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When Empathy Becomes a Risk: The Moderating Role of Children's Empathy on the Association Between Parental Burnout and Children's Emotional and Behavioral Problems During War

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Abstract

Exposure to war and armed conflict is associated with increased emotional and behavioral difficulties among children. Although both parenting and children's individual characteristics contribute to children's adjustment during adversity, little is known about how they jointly shape children's outcomes. Theoretical accounts suggest that empathic abilities may also increase children's vulnerability in highly stressed environments, particularly when exposed to parents' distress. Although parental burnout is known to predict child maladjustment, little is known about whether children's empathy moderates this association. The present study addressed this gap by examining whether affective and cognitive empathy moderate the association between parental burnout and children's internalizing, externalizing, and trauma-related symptoms. Participants were 104 mother-child dyads (MeanAgeT1 = 3.68 ± 0.36 years, MeanAgeT2 = 4.68 ± 0.25 years, 52.8% male) assessed at two time points, with the latter conducted during wartime. The sample consisted primarily of middle- to high-SES Israeli families. Mothers reported on children's empathy, emotional and behavioral adjustment, and parental burnout. Results indicated that parental burnout was associated with higher emotional and behavioral difficulties. Importantly, higher child's affective, but not cognitive, empathy, exacerbated the association between parental burnout and children's internalizing symptoms (β = .22, p = .012). Cognitive empathy was positively associated with greater war related acting out symptoms (β = .19, p = .028). These findings highlight the complex role of children's empathy in shaping their emotional and behavioral adjustment under parental and contextual stress.

Significance statements

Children who are highly emotionally sensitive may be especially vulnerable when parents experience burnout, particularly during times of war. These findings suggest that empathy, often considered a strength, can increase risk for emotional difficulties under prolonged stress. They also highlight the importance of supporting both parents and children during periods of adversity.

Introduction

Exposure to war and political violence represents one of the most extreme contexts of adversity, and is consistently associated with increased emotional and behavioral difficulties among children (Dubow et al., 2012; Katsoty et al., 2025; Slone & Shoshani, 2017, 2022). Chronic exposure to such environments may undermine children's sense of safety and stability, disrupt normative developmental processes, and exacerbate difficulties in emotion regulation and behavior (Garbarino & Kostelny, 1996).

Importantly, children are exposed to war not only directly, but also indirectly through their caregivers. The family's emotional climate, particularly caregivers' well-being, plays a central role in shaping children's psychological adjustment, especially during periods of considerable stress (Bagner et al., 2010; Davies & Cummings, 1994; Harrist & Ainslie, 1998; Repetti et al., 2002; Yurduşen et al., 2013). During periods of environmental adversity, parents are also exposed to the same stressors as their children, potentially

compromising their emotional resources and ability to respond sensitively to their children's needs. Thus, war and armed conflict environments create a dual risk for children through both direct exposure to trauma events and indirect exposure through increased parental stress.

Indeed, previous research has highlighted the importance of parenting practices in children's adjustment to traumatic experiences, particularly during war (Dubow et al., 2012; Keleynikov et al., 2025; Levy et al., 2024; Slone & Mann, 2016; Slone & Shoshani, 2017). Moreover, research has highlighted the role of children's individual characteristics in shaping their responses to environmental stressors (Ramos et al., 2005; Xuan et al., 2018). However, considerably less is known about how parental functioning and child characteristics jointly contribute to children's adjustment in the context of war and armed conflict. In particular, little research has examined whether children's characteristics may increase or attenuate the effects of parental distress on children's emotional and behavioral functioning during periods of adversity. The present study addresses this gap by examining the moderating role of children's empathy on the associations between parental burnout and children’s emotional and behavioral adjustment during wartime. The study was conducted in Israel after the October 7 attacks, a period characterized by widespread disruption, uncertainty, and elevated stress across the population.

Parental burnout

Parental burnout reflects a form of psychological distress that is uniquely tied to the demands of the parenting role. It is characterized by profound emotional fatigue, increased emotional distancing from one’s children, and a diminished sense of confidence in one’s parenting abilities (Mikolajczak et al., 2018).

Although parental burnout correlates with depressive symptoms (Mikolajczak et al., 2020; Schonfeld & Bianchi, 2016), it represents a distinct construct with parenting-specific antecedents and consequences, particularly manifesting within parent–child interactions (Mikolajczak et al., 2019, 2020, 2023). As it reflects distress embedded within the caregiving relationship, parental burnout may be especially relevant for understanding how parental emotional experiences affect children’s emotional and behavioral development.

Indeed, research consistently links parental burnout with children's behavioral problems (Chen et al., 2022; Woine et al., 2024; Yuan et al., 2022). These findings are particularly relevant during periods of heightened stress, when parents themselves may experience elevated caregiving demands alongside ongoing environmental stressors. Indeed, recent evidence indicates that wartime deployment was associated with increased parental burnout, and that wartime deployment predicted child behavioral difficulties only when parental burnout was high (Keleynikov et al., 2026). Together, these findings highlight parental burnout as a potentially important mechanism through which large-scale environmental stress may affect children's adjustment.

Yet, despite growing literature on parental burnout (Chen et al., 2022; Keleynikov et al., 2026; Woine et al., 2024; Yuan et al., 2022), relatively little is known about the mechanisms that explain why some children appear more susceptible to parental burnout than others. Although children of stressed and burnt-out parents face an increased risk of developing behavioral problems (Jackson & Choi, 2018; Yuan et al., 2022), children vary in how they are affected. Theories of differential susceptibility suggest that individuals' personal traits shape how they respond to stress or negative experiences (Belsky & Pluess, 2009; Monroe & Simons, 1991; Tone & Tully, 2014). Indeed, child characteristics such as temperament and negative emotionality have been shown to moderate associations between family stress and behavioral problems (Ramos et al., 2005; Xuan et al., 2018).

Empathy- risk or protective factor?

One child characteristic that may be particularly relevant in the context of parental burnout is empathy. Empathy, the ability to understand and share another person's affective states (Davis, 1983), plays an essential role in social functioning and interpersonal relationships (Eisenberg, 2006). It is broadly conceptualized as comprising both cognitive and affective components (Davis, 1983). Cognitive empathy refers to the ability to understand and interpret others' emotions, whereas affective empathy reflects an other-oriented emotional response to another's emotions (Davidov et al., 2021). Affective empathy can further subdivided to empathic concern, characterized by feelings of concern or compassion toward a person in distress, and personal distress which reflect a self-oriented emotional arousal, arising when regulation fails (Davidov et al., 2021).

A large body of research links higher overall empathy with positive developmental outcomes, such as prosocial behavior (Decety et al., 2016; Eisenberg, 2006; Gungordu et al., 2025; Longobardi et al., 2019; Williams et al., 2014), and reduced externalizing symptoms (Georgiou et al., 2019; P. A. Miller & Eisenberg, 1988). Moreover, empathy is often viewed as a protective factor (Kadosh-Laor et al., 2023). For example, greater empathic concern has been associated with less stability of externalizing problems from preschool into the early school years (Hastings et al., 2000), and empathy in infancy may protect against increases in externalizing problems during early childhood (Paz et al., 2021).

Yet, other findings suggest that empathy does not always relate to children's development in positive ways (Bray et al., 2021), and may depend on the emotional and parental context in which it develops. For example, (Berzenski & Yates, 2022) found that empathy development diverged from typical trajectories in maltreating parental contexts. These findings highlight that children's empathic abilities may be particularly sensitive to parents' emotional functioning, especially under conditions of high stress.

