Childcare Issues and the Pandemic: Working Women’s Experiences in the Face of COVID-19

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Abstract: Purpose: The COVID-19 pandemic has drastically impacted everyday life. Not only has it assailed the world’s populations with millions of deaths and cases, but COVID-19 has also ravaged global economies and affected the lives of women and their children. The purpose of this study was to detail women’s experiences during the COVID-19 pandemic and the solutions they came up with to deal with the problems they encountered. Method: Data collection occurred in the midwestern United States, in the State of Indiana, from August 2020 to August 2021. Sixty-six women participated in the study. The study used open-ended survey questions. The data results were combined, analyzed, and constructed into themes based on their similarity in their subject matter. The researchers identified four main themes. Findings and Conclusion: Results indicated that, for some of the mothers, it was a struggle to be at home with their children at all times. Unique experiences faced by some expectant mothers who were already mothers, and thus had the experience of prenatal care pre-COVID-19, had to grapple with the fact that they were not allowed to come to their prenatal appointments with anyone. Participants complained about cooking all the time, with some needing to use the internet to look for new recipes. Poor eating habits by some children during the pandemic led to some parents needing to come up with a schedule for family members regarding breakfast, lunch, dinner, and snacks to curtail the COVID-19-related acquired poor eating habits. A shared experience from the study revolved around childcare policies and schedules. The results suggested that enacting a paid childcare leave, developing flexible working hours, and changing how employers conduct work reviews are critical to alleviating some of the burdens working women face during school closures during the pandemic. Finally, participants suggested identifying better ways to provide and prioritize childcare to lessen gender inequalities within the workforce.

Keywords: COVID-19; women’s health; childcare; pandemic; work

1. Introduction

In the United States, when the lockdown(s) began in early 2020, more than 300 million people were forced inside as stay-at-home orders, travel bans, and school closures took effect. Domestic and professional responsibilities swiftly came into conflict with people juggling responsibilities to ensure the achievement of expected household and career objectives. Almost ten million working adults in the United States lost their jobs due to the lockdown [1], and millions more were forced to stop work due to family responsibilities. The boundaries between home and work became indistinct [2], and the “gendered distribution” of domestic duties grew even more evident than before the pandemic [3,4].

In the face of the COVID-19 pandemic, working women in the United States have sustained increased household responsibilities as they balance their roles as both childcare providers and remote employees [2,5]. In addition, their daily routines have changed as the
labor market fluctuates under shutdown regulations. These changes ultimately have led to more significant gender inequalities in the workforce and home life. For instance, growing evidence suggests that the gender inequalities present before the COVID-19 pandemic were exacerbated during the lockdown period [6]. As a result, women took on a larger share of childcare duties.

Moreover, as domestic duties increased, more mothers were rendered unable to work during the COVID-19 crisis [7]. As a result, the unequal division of labor between men and women in two-parent households increased during the lockdown. The intersection of work and family responsibilities resulted in a unique struggle for working women, opening the door for a gendered economic downturn.

In their research, Farré et al., Recci et al., and Zhou et al. have found that both women and men expand the time devoted to household care and work during lockdowns, but these increases do not automatically translate into more gender equality [8–10]. Studies in the United States and Canada have demonstrated a more equitable gender division of unpaid work [11,12]; research across European countries, on the other hand, has revealed mixed results, with some studies showing gender inequality during lockdowns [5,8,9].

Working women have experienced the worst outcomes of the COVID-19 recession. For instance, during trying times, men tend to engage in more “masculine” tasks and devote less time to routine tasks. Which, in the end, confirms that women tend to be a “shock absorber of last resort” in trying periods [13,14]. The current economic crisis has severely affected industry sectors where female workers are predominantly employed [15]. These sectors include leisure, hospitality, travel, restaurant, and retail, among other service-oriented industries [3,7,16,17]. The COVID-19 pandemic had an outsized impact on the above-mentioned sectors of the economy due to their high-contact nature, leaving many defenseless to rapid shutdowns when non-essential businesses were closed. Indeed, productive and reproductive activities have strong relationships at the intersection of gender and class [18]. The devaluation of women’s work in the market is inherently tied to the devaluing of social reproduction activities [19,20]; care and domestic work is mostly looked upon as labor for unskilled and low-paid workers [21,22]. This socially constructed belief brings forth moderation of women’s incomes in care occupations and service sector jobs [23].

