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PARENTAL BURNOUT: EFFECT OF HOME QUARANTINE DURING THE COVID-19 PANDEMIC

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ABSTRACT

The coronavirus (Covid-19) disease has not only caused health or economic difficulties as an infectious disease but has led to great impacts on individual lives and families. Parenthood may be challenging during the Covid-19 because of short- or long-term home quarantine periods in many countries. This study was carried out to investigate the effect of the home quarantine and other variables (such as the number of children, time spent with children) on parental burnout in Turkish parents. A total of 251 parents, who had a child in the preschool period, were included in the study. Personal Information Form and Parental Burnout Inventory, developed by Roskam et al. (2018) of which Turkish validity and reliability studies were conducted by Arıkan et al. (2020), were used as data collection tools. Descriptive statistics (means, standard deviations, and percentages) were used to describe the demographic characteristics of the sample and study variables. And also computed one-way analysis of variance (ANOVA) to test mean differences for categorical variables (i.e., time spent with children, having a number of children) was conducted. This study concluded that the level of burnout increased in the parents with children in preschool in quarantine periods in terms of the number of children at home and the time spent with children. Significantly, burnout means scores of mothers and fathers are close to each other. On the other hand, the mean score of the burnout inventory "I have zero energy for looking after my child(ren) to the development of my child" was found to be high. This study showed that concern about COVID-19 predicted parental burnout. According to the study result, the experts should consider the possibility of parental burnout as they work with parents, and children, understanding that the long-time effects of the pandemic may extend beyond the period of the current period in place orders.

Keywords: parental burnout, covid-19, children

INTRODUCTION

Being a parent is the greatest and the most permanent decision in the lives of individuals (Siegel, & Hartzell, 2013). Transition to parenthood is considered one of the important milestones of individuals, which results in great pleasure and happiness (Hansen, 2012). Although the birth of a child is the happiest and most exciting event in the life of a couple, growing up a child may be a difficult task and an emotional burden for parents (Machalicek, Lang, & Raulston, 2015). In this respect, parenthood may become stressful and tiring (Crnic, & Low, 2002). The nature and levels of the burdens and rewards of being a parent may seem significant difference whether children are not in school age, are in school age or in puberty (Pearlin, 1983). Many studies argue that parenthood is more stressful especially when

children are younger. As children get younger, their dependence on adults increases. In these first years of their life, children need more parental support and care (Ölçer, & Yılmaz, 2019). It is more likely for the parents with preschool children to have a conflict due to the amount of work in their daily routine of children care and a busy work-family tempo than the parents of older children (Nomaguchi, 2009; Scharlach, 2001).

Parents may experience extraordinary life events (disasters, war, terrorism or disease), which change daily life flow, and these may affect the parent-child relationship. Each unusual event or circumstance can significantly affect the functioning of a family. The relationships of children with their parents has a critical importance in their coping with such problems (Ones, 2020; Uzun, Karaca, & Metin, 2021). Studies show that the cases such as pandemic, which cannot be intervened in, negatively affect the parent-child relationship and family relations, have some psychological effects on children and parents by increasing the stress of parents (Chen, Brody, & Miller, 2017; Christner, Essler, Hazzam, & Paulus, 2021; Deković & Buist, 2005). The global COVID-19 pandemic is a stress source caused out of family system. In a world without any pandemic, between 5 and 20 percent of parents experience stress related to their role as parents (Mikolajczak et al., 2019; Roskam et al., 2017). This rate is considered to have increased today.

