Hardships & Resilience: Families in a Pandemic

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Abstract
The COVID-19 pandemic created unique hardships for families with school-aged children. To better understand these hardships, we asked the question: How did family units of various racial and socioeconomic backgrounds experience the pandemic? Qualitative phenomenology was the methodological basis for this study, and the Double ABC-X Model of Family Behavior was applied to analyze how the pandemic and racial tensions that occurred in the past 18 months affected families. We specifically focused on including the voices of minoritized populations as they are less often represented in phenomenological research. Semi-structured virtual interviews were conducted with families from Minnesota and Illinois. NVivo was used to code and analyze the interviews. Five themes were identified which demonstrated family strength and experience of hardship: resilience, boundaries, community support, fear, and communication.

Keywords
COVID, resilience, families, pandemic

With the first outbreak of COVID-19 and the subsequent global lockdowns occurring in early 2020 and throughout 2021, the pandemic has affected every person, family, and community. Individuals and families have been challenged to care for each other differently, learn new ways of communicating with others, and find new methods to remain flexible and resilient during uncertain times.

As a new phenomenon, further research is urgently needed to understand the impact of the COVID-19 pandemic on people’s mental well-being. Past research has focused on quantitative analyses rather than seeking to gain an in-depth understanding of lived experiences. One study conducted between August 28 and October 5 of 2020 found that 29% of psychologists had started seeing more patients overall since the start of the pandemic, 74% of psychologists reported an increase in demand for anxiety treatment, and 60% of psychologists an increase demand for depression treatment (American Psychological Association, 2020). Moreover, parents with a history of mental illness reported significantly higher levels of depression, anxiety, and stress than parents without this history throughout the pandemic (Wu et al., 2020). Henssler et al. (2021) also found that the prolonged isolation of COVID-19 exacerbated symptom onset for children with a predisposition to mental illness. Clearly, pandemic life has increased stress on mental health needs for all and work load for treatment providers.

The evolving understanding of COVID-19 and frequent changes to regulations have caused many people to have an overwhelming sense of uncertainty and fear throughout the pandemic. This uncertainty and fear can disrupt people’s sense of normalcy and control; perceived loss of control in situations has been linked to anxiety disorders and a fear that the loss of control will remain permanent (Gallagher et al., 2014). Other research has found that the presence of multiple risk factors, such as poverty, can leave families and individuals more vulnerable to experience additional challenges such as anxiety, than the presence of a single risk factor (Evans et al., 2013).

While recent research on COVID-19 and mental illness has emphasized quantitative analyses, there are several theories and models that can help provide qualitative insight into the lived experiences of families. The Family Stress Theory demonstrates that the family’s perception and resources will affect the way the stressor is handled (Hill, 1958). The Double ABC-X Model of Family Behavior (McCubbin & Patterson, 1982) analyzes the compounding factors that influence the total mental well-being of individuals. In particular, this model demonstrates the pileup of stressors that exists in the life of families (Chaney, 2020; McCubbin & Patterson, 1982).

The pandemic has brought many major changes to family life. One major change that impacted families has been the

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closure of schools involving an unprecedented transition to virtual learning. As work and home life have merged together, boundaries at home have become diffuse (Craig & Churchill, 2020). Families with children under the age of 13 in comparison to families with no children have reported higher levels of work-life conflict throughout COVID-19 (Schieman et al., 2021). For parents with school aged children at home, the parenting responsibilities increased and these responsibilities have not been evenly distributed.

For example, prior to the pandemic the gender gap in the labor force decreased as children reached school age. But since the start of the pandemic the gender gap has widened and gender employment disparities have increased. More mothers than fathers are either being let go or forced to quit in order to stay home to take care of their children (Connor et al., 2020; Qian & Fuller, 2020; Schieman et al., 2021). This could have long lasting implications for women in the workforce and gender equality in the United States. One study found that following COVID, a third of mothers felt like they were doing much more housework and unpaid work than their male partner (Craig & Churchill, 2020). Research has shown that when there is a gender-based power imbalance present in couples, the relationships suffer (Thagaard, 1997).

BIPOC (Black, Indigenous, People of Color) populations have also been more affected by the pandemic, specifically African Americans and Asian Americans. Along with fears of COVID-19 and disproportionate death rates among minority populations, these populations faced fears of judgement, blame, and violence because of racist and prejudiced beliefs (Laurencin & Walker, 2020).

Nearly 40% of Asian Americans have reported that people have acted uncomfortable around them since the onset of the Coronavirus outbreak and over 30% have reported being the target of racial slurs or jokes (Dhanani & Franz, 2020). A 2020 study examining prejudice stemming from COVID-19 found that individuals are also more likely to express negative beliefs about people from Asian descent and endorse more xenophobic attitudes when the virus was framed explicitly as originating in China (Dhanani & Franz, 2020).

In the summer of 2020, George Floyd was murdered by the Minneapolis Police department and social and racial unrest followed. Over the past year and a half, acts of violence against the Black community have been politicized, causing a divide in the United States. There is limited research regarding the impact of these significant events combined with COVID-19 on minority populations. Our research seeks to add to the literature and give a space for underrepresented voices to be heard.