The risky strength theory offers an explanation for this phenomenon, proposing that empathic tendencies can predict both positive and negative consequences, depending on developmental trajectories and contextual factors (Tone & Tully, 2014). Specifically, maladaptive parenting and overexposure to parents' negative affect put the highly empathic child at risk for experiencing heightened personal distress and developing internalizing problems. For example, Miller et al., (2014) reported that

children's empathy predicted higher conduct problems when parenting behavior was negative. Because highly empathic children are more attuned to others' emotional states (Eisenberg, 2006), they may also be more sensitive to their parents' emotional exhaustion and distress (Davidov et al., 2013; Tully & Donohue, 2017). Under chronic stress, such as when parents experience emotional exhaustion and parental burnout (Mikolajczak et al., 2018), this heightened sensitivity can expose children to greater emotional distress, placing them at increased risk for developing emotional and behavioral problems (Tone & Tully, 2014; Tully & Donohue, 2017).

Evidence supporting this theory suggests that affective empathy is associated with increased risk for child's depressive symptoms (Planalp et al., 2025), and with greater internalizing problems among children of depressed mothers, and among inpatient adolescents (Gambin & Sharp, 2016; Tully & Donohue, 2017). Moreover, paternal depressive symptoms predict greater affective empathy among infants with higher resting respiratory sinus arrhythmia (RSA), suggesting increased susceptibility to parental distress (Dann et al., 2025).

On the other hand, findings regarding the role of cognitive empathy as a risk or protective factor are mixed. While Tully & Donohue, (2017) found that cognitive empathy was associated with greater internalizing problems among children of depressed mothers, another study found no such association (Bray et al., 2021). Moreover, another study found that cognitive empathy was negatively associated with conduct problems only in girls (Gambin & Sharp, 2016).

Taken together, these findings suggest that empathy components can serve as a risk or protective factor, depending on the parental context. Yet, most prior research has focused on parental depression (Goodman & Gotlib, 1999; Tone & Tully, 2014; Tully & Donohue, 2017), leaving open the question of whether similar dynamics occur with parental stress and burnout. Given the relative stability of behavioral difficulties and their association with later maladjustment (Campbell, 1997), it is important to better understand how children's empathy may moderate the effect of adverse parenting. This question becomes particularly salient in contexts of heightened or prolonged stress, such as during war, when both parents and children are exposed to an intense emotional climate.

Accordingly, the current study aimed to examine this moderating role of empathy on the link between parental burnout and children’s emotional and behavioral problems and war-related stress.

The current study

Children may be exposed to a stressful environment both directly and through their parents. Although research on parental burnout has grown in recent years (Chen et al., 2022; Mikolajczak et al., 2018; Woine et al., 2024), it has not yet been examined through the lens of the risky strength theory, or in contexts of extreme adversity, such as war.

Exposure to armed conflict is broadly detrimental to children's development, yet some children appear to be more strongly affected than others (Katsoty et al., 2025; Slone & Shoshani, 2017). The risky strength

theory (Planalp et al., 2025; Tully & Donohue, 2017) suggests that these differential outcomes may stem from variations in children's empathic ability. These gaps provide the foundation for the present study, which examines whether children's empathy moderates the association between parental burnout and children's emotional and behavioral problems during a period of exposure to armed conflict.

The present study was conducted across two time points during early childhood, a developmental period marked by growing autonomy, self-regulation skills, and social competence (Campbell, 1995; Williford et al., 2007). Behavioral problems emerging during this period may predict later maladjustment, while early childhood is also associated with increased parenting stress and risk for parental burnout (Denham et al., 2000; Williford et al., 2007; Zahn–Waxler et al., 2000).

Importantly, the data analyzed in this study were collected before and shortly after the outbreak of war in Israel, a period characterized by widespread missile threats and disruptions to daily routines. On October 7, 2023, Israel experienced a large-scale terrorist attack that resulted in approximately 1,300 civilian (both Jewish and non-Jewish) deaths and the abduction of around 240 individuals (UN, 2024). The magnitude and severity of the attack exposed all Israeli citizens to direct or indirect traumatic effects, constituting a profound national trauma and providing a unique opportunity to examine how acute and ongoing national crisis impacts family dynamics. Prior research has shown that exposure to war and conflict can affect both parental well-being (Levy et al., 2024) and children's adjustment (Slone & Shoshani, 2017). Of specific interest is a recent longitudinal study that found that empathic distress at age 1.5 years and emotional empathy at age 11 years predicted children's internalizing symptoms during wartime, but not before it (Katsoty et al., 2025). While acknowledging that children on both sides of the conflict are affected, the present study focused specifically on Israeli children and their mothers participating in our longitudinal project.

Accordingly, the current study examines the joint role of parental burnout and children's empathy in predicting children's behavioral and emotional outcomes, while also considering the broader implications of conducting research in the context of war. Thus, we examined both general emotional and behavioral difficulties, and emotional and behavioral responses following a potentially traumatic national event. We hypothesized that 1) Children's internalizing and externalizing difficulties would increase from the pre-conflict period to during the armed conflict; 2) Children's affective and cognitive empathy would moderate the association between parental burnout and children's emotional and behavioral difficulties. Specifically, higher levels of affective empathy were expected to intensify the negative impact of parental burnout on children's internalizing problems. Externalizing problems were considered exploratory due to mixed prior findings, although effects were expected in a similar direction given the co-occurrence of internalizing and externalizing symptoms; 3) Similar patterns would emerge for trauma-related emotional and behavioral responses.

Methods

Participants

This study is nested within a larger longitudinal study (N=222) of children's empathy development, with five time points. The current analysis uses data from the fourth (henceforth, Time 1) and fifth (henceforth, Time 2) time points, during which mothers completed online questionnaires. Of those, N= 105 mother-child dyads participated in both data waves. One participant was removed from analyses due to a response pattern suggesting inattentive responding, resulting in a final subsample of 104 families (child mean age = 3.68 ± 0.36 years at Time 1 and mean age = 4.68 ± 0.25 years; 52.8% male at Time 2).

Attrition analyses revealed no significant differences between retained participants and those lost to follow-up in child gender, child age, maternal age, or family income (all p> .13), suggesting minimal attrition bias. Sample reduction likely reflects logistical challenges of longitudinal data collection.

Ethics declarations

Human Ethics

The study was approved by the [masked for blind review] Internal Review Board (approval number 620).

Informed Consent

All mothers gave informed consent before participating at each time point.

Procedure

Mother–infant dyads were initially recruited for an online study when children were 10-18 months old, and have been followed across multiple time points. At each time point, mothers completed online questionnaires, and at certain waves, dyads also participated in online or at-home observation sessions. Mothers who had participated in previous time points were contacted over the phone and were invited to participate in the current time point. Mothers who agreed to participate provided informed consent, and were asked to fill out a battery of online questionnaires via Qualtrics. Mothers completed questionnaires focused on their and their children's emotional states. Additional demographic information regarding participants' exposure to the war and the psychological implications was collected.

Time 1 data was collected between July 2022- July 2023 and included at-home observation sessions. Time 2 data was collected January 10th- February 29th, following the October 7th attack on Israel. This phase included measures assessing mothers' and children's functioning during the early months following the October 7th attacks.

Mothers received approximately 15 USD in the form of an electronic gift card, as compensation. Below, we describe the measures relevant to the current analyses.

