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Abstract: Parents are a crucial population vulnerable to mental health issues, especially during difficult periods, such as the COVID-19 pandemic lockdown and subsequent school closure. The attachment theory of developmental psychology posits that parents serve as external regulators of young children's emotional states. Caring for children in difficult times requires parents to comprehend children's emotional states, control their behaviors, and provide them with comfort and response. However, the burden of care can be overwhelming during extreme situations, and the psychosocial crisis of uncertainty, fear, and anxiety about the pandemic might worsen psychological distress in parents. Local lockdown at the end of January 2020 was adopted by the Chinese government as an integral part of its anti-COVID-19 strategy. Research has suggested that parenting daily hassles during children's remote schooling are associated with parents' parenting efficacy and mental health, which is consistent with the framework in developmental trauma research. Considering the widespread and serious consequences of the COVID-19 pandemic, addressing parenting daily hassles and their effects on parents' mental health during the lockdown is necessary. The unprecedented public health crisis sheds light on the active parenting role since young children cannot care for themselves at home. Parents play a critical part in helping young children cope with negative emotional experiences brought about by the COVID-19 pandemic and social isolation. The burden of parenting may exceed parents' thinking capacity.

Keywords: COVID-19 pandemic, Mental health, Parental stress, Remote education, Childcare

1. Introduction

The COVID-19 pandemic has resulted in unprecedented disruptions to families worldwide, with the province-wide restrictions imposed on March 2020 in Canada anticipated to have considerable financial and employment impacts for families, as well as increased burdens on caregivers. In particular, public health measures such as school and child care closures, workplace closures, and travel restrictions have given rise to concerns regarding the mental health of parents and children. Studies conducted prior to the pandemic identify family factors as significant contributors to mental health outcomes across children and parents. Notably, families' ability to adapt to changing circumstances and how they functioning was identified as an influence on mental health stability. With the onset of COVID-19, changes to family functioning expectedly and quickly became a focus of concern for mental health professionals [2].

Work as a primary source of income, social connectedness, and family functioning is thought to underlay many of the observed risk factors. Changes to work arrangements and

job security may affect parents' social functioning and have downstream effects on mental health symptoms. Further, physical distancing from social support networks given the closure of schools, child care, workplaces, and businesses has hindered families' valued social connectedness, which is considered a protective factor accompanying family functioning. Parenting and caregiver workload is significantly considered to affect parents and children alike. Studies in Australia found a higher proportion of parents with children living at home reported depression, anxiety, and stress in the moderate to extreme range after the lockdown relative to before the pandemic.

2. Materials and methods

COVID-19 (SARS-CoV-2) emerged in Wuhan, China, in December 2019. This illness quickly caused global economic weakness, and as the infection rate spread worldwide, authorities were compelled to impose lockdowns. Consequently, Italy declared a nationwide lockdown on March 9, 2020, in response to the COVID-19 outbreak, affecting almost 60 million people and resulting in the closure of all nonessential businesses and services [3]. These preventive measures triggered major changes in Italians' everyday lives. With schools and cafes shuttered, and restaurants and businesses forced to close, people were quarantined at home with their relatives [4]. Remote education and work were implemented, significantly affecting people's lives. Families were compelled to adapt to this drastic change, with parents and children confined at home over the long term and without opportunities for leisure and social interaction.

As parental duties increased, changes were also needed to integrate remote work and schooling. This sudden transition resulted in worldwide chaos and uncertainty. Much attention has been paid to the biological aspects of the COVID-19 pandemic. Nevertheless, the sudden pressure on parents due to changes in family functioning prompted a surge in research into the social impact of the pandemic. Researchers emphasized changes in parents' mental health and family function due to the sudden close contact and interaction of parents and children, the increase of familial conflicts, and the decline in parental competence. Young children are vulnerable to the risk of negative parenting effects as these modifications threaten their personal development and wellbeing. Growing evidence of parental anxiety, grief, and distress after the onset of COVID-19 has been reported in studies within this context, prompting educational institutions and governments to take measures for the wellbeing of young children and family functioning during the pandemic.

