

Families in social isolation: What they think and feel

Fernanda Salvaterra¹ & Mara Chora²

¹ Instituto de Apoio à Criança, Portugal, email: fernanda.salvaterra@iacrianca.pt

² Instituto de Apoio à Criança, Portugal



INTRODUCTION

We are going through one of the biggest public health crises of our century, which brought numerous family, social, school, and work life changes. Adults' and children's mental health were also affected. The pandemic and the restraining measures are possible risk factors to mental health, due to loss of employment, difficulties in access to education, changes in family routines, separation from relatives or friends, among others. These situations may cause individual suffering, increase anxiety, and become maladaptive (Cluver et al., 2020; Ornell et al., 2020; Wang et al., 2020).

At Instituto de Apoio à Criança, the elevated number of calls received by our child support helpline was an alert for the importance to study this issue and give children and families space to share their experience while in social isolation.

Based on these assumptions, the aims of this study were:

- To understand the coping resources that children aged 4 to 18 years old, and their families have to deal with the pandemic, and how they maintain their mental health.
- To explore parental and child behavior, the strategies used to cope with the situation created by the pandemic and to understand the relationship between parents and children's behaviors and feelings.

METHODS

Participated in this study 807 Portuguese families: The average household was composed of 4.6 people ($SD = 1.3$), and 2.4 of them were children ($SD = 1.2$). Most children ($n = 796$, 98.6%) were living with their families at the moment the questionnaire was applied.

CHILDREN	
Ages between 4 and 18 years old ($M = 9.1$, $SD = 3.8$) Boys: 417 (51.7%) / Girls: 390 (48.3%) From preschool to 1 st year of college	Children responding to the second part of the questionnaire ($n = 437$): Ages between 8 and 18 years old ($M = 11.8$, $SD = 2.8$) Boys: 225 (51.5%) / Girls: 212 (48.5%) From 2 nd grade to 1 st year of college

PARENTS / CAREGIVERS
Ages between 20 and 61 years old ($M = 41.2$, $SD = 6.3$) From 6 th grade to PhD (Most attended college: $n = 612$, 75.9%) 482 (59.7%) Parents have jobs as specialists in intellectual and scientific activities Professional activity: 445 (55.2%) Teleworking; 211 (26.1%) Lost their job; 148 (18.3%) In person; Questionnaire answered mainly by mothers ($n = 636$, 78.8%)

Instruments:

- **What Families in Social Isolation Think and Feel** (Salvaterra & Chora, 2020) – Parents and children.
- **Depression Anxiety and Stress Scale – DASS-21** (short version; Lovibond & Lovibond, 1995; Portuguese version of Pais-Ribeiro et al., 2004) – Parents.
- **Revised Children's Manifest Anxiety Scale** (Reynolds & Richmond, 1985; Portuguese version of Fonseca, 1992) – Children.

Procedure:

