

Effects of COVID-19 Pandemic on Preschool and Primary School Aged Children: Qualitative Reports of Turkish Parents

Abdülkadir Aydın¹ , Yıldız Büyükdereli Atadağ² , Ahmet Öksüz³ , Hasan Apaydın⁴ , Erkut Etçioğlu¹ ,
Muhammet Raşit Aydın¹ 

¹ Department of Family Medicine, Faculty of Medicine, Sakarya University, Sakarya, Turkey

² Department of Family Medicine, Abdulkadir Yüksel State Hospital, Gaziantep, Turkey

³ Department of Family Medicine, Mimar Sinan Family Health Center, Sivas, Turkey

⁴ Department of Family Medicine, Faculty of Medicine, Maltepe University, Istanbul, Turkey

Received: 2023-05-04 / Accepted: 2023-06-19 / Published Online: 2023-06-19

Correspondence

Yıldız Büyükdereli Atadağ, MD
Address: Department of Family
Medicine, Abdulkadir Yüksel State
Hospital, Gaziantep, Turkey
E-mail: yildizatadag@gmail.com

ABSTRACT

Objective: COVID-19 pandemic may cause negative effects on children. Qualitative studies evaluating the effects of the pandemic on preschool and primary school aged children are limited in the literature. The aim was to evaluate the effects of COVID-19 on preschool and primary school children through the observations of their parents.

Methods: In-depth interviews were made with the participants using video conferencing method. Seventeen video conferencing interviews were conducted with parents who had children between 3 and 10 aged. With the permission of the participants, audio recording was obtained in all interviews, transcribed verbatim and checked. Thematic approach was used to analyze the data. Data were collected until saturated.

Results: Findings were summarized into three main categories. The first was “The changes in the affection conditions”. It’s observed in the interviews that children experienced changes in their affection conditions such as fear, anxiety and happiness. They also went through behavioral changes like aggression and shyness. The second theme was “The Distinction in Behavioral Features”. Parents believed their children’s dominant behavioral features became more distinct. The third theme was “The changes in the Communication Levels”. While the communication with the family members increases or decrease according to various factors, the communication with the non-family members decreases for almost all of the children.

Conclusion: The effects that children are exposed to in the face of global events such as pandemics should be considered separately in addition to social planning. Each child should be evaluated within their own family and environment.

Keywords: Children, COVID-19, effects of pandemic, qualitative research



This work is licensed under a Creative
Commons Attribution-NonCommercial 4.0
International License.

INTRODUCTION

Countries all across the world were forced to take a series of precautions to decrease interactions between people as part of the fight against the COVID-19 pandemic. Imposing lockdowns on specific age groups during differing time periods and closing various workplaces and schools were the primary forms of these precautions [1]. However, it has been observed that although

these precautions were successful as preventative measures, in the background, they created different problems [2,3].

The United Nations has stated that, regardless of age, children were among the groups most affected by the pandemic [4]. Besides its direct effects on children, the pandemic has had other adverse effects on them, depending on the possible psychological, social, and economic problems their parents face [5].

The results of the studies that have investigated the effects of the pandemic process on children demonstrate that it has affected them psychologically, socially, and physically. One of the main effects mainly observed in children is changes in their affection conditions. In addition, it has been observed that the pandemic caused several other changes, including sleeping disorders, malnutrition, and problems caused by inactivity [6-8].

This study aims to multi dimensionally employ parental observations to assess the effects of the pandemic process on preschool children, who are at the beginning of their developmental period, and on primary school children. We believe that the results will elucidate the action plans, especially of policymakers and parents, for the current pandemic process and possible social traumas in the future.

MATERIALS AND METHODS

Research Design

The study used a qualitative research design to analyze the psychosocial effects of COVID-19 on preschool and primary school-aged children. In-depth interviews were conducted with the participants using video conferencing.

Study Subjects

Using a purposeful sampling method, we selected 17 parents with children between the ages of 3 and 10. The sample size was decided according to data saturation. The interview process was

terminated when no new themes emerged during the interviews with the participants. Data saturation was reached after 15 interviews, and two more parents were interviewed to verify the saturation.

