PARENTAL PERCEPTION OF SELF-CARE AND ITS CONNECTION TO CHILDCARE (AGE RANGE 0-5 YEARS OLD)

By

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A thesis submitted to Brac Institute of Educational Development in partial fulfillment of the requirements for the degree of
Master of Science in Early Childhood Development

Brac Institute of Educational Development
Brac University
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Declaration

It is hereby declared that

The thesis submitted is my own original work while completing degree at Brac University.

The thesis does not contain material previously published or written by a third party, except where this is appropriately cited through full and accurate referencing.

The thesis does not contain material which has been accepted, or submitted, for any other degree or diploma at a university or other institution.

I have acknowledged all main sources of help.

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Approval

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Ethics Statement

Title of Thesis Topic: Parental Perception of Self-care and its Connection to Childcare

Student name: Mehriba Jafrin

1. Source of population: Urban parents with children aged 0-5 years old

2. Does the study involve (yes, or no)

a) Physical risk to the subjects - no
b) Social risk - no
c) Psychological risk to subjects - no
d) discomfort to subjects - no
e) Invasion of privacy - no

3. Will subjects be clearly informed about (yes or no)

a) Nature and purpose of the study - yes
b) Procedures to be followed - yes
c) Physical risk - yes
d) Sensitive questions - yes
e) Benefits to be derived - yes
f) Right to refuse to participate or to withdraw from the study - yes
g) Confidential handling of data - yes
h) Compensation and/or treatment where there are risks or privacy is involved - yes

4. Will Signed verbal consent be required (yes or no)

a) from study participants - yes
b) from parents or guardian – n/a
c) Will precautions be taken to protect anonymity of subjects - yes

5. Check documents being submitted herewith to Committee:

a) Proposal - yes
b) Consent Form - yes
c) Questionnaire or interview schedule - yes

Ethical Review Committee:

Authorized by:
(chair/co-chair/other)

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Abstract

This qualitative research intends to explore the perceptions of urban parents regarding self-care, their self-care practices, and the connection between parental self-care and childcare. It was found through in-depth interviews and focus group discussions that urban Bangladeshi parents are well aware of the concept, but they rarely have the time and opportunity to practice it to a satisfactory extent. Parents taking good care of themselves affects their own lives positively and trickles down to their children's lives as well. Parents who take care of themselves can communicate better with their children and as a result, the children behave better. That being said, there are significant barriers to parents being able to practice self-care. The study recommends better support from workplaces and changes on the policy level to make way for that, along with awareness campaigns.

Keywords: Parental self-care; physical health; mental health; childcare

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Chapter I: Introduction and Background

In the easiest terms, breaking the word down, “self-care” means taking care of one’s own self. According to the World Health Organization, it is the capacity of a person, of families, as units and of the society as a whole, to promote and maintain physical and mental health, cope with adverse situations like diseases or wars, with or without any professional support (World Health Organization: WHO, 2020).

Virginia Commonwealth University considers activities supporting a person’s physical, mental, and emotional well-being to be self-care. These are activities that reduce stress, improve health, promote a sense of accomplishment, and foster healthy relationships. The most common types of self-care, categorized according to their target areas, include emotional, mental, physical, social, spiritual, professional, educational, and financial self-care, but are not limited to these (Cjesse, 2023).

The world we are living in is extremely fast-paced. Even though significant advancements are taking place in almost every sector, people’s lives are getting tougher by the day. Making ends meet and having a safe, comfortable life are harder than they used to be. The University of Nebraska published in June 2024 that people are indeed falling sick more after the COVID pandemic (Yes, Everyone Really Is Sick a Lot More Often After Covid, 2024). Parents, who are usually the financial providers and primary caretakers of children, are constantly under stress over these issues.

The quality of care a child receives in childhood sets him/her up for his/her life. It affects every single developmental domain of the child – physical, cognitive, language, social, and emotional (Trawick-Smith., 2018). Research conducted in 2019 sheds light on the

fact that the health of the parents is a much more influential factor in the child's developmental well-being than other social, economic, and demographic factors (Murphy & Beckwith, 2019).

This study is about the parental self-care practices and their connection to the caregiving capabilities of urban parents residing in Bangladesh.

A research article published in the American Journal of Lifestyle Medicine in May 2019 explores the topic, but from a different perspective. Whereas this study is focused on understanding the perception, knowledge levels, practices, and results of Bangladeshi urban parental self-care by conducting a qualitative study, the aforementioned one takes a relational health perspective, based on the existing research data available, and also provides recommendations (Frosch et al., 2019).

In recent times, especially after the COVID-19 pandemic, self-care has been quite the buzzword. The pandemic was an effective reminder to the world that one should take care of his/her overall health. In order to come up with interventions and policies to help improve the overall development of children, it is crucial to know where the parents stand, what they think about any specific topic, such as self-care in this regard. This study can shed light on the parental perception and practices and the connection of self-care to the children's development, providing a basis for decision-making and further related studies.

Statement of the Problem

Just like the world, as a whole, has never been this developed, it has also never been more rampant with problems. The Millennials have witnessed and survived the rise of the

internet, a global pandemic, and are currently living through ongoing violent wars and ethnic cleansing, for example, Israel's occupation of Palestine, the Rohingya displacement issue in Myanmar, and the ethnic cleansing of Uyghur Muslims in China. Capitalism runs the world. Water and air are getting increasingly polluted, along with the food we eat. The volumes of stressors to parents and caregivers and impediments to the holistic development of a child have turned gargantuan.

The care a child receives in early childhood determines the rest of his/her life. A child who grew up receiving proper nurturing care will have more chances of succeeding later in life. Whereas, a child whose developmental needs were not met properly, who faced violence and neglect, will have a higher probability of not performing well in personal, social and economic aspects (Trawick-Smith J., 2018).

According to Urie Bronfenbrenner's Ecological Systems theory, a child's development depends on the components of the child's surroundings, the environment of their home, where parents are the key caregivers, and also the culture at the parents' workplace. Anything that affects the parents will affect the children, directly or indirectly (Trawick-Smith J., 2018).

UNICEF data reveals that 90% of the children in Bangladesh face violence at home, by parents or other caregivers, affecting a whopping 45 million children (9 Out of 10 Children in Bangladesh Experience Violent Discipline at Home Every Month, States UNICEF, n.d.). Children face violence not only at home, but at school as well, many times with the awareness and support of their parents. There were 39 reported cases of students being tortured by their teachers (The Daily Star, 2024). According to a children's opinion poll conducted by UNICEF and the Ministry of Women and Children

Affairs in 2008, 92% of students in primary schools and 90% of students in madrasas faced physical punishment at their educational institutes (Islam et al., n.d.). Despite the High Court banning punishments at schools in 2011, as reported in the Multiple Indicator Cluster Survey 2019, the incidences keep coming up and a devastating fact is, 35% of the parents of the victims of these unlawful punishments believed that their children deserved it (Jahan, 2024). If parents take better care of their mental health, they may be able to regulate their emotions and behavior more effectively, providing protection and support to their children when needed; they may also be more responsive.

The recent political and social changes have resulted in the country facing crimes at an unprecedented level, both reported and unreported. Extremist behavior, violence of all sorts among people of all ages and spheres of life, are on the rise. The time has never been more dire, where children need to see healthy, grounded adults around them modeling an ethical and responsible lifestyle that meets their developmental needs. Even though there are laws and policies meant to safeguard the children, many non-governmental organizations are working tirelessly for the cause, extensive child protection facilities do not exist in our country, raising the need for their homes to have safe, sound environments. The recent rise in the monetization of content on social media platforms like TikTok has led many unaware parents to subject their children to abuse to gain views. Children who face a lack of warmth, physical or verbal violence at home may grow up to be ill-equipped to reach their development potential, whereas love and responsive, nurturing care can protect the child from many risk factors (Trawick-Smith J., 2018).

Thus, in the context of the current world, parents practicing self-care seem to be of utmost importance to ensure that their children meet their full developmental potential.

Purpose of the Study

The purpose of this study is to gather information regarding the perception and knowledge level of the parents about self-care – what do they think of self-care as a concept, if they are aware, what is the depth of their knowledge about it; to find out if they do practice self-care or not, if yes, in which forms, how often do they practice self-care; and to explore if that has helped them in tending to their children better or not, and how.

Significance and Justification of the Study

Even though self-care has been a buzzword in the 20th and 21st centuries, there are not enough research findings regarding self-care specifically representing Bangladeshi parents. In our culture, parents are always put on pedestals. It is a combination of Asian norms and a certain interpretation of the different religions, where elders and parents get utmost respect and importance, and get to make major decisions regarding their children. This place of authority comes with its inherent pressure of performing well, and this pressure often takes its toll on their caregiving abilities. As mentioned earlier in this paper, more than 90% of the children in Bangladesh face violence of many forms at home, which can be physical, verbal, sexual, or emotional. If parents are healthy physically and mentally, they may be better equipped to solve problems peacefully with the children, without resorting to violence.

