Parent–Child Relationships and the COVID-19 Pandemic: An Exploratory Qualitative Study with Parents in Early, Middle, and Late Adulthood

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Abstract
The impact of the COVID-19 pandemic on families is currently unknown. Parents and children have experienced a variety of changes as public health interventions have been implemented to slow the spread of the virus. The current exploratory qualitative study recruited parents (n = 365) in early (ages 20–34), middle (ages 35–64), and late (ages 65 and older) adulthood to understand how the early weeks of the pandemic influenced their parent–child relationships. Participants completed an online survey between March 21 and 31, 2020. Three themes emerged through qualitative content analysis: (1) relational steadiness, (2) navigating COVID-19 challenges in relationships, and (3) relational enhancement.

Keywords Parenting · Parent–child relationships · COVID-19 · Qualitative · Pandemic

Parent–child relationships are lifelong, generally only “partially voluntary” and “based on interconnected experiences in the past and the expectation of interconnected experiences in the future” (Trommsdorff, 2006, p. 147). Taking a contextual view on parent–child relationships across the lifespan is critical as changes occur in the larger social and physical environment. A recent contextual change was the emergence of the novel coronavirus (COVID-19), which was declared a national health emergency in the United States on March 13, 2020 (The White House, 2020). Throughout history, families have experienced expected and unexpected crises, and families have varied in how they have weathered these crises (Vaux & Asay, 2019). The current study was designed to explore parents’ perceptions of how the early weeks of the COVID-19 pandemic influenced their parent–child relationships.

Theoretical Framework
From an Ecological Systems perspective, humans develop through bidirectional interactions within concentric ecosystems (Bronfenbrenner, 1979, 1994). These systems include micro-, meso-, exo-, macro-, and chronosystems. The microsystem involves the enduring, day-to-day interactions, which includes the parent–child relationship (Bronfenbrenner, 1979). The mesosystem includes the interactions between two microsystems (e.g., parent–child microsystem and school–child microsystem), the exosystem represents an environment that influences the developing human, but they are not directly involved (e.g., a parent’s employment), and the macrosystem includes the cultural and societal values in which the developing human is embedded. Finally, the chronosystem accounts for time and the sociohistorical conditions in which development occurs (Bronfenbrenner, 1994).

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Adults experience typical changes in their ecological system levels across early (e.g., romantic relationships and family formation, education, and career selection), middle (e.g., career development/satisfaction, parenting, launching children, caregiving to aging parents), and late (e.g., retirement for many, grandparenting) adulthood (Bjorklund, 2015). These changes over time (chronosystem) influence the role of parents (initially meeting basic needs and then supporting individuation as children grow into adulthood) and children (initially dependent on parents, developing independence from parents, and potentially providing care for aging parents) within the parent–child microsystem (De Vries et al., 2007; Stormshak et al., 2018). The chronosystem also accounts for the atypical sociohistorical conditions that affect human development, which would include the declaration of the COVID-19 pandemic in March 2020 (The White House, 2020).

At the beginning of the COVID-19 pandemic, at exo- and macrosystem levels, non-pharmaceutical public health interventions were implemented to slow the spread of the virus (Mervosh et al., 2020; Singh et al., 2021) and there was uncertainty about the virus and potential duration of the pandemic (Koffman et al., 2020). Menter et al. (2020) explained:

The COVID-19 pandemic has resulted in widespread impact on the daily lives of children and their parents. Human development occurs within interactive systems, and thus, disruptions such as those attributed to COVID-19 across multiple systems may impact children and families. (p. 12)

The current study focused on experiences within the parent–child relationship (microsystem) in the context of the onset of the COVID-19 pandemic (chronosystem). Capturing the experience of parent–child relationships in the early weeks of this pandemic could provide knowledge related to how best to support parents and children in the onset of potential future public health crises.

### Parent–Child Relationships and COVID-19 Pandemic

Parents and children have likely experienced a variety of changes as a consequence of the COVID-19 pandemic (Prime et al., 2020). To slow the spread of the virus, public health interventions were implemented, and by March 23, 2020, 43 states had state-wide (or parts of states) stay-at-home orders (Mervosh et al., 2020). This led to changes for parents and children as schools and childcare agencies closed, work expectations shifted, and socializing opportunities became restricted (Brown et al., 2020). This resulted in “profound changes to family routines and rituals that are often taken for granted,” but there was likely “considerable variability” in the ways families were impacted in the early weeks of the COVID-19 pandemic (Prime et al., 2020, p. 634).

Many parents of school age children found themselves balancing working from home while caring for and educating their children (Brown et al., 2020; Goldberg et al., 2021; Griffith, 2020; Hiraoka & Tomoda, 2020). However, this balancing of new roles may be different for father–child and mother–child relationships. Although father engagement in childcare responsibilities and time spent with children has been increasing, mothers continue to spend more time with children and do more of the childcare responsibilities (Parke & Crookston, 2019). In general, during the pandemic, parents have had to increase their time spent caring for their children, but mothers have continued to spend more time on childcare responsibilities than fathers and have also experienced a higher likelihood of reducing work hours, transitioning out of the workforce, and experiencing higher psychological distress (Zamarro & Prados, 2021).