Understanding Mental Health

The coronavirus disease of 2019 (COVID-19)--a disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)--was first identified in December 2019 in Wuhan, Hubei province, China, and appeared to be a novel infectious disease, both zoonotic and human-to-human. It swiftly spread throughout Member States, prompting the declaration of a Public Health Emergency of International Concern on January 30, 2020, and subsequently a pandemic on March 11, 2020. As of April 1, 2020, COVID-19 had been reported in 203 countries/territories/areas, affecting over 850 000 people worldwide and resulting in over 40 000 reported deaths. The first wave of restrictions to control the outbreak

were rapidly implemented and included the closure of spaces or services that were viewed as nonessential to daily life, cessation of nonessential businesses, the shift to home-based work or schooling whenever possible, and cancellation of community events, festivals, and sporting activities [2]. The emergency of COVID-19 thus created substantial changes in people's daily lives and put the world on high alert for a prolonged battle against a formidable pandemic. Since the emergence of COVID-19, common emotional reactions toward the spread of the disease were reported. Concerns specifically regarding the impact of COVID-19 on young children and their families were also raised.

The psychosocial costs of COVID-19 were expected to be profound, and increased prevalence of psychological problems had been anticipated as part of the 'cost' of the pandemic. Nevertheless, less attention had been paid to the potential impact of the suspension of educational institutions, urban lockdown, and restriction of social contacts and gatherings on children's, parents', and family wellbeing. Fulfilling health needs as part of the social needs approached at a broader level, the welfare of and support for young children and their family wellbeing were identified as the two most "overlooked" areas of public health.

Concerns for children's welfare as part of their health were fueled by the anticipation that many children would likely be during the prolonged house arrest affected by the unintended side effects of lockdown. These might include diminished physical activity, restricted peer interaction, loss of play opportunities, and increasing parental stress due to juggling home office and child-care tasks as well as conducting remote learning. These concerns were heightened by retrospective studies conducted after previous infectious disease outbreaks, which reported that children had been particularly vulnerable to post-traumatic symptoms. Nonetheless, to date, no study has been conducted to examine the impact of the rapid global spread of COVID-19 on children's welfare, either at the level of Beijing or at the more general level. The extent of its spillover on families in broad and on relationships and children's outcomes in particular remains to be investigated.

The Psychological Effects of Lockdown

Forced to slow down the hectic pace of their daily lives, some people had the opportunity to take the time to do nothing and enjoy it. Some people with psychological disorders have felt relieved by the lockdown. The same noted a clear decrease in suicidal crises. During this lockdown, the nature and modalities of social support have been profoundly changed. Social support plays a crucial role in the management of a stressful event and in the development of peritraumatic distress. Studies showed that perceived social support has a positive effect on coping with stressful events, therefore alleviating the impact of stress, facilitating the adoption of rational cognitions and preventing inappropriate behavioural responses. Nevertheless, surprisingly, more than half of the surveyed individuals did not claim to experiencing social isolation before the lockdown. Some 20% of people reported feeling socially isolated often during the lockdown. Although people had more contacts before the lockdown, they maintained these contacts in the virtual world. In this context, social support at the individual level did not disappear; instead, it

manifested itself virtually. Unfortunately, virtual support has proven to be less beneficial for mental and physical health than real-world contact.

Another essential factor is the intergenerational transmission of trauma and the role of parental reaction in the development of trauma in children. Experiences of peritraumatic distress at the time of the traumatic event can be shared through emotional socialization processes, therefore harming child emotional regulation. This model posits that children's emotional regulation is a function of parental emotional socialization practices and the mediating effects of parental emotional regulation. Numerous studies have reported that maternal distress is associated with children's behavioral and emotional symptoms ([5]). Of particular interest, mothers' distress during COVID-19 confinement has been associated with children's internalizing symptoms, poor adaptive behavior and mental health concerns, including more child distress and risk-taking behaviors ([3]). Meeting the challenges imposed by the COVID-19 lockdown while facing their distress, mothers may have used more adaptive strategies, which in turn may have fostered children's adaptive behavior.