The 2030 Agenda of Sustainable Development, adopted by the United Nations in 2015, also prioritizes this. The third SDG, to "ensure healthy life and promote wellbeing for all at all ages," directly addresses that (Goal 3 | Department of Economic and Social Affairs, n.d.). It is an integral component falling under the larger Early Childhood Development umbrella, which is addressed in SDG 4, to "ensure inclusive and equitable quality education and promote lifelong learning opportunities for all" (Goal 4 | Department of Economic and Social Affairs, n.d.).

Self-care interventions follow a holistic, people-centered approach that supports and nurtures the rights and needs of people based on human rights and gender equality. The importance of parental self-care is even more crucial in emergency situations like the COVID pandemic or any other humanitarian distress. A record 274 million people in the world, according to the WHO in 2020, need humanitarian assistance (World Health Organization: WHO, 2020).

This research can unearth important information that can be the basis of further, more specific research. Early childhood development, being a comparatively new discipline, it is of utmost importance to widen the pool of scientific data available. Similar studies performed in the Western world, or even in other parts of Asia, may not represent the needs of our own country perfectly. These data can be helpful not only to the researchers but also to the non-governmental organizations in the development sector, to make important decisions regarding programs and interventions. Availability of proper representative data is crucial for targeting problems and can affect policy decisions significantly.

Research Questions

This study is seeking the answers to the following research questions:

1. How do the parents perceive self-care?

2. How do they practice self-care?

3. What is the opinion of the parents about the connection of parents' self-care to their childcare practices?

Operational Definitions

- **Parental Self-care:** Activities parents perform to take care of their overall health.
- **Self-care Perception:** What and how much they know about self-care and their opinion regarding it.
- **Self-care Practice:** Performing self-care activities regularly.
- **Caregiving Abilities:** Parents' ability to meet their children's developmental needs on time.
- **Holistic Development:** Comprising development in all domains: physical, cognitive, language, social, and emotional.
- **Developmental Potential:** A child's scope to reach certain milestones if met with all developmental needs.

Chapter II: Literature Review

This section explores scientific literature regarding parental self-care and caregiving from all around the world. Numerous research papers, articles, journals, and other sources were reviewed, and the findings have been consolidated under three themes: emergence of self-care as a concept, self-care across cultures, and self-care and parenting.

The lack of enough Bangladeshi or Bangladesh-based literature relevant to the topic was noticed. There is some research concerning parental attitude while raising a child, but none that addresses the topic of this study directly.

Emergence of Self-care as a Concept

In the last decade, self-care has gained immense popularity as a concept, and much of it can be credited to the worldwide lockdown during the COVID-19 pandemic (World Health Organization: WHO, 2020), when stress and all other sorts of mental health ailments were soaring high and resources were limited. People were required to make do with whatever they had at home, and the pandemic was also a rude awakening to the world that their well-being, both mental and physical, is of utmost importance. But it is in no way a novel concept. Theorist Dorothea E. Orem came up with the concept in 1956 and it has evolved since then to its present form (Merkuri et al., 2023). Many events throughout the history later on paved its path, such as the Civil Rights Movement and Women's Liberation Movement in the 1960s and 1970s (Kreitz, 2015), the rise in the need of taking better care of one's health owing to the surge of chronic diseases in the late 20th century, and most notably, the pandemic (Merkuri et al., 2023). A respectable number of researchers have concluded that the use of social media is indeed creating

more stress in people's lives. The American Psychological Association found out that the current young Millennials and Generation Z are overwhelmed with stress (American Psychological Association, 2023). Consumerism is on the rise, and access to the internet has made marketing a product much more effective now. Smart, opportunistic businessmen came to understand that and now, it is a billion-dollar industry, catering to the rise in demand (Lieberman, 2018).

Self-care Across Cultures

Cultural differences affect the approach to self-care. Even though self-care is deemed to be a "Western" culture by many, research findings refute that. A study revealed that self-care practices are more prevalent in Japan, UK came second to Japan (Mun et al., 2016b). Whereas in the western world, especially in America, self-care is viewed as more of an individual, personal issue whereas Asian cultures value interdependence and more of a holistic approach (Galanti, 2001).

Asian self-care practices have deep roots in history. Ancient Indians have been following Ayurveda, a lifestyle, a traditional system of medicine, which emphasizes the balance between three components, body, mind and spirit. And the path to achieve that, according to the system, is through a balanced diet, yoga and meditation. Chinese medicine has a long history of traditional solutions like acupuncture and tai chi, which aim to achieve similar goals to that of Ayurveda, aligning one's "internal energies". Communal self-care practices can be found in collectivist cultures like Latin America and Africa in terms of traditional healing ceremonies and feasts which aim to heal and restore emotional and spiritual stability.

Just like some cultures promote self-care, at times they also act as barriers to it. One such barrier that affects child-rearing the most is patriarchy. Women are expected to achieve a lot, professionally and in the household, which often leaves them no time at all to tend to themselves. In many cultures, it may be frowned upon and deemed "selfish" (T S, 2024).

The modern world is full of stressors in every facet of life. In a study, it was proved that self-care is better than coping with any unwanted situation. It decreases stress, promotes healthy living, and equips a person to deal with life better. On a national level, promoting self-care would be a smarter choice compared to support with crisis only, as it would be more effective, as prevention is better and often more economic than cure (Riegel et al., 2024).

Self-care and Parenting

A child's development starts right at the moment of conception. By the time the first trimester is over, the fetus has already developed its central nervous system (Trawick-Smith J., 2018). So it is of utmost importance that pregnant women practice activities that keep them free of stress.

There are enough research findings that impress upon the importance of maternal health and wellbeing, and how stress affects the child, during pregnancy. Carmichael and Shaw came to the conclusion that major stress during pregnancy, for example, death of a loved one, will result in a higher risk the child being born with heart and neural tube defects. Prenatal stress has been linked with low birth weight and pre-mature births. These effects do not stop after birth. Researches support that stressed out mothers often give birth to children with compromised immunity. A study in the USA revealed that mothers who

have been through a violent storm during their pregnancy had a higher chance of giving birth to children who would be susceptible to schizophrenia in adulthood (Coussons-Read, 2013). Postpartum Depression Alliance of Illinois promotes practicing self-care for expecting mothers as it leads to reduced stress and anxiety, better temperament, boosts confidence, nurtures interpersonal relationships and most importantly, helps establishing a strong connection with the child, which is of utmost importance throughout the child's life (Rankedai, 2024).

Once the child is born, its first environment is his/her home and parents are the primary caregivers. How a child will develop depends astoundingly on this immediate environment where the most important components are the parents. Children learn from what they see (Trawick-Smith J., 2018). In order to model a sensible and ethical, healthy life for their children to catch up on, the parents need to be healthy themselves. Being proactive about self-care will prepare the parents for deep fulfilling connection with their children, whereas, fatigue and burnout will hamper their ability to stay emotionally available (Utah State University, n.d.). Practicing mindfulness or meditating equips one with the ability to cope with life better (Behan, 2020 as cited in Utah State University, n.d.). Engaging in physical activities, for example, strength training or running, playing football, will lead to better physical and mental health (Mandolesi, et al, 2018 as cited in Utah State University, n.d.). An Australian survey, which concluded that self-care leads to better experiences in parenting (Kienhuis et al., 2021) revealed that parents who are compassionate about themselves went through lower levels of parental depression and stress (Neff, et al, 2015 as cited in Kienhuis et al., 2021). Chau and Giallo have stated this

in their study in 2015, that fatigue will affect one's parenting abilities (Chau, et al, 2015 as cited in Kienhuis et al., 2021).

Overall, all the findings together point out that self-care and self-compassion in parents will be likely to improve the parents' and in turn their children's health. If the parents are not fit mentally and physically, it will affect all spheres of their lives, most importantly their parenting. It may result in neglect and abuse, not being able to stay "present" and available to the child. Proper care and attention and abundance of love can act as protective factors in adverse environments for a child (Trawick-Smith J., 2018).

To be noting that, very few studies were conducted where the parental self-care included both parents. Raising children has traditionally been a "woman's job" and that belief reflects in the available pool of literature on this topic.

The Bangladesh Perspective

The volume of published data which are directly related to this study was quite limited.

A 2022 study unveils that 53.1% of males and 46.9% of females suffer from depression in Bangladesh, which is also the most frequently occurring mental health issue (69.5%). The study also found that 32.1% of males and 67.9% of females face psycho-social distress related to child rearing. The same study looked into the psycho-social problems from the geographical perspective, and Dhaka had almost double the rates of depression and child-rearing related issues, compared to Rajshahi and Chattogram (Rozario & Islam, 2022).

A WHO article states that 14.6% of Bangladeshi men and 23.9% of Bangladeshi women lead sedentary lifestyles, meaning they are not getting enough physical activity, which is crucial to one's overall wellbeing (World Health Organization, 2023).