The Covid-19 pandemic, which affected the whole world at the end of 2019, force individuals to reorganize their lives and known as the New Coronavirus, have caused some changes in the home environment (Bradbury-Jones, & Isham, 2020; Hale et al., 2020). Health problems caused by the Covid-19 pandemic and restrictive quarantine measures taken as a result of these problems disturbed our lifestyle and daily life. These forced parents to change something in their parenthood roles (Taub, 2020). For example, home quarantine and lockdown caused by the COVID-19 crisis resulted in more education and care responsibility form parents, thus, force their fulfilment of parental abilities (Spinelli, Lionetti, Pastore & Fasolo, 2020), Mangiavacchi et al., 2020). The quarantine process caused schools to close, individuals working from home and looking after their children 24 hours a day. Therefore, family environment became the only place where children could establish communication and interaction. The closure of schools and some enterprises resulted in more housework and childcare responsibilities for parents, especially mothers (Alon et al., 2020; Farré et al., 2020; Hupkau, & Petrongolo, 2020; Spinelli, Lionetti, Pastore, & Fasolo, 2020; Viner et al., 2020). Parents suddenly became the only reference point for their children, and their educational role for children in the home environment became more important. After the closure of schools, education started to be provided at home instead of classroom. In addition, parents became responsible for pedagogical routine services previously provided by kindergartens. In this process, families were forced to face an unprecedented and completely new event (Miho, & Thévenon, 2020; Vessey, & Betz, 2020; Vessey et al., 2020; Wang et al., 2020). These changes likely affected parenthood skills, parenthood attitudes, and parent-child relationships (Cluver et al., 2020; Di Giorgio et al., 2021; Orgilés et al., 2020; Riegler et al., 2020; Spinelli, Lionetti, Pastore, & Fasolo, 2020)

A little is known to what extent the COVID-19 shaped child and family functioning (Prime, Wade, & Browne, 2020). However, it is emphasized that individuals were especially affected negatively in mental and physical terms (Lee, & Ward, 2020; Rains et al., 2020; Woods et al., 2020). Several studies revealed an increase in stress in parents and children as well as Post Traumatic Stress Disorder after a long period of obligatory lockdown (Brooks et al, 2020; Fegert et al, 2020; Halvorsen et al, 2020; Sprang, & Silman, 2013). Due to lockdowns, individuals are not socialized and obliged to live a sedentary and limited life in

home environment, which result in important psychological problems (Golberstein, Wen, & Miller, 2020; Wang et al., 2020). This is emphasized to affect especially the children in developmental period compared to other individuals (Patrick et al, 2020). Due to the COVID-19 pandemic, families have financial difficulties, obliged to work remotely or flexible. The burdens of parents have increased due to homeschooling, taking measures against infection, preventing threats against their own or loved ones' health, reduced social support out of home, changes in work roles or routines, closed schools and childcare (Cluver et al., 2020; Fegert et al., 2020; Ones, 2020; Prime, Wade, & Brown, 2020). Parents were also forced to cope with additional stress and emotional difficulties caused by the closure of schools and keeping children at home (Brown et al., 2020; Fegert et al., 2020; Halvorsen et al., 2020). While this provided parents with more burden regarding care and security, it also caused radical changes in family routines and rituals that were often considered natural (Gadermann et al., 2021; Wang et al., 2020). Recent challenges may make pre-existing conditions worse and increase parental stress, thereby negatively affecting child and family functioning (Riegler et al., 2020). Unlike many other countries, Turkey had no long-term lockdown during the pandemic period, but it was tried to be controlled with short-term lockdowns at various times. The subject investigated in this study was to determine the effects of stress factors, caused by the lockdowns different from the ones in the rest of the world because parents had to go to work while their children were at home due to the closure of schools and parents were not provided with any support mechanism during the distance education, on burnout.