One study found that because of this disparity in sector employment, working women were about 33 percent more likely to experience a shutdown than working men [15]. Moreover, due to these gender differences in the workforce, women were more likely than men to stop working when lockdowns were in effect [5,24] due to job loss, resignation, or furlough [25]. Previous studies have long documented the conflict and trade-off between a mother’s family- and job-related responsibilities [25]. However, the COVID-19 pandemic has highlighted the difference in work patterns between mothers and fathers. Sevilla et al. found that, in 2014, the average mother was found to complete 60% of the work hours the average father did without interruption; now, the average mother completes only about 35% of the interrupted hours, compared with working fathers [25]. Additionally, when working-aged adults were surveyed in July 2020 by the US Census Bureau, 19.6% said the reason they were no longer working was due to the lack of childcare options created by the pandemic [26]. However, when the Census Bureau surveyed women aged 25–44 who belonged to the non-working group, they found that these women were almost three times more likely than their male counterparts to indicate that they were not working due to childcare concerns. The difference between how home life influenced the work patterns of mothers and fathers was thus clear.

Family policy, which is social programs, laws, and public directives designed to promote and enhance marriage, reproduction, and raising children, continues to evolve, and its relation to women’s employment has undergone a similar evolution. In the context of welfare cutbacks [27] and liberalization processes boosting female employment in the service sector, family policy is the only social policy domain with significant expansion.
This expansion is remarkable in countries where service provision to families (i.e., childcare) was historically limited, such as the United States, bringing more progressive outcomes [28].

Undeniably, the departure of working mothers from the labor force reflects their choice between engaging in paid work while providing constant childcare for months under lockdown. Without government or employer support, a choice had to be made between career and family. Consequently, the economic and social impacts of the pandemic are/were simultaneously experienced by working mothers. Without a doubt, the division of domestic responsibilities at the beginning of the pandemic indicates mothers took on a more significant portion of homeschooling, child supervision, and housework than fathers at the cost of their employment. This fact is supported by recent studies such as those by Carlson et al. (2020) [11], Heggeness et al. (2020) [29], and Petts et al. (2020) [30]. Indeed, when both parents had the option to telecommute, working mothers were shown to reduce the time they spent working [31–33].

Moreover, due to the infectious nature of COVID-19 and the greater susceptibility to infection of older populations, grandparents were prevented from providing childcare. Babysitters and anyone outside of the immediate family were also discouraged from providing childcare services. Consequently, working parents were left with limited options to address their childcare responsibilities by taking a paid or unpaid leave of absence, adjusting their work schedules to non-business hours, or quitting their jobs altogether.

The gender-related childcare gap created in response to the pandemic is noticeable with many nuanced considerations. Before the pandemic, women assumed a larger share of the childcare burden than men [3]. Among two-parent households with dual, full-time employment, women spent at least 40 percent more time providing childcare than men [16]. Now, studies are finding that the gender childcare gap has changed. One study found that parents, on average, were providing 9 h of childcare each day [5,25]. Another study found that parents were dedicating an average of 40 h per week to childcare during the pandemic, whereas they dedicated an average of 20 h per week before the pandemic [5,25]. The study found that women completed around 30.3 of the childcare hours on average during the pandemic, while men completed 19.4 h on average [5,25]. However, although men spent less time providing childcare than women during the lockdown, the number of childcare hours provided by men has increased from their pre-pandemic levels [5,25]. This gap in childcare commitment between mothers and fathers was not directly explained by employment status [5,25] or mothers’ lower earnings or employment rates [5,25]. Women were found to work less than men, but a mother’s childcare responsibilities are less likely to depend on her employment status than the father’s responsibilities [5,25].

