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How Many Parents Genuinely Regret Having Children?

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Abstract

The present study experimentally investigates the number of parents who truly regret having their children. By using an unmatched count technique developed by Gervais and Njale (2020), participants (N = 751) were randomly assigned to one of three conditions: an experimental “yes/no” agreement condition, the “target statement present” counting condition, and the “target statement not present” counting condition. Participants were also asked different questions regarding marital status, whether they had a disorder diagnosis, had a history of their parents being divorced, and other suspected moderator variables. Regret of having children was reported significantly less compared to previous studies (Piotrowski et al., 2021). However, the moderator variables, some of which are listed above, were found to be statistically significant when participants did explicitly indicate regret about having their child(ren). Further studies will need to be done with possible changes to the phrasing of the regret statement, exploring the moderator variables more in-depth, or utilizing a sliding scale for an indication of regret instead of a binary yes or no.

Keywords: Parenting, children, regret, emotion, regret of having children

Regret is an emotion experienced in situations of intrapersonal, harm done to oneself, and interpersonal harm, harm done to others (Zeelenberg & Breugelmans, 2008). Regret is not only an effect of an undesirable outcome but can shape how decisions are made in the future (Zeelenberg & Pieters, 2007). As a result, regret can change how we act in the future as a result of past decisions or even as a result of anticipated regret. The results of experiencing regret may be influential in decision-making and the processing of emotions.

Another influence on how regret is experienced is autobiographical memory. Like regret, autobiographical memories can affect behavior. Low psychological closure--feeling as if a memory is part of the present rather than the past--influences how decisions are made and how the past is processed (Beike et al., 2010). Regret intensity increases with increased feelings of low psychological closure in lost opportunities (Beike et al., 2008). The future opportunity principle derived by Roesse and Summerville (2005) proposes that closure reduces regret and opportunities for closure intensify it. However, King and Hicks (2007) proposed the lost opportunity principle which states that the lack of opportunities to receive closure increases regret while total closure increases regret.

Regret tends to arise when the outcome of a situation is seen as worse compared to an alternative outcome if only one had chosen differently. The general population seems to regret actions or inactions that cannot be changed (Beike et al., 2008). Regrettable inaction was found to be more prevalent than regrettable actions (Feeney et al., 2005). The regret of inaction has been linked to "wistful" emotions or less intense emotions (Kedia & Hilton, 2011). Guilt, shame, and embarrassment were found to be experienced less with regrets of inaction (Kedia & Hilton, 2011). Regrets of inaction may be linked to high self-esteem and a need for self-enhancement (Kedia & Hilton, 2011). However, the regret of actions has been linked to emotions categorized as "hot" emotions (Kedia & Hilton, 2011). Certain "hot" emotions are self-conscious, such as guilt, shame, and embarrassment. Self-conscious

emotions are the result of reflecting on one's own character, actions, or beliefs (Kedia & Hilton, 2011). These self-conscious emotions increase the ability and desire to follow social rules and constructs (Haidt, 2003). Regret of action tends to be more powerful and painful as a result of these self-conscious emotions while regrets of inaction can be seen as sad and result in feelings of helplessness (Gilovich et al., 1998).

Regret is a powerful negative emotion that has significant distressing effects on emotional and physical well-being (Beike et al., 2008) and is defined as a feeling of sadness or remorse for a fault or outcome you caused (Vale et al., 1996). Regret is caused by different situations in different people and similarly, different people can process regret in different ways. It was found that people who were more self-compassionate recovered or experienced little regret compared to those who were less accepting of the outcomes (Zhang & Chen, 2015). However, research has shown a positive correlation between regret, depression, and anxiety across many different demographics (Roese et al., 2009). In addition to the positive association between regret and psychopathology, regret has also been found to have a positive correlation with suicidality (Bruine et al., 2016). Like other emotions, the experience of regret tends to vary depending on the situation and person, but there is a relative similarity between what most people regret.