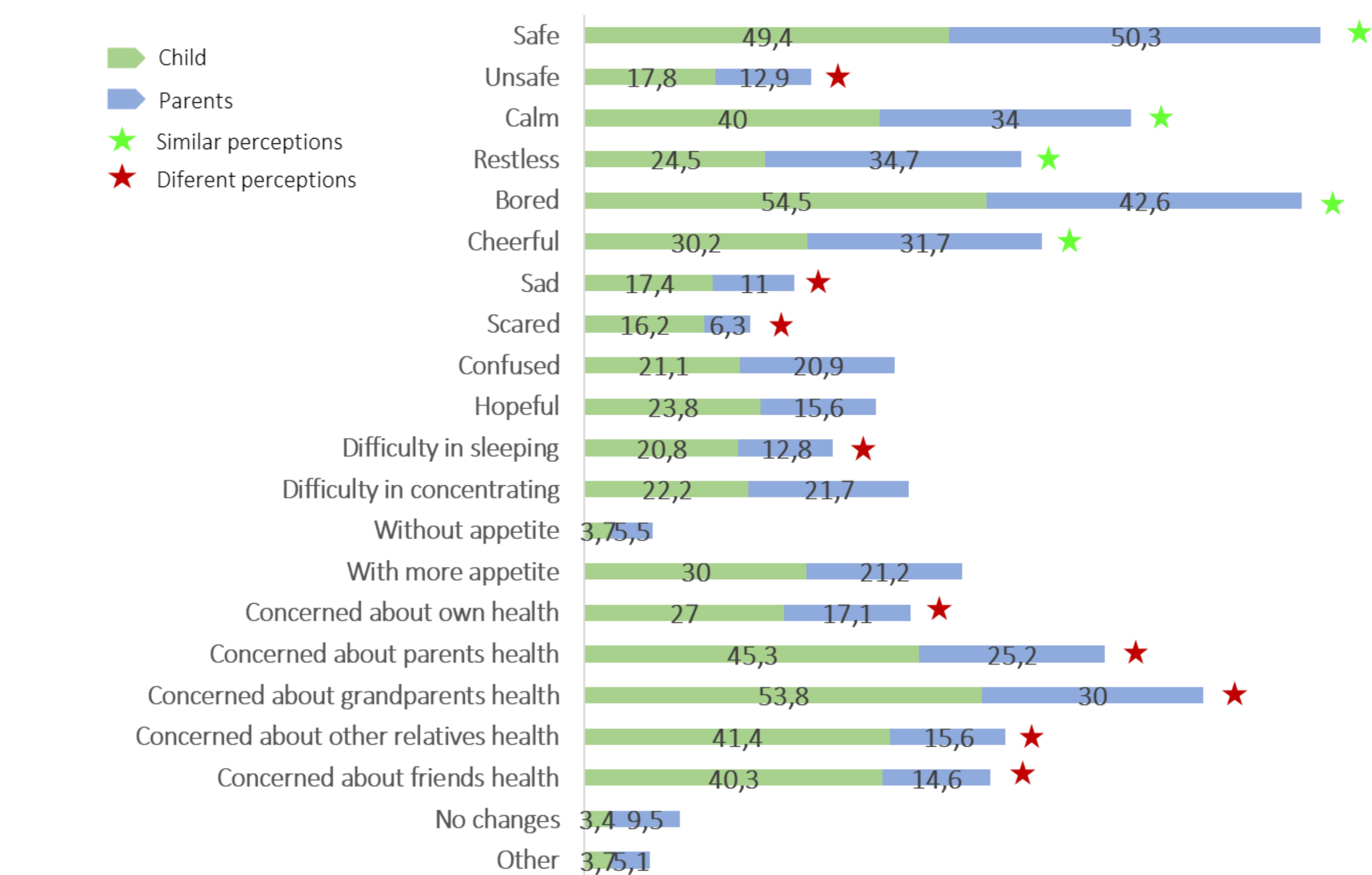
Online questionnaires were filled between April 15th and May 10th of 2020 by every family who had access to it by Instituto de Apoio à Criança's social media and contact list. The first part of the questionnaire was answered by parents of children between 4 and 18 years old. When the target child was 8 years or older, his/her participation in the second part was requested.

RESULTS

Most children reported positive feelings, like being safe, calm, and cheerful, as well as bored and restless. They, also, showed concerns regarding health: firstly, their grandparents', then their parents and their own health, and later their relatives' and friends' health. Contrasting parents' perception regarding how children felt during social isolation and children's responses, we observe that:

- few parents identify their children health concerns, and
- that they perceive their children as feeling less unsafe, sad, scared, and with sleeping troubles than children report (Graph 1).