Interview Outline

A semi-structured questionnaire to be used in the interview was prepared with the aid of expert opinions and through preliminary testing after the relevant literature was reviewed. Participants' age, number and age of children, features of their place of residence, and household structure were obtained at the start of the interviews. The main interview questions posed to the participants were as follows:

1. Have you observed any behavioural changes in your child(ren) during the pandemic? If so, could you explain and describe them?
2. Have you observed any changes in your child(ren)'s habits and daily routines during the pandemic? Could you explain and describe them?
3. Have you observed any changes in your child(ren)'s communication with you or others during the pandemic?
4. Have you observed any situations different from the ones you've already described? To increase the depth of the interview discussions, the participants were posed the following questions:
 - Could you please provide more information about this topic?
 - Could you please explain that more?
 - Could you give any examples of that?

Data Collection

After explaining the purpose and function of the study in detail to all the participants, verbal informed consent was obtained from them.

The interviews were conducted by video conferencing due to pandemic conditions. The interviews were carried out by the first author, who had received training in qualitative interview skills. With the permission of the participants, audio recordings were obtained in all interviews. The interviews took 15-40 minutes per person. The recordings were transcribed verbatim by the researchers within 24 hours of the interviews and were reviewed by the interviewers for accuracy.

Data Analysis

Main Points;

- The pandemic has serious negative effects on children.
- Children's dominant features like shyness or aggression became much more distinctive in the pandemic period.
- Each child has experienced different changes in their communication level.

The researchers reviewed the texts several times independently to determine the important sentences and emphasized points in the interviews. The statements considered meaningful were summarized, and themes were created. Any conflicting opinions about the contents of the themes were discussed and resolved by the researchers.

Ethical approval for this study was received from the local ethics

committee. (Approval date: March 22, 2021, Number: E.20141).

RESULTS

Seventeen parents were enrolled in the study. The characteristics of them and their families are listed in Table 1.

There theme categories emerged from the analysis of the interviews. These themes and their sub-themes are described in

Table 1. Characteristics of the participants' families

Parents*	Characteristics
P1	The mother is a 37 year old doctor. The father is a 42 year old lawyer. They have got 2 kids; an 8 year old girl and a 2 year old boy. They consider their income status well. They live in their own apartment in a housing estate. They have a part-time employee to help taking care of the children.
P2	The mother is a 32 year old teacher. The father is a 34 year old doctor. They have got a 3 year old son. They consider their income status well. They live in their own apartment.
P3	The mother is a 35 year old housewife. The father is a 40 year old accountant. They have 3 daughters; a 4 year old and 2 year old twins. They live in an apartment. They consider their income status as medium. Their grandmother helps them to take care of the children.
P4	The mother is a 40 year old housewife. The father is a shoemaker. They have 3 sons at the ages of 8, 10 and 13. They live in an apartment in a housing estate. They consider their income status as bad.
P5	The mother is a 35 year old nurse. The father is a 40 year old doctor. They have a 8 year old daughter and a 4 year old son. They live in their own apartment. They consider their income status well. The mother took an unpaid leave to take care of her children.
P6	The mother is a 37 year old housewife. The father is 44 years old. He Works in daily jobs. They have a 10 year old son. They live in a rented apartment. They consider their income status as bad.
P7	The mother is a 35 year old architect but she doesn't work. The father is self-employed in the software industry. They have 3 children ; an 8 year old girl and two boys at the ages of 6 and 3. They consider their income status well. They live in a detached house.
P8	The mother is a 40 year old housewife. The father is a 44 year old textile worker. This is the second marriage of both of them. They have 2 daughters at the ages of 6 and 3. The mother doesn't have any children from her first marriage. The father has a daughter who is married from her first marriage . They live in their own apartment. They consider their income status as bad.
P9	The mother is a 36 year old housewife. The father is a 38 year old computer engineer. They have twins; a boy and a girl at the age of 7. They consider their income status as medium. They live their own apartment in a housing estate.
P10	The mother is a 35 year old nurse. The father is a 36 year old academist. They have a 10 year old son and a 6 year old daughter. They live in their own apartment. They consider their income status well.
P11	The mother is a 40 year old housewife. The father is a 44 year old accountant. They have a 9 year old son and 7 year old daughter.
P12	The mother is a 36 year old housewife. The father is a 36 year old officer. They have 2 sons at the ages of 7 and 3. They live a rented apartment. They consider their income status as medium.
P13	The mother is a 38 year old housewife. The father is a 37 year old teacher. They have girl twins. They live in a detached house with their parents which belongs to them. They consider their income status as medium.
P14	The mother is a 34 year old housewife. The father ia a biologist. They have a 4 year old daughter. They live in a rented apartment. They consider their income status as medium.
P15	The mother is a 34 year old medical secretary. The father is a 38 year old shipper. They have a 6 year old son. They live in a rented apartment. They consider their income status as medium.
P16	The mother is a 30 year old housewife. The father is a tourism Professional. He's self-employed. They have 2 daughters at the ages of 5 and 3. They live in an apartment in a housing estate. They consider their income status as medium now. However, they think it was good before the pandemic. They have a full-time employee who helps taking care of the children.
P17	The mother is a 38 year old private company secretary. The father is a 42 year old estate agent. They have 3 children; a 9 year old girl and two boys at the ages of 7 and 2. They live in a rented apartment in a housing estate. They consider their income status as bad. Their parents help them to take care of their children.