A Dhaka-based study reveals that women with high agency face a considerably lower rate of mental health issues, but surprisingly, a higher rate of issues related to their physical health (Das & Tampubolon, 2022).

Chapter III: Methodology

Research Approach

A qualitative approach has been taken to conduct this research. The nature of the topic itself requires in-depth information collection and observation. Self-care in itself is a broad concept; the preferred and effective way is very subjective. This study aims to understand the knowledge and perception, and practices of self-care. As it is novel research in the context of Bangladesh, it is only appropriate to take a qualitative approach to gather as much data as possible.

Research Participants

The population of this study falls under the following criteria: they consist of parents who live in Dhaka, Bangladesh, and have children in the age range of 0-5 years old, irrespective of single or dual-income households.

Research Site

The study was based in Dhanmondi, Uttara, Banani, and Bashundhara in Dhaka, Bangladesh.

Sampling

A total of 19 parents participated in this study: 10 mothers and 9 fathers. The sample represents the population well from every perspective. Parents working in different sectors, as stress levels and working environment are not the same in all sectors, and residing in different parts of Dhaka, were chosen to represent the population well. It was

a combination, where some were dual-income households, some not, some lived with their extended family members, and some were nuclear households.

Data Collection Methods

After the sample selection and observation of formalities, which included informing the participants about the study, seeking their consent, In-depth Interviews of all 6 participants took place, 3 fathers and 3 mothers. 2 separate Focus Group Discussions were arranged, one for the fathers and another for the mothers. These sessions were recorded (6 IDIs and 2 FGDs).

Data Analysis

After each of the IDI and FGD, short notes taken by the researcher were elaborated into narratives as soon as possible for maximum accuracy. The next step of data analysis was transcribing the recordings verbatim. Once this step was complete, the researcher went through both the recordings and transcribed documents numerous times, memoing to gain the primary understanding of the data collected. The content analysis categorized the data collected into themes: knowledge/perception, practices, connection to childcare, and barriers.

Validity and Reliability of the Research Tools

The study was overseen, and research tools were verified by experts to maintain validity throughout the process. The IDIs and FGDs were recorded, and transcription was done carefully and right after they took place to ensure reliability.

Ethical Issues

The study was conducted maintaining utmost ethics and morals. All the tools and processes were run through experts to ensure transparency and ethics. No participants were enticed or forced into participating; the purpose and details of the research were shared with them, and they participated voluntarily after being informed. Confidentiality has been maintained strictly. The participants could decide to withdraw from the study at will at any moment.

Limitations

The limitations of this study were:

- **Unwillingness of parents to participate:** Most parents who were approached as potential participants refused to do so upon hearing that mental health falls under the umbrella, and they might need to talk about the struggles they face as parents. Males, with respectable educational and professional backgrounds, were more resistant than their female counterparts. It was especially true for focus group discussions, where they were required to engage in discussions in a group setting.
- **Cancellation of one FGD:** One of the FGDs had to be cancelled as one participant decided to withdraw her participation after the session took place. She shared the reason: the content of the discussion led to an argument with her husband, regarding a comment made about her mother-in-law.
- **Scheduling:** Arranging the focus group discussions was no easy feat, as the modern parents have very busy schedules. Their weekdays end late, and weekends are usually occupied by chores and social events.

Chapter IV: Findings and Discussion

This chapter is divided into two sections. The first section presents the demographic information of the participants, followed by the findings from six in-depth interviews and two focus group discussions. This section aims to share the findings based on the IDI and FGD responses. In the second section, the responses are discussed from an analytical perspective, based on the IDI and FGD transcriptions, audio recordings, and notes taken during the data collection phase.

Demographic Information

A total of 19 individuals participated in the data collection process, comprising 9 fathers and 10 mothers. Of these 19 participants, 3 mothers and 3 fathers participated in IDIs, 6 fathers attended the fathers' FGD, and 7 mothers participated in the mothers' FGD. Fathers' ages ranged from 28 to 39 years old, all of whom were service holders and worked full-time. All the fathers, save one, have completed their post-graduation degrees. The mothers' ages ranged from 26 to 37 years old; out of 10 mothers, 5 were homemakers, and the other 5 are committed to working full time, 1 of them being an entrepreneur. Of the mothers, 3 have completed postgraduate degrees, 7 have completed graduation, and among them, 1 is currently enrolled in a master's program.

Findings

This section depicts the primary findings derived from the 6 IDIs and 2 FGDs. The data collected were transcribed from the audio clips, pondered over numerous times, and analyzed, which led to the key primary findings. The research findings have been divided into three main themes: Perception of Self-care, Parental Practices of Self-care, and

Connection between Parental Self-care and Childcare. These themes are guided by the research questions. Each of these themes has multiple sub-themes, which concisely present the findings.

Theme 1 Perception about Self-care

This theme explores how urban parents perceive self-care. It aims to find out how they define self-care and what it consists of in their eyes. It also explores whether they think of it as an important factor for their overall well-being or not. This section sheds light on how some of the issues faced regarding self-care or discussing self-care differ based on gender.

Sub-theme 1.1 Definition of Self-care

All the participants have defined self-care as taking the time to take care of one's own self, fulfilling one's needs properly. They were all aware of the concept. One participant defined it as:

"*To me self-care is giving time to yourself, which we try, but fail often*." (FGD, Fathers, Participant#1, 10-8-2025)

They have categorized self-care into two separate segments: physical health and mental health. Most of the parents have answered that they prioritized taking care of their physical health over their mental health. One of the participants defended this preference:

"*Obviously, both physical and mental health are important, but I've been blessed with such surroundings and circumstances that I did not need to emphasize it compared to my physical health*." (IDI, Father, Participant#2, 15-08-2025)

Another participant, who prioritized mental health over physical health in this regard, said:

"*For me, I think self-care is winding down after a long day at work, distressing. I usually go back home by 06:00 or 07:00 pm. I am lucky that my parents are there to take care of my daughter, so I take some time to de-stress.*" (IDI, Mother, Participant #1, 10-8-2025)

All of them save one perceive self-care in a positive light; only one of them had mixed feelings about it. He exclaimed:

> "*I say self-care is being selfish, because I am giving more time to myself so that I can present a better version of myself to my daughter, but I also feel my daughter deserves more time from me, I am not being a proper father, not the kind of father she deserves, but I cannot do anything better.*" (IDI, Father, Participant #1, 10-8-2025)

Sub-theme 1.2 Importance of Self-care

All of the participants agree unanimously that self-care is indeed a matter of extreme importance. One of them brought in an interesting perspective, religious instructions:

"*Self-care is one of the most important factors for our well-being, the reason being, even in the Quran, Allah has entrusted us with our bodies and we should respect that and take care*." (IDI, Father, Participant#2, 15-08-2025)

Another participant mentioned that taking care of yourself is a must, because as parents, they are under constant stress, and that omnipresent stress needs to be handled:

"*Yes, yes, this alertness, this constant alertness! I mean, from the day I found out I was pregnant to now, when he is 16 months old, I am always alert, how to sleep, how much to move, what to eat, what to say*." (IDI, Mother, Participant #3, 16-8-2025)

Sub-theme 1.3 Societal Attitude about Self-care

In every single IDI and FGD, men had less to say. In contrast, the conversations with women, especially in the FGD for mothers, lasted longer than those with their male counterparts. It was found that even though all the fathers were well aware of the concept, it is not something that comes up when in conversation with other men; every single male participant has confirmed this:

> "*Absolutely not! Like most of my colleagues, they are the sole earning source of their families, and they also have nuclear families. 50% of the time, they spend their leisure time taking care of their children, or household chores, trying to help their wives as much as they can* (IDI, Father, Participant #1, 10-8-2025)

One of the participants voiced his concern about the fact that self-care is still a topic that men do not feel very comfortable exploring in a setting other than their home:

"I feel we are still stuck there with the stigma; we have not overcome this." (FGD, Fathers, Participant#3, 10-8-2025)

Another added to this, highlighting how they are still very uncomfortable talking about it:

"*I am not doing fine, yet I have to say I am doing fine. This is how we have been managing because we have to*." (FGD, Fathers, Participant#4, 10-8-2025)

One of the fathers delved deeper into it:

"*Actually, it depends on the topic. We share a lot with friends, and even take loans. But when it is about family, we don't. It might mean that I think he will judge me, and perceive me differently; if we share about family, outsiders are getting to know about it.*" (FGD, Fathers, Participant#6, 10-8-2025)

Another important factor came up, which is particular to men. A few of the fathers stay away from their families, or have stayed away from their families for a period of time, for work. They have expressed how it has affected their mental health, as they were missing their children, longing for their families, which affected how they were taking care of themselves:

"*When I was living alone in Dhaka, I did not feel like doing anything or going anywhere by myself. It was a mental thing., I could not eat anything special or have a nice meal in a restaurant, thinking that my daughter and wifr would have liked this.*" (FGD, Fathers, Participant#1, 10-8-2025)

Theme 2 Parental Self-care Practices

This section explores the answers to the second research question, regarding the urban parents practicing self-care. It covers the factors that influenced the parents to think of self-care. It moves on to discussing what is their preferred form of self-care, whether they can take care of themselves the way they want or not. It discusses the obstacles the parents face and highlights what the participants have suggested as solutions.