Some of the most frequently mentioned domains of regret are romance, education, career, family, and parenting (Roese & Summerville, 2005); these common regrets are most notably associated with negative experiences that cannot be changed. Parenting, as seen in the list previously mentioned, is a common regret, with the most common parenting regrets being associated with correction, teaching, and relationships (Chapman & Schramm, 2018). While regrets within parenting have been studied moderately, there is minimal research regarding regret for having children. A possible reason for this lack of research could be the fact that parenting and parenthood within the U.S. are seen as a privilege and the most

important jobs one could ever have (Byrne, 2017). Although the subject of regretting being a parent is not commonly talked about, many foster discussions online; the Reddit forum “r/Regretful Parents” has 48,000 members and the Facebook group “I Regret Having Children” has 53,000 followers. These online groups are only a small portion of current online forums and groups dedicated to parents who regret having children.

One study conducted found that only about 13.6% of parents between the ages of 18 and 40 regretted having children and becoming a parent (Piotrowski et al., 2021). This study asked participants if they could go back in time, would they choose to have children; subsequently, the participants were given two choices: yes, they would choose to have children or no, they would not choose to have children. There were also statistically significant moderator variables found within this study. Firstly, the authors found that regret of having children was higher in single parents, with regret decreasing if the participant was in an informal relationship and if the participant was married (Piotrowski et al., 2021). There was also found to be more regret associated with increased reports of anxiety, depression, and vegetative symptoms (Piotrowski et al., 2021). Similarly, younger parents were more likely to report experiencing anxiety, depressive, and vegetative symptoms; that is, these psychopathological symptoms are likely to moderate the effect between parenting at a younger age and regretting children (Piotrowski et al., 2021).

Similar studies have found a correlation between parental satisfaction, marital status, and intention of pregnancy (Lachance-Grzela & Bouchard, 2009). Marital status and intention of pregnancy were found to have a statistically significant effect on the father’s feeling of parental overload (Lachance-Grzela & Bouchard, 2009). The increased feeling of parental overload of the father in turn influences the well-being of the mother and the father (Lachance-Grzela & Bouchard, 2009). Similarly, role overload mediated the feelings of

parental satisfaction in fathers who cohabitated with partners and who also had weaker pregnancy planning (Lachance-Grzela & Bouchard, 2009).

Similar to the stress felt by parents previously described, additional studies found that parents with a serious mental illness were more likely to experience difficulties with parenting (Harries et al., 2023). Serious mental illness (SMI), in this meta-analysis, is categorized as psychosis, bipolar disorder, and schizophrenia. This meta-analysis utilized twenty-nine studies with 562 parents who met the criteria for serious mental illness. The researchers found that many of the parents who met the criteria for an (SMI), reported difficulties in parenting (Harries et al., 2023). Many parents reported struggles with control, struggles with balancing their own needs with their child's, problems amplified by symptoms and medication, and they struggled with a feeling of a lack of connection with their child (Harries et al., 2023). The overall findings of this study were that SMIs exacerbated the relationship between the parent and child (Harries et al., 2023). This ultimately worsened the symptoms of the parent's SMI (Harries et al., 2023)

As seen in the previous studies, multiple factors can exacerbate parenting stress and feelings of overload. With all of these extenuating factors, the estimate of 13.6% found by Piotrowski et al. (2021) is likely an underestimate, as it is hard to get a true and honest self-report from participants because of the social undesirability associated with admitting to not wanting or having children. Thus, there is a method to work around the issue of participants not accurately self-reporting. In a study attempting to measure the number of atheists within the United States surreptitiously, the researchers created a self-report method to determine how many people were atheists (Gervais and Najle, 2018). Participants were randomly assigned to two versions of a counting task: one version where they were given mundane or generic statements (i.e. I eat three meals a day, I can swim) and another version where they were given the same generic statements, but the researchers added the

experimental/sensitive item (i.e., I eat three meals a day, I can swim, I do not believe in God; Gervais & Najle, 2018). In these surveys, the participants never acknowledge which specific statements they identify with, they only provide the number of statements they identify with. The difference between the two sums of each survey is, presumably, because of the addition of the item of interest regarding atheism. The method used by Gervais and Najle will be the basis of measurement for this current study.