3. Results and Discussion

Parents' Mental Health: A Critical Overview

Parental mental health remains one of the most vulnerable groups during the COVID-19 pandemic, especially with the school closure. The parenting daily hassles, which were particularly emphasized during the pandemic, was a key factor attached to parents' mental health. A major study found that, among several present parenting hassles, the demands on time and emotions showed the strongest relationships with parents' mental health. Moreover, parents' mental health was negatively associated with the level of worry, and both parenting hassles and parental mental health predicted parents' work performance. The COVID-19 pandemic lockdown, although seeming to break the country's daily cycle, dramatically changed the daily life of families. During school closures, restrictions on tea and outdoor activities, in order to prevent COVID-19 transmissions, were imposed in many areas. The disruption of their usual school day put more pressure on students and parents. Parents not only had to take care of their children's emotional needs and academic performance on e-learning platforms, but also had to embrace additional houseworks when their domestic servants went back home or couldn't go to work. New and a variety of daily parenting hassles gradually appeared, which might widen the mental health gap between different parents. Furthermore, due to the imposed strict precautions to prevent the epidemic, traditional social support, such as family members and friends' visiting, outdoor activities, and community facilities, was drastically diminished or even cut off. Many parents found it especially difficult to take care of children within the small space of their homes all day.

Only few studies focused on parenting daily hassles and its impacts on parents' mental health during the COVID-19 pandemic. A study showed that parents were more likely to express worry caused by the pandemic compared to their children; however, there would be no significant difference in parenting hassles. Similarly, differences in parenting

daily hassles and parents' mental health across education and occupation were found, indicating that educational levels and types of occupations were closely related to the amount of worry about the pandemic and to the parent's mental health respectively. In an Australian qualitative study investigating family life under pandemic restrictions, parents were found to have trouble keeping up with the expectations of online learning with children [6]. Parents reported difficulty in both work and keeping track of children's schoolwork while sharing a small household, arguing that a divided occupation of space would infinitely influence the routines built over the years. Nevertheless, these works investigated either a few chosen hassles or one type of group and didn't provide a deep insight into the effects of parenting daily hassles on parents' mental health motivated by the pandemic school closure. Additionally, this research also shed light on the potential implications for parents' social practices that might effectively enhance their own mental health and well-being during the pandemic restrictions period.

Factors Influencing Parents' Mental Health During Lockdown

Parents play an essential role in supporting children to adapt to, survive, and thrive through new challenges. Parenting is also a demanding task. How parents cope with parenting might be associated with their mental health profiles. Since lockdowns imposed by the pandemic are non-traditional times for families, the unprecedented changes may bring difficulty to everyday parenting, which can hinder self-adaptation and well-being in parents. The pandemic shocked people's everyday lives due to unprecedented commercial concerns, hygiene strategies, and social isolation. Family conflicts and children's emotional behaviors increased during the pandemic, leaving limited exploration on how parenting-related factors may predict changes in parents' mental health during stay-at-home orders.

The pandemic shocked people's everyday lives because of unprecedented hygiene strategies, commercial concerns, and social isolation. However, it was unclear how school closures influenced parenting efficiency and thereby parental mental health. Lockdowns are special necessary times for many families globally. Therefore, the changeable lockdown during the pandemic provides an ideal framework to explore the effects of parental daily hassles on mental health at the population level. Affected by both school closures and stay-at-home orders, parents need to change their roles and provide social, emotionally educational, and entertaining support to their children at home. However, daily parenting is not only about taking active care of children, but also paying attention to catering to children's needs and preferences, ensuring children's safety and norms, and coping with escalated burdens from children. Children's maladaptive behaviors and inability to participate in peer play may perplex parents the most. Coping with children's intrusive speaker behaviors and other problems can result in parents' persistent focus on tasks without completing them.

