

Psychological Stress, Support Systems, and Family Dynamics Among Single Mothers and their Children

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Abstract: *Single mothers may simultaneously manage income generation, household responsibilities, parenting, decision-making and emotional support. The present descriptive mixed-method study examined psychological stress, social support, coping mechanisms and mother-child family dynamics among 28 single mothers and their children. The study used a supplied questionnaire consisting of demographic items, five-point mother-reported stress and well-being items, social-support and coping questions, open-ended responses, and a child questionnaire addressing emotional well-being and household dynamics. The recorded findings showed very high endorsement of financial pressure (99%), work-life/personal mental-health balance (99%), sole parenting responsibility (98%), and anxiety/guilt regarding time and resources (98%); loneliness was also highly endorsed (97%). External support was rated moderate by 60% and excellent by 40%. Family/friends were reported as a coping route by 49%, while 50% reported internalising or privately managing stress. From the child perspective, 99% reported very frequent concern about maternal stress and 99% reported very frequent closeness and support from their mothers; 92% reported very frequent comfort in sharing feelings or problems. The findings indicate that substantial maternal burden can coexist with strong mother-child emotional bonds. The study supports family-sensitive interventions that combine psychological support with practical childcare, financial guidance, flexible work arrangements and accessible community networks.*

Keywords: single mothers; psychological stress; social support; coping; mother-child relationship; family dynamics

1. Introduction

Single motherhood is a family circumstance rather than a single psychological category. Women may become single mothers through widowhood, separation, divorce, abandonment or other pathways. Although the routes into single parenthood differ, responsibilities such as income generation, childcare, household management, school coordination, decision-making and emotional support may become concentrated in one adult. The present study examines this concentration of responsibilities through the supplied questionnaire data and considers both mothers' and children's perspectives.

A useful distinction is between family structure and family functioning. A single-parent household may have fewer adults available for childcare and income generation, but psychological outcomes are shaped by several interacting factors, including economic security, parental well-being,

relationship quality, social support and the wider environment. The dissertation therefore does not treat single motherhood itself as a cause of psychological dysfunction. Instead, it focuses on stressors and protective factors.

Previous literature reviewed in the dissertation identifies financial pressure, role overload, limited support and emotional strain as recurring concerns for some single mothers. International evidence has also linked single motherhood with elevated stress and emotional symptoms in some populations, while highlighting the importance of social and financial adversity. Indian literature similarly calls attention to financial, educational and social-support resources. These findings provide the context for examining the specific pattern recorded in the present survey.

Need and Significance

The study is significant because it places mother and child perspectives together, documents major stressors, and identifies protective relational factors. It also has practical relevance for childcare support, financial counselling, employment flexibility and community-based networks. The dissertation emphasises that single motherhood should not be treated as inherently harmful; the focus is on the interaction of stressors, resources and family functioning.

Objectives

- To describe the demographic profile of the surveyed single mothers.
- To assess the reported intensity of major psychological and emotional stressors.
- To examine perceived external support from family, friends and community.
- To identify commonly reported coping approaches.
- To examine children's perceptions of maternal stress and household dynamics.
- To identify emotional closeness and protective family functioning.
- To integrate the survey findings with relevant secondary literature and public data.

Research Questions

- What psychological stressors are most prominent among the surveyed single mothers?
- How do mothers perceive their external support systems?
- Which coping strategies are most frequently reported?
- How do children perceive their mother's stress and their emotional relationship with her?
- What protective factors coexist with high parental stress?

Conceptual Framework

The study uses a stress–support–coping–family functioning framework. Stressors include financial pressure, sole responsibility, loneliness, anxiety/guilt and work–life imbalance. Support resources include family, friends and community. Coping includes social reliance, personal activities and private/internal management. Family functioning is represented by communication, closeness and children’s perceptions of maternal stress.