It is unclear how these new roles might have influenced parent–child relationships, but it is possible with limited interaction outside the home and parents taking on more roles in their children’s lives that there could be increased strain on parent–child relationships. For instance, in qualitative pandemic research, adolescents ($m_{\text{age}} = 16.28$) indicated that they felt isolated and some reported arguing more with their parents (Scott et al., 2021). Further, the quality of parent–child interactions with young children could have also potentially declined during the pandemic as mothers of young children have been reported to be at higher risk for parenting-related exhaustion (Marchetti et al., 2020). Although, parent–child relational experiences may have been more typical earlier in the pandemic because there was not a clear perspective on the potential duration of the pandemic.

Parents and children of all ages may have experienced increased social isolation, economic challenges, and limited access to supportive resources (Prime et al., 2020). Adults over the age of 65 are at higher risk of getting seriously ill or dying from COVID-19 (Centers for Disease Control and Prevention [CDC], 2020b; Shahid et al., 2020). Parents in late adulthood may have also experienced disrupted family routines in order to stay protected from contracting the virus—especially those grandparents providing care for grandchildren while their adult children work (Kirby & Hoang, 2018) and older adults receiving care from their adult children (Wilson, 2018). Parents in late adulthood may have also experienced more demonstrations of concern from their children during the pandemic as adult children “transition from the one being protected in the relationship to the one who is doing the protecting” (Mercier et al., 1997, p. 186). In emerging qualitative research with older adults during the pandemic, participants reported that they were
worried about their adult children’s health and were missing their families (Whitehead & Torossian, 2021). Although, these same older adults reported that they were still connecting with family and friends via technology during the pandemic. Women in late adulthood reported higher rates than men in viewing digital communication as a source of joy during the pandemic.

At present, research with parents during the COVID-19 pandemic has primarily focused on parenting stress (Brown et al., 2020; Hiraoka & Tomoda, 2020) and burnout (Griffith, 2020) of parents of school age children. Brown and colleagues (2020) indicated that parents did experience changes in mood and increased general stress levels during the COVID-19 pandemic, which is problematic because these parents also likely had lower access to support from external sources. Potential risks of increased parental stress have been reported to be child abuse (Brown et al., 2020) or decreased parent–child relational quality due to “coercive cycles in parent–child interactions” (Prime et al., 2020). As research on the COVID-19 pandemic and parent–child relationships continues, there would be value in expanding research beyond parent–child relationships with school-aged children and to begin to understand parent–child relationships across the lifespan.

**Purpose of the Current Study**

There will be individual and relational differences in how parents are influenced by the COVID-19 pandemic (Prime et al., 2020). It is also likely there will be different experiences at the beginning, middle, and end of the pandemic. For instance, the public health measures were stricter in the early weeks/months (Mervosh et al., 2020), and there was unknown information about the virus. The current exploratory study was designed to understand how parents perceived their parent–child relationships were influenced by the early weeks of the COVID-19 pandemic. Consistent with previous conceptualizations of adulthood age groups (Mackenzie et al., 2012), experiences of parents were examined by early (ages 20–34), middle (ages 35–64), and late (ages 65 and older) adulthood.

**Methods**

**Sample**

Participants included 365 adults ($n = 142$ men; $n = 223$ women; $m_{age} = 43.56; sd = 13.41$) from 44 states in the United States (Alaska, Delaware, Hawaii, Rhode Island, Vermont, and West Virginia not represented). Participants reported having between one and eight children ($m = 2.52, sd = 1.34$). Parents indicated that they had between zero and seven children ages 18 and under currently living with them ($m = 1.65; sd = 1.44$). See Table 1 for sample characteristics.

**Procedures**

Study procedures were approved by a university Institutional Review Board. This study is part of a larger study on wellbeing during the COVID-19 pandemic (see Vaterlaus et al., 2021). Data were collected in two ways: snowball sampling through social media with a gift card raffle incentive and through Prime Panels (www.cloudresearch.com), which is an established way of recruiting diverse community samples (Chandler et al., 2019). All participants completed an online survey administered through Qualtrics (www.qualtrics.com) between March 21 and 31, 2020. To check for understanding and refine the survey, the survey was piloted with 20 adults prior to data collection. Various strategies were used with the online survey to ensure data quality (e.g., inclusion of open-ended items, raffle incentive vs renumeration for all, embedded directive items: Pozzar et al., 2020). Sample inclusion required the participant to have at least one child. Initially, 663 participants completed the survey, and 221 were excluded because they did not report having children, 14 additional participants did not provide enough information to be included (e.g., did not indicate if they had children in the survey), and 63 of surveys were excluded because they did not meet the established data quality requirements.

**Data Collection and Analysis**

The survey asked for demographic information and level of social distancing. Additionally, participants reported how many children they had and how many were 18 years or younger and living with them. Participants were asked an open-ended item: *How would you say the coronavirus (COVID-19) pandemic has (or has not) influenced your relationship with your children?* Data were organized by parent age group: early adulthood (ages 20–34), middle adulthood (age 35–64), and late adulthood (ages 65 and older).

