

Judith Kelley: COVID has upended lives both here in the US and around the world. It doesn't matter who you are or where you live, all of our daily lives are, in some way touched by the pandemic. The mental health challenges alone are staggering. Not long ago, the US Surgeon issued an advisory highlighting a youth mental health crisis in the US, that he says has been further exposed by the COVID-19 pandemic. Surgeon General Vivek Murthy said even before the pandemic, an alarming number of young people struggled with feelings of helplessness, depression, and thoughts of suicide, and rates have increased over the past decade. The COVID-19 pandemic further altered their experiences at home, school, and in the community, and the effect on their mental health has been devastating. I'm Judith Kelley, Dean of the Sanford School of Public Policy here at Duke University. My guest today has been researching COVID-19 and children's mental health in countries around the world, and she's here to tell us what she's found. Jennifer Lansford is a research professor in the Sanford School, where she's an affiliate of the Center for Child and Family Policy. Welcome to Policy 360, Jennifer.

Jennifer Lansfo...: Thank you, it's a pleasure to be here today.

Judith Kelley: Jennifer, you work on such an important topic, and I know you've been working on a project called Parenting Across Cultures, and you've been doing that for a long time. Can you tell us just a little bit about that project?

Jennifer Lansfo...: Sure. So we launched Parenting Across Cultures in 2008, by recruiting a sample of eight-year-old children and their mothers and fathers in nine countries. The countries are China, Columbia, Italy, Jordan, Kenya, the Philippines, Sweden, Thailand, and the United States. And we've been conducting annual interviews since 2008 with these children, who are now in their early twenties, and their parents.

Judith Kelley: How many are there again in the sample?

Jennifer Lansfo...: It's a little over 1,400 total. And that includes roughly 100 families, up to 120 families, in each of 13 different cultural groups. So in the United States, for example, we have roughly 100 European American, roughly 100 African American, and roughly 100 Latino families. And then we have families in a couple of different cultural groups in Italy, and a couple in China, and then folks in other countries as well.

Judith Kelley: And what did you want to learn when you first launched this? Did you want to look at and compare parenting styles? What were your goals?

Jennifer Lansfo...: Yeah, so our initial goals had a lot to do with understanding parents' discipline strategies. And we came to these questions, in large part, because at the time, there were a lot of high-profile cases that were getting media attention about immigrant families in different countries who were doing things that were considered acceptable and even encouraged in their country of origin, but when

they were in their new country were sometimes getting reported to child protective services for things that looked abusive in a different context. And I can give you a couple examples of those things.

Judith Kelley: Sure.

Jennifer Lansfo...: So for example, corporal punishment is now illegal in 63 countries around the world, the United States is not one of those, but there were some examples of American parents who had immigrated to Sweden, for example, and being visited by teachers saying, "We've come to talk to you about the abuse," and the American parents being a bit surprised. And there was this disconnect between how the American parents were using corporal punishment and corporal punishment being illegal in Sweden.

Judith Kelley: It's interesting that you mentioned that one case just because about 10 years ago, I spent a year in Denmark, and my husband had to quote-unquote "immigrate to Denmark" for that year. And when you do that, as a foreigner, the one thing that you have to sign as you are obtaining that status is a document that says, "I understand that corporal punishment is illegal in Denmark."

Jennifer Lansfo...: That's fascinating. And I actually think it's great that it's clear upfront and that can make sure that people are understanding the new context that they're going to and having an educational function. I think that's terrific.

Judith Kelley: So anyhow, so that was one example from where you moved to a country and the practice you had at home is not acceptable in your new country. You said you had another example.

Jennifer Lansfo...: Yeah, so in the United States, there are some immigrant groups that use traditional healing practices, things like cupping or coining. And you may remember Michael Phelps at the Olympics.

Judith Kelley: Yes, all spotted.

Jennifer Lansfo...: Yeah. These practices leave marks on the body that can look like a child has been abused.

Judith Kelley: Right.

