Caregiving and parenting practices during mandatory confinement by COVID-19 of early childhood caregivers

Prácticas de crianza y cuidado durante confinamiento obligatorio por COVID-19 de cuidadores de primera infancia

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SUMMARY

Introduction: During the COVID-19 infection, the population of infants and adolescents has been the most affected in aspects such as health, adequate nutrition, responsive care, protection, and safety, among others.

Objective: To describe the care and upbringing practices of early childhood caregivers during compulsory confinement, from the point of view of health, nutrition, and psycho-pedagogical support.

Method: Quantitative, descriptive research with 283 caregivers of early childhood children in a CDI child development center in Sincelejo, using instruments such as a sociodemographic questionnaire and a questionnaire on 14 care and upbringing practices proposed by the Colombian Institute of Family Welfare ICBF (2021).

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Recibido: 29 de marzo 2023 Aceptado: 30 de abril 2023 **Results:** Caregivers made a significant accompaniment in the health and nutrition component, as well as in the psycho-pedagogical component (75%), however, about 25% of caregivers at an average level complied with the practices of both components.

Conclusion: During a health emergency, the practices to guarantee the integral development of early childhood children are complied with.

Keywords: Early childhood, caregivers, care and upbringing practices, compulsory confinement, COVID-19.

RESUMEN

Introducción: Durante la infección por COVID-19 la población de infantes y adolescentes han sido los más afectados en aspectos como salud, nutrición adecuada, atención receptiva, protección, seguridad, entre otros.

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Objetivo: Describir las prácticas de cuidado y crianza de los cuidadores de niños y niñas de la primera infancia durante el confinamiento obligatorio, desde el acompañamiento en salud y nutrición y psicopedagógico.

Método: Investigación cuantitativa, tipo descriptiva con 283 cuidadores(as) de niños y niñas de la primera infancia de un centro de desarrollo infantil CDI de Sincelejo y se utilizaron instrumentos como cuestionario sociodemográfico y uno sobre 14 prácticas de cuidado y crianza propuesto por el Instituto Colombiano de Bienestar Familiar ICBF (2021).

Resultados: Los cuidadores hicieron un acompañamiento significativo en el componente de salud y nutrición, al igual que en el psicopedagógico (75%), sin embargo, alrededor del 25% de los y las cuidadores(as) en un nivel medio cumplieron con las prácticas de ambos componentes.

Conclusión: En medio de la emergencia sanitaria se cumplan con las prácticas para garantizar el desarrollo integral de los niños y niñas de la primera infancia.

Palabras clave: Primera infancia, cuidadores, prácticas de cuidado y crianza, confinamiento obligatorio, COVID-19.

INTRODUCTION

The COVID-19 pandemic generated a health and economic crisis that has had effects on the entire population (1), but early childhood children have perhaps been the most invisibilized and harmed population during the compulsory confinement measures adopted due to the risks they were exposed to and the vulnerable situations such as increased poverty, exploitation, violence, mental health problems, food, inadequate provision of health services, modifications in care, child-rearing practices, increased educational gaps (1).

Before the pandemic, Latin America had high rates of poverty, increasing during the COVID-19 pandemic, with early childhood children being the most affected in this and other aspects such as good health, adequate nutrition, responsive care, protection, and security, and opportunities for early learning (2), a situation that affects their mental health and development. The economic impact generated by a pandemic increases the situation of poverty, where living in such a state for long periods aggravates social problems,

having negative effects on mental health and the development of the life cycle of children (2,3).

During the COVID-19 infection, the population of infants and adolescents has not been the age group that has claimed the most victims, but the measures adopted led to difficult access to food, feeding programs, vaccination, increased risk of malnutrition, limited access to health and nutrition controls (2-4), as well as the implementation of unhealthy care practices such as sedentary lifestyles and unhealthy eating (5); events that can trigger increased deaths in children, as well as in pregnant and lactating mothers (6). The implementation of control measures during the health emergency has had other consequences in early childhood, where the right to play freely with their peers was violated by the protection measures taken, which broke into their daily lives, altering their emotional bonds and making them susceptible to difficulties related to learning, behavior, physical and mental well-being (7).