Measures

1. **The Child Behavior Checklist (CBCL 1.5-5**;Achenbach & Rescorla, 2000)**.** The CBCL is parent-report questionnaire used to assess and detect behavioral and emotional problems in children. It consists of 99 items that are grouped into seven syndrome scales: Emotionally reactive, anxious/depressed, somatic complaints, withdrawn, attention problems, aggressive behavior, and sleep problems. Based on second-order factor analyses, the first four scales can be clustered as "Internalizing problems," while attention problems and aggressive behavior can be clustered as "Externalizing problems". Parents are asked to rate how true each item is now or within the past 6 months for their child. Importantly, at time 5, we asked about the most recent two months, corresponding to the onset of the war. Each item was scored on a 3-point scale from "not true" to "very true". We computed sum scores for each subscale and total score across all items. Mothers completed this measure at both time points, with the earlier measure serving as a control variable to examine changes in children's symptoms following the onset of the war. Cronbach's α for Internalizing and Externalizing problems were 0.82 and 0.88, respectively at Time 1 and 0.87 and 0.91, respectively at Time 2.
2. **Griffith Empathy Measure (GEM**; Dadds et al., 2008). The GEM is a 23-item parent-reported measure of a child's empathy. It can be divided into an affective subscale (9 items, e.g., "child becomes sad when other children are sad") and a cognitive subscale (6 items, e.g., "child can't understand why other people get upset"). Each item is scored on a 9-point scale (-4 = "strongly disagree" to 4 = "strongly agree"). We computed mean scores for each subscale and total scores across all items. Cronbach's α for affective and cognitive empathy were 0.84 and 0.72, respectively. Mothers filled out this measure at Time 2.
3. **Parental Burnout Assessment (PBA;** Roskam et al., 2018)**.** The PBA assesses different aspects of parental burnout. It consists of 23 items that can be divided into four subscales: 1) The parental exhaustion scale reflects feelings of tiredness related to one's parental role; 2) The contrast scale reflects a shift in one current state that is contrast to previous period; 3) The feelings of being fed scale reflects lose pleasure and fulfillment in parental role; 4) The emotional distancing from one's children reflects a tendency to become less involved in parenting, where interactions are limited to functional aspects at the expense of emotional aspects (Mikolajczak et al., 2019; Roskam et al., 2018). The PBA assesses the frequency of behaviors with a scale ranging from 'never' to 'always/every-day' on a 7-point scale. We computed summary scores across all items. Cronbach's α was 0.96. Mothers filled out this measure at Time 2.
4. **Patient Health Questionnaire (PHQ-8;** Kroenke et al., 2009). The PHQ-8 is a self-report measure of depression symptoms and their severity. It consists of eight of the nine criteria for depression based on the DSM-IV (American Psychiatric Association, 1994). For example, "Feeling down, depressed, or hopeless". The PHQ-8 assesses the number of days in the past 2 weeks the respondent had experienced depressive symptoms and is scored on a 3-point scale. The total score on this measure ranges from 0 to 24 points. Mothers filled out this measure at Time 2.
5. **Pediatric Emotional Distress Scale (PEDS;** Saylor et al., 1999). The PEDS is a 21-item parent-report that assesses the severity of children's symptoms following exposure to a distressing or traumatic

event. Symptom frequency is rated on a 4-point Likert scale reflecting their occurrence over the past month. 17 of the items assess general behaviors, and can be divided into three subscales: Anxious/Withdrawn (e.g., “Seems sad and withdrawn”), Fearful (e.g., “Refuses to sleep alone”), and Acting Out (e.g., “Has temper tantrums”). The remaining four items inquire about trauma-specific symptoms. We computed summary scores for each subscale and total scores across all items. Here, we focused on Anxious/Withdrawn and Acting Out because they correspond to the CBCL internalizing/externalizing conceptualization. Therefore, only these scales were used in the analyses. Cronbach’s α for Anxious/Withdrawn and Acting Out were 0.74 and 0.81, respectively. Mothers filled out this measure at Time 2.

Data analysis

All analyses were conducted using R v4.2.2. Zero-order correlations between the study variables were examined using Pearson's correlation. To assess change in children’s behavioral problems over time, paired-sample t-tests compared CBCL internalizing and externalizing symptoms between Time 1 and Time 2. CBCL internalizing and externalizing scores were also classified into normal, borderline, and clinical ranges according to ASEBA clinical cutoffs (Achenbach & Rescorla, 2000). Descriptive statistics and distributions of clinical ranges were examined.

To test our hypotheses, we mean-centered the predictor variables and tested two multiple regression models, in which we examined the associations between parental burnout and child behavioral problems (internalizing and externalizing, separately), as well as the moderating roles of children’s affective and cognitive empathy. Significant interactions were probed by examining predicted values at low (−1 SD), average (mean), and high (+1 SD) levels.

Parallel regression analyses examined children’s emotional responses to war, using the PEDS anxious/withdrawn and acting-out subscales as outcomes, corresponding to internalizing and externalizing problems.

Because residuals for several variables deviated from normality, a non-parametric bootstrap analysis was conducted (see Tables S1 and S2, for CBCL and PEDS analysis, respectively). As bootstrap results were consistent with parametric findings, parametric results are reported.

Influence diagnostics using Cook’s distance (Cook, 1977) identified nine observations exceeded the 4/n threshold. However, all values were well below the classical cutoff of 1 (maximum = 0.61). Analyses excluding the most extreme observation yielded identical results; therefore, all cases were retained.

Covariates

All models controlled for child’s age, gender, maternal depressive symptoms, and previous levels of child's behavioral problems. Controlling for Time 1 behavioral problems allowed examination of changes in children’s functioning across the war period. Maternal depressive symptoms were included to examine the unique contribution of parental burnout, which is conceptually distinct from depression. This was

particularly important given that the fifth wave of data collection occurred shortly after the October 7th attacks and the onset of the war in Israel, a period marked by elevated population-level emotional distress (Levi-Belz et al., 2024).

To address the high correlation between internalizing and externalizing symptoms, we conducted supplementary robustness analyses in which the model predicting internalizing symptoms additionally controlled for Time 1 externalizing symptoms, and the model predicting externalizing symptoms additionally controlled for Time 1 internalizing symptoms. The pattern of findings remained unchanged; results are reported in the Supplementary Materials.

Transparency and Openness

We report how we determined our sample size, all data exclusions and all measures in the study. Data and analysis code are available at OSF: [masked for blind review**]**

Results

Descriptive statistics and correlation analysis

The sample's demographic and October 7 attack-related variables are presented in Table 1.

Descriptive statistics are presented in Table 2 and zero-order correlations among study variables are presented in Table 3.

Change in behavioral problems as measured by the CBCL

We examined whether children's behavioral problems changed between Time 1 and Time 2. For internalizing problems, CBCL scores were significantly higher at Time 2 compared to Time 1, ($t(73) = -2.00$, $p = .049$). No significant difference was found for externalizing problems, $t(73) = -1.46$, $p = .147$.

Moderation analyses - Behavioral problems

To examine our hypotheses that children's empathy would moderate the association between parental burnout and behavioral problems, we conducted two sets of multiple regression analyses. Results are presented in Table 4 and described below.

Internalizing problems

Internalizing problems were predicted by parental burnout ($\beta = 0.29$, $SE = 0.10$, $p = .006$), and this effect was moderated by children's affective empathy ($\beta = 0.22$, $SE = 0.09$, $p = .012$). These effects remained significant even after controlling for children's internalizing problems at Time 1. No other predictors were significant.

To probe the significant interaction of affective empathy with parental burnout we ran a simple slopes analysis which showed that the association between parental burnout and internalizing problems' change becomes stronger as child's affective empathy increases from low (β = 0.47, SE = 0.82, p = .57), to medium (β = 1.84, SE = 0.62, p = .00), to high (β = 3.22, SE = 0.82, p = .00) (see Figure 1).

Externalizing problems

A similar regression model was examined with externalizing problems as the dependent variable (see Table 4).

Externalizing problems were predicted by parental burnout (β = 0.27, SE = 0.09, p = .005). This effect remained significant even after controlling for children's externalizing problems at Time 1.

