

The Effect of the COVID-19 Lockdown on Parents: A Call to Adopt Urgent Measures

Lilybeth Fontanesi, Daniela Marchetti,
Cristina Mazza, and Serena Di Giandomenico
G. d'Annunzio University of Chieti-Pescara

Paolo Roma
Sapienza University of Rome

Maria Cristina Verrocchio
G. d'Annunzio University of Chieti-Pescara

The COVID-19 health crisis is strongly affecting the mental health of the general population. In particular, the pandemic may be producing psychological distress and collateral concerns for parents in lockdown, due to unstable financial circumstances, school closures, and suspended educational services for children. A call for measures to increase family-based interventions during the emergency is urgently needed to forestall psychopathological trajectories and prevent the exacerbation of vulnerable conditions.

Keywords: families, COVID-19 outbreak, psychological distress, parental burnout, children's well-being

As of May 18, 2020, there were 225,435 confirmed cases and 31,908 deaths from COVID-19 in Italy, positioning the country as one of the most severely impacted by the global pandemic (COVID-19). On March 11, 2020, the Italian government introduced progressive limitation measures; since that time, Italian families have been forced into a mass lockdown to stem the spread of the virus.

The COVID-19 health crisis is strongly affecting the mental health of the general population (Mazza et al., 2020). In addition, the social impact on children should not be overlooked, especially for those living in conditions of economic, educational, and socio-relational disadvantage.

Although there have been few cases of children infected with this novel strain of coronavirus, childcare is one of the most serious collateral concerns for Italian parents. COVID-19 may be



producing a stressful environment for parents in several ways: Parents may worry about the economic and physical health of their family; they may be concerned about their children's social isolation from peers and teachers; they may be preoccupied with the management, duration, and outcomes of homeschooling; they may have doubts about their ability to provide information to their children about COVID-19 in a reassuring and age-appropriate manner; and they may mistrust the government's intention to provide support for parents juggling childcare, home-based working, and/or summer holidays.

Although the current situation may include positive factors for parents (e.g., the ability to spend more time with their family and children), several features of the current emergency may increase the risk of trauma, including the loss of predictability in the known world, immobility, detachment or distancing, a lost sense of time, and a lost sense of security. For low-income parents and those with preexisting mental health problems, these challenges are likely to be exacerbated.

At present, 8.5 million children in Italy are being homeschooled, and not all families are able to address their children's educational needs on their own. Further, a recent national analysis showed that 12.3% of children ages 6–17 years do not have access to a computer or tablet at home; in southern Italy, this percentage is even higher, at nearly 20%. Throughout the country, only 6.1% of all children live in households with at least one computer available for each family member; furthermore, 40% of all children live in small and uncomfortable houses (Istituto Nazionale di Statistica, 2020). Over and above the economic disparities that are underlined by these statistics, children with special needs, cognitive disabilities, and behavioral problems are currently being confined at home without the specialized support that they would otherwise access at school. This is placing increased stress on parents, with serious implications. Decades of research have confirmed the association between parents' mental health and children's cognitive and so-

Editor's Note. This commentary received rapid review due to the time-sensitive nature of the content. It was reviewed by the special section Guest Editors and the Journal Editor.—KKT

This article was published Online First June 11, 2020.

Lilybeth Fontanesi and  Daniela Marchetti, Department of Psychological, Health and Territorial Sciences, G. d'Annunzio University of Chieti-Pescara; Cristina Mazza, Department of Neuroscience, Imaging and Clinical Sciences, G. d'Annunzio University of Chieti-Pescara; Serena Di Giandomenico, Department of Psychological, Health and Territorial Sciences, G. d'Annunzio University of Chieti-Pescara;  Paolo Roma, Department of Human Neuroscience, Sapienza University of Rome; Maria Cristina Verrocchio, Department of Psychological, Health and Territorial Sciences, G. d'Annunzio University of Chieti-Pescara.

Correspondence concerning this article should be addressed to Daniela Marchetti, Department of Psychological, Health and Territorial Science, G. d'Annunzio University of Chieti-Pescara, Via dei Vestini 66100 Chieti, Italy. E-mail: d.marchetti@unich.it

cioemotional development (Lau et al., 2018; McLaughlin et al., 2012; Reupert & Maybery, 2016). Moreover, there is evidence that parental psychopathology is associated with parenting difficulties, including parents' lack of confidence in their parental role, high stress, too much or too little discipline, more frequent use of punishments, and verbal hostility. These behaviors seem to predict several problems in children, including emotional and behavioral disorders and poor academic performance (e.g., Beckmann, 2019; Crum & Moreland, 2017; Font & Cage, 2018).

Although many parents will show resilience in the face of the challenges associated with COVID-19, for many others, the prolonged lockdown and lack of support will likely exacerbate existing vulnerabilities and contribute to the onset of new stress-related disorders (Horesh & Brown, 2020). For instance, services for neglected children and children in "at-risk" families (e.g., daily educational centers) have been suspended during the lockdown, with only a few continuing to provide remote support, with significant challenges.