2. Methodology

Research Design and Participants

The study employed a descriptive mixed-method design. The primary dataset consisted of questionnaire responses from 28 single mothers, with a parallel child questionnaire. The available material does not document a formal probability-sampling procedure; therefore, the sample is treated as a non-probability survey group. Mothers were aged 30–50 years. Sixty percent were divorced/separated and 40% were widowed. Employment records indicated 98% full-time, 1% part-time and 1% unemployed/seeking employment. The child module covered children approximately 10–19 years of age.

Data Collection Instrument

Module A assessed demographic/background information, psychological and emotional well-being, social support, coping and open-ended experiences. The five-point mother-side items covered sole parenting responsibility, anxiety/guilt about providing enough time and resources, loneliness, financial pressure, and work–life/personal mental-health balance. Module B examined children’s worry about maternal stress, comfort in sharing feelings, sadness or loneliness associated with family structure, perceived adult responsibilities and closeness/support from the mother.

Ethical Considerations

The dissertation records informed consent for mothers, age-appropriate assent for minor children, anonymisation, voluntary participation and the right to skip questions or withdraw according to the approved protocol. The report also emphasises sensitive handling of psychological-stress questions and avoidance of stigmatising single mothers.

Data Analysis

Analysis was descriptive because the available material contained recorded percentages rather than a respondent-level dataset. Inferential tests such as correlations, regression or t-tests were therefore not claimed. Open-ended responses were interpreted thematically using broad categories such as mental stress, self-blame, social isolation, helpfulness of support, financial security, emotional closeness and practical coping. Mother and child response scales were not pooled because they used different response formats.

Instrument Quality and Study Boundaries

The supplied questionnaire provides broad coverage of relevant domains but is not accompanied by a psychometric validation report. It is therefore used as a descriptive research instrument rather than a validated diagnostic measure. The dissertation recommends future use of validated measures of

stress, depression, anxiety, social support and parenting stress, subject to ethical approval and permissions.

3. Results

The results show a concentrated pattern of high perceived burden across several domains. Sole parenting responsibility was endorsed at the highest category by 98% of mothers; anxiety/guilt about providing sufficient time and resources was also 98%; loneliness was 97%; financial pressure was 99%; and difficulty balancing work, household management and personal mental-health care was 99%. These findings indicate that stress was experienced across multiple interconnected areas rather than as a single isolated concern.

Table 1: Summary of major recorded mother-side findings

Domain	Recorded finding
Sole parenting responsibility	98% highest category
Anxiety/guilt about time/resources	98% highest category
Loneliness	97% highest category
Financial pressure	99% highest category
Work–life/mental-health balance	99% highest category
External support	40% excellent; 60% moderate
Family/friend coping	49%
Internal/private management	50%
Hobbies/exercise	1%

Financial Pressure and Work–Life Balance

Financial pressure was the strongest recorded mother-side stress indicator at 99%. Difficulty balancing work, household management and personal mental-health care was also 99%. The participant profile records 98% full-time employment, indicating that employment and financial independence may coexist with substantial time pressure when domestic and childcare responsibilities remain concentrated in the same person.

Loneliness, Anxiety and Guilt

Loneliness was endorsed at 97%, while anxiety or guilt concerning adequate time and resources was 98%. These findings suggest that psychological burden may involve both workload and the subjective evaluation of maternal adequacy. The open-ended coding, in which mental stress was the dominant daily challenge, reinforces this interpretation.

Social Support and Coping

External support was rated excellent by 40% and moderate by 60%. No minimal/non-existent support category was recorded. However, the presence of support did not remove the reported sense of loneliness or role pressure. The coping responses showed family/friends as a named coping route for 49%, while 50% reported internalising or privately managing stress. Only 1% was recorded for personal hobbies or exercise. The pattern suggests that supportive relationships may coexist with limited opportunities for restorative personal activity.