Is there a way forward from the uncertainty, loss of control, and trauma experienced by families and especially minoritized populations during the pandemic? Previous research on hardships has focused on the link between emotional creativity and posttraumatic growth and mental health, meaning that those who are able to express their emotions are more likely to seek out positive coping strategies that utilize social support and demonstrate self-control and self-regulation of negative emotions (Zhai et al., 2021). For example, a positive coping strategy that has increased throughout the pandemic is going outside in nature (Chaudhury & Banerjee, 2020). Environmental psychology has studied the healing properties of nature and has found that increased time spent outside decreases anxiety, negative affect, and preserves one’s positive affect (Bratman et al., 2015). Due to the isolating experience of the pandemic, families were emotionally vulnerable and couldn’t rely on their previous coping mechanisms. They had to learn to become creative with natural surroundings as they had limited resources to depend on.

Studies have shown that when challenged, people who practice gratitude tend to be more resilient. Resilience is defined as the “ability to adapt successfully in the face of stress and adversity” (Wu et al., 2013). One study found that when college students practiced daily gratitude they had an increased ability to remain resilient when challenged with learning (Wilson, 2016). Shared universal hardships have been shown to lead to deeper realizations regarding one’s own sense of meaning making, life purpose, and has been useful in helping individuals set attainable goals and remain resilient in the face of hardship (Hemberg, 2017). Researchers have also identified that during traumatic experiences, such as COVID-19, gratitude is essential to healing and finding hope. Psychologists have found that emotions such as gratitude correspond with health and well-being, promoting resilience, a positive mindset, and recovery following hardships (Fishman, 2020).

Given the previous research on families’ experiences of COVID-19, as well as resilience and emotional well-being, our research sought to explore any similarities and differences in our participants’ lived experiences. We also sought to provide a more inclusive view by including voices from diverse backgrounds. Our research question started as: What hardships and strengths have families experienced and found within themselves throughout this time. This question established a foundational basis as we interviewed families to learn about their lived experiences throughout the pandemic.

Method

Phenomenology

A phenomenological qualitative design was used for this study. Phenomenology, founded by the philosopher Edmund Husserl, is an explorative approach to qualitative research interested in “the way people are geared into their everyday lifeworlds” (Daly, 2007, p. 94) and “how people make sense of their major life experiences” (Smith et al., 2009, p. 1). This approach was appropriate for our study because we wanted to understand the lives of families with school-aged children and how they experienced the COVID-19 pandemic from March 2020 up to the present. In using a phenomenological design, we sought to ensure that the experiences of families from various racial and socioeconomic backgrounds were included. Phenomenological research also seeks to be free of preconceived ideas and assumptions (Neubauer et al., 2019). This method was chosen to learn participants’ experiences in their
own words and to suspend our own assumptions throughout the interview process.

Researchers

Phenomenological research requires that researchers withhold personal judgments based on their own experiences and biases (Daly, 2007). The identities and beliefs we bring as researchers influence the way a topic is examined. The lead researcher identifies as a Caucasian female and is a visiting faculty member at a small liberal arts college in the Midwest. She is also a mother of two school age children and married to a man who is an educator. The other researchers are students at the same Midwestern college. One of the researchers identifies as a Caucasian, Finnish-American female. Another researcher on the team identifies as a multiracial/Afro-Latina female. And the last researcher identifies as a Caucasian female. Throughout the research process, we maintained journals that included information on our own reactions, understandings, emotions, and thoughts. We also met consistently to debrief the interviews and reflect on our own experiences during the interviews. These processes were done to decrease researcher biases, assumptions and judgments towards the families that were interviewed.

Participants

The sample included 24 participants with a mean age of 39.21. Twenty interviews were conducted in which the majority (n = 11, 55%) were heterosexual couples with only the mother present at the interview. A quarter (n = 5, 25%) were single mothers, and the minority (n = 4, 17%) were heterosexual couples present together at the interview. The study sample included representation from one stepmother, one sibling caregiver, and one same-sex couple. The majority of our participants (n = 20, 83%) were female. Eleven of the total participants identified as White/Caucasian. Seven participants identified as African American, five as Asian/Hmong, and one as Hispanic. Four of the families had biracial children. Participants varied in level of education. Eight held a master’s degree and one was currently enrolled in a master’s program. Seven participants held a bachelor’s degree, and one was currently enrolled in a bachelor’s program. Three participants had an associate’s degree, and two had a doctorate degree. One participant had a GED and one had completed some college. Household income also varied among participants with a mean income of $70,000–99,000. More than half of the participants (n = 19, 79%) reside in Minnesota and the rest (n = 5, 21%) reside in Illinois. We had representation from both urban and rural areas.

Procedure

Following institutional review board approval, we recruited participants through email aliases and organizations associated with the midwestern college, as well as through various school districts. Criteria for participation included individuals who were caregivers of one or more school-aged (5–12 years old) children. Individuals emailed us if they wanted to participate and then a time to meet via Zoom was arranged. The interviews were conducted during the months of June and July of 2021. Participants were compensated for their time with a $20 gift card to Target. Following the initial interview, participants were sent an email with opportunities to continue the conversation by adding additional information about their experiences during COVID-19, and/or to confirm that our findings were true and representative of their experiences. No participants identified errors in our findings or wished to add to their experience.