The restrictions in the educational scenario caused lost learning and therefore affected the development of cognitive skills, given that education in preschool children is manipulative, experiential, and social; as well as the limited contact with peers, the lack of exploration of the environment, which is necessary for the evolutionary period in which early childhood is found, affected the acquisition of social skills (8). The education gap increases in poor communities, in those who do not have access to technological resources, added to the age of early childhood, the nature of the curriculum by developmental areas, the lack of digital skills of the teacher who serves the preschool population, in addition to the help of parents for the use of digital devices (9,10).

Education in times of compulsory confinement was supported by the caregivers or the family, which implied an effort on their part because they continued to work from home, this being an exhausting, laborious, and painful period for the adult, but much harder, complex and severe for the children. A period where caregivers and children shared the same space, time, and problems that arose from coexistence, while they were productive at work and had to support the infants in their educational activities, especially those in early education (8,10-11). The evidence

shows that caregivers during the mandatory confinement by COVID-19 presented stress and feelings of sadness due to the events caused by the pandemic such as confinement, economic difficulties, and work; for their part, children in early childhood, the longer the isolation lasted, showed more behavioral problems, such as aggressiveness and defiant behavior, but also anxiety and attention problems. However, the children's behavior could be related to parental care, since they were more concerned about the welfare of infants who exercise greater control over their behavior (5).

Early childhood children were the big losers in this transition to online education because it was believed that the implementation of digital screens allows education without problems, not understanding the changes typical of their stage (13), in addition, they had behavioral and mood changes during the period of mandatory confinement, being this a fundamental stage for the development of the child; all this stressful experience in addition to the loss of caregivers has effects on future generations, at the physiological, sociological and epigenetic levels that occur in utero and the early years (3). Families were negatively affected by the pandemic which made parents exercise more control over the children, but despite the negative aspects there was also a positive perception of the family because of the time shared (5), but to date, there are no studies on the care and parenting practices implemented by parents during mandatory confinement. Therefore, this research aims to describe the care and upbringing practices of the caregivers of early childhood children during compulsory confinement, identifying the support provided by the caregivers in the health and nutrition of the children, as well as detailing the support provided by the psycho-pedagogical point of view.

Care and upbringing practices

These practices refer to the actions that parents, caregivers, and community members carry out so that children grow up safely, have a good development, and learn and guide them to establish their identity and social development. Care and upbringing are based on the understanding of the roles of the child, i.e., who is the child, accor-

ding to his or her social, cultural, context, belief system, and aspects valued by the culture. The actions of daily life throughout the life cycle are a sample of the care and upbringing practices developed by communities and caregivers, which are determining factors in the way children relate to each other and in their growth and development. However, these practices should not violate the rights of minors on the contrary they should recognize them, in addition to strengthening growth considering the cultural perspective, promote the achievements of children's growth in the physical, cognitive, emotional, personality, and social dimensions, in addition to facilitating self-recognition as a member of a community and ethnic group (14).

Therefore, in early childhood care modalities, the care and upbringing practices that are developed from family and community contexts should be experienced and complementary to the pedagogical component, to promote them, strengthen them, and allow the child to create identification with his or her culture (14). For their part, parenting practices allow:

- · Construction of bonds and interactions.
- Forms of communication and language
- Transmission of values and cultural knowledge.

Care practices

These practices are part of the daily occurrence of subjects and fundamental for the healthy development of children; therefore, in pedagogical practice and different moments such as feeding, hygiene, rest, sharing with peers and adults, expression of affection, etc. are significant for the development of independence, autonomy, conflict resolution, decision making. Each of these actions must recognize, estimate, respect, and meet the needs and requirements of boys and girls (14). Among the care practices that are held in a modality of early childhood care are:

- Feeding
- Hygiene
- Rest
- · Physical and spiritual health
- · Good treatment

METHOD

Type of Research

This research is of quantitative design, with a descriptive scope because a record and description are made of the behavior of the variables that are observed in a lapse of time in a group (15); in that sense the practices of care and upbringing from the accompaniment in the aspects of health and nutrition and psycho-pedagogical that had the caregivers of the children of early childhood during the period of compulsory confinement by COVID-19 of the year 2020.

Participants

A total of 283 caregivers of early childhood children belonging to a CDI (Centros de Desarrollo Infantil) child development center in the municipality of Sincelejo, who gave their consent to participate in the study.