Open-Ended Themes

In the open-ended coding, mental stress was recorded as the dominant daily challenge (95%). Self-blame accounted for 1%, social/isolation themes 3%, non-blaming responses 4%, group/community-oriented responses 1%, and no clear feeling 1%. For resources that would improve well-being,

94% were coded as not clearly helping or harming, 4% as non-blaming, 1% as group/community-oriented and 1% as no clear feeling. Because these responses were handwritten and compressed, these figures are reported as the dissertation's recorded coding rather than as a newly reconstructed qualitative dataset.

Children's Perspective

The child perspective provides an important counterpoint to the high maternal stress findings. Ninety-nine percent of children selected the highest frequency category for worrying about their mother's stress or workload. At the same time, 99% reported very frequent closeness and support from their mother, and 92% reported very frequent comfort in sharing feelings or problems with her. Feelings of sadness or loneliness related to family structure were recorded as sometimes for 65%, very often for 30% and rarely for 5%. In addition, 98% selected the lowest category for routine adult-level responsibility, with 2% selecting the middle category.

Table 2: Child-reported emotional and household indicators

Child indicator	Recorded finding
Worry about maternal stress/workload	99% very often
Closeness and support from mother	99% very often
Comfort sharing feelings/problems	92% very often
Sadness/loneliness due to family structure	65% sometimes; 30% often; 5% rarely
Routine adult-level responsibility	98% lowest category; 2% middle category

4. Discussion

The findings suggest a dual pattern of burden and protection. Financial pressure and work-life balance were the most strongly endorsed maternal stress domains, followed closely by sole responsibility and anxiety/guilt. This pattern is consistent with the literature reviewed in the dissertation, which identifies economic adversity, role overload and support conditions as relevant to psychological well-being. Importantly, the study measures self-reported stress experiences and does not establish clinical depression, anxiety disorders or other diagnoses.

The support and coping findings show that access to people does not necessarily mean that emotional burden is fully shared. Half of the recorded coping responses involved private or internal management, while family and friends were also a major resource. This supports the distinction between the availability of support and the practical usefulness of that support. Reliable childcare, financial guidance, transportation, predictable respite and flexible employment may address sources of stress that counselling alone cannot remove.

The child findings further complicate a deficit-only interpretation of single-parent family life. Children were highly aware of maternal stress while simultaneously reporting strong closeness and communication. This suggests that emotional security can coexist with substantial family workload. The findings therefore support a family-strengths perspective: reducing maternal burden while protecting open communication and avoiding excessive responsibility for children.

Implications

- Accessible counselling: confidential and affordable psychological support with flexible appointment times.
- Practical childcare: reliable after-school, holiday and emergency childcare options.
- Financial guidance: budgeting, savings, insurance, education planning and welfare-scheme navigation.
- Workplace flexibility: predictable schedules, reasonable leave and family-friendly arrangements.
- Peer-support networks: moderated groups combining emotional support with practical information.
- Child-centred support: safe opportunities for children to discuss stress without making them responsible for the parent's emotional well-being.

Limitations

Limitations include the small sample of 28 mothers; absence of respondent-level raw data; incomplete documentation of sampling and recruitment; handwritten source percentages; lack of a psychometric validation report for the supplied questionnaire; and the fact that official female-headed-household statistics are not equivalent to single-mother statistics. Future studies should use larger multi-site samples, validated psychological measures, respondent-level data, and designs that can examine differences by marital status, employment, duration of single parenthood and child age.

5. Conclusion

This study examined psychological stress, social support, coping mechanisms and family dynamics among 28 single mothers and their children. The survey recorded very high levels of financial pressure, work-life imbalance, sole parenting responsibility, anxiety/guilt and loneliness among mothers. At the same time, external support was available, family and friends were used as coping resources, and children reported strong closeness and communication with their mothers. The overall pattern is therefore not one of family dysfunction but of substantial responsibility coexisting with meaningful protective relationships. Interventions should combine accessible psychological support with practical childcare, financial guidance, flexible employment arrangements, peer/community networks and child-sensitive support.

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