Data Collection

Data were collected through 45–60 min interviews with questions focusing on parents’ experiences during the COVID-19 pandemic. Participants also answered demographic questions (e.g., age, race/ethnicity). We aimed to maintain consistency in our interviews by referring to a list of questions we designed. Sample questions included, “What were hardships for your family?” “How were you and your family feeling when schools went remote?” “What do you wish your community had provided for you?” “Did the murder of George Floyd and the violence seen against AAPI, combined with the pandemic, affect your family?” “How did your family discuss these difficult events?” “What were new rituals or activities that your family took up during the pandemic?” “How did the pandemic affect your couple relationship, parenting, or you as a single parent?” We rotated between the roles of the interviewer, co-interviewer, notetaker, and Zoom recorder. We also met periodically to discuss interview protocol in order to decrease interviewer biases and maintain consistency in our interviews.

Data Analysis and Trustworthiness

We began the process of data analysis by transcribing the interviews and reviewing our field notes and journal entries. We used the software NVivo to analyze our interview transcripts and to organize our data into codes. Our codes consisted of grouping similar statements made by participants and noticing emerging themes found among the interviews. We maintained high levels of trustworthiness in our data in various ways. We each analyzed every interview twice and compared these to our field notes to ensure consistency. We frequently discussed our codes together to make sure we were finding similar themes.

Results

Many themes emerged during data analysis. Overall, we identified five main themes and several subthemes per main theme. The main themes are listed in Table 1. We have included direct quotations from our participants in order to amplify their voices and experiences.
When discussing topics such as the COVID-19 pandemic and the social and racial injustice that occurred during 2020 and 2021, many families reported feeling fear. They were fearful of contracting the COVID-19 virus.

Well, it was hard also because you know the fear, the fear of not knowing (if you had or had been exposed to COVID) (Participant 23).

Participants also reported fear associated with uncertainty and the unknown factors that stemmed from the virus, such as losing their job or being able to provide for their family.

Because he could not work and I had got laid off so the financial piece was like, oh my God, how are we going to pay our rent, our bills, you know, how are we going to get food? (Participant 11).

Another participant expressed the trauma associated with COVID-19.

The pandemic obviously impacted us mentally, physically, spiritually… (Participant 12).

In addition to fearing the virus, our participants from minoritized populations also experienced an added fear of violence or acts of racism. Participants had to make decisions in order to ensure their family’s safety from possibly violent acts.

I live about a mile away from the Police Department and so… before they … put up all of the fences and stuff they were sitting outside of the police station and so it’s like I have to explain all of that to my kids… me saying you know ‘Son, you are only 12 but you are taller than me, your voice is changing, and you are looked at as a threat’ and he was like ‘Cool’ and I was like ‘That’s not cool’ (Participant 9).

Many of our participants experienced an amplification of pre-pandemic stressors on top of the new stressors that accompanied COVID-19. For example, some of our BIPOC participants expressed the trauma that many minority populations came into the pandemic with.

Prior to coming into the pandemic there were more hardships and with that, there is a lot of factors that play into families of color and how it could affect the way we function. Especially among first-generation… These factors really contributed to how stressful the pandemic was, another layer on top of all the trauma that we have already experienced (Participant 15).

One participant even opened up about a violent act of Anti-Asian hate that their partner experienced and how that impacted their family.

We were really scared … we did take a gun training class… We had a safety plan in place for us when, you know, we were at home (Participant 17).

Isolation and social distancing within the home caused many families to struggle with creating and maintaining household boundaries. Participants reported a complete disruption of their normal structure.

We definitely needed a few hours away from each other to like reset. Like the atmosphere was so tight because it is like I still need to get work done, you still have your schoolwork to get done and it was hard, it was really hard (Participant 22).

Both children and parents were often home doing remote learning and work which merged professional and family life. This forced families to sacrifice one for the other.

But during those two months that she was out it was difficult because I was learning to work from home as well as having to help her (Participant 25).

I almost went into a mode where work was gonna have to wait (Participant 2).

Often the mothers or women of the family were forced to make these sacrifices.

But the, it’s different when you’re a mom than when you’re the dad (Participant 2).

As a result, mothers experienced a loss of identity.

I’ve lost my identity or a part of my identity because going to work downtown was a big part of my life, and it was a part of my life that was independent of my family, my kids, my husband, it was something that was all mine, and I’ve lost that (Participant 6).

Many families in our study reported that establishing roles, routines, and schedules were helpful strategies to help re-establish boundaries in their homes.
At one point we tried to have like a white board where we would try to put everybody’s different schedules for the day so you knew you knew like oh we can’t bother [brother] he’s in class right now or Dad’s got a meeting here so let’s be quiet downstairs cause he’s trying to teach a class upstairs [laughs] (Participant 3).

Families also implemented new activities such as movie nights, family walks, and family meals in order to provide some semblance of normalcy and structure.