This study aims to surreptitiously measure the number of parents who regret having children. A pilot study was conducted to determine which common regrets were to be used in the main study. The pilot study had 164 participants where they rearranged regret statements generated through lab discussion. The top seven regret statements were chosen from the pilot study to be included in the main study.

The regret associated with having children is not as studied as the other regrets associated with parenting. This study aims to identify if the estimate of parents who regret their children is higher than previously thought. The unmatched count condition with the target regret statement can take away the shame of feeling regret for one's child. I hypothesize that the experimental counting condition will yield a higher mean number of statements compared to the explicit yes/no condition. I also hypothesize that parents who regret having their children will be more likely to have parents who were divorced, more likely to themselves have a psychological disorder, more likely to be living with children under 18, and more likely to report that one or more of their children were unintended.

Method

Participants

The main study was conducted as an online survey. The preregistered sample size was 750 (250 participants per condition) Prolific workers living in the U.S., who were prescreened to be parents and 25 years or older. In total, 755 participants completed the

survey. However, four participants reported they had zero children; therefore, their results were removed from analyses and a total of 751 participants' results were used. Each Prolific worker was paid \$1 for completing the survey, with a median time of 3.5 minutes to complete it.

The average age was 46.7 years with an age range of 25 to 87. Among the full sample, 60.9% of participants were female, 38.6% were male, and 0.5% reported as other. The average number of children was 2.1 and the age range of the participants' children was between one and eight years. Regarding ethnicity, 78.4% were White or European American, 11.9% Black or African American, 7.5% Hispanic or Latino, 5.4% Asian or Asian American, 2.1% Native American, 1.1% Arab or Middle Eastern, and 1.7% other. In regards to marital status, 66.5% were married and together with their spouse, 10.7% were divorced, 8.2% were single, 6.3% were dating, 2.9% were widowed, 2.8% were engaged, and 2.5% were married but separated. For the highest level of education completed, 0.5% had less than a high school degree, 20.7% a high school degree, 20.4% post-high school without a bachelor's degree, 37.1% bachelor's degree, and 21.8% post-graduate degree. For political affiliation, 48.3% were Democrat, 28.9% Independent or other, and 22.8% Republican. The average household income before taxes was \$70,000 and the range was less than \$20,000 to greater than \$300,000 annually.

Materials

The main study was conducted as an online Qualtrics survey. The study required participants to complete a demographic questionnaire with questions regarding race, age, and gender. After the demographic questionnaire, there were questions regarding the participants' mental health history, relationship/partner struggles, and how old they were when they had their kids. There was also a list of common regrets, taken from the results of the pilot study.

Seven common regrets emerged in the pilot study as the most common and were included in this study. These seven regrets were “prioritizing other things over happiness”, “career choice”, “falling out of touch with my friends”, “marriage”, “cruel words I have said to others”, “dropping out of college”, and “prioritizing work over others”. In addition, some other common regrets were added such as “buying a house with high interest” and “failing to buy a warranty”. The participants were given these seven common regrets from the pilot study and asked, “How many of these are true of you?” In the explicit “yes/no” condition, the participants were given the seven common regrets determined from the pilot study as well as the experimental statement “I regret having my child(ren)”. Participants in this condition were asked to indicate exactly which regrets were true of them. In the control group, the regrets determined from the pilot study were the only seven regrets they must answer the question “How many of these are true of you?”. In the experimental group, however, participants were given the same seven regrets as the control group but with an added experimental regret/variable statement “I regret having my child(ren)”.

