What will the coronavirus do to our kids? Parents in Austria dealing with the effects of the COVID-19 pandemic on their children

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Abstract

Objective: This study investigates parents' experiences in dealing with the potential negative effects of the pandemic on their offspring, and seeks to explicate (1) how parents have assessed their children's situations during the pandemic; (2) what challenges parents have experienced in accompanying their offspring through the crisis; and (3) what strategies parents have developed for helping their children cope with the effects of the pandemic.

Background: The COVID-19 pandemic and the accompanying protection measures have placed heavy demands on parents and their children. Both groups have been shown to experience stress, as families have been forced to adjust their daily routines under rapidly changing circumstances.

Method: Data are based on an Austrian qualitative longitudinal study, relying on interviews and diary entries of 98 parents of kindergarten- and school-aged children who have been contacted repeatedly since the first week of the first country-wide lockdown (nine waves of data collection between March and December 2020). Data analysis employs a combination of thematic analysis and the grounded theory coding scheme.

Results: Results show that parents see the pandemic as having many detrimental effects, and very few positive effects, on their children's emotional, physical and social well-being as well as their educational performance. Parents have experienced a wide variety of challenges (explaining the pandemic and the measures; handling emotions; managing new roles; accompanying children through repeated adaptation processes). To deal with these challenges, respondents developed four distinct strategies (structure, cohesion, information, and independence).

Conclusion: We conclude that parents are making substantial contributions to society, and are shouldering large burdens in accompanying their children through the crisis. However, their capacity to meet all of their children's needs is limited. Thus, to prevent the pandemic from having devastating long-term consequences, it is essential to provide sufficient support for children, parents, and families.

Key words: COVID-19, children, parents, stress theory, qualitative longitudinal data

1.   Introduction

The COVID-19 pandemic is changing social life around the globe, and is having significant effects on family life. Parents and their children are among those most heavily affected by the pandemic. In response to the accompanying protection measures (e.g., lockdowns, social distancing measures, closures of childcare facilities and schools), families' daily routines and norms had to be adjusted; parents' responsibilities and roles were multiplied; and parents were called upon to provide explanations, safety, and stability for their children under rapidly changing circumstances. The existing evidence shows that parents are overburdened and stressed in the light of these added responsibilities (Andresen et al. 2020; Craig & Churchill 2021; Czymara et al. 2021; Hank & Steinbach 2021; Hertz et al. 2020; Hipp & Bünning 2021; Huebener et al. 2021; Kreyenfeld & Zinn 2021; Lee et al. 2021; Zoch et al. 2021). Likewise, the pandemic has negatively affected children's emotional and physical health, social lives, and educational opportunities (Cowie & Myers 2021; Idoiaga et al. 2020; Loades et al. 2020; Marques de Miranda et al. 2020; Nearchou et al. 2020; Raw et al. 2021).

In an attempt to shed light on parents' experiences during the COVID-19 pandemic, and to improve our understanding of how parents have been (and still are) coping with the consequences of the pandemic for their children, we build on a unique qualitative longitudinal data set. We investigate parents' challenges and experiences in dealing with the effects of the pandemic on their children, and give detailed insights into the strategies they have developed. We focus on three research questions: (1) How have parents assessed the effects of the COVID-19 pandemic on their children's lives? (2) What challenges have parents faced in accompanying their offspring through the crisis? (3) What strategies have parents developed for helping their children cope with the effects of the pandemic? The data are based on a qualitative longitudinal study with 98 parents of kindergarten- and school-aged children who have been contacted repeatedly by means of problem-centered telephone interviews and diary entries since the first week of the first lockdown in Austria in March 2020 (nine waves of data collection between March and December 2020). This may contribute to an enhanced understanding of how parents, children, and families fare under pandemic conditions, how they are affected by the emergence of a menacing infectious disease and related social restrictions, how they cope with the consequences of the pandemic, and integrate uncertainty into their family lives.

2.   Children and parents during the COVID-19 pandemic: Existing evidence

Children and parents have been heavily affected by the ongoing pandemic. Children are particularly vulnerable, because they struggle with significant adjustments to their daily routines, rely on others to provide for their daily needs, and may react to stress in their parents or caregivers (Cantillon et al. 2017; OECD 2020a; United Nations 2020). Accordingly, extant evidence suggests that the pandemic has had debilitating effects on children's mental health and well-being. There are reports that children have been

experiencing sadness, fear, anxiety, nervousness, boredom, depression, sleeping problems, hyperactivity, increased self-harming actions, feelings of social isolation and loneliness, worries about the health of their family, and fears of transmitting the virus (Cowie & Myers 2021; Idoiaga et al. 2020; Langmeyer et al. 2020; Loades et al. 2020; Luijten et al. 2021; Marques de Miranda et al. 2020; Nearchou et al. 2020; Raw et al. 2021). Many studies on children's mental health during the pandemic have relied on parents' accounts. For example, parents in France and Italy have reported that the well-being of their children, and particularly of their younger children (kindergarten, primary school age), has declined during the pandemic, with less educated and single parents reporting even stronger negative effects (Champeaux et al. 2020). These findings are in line with those of a German study of parents with children aged 3-15, which showed that younger and only children were particularly vulnerable (Langmeyer et al. 2020). One of the few studies that included children as respondents found that children in Spain aged 3-12 were suffering because they worried about infecting their grandparents, and experienced feelings of guilt if someone close to them became infected (Idoiaga et al. 2020). A study that questioned children aged 7-17 in Switzerland, Canada and Estonia pointed towards detrimental impacts on their well-being, but also highlighted some positive effects like having more free time (Stoecklin et al. 2021).