We would have dance party times every day… and dance around (laughs) and then once it got nice we would have outside time for a couple of hours each day and then we would have reading time so just breaking up the day that way (Participant 14).

Although families found ways to cope with the loss of boundaries, social isolation still took mental tolls on most of the families we talked to.

And I think the isolation just triggered it [mental health struggles] even more (Participant 20).

These effects were present for nearly all family members.

And I feel like everyone had a little piece of depression for a while … And it just, it just felt very dark for us in our house for, for a long time … Like it’s winter all the time (Participant 2).

We got her [daughter] into therapy because … she was showing a lot of depression signs … she acted out more … we definitely did notice that it was harder (Participant 16).

Communication

As families experienced difficult times throughout the pandemic, open communication became a way for families to support each other, strengthen their relationships, and stay connected. One participant reflected on their family dynamic.

So we were very fortunate to have that bond and communication style to be able to touch base with each other (Participant 15).

Families utilized technology to stay connected with loved ones who they weren’t able to see during the pandemic.

Before the pandemic, we would have him [father] over for dinner once or twice a week … so we started doing FaceTime during dinner … it is like a moment of community with him (Participant 8).

Parents also highlighted the significance and difficulties that come with having open and honest communication with their children when discussing more complex hardships such as COVID-19 and racial injustice. One participant recalled,

We were kinda like an open book here if you have a question regardless of what it is, as long as it… So he liked that I allow an open book and if you have a question or a concern and you just don’t understand something or if you are at mom’s and there’s something that you don’t understand or why it’s happening, you’re always open to ask (Participant 26).

Another participant struggled with having conversations with their family members.

And so for me, it was like I had to pick and choose my fight like am I willing to put this much energy in helping my family, and my parents and in-laws especially, in helping them understand what anti-Black racism looks like in the Asian community or am I just going to focus on what is going on right in front of me (Participant 15).

Community Support

Many families turned to their communities for support during the pandemic. Our participants defined their community in different ways, such as: extended family, church groups, community centers, and neighborhoods. One participant recounted support with childcare,

I had auntie, I had their dad… Even my neighbors have been just great… (Participant 23).

The majority of participants made positive remarks about community efforts and teacher support.

I feel like community wise everybody did the best they could, (Participant 2).

However, some participants voiced frustrations with how communities responded to need. One participant stated,

I don’t think they did a horrible job, I just think they really could have done a better job at figuring out what exactly was needed instead of just throwing money at the problem. (Participant 4).

In terms of the resources that communities needed, one participant stated,

It became glaringly clear to me that the internet should be a public utility like anything else. Like there shouldn’t be families out here trying to figure it out on their own as it should just be available for anybody. Why don’t we all have internet? So that is something that I wish our community, the greater community, would solve (Participant 14).

Another participant voiced their frustrations concerning the kind of resources they were being given.

I really didn’t use any of the community resources. I had three boxes delivered every week and how are we gonna finish three loaves of bread every week and three packs of deli meat every week. A gallon and a half of milk…I stopped that right away cuz I don’t really need all this bread in one week and the next week it’s the same box again. I didn’t really use a lot of community resources (Participant 13).
Resilience

Throughout 2020 and 2021, families were forced to find new ways to remain resilient despite the hardships that they were facing. Closeness in relationships seemed to be one way to increase resilience. One participant remarked,

The best thing that came out of this is that I took that opportunity to really get to know my kids. In a way that I would never know them, I know them so well now and I thought I knew them really well before this but I know them even better now [laughs] (Participant 6).

Another participant commented,

We’ve [the family] all been here to help each other. Like when they need stuff I’d be like ‘You know, you do have your older brother or your sister or like you know ask’. My son was looking for an art project, ‘well your sister likes to draw you should ask her’, or lean on each other. (Participant 4).

Many of the participants also claimed that maintaining a positive attitude and feeling grateful and acknowledging their privileges helped them remain resilient. One participant exclaimed,

You survived a pandemic. You’re okay…you’re alive (Participant 27).

Another, which was a couple speaking together, stated,

I realize that— the whole time I felt like “Gosh, I am so — I felt bad because we’re so privileged. We had- we had everything we needed, you know the stimulus helped us unbelievably, just all of the things— the ways that we were supported and the sweet time we had as a family. I look back and think of it in a really amazing way actually. But also just … feeling sadness for the — I just felt really— those who struggled and we didn’t really loose our jobs [but] yeah, just hearing these horrible stories [increased our gratefulness] (Participant 5).

Discussion

There is limited research on the lived experiences of parents with school aged children during the COVID-19 pandemic. Our study sought to understand families’ experiences during this time. We identified five main themes, each with two to three subthemes.

Fear

The first major theme identified was fear, subthemes included fear of COVID-19 and the unknown. Parents reported feelings of anxiety in response to having to make executive decisions regarding their families’ health and safety despite having limited information about the virus. Fear of the unknown and uncertainty has been linked to psychological distress (Carleton, 2016). This mirrors the anxiety that our participants felt during this time.

Parents also had to weigh their children’s physical safety versus their emotional well-being. By following COVID-19 restrictions, physical safety increased but positive social interactions suffered. Our study supported other research, demonstrating that families who continued to allow their children to play with others saw less concerning mental health changes in their children as compared to the families that strictly followed COVID-19 restrictions (Nijhof et al., 2018).