The interaction between parental burnout and child's affective empathy approached significance (β = 0.14, SE = 0.08, p = .071), showing a trend in the same direction as in the internalizing model. Given that prior literature more consistently links parental distress and internalizing problems, analyses involving externalizing problems were considered exploratory. However, given the correlation between internalizing and externalizing symptoms, we examined whether a similar interaction pattern would emerge. We therefore probed the interaction by looking at the simple slopes, finding that, similar to internalizing problems, the association between parental burnout and externalizing problems becomes stronger as child's affective empathy increases from low (β = 0.98, SE = 0.91, p = .28), to medium (β = 2.08, SE = 0.69, p = .00), to high (β = 3.18, SE = 0.93, p = .00) (see Figure 2).

War-related emotional distress

Based on the clinical cut-offs of the PEDS (Saylor et al., 1999), a substantial proportion of children scored in the clinical range. For anxious/withdrawn problems, 52.10% of children (N=62) met the clinical cutoff. For acting out problems, 52.94% of children (N=63) were in the clinical range (see Table 2).

Moderation analyses

To examine our hypotheses that children's empathy would moderate the association between parental burnout and emotional distress following a traumatic event, we conducted two multiple regression analyses. Results are presented in Table 5 and described below.

Anxious/withdrawn problems

Anxious/withdrawn problems were predicted by parental burnout (β = 0.32, SE = 0.11, p = .003), and this effect was moderated by children's affective empathy (β = 0.20, SE = 0.09, p = .025). No other predictors were significant.

To probe the significant interaction of affective empathy with parental burnout we ran a simple slopes analysis which showed that the association between parental burnout and anxious/withdrawn problems becomes stronger as child's affective empathy increases from low (β = 0.33, SE = 0.44, p = .46), to

medium (β = 0.99, SE = 0.33, p = .00), to high (β = 1.66, SE = 0.43, p = .00) (see Figure 3). Similar to the findings with internalizing problems as the outcome.

Acting out problems

Acting out problems were predicted by parental burnout (β = 0.33, SE = 0.10, p = .002), and by cognitive empathy (β = 0.19, SE = 0.09, p = .028). No other main effects or interaction effects were observed.

Discussion

The present study examined the role of children's empathy as a risky strength, i.e., as a moderator of the association between parental burnout and child behavioral problems in the unique context of wartime stress. We found that the relationship between parental burnout and behavioral problems is moderated by children's affective, but not cognitive, empathy. Specifically, parental burnout was associated with higher internalizing problems as measured by the CBCL (Achenbach & Rescorla, 2000), for children with medium or high levels of affective empathy. A similar pattern was found for internalizing problems related to the war, as measured by the PEDS (Saylor et al., 1999).

Our first hypothesis, that behavioral problems would increase following the October 7th attack and the ensuing war, was partially supported, showing an increase in internalizing but not externalizing problems. These findings align with previous research showing that exposure to war-related stressors undermines children's emotional and behavioral adjustment (Katsoty et al., 2025; Slone & Shoshani, 2022).

Importantly, while prior behavior problems were a strong predictor of later difficulties, parental burnout emerged as an additional significant predictor. This underscores the role of parental functioning in shaping children's adjustment during adversities and aligns with evidence linking parental stress and burnout to higher levels of child externalizing and internalizing problems (Chen et al., 2022; Jackson & Choi, 2018; Mak et al., 2020; Yuan et al., 2022). Higher parental stress may have undermined sensitive and consistent caregiving, thereby increasing children's emotional and behavioral vulnerability (Abidin, 1990; Cooke et al., 2022; Deater-Deckard, 2008; Manning et al., 2014). In the context of ongoing war, parental burnout may reflect a prolonged emotional exhaustion resulting from caregiving demands under uncertainty and fear, further intensifying risk for maladaptive child outcomes.

Our second hypothesis, regarding the moderating role of empathy, was partially supported. Higher levels of children's affective empathy exacerbated the association between parental burnout and children's internalizing problems, consistent with the risky strength theory (Tone & Tully, 2014). When children experience others' distress intensely, their focus of concern may shift from the other to the self (Davidov et al., 2013; Eisenberg et al., 1994). In the context of parental burnout, children with heightened affective empathy may be particularly sensitive to parental emotional exhaustion, increasing their own emotional burden, leading to greater internalizing problems (Planalp et al., 2025; Tully & Donohue, 2017). Thus,

affective empathy, while adaptive in supportive environments, may heighten emotional vulnerability in contexts characterized by parental stress, burnout, and unpredictability.

Interestingly, we found that cognitive empathy was directly and positively associated with higher war-related externalizing symptoms, as measured by the PEDS but not the CBCL. This association does not align with the classic risky strength theory, but rather suggests a more straightforward risk process. Children with higher cognitive empathy may be more aware of their parents' distress and the broader stressful environment, potentially increasing uncertainty and fear and contributing to externally directed behaviors.

Our findings align with other recent findings suggesting that cognitive empathy may increase vulnerability in adverse contexts. Higher cognitive empathy has been linked to greater PTSD symptoms among children exposed to armed conflict, regardless of trauma exposure levels (Kab et al., 2025), and to increased internalizing and externalizing symptoms among children of parents with mental illness (Luczejko et al., 2024). Indeed, in our study, both cognitive empathy and parental burnout predicted higher war-related externalizing symptoms. Together, these results suggest that heightened cognitive processing of others' distress may increase vulnerability under prolonged stress, indicating that the effects of cognitive empathy are context-dependent and may become less adaptive in high-stress environments.

Strengths and Limitations

Our study has several strengths. To the best of our knowledge, this is the first study that examined the joint effect of parental burnout and children's empathy on children's behavioral problems, extending research that has primarily focused on parental stress or psychopathology. Another important strength is the unique wartime context in which data collection occurred. This context provides valuable insight into family dynamics under extreme and prolonged stress, offering an opportunity to understand how parental burnout and children's empathy jointly influence children's emotional and behavioral adjustment in real-life adversity. Furthermore, the longitudinal design of our study strengthens the validity of the findings, enabling examination of changes over time and providing stronger evidence for the directionality of the observed associations.

Nevertheless, several limitations should be noted. First, all measures were based on parental reports, reflecting participants' perception of their child's and their own functioning. Future studies should measure child's empathy and child's emotional and behavioral problems using multiple informants and observational tools. Second, the empathy measure did not differentiate between the two subcomponents of affective empathy; empathic concern and personal distress, limiting insight into specific mechanisms through which affective empathy influences children's adjustment. Third, the sample included only medium to high SES Jewish Israeli families, limiting generalizability to other cultural, ethnic, or socioeconomic backgrounds. Finally, as the study was conducted in the context of war, caution is warranted in generalizing these findings to other types of chronic stressors.

Conclusion

The current study highlights the complex role of children's empathy in shaping their emotional and behavioral adjustment under parental and contextual stress, showing that under conditions of parental burnout and wartime adversity, heightened affective and cognitive empathy may increase children's vulnerability. The implications are the importance of considering both parental functioning and child characteristics when assessing risk and resilience in families facing chronic stress, and that future research should further explore the mechanisms linking empathy, parental stress, and child adjustment.

Declarations

Funding

The study was funded by the Israel Science Foundation (grant number 561/18) and by the Faculty of Humanities and Social Sciences, [blind for review].

Conflict of Interest

The authors have no conflict of interest.

Ethical Approval

The study was approved by the Institutional Review Board of [masked for blind review] (approval no. 620). All procedures involving human participants were performed in accordance with the ethical standards of the institutional review board.

Informed Consent

Informed consent was obtained from all individual participants included in the study.

Consent for Publication

Not applicable.

Clinical Trial Number

Not applicable.

Author Contributions

Author 1: Conceptualization, Investigation, Data curation, Project administration Methodology, Formal analysis, Writing- original draft, Writing- review & editing.
Author 2: Project administration, Investigation, Data curation, Writing – review & editing.
Author 3: Investigation, Writing- review & editing.
Author 4: Conceptualization, Funding acquisition, Resources, Supervision, Writing-review & editing.