Instruments

Two instruments were used: a sociodemographic questionnaire to identify the characteristics of children in early childhood, and an instrument that describes the care and upbringing practices from the point of view of the caregivers' accompaniment in the aspects of health and nutrition and psychopedagogical accompaniment; It is important to point out that the instrument includes the 14 care and upbringing practices that the Colombian Institute of Family Welfare ICBF (16) establishes should continue to be implemented during the health emergency to guarantee the development of the strategy of care and upbringing experiences at home and psychosocial accompaniment, in addition to guaranteeing compliance with practices that are related to the quality initial education component in the framework of comprehensive care.

The practices are related to the actions that families can develop and strengthen during mandatory confinement, the first nine practices refer to care, health, hygiene, accident prevention, and promotion of adequate eating habits; the remaining five practices are oriented to the empowerment of child development, which are the enjoyment of guiding activities, construction of identity, development of autonomy, construction of rules and limits, the experience of sensitive and welcoming interactions (16). As for the way of quantifying the information, it was done in low, medium, and high, which indicates the level of compliance with the 14 practices developed by the family during the health emergency.

To carry out this process of describing the care and upbringing practices in the home, six monthly calls of approximately 15 minutes were made to promote and accompany the practices, in addition to the virtual pedagogical meetings, which were held once a week (16). Data analysis was carried out using Statistical Package for Social Science (SPSS) V. 20 to calculate the means, frequencies, and percentages of compliance with the 14 care and parenting practices implemented by the families during the health emergency.

RESULTS

The data obtained from the 283 caregivers of early childhood children who participated in the study showed that 48.1 % were female, 51.9 % were male, the most frequent age range was 2 years with 38.2 % and the age group with the highest percentage was an infant with 35.7 % (Table 1).

Table 1. Sociodemographic Data

Variables	Group	Frequency	Percentage	
Gender	Female	136	48.1	
	Male	147	51.9	
Age	1	39	13.8	
	2	108	38.2	
	3	75	26.5	
	4	47	16.6	
	Lost System	14	4.9	
Age Group	Pre-Kindergarten	66	23.3	
	Nursery	101	35.7	
	Kindergarten	48	17.0	
	Walkers	26	9.2	
	Lost System	42	14.8	

CAREGIVING AND PARENTING PRACTICES

It was evidenced that the Accompaniment in Health and Nutrition was fulfilled at a medium level by 25 % of caregivers, meaning that not all caregivers offer food to the child with the required variety to be adequate, as well as the preparation of food with colors, flavors, smells and different textures that allow the enjoyment and exploration of the children was not performed in all homes. Similarly, accompanying the feeding moments of children to share, communicate, explore, and thus provide care, health, hygiene,

prevention of accidents, and promotion of proper eating habits was fulfilled at an average level by 26.9 % of caregivers. Assistance to the doctor to improve the nutritional status of the child when malnutrition occurs was at a medium level for 28.6 % of caregivers; on the other hand, providing support to pregnant and postpartum women with adequate care was medium for 45.9 % and low for 4 %, indicating that mothers and female caregivers did not receive help during and after the pregnancy period (Table 2).

Table 2. Health and Nutrition Accompaniment

Variable	Level	Frequency 79	Percentage 27.9
To adequately feed children according to their	Medium		
developmental characteristics	High	204	72.1
Adopt healthy food preparation, handling,	Medium	74	26.1
preservation, and consumption measures.	High	209	73.9
Ensure that children receive the care	Medium	81	28.6
necessary for good health.	High	202	71.4
To support pregnant and postpartum	Under	1	0.4
women with appropriate care.	Medium	130	45.9
	High	152	53.7
Wash hands with soap and water	Medium	65	23.0
at key moments.	High	218	77.0
Keeping the house clean and providing	Medium	78	27.6
adequate treatment for excreta, sewage, and solid waste.	High	205	72.4
Protect the family from flies,	Medium	78	27.6
cockroaches, rats, mosquitoes, bats, and other animals that pose a health hazard.	High	205	72.4
Take appropriate measures to have	Medium	67	23.7
safe water for consumption and personal hygiene.	High	216	76.3
Take appropriate measures to prevent	Medium	76	26.9
accidents in the home and its environment.	High	207	73.1

In terms of psycho-pedagogical support, about 25% of the caregivers comply at a medium level with the measures of psycho-pedagogical support, that is, the caregivers do not perform listening practices, reading signals and questions to the

children to make decisions in family life, which help the development of autonomy, and also do not promote independent actions that support the effort and achievements of the children through words of praise and affectionate gestures (Table 3).