As violence against minoritized populations increased throughout 2020 and 2021, we noted that families of color were simultaneously fearful of contracting the virus and experiencing racial violence. BIPOC parents reported feeling scared to leave their neighborhood because they were unsure of how others would act towards them. They expressed worries for their children’s future and safety. This is consistent with other studies which link the increase in Anti-Black and Anti-Asian hate crimes to poorer mental health for individuals within those communities (Gover et al., 2020).

The last subtheme identified was an amplification of pre-pandemic stressors. Prior to the pandemic, many families were struggling with physical health limitations, mental health, and personal family hardships. The combination of fear of the pandemic, social isolation, and new guidelines and restrictions greatly impacted and amplified pre-pandemic stressors (Chaney, 2020). Our participants who reported significant hardships directly before the onset of the pandemic also expressed more difficulty managing the pandemic as previous hardships impact a family’s ability to adapt to stress (Chaney, 2020).

Boundaries

The second theme that we noticed across participants’ experiences was a change in boundaries. The integration of work and family life has been linked to a loss of boundaries (Olson-Buchanan & Boswell, 2006). The first subtheme focuses on a change of identity for mothers during this time. In addition to being a parent, many of the mothers we interviewed took on the role of being an educator to their child(ren) and a virtual employee. This change of identity has been shown to cause an increased level of stress (Chu et al., 2021). Research has found that during COVID-19 parenting and educating responsibilities mostly fell upon the mothers and women of families (Qian & Fuller, 2020; Schieman et al., 2021). Consistent with other findings, mothers in our study also noted that their loss of identity was exacerbated by having young children who need more attention and structure from their parents (Schieman et al., 2021).

The second subtheme was isolation, or an increase in boundaries with those outside their home—a step that many families took to avoid the risk of spreading COVID-19. Many parents claimed that the loneliness of isolation triggered a decline in their own and their child’s mental health. This has been a
common finding during COVID-19, with rates of anxiety and depression rising with stay at home orders (Hwang et al., 2020).

The third subtheme, establishing roles and routines, helped many of our participants set boundaries in their home. Researchers have identified that managing work and family life in the same space causes family boundaries to become blurred and increases conflict around family roles (Allen et al., 2020). Many families in our study confirmed this, and they mentioned that having routines and establishing family member roles helped mitigate the loss of boundaries.

**Community Support**

The third theme that emerged from the parents’ lived experiences was an appreciation for and desired increase in community support. Our participants elaborated on what type of community support helped their family throughout the pandemic, and what their various communities could have done better.

Some participants reported that having extended family and close friends nearby benefited them and eased their pandemic experience. This is consistent with other studies which show that having consistent support helps families endure hardships (Amati et al., 2018). Participants reported becoming closer to some communities such as their neighborhood, but becoming more distant from other communities, such as their larger town/city or church community. Some loss of connection was due to differences in opinions, as the pandemic has politically polarized the nation (Kerr et al., 2021).

Many participants noted that they wished their communities would have provided more personalized support. Examples of this include community centers directly asking parents what they needed or having teachers be more understanding with their children’s grades and work load. Overall, the parents voiced that they wished there was more direct communication between the communities and families.

**Communication**

The fourth theme identified was communication. Our study supports previously published findings indicating that sensitive and patient communication about changes during COVID-19 is beneficial in mitigating long-term psychological effects in children (Dalton et al., 2020). Conversations about COVID-19, as well as racial tensions and violence, were a main part of families’ experiences. Researchers have identified that most American adults believe that children should be around 5 years old before discussing race, with families of color usually discussing it earlier (Sullivan et al., 2020). This was consistent with our findings, as some of our Caucasian participants believed that their children were too young to take part in these conversations or didn’t feel the need to talk to their children about racism.

The subtheme of using technology to stay connected was also important to families. Many families reported feelings consistent with other findings that technology was essential in maintaining children’s well-being, specifically through online connections with peers (Goldschmidt, 2020). Reports of large family Zooms and youth spending daily time online with friends were shared as ways of coping and staying connected.

Couple and family dynamics was the last identified subtheme of communication. Many of our participants expressed that COVID-19 negatively impacted their parenting and couple relationships as they struggled to balance multiple stressors. Previous research suggests that the number of stressors corresponds with a negative effect on parenting attitudes and family dynamics (Peterson & Hawley, 1998). However, several parents also noted that COVID-19 had positive effects, as they spent more quality time together as a couple and family. This aligns with other research showing that families who spent more time together and increased their time spent on childcare during COVID-19 reported more positive couple and parent–child relationships (Evans et al., 2020; Kalil et al., 2020; Weaver & Swank, 2021; Fraenkel & Cho, 2020). The difference between families may be tied to the quality and quantity of communication as well as other family dynamics. Overall, couples that reported increased and more direct communication seemed to have fared well throughout the pandemic.

