

RESEARCH BRIEF
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Responsive caregiving, early learning and play, and children's safety and security during COVID-19


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INTRODUCTION

During the COVID-19 pandemic there have been drastic changes in family life and to programs and services that promote and protect early childhood development, including childcare, education, and child protection services. This rapid review takes stock of emerging research on nurturing care for young children during the COVID-19 crisis. This review synthesizes 112 scholarly and scientific studies that have examined three pillars of nurturing care during the pandemic: responsive caregiving, early learning and play, and children’s safety and security. The findings can inform global early childhood development and other stakeholders, who have advocated for increased support and funding to ensure young children and caregivers are supported and protected during the COVID-19 pandemic. In an effort to balance research breadth with rigor, we included only evidence that was supported by a full description of the methodology, resulting in 95 quantitative studies, 9 qualitative studies, and 8 mixed methods designs.¹ While most studies (89) in the review focus on high income countries, there is increasing geographic diversity, including studies in Bangladesh, Brazil, Cambodia, China, Ethiopia, India, Iran, Mexico, Nigeria and Turkey. We found the largest numbers of papers addressing issues related responsive caregiving and parental stress and mental health during the

COVID-19 pandemic, followed by studies examining issues related to children’s safety and security, such as a reduction in referrals for potential child maltreatment. We found relatively few studies related to opportunities for early learning and play during the pandemic, indicating a need for the generation of more research on these topics.

 This review synthesizes 112 scholarly and scientific studies that have examined the impacts of the COVID-19 pandemic related to three pillars of the [Nurturing Care Framework](#):



RESPONSIVE CAREGIVING



EARLY LEARNING AND PLAY



CHILDREN’S SAFETY AND SECURITY

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KEY FINDINGS

Responsive caregiving and caregiver mental health during the COVID-19 pandemic

- We identified more than 30 papers that find increases in caregiver stress, depression and anxiety during the COVID-19 pandemic. Evidence indicates that traditional drivers of stress among parents, particularly those related to economic insecurity, have been exacerbated during the pandemic period, with the largest effects among populations that are already economically vulnerable. Families with young children, mothers, and those with pre-existing mental health conditions were at heightened risk for stress and poor mental health. Studies indicate that higher levels of caregiver stress and worsening mental health during the pandemic was associated with lower parent-child closeness, harsher parenting attitudes and increased parent-child conflict.
- Studies provide evidence that fathers have taken on more childcare responsibilities during the pandemic relative to before. However, mothers are still disproportionately responsible for childcare and housework.
- Studies suggest that mothers have reduced access to breastfeeding support during the COVID-19 pandemic, and some have raised concerns about discomfort and invasiveness of virtual consultations for lactation support. Qualitative evidence points to increased time to breastfeed, improved privacy, and greater breastfeeding support from male partners during lockdown.

Opportunities for early learning and play during the COVID-19 pandemic

- One of the main takeaways from this rapid evidence review is the dearth of research on play during the period of COVID-19 lockdowns and gradual reopening. While research considers learning broadly, and distance learning in particular, the crucial nature of play in child development and the potential of lockdowns to affect how children engage in play, has not found its way into research on the effects of the COVID-19 pandemic during the period covered in this review.
- Studies suggest that children in early childhood education often did not have contact with teachers, or access to remote early learning during school closure. Evidence is mixed on the nature and extent of caregiver engagement in early learning activities during lockdown.
- Studies report reduced physical activity and outdoor play and more sedentary behavior among children during the COVID-19 pandemic. In several studies, parents expressed concern over excessive screen time among young children.

Children's safety and security during the COVID-19 pandemic

- Evidence from 16 studies indicates a decline in referrals of potential child maltreatment to child protective services during COVID-19 linked to school closure and a significant drop in reporting made by educators and other mandated reporters.
- Nine studies report a significant reduction in emergency department presentations and operations for injuries among children during lockdown. Sporting-related injuries and those that occurred on playgrounds decreased during lockdowns, while bicycle injuries, burns and poisonings increased.





WHAT CAN WE LEARN FROM THIS EVIDENCE, AND WHAT DO WE STILL NEED TO KNOW?

Based on these identified mechanisms, we suggest four multi-sectoral policy and programme responses for action by governments, civil society, international and community-based organizations. First, minimizing family stress should continue to be a top priority in COVID-19 response plans and prevention-based approaches. There is a need for the scale-up of social protection mechanisms to ensure families are meeting basic income needs and food and housing security. Second, there is a need for improved access to and use of mental health services for parents and caregivers. Third, there is a need for innovative approaches to highly scalable parenting interventions such as peer-support and online platforms that can be quickly evaluated to ensure acceptable efficacy. Lastly, there is a need to ensure educators and health workers are trained and supported to recognize early signs of child maltreatment in virtual delivery models. The evidence suggests all of these options should be pursued vigorously and simultaneously so that the pandemic does not break the pillars of nurturing care and wipe out decades of progress, especially for vulnerable families and children.

The evidence is suggestive of wide-ranging, detrimental impacts for parents, children, and families, which was largely collected during the first lockdowns and which in hindsight represents the early phase of the pandemic. It is imperative that future research investigate the longer-term impact of the COVID-19 pandemic on families, as we enter a period of gradual relaxation of lockdown measures in some regions and second waves and renewed lockdowns in other regions. There is an urgent need for action-oriented studies – those that go beyond identifying trends and begin to pinpoint “what works” to effectively promote and protect nurturing care during health emergencies and school closure. In particular, there is a need to identify effective interventions and strategies for families experiencing income loss, food insecurity, for mothers with young children, families with disabled children, and those with pre-existing mental health challenges. A substantially greater amount of inquiry is needed into the effects of lockdowns on play, and the quality of the caregiver-child playful interactions. We look forward to seeing more studies of program implementation across diverse contexts to address these priority areas in the future.