Procedure

The participants read the informed consent as well as that the purpose of the study was to identify common regrets within a population. Once the informed consent was signed, the participants were directed to the next screen. The participants were randomly assigned to one of three conditions: one explicit agreement condition and two counting conditions. The explicit “yes/no” condition was given nine common regrets with the added “I regret having my child(ren)” statement. Participants in this condition were required to click which of the statements they believed to be true of themselves. The control counting condition had only the seven common regrets determined from the pilot study. The experimental counting condition was given the seven common regrets as well as an experimental manipulation statement that said, “I regret having my child(ren)”. In both conditions, participants were

asked to report how many of the statements apply to them, but not which of the statements those are. The participants in both conditions answered questions regarding marital status, age they had children, how many children they have, family history of divorce, any notable mental health issues, and if they have relationship/partner struggles. After the participants completed the count task and answered the other questions, they read the debriefing page. Participants were provided with the actual reason for the study, received an explanation of the researchers' hypotheses, thanked for their involvement, and paid for their time.

Results

The base rates of regrets were calculated by the percentage of participants who said "yes" to regretting each of the 10 behaviors in the explicit condition: 73% cruel words I have said to others, 67% falling out of touch with friends, 63% prioritizing things over happiness, 36% prioritizing work over relationships, 36% my career choice, 18% dropping out of college, 14% getting married, 8% failing to buy a warranty for a major appliance, 7% buying a house with high-interest rates, and 4% having my child(ren). The regrets that were intended to be common were endorsed at a high rate, and those intended to be rare were endorsed at a low rate. Regretting children was the least commonly endorsed of all 10 regrets.

The first hypothesis of this study is that the experimental counting condition will yield a higher mean number of statements compared to the explicit yes/no condition. To test this hypothesis, the number of total regrets from the list for the condition with nine regrets (without the experimental statement "having my child(ren)") was subtracted from the total number of regrets for the condition with 10 regrets (i.e., 10-regret condition minus 9-regret condition). This proportion is then converted to the percentage of participants who regret having their children. This percentage is then compared to the percentage of participants who answer "yes" to the item "I regret having my child(ren)" in the condition where the 10 regrets were listed explicitly and separately.

In this explicit condition, 4.07% of participants responded “yes” with a standard deviation of 0.20. The experimental counting condition found an average of 2.94 regrets from the list of 10 with a standard deviation of 1.58. In the control counting condition, there was an average of 3 total regrets from the list of 9 with a standard deviation of 1.58. This difference goes in the wrong direction. In other words, adding the “I regret having my child(ren)” statement did not increase the number of items people said they regretted total, $t(499) = 0.37, p = .71$. In fact, the addition of the experimental statement nonsignificantly decreased the number of items people said they regretted total. The conclusion, thus, is that 0% of people in the experimental counting condition regretted having their children.

Using the standard error of the mean, it can be calculated that 4.07%, with a 95% confidence interval of 1.55% to 6.59%, explicitly say that they regret having their children. That is, the true population base rate of explicitly regretting having one’s child(ren) is between 1.55% and 6.59%. Similarly, it can be calculated that the true population base rate of implicitly acknowledging regretting having one’s children is between -22.6% and 32.9%. The two confidence intervals overlap, so there is no difference between the experimental count condition and the explicit yes/no condition base rate of regretting children. With this analysis, hypothesis 1 is not supported by the findings of this study.

The second hypothesis of this study is that parents who regret having their children will be more likely to have parents who were divorced, more likely themselves to have a psychological disorder, more likely to be living with children under 18, and more likely to report that one or more of their children were unintended. All relevant results are presented in Table 1. The explicit condition tested whether each of the dimensions that were thought to matter resulted in a higher number of parents who said “yes” that they regret having their children. With this research being exploratory, all of the measured characteristics were tested, not just the ones predicted to differ. Two groups were created for each dimension, based

either on a median split (i.e., age under or over 47 years old) or on a logical basis (i.e., having any children at home under 18 vs. none). Then 2 X 2 chi-squared tests of association were used to test the distribution of responses.