**Resilience**

The final theme across our participants’ experiences was their own resilience. All of our participants noted positive outcomes from COVID-19 and attributed this to their resilience and recovery. The first subtheme of resilience is families uniting together. As families were stuck together in quarantine and isolation, our participants appreciated the extra time they had to grow and become stronger in their relationships. Research identifies that families who put their collective well-being first were seen to be more resilient during the pandemic (Prime et al., 2020; Wood et al., 2010). Many families noted an increase in checking in on each other, keeping mental health a priority, and finding new ways to cope with their hardships together. Due to the isolating nature of the pandemic, families were emotionally vulnerable and couldn’t rely on their previous coping mechanisms. They had to learn to become creative with natural surroundings as they had limited resources to depend on. Many families noted spending more time outside.

The second subtheme was expressing feelings of gratitude. Expression of gratitude has been shown to improve well-being, especially for those overcoming trauma (Wood et al., 2010). Appreciating the small things and being grateful became a way that our participants focused on the positives of the pandemic. Our findings echo research that indicates families, even those in vulnerable populations, recognized their privilege and expressed gratitude for their resources while acknowledging the many disparities that were heightened by the pandemic (Smith & Judd, 2020).
Limitations and Future Research

While our sample size was relatively diverse, there was a lack of representation from families of Latinx backgrounds, a group that was disproportionately affected by COVID-19 (Kantamnen, 2020). The majority of our participants were heterosexual females. More representation by fathers and/or same sex families could benefit subsequent research. The participants of our study were all working mothers and fathers. Examining how experiences were different or similar among stay-at-home parents or parents who didn’t work during the pandemic could provide additional, valuable insight. Lastly, all of our participants had access to community resources and technology for online learning and work. Future research could explore the experience of families who lack access to necessary resources. In addition, longer periods of follow up with participants could provide a more comprehensive understanding of the lasting effects of COVID-19 on families.

Implications

Our research provides implications for helping families maintain boundaries within the home and connecting with others outside of the home to support resilience. It also has implications for effective communication between organizations and families, and provides implications for how to increase time spent together and feelings of gratitude among families.

Families identified that establishing routines and roles was beneficial in mitigating the loss of boundaries due to COVID-19. Counselors or those working with families may encourage them to implement schedules into their daily routines; structured routines work as a protective factor against the impact of stress and trauma on mental health (Hou et al., 2020). This structure can also support clear, consistent, and confident communication in families, which our study has shown to be helpful for the relationships and managing stress. Families also noted that staying connected with friends and family outside of the home via technology or distanced activities was beneficial; maintaining these activities should be encouraged as social support has been linked to increased resilience (Ozbay et al., 2008).

Families we interviewed expressed how they felt supported or not supported by various communities. This has implications for effective communication between families and communities. Some participants expressed feeling like their needs weren’t being met. Community support organizations should create a space for feedback from families to understand what exactly is needed and to learn how those needs change over time.

Open communication and gratitude within the family was also beneficial for our participants. Counselors should encourage families to spend time exploring new activities together or expressing their gratitude. For example: having dance parties, weekly movie nights, daily walks together, and sharing what they are grateful for at family meals. This would support family bonding and promote positive feelings in recovery post-pandemic.

There is limited research on the impact that COVID-19 has had on families with school-aged children. Our research shows that these families were significantly impacted and that minority families experienced unique challenges. Further research on how families of all backgrounds were affected by COVID-19 as well as how they continue to recover is essential, especially with the rise of the Delta variant becoming prominent throughout the U.S. As the pandemic continues, families will experience old and new hardships. Now more than ever resources and counseling services are necessary as families try to cope, recover, and remain resilient.

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References

Allen, T. D., Merlo, K., Lawrence, R. C., Slutsky, J., & Gray, C. E. (2020). Boundary management and work-nonwork balance while working from home. International Association of Applied Psychology, 70(1), 60–84. https://doi.org/10.1111/apps.12300
Amati, V., Meggiolaro, S., Rivelini, G., & Zaccarin, S. (2018). Social relations and life satisfaction: The role of friends. Genus, 74(1), 7. https://doi.org/10.1186/s41118-018-0032-z
American Psychological Association (2020). Psychologists report large increase in demand for anxiety, depression treatment. American Psychological Association. https://www.apa.org/news/press/releases/2020/11/anxiety-depression-treatment
Bratman, G. N., Hamilton, J. P., Hahn, K. S., Daily, G. C., & Gross, J. J. (2015). Nature experience reduces rumination and subgenual prefrontal cortex activation. Proceedings of the National Academy of Sciences of the United States of America, 112(28), 8567–8572. https://doi.org/10.1073/pnas.1510459112
Carleton, R. N. (2016). Into the unknown: A review and synthesis of contemporary models involving uncertainty. Journal of anxiety disorders, 39, 30–43. https://doi.org/10.1016/j.janxdis.2016.02.007
Chaney, C. (2020). Family stress and coping Among african Americans in the Age of COVID-19. Journal of Comparative Family Studies, 51(3), 254–273. https://www.muse.jhu.edu/article/772203
Chaudhury, P., & Banerjee, D. (2020). “Recovering With nature”: A review of ecotherapy and implications for the COVID-19 pandemic. Frontiers in Public Health, 8, 604440. https://doi.org/10.3389/fpubh.2020.604440
Chu, K. A., Schwartz, C., Towner, E., Kasparian, N. A., & Callaghan, B. (2021). Parenting under pressure: A mixed-methods investigation of the impact of COVID-19 on family life. *Journal of Affective Disorders Reports*, 5, 100161. https://doi.org/10.1016/j.jadr.2021.100161