Women provide more childcare hours than men, regardless of their work status. Therefore, although fathers have assumed a more significant role in childcare than before the pandemic, working women still bear most of the burden in two-parent households [34,35].

From the above literature, it is clear that women bear most of the burden regarding childcare and household duties/responsibilities during the current pandemic. Therefore, in this study, we sought to fill the gap in the literature regarding women’s experiences during the shutdown of schools and their role in childcare, family health, and the financial burden visited on their families during the COVID-19 pandemic. Additionally, we examined the answers women came up with to deal with their stressors, as well as to help them learn from one another.

**Research Site and Rationale of Approach**

Theories represent a distinguishing element between quantitative and qualitative methodologies. For instance, Brown (2014) [36] stated that theory generation is one of the twelve characteristics of the qualitative-quantitative continuum. Qualitative studies are specifically on the hypothesis forming side, with quantitative studies performing hypothesis testing. This preliminary qualitative study was performed in the State of Indiana, in the midwestern US, a region where there is a dearth of studies detailing mothers’ experiences during the schools shut down during the pandemic.
2. Materials and Methods

Approval for this study was secured by the lead author from her institution in August 2020. The questionnaire was developed by a researcher with several years of research experience in women’s issues. A literature review of several articles on women’s issues was also conducted before the development of the study research questions (see [2–10]).

The eligible target population for the study was women with children who were 18 years and older. The participants were from the midwestern United States in the State of Indiana.

Recruitment was carried out from August 2020 to August 2021, and participants who consented were invited to participate. The study was advertised through the researchers’ email and social media platforms such as Facebook. The researchers’ Qualtrics account and links created by the researchers were used to circulate the survey. Snowballing, a research approach through which participants recruit other participants, was used. Participants were also recruited through convenience sampling; thus, people whom the researchers determined were qualified were contacted, thereby augmenting our ability to find willing participants and participants who qualified to participate in the study. The open-ended questionnaire was completed individually.

We used open-ended questions that covered the experiences women had gone through raising their children in the (middle-childhood and early childhood age range) during the COVID-19 pandemic when schools were shut down. We were particularly interested in the kind of strategies that worked for them, the unfortunate experience(s) that they wanted to share, and their expectations of their employers during the pandemic. The questionnaire was pilot-tested with eight participants \((n = 8)\) before its use. The eight participants were mothers and met the eligibility criteria for the study. They were selected because they would be similar to participants who would end up in the study. Pilot testing was performed for clarity and to make sure participants understood the questions and were comfortable answering them. The pilot-tested questionnaire was the same questions used for the main study. The eight participants’ responses were included in the study, as they were able to answer the questions as designed.

After collecting the data, the researchers combined all the narratives based on the four main research questions stated above. They used the first six steps of Colaizzi’s (1978) [37] approach in qualitative data analysis. These first six steps include (1) the coders individually refamiliarizing themselves with the narratives/data collected by reading them several times, (2) extracting essential words that stand out from the data, (3) forming meaningful sentences that captured participants’ views, (4) each of the coders analyzing and constructing categories based on their similarity, (5) individual coders creating themes from the categories, and (6) merging the individually identified themes.

This study used the qualitative description analysis approach to uncover research participants’ perspectives/experiences during the lockdown when their children were at home (Caelli, Ray, and Mill, 2003; Merriam, 1998.) This research approach enabled us to report participants’ phenomena (their unique personal experiences) in their original state/form (Sandelowski, 2000).

In all, six main themes emanated from the gathered data. To help prevent a situation where the participants may try to reveal themselves in their best light, affecting their narratives’ content and our study results [38]. In this study, an online survey was used to collect participants’ responses. Some participants also provided their answers using paper and pencil, where their responses were put in a box without their names. These measures ensured participants’ data integrity and security [38].