Table 2. Themes and sub-themes

Theme	Sub-theme
The changes in the affection conditions	<ul style="list-style-type: none"> ● fear ● anxiety ● happiness
The distinction in the behavioral features	<ul style="list-style-type: none"> ● shyness ● aggression
The changes in the communication level	<ul style="list-style-type: none"> ● increase and decrease in the family communication ● decrease in the communication with non- family members

Table 2.

Theme 1: The Changes in the Affection Conditions

It was learned in the interviews that children experienced changes in their affection conditions, such as fear, anxiety and happiness. They also went through behavioural changes that manifested as aggression or shyness. The participants stated that their children were especially afraid of and concerned about the possibility of being infected with the disease and the severe potential consequences of becoming ill from COVID-19.

P4: “The children are grown now, and they are aware of everything. We got sick, and my condition (the father’s) was quite severe. That scared the kids a lot. It formed a fear of being infected with the disease again in the children. For instance, my older son is afraid he would react like me if he is infected again.”

P9: “For instance, they are concerned about becoming infected if they go to school. Now, they have such fears in their lives. We always feel anxious when we go out, which we don’t unless there is a necessity.”

P11: “We became overprotective. That increased their fears. Our son didn’t want to go to school when we told him the schools were opening. He didn’t even want to go to the garden.”

P17: “Two of my children go to school, but they are always worried. Especially my older son is aware of everything, and I can see the fear in his eyes when he goes to school.”

Some of the parents also expressed that their children were scared and ran away when somebody visited them, something they never did before the pandemic.

A remarkable finding from the interviews is that some of the parents stated that their children were happier in this period. What these parents had in common was that their children had a

sibling whom they could communicate with in the house. While not all of the parents who had more than one child shared this opinion, all of the single-child parents (P2, P6, P14, and P15) stated that their child was unhappy throughout the day.

P7: “Actually they are happy to be all together. Especially the little ones, who are even happier to have their older sisters with them all the time.”

P9: “...That they are twins relieved both us and them. Despite their different genders, being peers made them share things. They became both siblings and friends. They are both happy at home and so are we.”

P13: “I think in this period, communication with their peers is what they need the most. So, I think they are very lucky. They spend time together throughout the day and so they are happy.”

P15: “... he doesn’t go to school. We are both working. He spends time with his grandparents. But it is not enough unless they have a peer... that’s why he always seems to be unhappy. My wife and I wished he had a sibling for the first time...”

Theme 2: Distinction in Behavioral Features

Parents indicated to see aggressive and shy attitudes in their children. The remarkable point of these expressions was that the parents believed their children’s dominant behavioral features became more distinct.

P1: “Generally she is a shy girl but it became exaggerated during the pandemic.”

P2: “...he became quite aggressive. He had some aggressive attitudes before but I think it improved in this period.”