A conventional qualitative content analytic approach was selected for this study (Hsieh & Shannon, 2005). This qualitative analytic approach is used to “describe a phenomenon” through gaining “direct information from study participants without imposing preconceived categories” and is described as an inductive method (Hsieh & Shannon, 2005, pp. 1279–1280). This was an appropriate approach as the goal was to understand how parents perceived their parent–child relationships were influenced by the early weeks of the COVID-19 pandemic—allowing the codes and themes to “flow from the data” (Hsieh & Shannon, 2005, p. 1279).
The two researchers who conducted the qualitative analysis had previous training and experience in qualitative analysis. Consistent with qualitative conventional content analysis (Hsieh & Shannon, 2005), two researchers independently immersed themselves in the data to identify key words and ideas. The two researchers then met together and identified and defined 14 coding categories that represented participant experiences. To evaluate the utility of the coding scheme, the researchers initially coded 20 responses independently, compared coding decisions, and then made necessary refinements to coding rules/definitions. The two researchers then independently coded the full dataset (88.65% agreement), and coding disagreements were resolved through discussion. In line with qualitative conventional content analysis (Hsieh & Shannon, 2005), the two researchers reviewed the similarities within codes and identified three key categories or themes that represented the participants' experiences.

To further enhance the trustworthiness of the results, member checking (i.e., asking a selection of participants to review the completed results section for accuracy) was used (Creswell, 2013; Vaterlaus et al., 2014). At the conclusion of the survey, participants who were recruited through
snowball sampling (Prime Panels does not allow collection of personal information) were directed to a separate survey where they could document their participation for the incentive. This survey also had an item that explained member checking and invited participants to provide their email address if they were willing to review the completed results and provide feedback via email. Ten of the participants who volunteered were selected at random and emailed the complete results section to consider how the results represented their own experience, their peers’ experiences, and to make any recommended changes. Participants indicated that results did represent their own/their peers’ experiences.

Results

Participants’ experiences in parent–child relationships during the early weeks of the COVID-19 pandemic were represented in three themes (see Table 2): (1) relational steadiness, (2) navigating COVID-19 challenges in relationships, and (3) relational enhancement. Themes are presented in order of prevalence. Participant gender, age, and employment status (i.e., full time, part time, homemaker, student, unemployed, retired, and disabled) are shared parenthetically with direct quotes to provide context. Within each theme, the results are discussed by adult age group.

Relational Steadiness

Participants reported that their parent–child relationships remained steady during the early weeks of the COVID-19 pandemic. Young and middle-aged adults explained that they were “now spending more time with my children than before due to the coronavirus pandemic” (male, 41, full time), “but how we behave and interact [in our parent–child relationships] hasn’t changed” (female, 36, full time). Older adults did not report more time with their adult children during the onset of the pandemic but did report that there were “no changes” in their parent–child relationships.

Young Adults

Participants within this age group emphasized that the early weeks of the pandemic had “not influenced my relationship with my children” (male, 23, full time), “things [in my parent–child relationship] are about the same” (female, 28, part time), or “it really hasn’t taken a toll on my [parent–child relationship]” (male, 33, unemployed). Young adults explained that they were spending more parent–child time together, but more women (40.58%) than men (27.03%) reported this. Most participants indicated that this increased time was not affecting their parent–child relationships because their children were young (e.g., “infant”, “toddler”, “3-year-old”, “my oldest is six almost seven”) and already required more parental time and attention and were unaware of “what’s going on in the world” (male, 32, student).

Middle-Aged Adults

Participants in the middle-aged adult age group explained that the pandemic had “no impact on my relationship with my children” (male, 40, full-time). The participants explained that they had established quality parent–child relationships prior to the pandemic, and this did not change at the onset of the pandemic. Commenting on the parent–child relationships prior to the pandemic, participants shared that, “I feel that we had a good [parent–child] relationship before COVID-19” (female, 38, homemaker) or “We have a close [parent–child] relationship already” (female, 40, full-time) and that the changes related to the pandemic have not influenced their relationships. For example, a mother (48) who was full-time employed explained, “My son is an 18-year-old senior in high school. Prior to the pandemic, we were really close. COVID-19 has not changed this.”

Some middle-aged adult participants (10.59% men; 19.57% women) acknowledged that there was a change in the quantity of time they spent with their children during the early weeks of the pandemic—“I have more time to be with [my children]” (female, 36, part time). This was reported more by participants who were part-time employed (76.92%) or homemakers (47.83%) than those who were unemployed (37.50%) or full-time employed (34.06%). However, participants did not feel that this increased time had influenced their parent–child relationships. Participants explained, “We’ve had more time to spend together because we are under quarantine, but the nature of our relationship is still the same” (female, 36, homemaker), and “It hasn’t really affected our relationship. I’ve gotten more time for them” (male, 39, full time).