Sub-theme 2.1 Reasons for Practicing Self-care

Only a few of the participants had been practicing self-care actively for a long time before they were parents. All of them have started to try to take care of themselves

actively and consciously after they became parents. For all of them, the catalyst was their physical health or mental deterioration affecting their daily lives. One of the participants stated:

"*At this point, my physical health is more important to me, as I am having severe back pain."* (IDI, Father, Participant #3, 16-8-2025)

Another mentioned getting hospitalized twice after Covid-19 made him more aware of this need:

> "*I was already hospitalized twice. I do not maintain any diet I have been trying since last year to avoid eating fried food. I can see how it helps me feel better. I do not follow it religiously, but I have been trying.*" (IDI, Father, Participant#2, 15-08-2025)

One of the fathers shared it was a mental health emergency that got him into practicing self-care:

> "*I have been to multiple therapists while I was going through depression. The last of them, whom I actually found to be useful, was the person who taught me about self-care.* (IDI, Father, Participant #1, 10-8-2025)

Only a few of the participants mentioned that they started taking better care of themselves because their family members urged them. One mother shared:

"*My husband was doing a course that caters to his interests, and it made him feel good. He said he wanted me to feel the same way. As I am a creative person, I joined this specific art class for adults.*" (FGD, Mothers, Participant#7 16-8-2025)

Another mother added to it, and she also mentioned how guilt comes as part of this package:

"*My family members are very supportive. My husband and my father both urge me to seek medical help as my health has been deteriorating for a while now. And I do go. But it bugs me that this upsets my son's routine, and I cannot focus on myself anymore.*" (FGD, Mothers, Participant#5 16-8-2025)

A mother shared how her experience of taking care of a child with special needs has taken a toll on her and, in turn, made her seek professional help:

> "*Since my daughter had a lot of issues since she was born, for the first two years, I did not have the luxury of even thinking about self-care. It started gradually, after she started getting a bit better. I noticed my health has deteriorated. At night, I used to wake up and have anxiety attacks.*" (IDI, Mother, Participant #1, 10-8-2025)

Sub-theme 2.2 Physical Health

Most of the participants prioritized physical health over mental health. And of them, most have said it is sleep that they need and seek, but cannot always fulfill:

"*I just need to be able to sleep! That is all I need. Even when I am asleep, I am always vigilant; am I squishing my son? Is he getting enough sleep? I am a light sleeper, and everything wakes me up.*" (IDI, Mother, Participant #3, 16-8-2025)

Another mother pointed out how she was not getting enough sleep:

> "*Both times my sons were born, I would wake up every two hours. My husband used to wake up when our firstborn was born, but now he does not. It bugs me not just*

physically, but mentally as well. It still makes me angry, and I hold this grudge all day long." (IDI, Mother, Participant #2, 15-8-2025)

Playing a team sport came second to sleeping, and only the male participants mentioned it:

"*I used to swim and play football regularly. After my son was born, I had to stop, but I have started to play football again, and I also intend to go back to swimming.*" (IDI, Father, Participant #3, 16-8-2025)

Only a few have mentioned trying to eat healthy as a form of taking care of themselves. A mother pointed out how food ordering applications have made things even worse for her:

"*For me, number one is getting enough sleep. Number two is taking a shower every day. Number three, which is extremely important but I cannot do properly, is healthy eating. Especially on the days I am working, those days are the worst. I order food using Food Panda in the morning and again in the afternoon.*" (IDI, Mother, Participant #2, 15-8-2025)

Sub-theme 2.3 Mental Health

Several participants have said that to take care of themselves, they prefer spending some time alone after a busy day at work. During this time, they usually stay alone in a room and scroll on their phones, mostly using social media platforms. More often than not, there is usually a device involved. The duration of this alone time ranges from 10-15 minutes to 2-3 hours:

"*I go to the room adjacent to ours and rest, I enjoy music, check my Facebook and other social media platforms. That is self-care to me.*" (FGD, Fathers, Participant#2 10-8-2025)

Another participant said:

"*After office, I take some time to de-stress, reading a book or watching a cooking show.*" (IDI, Mother, Participant #1, 10-8-2025)

It was found that for mothers, being able to do any one of their specific routine tasks every day, alone, without disruption, is their way of taking care of themselves:

> "*For me, it is when I take a shower. It is the only time when my son is not hanging from my shoulder.*" (FGD, Mothers, Participant#1, 16-8-2025)

Another mother added to this:

"*My son has recently started pre-school. Once he has left for his school, I get started on my chores, and then I have breakfast, any breakfast at all, while watching something on Netflix. This is a huge form of self-care to me, and I enjoy it immensely.*" (FGD, Mothers, Participant#5, 16-8-2025)

Sub-theme 2.4 Self-care as a Family

All of the participants agreed on one thing, it came up in all the discussions voluntarily, that the most effective form of self-care for them is seeing their children happy and peaceful, how their smiles take all their exhaustion away for a while - physical and mental. They all have mentioned this in different words. One of the fathers points out how his daughter has changed his priorities:

> "*I had to take my wife with me wherever I went, even when I used to meet with friends. We stayed in different cities for a while, and at first, I was thinking about how it would allow me to spend time with my friends. But in reality, I came back home even if I had time so that I could video call my child and wife.*" (FGD, Fathers, Participant#4 10-8-2025)

A mother commented:

"*When it is only my son and I on the bed, and no one is bothering us, I sleep so well! He sleeps so peacefully, it calms me down, brings me peace, we both have a good time together.*" (IDI, Mother, Participant #3, 16-8-2025)

A father points out how spending quality time with his family every evening is a priority to him:

> "*I spend around an hour just talking to my wife regularly. It may be at home, or whenever possible, we go for a walk, and take our daughter with us. Yes, I do have my dinners late, but this pre-dinner slot is always booked for them.*" (FGD, Fathers, Participant#1, 10-8-2025)

Sub-theme 2.5 Biggest Obstacles to Practicing Self-care

All the participants, mothers and fathers alike, agree that the biggest obstacle to taking care of themselves is that they do not have enough time to do that. A few parents have mentioned that taking care of themselves comes at the cost of taking their already limited time away from the child, and it either makes them feel guilty or they end up neglecting their own needs. Every single one of them feels that their plates are already full:

"*I play football and for that I need to get to the arena, which takes 2-2.5 hours. There is a gym near my office, I cannot even manage the time to go there."* (IDI, Father, Participant #3, 16-8-2025)

Another father had an important insight here:

"*We have one day every week when we work from home, it saves time and my children are always near me. Those days are a little easier.*" (FGD, Fathers, Participant#5, 10-8-2025)

Another participant disagrees:

"*Working from home gets a little tough for me. My child keeps on being naughty. She would not leave me alone. She knows Baba is working from home today, she will also need to sit with Baba and work.*" (FGD, Fathers, Participant#1 10-8-2025)

One of the mothers pointed out a limitation:

> "*It may be because of our culture, but in Bangladesh, when we become mothers, we forget that we are also human beings; we cannot look at ourselves as anything other than a mother whose only job is to fulfill the child's needs. I had to force myself to get out of this mentality.*" (FGD, Mothers, Participant#3 16-8-2025)

A young mother added to it, how the society constantly points out what they are doing wrong as mothers, but no one is there to applaud their hard work:

"*There are Facebook groups for mothers. If someone posts about feeding a child formula, there will be remarks about how you are feeding your child poison?*" (FGD, Mothers, Participant#2, 16-8-2025)

Sub-theme 2.6 Overcoming these Obstacles

Most of the participants agreed that a mandatory and paid paternity leave would help them, as it is the first few months after the child is born, when the mother needs the most support, physically and mentally. Having the husband around at this time will help the mothers and also strengthen their bond as new parents. A participant shared:

> "*If paternity leave were a culture in Bangladesh, the fathers would have understood what the mothers go through. My wife had a C-section; it was tough for her even to get up. Paternity leave allows fathers to help in such situations. It would affect the bonding between the parents as well.*" (FGD, Fathers, Participant#5 10-8-2025)

Several participants have emphasized the importance of childcare facilities at work:

"*My wife is still a student; it is time for her to build her career, and I want to support her in it. If my work had a childcare facility, it would have been a great help. I could have spent the lunch hour with him. I could be there for both my child and his mother*." (IDI, Father, Participant #3, 16-8-2025)

Most of the mothers have expressed that having a supportive husband would help them get over these obstacles:

> "*He helps me with all sorts of chores. If one day he comes back from work and sees that I could not do the laundry, he would do it himself. That allows me to take rest, take better care of myself and the family.*" (FGD, Mothers, Participant#5 16-8-2025)

A few of the mothers expressed that their husbands and in-laws are not supportive at all:

"*My husband will not help me after work. He will come back home and find faults in everything I have done and set me a list of tasks. He was supportive even when we found out that we were expecting. But my mother-in-law changed his mind.*" (FGD, Mothers, Participant#4 16-8-2025)

Theme 3: Connection between Parental Self-care and Childcare

The third and final theme delves into the connection between parental self-care from multiple perspectives. It starts with how it has affected them personally, moving on to the effects of self-care as parents, as a unit. Then we get to see how it affects their ability to take care of the child, and end with learning about how it has affected the children.