References

1. Abidin, R. R. (1990). Introduction to the Special issue: The Stresses of Parenting. *Journal of Clinical Child Psychology*, *19*(4), 298–301. https://doi.org/10.1207/s15374424jccp1904_1
2. Achenbach, T. M., & Rescorla, L. A. (2000). *Manual for the ASEBA preschool forms and profiles* (Vol. 30). Burlington, VT: University of Vermont, Research center for children, youth …. https://www.researchgate.net/profile/Michelle-Levy/publication/262911137_A_Model_for_Creating_a_Supportive_Trauma-Informed_Culture_for_Children_in_Preschool_Settings/links/56321aeb08ae13bc6c373859/A-Model-for-Creating-a-Supportive-Trauma-Informed-Culture-for-Children-in-Preschool-Settings.pdf
3. Bagner, D. M., Pettit, J. W., Lewinsohn, P. M., & Seeley, J. R. (2010). Effect of Maternal Depression on Child Behavior: A Sensitive Period? *Journal of the American Academy of Child & Adolescent Psychiatry*, *49*(7), 699–707. https://doi.org/10.1016/j.jaac.2010.03.012
4. Belsky, J., & Pluess, M. (2009). Beyond diathesis stress: Differential susceptibility to environmental influences. *Psychological Bulletin*, *135*(6), 885.
5. Berzenski, S. R., & Yates, T. M. (2022). The development of empathy in child maltreatment contexts. *Child Abuse & Neglect*, *133*, 105827. https://doi.org/10.1016/j.chiabu.2022.105827
6. Bray, K. O., Anderson, V., Pantelis, C., Pozzi, E., Schwartz, O. S., Vijayakumar, N., Richmond, S., Deane, C., Allen, N. B., & Whittle, S. (2021). Associations between cognitive and affective empathy and internalizing symptoms in late childhood. *Journal of Affective Disorders*, *290*, 245–253. https://doi.org/10.1016/j.jad.2021.04.034
7. Campbell, S. B. (1995). Behavior Problems in Preschool Children: A Review of Recent Research. *Journal of Child Psychology and Psychiatry*, *36*(1), 113–149. https://doi.org/10.1111/j.1469-7610.1995.tb01657.x
8. Campbell, S. B. (1997). Behavior Problems in Preschool Children. In T. H. Ollendick & R. J. Prinz (Eds.), *Advances in Clinical Child Psychology* (pp. 1–26). Springer US. https://doi.org/10.1007/978-1-4757-9035-1_1
9. Chen, B.-B., Qu, Y., Yang, B., & Chen, X. (2022). Chinese mothers' parental burnout and adolescents' internalizing and externalizing problems: The mediating role of maternal hostility. *Developmental Psychology*, *58*(4), 768.
10. Cooke, J. E., Deneault, A., Devereux, C., Eirich, R., Fearon, R. M. P., & Madigan, S. (2022). Parental sensitivity and child behavioral problems: A meta-analytic review. *Child Development*, *93*(5), 1231–1248. https://doi.org/10.1111/cdev.13764
11. Dadds, M. R., Hunter, K., Hawes, D. J., Frost, A. D. J., Vassallo, S., Bunn, P., Merz, S., & Masry, Y. E. (2008). A Measure of Cognitive and Affective Empathy in Children Using Parent Ratings. *Child Psychiatry and Human Development*, *39*(2), 111–122. https://doi.org/10.1007/s10578-007-0075-4
12. Dann, Y., Egotubov, A., Gordon Hecker, A., Sheiner, E., Uzefovsky, F., & Gueron Sela, N. (2025). Paternal depressive symptoms and infant respiratory sinus arrhythmia predict empathy-related

behaviors. *Psychophysiology*, *62*(2), e14737. https://doi.org/10.1111/psyp.14737

13. Davidov, M., Paz, Y., Roth-Hanania, R., Uzefovsky, F., Orlitsky, T., Mankuta, D., & Zahn-Waxler, C. (2021). Caring babies: Concern for others in distress during infancy. *Developmental Science*, *24*(2), e13016. https://doi.org/10.1111/desc.13016
14. Davidov, M., Zahn-Waxler, C., Roth-Hanania, R., & Knafo, A. (2013). Concern for others in the first year of life: Theory, evidence, and avenues for research. *Child Development Perspectives*, *7*(2), 126–131.
15. Davies, P. T., & Cummings, E. M. (1994). Marital conflict and child adjustment: An emotional security hypothesis. *Psychological Bulletin*, *116*(3), 387–411. https://doi.org/10.1037/0033-2909.116.3.387
16. Davis, M. H. (1983). Measuring individual differences in empathy: Evidence for a multidimensional approach. *Journal of Personality and Social Psychology*, *44*(1), 113.
17. Deater-Deckard, K. (2008). *Parenting Stress*. Yale University Press.
18. Decety, J., Bartal, I. B.-A., Uzefovsky, F., & Knafo-Noam, A. (2016). Empathy as a driver of prosocial behaviour: Highly conserved neurobehavioural mechanisms across species. *Philosophical Transactions of the Royal Society B: Biological Sciences*, *371*(1686), 20150077.
19. Denham, S. A., Workman, E., Cole, P. M., Weissbrod, C., Kendziora, K. T., & Zahn–Waxler, C. (2000). Prediction of externalizing behavior problems from early to middle childhood: The role of parental socialization and emotion expression. *Development and Psychopathology*, *12*(1), 23–45.
20. Dubow, E. F., Huesmann, L. R., Boxer, P., Landau, S., Dvir, S., Shikaki, K., & Ginges, J. (2012). Exposure to Political Conflict and Violence and Posttraumatic Stress in Middle East Youth: Protective Factors. *Journal of Clinical Child & Adolescent Psychology*, *41*(4), 402–416. https://doi.org/10.1080/15374416.2012.684274
21. Eisenberg, N. (2006). Empathy-Related Responding and Prosocial Behaviour. In G. Bock & J. Goode (Eds.), *Novartis Foundation Symposia* (1st ed., Vol. 278, pp. 71–88). Wiley. https://doi.org/10.1002/9780470030585.ch6
22. Eisenberg, N., Fabes, R. A., Murphy, B., Karbon, M., Maszk, P., Smith, M., O'Boyle, C., & Suh, K. (1994). The relations of emotionality and regulation to dispositional and situational empathy-related responding. *Journal of Personality and Social Psychology*, *66*(4), 776.
23. Eisenberg, N., Lennon, R., & Roth, K. (1983). Prosocial development: A longitudinal study. *Developmental Psychology*, *19*, 846–855. https://doi.org/10.1037/0012-1649.19.6.846
24. Gambin, M., & Sharp, C. (2016). The Differential Relations Between Empathy and Internalizing and Externalizing Symptoms in Inpatient Adolescents. *Child Psychiatry & Human Development*, *47*(6), 966–974. https://doi.org/10.1007/s10578-016-0625-8
25. Garbarino, J., & Kostelny, K. (1996). What do we need to know to understand children in war and community violence. *Minefields in Their Hearts: The Mental Health of Children in War and Communal Violence*, 33–51.
26. Georgiou, G., Kimonis, E. R., & Fanti, K. A. (2019). What do others feel? Cognitive empathy deficits explain the association between callous-unemotional traits and conduct problems among preschool

children. *European Journal of Developmental Psychology*. (world). https://www.tandfonline.com/doi/full/10.1080/17405629.2018.1478810