Graph 1. How the child has been feeling and what is the perception of parents (%)

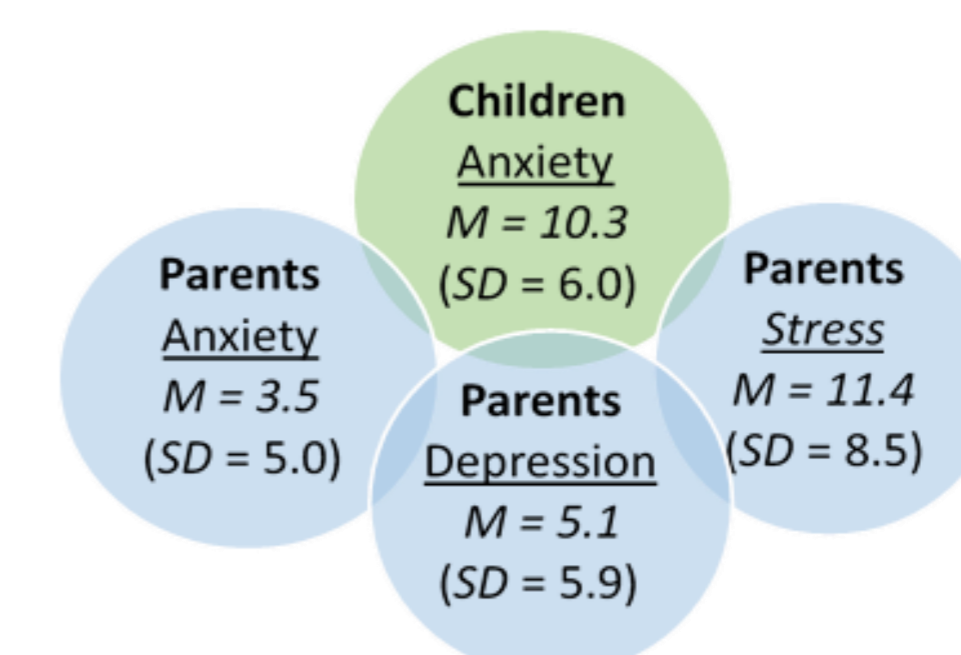


Children's biggest concerns: Health (40.7%); Pandemics and the future (20.6%); School (12.5%).

We found a positive correlation between parents' anxiety, depression, and stress, and children's anxiety: Parents and Children Anxiety, $r(437) = .325$, $p < .001$; Parents Depression and Children Anxiety, $r(437) = .398$, $p < .001$; Parents Stress and Children Anxiety, $r(437) = .425$, $p < .001$.

On average, parents' and children's results on these dimensions are within normative values for the Portuguese population (Image 1).

Image 1. Parents Anxiety, Depression, and Stress, and Children Anxiety



Parents with higher levels of anxiety, depression, and stress and children with higher levels of anxiety when there are changes in day-to-day routines: $t_{\text{parents' anxiety (805)}} = -5.780$, $p < .001$; $t_{\text{parents' depression (805)}} = -4.927$, $p < .001$; $t_{\text{parents' stress (805)}} = -6.282$, $p < .001$; $t_{\text{children's anxiety (435)}} = -3.364$, $p = .001$.

How do children mostly spend their time?

School tasks: homework (83.3%) and virtual classes (74.1%)

On-screen activities: watching movies/series (71.6%) or cartoons (42.3%), gaming on the computer/tablet (58.4%), or on social media (38.2%)

Listening to music (64.1%)

Practicing physical activities (58.8%) – Children who engaged in this activity showed lower levels of anxiety

Parents and children reported as the **most positive aspect of social isolation** the time family spent together (for parents, the time for children and partner, and for kids, the time spent with parents and siblings).

Concerning the **negative aspects of social isolation**, parents and children reported as the most negative not hanging out with friends, not visiting parents/in-laws/grandparents, and not going outdoors often.

DISCUSSION

The way children experience and feel the pandemic is related to how their parents experience and feel it: more anxious, stressed, and/or depressed parents have more anxious children.

This study alerts us to the importance of:

- Parents being more attentive, listen and value the signs of poor psychological well-being of their children, specifically, sleeping difficulties and feelings of fear, sadness, and insecurity.
- Routines as structuring elements that give predictability and organization to family life and contributes to the child's development;
- Family relationships, especially with grandparents, whose absence and health were one of the negative aspects of social isolation and one of the children's concerns.
- Listen to the child's concerns and help them develop coping skills.



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