Sub-theme 3.1 Self-care as an Individual

All the participants have mentioned that if their self-care needs are being met, they feel better, and that reflects on their everyday lives:

"*I think as a person I am definitely far more composed, far more mature than I was before. I do not make sporadic decisions. I do not have irrational reactions as I used to before. Even professionally, I think I am far more composed, and my patience has improved*." (IDI, Father, Participant #1, 10-8-2025)

A participant shares how it makes her energy and enthusiasm get a boost:

"*The days I feel good, I can be there for my family 100%. I become so much more proactive! Those days I feel like I can give them the world.*" (FGD, Mothers, Participant#7 16-8-2025)

Another participant shared how not being able to care for herself affects her professionally:

> "*My behavior takes a plunge. I misbehave with my colleagues and even my superior at times. But my nurses get the worst of it. They suffer because of me. And my interpersonal relationships at work get disturbed, obviously. People often complain about me.*" (IDI, Mother, Participant #2, 15-8-2025)

Sub-theme 3.2 Self-care as Parents

All the participants have made it obvious that they understand the need to take care of themselves, and they try. But the demands of this hard-paced world make it very difficult for them, and it is usually the spouses who take the brunt of it:

"*Before we became parents, we were quite connected; now the situation has changed, either one or both of us are always trying to cater to the child, when will we take care of each other? When can we be attentive to each other?"* (IDI, Father, Participant #3, 16-8-2025)

A father shared:

"*My baby used to get started by the sound of horns, so there was a long period of time I could not take my wife out at all. She used to get upset over this. Then all I could do was take her to the rooftop for a while.*" (FGD, Fathers, Participant#5 10-8-2025)

Another father added to this:

"*Me too! The days I have a lot of pressure at work, I get tired by the time I am home. These days I spend more time scrolling on my phone, and my wife gets angry that I am not giving them any time.*" (FGD, Fathers, Participant#6 10-8-2025)

Several mothers have pointed out that, after childbirth, due to hormonal changes and constant fatigue, they used to get upset with their husbands for no logical reasons:

> "*If my husband spoke to anyone for more than 10 minutes, it used to bug me. I used to complain to my mother-in-law."* (FGD, Mothers, Participant#2 16-8-2025)

Another participant expressed how adhering to gender roles made her bitter towards her husband at times:

"*We both came home from the same workplace, from the same profession, but once we are home, feeding the child is my responsibility. Why? I am feeding him, I am putting him to bed, while you are watching TV. I do not even get half an hour to watch something.*" (IDI, Mother, Participant #2, 15-8-2025)

Sub-theme 3.3 Connection between Parental Self-care and Childcare Practices

All but one parent has confirmed that the days they are feeling better, they can take care of their children better. It directly affects how they speak to their children:

> "*My son is hyperactive. For him, I try to maintain my own self-care routine strictly, so I can match his 200% with my energy being recharged to 100%. Days I can take care of myself, I participate in all his activities: play and dance, sing with him, and answer his whys. And the days I cannot recharge myself, everything changes. My answers change, I do not want him to ask why, it is because it is.*" (FGD, Mothers, Participant#2 16-8-2025)

A participant shared:

> "*If I am not doing well, how will I keep others happy? Be it mental or physical. When I had a fever, I was sick and weak and unable to go anywhere; I could not even stand my child.*" (FGD, Fathers, Participant#7 10-8-2025)

A mother pointed out how she would delegate all the childcare responsibilities to the babysitter on the days she is not feeling her best:

> "*When I do not get enough sleep, I do not hold my child in the morning. There is a nanny. I ask her to hold him, feed him, and change his diaper. Whereas on the days I wake up after a good sleep, I do all these myself, I sit with him on the balcony and show him birds.*" (IDI, Father, Participant #3, 16-8-2025)

A few mothers got emotional, talking about how they have been taking their stress out on their children, hitting them. A mother expressed her distress over how she has no other outlet to vent and broke down into tears:

> "*Today I left my son with my mother so that I can talk about it and get some relief, something I am getting nowhere, as everyone is very quick to judge a mother. I get upset, I hit my child, then we both cry. I know what I am doing is wrong. I am teaching my child that hitting someone will give them relief.*" (FGD, Mothers, Participant#4 16-8-2025)

Another mother added to this:

> "*How can you pour from an empty vessel? I used to hit my daughter a lot. During my second pregnancy, I started my masters in Early Childhood Development. That time, I*

used to hit my daughter ruthlessly. I used to listen to the classes, switch my camera off, and cry my heart out." (FGD, Mothers, Participant#7 16-8-2025)

Sub-theme 3.4: Connection between Parental Self-care and Children's Behavior

All the parents have agreed unanimously that parental well-being reflects on their children's behavior. The children behave better and are more open to listening to their parents. When they sense their parents are happy, it affects their temperament, and vice versa:

"*I think whenever I am happy, my daughter is even happier. I think this is a pattern. When I am taking care of myself, our interactions are funnier and livelier, and I am not reacting negatively to her actions. I think now she listens to me better. She has become more receptive to what I am asking from her.*" (IDI, Mother, Participant #1, 10-8-2025)

Another mother pointed out how perceptive children are:

"*The days I am happy, I behave better with my husband and mother. I play whatever game my son is playing or take him out. He gets so very happy every time that happens! He keeps on asking if I really meant it, and that smile is precious. He also becomes very obedient for a few hours. I feel like he thinks it is reciprocal. Mumma is listening to me, so I should listen to her.*" (IDI, Mother, Participant #2, 15-8-2025)

A mother, mentioning she can take care of herself well because her husband is very supportive, shared:

"*My daughter loves drawing. Most of her drawings have one thing in common: her father expressing his love to her mother. It may be a flower or a hug, or a kiss. My daughter*

already tries to help me with household chores as she sees her father doing it." (FGD, Mothers, Participant#6 16-8-2025)

Another mother shared:

> "*We struggle a lot with our son's speech delay. The days I feel good, I can follow my routine properly, I do not feel the struggle, I do not feel doomed. My interactions with him these days are usually positive, and I can see how he is happier. He can connect with me better.*" (FGD, Mothers, Participant#5 16-8-2025)

All the parents have expressed that self-care is a habit they would most definitely instill in their children, and most of them believe that the best way of doing that is via modelling. A father shared how he tries to make his son physically more active:

> "*We do not get to walk a lot these days; our lives are pretty sedentary. The laundry we go to is a bit far from our home. Since my elder son started walking, I used to take him with me, make him walk.*" (IDI, Father, Participant #2, 15-8-2025)

A mother pointed out how children these days are already aware of what is good for them, and it is a generational difference:

> "*My son already knows a lot of things that I do not think we knew at his age. So now I try to meet him there. Once he gets back from school, I tell him how taking a shower would energize him, and I tell him what would give him a tummy ache.*" (IDI, Mother, Participant #2, 15-8-2025)

One of the participants talked about what he wants to instill in his daughter in terms of self-care:

"*If you are trying to keep everyone else happy, you might end up creating a lot of unhappiness within you. So, you must prioritize your own happiness. This is what I want to teach my daughter, at least one of the first things.*" (IDI, Father, Participant #1, 10-8-2025)

Discussion

This qualitative study set out to explore the perceptions of urban Bangladeshi parents regarding self-care. The aims were to find out how they perceive the concept, to know about their self-care practices, and whether it has affected them personally and as parents. Based on the in-depth interviews, focus group discussions, and observations, the findings were categorized into three themes: perceptions, practices, and connections. This section delves deeper into the findings, analyzing them with reference to relevant literature.

Theme 1 Perception about Self-care

This theme discusses urban Bangladeshi parents' perception of self-care: how they define it, how much importance they think it is, and also the societal attitude regarding self-care.