27. Goodman, S. H., & Gotlib, I. H. (1999). Risk for psychopathology in the children of depressed mothers: A developmental model for understanding mechanisms of transmission. *Psychological Review*, *106*(3), 458–490. https://doi.org/10.1037/0033-295X.106.3.458
28. Harrist, A. W., & Ainslie, R. C. (1998). Marital Discord and Child Behavior Problems: Parent-Child Relationship Quality and Child Interpersonal Awareness as Mediators. *Journal of Family Issues*, *19*(2), 140–163. https://doi.org/10.1177/019251398019002002
29. Hastings, P. D., Zahn-Waxler, C., Robinson, J., Usher, B., & Bridges, D. (2000). The development of concern for others in children with behavior problems. *Developmental Psychology*, *36*(5), 531–546. https://doi.org/10.1037/0012-1649.36.5.531
30. Jackson, A. P., & Choi, J.-K. (2018). *Parenting Stress, Harsh Parenting, and Children's Behavior*.
31. Kab, E., Porat-Butman, S., Rachmani, M., & Levy-Gigi, E. (2025). The vulnerable role of empathy in children who live in conflict zones. *European Journal of Psychotraumatology*, *16*(1), 2527548. https://doi.org/10.1080/20008066.2025.2527548
32. Kadosh-Laor, T., Israeli-Ran, L., Shalev, I., & Uzefovsky, F. (2023). Empathy and parenthood: The moderating role of maternal trait empathy on parental burnout. *British Journal of Psychology*.
33. Katsoty, D., Abramson, L., & Knafo-Noam, A. (2025). Empathy as a risk factor for internalizing symptoms during war: A 10-year prospective study from toddlerhood to adolescence. *Development and Psychopathology*, 1–9. https://doi.org/10.1017/S0954579425100631
34. Keleynikov, M., Cohen, N., Gadassi-Polack, R., Lassri, D., & Benatov, J. (2025). Parental PTSD and Children's Well-Being During Wartime: The Role of Interpersonal Emotion Regulation. *International Journal on Child Maltreatment: Research, Policy and Practice*. https://doi.org/10.1007/s42448-025-00238-y
35. Keleynikov, M., Lassri, D., Benatov, J., Cohen, N., & Gadassi-Polack, R. (2026). Associations over time between wartime deployment, parental burnout and child adjustment. *Psychiatry Research*, 116943.
36. Kroenke, K., Strine, T. W., Spitzer, R. L., Williams, J. B., Berry, J. T., & Mokdad, A. H. (2009). The PHQ-8 as a measure of current depression in the general population. *Journal of Affective Disorders*, *114*(1–3), 163–173.
37. Levi-Belz, Y., Groweiss, Y., Blank, C., & Neria, Y. (2024). PTSD, depression, and anxiety after the October 7, 2023 attack in Israel: A nationwide prospective study. *EClinicalMedicine*, *68*. https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(23)00595-3/fulltext
38. Levy, M., Yatziv, T., Levavi, K., Yakov, P., Pike, A., Deater-Deckard, K., Hadar, A., Bar, G., Froimovici, M., & Atzaba-Poria, N. (2024). The association between maternal and child posttraumatic stress symptoms among families living in southern Israel: The buffering role of maternal executive functions. *Stress and Health*, *40*(5), e3456. https://doi.org/10.1002/smi.3456
39. Luczejko, A. A., Hagelweide, K., Stark, R., Weigelt, S., Christiansen, H., Kieser, M., Otto, K., Reck, C., Steinmayr, R., Wirthwein, L., Zietlow, A.-L., & Schwenck, C. (2024). Empathy and psychopathology in

children and adolescents: The role of parental mental illness and emotion regulation. *Frontiers in Psychiatry*, *15*, 1366366. https://doi.org/10.3389/fpsyt.2024.1366366

40. Mak, M. C. K., Yin, L., Li, M., Cheung, R. Y., & Oon, P.-T. (2020). The Relation between Parenting Stress and Child Behavior Problems: Negative Parenting Styles as Mediator. *Journal of Child and Family Studies*, *29*(11), 2993–3003. https://doi.org/10.1007/s10826-020-01785-3
41. Manning, L. G., Davies, P. T., & Cicchetti, D. (2014). Interparental Violence and Childhood Adjustment: How and Why Maternal Sensitivity Is a Protective Factor. *Child Development*, *85*(6), 2263–2278. https://doi.org/10.1111/cdev.12279
42. Mikolajczak, M., Aunola, K., Sorkkila, M., & Roskam, I. (2023). 15 Years of Parental Burnout Research: Systematic Review and Agenda. *Current Directions in Psychological Science*, *32*(4), 276–283. https://doi.org/10.1177/09637214221142777
43. Mikolajczak, M., Brianda, M. E., Avalosse, H., & Roskam, I. (2018). Consequences of parental burnout: Its specific effect on child neglect and violence. *Child Abuse & Neglect*, *80*, 134–145. https://doi.org/10.1016/j.chiabu.2018.03.025
44. Mikolajczak, M., Gross, J. J., & Roskam, I. (2019). Parental burnout: What is it, and why does it matter? *Clinical Psychological Science*, *7*(6), 1319–1329.
45. Mikolajczak, M., Gross, J. J., Stinglhamber, F., Lindahl Norberg, A., & Roskam, I. (2020). Is Parental Burnout Distinct From Job Burnout and Depressive Symptoms? *Clinical Psychological Science*, *8*(4), 673–689. https://doi.org/10.1177/2167702620917447
46. Miller, N. V., Johnston, C. J., & Pasalich, D. S. (2014). Parenting and Conduct Problems: Moderation by Child Empathy. *Journal of Psychopathology and Behavioral Assessment*, *36*(1), 74–83. https://doi.org/10.1007/s10862-013-9366-1
47. Miller, P. A., & Eisenberg, N. (1988). The relation of empathy to aggressive and externalizing/antisocial behavior. *Psychological Bulletin*, *103*(3), 324–344. https://doi.org/10.1037/0033-2909.103.3.324
48. Monroe, S. M., & Simons, A. D. (1991). Diathesis-stress theories in the context of life stress research: Implications for the depressive disorders. *Psychological Bulletin*, *110*(3), 406.
49. Paz, Y., Orlitsky, T., Roth-Hanania, R., Zahn-Waxler, C., & Davidov, M. (2021). Predicting externalizing behavior in toddlerhood from early individual differences in empathy. *Journal of Child Psychology and Psychiatry*, *62*(1), 66–74. https://doi.org/10.1111/jcpp.13247
50. Planalp, E. M., Hilton, E. C., Van Hulle, C., Goldsmith, H. H., & Zahn-Waxler, C. (2025). Empathy as a Risky Strength: Associations With Parent and Child Depressive Symptoms in Middle Childhood. *Social Development*, *34*(2), e12800. https://doi.org/10.1111/sode.12800
51. Ramos, M. C., Guerin, D. W., Gottfried, A. W., Bathurst, K., & Oliver, P. H. (2005). Family Conflict and Children's Behavior Problems: The Moderating Role of Child Temperament. *Structural Equation Modeling: A Multidisciplinary Journal*, *12*(2), 278–298. https://doi.org/10.1207/s15328007sem1202_6