Many of the negative effects of the pandemic on children's emotional well-being have been connected to their limited interactions with peers due to forced isolation during school closures and extended phases of remote learning. In accordance with the literature, we use the term homeschooling for the remote learning environments that have been introduced in response to the COVID-19 pandemic. Hence, children have expressed strong feelings of loneliness during lockdown periods (Idoiaga et al. 2020). Moreover, children's social contacts have been reduced because of disruptions to school routines, and to extracurricular activities like sports or music classes, which can serve as coping mechanisms for young people in stressful times (Cowie & Myers 2021; Young Minds 2020). Their contacts with peers have been reduced to digital encounters that lack intimacy and closeness, and might even heighten the sense of isolation. Overall, homeschooling appears to have negatively affected children's mental health, well-being, and educational performance. Parents are very worried about the academic achievement of their offspring, and particularly of their younger children (Champeaux et al. 2020), with many parents reporting that their children seem to have made little or no progress while learning from home. It has been estimated that children's learning losses during an eight-week lockdown are equivalent to one-fifth of a school year (Engzell et al. 2021). Moreover, there is growing evidence that school closures promote social exclusion and reinforce unequal educational opportunities for children (Champeaux et al. 2020; Engzell et al. 2021; Huber 2020; OECD 2020a, 2020b; SORA 2020a). In addition, school and childcare center closures made it difficult for many parents to find adequate childcare (Kittel et al. 2020), and have forced them to shoulder additional teaching tasks. Survey data clearly have shown that between one-third and one-half of parents find teaching their children at home (very) challenging (Arbeiterkammer Wien 2020; Huber 2020), and that homeschooling is a source of conflict between parents and children (Berghammer 2020; Thorell et al. 2021).

Another point of concern is children's physical health, as there is a close link between social isolation and lower physical fitness in children (López-Bueno et al. 2021). Restrictions

on free movement during lockdowns have reduced children's physical activity levels, and have led to children spending more time sitting while engaged in school- and leisure-related activities (Dunton et al. 2020; Poulain et al. 2021). Children who have poor diets and lower fitness levels face increased risks of obesity, diabetes, and cardiovascular disease (Pietrobelli et al. 2020; Segre et al. 2021; Xiang et al. 2020). These adverse effects have been worse for children in socioeconomically deprived circumstances (López-Bueno et al. 2021), and for those who lack access to a garden or a park, or who live in cramped conditions (Cowie & Myers 2021; Young Minds 2020).

Media and screen exposure have increased substantially during the pandemic, as children have been using digital media for learning, entertainment, and social interaction (Ortner et al. 2020). This trend appears to be negatively affecting children's academic progress and emotional and physical health (Champeaux et al. 2020; López-Bueno et al. 2021). Parents are called upon to monitor their children's exposure to media and information, as ensuring that children are accessing age-appropriate information can foster their resilience (Weaver & Wiener 2020), and can reduce their risks to misunderstand the illness, to get exposed to fake news, or to be influenced by magical thinking (Dalton et al. 2020). Although concerns about children's abilities to comprehend the pandemic situation have been raised, there is evidence that children understand the situation quite well (Idoiaga et al. 2020), and that even two-year-olds are aware of the pandemic (Dalton et al. 2020). A study on health literacy relating to the pandemic among seven- to 12-year-olds showed that children are knowledgeable about COVID-19, and that their parents are their primary sources of information. Even though their parents tended to limit, filter, or adapt their access to information, especially regarding death rates, the respondents reported knowing that COVID-19 is dangerous and deadly (Bray et al. 2021).

During the pandemic, parents have been required to take on many more responsibilities, develop new and expanded roles, and adjust their family's daily routines and norms – often while experiencing financial strain or existential fear. In addition to being responsible caregivers, parents need to take care of themselves by managing their own physical and emotional resources (self-care). Having to take on a large number of demanding chores while coping with uncertainty and unpredictability may lead parents to experience task overload and stress. Accordingly, recent research has shown that around half of parents of kindergarten- and school-aged children have felt (heavily) stressed during the pandemic, with mothers being more affected than fathers (Andresen et al. 2020; Auðardóttir & Rúdólfsdóttir 2021; Bujard et al. 2020; IFES 2020; Lee et al. 2021; SORA 2020a, 2020b). Moreover, these high stress levels have led to decreases in family satisfaction (Haindorfer 2020; Huebener et al. 2021; Möhring et al. 2021; Zacher & Rudolph 2021), and to more people reporting that their family life is chaotic and conflictual (Langmeyer et al. 2020).

According to family stress theory (Boss et al. 2016; Cowie & Myers 2021; Hill 1958; McCubbin & Patterson 1983), when families undergo crises, they experience stressors due to shifts in their behavioral patterns or alterations in their daily routines (Miller 2010; Weber 2011). Stressors exist at the micro, meso, and macro levels (Malia 2006). The COVID-19 outbreak has generated stressors at all levels that are associated with fear, instability, and uncertainty. Exposure to stressors increases the risk of having negative emotional, behavioral, or health outcomes. However, these negative effects can be buffered by

protective factors or moderators, including people's socioeconomic, individual, interpersonal, social, and structural resources. These moderators can act as shock absorbers that help families cope with crisis situations. From a family resilience perspective, such coping behaviors enable families to navigate through crises (Cowan et al. 1996; Lee & Roberts 2018; Patterson 2002).

The study presented in the following embraces the aspects mentioned above and analyses parents' accounts from a family stress theory perspective, asking for their experiences, resources, and strategies. Related to the overall question of how the COVID-19 pandemic impacts family lives, we focus on how parents assess and deal with the effects of the pandemic on their children.

3.   The COVID-19 situation in Austria

This contribution is based on a study performed in Austria, a conservative welfare state with a well-functioning health care system based on mandatory social insurance that provides nearly all residents with access to medical services. Since March 2020, the Austrian government has imposed several measures to contain the pandemic that have affected 900,000 families with 1.6 million children under age 18 (Statistik Austria 2020a, 2020b).

Austria has been at the heart of the COVID-19 outbreak in Europe, as the virus initially spread from a Tyrolean ski resort. It was one of the first European countries to impose a country-wide lockdown, which lasted for around two months, and heavily restricted personal contact. According to the nine waves of data collection between March and December 2020, the COVID-19 measures for Austria are explained in further detail below. From March 16, 2020, until the beginning of May, country-wide restrictions allowed individuals to leave the house for five reasons only: to go to work if necessary; to undertake urgent and necessary errands; to help other people; to engage in outdoor exercise; and to prevent imminent danger to one's body, life, or property. All non-essential shops, childcare facilities, schools, and playgrounds were closed, with childcare being offered only to families in which both parents were working in critical industries. After mid-April, some restrictions were loosened, while schools and childcare centers remained closed.

During the reopening phase in May and June 2020, schools were gradually reopened: the reopening dates for classes were May 5 for students in the final year of high school, May 18 for younger pupils (aged 6-14), and June 3 for older pupils (aged 14-18). Students had to attend schools in shifts; i.e., classes were divided in half and assigned to different modes of attendance, which made it difficult for parents whose children attended different schools to manage their childcare arrangements. School attendance was, and still is, subject to strict hygiene and distance rules.

