory of emotion dysregulation and practical conditioning exercises—such as reinforcement, shaping, and extinction—the intervention empowers mothers to replace dysfunctional, reactive parenting styles with an authoritative, balanced approach. This finding aligns with recent randomized controlled clinical trials investigating the effectiveness of DBT-based parenting interventions, which have demonstrated substantial improvements in family dynamics and parental emotional regulation (Nazari et al., 2025). Furthermore, as DBT models have been successfully adapted for various complex adult psychological challenges, including eating disorders, their underlying mechanisms of synthesizing acceptance and change prove highly generalizable and effective for increasing cognitive and emotional flexibility in stressful roles such as parenting (Ben-Porath et al., 2025). When mothers learn to validate their own emotional struggles and those of their children while simultaneously maintaining necessary behavioral limits, their overall adaptability to shifting daily challenges significantly increases.

Similarly, the significant impact of mindful parenting training on parenting adaptability is strongly supported by a wide array of previous literature. Mindful parenting is conceptualized as paying intentional, non-judgmental attention to the present moment within the parent-child interaction (Duncan et al., 2009). By engaging in practices such as mindful breathing, body scans, and the three-minute breathing space, mothers in the current study learned to decouple their automatic, deeply ingrained schema reactions from their immediate parenting behaviors. This capacity to pause and observe, rather than instantly react out of frustration or anxiety, directly constitutes an increase in parenting adaptability. Previous studies identifying the components of mindful parenting confirm that this approach cultivates emotional non-reactivity and self-compassion (Attar et al., 2024). The effectiveness of mindful parenting programs in promoting the well-being and adaptability of parents has been extensively documented in systematic reviews (Townshend et al., 2016). Specifically, parenting-focused mindfulness interventions have been proven to reduce stress and improve parenting quality in highly

stressed mothers (Chaplin et al., 2021), as well as in mothers facing the unique challenges of raising children with ADHD (S Elgendy et al., 2021). Mindful parenting prevents a mother's internal distress from manifesting as overprotective or rigid behaviors, thereby enhancing her flexible responsiveness (Moreira et al., 2021). Furthermore, culturally adapted mindful parenting models have shown similar success in improving mothers' emotional self-regulation and self-efficacy (Mehri et al., 2020), while also improving positive assertiveness and mood (Ebrahimi Rad & Sajjadian, 2024).

The lack of a significant difference between the effectiveness of dialectical parenting and mindful parenting on adaptability can be explained by the shared therapeutic mechanisms underlying both third-wave cognitive-behavioral interventions. Both protocols heavily utilize mindfulness as a foundational skill. While dialectical parenting integrates mindfulness alongside behavioral conditioning and dialectical philosophy, mindful parenting focuses more exclusively on meditative practices, perspective-taking, and self-compassion. Ultimately, both approaches target the reduction of parental stress and anxiety, which are known to severely impair adaptability. Parental anxiety profoundly disrupts effective parenting behaviors and offspring development (Sweeney & Wilson, 2023), often leading to the transmission of anxiety from parent to child (Möller et al., 2015). Interventions that successfully mitigate this anxiety—whether through dialectical emotion regulation or mindful acceptance—free up the cognitive resources required for adaptability. The literature shows that addressing anxiety through various modalities, such as acceptance and commitment therapy for mothers of children with stuttering (Ataabadi et al., 2022) or specific anxiety scales for assessment (Ataabadi et al., 2021), generally improves functioning. Adaptability, a construct originally studied in broader career and life contexts (Yousefi et al., 2011), requires a base level of psychological coherence that both mindful and compassion-focused training successfully provide (Yazdanpour et al., 2024).

Furthermore, both interventions share similarities with other effective parent management training programs that emphasize structured, intentional responses to child behavior over reactive, emotion-driven ones. Combined programs of parent management training and mindful parenting have successfully reduced parenting stress and externalizing problems (Kowsari et al., 2023), while stand-alone combined programs have also shown efficacy in

reducing both internalizing and externalizing behaviors (Hosseini Yazdi et al., 2022). The core similarity lies in breaking the cycle of maternal fatigue and reactive overparenting, which is closely linked to parent-child conflict (Leung, 2021). Whether through schema-based approaches that target parental acceptance (Jalil Abkenar, 2025), acceptance and commitment-based training for mothers of children with intellectual disabilities (Barabadi et al., 2021), or training to manage university entrance exam-induced anxiety (Mirzaei et al., 2024), the overarching goal remains the same: to foster a flexible, resilient parental mindset. Even broader educational models emphasizing rational prospective approaches or non-violent resistance share this ultimate goal of enhancing adaptive capacity in the face of relational stress (Modarresi et al., 2023; Van Gink et al., 2019). The shared efficacy of dialectical and mindful approaches in this study reinforces the notion that empowering mothers with structured mindfulness and emotion regulation skills, regardless of the specific packaging, yields profound benefits for parenting adaptability, supported by an understanding of mind-brain identity theories that link cognitive training to behavioral change (Masi, 2023), and navigating self-authored identities within family structures (Shadix, 2017). Proper sample size estimation ensures the reliability of concluding that these two robust interventions are comparable in their positive effects (Chuan & Penyelidikan, 2006).