Connor, J., Madhavan, S., Mokashi, M., Amanuel, H., Johnson, N. R., Pace, L. E., & Bartz, D. (2020). Health risks and outcomes that disproportionately affect women during the covid-19 pandemic: A review. *Social Science & Medicine*, 266(1982), 113364. https://doi.org/10.1016/j.socscimed.2020.113364

Craig, L., & Churchill, B. (2020). Dual-earner parent couples’ work and care during COVID-19. *Gender Work Organization*, 28(S1), 514–527. https://doi.org/10.1111/gwao.12497

Dalton, L., Rapa, E., & Stein, A. (2020). Protecting the psychological health of children through effective communication about COVID-19. *The Lancet Child & Adolescent Health*, 4(5), 346–347. https://doi.org/10.1016/S2352-4642(20)30097-3

Daly, K. J. (2007). *Qualitative methods for family studies & human development*. Sage Publications, Inc. https://doi.org/10.4135/9781452224800

Dhanani, L. Y., & Franz, B. (2020). Why public Health Framing matters: An experimental study of the effects of Covid-19 framing on prejudice and xenophobia in the United States. *Social Science & Medicine*, 269(1982), 113572. https://doi.org/10.1016/j.socscimed.2020.113572

Evans, G. W., Li, D., & Whipple, S. S. (2013). Cumulative risk and child development. *Psychological Bulletin*, 139(6), 1342–1396. https://doi.org/10.1037/a0031808

Evans, S., Mikocka-Walus, A., Klas, A., Olive, L., Sciberras, E., Karantzas, G., & Westrup, E. M. (2020). From “It Has stopped Our lives” to “spending more time together Has strengthened bonds”: The varied experiences of Australian families during COVID-19. *Frontiers in Psychology*, 11, 588667. https://doi.org/10.3389/fpsyg.2020.588667

Fishman, M. (2020). The silver linings journal: Gratitude during a pandemic. *Journal of Radiology Nursing*, 39(3), 149–150. https://doi.org/10.1016/j.jradnu.2020.05.005

Fraenkel, P., & Cho, W. L. (2020). Reaching Up, down, in, and around: Couple and family coping during the coronavirus pandemic. *Family Process*, 59(3), 847–864. https://doi.org/10.1111/famp.12570

Gallagher, M. W., Bentley, K. H., & Barlow, D. H. (2014). Perceived control and vulnerability to anxiety disorders: A meta-analytic review. *Cognitive Therapy and Research*, 38(6), 571–584. https://doi.org/10.1007/s10608-014-9624-x

Goldschmidt, K. (2020). The COVID-19 pandemic: Technology use to support the wellbeing of children. *Journal of Pediatric Nursing*, 53, 88–90. https://doi.org/10.1016/j.jpnedn.2020.04.013

Gover, A. R., Harper, S. B., & Langton, L. (2020). Anti-Asian hate crime during the COVID-19 pandemic: Exploring the reproduction of inequality. *American Journal of Criminal Justice*, 45(4), 647–667. https://doi.org/10.1007/s12103-020-09545-1

Hill, R. (1958). Generic features of families under stress. *Social Casework*, 49, 139–150.

Hemberg, J. (2017). Experiencing deeper dimensions of gratitude, well-being and meaning in life after suffering. *International Journal of Caring Sciences*, 10(1), 10–16. http://urn.fi/URN:NBN:fi-fe202010083430

Henssler, J., Stock, F., van Bohemen, J., Walter, H., Heinz, A., & Brandt, L. (2021). Mental health effects of infection containment strategies: Quarantine and isolation-a systematic review and meta-analysis. *European Archives of Psychiatry and Clinical Neuroscience*, 271(2), 223–234. https://doi.org/10.1007/s00406-021-01196-x

Hou, W. K., Lai, F. T., Ben-Ezra, M., & Goodwin, R. (2020). Regularizing daily routines for mental health during and after the COVID-19 pandemic. *Journal of Global Health*, 10(2), 020315. https://doi.org/10.7189/jogh.10.020315

Hwang, T.-J., Rabheru, K., Peisah, C., Reichman, W., & Ikeda, M. (2020). Loneliness and social isolation during the COVID-19 pandemic. *International Psychogeriatrics*, 32(10), 1217–1220. https://doi.org/10.1017/S1041610220009988

Kalil, A., Mayer, S., & Shah, R. (2020). ‘Impact of the COVID-19 Crisis on Family Dynamics in Economically Vulnerable Households,’ Working Papers 2020-143, Becker Friedman Institute for Research In Economics. https://ideas.repec.org/p/bfi/wpaper/2020-143.html

Kuntamukkula, H. N. (2020). The impact of the COVID-19 pandemic on marginalized populations in the United States: A research agenda. *Journal of Vocational Behavior*, 119, 103439. https://doi.org/10.1016/j.jvb.2020.103439