3. Results

A total of 66 participants took part in this study; their demographic information is detailed in Table 1 below.
Table 1. Demographic-related information for participants.

| AGE       | N (66) |
|-----------|--------|
| 18 to 29  | 10     |
| 30 to 39  | 32     |
| 40 to 49  | 20     |
| 50 to 59  | 4      |
| 60 to 69  | -      |
| 70 to 79  | -      |
| 80+       | -      |

EDUCATION

- High School diploma or GED: 4
- Some College: 16
- Professional Degree: 12
- Four-year College Degree: 22
- Graduate Degree: 12

INCOME *

- USD 20,001–35,000: 10
- USD 35,001–50,000: 34
- USD 50,001–65,000: 14
- USD 65,001–80,000: 8
- USD 80,001+: -

* All participants were employed and were working in person before the pandemic. The income listed (in Table 1) are their (the women’s) personal income.

When asked about their experiences of raising children during the pandemic, participants had a wide range of responses, which were described under the following six themes:

(a) Being home-bound with their children (n = 21);
(b) Hospital experience (n = 4);
(c) Cooking all the time and poor eating habits of Children (n = 18);
(d) Financial problems (n = 13);
(e) Mental health concerns; (n = 6);  
(f) Participants’ advice to give employers (n = 4).

3.1. Being at Home with Their Children

Participants in this theme reported that the greatest obstacle during this pandemic concerned staying at home all the time with their children. Mothers said it was a struggle with their children. In particular, women with young children indicated that they saw their children struggling to be at home all the time and thought they were depressed and dealing with behavioral problems. They (mothers) noted that there were times that they did not know which day of the week it was because they were at home all the time. A participant, AB, noted:

Monday seemed to me like it was Wednesday. We used to clean our home on Friday nights to be in a clean home for the weekend, but sometimes, I found myself cleaning three to four times during a week during the pandemic.

Parents whose responses fall in this theme shared that they were on one computer screen trying to simultaneously perform their own work and supervise their children as well. They indicated that they had to make an extra effort to focus on their work and at the same time help their children. In all, parents used all the available resources to create a home and a working environment for themselves and their children.

One participant, NM, said:

I had to make space for my children in the house so that they could have the space to work and attend their school online-I became creative in where I worked-sometimes I would work from the couch, sometimes I had to take a zoom call in my bedroom because there’s nowhere else to go.
Mothers suggested to other parents that it is essential to remember not to perform extra work because you are at home but to get outside of a home setting and/or pick up a new hobby with their extra time if possible.

Participants indicated that the pandemic period was stressful for the parents who worked several hours a week and had to school their children at home simultaneously. In addition, some parents said almost all the childcare resources such as friends, family members, and babysitters that were available to them before the pandemic were not available during the unprecedented time (pandemic).

3.2. Hospital Experience

Some experiences faced by women involved those who already had children and were expectant mothers. Such mothers wanted to go to the hospital with their children during the pandemic lockdown when schools were not in session, but some women were frustrated that the hospitals were not allowing them to come to their prenatal appointments with anyone (including their young children and husbands). They indicated that this period was when they (expectant mothers) most needed support from others, but the pandemic took away such support.

A participant, SO, indicated:

No one could come to prenatal appointments with me. I was always going to these appointments by myself, and on top of going alone, I had to take a COVID-19 test upon arrival to labor and delivery.

3.3. Cooking all the Time, Poor Eating Habits of Children

Another problem faced by participants was cooking all the time. Parents had to cook more meals for their children since they no longer had school lunches. Participants in this group said they were spending about one-fourth of their time cooking to feed their children. Some participants said they browsed the internet and looked for recipes to cook for their families.

Unfortunate experiences that some participants expressed included the issue of poor eating habits during the pandemic. Some parents indicated that their children opened their refrigerator several times and consumed food and beverages all the time. MN said:

I was shocked how many times my children opened the refrigerator. They ate all the time and I had to go to the shops several times.

A way out suggested by some parents was to come up with a schedule with family members for breakfast, lunch, dinner, and a special time for snacks.