Despite the valuable findings of the present study, several limitations must be acknowledged. First, the sample was restricted to mothers of primary school children residing in Shiraz, which limits the generalizability of the findings to fathers, parents of adolescents or toddlers, and populations in different geographical or cultural contexts. Second, the reliance on self-report questionnaires to measure parenting adaptability may introduce social desirability bias, as mothers might overestimate their improvements or alter their responses to align with perceived expectations after undergoing intensive training. Third, the study utilized a convenience sampling method, which may not be entirely representative of the broader population of parents facing clinical levels of parenting stress. Finally, the absence of a long-term follow-up assessment (e.g., at 6 or 12 months post-intervention) precludes drawing firm conclusions about the enduring nature of the improvements in parenting adaptability achieved through these two training protocols.

To address these limitations and expand upon the current findings, several avenues for future research are recommended. Future studies should aim to include fathers

in the intervention protocols to examine whether dialectical and mindful parenting training yield similar improvements in paternal adaptability and to explore potential gender differences in treatment response. Additionally, researchers should incorporate multi-method assessment approaches, utilizing observational measures of parent-child interactions, child behavioral outcomes, and physiological stress markers, rather than relying solely on maternal self-reports. Conducting randomized controlled trials with larger, more diverse samples selected through probability sampling techniques would significantly enhance the external validity of the findings. Finally, longitudinal studies with extended follow-up periods are essential to determine the long-term maintenance of the therapeutic gains and to identify any sleeper effects that may emerge as the children navigate subsequent developmental stages.

Based on the robust evidence demonstrating the efficacy of both dialectical and mindful parenting training, several practical suggestions can be offered for clinical and educational settings. Psychological clinics and family counseling centers should actively integrate these structured, mindfulness-based, and dialectical modules into their standard parent management training programs, particularly for parents experiencing high levels of burnout or emotional dysregulation. Schools could play a pivotal role by offering these 8-session training protocols as routine psychoeducational workshops for parents, thereby fostering a more supportive home environment that indirectly benefits the students' academic and social functioning. Furthermore, mental health professionals, including school counselors and clinical psychologists, should receive specialized training in both mindful and dialectical parenting techniques, enabling them to tailor their therapeutic approach to the specific needs, preferences, and cognitive styles of the families they serve, utilizing the shared mechanisms of emotion regulation and present-moment awareness to maximize clinical outcomes.

Authors' Contributions

All authors significantly contributed to this study.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

Acknowledgments

We hereby thank all individuals for participating and cooperating us in this study.

Declaration of Interest

The authors report no conflict of interest.

Funding

According to the authors, this article has no financial support.

Ethical Considerations

In this study, to observe ethical considerations, participants were informed about the goals and importance of the research before the start of the study and participated in the research with informed consent.