Sub-theme 1.1 Definition of Self-care

The participants of the study, well-educated city dwellers, were all aware of the concept, as expected; all of them highlighted the phrases "taking time" to "fulfill their needs", which is in line with the definitions that have been mentioned in the first chapter of this report. Everyone has mentioned two components of their well-being under this broader umbrella - physical and mental health, which are highlighted in the definition of self-care published by the World Health Organization (World Health Organization: WHO, 2020). Whereas the literature review revealed many aspects of self-care, for example, emotional,

mental, physical, social, spiritual, professional, educational, and financial (Cjesse, 2023), the participants only mentioned two of these: physical and mental. It was found during the literature review that Asian cultural norms do not always view self-care as an individualistic, personal act; rather, community, connection, and interdependence are integral to the practice (Galanti, 2001). While it was observed that the majority of the participants perceive taking some time out of their busy days for themselves only as a normal and in fact important act, which aligns with the Western viewpoint (Galanti, 2001), one of the participants held on to the Asian belief that self-care is not just about yourself; you can practice it as a community. He felt it was "selfish" of him to be spending time alone by himself, which, in his terms, he should be spending with his daughter. But he also realized that it is important that he practices self-care himself, to be a better father, bringing about a dilemma in his mind regarding the practice.

Sub-theme 1.2 Importance of Self-care

As all the parents testified, the constant stress they live with these days makes self-care a necessity, and it aligns with the existing research findings regarding stress related to child-rearing of Dhaka dwellers (Rozario & Islam, 2022). It was observed that most young mothers are constantly worried about whether they are raising their children "right" or not. Some voiced that an onslaught of information and opinions on the internet overwhelms them. Nowadays, everything is posted online, from the child's first word to the report cards from school, which may lead parents to subconsciously compare their children to others, and add to the stress level.

Sub-theme 1.3 Societal Attitude about Self-care

From reaching out to the participants to the data collection process, men were visibly uncomfortable and less willing to speak up. Even when they did, it needed a good amount of encouragement. It was apparent that they are open to talking about it in a safe environment, which is definitely a positive sign. Their hesitation can be attributed to the patriarchal traditions of the country, where men are expected to be strong and stoic, and talking about struggles, be it personal or financial, is considered a weakness. Not being able to address one's problems may add to their stress levels. In contrast, the women were eager to share their struggles with fellow mothers, and it clearly established a quiet solidarity amongst them. Again, it underlines the cultural practices where women are encouraged to be more in touch with their emotions, and men are not. Patriarchy brings in burdens not only to the females, but males also bear the brunt of it. It was found that the female participants were not at ease with how gender roles have affected their professional lives. A mother, quite disgruntled, echoed what multiple other mothers attested to. She exclaimed how her husband is way ahead of her now professionally, as she could not opt for the professional development opportunities. Point to be noted here, they both belong to the same profession. She also shared her frustration regarding how, even if they are coming back home together, her husband gets to relax and watch TV, and she needs to tend to her children's needs. Many of the mothers left their jobs once they found out about their pregnancies, and changes in the behavior of the administration of their workplaces were mentioned. Even though none of the participants mentioned this out loud, it was apparent that losing economic freedom and the break from work due to motherhood sits heavily in their minds.

Theme 2 Parental Self-care Practices

This theme covers six sub-themes: the reasons for practicing self-care, the two forms of self-care practiced by urban Bangladeshi parents, self-care as a family, the obstacles, and probable solutions suggested by the participants.

Sub-theme 2.1 Reasons for Practicing Self-care

All the participants started taking care of themselves only when it became a necessity for them, when their health had already deteriorated to a certain extent. It started as a cure, not prevention. The participants have mentioned incidents of being hospitalized and mental health emergencies, which made them seek professional help. It was observed that the parents whose children have any sort of special need, for example, speech delay or a physical impediment, were the ones who sought professional help regarding both their physical and mental health.

Sub-theme 2.2 Physical Health

Most participants have prioritized taking care of their physical health over their mental health. This preference could be attributed to three reasons: physical discomfort is more visible and louder compared to mental ones, and the stigma surrounding mental health issues. It also reconfirmed another Dhaka-based research, which found that women with high agency face more physical health issues than mental (Das & Tampubolon, 2022); the female participants of the study were all well-educated, well-articulated, and fall in this category. As stated earlier, the participants were all reactive regarding taking care of themselves, not proactive. None of them has mentioned any effort in establishing an

overall healthy lifestyle that supports good health, for example, eating healthy, staying physically active, and getting regular check-ups done, to promote health. Even with the growing number of gymnasiums in Dhaka, none of the participants work out, mostly due to time shortage. The female participants' chosen form of self-care was sleeping well, both working and full-time mothers alike, which is a very basic human need; at the same time, their male counterparts are choosing a team sport, clearly highlighting the difference in attitude and influence and conditioning of the existing gender roles in society.

Sub-theme 2.3 Mental Health

A very interesting finding was that for many of the participants, their preferred form of practicing self-care includes scrolling social media platforms, which is a well-documented depressant. It shows that even though the participants understand the need to take care of their mental health, they might not know exactly how to do so. Gender disparity was apparent in this regard as well. For the males, it was spending some time alone doing something that they enjoy, whereas for females, it was just being able to do any of the chores uninterrupted, echoing the attitude and practices regarding taking care of their physical health. Many of the mothers have faced postpartum depression, but more often than not, they did not get any professional help or family support in handling this.

Sub-theme 2.4 Self-care as a Family

Every single participant has commented that seeing their children smile wiped their physical and mental exhaustion away for a while. This unanimous remark unveils the possibility of an all-cure solution to many of the problems of urban Bangladeshi parents - spending quality time with the family. Only two of the parents referred to this as one of their self-care practices, though. It also suggests that the well-being of a parent is often dependent on the well-being of the children. Children not only need happy and healthy parents, but they can and do contribute positively to their parents' well-being.

Sub-theme 2.5 Biggest Obstacles to Practicing Self-care

For every single participant, the biggest impediment to taking care of themselves was time. They simply do not have the time. They have mentioned unrealistic working hours, often with no boundaries regarding personal and professional lives. This, added with the traffic situation in Dhaka, leaves almost no time for them to devote to self-care.

Guilt seemed to be an emotion that most parents go through frequently. If they take care of themselves, it cuts down their time with their children, which acts as a very effective discouragement. Even though they acknowledge the importance of self-care, when it comes to practice, they cannot act.

Established gender roles and expectations of the society, again, play important roles here. Men are under constant stress to be the provider and protector, and women are expected to lose their personal identities and function only as a mother, the caregiver; and failing to adhere to these roles subjects the parents to harsh judgments, in and out of their homes.

Such social expectations and conditioning deplete the parents and leave them no room to take care of themselves.

An obstacle in practicing self-care might be the parents not knowing about appropriate tools to take care of themselves, which are economical and do not require a lot of time.

Sub-theme 2.6 Overcoming these Obstacles

The parents have suggested solutions that will help them stay close to their children physically, for example, day care at work and paternity leave. It suggests that a lot of parental stress can be attributed to staying away from their offspring physically. A solution that came from the female participants only, in the form of multiple emotional outbursts in the focus group discussion, was the love and support of the partner. In Bangladeshi culture, women are often subjected to criticism and mistreatment, both implicit and explicit, by the in-laws, and the female participants have all confirmed that. They brought attention to how such unwarranted behavior creates distance and leads to arguments with their husbands. And it is not always the in-laws; at times, it is the female participants' own family members, who behave in a malevolent manner. A mother pointed out how she was shamed for trying to take care of herself by her own mother. A very interesting insight here was how her mother is an academically well-qualified mental health practitioner in Bangladesh. All the female participants agreed that the love and support of a husband can equip them with the strength to face the problematic situations created by the rest of the family members.

Theme 3: Connection between Parental Self-care and Childcare

The third and final theme discusses the relationship of parental self-care and their ability to tend to their children under four sub-themes, which cover how it has impacted themselves on a personal level and as parents, and how their children behave when the parents are taking care of themselves.

Sub-theme 3.1 Self-care as an Individual

It was interesting how every participant connected their well-being to their being able to serve others better, underlining the collectivist social norms of our society. They have referred to being able to offer more as a parent to their children or perform better professionally as a result of getting to take care of themselves, but not how it has made them feel about themselves.

Sub-theme 3.2 Self-care as Parents

The findings of this sub-theme reveal that not being able to take care of themselves, and at times, taking care of themselves, raise conflicts with their spouses. Not being able to take care of themselves when it is needed direly angers and frustrates a person, and often, people do not cope with this phenomenon well and take it out on their partners. At times, one spouse may not be happy with the other because of their chosen form of self-care.

Sub-theme 3.3 Connection between Parental Self-care and Childcare Practices

The finding in this section, that if parents can take care of themselves, they can communicate with and be there for their children better, is backed up by the data found in

the literature review (Utah State University, n.d.). A very important topic discussed under this theme was violence at home, physical and verbal, mainly physical, towards the children. The literature review revealed the staggering height of violence towards children in Bangladesh. Multiple mothers have admitted to taking their stress out on their children by hitting them, and they have stated very clearly that they know this is wrong. It brings attention to the fact that awareness without support may not count for much.

Sub-theme 3.4: Connection between Parental Self-care and Children's Behavior

All the participants have confirmed that their children are more receptive to their guidance and behave better when the parents' self-care needs are being met. It testifies that children do, indeed, understand more than we give them credit for; when their parents are positively communicating to them, they reciprocate, reply with the same energy. They mirror their parents' mood and temperament or act accordingly.