We are currently studying the lockdown effects in a sample of 1,126 Italian parents. Our preliminary data, collected 3 weeks ago, suggest that parents of children diagnosed with a mental or physical disease are experiencing higher levels of parental burnout, $t(1124) = 2.70, p < .001$, and perceiving less social support, $t(1124) = -2.79, p < .001$, than other parents are. Moreover, most of these parents are noting significant modifications in their children's behavior (pertaining to, e.g., their inability to concentrate, intolerance, and general discomfort), $t(877) = -10.06, p < .001$, and have responded to these behavioral changes by shifting from authoritative to authoritarian parenting styles, increasing their verbal hostility, $t(877) = -3.25, p < .001$, and decreasing their regulation reasoning, $t(877) = 2.21, p < .001$.

Even if the Italian government and private institutions were to collaborate to provide freely accessible parenting resources during COVID-19, parents' and children's increased risk of developing mental health problems calls for further initiatives, multiple interventions, and economic resources. Unfortunately, the most recent government decree does not include funding for psychological well-being; rather, it places the burden of care on the already overloaded public mental health services. This situation could increase the parental stress burden and affect all family members, at great cost to the Italian society, in terms of general well-being, the national health system, and economic progress. Therefore, it is essential that the Italian government promote systematic preventive and promotion activities, aimed at the following:

1. Mapping existing public and private health and social welfare services to organize and increase resources to support families.
2. Promoting the clear coordination of child protection and mental health services to ensure that children and parents with specific concerns are able to access key services. A working group should be established to facilitate and support this collaboration. This action should also ensure a functional referral pathway for families at risk of violence.
3. Developing best practice principles and guidelines for services and professionals to adequately deal with the

psychological impact of the lockdown on families. These should include information about (a) the key principles of interventions (e.g., safety, hope, social connectedness, self-efficacy); (b) the rapid assessment of families and groups at higher risk, at different times of the outbreak; (c) the quick development of mental health interventions for parents and children, which should address worries, distress, dysfunctional coping strategies, and negative parental behaviors to improve psychological well-being; (d) the adaptation of services to emergency conditions by using unconventional methods, such as video and phone calls; (e) the provision of clear instructions on how to access key services during COVID-19; and (f) the measurement and evaluation of effective activities.

4. Training stakeholders and professionals on the effects of lockdown and isolation on parenting and children's well-being. An output of this might be the development of information toolkits that professionals can use with families to communicate essential psychosocial care principles and psychological first aid.
5. Providing science-based information to enhance future policies regarding children and their families.

Because the lockdown is becoming a chronic traumatic situation with potential negative consequences, we hope to see an increase in family-based interventions that adhere to the abovementioned guidelines. Multidisciplinary teamwork and the ability to assess early risk factors will also be significant in supporting parents and children in the postepidemic setting to ensure their health and well-being.

References

- Beckmann, L. (2019). Does parental warmth buffer the relationship between parent-to-child physical and verbal aggression and adolescent behavioural and emotional adjustment? *Journal of Family Studies*. Advance online publication. <http://dx.doi.org/10.1080/13229400.2019.1616602>
- Crum, K. I., & Moreland, A. D. (2017). Parental stress and children's social and behavioral outcomes: The role of abuse potential over time. *Journal of Child and Family Studies*, 26, 3067–3078. <http://dx.doi.org/10.1007/s10826-017-0822-5>
- Font, S. A., & Cage, J. (2018). Dimensions of physical punishment and their associations with children's cognitive performance and school adjustment. *Child Abuse & Neglect*, 75, 29–40. <http://dx.doi.org/10.1016/j.chiabu.2017.06.008>
- Horesh, D., & Brown, A. D. (2020). Traumatic stress in the age of COVID-19: A call to close critical gaps and adapt to new realities. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12, 331–335. <http://dx.doi.org/10.1037/tra0000592>
- Istituto Nazionale di Statistica. (2020). *Indagine Spazi in casa e disponibilità di computer per bambini e ragazzi* [Survey on home spaces and computer availability for children and adolescents]. Retrieved from <https://www.istat.it/it/files/2020/04/Spazi-casa-disponibilita-computer-ragazzi.pdf>
- Lau, P., Hawes, D. J., Hunt, C., Frankland, A., Roberts, G., & Mitchell, P. B. (2018). Prevalence of psychopathology in bipolar high-risk offspring and siblings: A meta-analysis. *European Child & Adolescent Psychiatry*, 27, 823–837. <http://dx.doi.org/10.1007/s00787-017-1050-7>

- Mazza, C., Ricci, E., Biondi, S., Colasanti, M., Ferracuti, S., Napoli, C., & Roma, P. (2020). Nationwide survey of psychological distress among Italian people during the COVID-19 pandemic: Immediate psychological responses and associated factors. *International Journal of Environmental Research and Public Health*, *17*, 3165. <http://dx.doi.org/10.3390/ijerph17093165>
- McLaughlin, K. A., Gadermann, A. M., Hwang, I., Sampson, N. A., Al-Hamzawi, A., Andrade, L. H., . . . Kessler, R. C. (2012). Parent psychopathology and offspring mental disorders: Results from the WHO world mental health surveys. *British Journal of Psychiatry*, *200*, 290–299. <http://dx.doi.org/10.1192/bjp.bp.111.101253>
- Reupert, A., & Maybery, D. (2016). What do we know about families where parents have a mental illness? A systematic review. *Child & Youth Services*, *37*, 98–111. <http://dx.doi.org/10.1080/0145935X.2016.1104037>

Received April 21, 2020

Revision received May 19, 2020

Accepted May 19, 2020 ■