In the intermediate phase between July and October 2020, the Austrian government implemented regional lockdowns and quarantine measures. As case numbers were rising in September, stricter measures were introduced, but schools were allowed to reopen.

In response to rapidly rising numbers of infections, there was a second lockdown, which started with a two-week soft lockdown on November 3 (curfew between 8 pm and 6 am; closure of schools for pupils over age 14; social distancing and hygiene measures; closure of all restaurants, indoor sport facilities, and cultural institutions); followed by a

three-week hard lockdown from November 17 to December 7 (24-hour stay-at-home order; remote learning mode in all schools; reduced childcare provided only for parents "in need", i.e., those who could not ensure childcare at home; strict limitation of contact to people in one's own household; closure of all non-essential shops, restaurants, sports facilities, cultural institutions); and then by another three-week soft lockdown (December 8 to 25; for measures see above).

Figure 1 shows an overview of the pandemic situation in Austria and the waves of data collection over the course of the year 2020.

Figure 1:   The COVID-19 situation in Austria, 2020
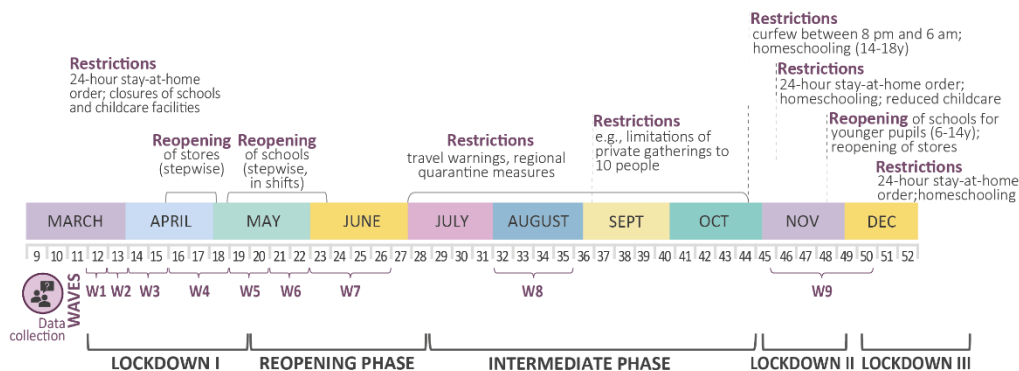
4.   Data and methods

The Austrian-wide qualitative longitudinal study is based on the experiences of 98 parents of kindergarten- and school-aged children who have been contacted repeatedly, which allows us to reconstruct processes and dynamics, and to develop a complex understanding of respondents' lived experiences (Vogl et al. 2018; Neale 2019; Saldaña 2003; Thomson & Holland 2003). The first wave of data collection started during the very first week of the first Austrian-wide lockdown (March 16, 2020). To capture respondents' experiences under these entirely new and exceptional circumstances, data were collected weekly or bi-weekly until the end of June (waves 1 to 7), which covered the entire initial lockdown and the reopening phase. Data collection continued in summer (wave 8) and autumn 2020 (wave 9), which covered the intermediate phase and the second country-wide lockdown that lasted until December 2020. The study consists of two methodical strands: problem-centered individual interviews with 65 respondents (Witzel 2000) conducted by telephone (Irvine 2011; Ward et al. 2015), and diary entries filed electronically by 33 respondents (Alaszewski 2006; Filep et al. 2018; Gabb 2010). The combination of these two methodical strands provides a more nuanced and comprehensive understanding of respondents' experiences and leads to more analytical density and richness (Creswell & Plano Clark 2011; Fielding 2012). From a research pragmatic perspective, the combination of two methods allowed for a prompt start of the study and enabled us to include the large number of people who responded to the

call for participation, as diary entries were handed in by the respondents and demanded less research resources. At the initial contact, respondents were free to choose between interviews and diary entries. The selected method was then used for the following waves of data collection.

The distribution of family forms in the sample[1] corresponds to the Austrian averages for all families with children under age 18 (Statistik Austria 2020a, 2020c): 75 of respondents are living in a nuclear family (i.e., with their biological children and their married or cohabiting partner), 15 are single parents, and eight are living in a stepfamily. Respondents have a total of 181 kindergarten- or school-aged children: 42 are under age five, 54 are aged 6-9, 56 are aged 10-14, and 29 are aged 15-18[2]. The study covers all Austrian federal states, with roughly half of respondents living in urban and in rural areas. Broken down by gender, 14 respondents are male, and 84 are female. The large share of women is similar to that in other qualitative studies on the COVID-19 pandemic and its effects on family lives (Andresen et al. 2020; Auðardóttir & Rúdólfsdóttir 2021; Hennekam & Shymko 2020; Hjálmsdóttir & Bjarnadóttir 2021), and can be explained by the normative linkage of women to family-related issues; by women's greater willingness to participate in telephone surveys; and by the tendency of mothers to take on most childcare responsibilities (Groves 2004; Montaquila et al. 2007). Respondents' professional activities are diverse: the sample includes 26 technical and medical workers, 16 individuals who work in pedagogical and social professions, 30 clerical workers and public servants, 13 sales and service workers, two (skilled) workers and laborers, and one creative artist. Ten respondents are either unemployed, a homemaker, or on maternity leave. 39 respondents are working in critical industries, and 53 respondents worked from home at least at some point in time during the pandemic. Respondents' educational levels break down as follows: 36 have a university degree, 39 have completed secondary school, 14 have completed an apprenticeship, eight have completed compulsory school only, and one has not graduated from school. 18 respondents were not born in Austria, and come from different countries of origin.

Various recruitment strategies were employed to reach parents of diverse backgrounds, including postings in forums, blogs, and social media. Media coverage also motivated several participants to take part in the study. Furthermore, we asked gate-openers like carers and teachers, as well as associations that offer advice to single-parent families, to put out the call for participation over their networks. All respondents have received comprehensive information about the study and have given their written informed consent to participate in the study. Due to the pandemic situation, consent forms including information about the study were submitted electronically. Despite the intensive schedule (9 waves of data collection at frequent intervals), the respondents were highly committed and the sample remained stable over time.

To shed light on respondents' conceptualizations of reality, both data collection measures started with an introductory question that generated storytelling. For the initial data collection in mid-March, this question was as follows: "Please remember the time when you first heard that schools and kindergartens will be closed and that social distancing measures will be imposed. Tell me what happened since then." For the subsequent data

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1   All information on the sample relates to the first wave of data collection.