The findings of the study corroborated the existing studies about the topic. The study revealed how parents ' self-care is influenced immensely by societal norms and practices, the knowledge gaps regarding the scope of self-care, and paves the way for further research about the effectiveness of self-care as an individualistic versus collective practice for Bangladesh.

Conclusion

To conclude, parents being able to take better care of themselves does reflect on every aspect of their lives, including raising their children. The urban middle and upper-middle-class young parents focus mostly on their physical and mental well-being, and believe

that it is important to do so, if they want to keep on performing at their optimal levels as employees, as parents, and as spouses. Whereas for men, it is more about doing something extra, for example, taking some time off alone after work or playing a team sport, the women consider being able to do any of their daily chores, like showering and having a meal without any interruption to be self-care. They are all trying their best, but they are aware of the fact that these are the bare minimums, and if they get the chance to take better care of themselves, they would. Stress seems to be omnipresent, with very few resources, time, and most importantly, available to them. If their self-care needs are satisfied, they can interact with their children better, be more present as parents and engage in meaningful and effective communication with their children, and be more proactive. The children, on the other hand, seem to notice the differences in their parents' temperaments and act accordingly, mirroring them. They are more willing to listen to their parents' instructions and behave better in general.

The purpose of this study was to gather information regarding the perception and knowledge level of the parents about self-care, guided by three research questions. The data collected shed light upon every single one of those queries, achieving what it set out to achieve. Not only that, other than finding the answers to the research questions, important insights about societal stigma and attitude regarding discussing one's problems, differences in attitude and practices based on gender, lack of support to women at home and workplace, the burden of patriarchy on men, and generational differences in knowledge, attitude and practice of self-care have also surfaced. This study may encourage further studies.

Recommendations

It is apparent from the findings that even though Bangladeshi urban parents are well aware of the concept, importance, and effects of self-care on themselves and their children, they do not get to practice this enough. Keeping the overall learning from the research in mind, the following recommendations are being made:

- **Mandatory paid paternity leave for all organizations in both public and private sectors:** Parents pass the most challenging phase, in terms of both physical and mental well-being, right after childbirth. Due to the rise in the number of nuclear families and people often living away from their extended families for work, it gets extremely difficult for a mother to take care of the newborn and herself, especially after a cesarean delivery, which is more often the case in Bangladesh. The support and help of the father in this crucial time is of utmost importance, not only to get the necessary tasks done, but also to strengthen the bond between partners and connect with the child better. Every parent and child deserve this opportunity to step into the new phases and roles in their lives comfortably. Even though paternity leaves exist in some organizations, the number of such organizations is nowhere near enough. Changes need to occur at the policy level. Paternity leave must be made mandatory for every organization. This leave should be paid as childbirth and taking care of a newborn child and mother is not only a challenge physically and mentally, but financially as well.
- **Improvement of work environment for pregnant women and new mothers:** The study revealed that many women started experiencing discriminatory behavior during their pregnancies; it often continues after childbirth, and some of

them never get back to work, or fall behind their male counterparts in terms of professional achievements. There seems to be a significant amount of dissatisfaction among working mothers regarding this, contributing to their stress levels. Policies and laws need to be suggested and implemented to eradicate these unhealthy practices. Allowances should be made for difficult pregnancies and motherhood, e.g., flexible working hours and conditions.

- **Day care facilities at work premises:** Setting up proper day care centers in all work premises should be made mandatory. It will lower the stress level of the parents significantly, improve their productivity, and allow young mothers to join or get back to work.
- **Counselling for to-be and new parents** Counselling services should be made available at hospitals, preferably as an adjunct to the obstetrics and gynecology, and pediatric departments, where the to-be and new parents will get to learn about how to take care of themselves, what to expect, how to prepare for and deal with that, and how to take care of the new child.
- **Strict guidelines regarding working hours:** Working beyond office hours seems to be the norm in Bangladeshi organizations, cutting into parents' time with their children and family. There should be strict regulations regarding this, which will not only let parents spend more time with their families, but also make sure the employees are productive, working efficiently, and save energy.
- **Availability of public parks and gymnasiums:** Any sort of physical activity, be it a brisk walk in the park with family or a structured workout routine, has tremendous positive effects on people's mental and physical health. The lack of

public parks and affordable gymnasiums in Dhaka needs to be addressed, giving parents the opportunity to take care of themselves better.

- **Accessible and affordable mental health care providers:** Parenting at this time and age is overwhelming, to say the least. The parents are under constant pressure, regarding raising their children, their professional and personal lives, and the list goes on. The availability of affordable, trained mental health care providers can help with maneuvering and reducing the stress level of the parents when the need arises. The government, along with mental health care service providers, can set up dedicated hotlines for this purpose.
- **Awareness campaigns for parents regarding time-saving and appropriate self-care practices:** Awareness campaigns should be arranged, focusing on imparting self-care practices knowledge, which fit in the busy schedule of the modern parents, e.g., 5 minutes of guided mindful meditation on the way to work, 10 minutes of stretching every morning, eating mindfully, etc. The study reveals that for many, mainly males, a preferred method of taking care of themselves is scrolling through social media, which is a documented depressant. An awareness campaign can guide parents in the right direction in this regard.
- **Awareness campaigns that target eradicating the social stigma regarding talking about one's struggles, especially mental health:** One of the most important findings of the study was how stigma regarding talking about one's struggles and mental health is still prevalent among educated, aware Millennials. Even though some of them are seeking professional help regarding these issues, most still do not feel comfortable speaking up about it; it is still considered taboo

and shameful to admit, which aggravates the situation. Awareness campaigns addressing this issue are a crucial prerequisite to solving the problem.

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Annex 1 – Research Tools

Topic Parents' Perception of Self-care and its Connection to Childcare (Age Range: 0-5 Years Old)

Research Questions

1. How do the parents perceive self-care?

2. How do they practice self-care?

3. What is the opinion of the parents about the effect of parents' self-care on their childcare practices?

In-depth Interview Guidelines

Demographic Information

Name

Age

Gender

Educational Qualification

Profession

Number of Children

Children's Age and Gender

Questions

1. What is “self-care” to you?
2. Do you think parental self-care practice influences child care and well-being?
3. As a parent, do you think practicing self-care has improved your ability to take care of your children? How?
4. How often do you practice self-care? How much time do you allocate for this?
5. When did you start practicing self-care? What influenced you to do that?
6. What are the biggest hindrances you face regarding practicing self-care?
7. Do you believe it has helped you? How?
8. As a parent, do you think practicing self-care has improved your ability to take care of your children better? Can you please explain how?
9. Have you noticed any change in your children’s lives, which you think was an effect of you taking good care of yourself?
10. Do you include your child into your self-care practice? What about your spouse?
11. Is this a practice you would like to instill in them?

Focus Group Discussion Guidelines

1. What do you think of self-care?
2. Do you practice self-care? How?
3. As a parent, do you think practicing self-care has improved your ability to take care of your children better? How?
4. Do you think parental self-care practice influences child care and well-being?

5. Have you noticed any change in your children's lives, which you think was an effect of you taking good care of yourself?
6. As parents, what do you think are the biggest challenges in practicing self-care? How can those be tackled?
7. Would you like to share an anecdote about parental self-care practices?

বিস্তারিত সাক্ষাৎকার নির্দেশিকা

জনসংখ্যা সংক্রান্ত তথ্য

নাম

বয়স

লিঙ্গ

শিক্ষাগত যোগ্যতা

পেশা

সন্তানদের সংখ্যা

সন্তানদের বয়স এবং লিঙ্গ

প্রশ্ন

১. আপনার কাছে " স্ব-যত্ন " কী?

২. আপনি কি মনে করেন যে পিতামাতার স্ব-যত্ন অনুশীলন শিশু যত্ন এবং সুস্থতার উপর প্রভাব ফেলে?

৩. একজন অভিভাবক হিসেবে, আপনি কি মনে করেন যে স্ব-যত্ন অনুশীলন আপনার সন্তানদের আরও ভালোভাবে যত্ন নেওয়ার ক্ষমতা উন্নত করেছে? কীভাবে?

৪. আপনি কতবার স্ব-যত্ন অনুশীলন করেন? আপনি এর জন্য কতটা সময় বরাদ্দ করেন?

৫. আপনি কখন স্ব-যত্ন অনুশীলন শুরু করেছেন? এটি করার জন্য আপনাকে কী প্রভাবিত করেছে?

৬. স্ব-যত্ন অনুশীলনের ক্ষেত্রে সবচেয়ে বড় বাধাগুলি কী কী?

৭. আপনি কি বিশ্বাস করেন যে এটি আপনাকে সাহায্য করেছে? কীভাবে?