P6: “Actually, I can’t say he used to be a very calm boy but he felt suffocated in this period. I am not sure if it is because of puberty but he became more angry, obstinate and aggressive.”

P14: “He used to be shy around people before the pandemic but he became even more timid as we hardly ever had company

during this period.”

Theme 3: The Changes in the Communication Levels

It is detected in the interviews with the parents that there have been changes in the communication levels of the children. While the communication with the family members increases or decreases according to various factors, the communication with the non-family members decreases for almost all of the children.

It's acquired that the children whose communication with family members increase or decrease have a set of common domestic features. Parents who stated that there has been a decrease in their children's communication level also mentioned several factors to contribute to this change. Not having a sibling, that both parents are working and the increase in the time period spent on TV, phone, devices like computers are some of them which are frequently mentioned.

P2: “Not having a sibling to play with made him very lonely. He started to spend all his time on the iPad.”

P6: “He was left alone... He watches cartoons on TV all the time, which is self-sufficient. If he had a sibling, he would have someone to communicate with.”

P15: “...Spending time with grandfather and grandmother started to get bored after a while because they did not have peers. If he had a sibling, this period would have gone better.”

P17: “It was an advantage for us that two of our three children were close in age. I can say that they learned to spend time together and their communication increased. But in this case, the little one was left alone... The older ones also sometimes played with the younger ones.”

There were parents who claimed their children's communication level increased as well as there were some parents to say it was decreasing. They stated that the decrease in the communication with non-family members led to an increase in the communication particularly between siblings who don't have a huge age gap.

DISCUSSION

The COVID-19 pandemic, which is one of the most important events of this century, has profoundly affected the entire world. The impacts of this global threat have gone far beyond physical health problems. The precautions related to and the natural course of the pandemic have affected individuals and society in many

different ways, including psychologically, socially, physically, and economically. Children, who are at the beginning of their development, are especially sensitive to such effects. Imposing lockdowns and school closures on children as a precaution against the pandemic may have resulted in traumatic consequences as they have gone through serious psychological changes resulting from the interruptions to their routines and daily activities [9]. In light of these concerns, the aim of this study was to present the effects of the pandemic on preschool and primary school children through their parents' observations. The interviews with parents showed that the children who were aware of the pandemic experienced the fear of infection and especially of death. As a result, they avoided going to school or meeting non-family members. However, some parents stated that their children were happier, despite these fears, as they spent more time with their families due to the COVID-19 precautions. One of the conspicuous observations of the parents was that the children's dominant characteristics, such as shyness and aggression, became much more distinctive during the pandemic period. Moreover, there was often an increase in communication between family members accompanied by a serious decrease in communication with non-family members. The most stunning finding was that having a sibling had a significant effect on these changes in children.

We determined that the children were nervous about becoming infected and the related negative consequences. Children heard about the effects of the pandemic from their families, on TV, and via social media. They witnessed the anxiety of their parents and tried to keep up with the changes in their daily lives. There were psychological changes in children as a result of suddenly starting to wear masks, switching to distance education, seeing their parents constantly washing their hands and cleaning themselves when they came home before they took care of their children for fear of spreading the virus (and even avoiding physical contact with their children), and receiving news of the infections and deaths of people they knew. The fear of getting infected and the traumas of children who were infected negatively impacted children's psychological states. It has been reported that children infected with or isolated because they might have COVID-19 sometimes developed fears of separation from their parents, being singled out, and being infected by an unknown disease. They were also likely to experience anxiety, acute stress, and adjustment disorders due to social isolation [10,11]. Moreover, school closures and separation from their parents may have caused them stress and anxiety [12–14]. Children may have had

difficulty avoiding physical and mental damage as they lack the skills to cope with the related stress and could not express their emotions like adults.