2   Additionally, 21 children are older than age 19 (not included in the 181 kindergarten- or school-aged children).

collection waves, the question has been slightly modified in order to capture further developments: "Please tell me how the last week(s) has (have) been for you and your family." After the initial narration, the interviewer asked questions referring to thematic aspects already raised by the respondent. Thereafter, preformulated questions from the interview guide, relating to different topics, were asked (e.g., family life, routines, relationships, resources, division of labor, childcare, homeschooling, employment, health, extended family, social network, leisure activities, expectations for the future). The interviews lasted one to three hours, and all interviews were fully transcribed. Detailed protocols were produced after every interview. For diary entries, the open introductory question was followed by several more precise questions relating to different topics, consistent with those in the interview guide. The templates for the diary entries were submitted electronically. Each diary entry comprised an average of eight to ten pages.

For the data analysis, we employed a combination of content analysis (Froschauer & Lueger 2003) and the grounded theory coding scheme (Corbin & Strauss 2008). By taking a qualitative longitudinal approach to data analysis, we are able to apply (a) a cross-sectional perspective that allows to analyze respondents' experiences in every data collection wave; and (b) a longitudinal view to capture the development of narratives and conceptions over time (Vogl et al. 2018; Holland 2007).

5.   Results

5.1 Parents' assessment of their children's situation during the pandemic

Parents observed that emotional, physical, social, and educational aspects of their children's lives have been affected by the COVID-19 pandemic and the related preventive measures. While respondents reported that most of these effects have been negative, they also mentioned some positive effects. Parents' perceptions changed over time, and differed depending on their children's ages.

5.1.1 Emotional consequences

At the onset of the pandemic, parents were primarily concerned with their children's fear of the virus. They reported that their children were worried about getting sick themselves or infecting other family members. Some children were sad and despondent. For example, Rafaela Meyer[3] said that her 12-year-old daughter was "extremely scared" that her grandparents would die, and that she "started crying because she was so overwhelmed by the whole situation" (07I, I1). The observed anxiety was further manifested through anger, insomnia, nightmares, bedwetting, or a longing for "even more closeness" (Daniel Grieshaber, 45I, I1). Children also revived earlier habits, like sleeping in their parents' bed.

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3   All names are pseudonyms. Numbers in brackets indicate the case number (I stands for interview, D for diary), and the subsequent number indicates the consecutive number of the interview or diary (e.g., I1 = Interview 1). Some respondents provided more than one interview resp. diary during one wave of data collection (e.g., D11 is part of data collection wave 9).

The perceived impact on children's emotional well-being varied according to their ages. Young children seemed to be constantly preoccupied with the pandemic, incorporating it into their games: e.g., "the doll has to wear a mask too or the stuffed animals are vaccinated" (Antonia Wöss, 24D, D2). Children also reminded their parents of the containment measures: "You should keep your distance so the virus cannot hop onto another person, and you should not touch yourself with your hands because the virus could simply walk over" (Gregor Postner, 21D, D1). As the length of the first lockdown increased, parents of kindergarten-aged children feared that their children might forget about kindergarten routines, friends, and previously learned behaviors, like greeting habits or rules of conduct. Respondents with school-aged children noted decreasing motivation and increasing frustration with homeschooling in their children, which led to parent-child conflicts. Older children suffered from the lack of privacy and reduced options for social contact. For example, Natascha Markowitsch reported feeling sorry for her son, who "has reached puberty, when he should be slowly separating from us, and now he has less of a chance to do that" (03I, I1).

Social isolation was perceived as damaging for children's emotional health during the first lockdown, and even more so during the second lockdown. Children became increasingly listless, and expressed their emotions through moody behavior and higher aggression levels. Almost all parents reported having to deal with emotional outbursts from their children of all ages. As one parent put it: "the virus itself doesn't exist as a person, so she [daughter, 15 years] cannot get mad at the virus, so she gets mad at us" (Marina Marowski, 62I, I1). Some respondents also reported some positive effects of the isolation on their children's emotional well-being. For example, some respondents observed that not having appointments and activity classes decreased children's stress levels, and that spending more time with their parents and siblings at home made children more contented. However, it appears that these positive effects diminished with the duration of the isolation measures.

5.1.2 Physical consequences

During the lockdown phases, respondents were concerned about their school-aged children in particular getting too little exercise. Physical activities like family walks could not compensate for the amount of exercise children usually got at school and sports clubs. Parents noticed that the lack of exercise negatively affected children's ability to concentrate during homeschooling and when playing games that required concentration and focus.

A high priority was placed on food. During the lockdowns, parents prepared several meals a day, often with the aim of providing a healthy diet for their children. During the reopening phases, parents prepared special snacks for their children's schooldays, as no meals were distributed at school. However, snacks were also used as a reward. Therefore, some children had a healthier diet than they did at school, but often ate more and gained weight. Many parents noted that this weight gain affected their children emotionally, and made them feel uncomfortable or even unhappy.

When children returned to kindergarten or school after the lockdown, they were very exposed to coronavirus containment measures. Some children developed rashes on their skin from regular hand disinfection and intensive hand-washing, which one parent described as being "horrendous for children's skin, all that alcohol, [...] Rahel's [daughter, 6

years] hands look like an old woman's" (Adele Kolar, 04I, I8). Moreover, some parents perceived that decreased airflow from mask-wearing negatively affected their children.

5.1.3 Social consequences

During the first lockdown, respondents were concerned about how isolation would affect their children. While some respondents reported that having more intensive and exclusive contact with family members fueled conflicts, others observed that children's social skills improved (e.g., independent conflict resolution in sibling disputes, mutual support for homeschooling, new play routines), as they "have to learn to get along with each other, to hash things out, to find games they can play together, to find solutions" (Helena Müller, 19D, D1).