The unmatched count condition(s) tested whether any of the measured characteristics act as moderators, such that participants who, for example, say that they have a diagnosed psychological disorder show a larger difference between the target-present and target-absent conditions than those who say they do not have a disorder. For the experimental counting condition vs the control counting condition, a 2 X 2 ANOVA was used to test for relative differences in the total number of regrets. Then the total number of regrets for the control counting condition was subtracted from that of the experimental counting condition to estimate the percentage of parents who must have regretted their children in each subgroup. This can result in negative numbers. With these results, hypothesis 2 is partially supported in the explicit “yes/no” condition. However, in the experimental and control conditions, hypothesis 2 is not supported. In addition, three unpredicted dimensions emerged: age, education, and whether the participant is married/together with their partner. All data is visualized in Table 1.

I hypothesized that four dimensions would matter in these analyses. The first is whether the participants’ parents are divorced or not. In the explicit “yes/no” condition, there is no statistically significant difference between participants with divorced parents and participants without divorced parents, $\chi^2(1) = 1.17, p = 0.28$. In the experimental and control counting conditions, there is no statistically significant difference between participants with divorced parents and participants without divorced parents, $F(1,497) = 0.94, p = 0.33, \eta^2 = .00$. The second dimension is whether the participant had been diagnosed with a disorder. In the explicit “yes/no” condition, there is a statistically significant difference between participants with a disorder and participants without a disorder, $\chi^2(1) = 7.90, p = 0.005$. In the

experimental and control counting conditions, there is no statistically significant difference between participants with a disorder and participants without a disorder, $F(1,497) = 0.39, p = 0.53, \eta^2_p = 0.00$. The third dimension is how many children under 18 live with the participant. In the explicit “yes/no” condition, there is no statistically significant difference between participants with children under 18 at home and participants without children under 18 at home, $\chi^2(1) = 1.03, p = 0.31$. In the experimental and control conditions, there is no significant difference between participants with children under 18 at home and participants without children under 18 at home, $F(1,497) = 3.31, p = 0.07, \eta^2_p = 0.01$. The fourth dimension is if the participants had any children that were the result of an unintended pregnancy. In the explicit “yes/no” condition, there is a significant difference between participants with an unintended pregnancy and participants without an unintended pregnancy, $\chi^2(1) = 9.09, p = 0.003$. In the experimental and control counting conditions, there is not a significant difference between participants with an unintended pregnancy and participants without an unintended pregnancy, $F(1,497) = 2.09, p = 0.15, \eta^2_p = 0.00$.

Three additional dimensions differ only in the explicit condition. The first condition found to matter was the participants' age. In the explicit “yes/no” condition, there is a statistically significant difference between participants under the age of 47 and participants over the age of 47, $\chi^2(1) = 5.77, p = 0.011$. In the experimental and control count conditions, there is not a statistically significant difference between participants under the age of 47 and participants over the age of 47, $F(1,497) = 0.45, p = 0.50, \eta^2_p = 0.00$. The second condition found to matter was the participants' highest level of education completed (1-9). In the explicit “yes/no” condition, there is a statistically significant difference between participants with a BA degree or higher and participants without a BA degree or higher, $\chi^2(1) = 4.73, p =$

0.03. In the experimental and control counting conditions, there is not a statistically significant difference between participants with a BA degree or higher and participants without a BA degree or higher, $F(1,497) = 1.65, p = 0.20, \eta^2_p = 0.00$. The third condition found to matter was if the participant was still married and together with their spouse. In the explicit “yes/no” condition, there is a statistically significant difference between participants who are not married/together and participants who are married/together, $\chi^2(1) = 6.49, p = 0.011$. In the experimental and control counting conditions, there is no statistically significant difference between participants who are not married/together and participants who are married/together, $F(1,497) = 0.19, p = 0.67, \eta^2_p = 0.00$.