৮. একজন অভিভাবক হিসেবে, আপনি কি মনে করেন স্ব-যত্ন অনুশীলন আপনার সন্তানদের আরও ভালোভাবে যত্ন নেওয়ার ক্ষমতা উন্নত করেছে? আপনি কি দয়া করে ব্যাখ্যা করতে পারেন কিভাবে?

৯. আপনার সন্তানদের জীবনে কি এমন কোন পরিবর্তন লক্ষ্য করেছেন, যা আপনার মনে হয় আপনার নিজের যত্ন নেওয়ার ফলে হয়েছে?

১০. আপনি কি আপনার সন্তানকে আপনার নিজের যত্নের অনুশীলনে অন্তর্ভুক্ত করেন? আপনার স্ত্রী/স্বামী?

১১. এটি কি এমন একটি অভ্যাস যা আপনি সন্তানদের মধ্যে স্থাপন করতে চান?

ফোকাস গ্রুপ আলোচনার নির্দেশিকা

১. আপনার নিজের যত্ন সম্পর্কে কী মনে হয়?

২. আপনি কি নিজের যত্ন অনুশীলন করেন? কীভাবে?

৩. একজন অভিভাবক হিসেবে, আপনি কি মনে করেন নিজের যত্ন অনুশীলন আপনার সন্তানদের আরও ভালভাবে যত্ন নেওয়ার ক্ষমতা উন্নত করেছে? কীভাবে?

৪. আপনার কি মনে হয় পিতামাতার নিজের যত্ন অনুশীলন শিশু যত্ন এবং সুস্থতার উপর প্রভাব ফেলে?

৫. আপনার সন্তানদের জীবনে এমন কোন পরিবর্তন লক্ষ্য করেছেন, যা আপনার নিজের যত্ন নেওয়ার ফলে হয়েছে বলে আপনি মনে করেন?

৬. পিতামাতা হিসেবে, আপনার কি মনে হয় নিজের যত্ন অনুশীলনের ক্ষেত্রে সবচেয়ে বড় চ্যালেঞ্জগুলি কী? কীভাবে সেগুলি মোকাবেলা করা যেতে পারে?

৭. আপনি কি পিতামাতার নিজের যত্ন অনুশীলন সম্পর্কে একটি উপাখ্যান শেয়ার করতে চান?

Annex 2 – Voluntary Consent Form

Title of the Study: Parents' Perception of Self-care and its Effects on Childcare (Age Range: 0-5 Years Old)

Purpose of the Study

This study will be conducted as a part of my master's degree requirements from the Institute of Educational Development- BRAC University. The study aims to gather information regarding the perception, knowledge level, practices, and effects of parental self-care on raising their children.

Risks

No threat will be made to the participants for contributing to the study directly or indirectly. Parents of children aged 0-5 years will be contributing to the study results, which will be primarily used as a degree requirement.

Benefits of the Study

There are no direct benefits for you in participating in this study. However, your participation will contribute to the understanding of Individualized teaching among ECD educators, researchers, and other stakeholders.

Confidentiality

All information gathered from the participants during research will remain strictly confidential.

Further Use of Information

Some of the information collected from this study may be preserved for further experiments; however, in such cases, data and information shared with other researchers will not conflict with the maintenance of confidentiality of information.

Voluntary Participation

The participation in this study is completely voluntary. It is up to the participant to decide whether or not to take part in the study. If the participant decides to be a part in this study, s/he will be required to sign a consent form. After signing the consent form, the participant is still free to withdraw at any point without giving a reason. Withdrawing from this study will not affect the relationship the participant has, if any, with the researcher. If the participant withdraws from the study before the data collection is completed, your data will be returned to you or destroyed.

Thank you very much for your cooperation.

Consent

I have read the aforementioned information and got the opportunity to ask questions. I understand that my participation is completely voluntary and that I am free to withdraw at any point in the research without giving a reason. I understand that I will receive a copy of the consent form.

Participant's Name & signature _____ Date _____

Researcher's signature _____ Date _____

Annex 3 – Sample Transcript of IDI – Mother 1

Demographic Information

Age 34

Educational Qualification: Bachelor's in Business Administration, Institute of Business Administration, Dhaka University

Profession Corporate personnel

Number of Children 1

Children's Age and Gender: 4 years old, female

Note: The following in-depth interview was conducted on August 10, 2025. The IDI aimed to understand how urban Bangladeshi parents perceive self-care, their self-care practices, and the impacts of self-care on their childcare. The participant was informed about the purpose of the study, the maintenance of confidentiality, and her right to withdraw. The participant consented voluntarily.

Question: What is self-care to you?

Answer: *For me, I think self-care is grinding down after a long day at work. Distressing, which I usually do either by reading books or by seeing a cooking show or something like that.*

Question: Do you think that if the parents are practicing self-care, it is going to affect how they're taking care of their children?

Answer: *Okay, so yes, I do think that it would affect the children because until I have distressed myself, I have peace in my mind, I won't be able to take care of my children or child properly. I think self-care in any way or form is very important.*

Question: How often do you practice self-care, and how much time would you allocate for it?

Answer: *So, since I'm working, I usually go back to my home by 6 or 7. I try to take at least 1 hour off just for myself. I'm lucky that my parents are there in the meantime, and I will probably give time to my child. I also take some time in the night after my child has*

fallen asleep to do some basic reading or listening to music to get stress out of my body.

Question: When did you start practicing self-care, and was there any deciding factor that influenced you to get into it?

Answer: *So, since Aliya had a lot of issues since she was born. I think for the first one and two years, I didn't have the luxury to think about self-care. It started after she gradually started to get a bit better, and I realized that my health is kind of deteriorating because at night I would wake up, and I would have anxiety attacks, and that's when I started distressing myself before my talk to Aliya after I got back from work.*

Question: So now that you are practicing it for a while, do you think it has helped you? How?

Answer: *One aspect is that I think I can give Aliya better, like I can act and react with her more when I am not stressed. When I have stress in my body, I'm probably thinking about panicking about something to do with work. I'm not concentrating on what she is asking me or what she wants. I react a bit harshly to her. Probably, she is just trying to be a child, but I'm reacting to it, so I think that has stopped a lot. Also, I feel when I'm happy, she is even happier. I think that's something mutual, a bit of a pattern. I'm getting into self-care.*

Question: That answers half of my other question. Has there been any change in your daughter's behavior that you'll credit to you taking care of yourself?

Answer: *I think Aliya also had separation anxiety since our interactions are fun and lively, and I'm not reacting quickly to her actions. I think she now actually listens to me more. She is a bit more receptive to what I'm asking her to do.*

Question: It has helped your communication with your child more. When you are taking the time to take care of yourself, do you include her in it? Do you include your spouse in it, or is it just me time?

Answer: *I do prefer my time because that is how I keep charged up quickly, but I also have time with Aliya that helps me, especially after a bad day at work. Aliya helps me to de-stress a lot. Hugging her and then playing with her manages my work-related anxiety more. It would be only with Aliya. I don't think Adnan is involved in that.*

Question: Is this a practice that you would want to instill in your daughter?

Answer: *Yes, I do, I do want to instill this in Aliya. Because even I see almost half of my life didn't knew I needed this and that as I think some way or the other it has stopped me doing long time which has effected the relation and communication with other members of the family including my spouse .but now that I do this I think this would greatly benefit aliya my child, because it also encourages to prioritize yourself which is very important I feel now. Now that is like this time.*

Question: What are the biggest hindrances you face regarding practicing self-care?

Answer: *One, I didn't; the awareness was not there. I was aware that I needed to do self-care not only for myself but also for my child. 2nd would be the environment or the learnings we get from or I get from my family previously that after child is born you just need to concentrate on the child you need to give her all the time that you have so prioritizing aliya is important but prioritizing myself would eventually help me to prioritize her this is missing from whatever learning I have from my family honestly my parents still probably won't agree on how currently I'm acting or how I feel self-care is*

important, that's a hindrance. It also sometimes, you do start when they keep on saying stuff like that, you do ask yourself, am I actually doing the right thing? So, as a mother, I feel guilty. There is always this thought in your mind, now that I'm at the office, not giving time to my child, how is that impacting her? Will she be able to understand why I'm working now? And when you actually prioritize self-care, that takes a bit of time as well, so when your parents or your siblings or your aunts and uncles keep on saying that you need to give her the time, stop reading your book or make you feel like I am not a good mother.

Question: What will help you or your parents in general in this regard?

Answer: *I think mostly the awareness, like if I knew before becoming a parent, self-care is important for me to have a happy child, that would have been a big support. Because, as I said, it took some time for me to understand that or come to the realization that self-care is important, other than that, I think overall awareness is important; it's lacking in our society, so if some organization worked on this and raised that awareness, I think that would also have helped us.*

Question: What would you prioritize, physical health or mental health?

Answer: *Obviously, I think both are important; being physically fit is very important. But what we sometimes don't prioritize is mental health. In our society, there needs to be a bit more focus. So, I'd probably answer you by saying mental health is something that we need to really, really focus on. And I probably would prioritize that more over my physical health.*