Older Adults

Participants in late adulthood (60.00% men; 25% women) contributing to this theme reported that the early weeks of the pandemic had “no influence,” “no effect,” or led to “no changes” in their parent–child relationships. These participants further explained that “my children are all adult...
Table 2 Results from a qualitative content analysis: parent (n = 365) perceptions of how the early weeks of the COVID-19 pandemic influenced their parent–child relationships

| Code | Total (n = 365) | Young adults (n = 106) | Middle-aged adults (n = 223) | Older adults (n = 36) | Representative quotes |
|------|----------------|------------------------|----------------------------|----------------------|-----------------------|
|      | n   | %   | n   | %   | n   | %   | n   | %   |                         |
| Theme 1 relational steadiness | | | | | | | | | |
| No change in relationship | 110 | 30.14 | 31 | 29.25 | 63 | 28.25 | 16 | 44.44 | “[The pandemic] hasn’t really affected our relationship” (male, 39, full time) |
| Quantity of time spent together | 110 | 30.14 | 38 | 35.85 | 72 | 32.29 | 0 | 0.00 | “My children are spending more time with me every day” (female, 41, disabled) |
| Theme 2 navigating COVID-19 challenges in relationships | | | | | | | | | |
| Covid-19 concerns | 55 | 15.07 | 16 | 15.09 | 34 | 15.25 | 5 | 13.89 | “I come home. I wash myself. I avoid unnecessary touch with my children.” (male, 41, full-time) |
| Social distancing | 54 | 14.79 | 14 | 13.21 | 30 | 13.45 | 10 | 27.78 | “It’s harder because we can’t do a lot of our usual out of the house activities” (female, 29, part time) |
| Balancing Roles/New Roles | 47 | 12.87 | 17 | 16.04 | 29 | 13.00 | 1 | 2.78 | “I am still expected to work full time virtually, and without school I either pay for 2 more children in daycare ($50 more/day) or they stay home with me and watch a lot of tv so I can work. I am also staying up later at night to work, which makes me tired” (female, 33, full time) |
| Lack of patience | 23 | 6.30 | 12 | 11.32 | 11 | 4.93 | 0 | 0.00 | “My stress has decreased my patience a few times and I responded [to my children] more sharply that I have historically.” (female, 43, full time) |
| Too much time together | 13 | 3.56 | 9 | 8.49 | 4 | 1.79 | 0 | 0.00 | “Not having space and others to talk to is driving [me and my children] a little crazy” (male, 31, full time) |
| Screen time | 8 | 2.19 | 3 | 2.83 | 5 | 2.24 | 0 | 0.00 | “We have streamed a TON of content” (female, 51, full time) |
| Employment and financial concerns | 6 | 1.64 | 0 | 0.00 | 5 | 2.24 | 1 | 2.78 | “Our child lost their job due to the virus.” (female, 48, full time) |
| Coping with boredom | 5 | 1.37 | 3 | 2.83 | 2 | 0.90 | 0 | 0.00 | “They are getting bored easily” (female, 29, part time) |
| Theme 3 relational enhancement | | | | | | | | | |
| More quality time | 60 | 16.44 | 24 | 22.64 | 36 | 16.14 | 0 | 0.00 | “The pandemic has given me more time to bond with my child” (female, 24, student) |
| Improvements in relationship | 49 | 13.42 | 13 | 12.26 | 32 | 14.35 | 4 | 11.11 | “The pandemic is making us more compassionate with one another” (female, 35, full time) |
| More Technology-based Communication | 29 | 7.95 | 0 | 0.00 | 19 | 8.52 | 10 | 27.78 | “My daughter and I are in touch by phone or text more often than usual.” (female, 69, retired) |
| More creative activities | 24 | 6.58 | 9 | 8.49 | 15 | 6.73 | 0 | 0.00 | “I am getting more creative with the things we do at home” (female, 29, homemaker) |

Young adults: ages 18–34; Middle-aged adults: ages 35–64; Older adults: ages 65+; gender, age, and employment status follow quotes to provide context

children” (male, 72, retired), “my children are grown” (female, 73, retired), and “none of our children live with us” (female, 67, full time). Although parent–child relationships were reported as having “always been close” (female, 73, retired), there was already physical distance in the parent–child relationship prior to the pandemic so “our [parent–child] relationship has really not changed” (male, 65, full-time). Emphasizing this point a participant shared, “[the pandemic] has not affected the [parent–child] relationships. One of our children lives in Spain and the other in Hawaii, while we (the parents) are in California” (male, 66, retired). As adult children were not living with their parents and there was physical distance prior to the pandemic, no older adult participants reported spending more time with their children as a result of the early weeks of the pandemic.
Navigating COVID-19 Challenges in Relationships

Participants reported that the COVID-19 pandemic increased fear, anxiety, uncertainty, and stress. Further, the affiliated non-pharmaceutical public health interventions resulted in restricted activities, stay-at-home orders, and new or revised roles. Participants explained that these pandemic generated experiences posed challenges that had to be navigated within parent–child relationships.

Young Adults

Participants indicated that there were a lot of unknowns at the onset of the pandemic, and they were prioritizing keeping their children “safe” and “doing the best I can to protect them” (male, 25, full-time). Young adults (13.51% men, 15.94% women) explained that time spent in the parent–child relationship involved teaching their children about methods to decrease “spreading germs” (e.g., hand washing, limiting physical contact) and specifically having to navigate social distancing expectations (e.g., “staying home”; 10.81% men, 14.49% women). Participants reported that their children were frustrated with them because they wanted to “go places,” were “missing friends,” and were “getting bored” and “stir crazy” from having parents as “their only social interaction right now” (female, 29, part time). A mother (30, part time) shared, “I had to spend a lot of time explaining to my 4-year-old why t-ball, preschool, church, and his birthday party were cancelled.”