Jennifer Lansfo...: But these practices are done, not with the aim of hurting the child, but to try to encourage healing. And so sometimes kids would come to school, for example, with these marks, that would lead their teachers to report them to child protective services, for example.

Judith Kelley: Right, right.

Jennifer Lansfo...: So part of our interest in launching the Parenting Across Cultures project was better to learn about different parenting practices in different cultural contexts. And whether cultural contexts affected how parents and children interpreted parent's behavior, and then the ultimate outcomes on child development.

Judith Kelley: Right. So you have been doing this now for a long time, and you've been collecting data on these families, and then COVID comes along and you saw an opportunity. Can you talk a little bit about that?

Jennifer Lansfo...: Right. So we've had this research infrastructure in these nine different countries, and these collaborative teams with researchers at universities in these nine countries, and when the COVID pandemic hit, we thought this is clearly disruptive across the world, and we had an opportunity to better understand how families were coping with the pandemic. So a colleague here at Duke, Ann Skinner, led the effort in developing a brief measure of experiences during COVID-19. And this measure has now been used by a number of research teams even outside of our project.

Judith Kelley: What's that measure? What does it capture?

Jennifer Lansfo...: So it captures self-reported increases in problems like depression and anxiety.

Judith Kelley: Self-reported by the parents or by the young people?

Jennifer Lansfo...: Good question. We have young peoples' reports and we have their mothers' and fathers' reports.

Judith Kelley: I see.

Jennifer Lansfo...: But the mothers and fathers for example, are reporting on their own increases in problems during the pandemic. And young people are reporting about increases in problems during the pandemic.

Judith Kelley: I see.

Jennifer Lansfo...: And we also, in addition to asking about increases in anxiety and depression and substance use, we also ask people how personally disruptive the pandemic has been. We ask about how compliant they've been with their government or health recommendations during the pandemic. And we ask about their confidence in how their government is handling the pandemic.

Judith Kelley: So, this is fascinating because you have these very, very different country contexts. And yet everybody gets hit by a similar shock that their government handles in different ways. And of course, as parents, we all are trying so hard to support our children during this very difficult time school closures with universities going online with young people trying to emerge into society in a time when the job market was overturned in many different ways and being so,

it's interesting that you gathered information both on the children and the parents let's start to talk first about the parents. Is there some takeaway point from you about how the parents in general are doing, and then is there any kind of interesting differences across the countries?

Jennifer Lansfo...: Yeah, so I think a general takeaway is that parents and this includes mothers and fathers are in general reporting increases in anxiety and depression, more so than getting in fights or arguments or things like that. So it tends to be more of the internalizing end of the spectrum than the externalizing. Parents are also in general reporting more substance use during the pandemic than prior to the pandemic. That's generally across countries as well. But it's not all doom and gloom at least early in the pandemic. We're also reporting an increase in the amount of time they were spending doing fun things with their families so that seems like a bright spot in other ways, kind of gloomy me picture.

Judith Kelley: I certainly have heard parents say one silver lining of this is that I have gotten to spend more time with my children.

Jennifer Lansfo...: And I think that's been born up in our data again across countries. One thing that was a strength of our study and having data from years prior to the pandemic is that we were able to look at different pre-pandemic factors in relation to how people were reporting they were doing during the pandemic. And so I think one of the interesting findings there is that we found that parent adolescent relationships prior to the pandemic were related to mother's reports of their increases in anxiety and depression during the pandemic.

Judith Kelley: But not to fathers?

Jennifer Lansfo...: No, not to fathers.

Judith Kelley: And so how mothers and their children related before the pandemic affected how they coped during the pandemic?

Jennifer Lansfo...: That's correct. Yep. So, and the specific aspects of parent adolescent relationship quality that we looked at included adolescent disclosure, which means how much adolescent spontaneously told their parents about what was going on in their lives, their friends, their activities.

Judith Kelley: Which they're not necessarily prone to do just naturally.