52. Repetti, R. L., Taylor, S. E., & Seeman, T. E. (2002). Risky families: Family social environments and the mental and physical health of offspring. *Psychological Bulletin*, *128*(2), 330.
53. Roskam, I., Brianda, M.-E., & Mikolajczak, M. (2018). A Step Forward in the Conceptualization and Measurement of Parental Burnout: The Parental Burnout Assessment (PBA). *Frontiers in Psychology*, *9*. https://www.frontiersin.org/articles/10.3389/fpsyg.2018.00758
54. Saylor, C. F., Swenson, C. C., Stokes Reynolds, S., & Taylor, M. (1999). The Pediatric Emotional Distress Scale: A Brief Screening Measure for Young Children Exposed to Traumatic Events. *Journal of Clinical Child Psychology*, *28*(1), 70–81. https://doi.org/10.1207/s15374424jccp2801_6
55. Schonfeld, I. S., & Bianchi, R. (2016). Burnout and Depression: Two Entities or One? *Journal of Clinical Psychology*, *72*(1), 22–37. https://doi.org/10.1002/jclp.22229
56. Slone, M., & Mann, S. (2016). Effects of War, Terrorism and Armed Conflict on Young Children: A Systematic Review. *Child Psychiatry & Human Development*, *47*(6), 950–965. https://doi.org/10.1007/s10578-016-0626-7
57. Slone, M., & Shoshani, A. (2017). Children Affected by War and Armed Conflict: Parental Protective Factors and Resistance to Mental Health Symptoms. *Frontiers in Psychology*, *8*. https://doi.org/10.3389/fpsyg.2017.01397
58. Slone, M., & Shoshani, A. (2022). Effects of War and Armed Conflict on Adolescents' Psychopathology and Well-Being: Measuring Political Life Events among Youth. *Terrorism and Political Violence*, *34*(8), 1797–1809. https://doi.org/10.1080/09546553.2020.1839427
59. Tone, E. B., & Tully, E. C. (2014). Empathy as a "risky strength": A multilevel examination of empathy and risk for internalizing disorders. *Development and Psychopathology*, *26*(4pt2), 1547–1565. https://doi.org/10.1017/S0954579414001199
60. Tully, E. C., & Donohue, M. R. (2017). Empathic Responses to Mother's Emotions Predict Internalizing Problems in Children of Depressed Mothers. *Child Psychiatry & Human Development*, *48*(1), 94–106. https://doi.org/10.1007/s10578-016-0656-1
61. Williams, A., O'Driscoll, K., & Moore, C. (2014). The influence of empathic concern on prosocial behavior in children. *Frontiers in Psychology*, *5*. https://www.frontiersin.org/articles/10.3389/fpsyg.2014.00425
62. Williford, A. P., Calkins, S. D., & Keane, S. P. (2007). Predicting Change in Parenting Stress Across Early Childhood: Child and Maternal Factors. *Journal of Abnormal Child Psychology*, *35*(2), 251–263. https://doi.org/10.1007/s10802-006-9082-3
63. Woine, A., Escobar, M. J., Panesso, C., Szczygieł, D., Mikolajczak, M., & Roskam, I. (2024). Parental Burnout and Child Behavior: A Preliminary Analysis of Mediating and Moderating Effects of Positive Parenting. *Children*, *11*(3), 353. https://doi.org/10.3390/children11030353
64. Xuan, X., Chen, F., Yuan, C., Zhang, X., Luo, Y., Xue, Y., & Wang, Y. (2018). The relationship between parental conflict and preschool children's behavior problems: A moderated mediation model of parenting stress and child emotionality. *Children and Youth Services Review*, *95*, 209–216. https://doi.org/10.1016/j.childyouth.2018.10.021

65. Yuan, Y., Wang, W., Song, T., & Li, Y. (2022). The Mechanisms of Parental Burnout Affecting Adolescents' Problem Behavior. *International Journal of Environmental Research and Public Health*, *19*(22), 15139. https://doi.org/10.3390/ijerph192215139
66. Yurduşen, S., Erol, N., & Gençöz, T. (2013). The Effects of Parental Attitudes and Mothers' Psychological Well-Being on the Emotional and Behavioral Problems of Their Preschool Children. *Maternal and Child Health Journal*, *17*(1), 68–75. https://doi.org/10.1007/s10995-012-0946-6
67. Zahn–Waxler, C., Klimes–Dougan, B., & Slattery, M. J. (2000). Internalizing problems of childhood and adolescence: Prospects, pitfalls, and progress in understanding the development of anxiety and depression. *Development and Psychopathology*, *12*(3), 443–466. https://doi.org/10.1017/S0954579400003102

Tables

Tables 1 to 4 are available in the supplementary files section

Figures

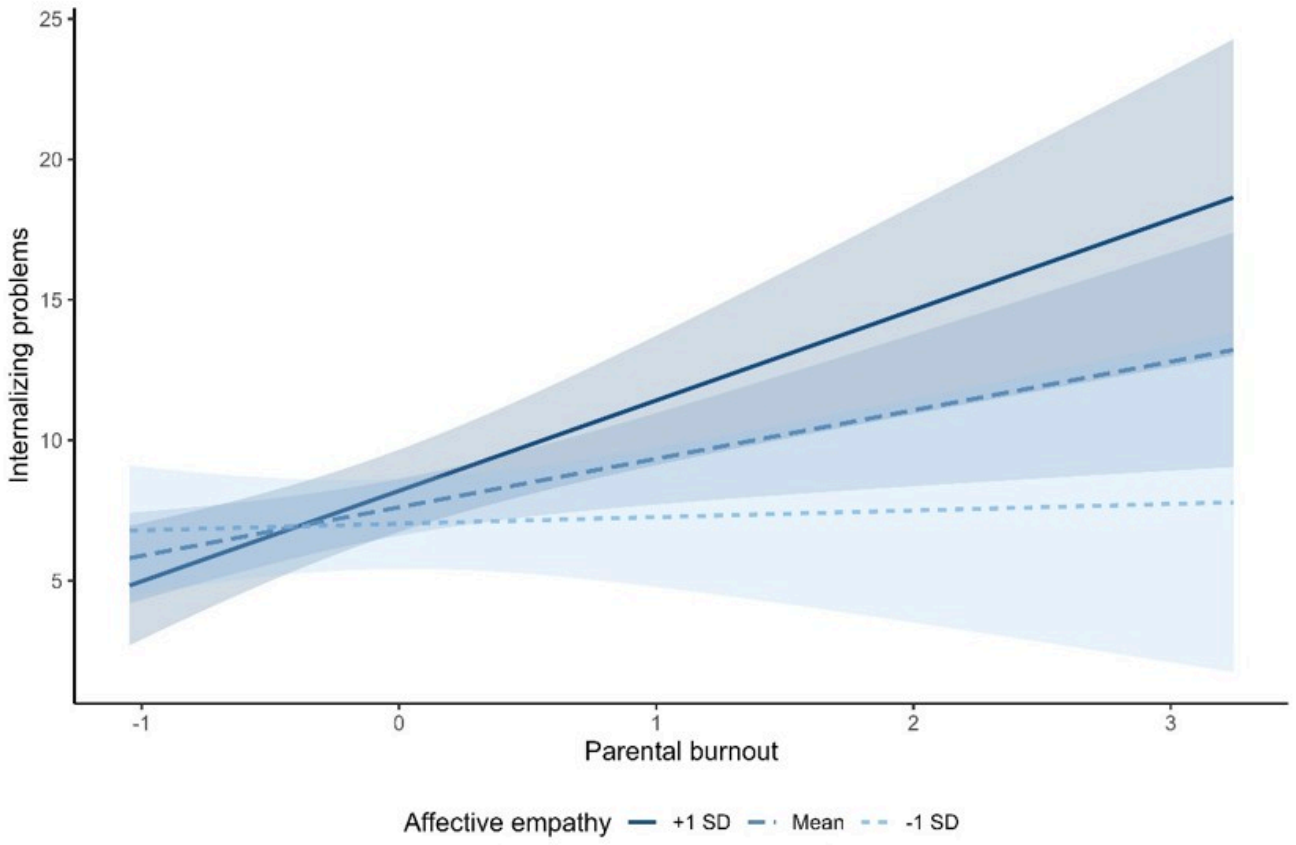


Figure 1

The significant interaction between parental burnout and children's affective empathy predicting internalizing problems.