Jiao and et al. conducted a poll of the parents of 320 children between the ages of 3 and 18, which demonstrated that according to the parents, the children were afraid of asking questions about the pandemic and health-related issues. In addition, they had problems such as sleeping disorders and nightmares, anorexia, physical disorders, attention deficit issues, and engaging in sympathy-seeking behaviors. To overcome these problems, Chinese doctors suggested parents increase their communication with their children by playing collaborative games, doing activities, and singing together to help alleviate feelings of loneliness [15]. Another similar study from India that examined the effects of the pandemic and isolation on children and adults showed that 69% of the children had feelings of anxiety, 66% felt desperate, and 61% were scared [11].

Having a sibling particularly affected the psychological states of children during this period. In our study, it was observed that siblings who spent more time together improved their communication and positive interactions. While not all the parents with more than one child shared this view, all the single-child parents noted that their child was unhappy during the day. A study by Christner et al. showed that during the pandemic, only children had more emotional and hyperactivity problems while children with siblings developed more behavioral problems [16]. In a study in China, a survey of 11681 children showed that while 35.2% of only children and 38.8% of children with siblings showed signs of depression, 20.5% of only children and 24.7% of those with siblings showed symptoms of anxiety [17]. Given these findings, Dunton et al. stated that because of the lack of access to sports and activities, older children should be encouraged to engage in free and unstructured physical activities by playing games with young children while also social distancing and wearing masks [18]. We also suggest parents spend more time with their children through daily activities, such as reading to their children and doing sports, games, and handcrafts at home.

Parents emphasized that during this period, acts of violence and abstention became more distinct in their children. For parents whose children already engaged in aggression and abstention, those behaviors became more severe. In accordance with our study, Imran et al. stated that issues such as having trouble with siblings, unhappiness, aggression, and social avoidance were

observed during COVID-19 [13]. In the same study, parents also stated that they realized their toddlers and pre-school children were more anxious, and when they tried to focus and join in games, they became more aggressive. Additionally, negative parental attitudes, such as criticism and violence against children in the family, increased the likelihood of children's behavioral problems, such as disobedience and aggression [19]. A study in Israel showed that during the Covid -19 pandemic 55.8% of children preferred to sleep in their parents' bed and 45% of them mentioned about fears which they did not have before. It is pointed out that most of the children became more angry and 41.4% of them had difficulty in sleeping [20]. United Nations Children's Fund explains the effects of the COVID-19 pandemic on children as the effects of the infection of themselves and other family members, the socio- economic effects of the virus, the effects of the precautions on children and interruption of the steps taken to maintain and develop the rights of children [21]. And they made a number of recommendations on how to treat children. First of all, encouraging children to talk frankly about the pandemic and isolation by maintaining the conversation in the limits of the children's knowledge on the subject is suggested. For young children who don't have enough information on the subject it is better to talk about basic hygienic measures and simple precautions. During these conversations it is crucial to be honest and not hide the truth. Children may perceive the news they hear from TVs and social media in a different way and they might think they are in danger. For this reason, they should be reassured that they are safe and they should be taught how to protect themselves and their friends in accordance with their age group. UNICEF also warns the parents to be calm and suggests them to show diligence not to reflect their own fears and reservations to their children [21].

Interviews with the parents showed that there has been changes in the communication level of their children. While there has been an increase in communication with family members, nearly no communication with non-family members was detected. Parents stated that having no siblings, having working parents and the increase in the time they spent on TV, phone and computer led to a decrease in their children's communication level. Parents who claim their children to become more communicative stated that their children communicated more with their siblings who are at similar ages. Healthy communication with children and good parenting are key points to relieve the children during long-term isolations [22]. In similar articles, it is pointed out that the children spend too much screen time [20]. There is not a sufficient

amount of articles on children's communication factor during the pandemic. In our study, we are determined that siblings with less age gap increased their communication which led to their happiness. These results should be examined through more studies. This study has restrictions as the findings about children are achieved through the parents' observations and small samplings. Moreover, it is possible that the pandemic process may have affected the parents' point of views and their perception of the children's attitudes. Even more, this destructive process may have caused the parents to be more judgmental towards their children. The interviews with the parents were conducted by considering all these possible effects and we avoided being directive.

CONCLUSION

As a result, it is seen that the pandemic has serious negative effects on children. In this case, there are characteristics, such as having siblings in the family, which reduce or favour these effects. The effects that children, who are the guarantee of our future, are exposed to in the face of global events such as pandemics should be considered separately in addition to social planning. Each child should be evaluated within their own family and environment.