Work-Life Balance

Most notable is the phrase "juggling plates." This phrase is familiar to stay-at-home parents with young children and new responsibilities. It describes the simultaneous, precise juggling of feeding children, leading a zoom meeting, and sweeping the kitchen floor. At

the beginning of lockdown, parents were not only overwhelmed by the need to combine housework, child-rearing, and the pressures of work, routine and order had been upturned. It is widely acknowledged that the pandemic has had a serious negative impact on the mental health of laypeople, especially parents. Each of the writers has been challenged by the mental pressure of the loss of contact with friends and family and parents. The traffic of staying connected and on top of things has tripled. The average adult person chronicles days on end of zoom meetings, home school classes, ambitious cooking, and sporadic exercise. Similarly challenged, parents, after a month of lockdown, started to report an overwhelming feeling of chaos. Crises in the home have become so common that new memes went viral – one about the moment the mother snaps and shouts “Enough!!!” in a slew of cheeky gifs. Other memes jokingly perhaps about the strong drinks consumed by parents during online happy hour. Less humorous than this is a Twitter post that reads, “Home schooling + working from home + running the household + keeping up with the news + trying to connect with friends/family/acquaintances = coping?!”

Many are unsettled by the enormity of the challenges they are facing. While many lovable bedlam moments are being shared online, a narrative similar to the “good mother” construct and the soft focus “family fun” narrative of lockdown is no longer considered the only alternative. These new discourses turned inward – parents’ struggles are questioned as failures of coping, by themselves and others. Shameful moments are shared not as an expression of a funny story but as an invitation to cry in solidarity. Firstly, upon closer inspection of this weaving of mothers’ hopes and woes, and attending to the figurative language, it becomes clear that breathing the air of #lockdownlife is complicated. Although mothers would like to provide their children with rules and routines, no matter how well-intentioned, often the domestic sphere will creatively resist this [6].

Childcare Responsibilities

Participants reported that their so-called work-life balance had now shifted to home schooling, family interactions and online team meetings. Parents often had to juggle their new work responsibilities with changes in parenting roles, and especially childcare, for example, becoming a nursery teacher and a teacher for school-age children aged 5 years and older [6]. These responsibilities meant children had to be kept busy and occupied, and pastoral care provided. The outcome was that the usual routine of dropping kids off at school and work had gone, replaced by juggling responsibilities at home.

Educators provided parents with distance learning options, however, they were old-fashioned and complicated, focusing on academic matters. Such concerns were no longer relevant to parents undergoing chaotic times. Care responsibilities were still present, yet parents needed a different, simpler model—a department of nursery care rather than of education. Apart from childcare, many parents also sought pastoral provision. Educators had the ability to challenge child behaviours, escaping parental constraints and condemning harsh family conclusions. Pastoral practice, meanwhile, could explore child orientations to emotional matters emerging from lockdown conditions. Parents would often see anger and frustrations targeting by younger children, boredom led by older children, while primary

school-aged children were more likely to be despondent, ceasing interactions, and these behaviours might lead to increased familial tensions. Care and safeguarding had now become intertwined.

In this situation, teachers were acknowledged and missing, as they had previously been seen as an unseen ally defining legitimacy to rite-of-passage milestones and ever-emerging behaviours. Many parents also expressed embarrassment with their child's reliance on devices, and with their and their child's intake of daily online game time. There was division on this as gaming was finally deemed a waste of time and an issue that ranked lower than safety and security. For children from single-parent families it was time-consuming, leading to fewer available hours for work engagements and absent from safeguarding measures by mothers.