Jennifer Lansfo...: Well, that's exactly right. So if adolescents are spontaneously disclosing to their parents, that really just, they probably have a pretty supportive open relationship.

Judith Kelley: Yes. Yeah.

- Jennifer Lansfo...: Because, oftentimes adolescents are more secretive. And we also looked at other factors involving conflict resolution and destructive conflict. So destructive conflict would be things like using sarcasm or storming out of the room trying to hurt one's feelings so that would be kind of a maladaptive aspect of parent adolescent relationships. And then we looked at other aspects of supportive parenting, including things like spending time with the adolescent, doing things that they enjoy, having meals together, things like that. And those three different aspects of parent adolescent relationship quality acted as buffers between how much mothers thought their lives had been disrupted during the pandemic and increases in their anxiety and depression during the pandemic.
- Judith Kelley: So the more time you were spending together around meals, the less you were storming out of the room and having these kinds of conflict or behaviors, the better you were able to cope with the pressures of the pandemic?
- Jennifer Lansfo...: That's correct. And I think that those findings really suggest taking a long view of family relationships, not just during times of crisis, like the pandemic. But thinking about how families can be sources of resilience and strength with factors that accumulate over time.
- Judith Kelley: Why do you think this only showed up for mothers and not for fathers?
- Jennifer Lansfo...: That's a good question. In some other aspects of our findings, we also found results for fathers as well as mothers. So I think that in some cases, adolescents are perhaps more open to being disclosing to mothers than to fathers in some cultural contexts, mothers still take on more of a caregiving role than fathers. That's certainly not the case everywhere. And there's more gender equality than ever before in parenting roles. And that's true in many different cultural contexts.
- Judith Kelley: Was there a gender effect with the children or was it just all the same?
- Jennifer Lansfo...: We found a few gender differences, but not in this particular set of analyses.
- Judith Kelley: So, I am curious because we've talked in general about how parents were affected and how that was determined by their relationship with their children prior to the pandemic. When we turn that around, what did you find about the children?
- Jennifer Lansfo...: Good question. So overall we found that about half of the now young adult children reported an increase in anxiety and depression during the pandemic.
- Judith Kelley: And what was the baseline for that?
- Jennifer Lansfo...: That's a good question. We had different measures before the pandemic than during the pandemic. So it's not a directly comparable measure at this stage. We also found that about a third reported, an increase in arguments and anger,

but this is them self-reporting saying that I feel more angry now than I did before the pandemic, rather than comparing a measure of anger pre-pandemic with a separate measure of anger during the pandemic. But even with those, those large numbers of reporting increases in anxiety, depression, anger, arguments, things like that. We found that those same positive parent adolescent relationship qualities that acted as buffers for mothers also acted as buffers for the young adults and the sample.

Judith Kelley: Those are big numbers you know, half?

Jennifer Lansfo...: They are big numbers, they're. And one thing when we think about development for this age group, at the beginning of the pandemic, the people who were initially children in the sample were roughly 20 years old at the beginning of the pandemic. And at that time of life developmentally, generally people are gaining more autonomy.

Judith Kelley: Sure.

Jennifer Lansfo...: Living apart from their parents, starting jobs, if they're in college, they're getting autonomy in that way. And of course the base rates of people having those different experiences is different in the different countries. And in Sweden, for example, most people move to residential independence before the age of 20, whereas in Italy, it's on average after the age of 30.

Judith Kelley: Yeah.

Jennifer Lansfo...: So you see big differences even within the nine countries in our sample, the average ages that people do, these things, but even in countries in our sample that are thought of as being more interdependent, China, Thailand, the Philippines, for example, in general, you see normative increases in adolescents and young adults, autonomy. And the pandemic has really disrupted that in a way that I think is hard for young people to cope with. Because instead of being able to be independent, many of them had to move back and live with their parents if they were living independently. And weren't able to do many of the things related to education and seeking jobs that would be normally expected of young people that age.

Judith Kelley: And it's interesting, because this was really something you saw across the countries.