3.4. Financial Problems

Some participants reported experiencing financial problems because they were not able to work. The financial problems reported were from some women in the middle-income range as well as lower-income range. Specifically, the long school closures, negatively impacted their finances because it came with a reduction in the monthly, sometimes quarterly, and yearly wages. Some had to put their professional career development on hold in order to ensure some sense of normalcy in the home; a decision and an act that further hurt them financially. FA indicated, “I had to cut down several hours of work to be with my children”.

3.5. Mental Health Concerns

Another crucial issue that arose during the pandemic was the increase in concerns about mental health. Participants emphasized the fact that the considerable demands on them regarding attendance to household chores and professional obligations put them in a depressive mood. Such depression negatively impacted personal and family lives. AK mentioned, “I was not happy being at home with the children for several hours and thought I need a break to get my sanity”.

Indeed, based on their personal experiences, participants wanted others in the same boat as them to be aware of the importance of checking in with their children about their mental and emotional health. Something else to be mindful of was the importance of setting expectations in one’s family about what risks are acceptable and not before they occur. Setting these boundaries was seen as vital for the risk of exposure to the COVID-19 virus.

3.6. Participants’ Advice to Give Employers

An experience faced by the working women concerned employers who, while re-viewing them, did not consider how the pandemic had affected them and their childcare schedules. The advice that such participants had for employers revolved around childcare and mothers’ schedules. Notably, the participants indicated that the pandemic had affected everyone’s families and suggested that employers implement paid childcare leave and flexible working hours. They also suggested that employers must change how they review the mothers’ performance given the constraints associated with the pandemic. In particular, they called on employers to be flexible and understanding about the employees’ unique situation brought about by the pandemic. CF indicated:

*Employers need to take the pandemic and how it has affected our work performance into their annual reviews. The pandemic has affected our homes and work.*

4. Discussion

This paper examined women with childcare experiences in the home environments during the COVID-19 pandemic.

Some women participants described their in-home experiences during the lockdown as depressing \((n = 4)\) and lamented about being “stuck” at home for an extensive period of time \((n = 21)\). Thus, for some, the length of time spent at home with their children when factoring in other responsibilities created an elevated burden of compounding responsibility, with little relief. These challenges may have led to feelings of depression and despair among a selection of participants \([39,40]\).

The findings of our study are in line with those of others, which found that working women’s increased childcare burden combined with work responsibilities during the pandemic led to several adverse outcomes for them. This finding also bolsters the study of Ruppannr et al., which showed that increased housework demands have led to greater incidences of depression for mothers in the United States \([41]\).

The pandemic has had a profound effect on childcare. In particular, the closures of schools, which provide the most extensive caregiving infrastructure for school-aged children in the United States, resulted in a significant strain on families when seeking external care for their children \([33]\). In addition to school closures, daycare closings also ensured that children would spend more time at home than before the pandemic. Closures of such duration and extent had never been previously experienced by the current generation of parents. This caused an added burden, resulting directly in decreased earnings as well as a diminished potential for career advancement \([42–44]\).

This study’s findings also indicated that excessive food required to be stored at home during the pandemic affected families’ finances \((n = 13)\). Additionally, middle- and low-income participants noted that they had to cook all the time (to feed their children) and were worried about the extent of consumption of food and drinks and the cost involved \((n = 18)\). This finding supports the results of other studies that found that working mothers experienced more anxiety concerning their ability to afford food for the household than women without children in their homes \([26,45]\).

From the above discussion, we learn that the pandemic created an ecological issue—namely, space management, whereby because of there being entire family members at home, mothers had to negotiate the use of available space to ensure that space was allocated/available for their in-housework-office (or workspace) and for the children to finish their schoolwork, to play, and to have family time. The reality of such spaces or
environments clashing, crashing, and blending was discovered, as was the resultant burden placed on the family, especially on the mothers who managed such spaces.

What the COVID-19 pandemic has also taught us is a lesson on the built environment. The scarcity of space and the difficulty in managing it have implications for future homes and other building construction. The need to create spaces for rare but possible times of crises when the need for space becomes both a social and public health issue is more critical now than ever before.