Social Isolation

The COVID-19 lockdown has been a period of increased social isolation and feelings of loneliness for many people. This has been supported by social media trends that started during the lockdown with hashtags such as “#isolation”, “#stayathome”, “#stayconnected”. Past to the lockdown, social media were used by 96-98% of adults in Ireland, and 65% of Irish adults reported their use of social media increased during the COVID-19 lockdown. One of the main reasons for the increased use was to stay connected to family and friends (#stayconnected). Results from past research show social media use could promote health and well-being by providing online offline social support and facilitating interpersonal communication (i.e., sharing photos/videos and instant messaging). However, during the COVID-19 lockdown, the lack of face-to-face social interaction and physical contact with family and friends alternated by social media-based social support might weaken its effect against parental mental illness [7]. As a result, parents in this study reported feeling increasingly socially isolated/lonely during the lockdown. During the early days of the lockdown, the mean score of the 3-day SCLS was 3.36 (5-point Likert scale, 1 = strongly agree, 5 = strongly disagree), and only 15.58% of parents reported feeling socially isolated/lonely occasionally or more. Family-related quarantines or strict home mode of life were still maintained during the PR (the level of social isolation/loneliness perception would be better than the EL). Therefore, the perception of social isolation or loneliness increased to the mean score of 4.12 (5-point Likert scale) in the PR, and 86.41% of parents reported feeling socially isolated/lonely occasionally or more (the skin scores were 5 = strongly disagree, 1 = strongly agree). Increasing levels of physical activity and the maintenance of good sleep hygiene practices at the lockdown exactly account for the feeling of social isolation or loneliness during the lockdown.

Coping Mechanisms for Parents

Engagement in helpful activities increased the likelihood of positive well-being impacts. These activities included cultivating a new skill, accessing green space, exercising, taking time away from family, spending time away from family, or avoiding unhelpful triggers such as social media or the news [6]. The die is cast. Future research can use these

ideas to consider better qualitative methods when exploring parent populations. In interpreting the findings, it is important to consider the strengths and limitations.

Participants indicated negative impacts on emotional well-being, mental health, and physical health arising from the pandemic. Most participants reported greater stress, anxiety, hopelessness, anger, and sadness. Concerns were expressed about extended isolation from family, friends, and support networks. Generally, changes to health and well-being are inevitable in periods of significant change such as pandemics; however, qualitative findings help to increase understanding of what these changes are and how they can differ between people. The need for targeted support before, during, and after a pandemic is especially important for those feeling particularly vulnerable. Most parents were able to overcome these impacts and report a newly developed network of providence in pandemic and unprecedented times.

Most participants expressed concern about health and well-being. Almost all expressed worries about either their overall physical health or the health of others. Concern for family and friends was reported. Many parents also expressed worries about their children's development, concerning physical health, behavioral, emotional, and social skills [3]. Most expressed fears about their child being ill with COVID-19. Feelings associated with worry included anger, sadness, hopelessness, stress, frustration, anxiety, and fear. Concerns about the future were expressed in terms of returning to 'normal' life or, conversely, that life may never return to normal. Not knowing what the future holds contributed to a sense of worry, hopelessness, and anxiety over losing control. Participants expressed concern that the future was unknown in a world with little precedent for COVID-19 or the lockdown.

Most parents reduced access to the outdoors during the lockdown and expressed concern about the impact of limited outdoor space. Many described being unable to take children for outdoor walks or play on the grass in the garden or park. Some wanted guidance around safely accessing outdoor spaces or how to maintain social distancing whilst out of the house. Some parents expressed relief at having access to outdoor space as it helped with parenting. Therefore, understanding how COVID-19 impacted parents' mental health and well-being will aid health professionals and local services in supporting families in the aftermath of the pandemic.