During the lockdowns, older children's social interactions shifted to digital channels, whereas using digital media to maintain social contacts was difficult for younger children, and led to frustration: "Rahel [daughter, 6 years] wanted to call her friend, then they were silent for the whole phone call. Two six-year-olds, a first grader and a kindergartener. [...] They love chatting with each other and usually talk about all kinds of stuff but it doesn't seem to work on the phone at all" (Adele Kolar, 04I, I1). After the first lockdown, respondents observed changes in their children's behavior toward other people. Children had to abandon hard-learned norms of politeness such as shaking hands in greeting, and flinched when other people came too close to them. Marlies Bruckner observed that her 11-year-old son developed "some kind of anxieties about getting close to people" (24I, I5). Parents of younger children reported changes in play behavior. Theresa Bader said her three-year-old son invented a new game, "catch without contact" (39I, I6), that he played with his friends. Respondents indicated that these and similar incidents made them aware that their children were becoming socially affected and that they developed their own creative ways of dealing with the experienced restrictions.

5.1.4 Educational consequences

In terms of educational consequences, parents of kindergarten-aged children were particularly worried about their children being cut off from social learning opportunities, as they did not see their peers during lockdown periods. They also feared that pre-schoolers were not involved in adequate preparation activities for their school entry. Respondents with school-aged children reported that their children saw the first period of homeschooling as a vacation ("coronavirus holidays"), and thus showed little commitment to school activities, with some needing intensive support from their parents. Parents of elementary school children reported early in the lockdown (i.e., in spring 2020) that their children had already forgotten basic skills, such as how to write letters or add figures. They also observed that their children became less attentive and less motivated to engage in homeschooling as the length of the lockdown increased. Indeed, some respondents reported that their children suddenly realized that they liked going to school.

During the first lockdown, hardly any lessons took place online, and schoolchildren of all ages had to learn how to work out new subject matters without the help of a teacher, which respondents described as being very stressful for their children. During the second lockdown, the work assignments demanded substantial amounts of time, and especially older students had to spend many hours in front of the computer or other technical devices

to complete their assignments as the schools were now better prepared for the situation and most of the teaching took place online. Despite recounting many negative experiences, some parents noticed that their children's organizational and digital skills had improved. Moreover, homeschooling periods gave parents a better understanding of their children's academic strengths and weaknesses.

Starting in the earliest stages of the pandemic, some parents with limited resources (e.g., money, time, space, language, formal education) said they were very concerned that their children's education would suffer because of their limited capacities to support homeschooling activities and to provide organizational help, pedagogic assistance, or technical equipment. Salwa El-Haddad explained: "My greatest concern was about the kids. I was worried that they will not learn enough at home and will miss too much. I cannot practice with them, as I do not speak the language so well" (06D, D11). Parents of elementary school children in particular said they were worried that their children were not learning effectively, and observed significant differences between face-to-face instruction and homeschooling. As the duration of the homeschooling phases increased, all parents said they were concerned about their children experiencing educational disadvantages due to homeschooling.

5.2 Experienced challenges

The respondents faced different kinds of challenges in accompanying their children through the crisis. The most commonly reported challenges are outlined in the following.

5.2.1 Explaining the pandemic and the measures

After the outbreak of the pandemic, a major challenge parents faced was having to explain the virus to their children, and to keep them sufficiently informed without overwhelming them. Nora Adam explained: "I think the greatest difficulty up to now is simply to comfort younger children, who just don't quite understand what's going on and only kind of know that something is off. To reassure and comfort them – 'No you're not going to die, I'm also not going to die' – and to protect them from this monster that they are not able to comprehend" (06I, I4). In terms of differences by age, parents of kindergarten-aged children reported that their children were too young to understand the extent of the crisis. They found it difficult to explain the pandemic in a child-friendly and age-appropriate way, especially when they knew little about COVID-19 themselves. Parents of elementary school children reported that the children often picked up insufficient or incorrect information from friends. Older children were sometimes unwilling to comply with the preventive measures, and their parents had to convince the children of their importance, and to "make them understand what is actually going on" (Mona Pirker, 63I, I1). Over time, the children's need for information about the virus decreased, and conversations between parents and children shifted to preventive measures. After the first lockdown, and especially during the summer of 2020, it was increasingly difficult for the respondents to explain the value of these measures, as fewer people were following to them. Andreas Fleischhacker reflected: "As far as I can see, social distancing isn't really happening anymore. How are you supposed to explain this to kids when, at the same time, thousands of people are attending demonstrations?" (02D, D9).

5.2.2 Handling emotions

Among the challenges respondents reported experiencing were difficulties in dealing with their children's and their own emotions. Parents noted that at the onset of the pandemic, fears about infection risks and food shortages were paramount. One respondent recalled going to the grocery store to buy "stuff like pasta and rice on stock, just to calm down my son [12 years]" (Natascha Markowitsch, 03I, I1). Parents found it particularly challenging to encourage their children to express their emotions, while suppressing their own pandemic-related fears. Peter Banik, for example, said he tried to keep his children at a distance without them noticing "because I am the only one that leaves the house. Maybe I got infected, nobody knows. That scares me a little, that I might get the kids sick somehow" (05I, I1). Respondents reported observing increased conflicts between parents and children and between siblings, noting that it was particularly difficult to deal with tensions, as previously established strategies for conflict resolution, such as taking time-outs or separating children, could not be employed during the lockdown phases. At the end of the first lockdown, and especially when the second curfew was announced, parents reported that their children's emotions changed from fear and anxiety to frustration and aggression, regardless of their age.

5.2.3 Managing new roles

During the lockdown phases, respondents had to develop new or expanded roles: they were parents, partners, wage earners, school teachers, kindergarten teachers, housekeepers, cooks, and playmates for their children. At the same time, parents had to cope with new demands at work (home office, changing working conditions). The pressure to take on all these roles, generally without external help, was very high, particularly for mothers who mainly overtook the bulk of the additional tasks. Moreover, the boundaries between the different areas were blurring, and "each area shows very little understanding of the others" (Rebekka Albescu, 28D, D5). Parents also made the experience that they cannot replace their children's friends and peers. Moreover, respondents had to face the limitations of their newly assumed roles, as their children frequently refused to acknowledge their parents' roles, particularly as teachers, which led to conflicts and frustration on both sides.