Participants stated that children and parents experienced “anxiety” and “stress” around the virus and public health interventions, and this led to “concern,” “less patience,” and “tension” in the parent–child relationships. Some older children experienced anxiety about the virus itself and parents were trying to navigate how to address children’s fears. A participant (female, 34, full-time) explained that she was trying to figure out how best to address her son’s fear because, “My oldest is struggling with the 'virus' talk. It is scary to him because he does not understand the entire context, and when he hears taglines like ’15 people died today’ it is scary.” Participants worried about how their own fear and stress were influencing their parent–child relationships. They realized they were using “screen time” to entertain children, taking less time to “play with kids,” and using “more emotional responses to children’s misbehavior instead of teaching responses” (female, 27, part time). A participant disclosed (male, 31, full time):

I have become more fearful in general and more irritable. More prone to yelling. I try to apologize and make things right with my kids, but at the very least they see my tension and fear which I pray is not damaging.

Adding to the stress and strain on the parent–child relationships, young adults reported (7.9% full time employed, 11.11% part time employed, 30.30% homemaker, 18.75% student, 50% [n = 2] disabled) having to provide care for their children all day and assist older children with their schooling (e.g., “having to be engaged full time in their learning, as schools have been closed” [female, 31, homemaker]). This required finding a new balance for many as they were also working or completing schooling from home. More women (20.28%) than men (8.1%) reported having to find balance in these roles.

Middle-Aged Adults

Participants indicated that they were working to navigate COVID-19 concerns (12.74% men, 16.67% women) and social distancing expectations (15.29% men, 12.32% women) in their parent–child relationships, which meant they “had to answer some tough questions” (female, 38, full time) from their children as they learned to “take and stick to measures stipulated by the CDC” (male, 40, full time). Having to enforce adherence to public health guidelines and having a lot of parent–child time reportedly led to more parental and child frustration for middle-aged adults. Participants explained, “It’s stressful communicating with my 3 children in their 20’s about the importance of social distancing” (female, 49, full time), and “[My son] believes COVID-19 is a government conspiracy and is frustrated that I don’t agree” (female, 53, full time).

Parents had to help children cope with the loss of events, social activities, the consistency of school attendance/moving home to complete college remotely, and adult children losing jobs while both parents and children experienced “fear,” “uneasiness,” “anxiety,” and “concern.” A mother of six children (38, homemaker) elaborated

The youngest are not understanding why they can’t play at the neighbor’s house or why we are staying home day in and day out. Our older 3 are concerned, and helpful. Our 11-year-old had spent the last six months earning money to tour Italy with some other students from his school as well as his dad. That trip was cancelled, and spring break has been spent at home. The rain is needed, but also isolating at this time. We are up and down with our patience and understanding with each other [in the parent-child relationships].

More middle-aged adult women (19.57%) than men (2.35%) reported having to figure out how to balance their different professional, family, and new roles during the early weeks of the pandemic. Participants who were homemakers (30.43%) reported this more than those with other employment statuses (11.59% full time employed; 12.82% part time.
employed; 12.50% \( n = 1 \) unemployed). A mother (40, full time) shared: "Things are strained in our [parent-child] relationships due to working from home in addition to trying to supervise four kids (two infants). I think the older kids find us to be irritable at times, but when we’re not working, we’re making extra effort to focus on them. We’re having … more strained and tense moments."

A grandmother (61, full time), who had adult children who had to continue working without the availability of school or childcare, had to take on new roles to support her children because she could work from home. She explained that her grandchildren were brought to her house, and “I am now the childcare provider, homeschool teacher, online teacher [her professional position], chief cook, and bottle washer. This is no exaggeration. I have grandkids that are 12, 4, 2 and 11 months.” Further, participants reported more parent–child relationship challenges as they took on ensuring their children completed their schoolwork at home—“teenagers have online courses and are not doing their part to keep up—requiring me to ‘hound’ them a bit more than I’d like” (female, 36, full time).

**Older Adults**

Where young and middle-aged adults reported spending more time or too much time with their children, older adults (20% men, 37.50% women) expressed that social distancing had decreased the time they physically spent with their adult children—“[My adult children] don’t visit now” (male, 68, retired) and “We are not able to get together as often as we did [before the pandemic]” (female, 67, homemaker). Older adults explained that they and their adult children had concerns about COVID-19 particularly related to older adults being “considered high risk” for serious complications with the virus. Older adults especially reported that they and their adult children were “being more cautious,” “can[c]el[ed] family gatherings,” and “visit[ed] in the yard at a distance” out of concern for each other’s health and safety.

Some adult children were reported to be insistent about their parents’ practice of social distancing. A participant (72, retired) shared, “[My son] won’t let me go anywhere because of my age and my health.” Another participant (female, 67, disabled) explained that she and her husband “usually watch the grandchildren,” but because of the pandemic, they had discontinued this as “they [the adult children/grandchildren] are self-quarantining away from us”.

Apart from health concerns related to COVID-19, an older adult (female, 69, full-time) also expressed concerns about employment for one of her adult children. She explained that she had two adult children, “One has lost his job. It is very stressful, and he will need our support. My other son is doing fine as he lives with his partner and both are currently employed.”

**Relational Enhancement**

Some participants shared that they experienced enhancements in their parent–child relationships during the early weeks of the pandemic. There was an opportunity for more quality in-person time in early and middle-aged adult parent–child relationships. Older adults experienced more technology facilitated connection with their children.