Discussion

This study analyzed how many parents truly regret their children. The results of this study show that the experimental manipulation (i.e., the unmatched target present counting task) did not yield a significant, or any percentage of parents who regret their children. However, the explicit “yes/no” agreement condition found that around 4% of participants agreed to the feeling of regret of having their child(ren). This percentage is significantly lower than what was found by Piotrowski et al. (2021). Thus, hypothesis 1, the experimental counting condition would yield a higher mean number of statements compared to the explicit yes/no condition, is not supported. Hypothesis 2, parents who regret having their children will be more likely to have parents who were divorced, more likely to themselves have a psychological disorder, more likely to be living with children under 18, and more likely to report that one or more of their children were unintended, is partially supported.

While hypothesis 1 is not supported and hypothesis 2 is partially supported, there are correlations found within the explicit condition that shed more light on the situations that could cause one to regret their children. The four dimensions that were found to correlate

with the participant's indication of regretting their child(ren);, whether participants had a diagnosed disorder, whether participants had an unintended pregnancy, whether participants were under the age of forty-seven, whether the participants had a bachelors degree, and whether participants were still married/together with their spouse.

These predicted dimensions are important to the study of parental regret of having children because they offer insight into the mechanisms that may influence regret. The first dimension, whether participants had a diagnosed disorder, the symptomology of the disorder, and the struggle to manage the disorder could impact the relationship between parent and child and ultimately lead to regret. The parent could feel extra stress between managing their mental illness along with trying to be present for their child (Kahng et al., 2008). The second dimension, whether participants had an unintended pregnancy, was predicted and found to be statistically significant in moderating the relationship between the participant's regret of having their children. Participants with an unintended pregnancy may have not desired children at that time or at any point in their lives which could lead to relationship strain and regret (Aiken & Trussell, 2017).

Three other dimensions were found, but not predicted, to be statistically significant. The first dimension, whether participants were under the age of forty-seven, was found to be statistically significant in moderating the relationship between the participant's regret of having their children. Participants under the age of forty-seven may be more likely to have younger children and thus a lack of independence (Kiernan, 1997). The second dimension, whether the participants had a bachelor's degree, was not predicted to be significant but was found to significantly moderate the relationship of participants' regret of having their child(ren). Participants without a bachelor's degree may be more likely to work a lower-paying job or work in a career that they have little passion for. These factors could lead to strain on personal relationships either with children or romantic partners leading to the

regret of having children if there was enough stress (Parkes et al., 2015). The last dimension, whether participants were still married/together with their spouse, was statistically significant in moderating the effect of participant's regret of having their children. Participants who are not together with their spouses may feel significant stress from being a single parent or trying to co-parent (Ferraro & Greer, 2022).

A follow-up study was conducted to investigate if the phrasing of the regret statement impacted participants' responses to the questions. Participants (N = 500) were randomly assigned to one of two categories: one where the same regret statement from the previous study was used "I regret my child(ren)" and the other where a new phrasing of the statement was used "I regret becoming a parent". Results from the first condition replicated the results of the explicit "yes/no" condition from the first study with 4% of these participants indicating they regret their child(ren). However, results from the second condition showed that 7.9%, almost 8%, of participants indicated that they regret becoming a parent. The phrasing of the statement seemed to impact the amount of participants in the first study who felt they could agree with the targeted regret statement.

Limitations

There were some differences between the study done by Piotrowski et al. (2021) and the current study. Firstly, the sample used by Piotrowski et al. (2021) used participants with an age range of eighteen to forty while this study had a participant age range of twenty-five to eighty-seven. This difference in age range means this study may have possibly overlooked the younger portion of parents who have been found to experience less parental satisfaction compared to older parents (Lachance-Grzela & Bouchard, 2009). Secondly, this sample was taken from the United States, while Piotrowski et al. (2021) used a Polish sample. One possible contribution to this difference would be the poor childcare available to parents in Poland (Piotrowski et al., 2021).

Even with the correlations and findings, there is still not a significant percentage of participants who regret their children. A few reasons were hypothesized as to why there was such a low percentage compared to Piotrowski et al. (2021). In the unmatched count condition, one possibility is that the entire participant pool did not regret their children. Similarly, there may not have been a sufficiently large sample size for the questions asked.