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Table 3. Psycho-pedagogical support

Variable	Level	Frequency	Percentage	
Accompany the development of children's	Under	1	0.4	
autonomy.	Medium	48	17.0	
·	High	234	82.7	
Accompanying the construction of identity	Medium	68	24.0	
	High	215	76.0	
Promote the construction of norms and limits.	Medium	68	24.0	
	High	215	76.0	
Generates experiences for the enjoyment	Under	1	0.4	
of play, creation, exploration, and literature	Medium	55	19.4	
with children from gestation.	High	227	80.2	
Experience sensitive and nurturing interactions with children from gestation onwards sensitive and nurturing interactions with children from	Medium	61	21.6	
gestation onwards sensitive and nurturing interactions with children from gestation onwards	High	222	78.4	

DISCUSSION

The COVID-19 pandemic has been a phenomenon that has changed the social dynamics worldwide and as measures to protect citizens, the Colombian government decreed mandatory confinement at the national level in 2020 and 2021, which meant that people had to stay in their places of residence all day long. Meanwhile, parents had to interact with their children twenty-four hours a day, in some cases when their work had to be done at home because of the confinement, which in a certain way meant that the attention to their children was not constant.

In the case of parents who had children in early childhood, they had to implement child-rearing practices that responded to the public health situation that was being experienced worldwide and that allowed the infant to acquire beliefs and behaviors according to his development but within the local space where he was, according to this (10-17) emphasize that during the confinement the families could strengthen their dynamics because they had more time to interact, which facilitated the play spaces at home.

In view of the above, during the mandatory confinement by COVID-19 the centers that provided early childhood care had to suspend their

services in person, i.e., the Children's Homes, CDI, Schools, and Educational Institutions did not carry out their activities in the usual spaces, which is why it was necessary to establish new support strategies. Accordingly, early childhood care had to be adjusted to the needs of the context, where parents or relatives took a leading role in the care of early childhood children (1-18).

From the results obtained in the present study, it was evident that the care and upbringing practices that prevailed among early childhood caregivers during mandatory confinement were directed towards psycho-pedagogical accompaniment, as well as the preservation of health and nutrition, This is line with Manterola and Otzen (15) who stated that caregivers during the days of preventive isolation for COVID-19 have to strengthen care and parenting practices in children, considering that staying at home requires a direct link between the caregiver and the infant.

The practices of care and upbringing are directed towards acts related to a belief or custom that seeks to energize in children "the growing well, development and learning of girls and boys, as well as to guide and cement the foundations of their identity and social belonging" (14). Consequently, these practices are part of the daily life of caregivers so it makes the teaching-learning experience more comforting, which is

why, for infants "moments of feeding, hygiene, rest, sharing, expression of affection, among others, constitute countless opportunities to exercise autonomy, participation, decision making, conflict resolution" (14).

During the quarantine or mandatory confinement, it was evidenced that caregivers presented a favorable perception based on the parenting guidelines carried with their children, as well as the positive interrelationship with them despite the negative effects brought about by the pandemic (5-16-20). This is articulated with what was evidenced in the present study, where it was shown that the caregivers evaluated had a significant accompaniment for the proper development of children, where their practices were directed to promote good eating habits, care for good health, experiences for the enjoyment of play, creation, exploration, literature, and clean and safe spaces at home.

The Colombian Institute of Family Welfare highlights that during compulsory confinement, activities should be carried out at home that promote child development, hence the importance of care practices in the home modality to promote, recognize, value, welcome, and meet the needs and requirements of children in early childhood (21).

Finally, the caregivers of early childhood children during the mandatory confinement due to the pandemic provided adequate care so that the infants could develop their competencies and skills even while at home. The caregivers' experience was also pedagogical, since their care and upbringing practices strengthened the children's social ties from the daily life of their families, thus allowing the construction of their identity, sense of belonging, and self-care guidelines.

CONCLUSION

The study shows that caregivers employed significant care and parenting practices during preventive isolation, both in the psychopedagogical component and in health and nutrition, despite all the changes brought about

by the COVID-19 pandemic, parents sought to ensure the comprehensive development of children during confinement.

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Declaration of conflict of interest

The authors declare that there is no conflict of interest.

Authors' contributions

The first author: conceived the research, helped write the article, and applied instruments.

The second author: conceived the research, helped write the article, and analyzed the data.

The third author: conceived the research, helped write the article, and analyzed the data.

The fourth author: conducted the literature search, applied instruments, and assisted in editing the article.

The fifth author: Searched for bibliographic information and assisted in writing the article.

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