Kerr, J., Panagopoulos, C., & van der Linden, S. (2021). Political polarization on COVID-19 pandemic response in the United States. *Personality and Individual Differences*, 179, 110892. https://doi.org/10.1016/j.paid.2021.110892

Laurencin, C. T., & Walker, J. M. (2020). A pandemic on a pandemic: Racism and COVID-19 in blacks. *Cell Systems*, 11(1), 9–10. https://doi.org/10.1016/j.cels.2020.07.002

McCubbin, H. I., & Patterson, J. M. (1982). Family adaptation to crisis. In H. I. McCubbin, A. E. Cauble, & J. M. Patterson (Eds.), *Family stress, coping, and social support*. (pp. 26–47). Springfield, IL: Thomas.

Neubauer, B. E., Witkop, C. T., & Varpio, L. (2019). How phenomenology can help us learn from the experiences of others. *Perspectives on Medical Education*, 8(2), 90–97. https://doi.org/10.1016/j.pme.2019.05.009

Nijhoff, S. L., Vinkers, C. H., van Geelen, S. M., Duijff, S. N., Achterberg, E. J. M., van der Net, J., & Lesscher, H. M. (2018). Healthy play, better coping: The importance of play for the development of children in health and disease. *Neuroscience and Biobehavioral Reviews*, 95, 421–429. https://doi.org/10.1016/j.neubiorev.2018.09.024

Olsen-Buchanan, J. B., & Boswell, W. R. (2006). Blurring boundaries: Crisis on Family Dynamics in Economically Vulnerable Households. In H. I. McCubbin, A. E. Cauble, & J. M. Patterson (Eds.), *Family stress, coping, and social support*. (pp. 26–47). Springfield, IL: Thomas.

Peterson, J., & Hawley, D. (1998). Effects of stressors on parenting attitudes and family functioning in a primary prevention framework.
Kanewischer et al. 375

program. *Family Relations, 47*(3), 221–227. https://doi.org/10.2307/584970

Prime, H., Wade, M., & Browne, D. T. (2020). Risk and resilience in family well-being during the COVID-19 pandemic. *The American Psychologist, 75*(5), 631–643. https://doi.org/10.1037/amp0000660

Qian, Y., & Fuller, S. (2020). COVID-19 and the gender employment Gap among parents of young children. *Canadian Public Policy. Analyse De Politiques, 46*(Suppl. 2), S89–S101. https://doi.org/10.3138/cpp.2020-077

Schieman, S., Badawy, P. J., Milkie, M., & Bierman, A. (2021). Work-Life conflict during the COVID-19 pandemic. *Socius, 7*. https://doi.org/10.1177/2378023120982856

Smith, J. A., Flowers, P., & Larkin, M. (2009). Interpretive phenomenological analysis: Theory, method, and research. Sage.

Smith, J. A., & Judd, J. (2020). COVID-19: Vulnerability and the power of privilege in a pandemic. *Health Promotion Journal of Australia, 31*(2), 158–160. https://doi.org/10.1002/hpja.333

Sullivan, J., Wilton, L., & Apfelbaum, E. P. (2020). Adults Delay Conversations About Race Because They Underestimate Children’s Processing of Race. *Journal of Experimental Psychology: General*. Advance online publication. http://dx.doi.org/10.1037/xge0000851

Thagaard, T. (1997). Gender, power, and love: A study of interaction between spouses. *Acta Sociologica, 40*(4), 357–376. https://doi.org/10.1177/000169939704000402

Weaver, J. L., & Swank, J. M. (2021). Parents’ lived experiences With the COVID-19 pandemic. *The Family Journal, 29*(2), 136–142. https://doi.org/10.1177/1066480720969194

Wilson, J. T. (2016). Brightening the mind: The impact of practicing gratitude on focus and resilience in learning. *The Journal of Scholarship of Teaching and Learning, 16*(4), 1–13. https://doi.org/10.14434/josotl.v16i4.19998

Wood, A. M., Froh, J. J., & Geraghty, A. W. (2010). Gratitude and well-being: A review and theoretical integration. *Clinical Psychology Review, 30*(7), 890–905. https://doi.org/10.1016/j.cpr.2010.03.005

Wu, G., Feder, A., Cohen, H., Kim, J. J., Calderon, S., Charney, D. S., & Mathé, A. A. (2013). Understanding resilience. *Frontiers in Behavioral Neuroscience, 7*, 10. https://doi.org/10.3389/fnbeh.2013.00010

Wu, M., Xu, W., Yao, Y., Zhang, L., Guo, L., Fan, J., & Chen, J. (2020). Mental health status of students’ parents during COVID-19 pandemic and its influence factors. *General Psychiatry, 33*(4), e100250. https://doi.org/10.1136/gpsych-2020-100250

Zhai, H. K., Li, Q., Hu, Y. X., Cui, Y. X., Wei, X. W., & Zhou, X. (2021). Emotional creativity improves posttraumatic growth and mental health during the COVID-19 pandemic. *Frontiers in Psychology, 12*, 600798. https://doi.org/10.3389/fpsyg.2021.600798