**Young Adults**

Despite the unknowns and stress of the pandemic, some young adults expressed that their parent–child relationships had improved (16.22% men, 10.14% women) and that they were able to spend more quality parent–child time together (27.03% men, 20.29% women). More quality parent–child time during the early weeks of the pandemic was reported by those who were homemakers (40.00%) or full time employed (26.32%), but some full-time students (18.75%) and part-time employed (7.41%) individuals shared this perspective.

One mother (32, homemaker) reported feeling "more grateful for the little things, like snuggling [my son] before naps or kissing him before bed" and a father simply stated that the increased [parent–child] time together, “[during this pandemic has] helped us draw closer together” (male, 32, full time).

Young adult women (13.04%; 0.00% men) found creative ways to engage their children through increased educational and enrichment activities. A mother (31, homemaker) stated, “I have become a lot more creative in things [during pandemic restrictions]. I find myself concentrating on teaching [my children] more academic things. (They are [ages] 2 and 4).” Other participants reported bonding through more play time. For example, a mother described, “we have a lot more time to cook nice meals and play Legos together” (female, 32, homemaker). Participants explained that in addition to more quality time spent together, they had also been more reflective in their parenting role, which led to improvements in their parent–child relationships. A mother (33, homemaker) shared:

It has been tricky to know if we need more structure or less structure. … But we’re not overwhelmed. I’m taking things easy and slow for them. I feel like this is really giving me time to reflect on their needs, what makes them each a person, and how can I support their development. I find myself thinking more about this on a different and deeper level than I did before. I’m also thinking a lot about what family values and culture I can create during this time.
Middle-Aged Adults

While COVID-19 brought up some challenges in family connections, some middle-aged adults conveyed that the public health restrictions had enhanced their parent–child relationships (15.29% men, 13.77% women). Participants remarked on how appreciative they were of the time they were spending together. Participants (10.59% men, 19.57% women) indicated that the pandemic did not just increase the quantity of time together, but also the quality of time spent in parent–child relationships. More parent–child quality time was reported by middle-aged adults who were homemakers (30.43%) than those who were part time employed (17.95%), full time employed (12.32%), unemployed (12.5% [n = 1]), and disabled (25% [n = 2]). The closures and cancelation of events created more downtime and parents explained, “we’ve had fun slowing down and spending all our time together” (female, 38, part time). A father (37, full time) explained that he experienced:

much more interaction than when I am at work for most of the day and [my children] are at school (their school has also been canceled for the foreseeable weeks). Not only is our interaction more frequent, but it has definitely led me to helping [my children] with … their chores and doing other activities with them. Each day has become a Saturday! (at least in many ways)

Some participants (0.35% men, 8.70% women) explained that they had become more creative with their parent–child time— “we are reading together, playing games & cooking together” (female, 45, full time). Quality parent–child interactions also increased with older children who were not living at home via technology. In line with this sentiment, two mothers explained that the pandemic, “has affected my relationship with [my young adult children] for the better because we’ve had more in-depth conversations about the virus, but also life in general” (42, full time) and “I check up on them more and am very interested in how they are feeling/coping” (42, homemaker).

Older Adults

Older adults did not report that they had the opportunity to have more interaction in-person time with their children during the early weeks of the pandemic. However, they did report that they had been “check[ing] on each other more frequently” (male, 72, unemployed) and “keeping in touch more and checking in more frequently” (female, 65, full-time) within their parent–child relationships. Older adults (25.00% men, 31.25% women) explained that various technology-based communication mediums have been used to keep in contact with their adult children “frequently”, “daily,” and “more often.” For instance, “[My adult children and I] keep in contact via Facebook” (male, 72, retired), and “We have Face Timed so we can ‘see’ [our adult children] and are checking in with each other more by phone and text and the Group Me App is being used even more” (female, 67, full time). Older adult parents reported things like, “I feel closer to [my adult children]” (female, 71, retired) and “Calling more often has allowed for sharing more feelings. Although, not directly about the pandemic” (female, 71, retired) as they discussed how the “closer contact” during the initial weeks of the pandemic had enhanced their parent–child relationships.

Discussion

The current study explored parent–child relationships in the context of the early weeks of the COVID-19 pandemic through parent perceptions. Bronfenbrenner (1994) indicated that development is influenced at the chronosystem level, which accounts for the sociohistorical conditions. COVID-19 is a unique sociohistorical condition for contemporary parent–child relationships (microsystem). It is imperative to investigate parent–child relationships during significant, on-going, and dramatic changes at a societal level to understand how these relationships are affected by such changes (Trommsdorff, 2006), and the COVID-19 pandemic significantly influenced day-to-day life across the world (Prime et al., 2020).

Nearly one third of the parents in this study believed that the early weeks of the COVID-19 pandemic did not lead to significant changes within their parent–child Microsystems. Young adults explained that their children were young, did not understand what was happening, and already required more time for parental care. Where middle-aged adults indicated that they had established positive parent–child relationships prior to the pandemic and the pandemic did not change this. Some young and middle-aged adults did acknowledge that because of school closures and movement to remote work that they had more time in the homes together but did not feel this drastically changed anything in their parent–child relationships. Although, consistent with emerging pandemic research, more women reported increasing time spent with their children than men (Zamarro & Prados, 2021), and considering a mesosystem level, those adults who were students, part time employed, and homemakers also reported more time with children than those who were full time employed. Older adults also stated that their parent–child relationships remained unchanged during the early weeks of the pandemic. In line with typical adult development (Bjorklund, 2015), their children were adults who lived independently, and many expressed there...
was already physical distance in their relationships prior to
the pandemic.