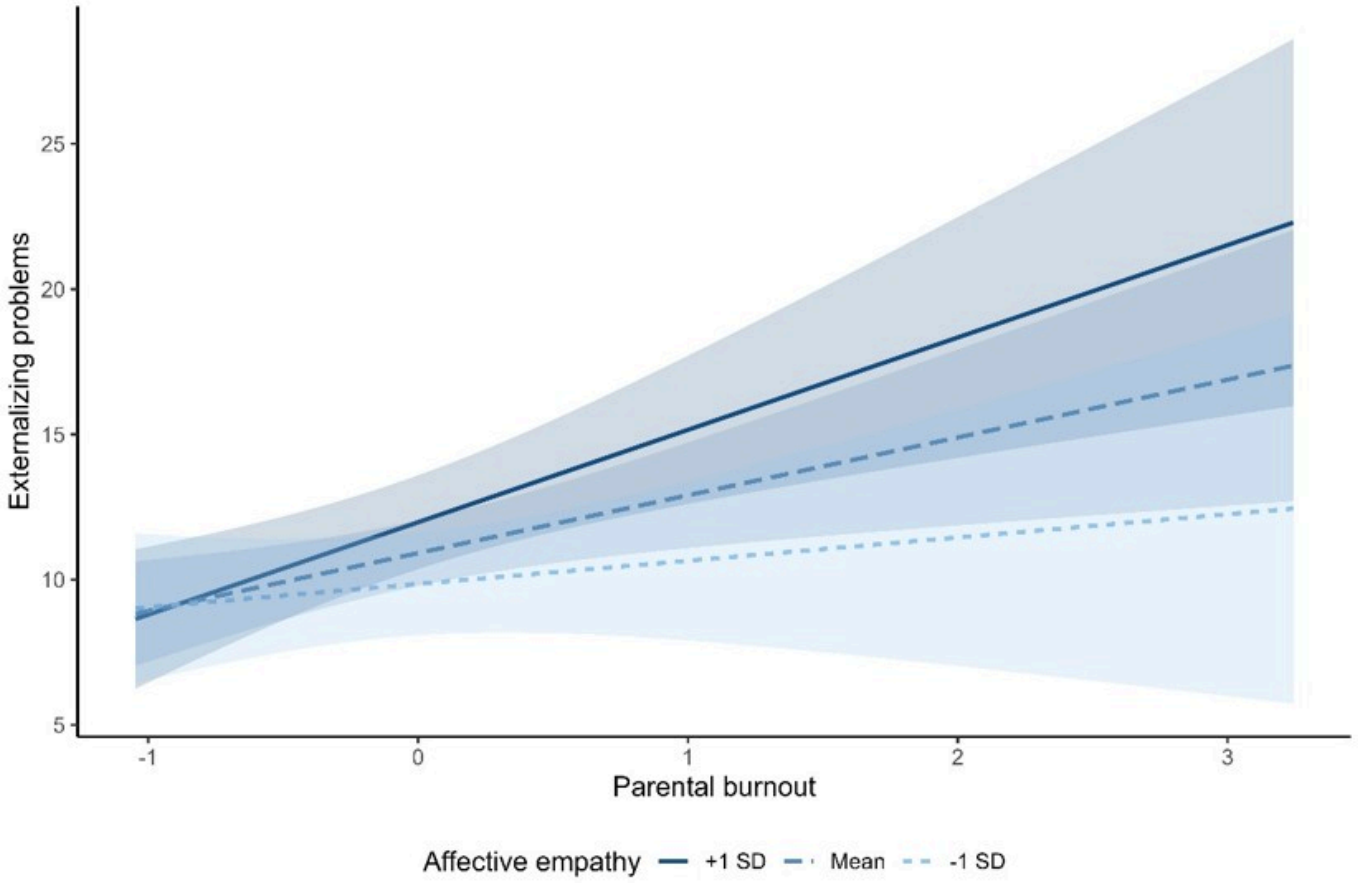


Figure 2

The interaction between parental burnout and children's affective empathy predicting externalizing problems.

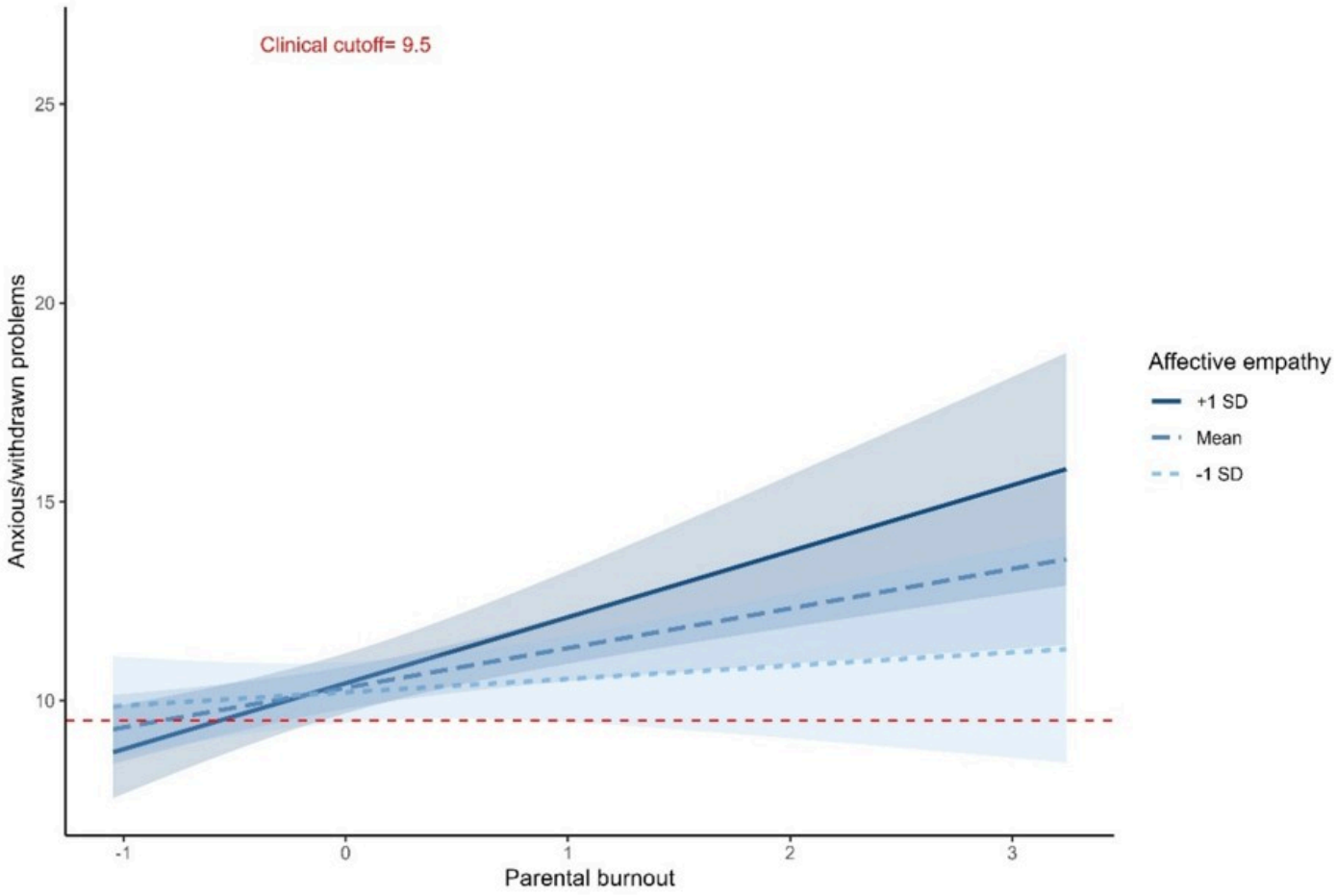


Figure 3

The significant interaction between parental burnout and children's affective empathy predicting Anxious/withdrawn problems.

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