References

- Ataabadi, S., Yousefi, Z., & Khayatan, F. (2021). Construction and validation of anxiety scale for mothers of children with stuttering. *Disability Studies, 11*(1), 0-0.
- Ataabadi, S., Yousefi, Z., & Khayatan, F. (2022). Comparison of the effectiveness of quality of life therapy with acceptance and commitment therapy on gratitude and happiness among mothers of children with stuttering. *Applied Family Therapy, 3*(3), 520-535.
- Attar, S., Zarei Mahmoudabadi, H., & Sadrpoushan, N. (2024). Identifying the components of mindful parenting: A qualitative study. *Research in Psychological Health, 18*(1), 87-102.
- Barabadi, B., Barabadi, H., & Heidarnia, A. (2021). Effectiveness of acceptance and commitment-based parenting training on parenting styles of mothers of children with intellectual disabilities. *Counseling Research, 20*(80), 184-209.
- Ben-Porath, D., Duthu, F., Luo, T., Gonidakis, F., Compote, E. J., & Wisniewski, L. (2025). Dialectical behavioral therapy: an update and review of the existing treatment models adapted for adults with eating disorders. *Dialectical Behavior Therapy for Eating Disorders, 5-25*.
- Chaplin, T. M., Turpyn, C. C., Fischer, S., Martelli, A. M., Ross, C. E., Leichtweis, R. N., & Sinha, R. (2021). Parenting-focused mindfulness intervention reduces stress and improves parenting in highly stressed mothers of adolescents. *Mindfulness, 12*(2), 450-462.
- Chuan, C. L., & Penyelidikan, J. (2006). Sample size estimation using Krejcie and Morgan and Cohen statistical power analysis: A comparison. *Jurnal Penyelidikan IPBL, 7*(1), 78-86.
- Duncan, L. G., Coatsworth, J. D., & Greenberg, M. T. (2009). A model of mindful parenting: Implications for parent-child relationships and prevention research. *Clinical Child and Family Psychology Review, 12*(3), 255-270.
- Ebrahimi Rad, H., & Sajjadian, I. (2024). The effect of mindful parenting training on positive assertiveness and mood of female students with internalizing disorders. *Psychological Achievements, 31*(2), 311-336.
- Hosseini Yazdi, S. A., Mashhadi, A., Kimiaee, S., & Amin Yazdi, S. (2022). Comparison of the effectiveness of mindful parenting training program combined with parent management training (combined training) with mindful parenting training and parent management training alone on reducing externalizing and internalizing behavioral problems in children. *Journal of Research in Behavioural Sciences, 20*(1), 83-97.
- Jalil Abkenar, S. S. (2025). Effectiveness of schema-based parenting on parental acceptance and maternal fatigue of students with intellectual disabilities. *Quarterly Journal of Applied Psychology, 19*(2), 80-102.
- Kowsari, F., Sabahi, P., & Makvand Hosseini, S. (2023). Effectiveness of a combined program of parent management training and mindful parenting on parenting stress, parent-child relationship, and child externalizing problems. *Quarterly Journal of Applied Psychology, 17*(2), 115-139.
- Leung, J. T. Y. (2021). Overparenting, parent-child conflict and anxiety among Chinese adolescents: A cross-lagged panel study. *International journal of environmental research and public health, 18*(22), 11887.
- Linehan, M. M. (1993). Dialectical behavior therapy for treatment of borderline personality disorder: implications for the treatment of substance abuse. *NIDA Research Monograph, 137*, 201-201.
- Masi, M. (2023). An evidence-based critical review of the mind-brain identity theory. *Frontiers in psychology, 14*, 1150605.
- Mehri, M., Nadi, M., & Sajjadian, I. (2020). Comparison of the effectiveness of mindful parenting with Iranian-Islamic approach and positive parenting on mothers' emotional self-regulation and self-efficacy. *Islamic Life Style Centered on Health, 4*(2), 38-49.
- Mirzaei, M., Yousefi, Z., & Baratali, M. (2024). Comparison of the effectiveness of university entrance exam child-induced anxiety management training with acceptance and commitment training on parenting adaptability, parenting orientation, and parenting rumination of mothers with university entrance exam children. *Psychological Dynamics in Mood Disorders, 4*(1), 18-35.
- Modarresi, S., Afrouz, G., Naghsh, Z., & Gholamali Lavasani, M. (2023). Effectiveness of parenting training program with a rational prospective approach on the creativity of female children. *Journal of Educational Psychology Studies, 20*(50), 130-150.
- Möller, E. L., Majdandžić, M., & Bögels, S. M. (2015). Parental anxiety, parenting behavior, and infant anxiety: Differential associations for fathers and mothers. *Journal of Child and Family Studies, 24*, 2626-2637.
- Moreira, H., Caiado, B., & Canavarro, M. C. (2021). Is mindful parenting a mechanism that links parents' and children's tendency to experience negative affect to overprotective and supportive behaviors? *Mindfulness, 12*(2), 319-333.
- Nazari, F., Bakhtiari, M., Golestanifard, M., Kianimoghadam, A., Mohajerin Irvani, B., & Farahani, H. (2025). Investigating the effectiveness of parenting intervention based on dialectical behavior therapy: A randomized controlled clinical trial. *Iranian Journal of Psychiatry and Clinical Psychology, 31*(1), 0-0.
- S Elgendy, R., I El Malky, M., & M Ebrahim, S. (2021). Effect of mindful parenting training for parents with children having



- attention deficit hyperactivity disorder on parenting stress. *Egyptian Journal of Health Care*, 12(1), 16-29.
- Santos, A. I. P. M. D., Martins, E. D. C. F., Magalhães, C. C. Á., Mendes, F. E. D., & Fernandes, R. I. R. D. S. (2020). Effects of a parenting education program on parenting skills, parenting stress, and mindfulness skills. *Acta Paulista de Enfermagem*, 33, eAPE20190282.
- Shadix, C. O. (2017). *Self-Authoring Gender Performance: A Narrative Analysis of Gay Undergraduate Men* [University of Kentucky].
- Sweeney, S., & Wilson, C. (2023). Parental anxiety and offspring development: A systematic review. *Journal of affective disorders*, 327, 64-78.
- Townshend, K., Jordan, Z., Stephenson, M., & Tsey, K. (2016). The effectiveness of mindful parenting programs in promoting parents' and children's wellbeing: a systematic review. *JBI Evidence Synthesis*, 14(3), 139-180.
- Van Gink, K., Visser, K., Popma, A., Vermeiren, R. R., van Domburgh, L., van der Stegen, B., & Jansen, L. M. J. (2019). Implementing non-violent resistance, a method to cope with aggression in child and adolescent residential care: exploration of staff members experiences. *Archives of Psychiatric Nursing*, 32(3), 353-359.
- Yazdanpour, M., Sepah Mansour, M., & Hassanzadeh, R. (2024). Comparison of the effectiveness of mindful parenting training and compassion-focused parenting on the psychological coherence of mothers with children with learning disabilities. *Rooyesh-e-Ravanshenasi Journal*, 13(1), 181-190.
- Yousefi, Z., Abedi, M., Baghban, I., Eatemadi, O., & Abedi, A. (2011). Personal and situational variables, and career concerns: Predicting career adaptability in young adults. *The Spanish journal of psychology*, 14(1), 263-271.