Prime and colleagues (2020) postulated that the pandemic
increased demands on the parent–child dyad to negoti-
atopic issues (e.g., financial stress, social isolation) and
were previously non-existent (e.g., new restrictions on activities
such as going to playgrounds to uphold physical dis-
tancing). The effects of extended isolation and home
confinement that are inherent to the COVID-19 crisis
are causing profound changes to family routines and
rituals that are often taken for granted … (p. 634).

In line with this postulation, there were some parents
in the young and middle-aged adult age groups who expressed
difficulties at the parent–child microsystem and mesosystem
levels (e.g., interactions between parent–child microsystem
and parent-employment microsystem, interactions between
parent–child microsystem and child-school microsystem) as
they discussed having to adapt to taking on new roles,
spending too much time together in the house and coping
with fluctuations in patience and understanding. Zamarro
and Prados (2021) concluded that, “women have carried a
heavier load than men in the provision of childcare during
the COVID-19 crisis, even while still working” (p. 11). In
the current study, more young and middle-aged adult women
shared that they had to balance new and existing roles than
men.

Brown and colleagues (2020) stated, “The global
COVID-19 pandemic is a stressor that originated outside
of the family system but given the novelty and uncertainty
concerning this disease, it is likely to be perceived as a sig-
nificant stressor for many parents and children” (para. 3).
Parents in the sample did perceive that both parents and
children experienced some anxiety related to COVID-19 or
related uncertainties. Within the adults’ responses, there was
evidence of awareness and concern with the bidirectional
influence (Paschall & Mastergeorge, 2016) within the par-
et–child microsystems as they described the potential influence
of their own stress and anxiety on their children and
vice versa. Public health interventions (exo- and macrosys-
tem levels) required more adaption—young adults largely
focused on teaching children about preventing the spread
of germs, where middle-aged adults focused their attention
explaining and enforcing social distancing protocols with
their children. Parents (more women than men) in early and
middle adulthood explained that they had to be considerate
about how to talk to their children about the virus, while also
helping them understand and grieve/cope with missed events
(e.g., birthday parties, moving home from college early).

Older adults reported that their adult children were con-
cerned about their age and the potential health risks of the
disease. These older adults indicated larger changes in the
parent–child microsystem as they described experiencing a
decreased amount of in-person time spent with their adult
children during the early weeks of the pandemic and that
this was related to the implementations of social distanc-
ing. As children age into adulthood, parent–child relation-
ships become more reciprocal (Kirby & Hoang, 2018). This
parent–child reciprocity was evidenced by adult children’s
concerns for parent health/implementation of public health
interventions, the few parents who were concerned about
their adult children’s financial well-being, and the increased
communication from adult children as reported by their
parents.

Prime and colleagues (2020) reasoned that the impact
of the COVID-19 pandemic would vary greatly by fam-
ily. In line with this reasoning, some parents in this study
highlighted that the parent–child microsystem experienced
relational enhancement during the early weeks of the pan-
demic. Participants in the early and middle years of adult-
hood explained that they did not just spend more time with
their children but also experienced more quality time (e.g.,
creative activities, helping children with chores/learning,
talking/listening) with children as busy schedules slowed
or stopped.

Vaterlaus and colleagues (2019) postulated that interac-
tive technology could be an adaptive tool at the macrosystem
level to facilitate connection in a parent–child relationship
when physically apart. Consistent with this postulation, par-
ticipants with adult children (middle-aged and older adults)
expressed enhanced parent–child relationships as they com-
municated more through a variety technology platforms and
devices. Whitehead and Torossian (2021) reported that more
older adult women than men viewed digital communication
as a source of joy during the pandemic. In the current study,
more women than men specifically addressed that they had
engaged in more digital communication with their children
during the early weeks of the pandemic.

Limitations

This study did have limitations and the results and implica-
tions should be considered with these limitations in mind.
The study was cross sectional and only represented experi-
ences from the initial weeks of the pandemic. Stressors build
in families (McCubbin & Patterson, 1983) and parent–child
relational experiences could be quite different after one year
into the pandemic depending on the resources available
within the family. The survey design allowed for data col-
collection from a broad group of adults in a short period of time,
but the use of one open-ended question in the survey did not
allow for further probing or clarifying questions. In-depth
interviews should be considered in follow-up studies. The
study also had lower participation of older adults and did not

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represent the experience of adults living in long-term care or assisted living facilities. The use of online recruitment and online surveys may have not reached older adults who do not use or experience lower comfortability with technology.

While the sampling procedure was appropriate for an exploratory study, a non-probability sample can limit the representativeness of the experiences. There was lower participation of people of color, most of the sample was employed (69% full time/part time employed) and had earned college degrees (73%). The COVID-19 pandemic has had a disproportional impact on underrepresented racial groups and people with lower economic resources in the United States (Thakur et al., 2020), which may have a deleterious influence on parent–child relationships with the potential for increased stressors and lack of support from external resources during the pandemic (Brown et al., 2020). Further, only parent perceptions on the parent–child relationship were included. Future longitudinal research should aim to replicate this study with parents and children from a variety of racial groups, employment statuses, and educational/income levels.