Another important lesson on and for the built environment is this study’s implications for home improvement by families [46,47]. Specifically, the study draws the attention of homeowners and renters to the need to make better and greater use of currently available spaces in current homes. In particular, it calls for the need to convert current various available little or less used spaces in homes to spaces that can efficaciously be used to lessen the burden of overcrowding and consequently give families some room to survive and thrive.

An additional finding of our study was suggestions that participants gave to employers about being flexible regarding the evaluation of workers during the pandemic (n = 4). This is significant because, by experiencing the kind of evaluation their employers gave or may have given them, their suggestions could be said to be authentic. They experienced this phenomenon of working from home or and/or the office and its consequences on their professional/work experience. In addition, some women cannot work from home due to the nature of their work and experience differential gendered challenges [48,49].

Thus, employers may need to learn from the employees and consider their unique and shared experiences when developing evaluations and other work-related issues. An important contribution to the knowledge of this research is that it can provide employers with knowledge about women’s experiences in midwestern US cities during difficult times (such as during a pandemic). It can also be used for best practices for evaluating workers’ performance during such times. This study thus has implications for human capital development in view of the fact that it touches on the welfare of employees and how its (welfare’s) proper management can lead to or create employees’ satisfaction.

Women in this study indicated they lacked support in the hospital environment during the pandemic (n = 4). This matches the study of Matvienko-Sikar et al. [50], who found that perceived social support was lower among women pregnant during the pandemic, compared with women pregnant prior to the pandemic. This included support from significant others, family, and friends.

Limitations: This research is not without limitations; firstly, the sample is small, and the data were collected through the snowballing approach, which involved initially surveying individuals known to some of the authors. This approach indicates that the researcher’s connections may have led to surveying participants with the same race/ethnicity, religion, social, and economic backgrounds. Thus, care must be taken when extrapolating the experiences of those in this study to all women. Another limitation of the study was that only women’s experiences during the COVID-19 lockdown were reported; there was no examination or comparison of men’s perspectives in this study. In addition, using Facebook to draw a sample may be self-selecting to some degree. Finally, regardless of these limitations, the study results revealed essential experiences of women in a midwestern United States city during the lockdown when schools were not in session because of the COVID-19 pandemic. What is unique and vital about this study are parents sharing their experiences and giving practical answers to how they solved their schooling problems, cooking, snacking, and mental health problems during the pandemic.

5. Conclusions

In summary, the COVID-19 pandemic led to gendered consequences for working women among some participants in our study. Without more childcare systems, working mothers may be vulnerable to economic struggle anytime their household duties are put into conflict with their workforce duties. Identifying better ways to provide childcare may
help reduce gender inequalities within the workforce. Otherwise, the dual responsibilities of domestic and economic life and their attendant struggles and difficulties may continue to plague women, especially mothers. The need for space has implications for the built environment and potentially calls for home improvements and new builders to take future tragedies into consideration when constructing new homes.

Future research and policy should consider targeting post-pandemic plans for women in the workforce in order to help them and their families adjust to their post-pandemic world. In addition, a study that will compare the experiences of men and women during the lockdown when schools were not in session may need to be examined to assist future stakeholders to devise strategies that will mitigate the harmful effects of pandemics and other tragedies on families.

**Author Contributions:** Conceptualization, C.O.; methodology, C.O.; software, C.O.; validation, C.O.; formal analysis, C.O., M.S., E.O.-G.; investigation, C.O., M.S.; resources, C.O.; writing—original draft preparation, C.O., M.S.; writing—review and editing, C.O., M.S., E.O.-G.; supervision, C.O.; project administration, C.O. All authors have read and agreed to the published version of the manuscript.

**Funding:** This research received no external funding.

**Institutional Review Board Statement:** The study was conducted in accordance with the Declaration of Helsinki and approved by the Institutional Review Board (or Ethics Committee) of Indiana University (protocol code 2008166985; approval date: 08/25/2020).

**Informed Consent Statement:** Informed consent was obtained from all subjects involved in the study.

**Data Availability Statement:** The data will be made available upon reasonable request.

**Conflicts of Interest:** The authors declare no conflict of interest.

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