5.2.4 Accompanying children through repeated adaptation processes

Throughout the crisis, respondents had to deal repeatedly with the need to be flexible and to adapt. At the beginning of the first lockdown, parents had to support their children as they settled into homeschooling or were withdrawn from childcare institutions. The reopening phases required further adjustments in families' routines. Kindergarten-aged children had to go through another period of acclimatization, and respondents found this new acclimatization process – which was occurring under difficult conditions – much more demanding than the initial one. The usual goodbye routines were no longer possible, as parents were denied access to the premises, and thus had to leave their children at the entrance. This was emotionally stressful for children and parents: "It's really hard for me to drop off my daughter [4 years] at the kindergarten, when she's crying and doesn't actually want to stay there [...]. I sometimes don't feel like I'm doing a good job as a mother and

think a lot about how I could make it easier for her" (Bettina Wiesböck, 29D, D5). The gradual opening brought no relief, as school attendance was organized in shifts, with each child in a family having a different schedule of school and homeschooling days. This made organizing family routines and work requirements very challenging. Other problems arose when children's friends were assigned to different groups, which reduced children's motivation to attend school, and forced parents to take on yet another role of motivational coach. The next adaptation step was to move back into home care and homeschooling during the second lockdown. During this phase, children faced greater pressures due to higher performance demands and stricter schedules, and had far less leisure time.

5.3 Parents' strategies

Respondents developed different strategies for minimizing the potential negative effects of the pandemic on their children. Our analysis uncovered four distinct strategies relating to structure, cohesion, information, and independence.

5.3.1 Structure

As the first lockdown disrupted everyday family schedules, one key strategy was to structure everyday family life by maintaining or re-establishing the usual routines. This strategy was intended to help family members cope by providing orientation and stability. As Angela Rist explained: "Well, we don't want to cause any worries, because the situation is already strange enough for the kids. And I think that's when it's really, really important to stick to these routines and to give them some kind of reassurance" (10I, I1). Parents who employed this strategy imitated their family's regular pre-pandemic daily structures, which were guided by their children's school and childcare schedules, and by mealtimes. This strategy was predominantly broached by mothers, who usually felt responsible for managing their families' everyday lives and routines.

During the first lockdown, parents who employed this strategy woke up their children at the usual time, had them get dressed and ready to start the school/kindergarten day, and tried to stick as closely as possible to their usual habits and to school timetables. As the parent of a kindergarten-aged child explained, her aim was to maintain normality through structure: "We are copying the day-to-day life of kindergarten and everything we know about it as much as we can. Singing circle, snack breaks, drawing, cleaning up" (Franziska Kurz, 23D, D1). How rigorously parents applied this strategy varied, with some following a strict daily schedule, and others establishing reliable routines, but allowing for some deviations. At a minimum, parents tried to stick to the fixed school/kindergarten and recreation/leisure hours. During the reopening phase, respondents noticed that their children needed even more structure to compensate for the rather chaotic organization of face-to-face and remote learning phases: "It's horribly complicated and confusing for the kids. They have to adjust from being in a completely unfamiliar situation to being in a preliminary stage of normality, which is totally new and confusing for them. It's even pretty complicated for me" (Nina Kalcher, 30D, D4). Thus, parents showed flexibility in adapting structures, and distinguished between different kinds of routines. Marion Schmölzer explained that on homeschooling days "we stick to our COVID routine, and on regular days we stick to our routine like it used to be" (18I, I7). During the second lockdown, establishing a structure

proved to be even more difficult, as the increased number of online lessons meant that each child was following his/her own schedule, which had to be incorporated into the family's routine. Therefore, parents had to establish even stricter structures to facilitate shared family activities and time.

Overall, the respondents employed this strategy during the initial lockdown and adjusted it continuously in the course of the pandemic, as they were highly dependent on external circumstances. The relatively rigid structures during the first lockdown had to be flexibly interwoven into the fragments of pre-pandemic daily structures during the reopening phase. During the second lockdown, this structure had to be (re-)established even more strictly in order to coordinate the daily routines of all family members. This strategy was employed in families with children of all ages, although the concrete implementation differed somewhat. Younger children were given a daily structure by their parents, while older children were included in the process of establishing structures, and were supported in employing this strategy independently.

5.3.2 Cohesion

Another key strategy was to give children a reassuring feeling of family cohesion during times of uncertainty and fear. The intention in using this strategy was to create feelings of family togetherness, and to safeguard the family as a secure place. Parents' attempts to establish family cohesion were based on three main objectives that appeared to be important for children of all ages: having closeness, communication, and shared activities.

First, parents tried to establish cohesion through frequent and intense physical and emotional closeness; by, for example, creating space and time for more contact, or dedicating particular times of the day to cuddling. Second, parents actively emphasized communication, which allowed them to get a clearer picture of their children's emotions and experiences, and to discuss how they were dealing with the current situation. As Gabriele Kollmann explained: "When we go to bed, [the children] talk about what they enjoyed the most that day, and we also include what they did not enjoy as much, because I feel like you need to make an effort to notice what is bothering them and what do they want to change, right? But I also do this with my kids because I think it's a good idea to think about what went well. Did they even notice what went well, or were they more focused on negative aspects? That's why I think this is a really, really good idea and a good way to end on a high note" (01I, I4). Third, parents attempted to establish family cohesion through shared activities aimed at creating positive memories and at strengthening family ties. They initiated activities such as walks, hikes, board games, cooking, or movie nights; and hoped that their children "just remember the nice times we had together. We still do a lot of things together, that we usually wouldn't have time for. And I hope they understand how important it is right now to have a family and stick together" (Linda Oswald, 20D, D3).

The strategy of cohesion changed in the course of the pandemic. Respondents reported that after using it intensively during the first lockdown, they were finding it increasingly difficult to provide a sense of commonality to their children, and had to become more creative: "We're always trying to do new stuff. They're allowed to do all kinds of crafts and stuff like that outside" (Peter Banik, 05I, I1). As the pandemic progressed, children were less and less motivated to engage in conversations or joint activities with their parents. When peer contacts could be re-established, children's need for closeness decreased

somewhat, and parents spent less time initiating cohesion-generating activities. During the second lockdown, respondents again observed an increased need for closeness and conversation, but had difficulties establishing the same level of cohesion as in the first lockdown, as the conditions had changed: i.e., intensive homeschooling demands made it more difficult to spend time together, and parents were stressed and exhausted by their work, and by the constant need to adapt to the measures. Thus, the intensity of parents' efforts in employing this strategy was reduced.

5.3.3 Information

Another key strategy was to provide children with age-appropriate information about the coronavirus, and to responsibly manage and discuss their children's exposure to information. Especially during the first lockdown, respondents considered it important that their children knew about the COVID-19 pandemic: "They need to be informed. They have to know why they're stuck at home" (Bernhard Kronberger, 42I, I1). However, parents were worried about information overload.