Implications and Future Research

Despite the limitations, the present study’s approach acknowledged that parent–child relationships change over time (Stormshak et al., 2018) and that parent–child relationships should be studied in context when there are significant and on-going changes in society (Trommsdorff, 2006). Prime et al. (2020) indicated that the impact of the COVID-19 “pandemic on family well-being is presently unknown” (p. 631) and this study contributes to emerging knowledge. Further, most published studies with parent samples during the pandemic have focused solely on adults with school-aged children and parenting stress or burnout (Brown et al., 2020; Griffith, 2020; Hiraoka & Tomoda, 2020). It is of great importance to continue with these research topics to ensure the safety of parents and children, and it is also important to acknowledge that there is “considerable variability in how families will be impacted by the COVID-19 pandemic” (Prime et al., 2020 p. 634). The current study showed varied perceived impacts of the pandemic on parent–child relationships from the perceptions of young, middle-aged, and older adults during the first weeks of the pandemic. Some perceived no change while others perceived challenges or even relational enhancement. The focus of this study was on parent–child relationships during the early weeks of the pandemic. There is the potential for future large-scale public health crises and results in the current study may provide helpful implications and future research directions that could support parent–child relationships in the initial onset of similar crises.

Young and middle-aged adults may benefit from brief, accessible resources (e.g., instructional videos, infographics) regarding how to discuss the health crisis, non-pharmaceutical interventions, uncertainties, and grief in developmentally appropriate ways for children and adolescents. Parents in the current study were also concerned about how their own stress and anxiety around the pandemic were influencing their parent–child relationships. Many factors influence parenting and integrating some information about parenting self-care (Sanders, 2008) into these resources for helping children would be important. Further research with children and parents on what they perceived worked well in related parent–child discussions during this pandemic could strengthen and inform these resources.

It may be helpful to consider how the parent–child relationships become more reciprocal in late adulthood (Kirby & Hoang, 2018) when determining implications for supporting older adults in a future public health crisis. Older adults in this study appreciated the increased and more frequent connection with their adult children through technology. In terms of prevention, adult children could consider discussing with parents what technology they have and their comfortability using it. Helping parents acquire new technologies (e.g., chat applications, video chat platforms) if they do not have them and ensuring they know how to use them may promote continued connection within the parent–child relationships in the wake of a large-scale public health crises.

Further, future professionals who will provide services that support parent–child relationships continue to be trained during the pandemic. Hughes and colleagues (2020) indicated that as instructors in higher education adapt courses for teaching during the pandemic, they should ask themselves, “how could you use the current situation [the COVID-19 pandemic] to make learning more effective” (p. 237)? Educational standards set by the National Association of State Administrators of Family and Consumer Sciences (NASA-FACS; 2018) and National Council on Family Relations (NCFR; 2014) highlight the importance of educating students regarding contextual factors influencing individuals, families, and interpersonal relationships. Results from this study could be used in family science and human development courses to introduce concepts such as the influence of context and environment on parent–child relationships. Instructors should be clear that professionals supporting parents and children during public health crises should acknowledge and emphasize the diversity of parent–child experiences in adapting to such crises. For example, some parents (mostly mothers) expressed how the early weeks of the pandemic required them to balance existing responsibilities with new roles and students could be challenged to consider how future interventions could support these parents while promoting gender equity.
Again, this study was conducted during the early weeks of the pandemic in the United States and the pandemic is on-going—COVID-19 cases are rising (CDC, 2020a) and families continue to experience changes in routines and traditions with necessary public health precautions (Prime et al., 2020). Continued research on parent–child and family relationships is needed. The on-going pandemic may affect parent–child relationships at different stages of the pandemic. Emerging research is indicating that parents are experiencing compounded stressors and limited access to external resources for support (Brown et al., 2020). A family’s positive adaption to a crisis and compounded stressors is more likely when there are helpful financial, relational, and emotional resources available (McCubbin & Patterson, 1983). Many parents in this study indicated that their parent–child relationships were unchanged or improved during the early weeks of the pandemic—indicating some families were doing well or had utilized strengths during the pandemic.

One innovative research direction may be to utilize a family strengths approach (DeFrain & Asay, 2007) in future public health crisis research to identify what is working in parent–child relationships (e.g., how are parents successfully navigating challenges [e.g., anxiety, balancing roles]? how are adult children maintaining connection with their parents?) versus challenges or problems. The family strengths approach aims to identify what is working or what strengths are in a family and then uses the shared identified strengths to assist families from similar backgrounds. This research would require identifying parents within certain age groups from specific cultural groups who are navigating the current pandemic or future public health crises well. This approach could be a way to meaningfully inform parenting interventions by identifying strengths/factors that could be malleable.

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Data Availability  The data are not publicly available.

Declarations

Conflicts of interests  The authors report no conflicts of interest.

Ethical Approval  University IRB approval was received for the study.

Consent to Participate and Publication  Participants all completed an informed consent form where they agreed to participate and acknowledged that the research would be disseminated through publication.

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