However, another idea that was posed was that the wording of the targeted regret statement could have influenced participants' answers. The targeted statement was worded as "I regret having my child(ren)". One idea of what could have occurred is the use of the word "my". Using "my" could have primed participants to go through two thought processes. The first process was that the use of "my" made the participants feel at fault for regretting their children. The use of "my" could have also made participants think that the question was asking if they would rather have other children than their own. This idea is supported by the follow up study that was done to investigate the impact of the phrasing of the regret statement. The original phrasing from the original study again led to 4.0% of parents explicitly stating they regret their children. A new finding, however, was that the new phrase "I regret becoming a parent" led to 7.9% of parents explicitly agreeing to this statement.

In addition to these limitations, regret is not a "yes/no" question. Regret, in previous studies, seems to fall on a spectrum, meaning different things to many people. The use of "yes/no" in terms of regret limits the possibility and broadness associated with the feeling of regret. Another study will be conducted in the future to analyze if there is a difference between the way the statements are worded. Similarly, a sliding scale will be used to accurately represent the spectrum of regret.

I hypothesize that the experimental counting condition will yield a higher mean number of statements compared to the explicit yes/no condition. I also hypothesize that parents who regret having their children will be more likely to have parents who were

divorced, more likely to themselves have a psychological disorder, more likely to be living with children under 18, and more likely to report that one or more of their children were unintended

Implications

This research can be useful in many different facets of psychology. Firstly, this study highlights the possible moderating variables that have a significant effect on whether a parent reports regretting their child(ren). These moderator variables can be researched more thoroughly in the future and help understand the mechanism of parents regretting their child(ren). Secondly, this research can be used in pre-marital counseling to help future spouses understand the commonality of regretting having children. Counselors can also advise patients based on their pre-existing statuses in terms of the significant moderator variables. Another possible way this research can be used is to help parents who already experience regret about having their child(ren). Even though the number is small, these parents could still benefit from psychological interventions to improve their relationship with their child or spouse.

Conclusions

The first hypothesis was that the experimental counting condition would yield a higher mean number of statements compared to the explicit yes/no condition and was not supported by the findings. The second hypothesis was that the parents who regret having their children would be more likely to have parents who were divorced, more likely to themselves have a psychological disorder, more likely to be living with children under 18, and more likely to report that one or more of their children were unintended. The second hypothesis was partially supported in the explicit “yes/no” condition. These findings can still prove useful in understanding the circumstances surrounding the regret of having children. Certain circumstances could add outside pressure to parenthood and influence one’s perception or

regret of parenthood. These circumstances could be divorce, lower age, lack of higher education, and an increased number of children under eighteen in the house.

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Table 1*Moderator Analyses of Percent of Parents Who Regret Having Their Children*

Dimension	Yes or No	Percent Regretting Children (Explicit)	Percent Regretting Children (Unmatched Count Estimate)
Parents Divorced*	Yes	6	-25
	No	3	4
	<i>p</i> value	.28	.33
Own Disorder Diagnosis*	Yes	9	13
	No	2	-8
	<i>p</i> value	.005	.53
Children Under 18 Living With You*	Yes	5	-25
	No	2	28
	<i>p</i> value	.31	.07
Any Child From Unintended Pregnancy*	Yes	9	-38
	No	1	6
	<i>p</i> value	.003	.15
Age Over 47	Yes	7	-13
	No	1	6
	<i>p</i> value	.016	.50
Education B.A. or Higher	Yes	8	17
	No	2	-20
	<i>p</i> value	.03	.20
Married and With Spouse	Yes	9	-18
	No	2	-6
	<i>p</i> value	.011	.67

Notes. Dimensions labeled with an asterisk (*) were predicted to moderate the percent who regret their children. *p* values are from χ^2 tests of association for the explicit condition, and interaction effects in an ANOVA for the unmatched count conditions.