Support Networks

The birth of a child often leads to the establishment of new support networks for parents, allowing them to discuss shared experiences of parenting and perinatal transitions. Access to informal support is understood to function as a buffer to the risk of mental health concerns for new parents. This access facilitates deep talk and open conversations about perinatal topics, reflecting back to the parent feelings of normalcy and shared experience, and providing advice or distraction from distressing thoughts. The informal support networks of fathers have been found to be associated with additional buffering to the risk of negative mental health during the perinatal transition. However, the pandemic greatly restricted social contact between individuals, which, for some new parents, exacerbated pre-existing feelings of isolation. Fatherhood often brings a realignment of social priorities,

sometimes resulting in less time and energy available to spend on social engagements outside of the family unit, a phenomenon that was readily observed before the pandemic. In lockdowns, many fathers lost their in-person informal support network, and the loss of time away from the stresses of parenthood entirely meant this degree of relief could not be achieved. A sizeable portion of fathers reported a significant deterioration of their mental health during the early days of the pandemic. The increase experienced by those at the highest risk of mental health concerns on all metrics suggests an untenable level of distress amongst some individuals; this is echoed in the experiences of parents who reported having been pushed to their limits in the absence of existing support. There has been considerable scrutiny regarding the impact imposed by the pandemic on the physical and mental health of new mothers. Heightened levels of domestic work and childcare have been cited as compounding losses incurred as a result of reduced access to informal support networks. Qualitative work on maternal mental health during the pandemic highlighted processes of degradation attributed to the severe perceived lack of opportunity for informal relief from care responsibilities. The need to double-down as primary caregivers increased a perceived burden of care, while feelings of loss surrounding friendships and past lives compounded an already-fragile sense of self. Importantly, it is understood that enhanced access to informal support acts as a protective buffer to the development of perinatal mental health concerns. Higher quality social support for mothers is associated with lower levels of stress and anxiety, reduced feelings of isolation, and attenuated risks for negative perinatal mental health outcomes among high-risk populations.

Professional Help

The past two years have seen a global tug-of-war between the impact of COVID-19 on community mental health and the actions undertaken by governments, public health officials, and organizations to mitigate these impacts and improve mental health outcomes. Evaluators and researchers have looked at several mental and physical health domains that will be considered by examining the methods, designs, tools, results, and implications of such research.

Citizens were not the only individuals impacted by COVID-19; parents and caregivers faced unique challenges due to school closures and social distancing practices. Points of access to mental health resources were lost, including a cessation of school-based counseling and loss of child psychiatric services. Emerging research indicates some parents have faced unique mental health challenges, and the need to assess the involvement of mental health care providers and the unmet needs of parents/caregivers is urgent. Research on parents indicated that experiencing mental health challenges was predictive of increases in post-vaccination levels of anxiety and depression.

Approximately 7.6% of parents reported being assisted by contacts with professionals because of mental health problems before/after COVID-19 should not mask variability across parental groups. More specifically, parents of children with anxiety problems, parents of children with depression problems, and single parents were more likely to be assisted by professionals. This is consistent with prior literature in smaller age

group analyses that indicate either clinical need, greater perceived parenting and mental health difficulties, or parenting/mental health histories predict greater likelihood of seeking help from a mental health provider since the onset of the pandemic. Less than one-third of the sample reported mental health difficulties.

This lack of need or desire reported among parents/caregivers is consistent with prior research on the knowledge, attitudes, and reasons for non-use of mental health services in general populations, which indicate that people may not consider their mental health problem severe enough to warrant the attention of a professional. There is a question of how to reach parents/caregivers, other than through the schooling system, as many parents expressed concern that the service may be too daunting.