Conflict of interest: There is no conflict of interest to be declared.

Funding: There is no financial support for this study.

Authors' Contributions: 1. Conception 2. Design 3. Supervision 4. Fundings 5. Materials 6. Data Collection and/or Processing 7. Analysis and/or Interpretation 8. Literature Review 9. Writing 10. Critical Review (AA: 1-2-3-5-6-7-8-9-10 YBA: 1-2-5-6-8-9-10 AÖ: 1-3-5-6-8-9-10 HA: 2-3-6-7-8-9 EE: 3-5-6-7-8-9 MRA: 5-6-7-8-9)

Ethical Approval: Sakarya University Faculty of Medicine Clinical Research Ethics Committee approval was obtained for this study on March 22, 2021, Number: E.20141

REFERENCES

- [1] Wang G, Zhang Y, Zhao J, Zhang J, Jiang F (2020) Mitigate The Effects Of Home Confinement On Children During The COVID-19 Outbreak. *Lancet*. 395(10228):945-947. [https://doi.org/10.1016/S0140-6736\(20\)30547-X](https://doi.org/10.1016/S0140-6736(20)30547-X)
- [2] Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, Rubin GJ (2020) The Psychological Impact Of Quarantine And How To Reduce It: Rapid Review Of The Evidence. *Lancet*. 395(10227):912-920. [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
- [3] Brazendale K, Beets MW, Weaver RG, Pate RR, Turner-McGrievy, GM, Kaczynski AT, Chandler JL, Bohnert A, von Hippel PT (2017) Understanding Differences Between Summer Vs. School Obesogenic Behaviors Of Children: The Structured Days Hypothesis. *Int J Behav Nutr Phys Act*. 14(1):100. <https://doi.org/10.1186/s12966-017-0555-2>
- [4] United Nations (2020) Policy Brief: The Impact of COVID-19 on children. Available from https://unsdg.un.org/sites/default/files/2020-04/160420_Covid_Children_Policy_Brief.pdf Accessed: 15 Apr 2020
- [5] Phelps C, Sperry LL (2020) Children And The COVID-19 Pandemic. *Psychol Trauma*. 12(S1):73-75. <https://doi.org/10.1037/tra0000861>
- [6] Okuyama J, Seto S, Fukuda Y, Funakoshi S, Amae S, Onobe J, Izumi S, Ito K, Imamura F (2021) Mental Health and Physical Activity among Children and Adolescents during the COVID-19 Pandemic. *Tohoku J Exp Med*. 253(3):203-215. <https://doi.org/10.1620/tjem.253.203>
- [7] Larsen L, Helland MS, Holt T (2021) The Impact Of School Closure And Social Isolation On Children In Vulnerable Families During COVID-19: A Focus On Children's Reactions. *Eur Child Adolesc Psychiatry*. 1-11. <https://doi.org/10.1007/s00787-021-01758-x>
- [8] Ullmann N, Allegorico A, Bush A, Porcaro F, Negro V, Onofri A, Cherchi C, De Santis S, Rosito L, Cutrera R (2021) Effects Of The COVID-19 Pandemic And Lockdown On Symptom Control In Preschool Children With Recurrent Wheezing. *Pediatr Pulmonol*. 56(7):1946-1950. <https://doi.org/10.1002/ppul.25400>
- [9] Golberstein E, Wen H, Miller BF 2020. Coronavirus Disease 2019 (COVID-19) And Mental Health For Children And Adolescents. *JAMA Pediatr*. 174(9):819-820. <https://doi.org/10.1001/jamapediatrics.2020.1456>
- [10] Ghosh R, Dubey MJ, Chatterjee S, Dubey S (2020) Impact Of COVID-19 On Children: Special Focus On The Psychosocial Aspect. *Minerva Pediatr*. 72(3):226-235. <https://doi.org/10.23736/S0026-4946.20.05887-9>