Jennifer Lansfo...: We really did. I think we were a bit surprised that we saw as many similarities across countries as we did.

Judith Kelley: Right.

Jennifer Lansfo...: And I think in part, this is speculative, but I think it speaks to just how universally disruptive the pandemic was in ways that were very difficult to cope with.

- Judith Kelley: What are the youngest children in your sample.
- Jennifer Lansfo...: They are about 18. So we had a relatively tight range.
- Judith Kelley: So it was that cohort you had been following for a long, long time.
- Jennifer Lansfo...: Exactly.
- Judith Kelley: Now we talked a little bit about many things that were the same across countries, but I also noted that you had a very interesting insight about the role of government because these countries had in some cases, very different experiences in terms of how much things went virtual, what kind of testing regimens their governments or their environments were implementing. There were many different COVID situational context that varied across countries. And you found that that mattered.
- Jennifer Lansfo...: Right. So these countries responded to the pandemic in quite different ways, ranging from quick and restrictive lockdown measures that persisted for a long time to the opposite end. Sweden, for example, did not implement the widespread lockdowns that most other countries did.
- Judith Kelley: Right. Especially in the beginning.
- Jennifer Lansfo...: Exactly. Early on schools around the world were closing, Sweden closed some upper secondary schools, but not for the youngest kids. And so the government responses and health system responses were quite different across the countries. And I think another thing that was different across the countries going into the pandemic was people's thoughts about masks, for example. So starting in the early 1900s with flu pandemics, many Asian countries were quite open to wearing masks. And that was the case during earlier pandemics. And so I think when COVID did people in many Asian countries very quickly adopted mask wearing, and that had been part of public health practice for a long time before the COVID pandemic. And that was in contrast to other countries, including the United States where there was much more reluctance to wear masks.
- Judith Kelley: Sure.
- Jennifer Lansfo...: And I think the mask wearing was not political in some countries in the same way that it became political in the United States. So mask wearing was perceived as being just a social responsibility in a way to protect your family and other people in your community as opposed to carrying any sort of political weight. So those were differences going into the pandemic.
- Judith Kelley: Was there also just a sort of a sense of difference in, I think my government kind of has this under control versus this is not being handled well and that adds to my anxiety?

Jennifer Lansfo...: For sure. So going into the pandemic, the country, the nine countries in our sample ranged from countries that have they're among the lowest in terms of confidence in the government to among the highest and confidence in the government. And that really carried over into the pandemic as well. And what we found in our own research is that people's reported confidence that the government was handling the pandemic in the best possible way affected how they fared during the pandemic. So when we looked at people's reports of how much anxiety they had prior to the pandemic, for example, in relation to their reported increases in anxiety and depression during the pandemic, we found that in general, if people were more anxious and depressed prior to the pandemic, they reported bigger increases in anxiety and depression during the pandemic. But that was buffered by confidence in the government.

This was also the case for externalizing behaviors. Externalizing behaviors are things like aggression and delinquency. And if people had more confidence that their government was handling the pandemic in the best possible way, there was less likely to be continuity in kind of pre COVID problems and an increase in externalizing the behaviors during the pandemic.

Judith Kelley: So it'll be interesting to see how that, the differences in how these countries approach the pandemic played out. You know, we debated a lot, whether some of these measures were warranted in health on health grounds, but less on the psychological they were going to have on children. And so much of that you've been able to pick up here, but it also remains a bit to be seen how that will play out over the next couple of years, how we recover.

Jennifer Lansfo...: You're absolutely right. And I think that the discourse, I think, is increasingly moving in that direction because especially as we move beyond the media health crisis, these long term development concerns become even more pressing, how do we help children catch up in school when they education was so disrupted? How do we help mitigate these harmful mental health problems that have kind of spiked during the pandemic? And those I think, are we really pressing next concerns.

Judith Kelley: I think as parents are reflecting on these last couple of years, your study at least points out a couple of things. One as much as we have felt alone, we are far from alone. This is really a global phenomenon and that parents across the world have been affected by it. And it's not all in our control either in that the way it's been dealt with in different countries. There're some things that have been out of the control of parents. And we've just all had to figure out how to maneuver through it as best as we can.