Self-Care Strategies

Overall, parents described a range of strategies that they attempted to apply to cope with challenges faced during lockdown. These were classified into five themes: self-care strategies, strategies to support children's wellbeing, maintaining social connections, establishing family routines and boundaries, and media management. The most frequently cited theme was self-care strategies, employed by 81% of participants and including activities intended to increase parents' overall wellbeing, such as exercise, cooking, reading, and meditation. Improving parents' physical health and general mood was a main focus. Strategies such as meditation, alone-time, exercise, or connecting with family and friends received substantial attention. Strategies frequently mentioned in the context of 'exercise' included going outside for a walk, running, planting seeds in the garden, yoga/stretching, playing tennis or basketball, and gardening. These strategies were recognized as particularly beneficial to physical wellbeing, in addition to supporting parents' mood. The second most commonly cited theme was children's wellbeing strategies, employed by 67% of participants. Many parents noted that lockdown was challenging for children's socialization and they felt it important to put in extra effort to ensure children's wellbeing. Though most strategies applied were mentioned by only a minority of participants, three strategies were particularly notable as benefiting several families. These included discussing children's feelings, creative storytelling or playing, and allowing children more independence. Overall, parents were aware of the challenges lockdown could pose for children's emotion regulation, as well as their socialization virtual solutions. Rather than focus on keeping children calm and entertained, parents more often mentioned their children becoming bored or restless, and in some families, sleeping poorly, having tantrums, or becoming less engaged in studies.

4. Conclusion

The COVID-19 pandemic has led to an unprecedented global public health crisis. In most cases, social isolation measures and other restrictions imposed on the general population have resulted in a considerable burden on individual and population mental health. Subgroups at increased risk for poorer mental health during this pandemic report, including parents of children living at home. Families experience new or intensified stressors related to many factors including financial and employment stressors, school and

child care closures, caregiver burden, and physical distancing from family and friends. Due to the current lack of understanding of the extent and nature of the pandemic-related burdens facing parents and the impact of these stressors on children living at home, it is imperative to characterize the unique source of stress and protective factors against child adjustment in this international public health crisis. While some parents report that quarantine and physical distancing measures led to unexpected benefits, such as more time with family, canceled plans, and a slowed pace of life, many parents are navigating unprecedented challenges ([2]). Parents with children living at home have consistently reported a higher prevalence of depressive symptoms, anxiety symptoms, and stress relative to adults without children living at home and relative to pre-pandemic levels. Data regarding alcohol consumption suggest that parents may have increased unhealthy coping mechanisms during the COVID-19 pandemic relative to pre-pandemic levels ([5]). Younger parents report poorer mental health than older parents, as do parents who are experiencing current financial stress. Additionally, parents who pre-pandemic indicated worse mental health reported lower family functioning during the pandemic. In terms of child mental health, parents report that their children's behavioral and emotional state, including social isolation, depression, anxiety, and increases in hyperactivity, inattention, and aggression, have changed over the course of the COVID-19 pandemic. Factors associated with increased child distress included child/parent stress, child loneliness, increased screen time, and disruptions to the school routine. In conclusion, family and population mental health is a priority area of research, practice, and policy during and following the COVID-19 pandemic. These results underscore the importance of monitoring this unusual time for parents and children. This research suggests that screening for financial stressors among families with children, while also monitoring for improvements in family functioning, may help to identify families at risk of poor mental health outcomes. Additionally, results suggest that resources made available during the pandemic, including access to teletherapy and referrals to social services, should be continued and expanded following the pandemic. Understanding parental strains in relation to health, work, and family responsibilities may be key to informing intervention strategies to target families who are at risk for poor mental health outcomes. These findings indicate that during the COVID-19 pandemic, parents with children, specifically younger parents and those experiencing financial stress, are at a greater risk for poorer mental health and strained family relationships. Additionally, the findings indicate that children's mental health is adversely impacted during the COVID-19 pandemic. Further, the relationships between parental peritraumatic stress and feelings of parental competence, as well as child peritraumatic distress were investigated, and the findings suggest that excessive worry or anxiety about one's family's safety due to COVID-19 was related to a diminished parenting style. Results also suggest that parental feelings of inadequate parenting during the pandemic was related to poorer child emotional responding to the pandemic.

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