To protect their children, especially younger ones, from false, frightening, or simply too much negative information, respondents preferred to provide the information in their own words, rather than exposing their children directly to media channels. By filtering their children's media consumption, they strived to ensure that their children had objective, high-quality information. Some parents tried to make the news accessible to younger children through their own experiences. For example, Ivana Matic visited a playground nearby with her children, so "they were able to see it in person, our playground is closed off" (02I, I2). Respondents also relied on digital media or on older siblings to optimize their explanations. Adrijana Novak recalled: "To be honest, I then went to Google to, well, look for explanations for children [...] and my older one [son, 8 years] really supported me, he also tried to explain it to his younger brother, [...] but together we did it, also with the help of my partner and my older son and by now he's got it, as much as a four-year-old can understand it" (14I, I1). Some parents tried to keep their children away from particular media channels or information they considered inappropriate for children: "I always send her [daughter, 9 years] to her room when the news from other countries is talked about. I think that's too much of a burden" (Charlotte Lehner, 50I, I1). Other parents consumed media together with their children of all ages to better understand the information they were being exposed to, and to be able to intervene with explanations if necessary. Some respondents with older children said they discussed the issues over a shared meal.

The strategy of providing information changed with the interest in news content, and was adjusted according to children's needs. At the beginning of the pandemic, the respondents focused on formulating child-friendly explanations of the COVID-19 pandemic. Over time, children's needs for information about the virus diminished, and parents instead focused on informing them about the current preventive measures related to kindergarten or school attendance. During the second lockdown, respondents complained of information fatigue, both for themselves and their children, even though they still provided their children with adequate information.

5.3.4 Independence

The tremendous changes in children's living situations precipitated a loss of agency and self-empowerment, as children became more dependent on their parents. Before the pandemic, children had significantly more opportunities to determine their own lives (e.g., choosing their friends, going to school unattended, having unaccompanied social activities). Therefore, respondents tried to promote their children's independence in different ways.

Some parents tried to foster their children's feelings of independence and responsibility by involving them in essential household or care tasks, or giving them responsibility for particular areas. Younger children set the table or helped with food preparation, older children did grocery shopping, learned to iron, or prepared meals independently. As well as contributing to their independence, this helped children acquire specific housekeeping and organizational competences. Some parents also encouraged their older children to help care for their younger siblings, or to support them with homeschooling tasks. Moreover, parents encouraged their younger children to practice their ability to make phone calls, aiming at fostering independent talks to their grandparents or friends. Others encouraged older children to use technical devices for homeschooling, and granted them autonomy in using social media. Even some parents who had been critical about extended media exposure before the pandemic adopted this strategy. Referring to her 13- and 15-year-old children, Gisela Sattler observed: "The kids spend a lot of time on the computer. I never thought that I would see this as a good thing, but yes, that's where they can connect with friends, which I think is quite nice" (32I, I2).

The strategy of fostering independence changed substantially over time. During the first lockdown, the use of this strategy fueled children's positive feelings and allowed them to acquire new skills. During the reopening phase, the strategy became less relevant, as children were able to resume their self-determination outside the household, and to regain some agency over maintaining their peer contacts. This strategy was less effective during the second lockdown, as children had already benefited from their parents' encouragement and from the additional technical and learning skills they had acquired during the first lockdown. Employing this strategy required varying degrees of parental support and confidence, depending on children's ages. Older children were able to regain some of the independence they had lost during the lockdowns, while children of all ages acquired additional skills.

In sum, respondents developed various strategies for supporting their children in coping with the pandemic. The strategies presented here were employed in every phase of the pandemic, were often used simultaneously, were adapted according to children's ages, and changed over time in line with the different pandemic-related measures. Over the course of the pandemic, respondents reported that their children had become increasingly burdened. Parents put their own needs on hold to support their children as much as possible, and put all their available energies into "trying to fulfill the needs of others and paying attention to that; that's why my energy depletes pretty quickly, and I feel exhausted or sad" (Regina Bartos, 14D, D5). Thus, respondents reported giving up their (already scarce) periods of "me-time" (Franziska Kurz, 23D, D1), shortening their sleep and regeneration phases, and economizing on time to eat themselves in an attempt to meet their children's needs.

6. Conclusions

The impact of the COVID-19 containment measures on the lives of parents and their children has been substantial, as the pandemic has affected nearly all areas of family life. Parents play a crucial role in supporting their children during difficult times, and have shown considerable abilities in guiding their children safely through the pandemic. The aim of this contribution was to analyze parents' experiences, concerns, and strategies in dealing with the effects of the pandemic on their children by relying on an Austrian qualitative longitudinal study with 98 parents of kindergarten- and school-aged children.

Respondents reported that the pandemic has negatively affected the emotional, physical, and social well-being, as well as the educational performance of their children. Indeed, the very few positive effects they mentioned diminished with the duration of the pandemic. Over time, changes in parents' concerns could be observed: i.e., while the detrimental emotional and social effects of the pandemic were dominant concerns at the beginning of the first lockdown, physical consequences became increasingly important later on. After several weeks of homeschooling, respondents were seriously concerned about their children's educational progress, and these worries increased over time. During the second lockdown, parents' concerns about their children again focused strongly on the emotional and social consequences of ongoing isolation. Respondents experienced numerous challenges (explaining the virus and the measures; handling emotions; managing new roles; accompanying children through repeated adaptation processes), and developed different strategies for dealing with the potential negative effects of the crisis on their children. Four distinct strategies could be retrieved: respondents established reliable structures in their everyday family life; fostered feelings of family cohesion; provided adequate information; and promoted children's independence. Over time, the use of these strategies required permanent adaptation, as parents were highly dependent on political decisions that often came at very short notice – a cycle they found demanding and exhausting.

The perceived impact on children's emotional, physical, and social well-being varied according to their age. In terms of emotional consequences, from parents' perspectives, younger children were constantly preoccupied with the pandemic, and parents feared that the long duration of lockdowns would cause them to forget about 'normal' family structures and routines. For their older children, the respondents raised concerns that they especially suffered from the lack of privacy and options for activity outside the family household. Parents also considered physical consequences of the pandemic, such as inactivity and weight gain, to be problematic. Social consequences for their offspring were perceived as burdensome for children of all ages, even though older children had more opportunities to maintain at least some of their social contacts online. Moreover, concerns about children's learning outcomes and educational disadvantages were raised. In terms of socio-economic differences, the data clearly indicated that socio-economically disadvantaged parents raised concerns about educational disadvantages for their children at a much earlier point in time than well-off parents, which indicates that they experienced such worries over a much longer period of time. In the sample at hand, we retrieved no systematic gender-related patterns in terms of how mothers and fathers perceived their children's situation during the pandemic or how they attempted to support them.