Jennifer Lansfo...: That's absolutely right. And I think that, I think we've learned a lot that can help us in future pandemics and other crises in terms of lots of different things. You know, part of it is in kind of how we should best communicate findings that are health related to families and thinking systematically about what trade offs are across many different domains, including health education, social protection,



there are many different interacting systems that it's important to take all of those into joint account.

Judith Kelley: Yeah. One thing that'll be interesting is I guess so many restaurants were closed around the world. And so people were not only spending more time with their children, but more people were just cooking and eating at home. And whether some of these things linger might actually matter for parent children, child relationships, and may matter for how well we buffer future crises together.

Jennifer Lansfo...: I think you're right. And I think these are, this is anecdotal. We don't actually have data on this that I'm speaking of here, but we've had parents say that they really appreciated that extra time at home with their families. And they don't want to go back to the same kind of hectic running around kind of lives that they had before the pandemic.

Judith Kelley: That makes a lot of sense. So, you have kids yourself, Jennifer, right?

Jennifer Lansfo...: I do. So I have a 15 year old son and an 18 year old daughter.

Judith Kelley: Yeah. So you have somebody right in this range and I have a 20 year old. So I really appreciate you sharing some of your insights about this and what's the best piece of advice you could give a parent of somebody in this age range?

Jennifer Lansfo...: I think, gosh, being supportive and honest and trying to keep lines of communication open acknowledging how hard this is for everyone. Acknowledging that you recognize that they're having to give up a lot in terms of what they would like to be doing in terms of their freedoms, that things are just acknowledging the hardship of how disrupted things are. And trying within the constraints that are imposed by the pandemic to give young people as much choice and freedom as possible. So if there are things within the home and this varies depending on where countries are in terms of their lockdowns and other restrictions and things, but during times of lockdown, for example, if there are things that you can give the adolescent choice about meals or activities to do at home, maybe being more forgiving of screen time, if they're mostly using that is a way to connect with peers that they're not able to be with in person trying to have flexibility and give young people as much choice as they can have within the other restrictions that are being imposed during this time.

Judith Kelley: So it comes back again to that sense of autonomy. That's develops during these important years.

Jennifer Lansfo...: I think that's right. And I think we have some new findings that are under review right now that I think speak to the importance of both autonomy and connection in terms of people's psychological needs. So we found in this work that greater confidence in government responses to the pandemic was associated with greater compliance with COVID mitigation strategies and less vaccine hesitancy across cultures and across reporters. And this is speculative,

but we think that's probably because confidence in the government reassures individuals, that health recommendations are in the public's best interests and that vaccines are safe. But in understanding what makes people confident in their government and what are people's psychological needs. There's good evidence from psychology that people have needs for both autonomy and connectedness. So I think in part that maybe why people have reacted with such anger when they perceive that mandates are taking away their personal freedoms. This is true not just of young people who feel like their freedoms have been taken away, but for adults as well.

Judith Kelley: Yeah.

Jennifer Lansfo...: So I think navigating these different psychological needs related to autonomy and relatedness are important.

Judith Kelley: This is really very, very insightful. I appreciate so much you taking the time to talk with me today.

Jennifer Lansfo...: It's my pleasure. Thanks for having me.

Judith Kelley: Jennifer Lansford is research professor in the Sanford school where she's an affiliate of the center for child and family policy. And if you enjoy this conversation and want to consider more stories related to children and families, you might want to check out our most popular episode of all time. Since we launched the podcast and it's episode number 81, and we explore popularity, likability, status, and success with a professor of psychology in neuroscience at the university of North Carolina chapel hill, who is written a whole book on the subject that's episode 81, and it's called popular. Check it out. You can find past episodes either in your podcast feed or our website [policy360.org](http://policy360.org). We'll be back soon with another conversation. I'm Judith Kelley.