- [11] Saurabh K, Ranjan S (2020) Compliance and Psychological Impact of Quarantine in Children and Adolescents due to Covid-19 Pandemic. *Indian J Pediatr.* 87(7):532-536. <https://doi.org/10.1007/s12098-020-03347-3>
- [12] Chen F, Zheng D, Liu J, Gong Y, Guan, Z, Lou D (2020). Depression And Anxiety Among Adolescents During COVID-19: A Cross-Sectional Study. *Brain Behav Immun.* 88:36-38. <https://doi.org/10.1016/j.bbi.2020.05.061>
- [13] Imran N, Zeshan M, Pervaiz Z (2020). Mental Health Considerations For Children & Adolescents In COVID-19 Pandemic. *Pak J Med Sci.* 36(COVID19-4):67-72. <https://doi.org/10.12669/pjms.36.COVID19-S4.2759>
- [14] Panda PK, Gupta J, Chowdhury SR, Kumar R, Meena AK, Madaan P, Sharawat IK, Gulati S (2021) Psychological And Behavioral Impact Of Lockdown And Quarantine Measures For COVID-19 Pandemic On Children, Adolescents And Caregivers: A Systematic Review And Meta-Analysis. *Pediatrics J Trop Pediatr.* 67(1):fmaa122. <https://doi.org/10.1093/tropej/fmaa122>
- [15] Jiao WY, Wang LN, Liu J, Fang SF, Jiao FY, Pettoello-Mantovani M, Somekh E (2020) Behavioral And Emotional Disorders In Children During The COVID-19 Epidemic. *J Pediatr.* 221:264-266.e1. <https://doi.org/10.1016/j.jpeds.2020.03.013>
- [16] Christner N, Essler S, Hazzam A, Paulus M (2021) Children's Psychological Well-Being And Problem Behavior During The COVID-19 Pandemic: An Online Study During The Lockdown Period In Germany. *PLoS One.* 16(6):e0253473. <https://doi.org/10.1371/journal.pone.0253473>
- [17] Cao Y, Huang L, Si T, Wang NQ, Qu M, Zhang XY (2021) The Role Of Only-Child Status In The Psychological Impact Of COVID-19 On Mental Health Of Chinese Adolescents. *J Affect Disord.* 282:316-321. <https://doi.org/10.1016/j.jad.2020.12.113>
- [18] Dunton GF, Do B, Wang SD (2020) Early Effects Of The COVID-19 Pandemic On Physical Activity And Sedentary Behavior In Children Living In The U.S. *BMC Public Health.* 20(1):1351. <https://doi.org/10.1186/s12889-020-09429-3>
- [19] Kahraman H, Yilmaz Irmak T, Basokcu TO (2017) Parenting Practices Scale: Its Validity And Reliability For Parents Of School-Aged Children. *Educ Sci Theory Pract.* 17:745-769 <https://doi.org/10.12738/estp.2017.3.0312>
- [20] Ghanamah R, Eghbaria-Ghanamah H (2021) Impact Of COVID-19 Pandemic On Behavioral And Emotional Aspects And Daily Routines Of Arab Israeli Children. *Int J Environ Res Public Health.* 18(6):2946. <https://doi.org/10.3390/ijerph18062946>
- [21] UNICEF (2022) Coronavirus (COVID-19) parenting tips. Available from <https://www.unicef.org/coronavirus/covid-19-parenting-tips> Accessed 27 July 2022
- [22] National Health Commission of the People's Republic of China (2021) Notice on issuing the guiding principles for emergency psychological crisis intervention of the novel coronavirus pneumonia epidemic [关于印发新型冠状病毒肺炎疫情的紧急心理危机干预指导原则的通知]. ([In Chinese]). Available from <https://www.nhc.gov.cn/jkj/s3577/202001/6adc08b966594253b2b791be5c3b9467> Accessed 24 Apr 2021.

How to Cite:

Aydın A, Atadağ YB, Öksüz A, Apaydın H, Etçioğlu E, Aydın MR (2023) Effects of COVID-19 Pandemic on Preschool and Primary School Aged Children: Qualitative Reports of Turkish Parents. *Eur J Ther.* 29(3):326-333. <https://doi.org/10.58600/eurjther1612>