This study shows that parenthood during the COVID-19 crisis has been stressful, and that parents have been dealing with an enormous range of anxieties about their children. The respondents were also called to develop and establish diverse strategies for helping their children cope with the effects of the pandemic. The results clearly point to the importance of having stable daily family routines. Parents with children of all ages attempted to structure their everyday family lives by maintaining or re-establishing the usual routines. Older children were included in the process of structuring and were supported in their independent application of this strategy. Moreover, the strategy of cohesion was of particular importance: fostering a sense of family togetherness, and actively promoting happiness, serenity, and positive moments, were considered to be important components of creating a reassuring family environment for children of all ages during difficult times. In terms of parents' information strategy, the respondents experienced different challenges depending on their children's age, and strived to provide age-appropriate information for younger children, while aiming at protecting their older children from false information through regular family conversations. Overall, the respondents were trying to develop an approach for providing their children with meaningful information during the pandemic, while acknowledging them as active agents. Parents with children of all ages employed the strategy of independence, trying to foster their children's agency and feelings of autonomy, which have been substantially limited during the pandemic.

Parents have been making substantial contributions to society by creating safe and even pleasant spaces for their children at home, while dealing with the threats and difficulties associated with the pandemic. Respondents shouldered several large burdens simultaneously, and clearly prioritized their children's needs over their work demands or their own individual needs, which often resulted in exhaustion. Therefore, we should acknowledge that parents' capacities to support their children are limited, even as the pressure to act responsibly and to adapt flexibly to difficult circumstances has risen significantly as the crisis has continued. The pandemic should not be regarded as "a type of acid test that distinguished between capable and incapable parents" (Auðardóttir & Rúdólfsdóttir 2021, p. 173), as this would foster feelings of shame and guilt if parents are unable to fully meet the challenges they are facing. Rather, it is important to acknowledge parents' enormous achievements and contributions.

Even as we recognize parents' resiliency, we should acknowledge that many families will need help and support in surmounting the difficulties associated with the COVID-19 crisis. It appears that the pandemic will be with us for some time to come (Philipps 2021). As the crisis has already led to increased social inequalities and long-term problems associated with periods of enforced isolation, governments should seek to reduce the severity of the long-term effects of the pandemic by recognizing the needs of parents, children, and families; developing adequate policies and support measures; and providing sufficient support. Thus, the crisis may represent an opportunity to develop solidarity, connectedness, and strong relational bonds.

As every research, this study also has some limitations. First of all, we did not question children themselves, although it would be particularly instructive to listen to their views on the pandemic and its effects on their lives. However, this approach was not feasible for organizational and ethical reasons, given the rapid implementation of this study at the onset of the pandemic. Moreover, rich data could have been gathered by employing a multiple-

perspectives design and including the viewpoints of several family members at first hand. Due to time and resource restrictions, we did not implement such research design. The data presented here has the advantage to grasp the respondents' viewpoints repeatedly in real time, which allows to develop a complex understanding of experiences, processes, and dynamics. Future research will be required to gain a deeper understanding of the long-term consequences of the pandemic, and of the experiences of different family members over time. This knowledge will be essential to develop policies that offer adequate support for children, parents, and families.

Acknowledgments

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Information in German

Deutscher Titel

Was macht Corona mit unseren Kindern? Eltern in Österreich und ihr Umgang mit den Auswirkungen der COVID-19 Pandemie auf ihre Kinder

Zusammenfassung

Fragestellung: Diese Studie untersucht die Erfahrungen von Eltern im Umgang mit potentiellen negativen Auswirkungen der Pandemie auf ihre Kinder. Sie expliziert, (1) wie Eltern die Situation ihrer Kinder während der Pandemie einschätzten; (2) welche Herausforderungen Eltern in der Begleitung ihrer Kinder durch die Krise erlebten; und (3) welche Strategien sie entwickelten, um ihre Kinder im Umgang mit der Pandemie zu unterstützen.

Hintergrund: Die COVID-19 Pandemie und die begleitenden Schutzmaßnahmen stellen hohe Anforderungen an Eltern und Kinder. Vorliegende Studien zeigen, dass beide Gruppen aufgrund der erforderlichen Anpassung von Alltagsroutinen, während der sich rasch ändernden Rahmenbedingungen, Stress erleben.

Methode: Die Datenbasis bildet eine österreichische qualitative Längsschnittstudie, basierend auf Interviews und Tagebucheinträgen von 98 Eltern mit Kindern im Kindergarten- und Schulalter. Die Eltern wurden seit der ersten Woche des ersten landesweiten Lockdowns wiederholt befragt (neun Datenerhebungswellen zwischen März und Dezember 2020). Die Datenanalyse erfolgte mittels einer Kombination aus Themenanalyse und dem Grounded Theory Kodierschema.

Ergebnisse: Die Ergebnisse zeigen, dass die befragten Eltern überwiegend negative, und nur sehr wenige positive, Auswirkungen auf ihre Kinder, in Bezug auf emotionales, physisches und soziales Wohlbefinden sowie schulische Leistung, sehen. Die befragten Eltern erlebten eine große Bandbreite unterschiedlicher Herausforderungen (Erklärung der Pandemie und der Maßnahmen; Umgang mit Emotionen; Management neuer Rollen; Begleitung der Kinder durch wiederholte Anpassungsprozesse). Im Umgang mit diesen Herausforderungen entwickelten die befragten Eltern vier unterschiedliche Strategien (Struktur, Zusammenhalt, Information und Unabhängigkeit).

Schlussfolgerung: Eltern erbringen substanzielle gesellschaftliche Beiträge und nehmen hohe Belastungen auf sich, um ihre Kinder durch die Krise zu begleiten. Ihre Kapazitäten, alle kindlichen Bedürfnisse abzudecken, sind allerdings limitiert. Um negative Langzeitfolgen zu vermeiden, ist es daher essenziell, ausreichend Unterstützung für Kinder, Eltern und Familien zur Verfügung zu stellen.

Schlagwörter: COVID-19, Kinder, Eltern, Stresstheorie, qualitative Längsschnittstudie

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