Parental burnout is not a simple parenting stress (Kawamoto, Furutani, & Alimardani, 2018; Lebert-Charron, Dorard, Boujut, & Wendland, 2018). Parental burnout is a result of long term exposure to stress (Mikolajczak, et al., 2018). Parenting stress is highly common, normal, and even necessary. Parental burnout occurs when parenting stress severely and chronically challenges parents' coping resources. Parental burnout is defined to be “a state of intense exhaustion related to one's parental role, in which one becomes emotionally detached from one's children and doubtful of one's capacity to be a good parent” (Roskam, Raes, & Mikolajczak, 2017). Parental burnout has four main dimensions. In the first dimension, parents live emotional and physical exhaustion (EX), and feel excessive fatigue, stress, emotional burnout. Tired parents feel fatigued when waking up in the morning, and is are obliged to face the challenges of a new day, and their children. They feel so emotionally exhausted from their role that even thoughts about their daily activities and responsibilities cause discomfort and fatigue. The second dimension refers to an emotional detachment from children. Parents begin to not take pleasure in being with their children due to the emotion of fed up with the parent role (FU). This means that a parent provides physical care for his/her children [for example, putting down or feeding a child/children], but has less emotional involvement. Exhausted parents are less involved in the emotional relationship with their children, interactions are limited to functional issues. The third dimension is called emotional distancing (ED). such parents do the least for their children, they are less likely to interact actively with their children. The final dimension is associated with the contrast in parental self (CO). Such parents could not recognize themselves as before and are ashamed of themselves (Aunola, Sorkkila, & Tolvanen, 2020; Hubert, & Aujoulat, 2018; Mikolajczak, Gross, & Roskam, 2019; Roskam et al., 2017; Roskam, Brianda, & Mikolajczak, 2018).

Many studies have been carried out on the impact of coronavirus on parenting in the early stages of the pandemic. However, there are few studies on the burnout of parents. Prior studies have demonstrated that parental burnout is associated with parent-child demographic factors such as mother and child age, number and gender of children at home, socio-economic status of the family, and physical and mental conditions (Le Vigouroux, & Scola, 2018; Mikolajczak

et al., 2018; Mousavi, Mikolajczak, & Roskam, 2020). As risk factors for parental burnout increase during the COVID-19 pandemic, it is of importance to understand what impact parental burnout can have on parents and families. Many countries implemented quarantine measures to take the pandemic under control. For this reason, there are few studies providing data on how this measure might affect families and children. Few studies have been published on the specific consequences of COVID-19 on parents and children, and on coping measures. This study is considered to contribute to the conclusions of this small number of studies. The goal of this study is to specify various factors that affect parental burnout during the COVID-19 pandemic, but especially during quarantine. In this research, it has been hypothesized that three main factors may contribute to the levels of parenting-related burnout during quarantines implemented more than one time and in different durations in Turkey: (a) pre-existing conditions regarding children (eg. number of children), (b) COVID-19 experiences theorized as risk factors (for example, time spent with the child during quarantine).

METHOD

This study employed a relational survey model. Since correlational survey models are used for the research models aiming to determine the existence or degree of the change between two and more variables, it is considered appropriate for such studies (Cohen, Manion, & Morrison, 2000).

Participants

The study group of this research consists of 251 mothers and fathers who have children between ages 4–6 and living in İzmir of Turkey in the Covid-19 process. The study's participants were selected using the random sampling method, which is appropriate for the correlational survey method. With this sampling method, the children participating in the study showed typical developmental characteristics and were willing to participate in the study together with their teachers. That is, no developmental retardation or undiagnosed symptoms were observed in the children participating in the study.

Specifically, our study sample consisted of 212 mother and 39 father (84.5% and 15.5% respectively) with ages ranging from 27 to 60 years (mean age 40.75 (±7.46)) for mothers, and from 29 to 61 years (mean age 42.12 (±7.59)) for fathers. Overall, the participants had between 1 to 4 children living with them at home at the time of the study. Regarding their socioeconomic level, the large majority self reported to be from medium income level neighborhoods (79.6%), and to be in paid employment (94.8%).

Procedure

Data collection started on 25 April 2020 and ended on 8 September 2020. The study was approved by the Izmir Demokrasi University Research Ethics Committee.
The data collection process was fulfilled in various different ways. Teachers introduced the study to some of the parents in the period bringing their children to schools when schools were open. They informed parents that they could fill out the questionnaire in a waiting room or could bring it to their houses. The questionnaires were delivered in envelopes to the parents who requested them. The parents, who filled out questionnaires, delivered them to teachers

anonymously. Questionnaires were filled in by face-to-face interviews with some of the parents. Interviews were held in an open space by paying attention to mask and distance rules and interviewing only one parent each time when preschool institutions were open. A link of the electronic version of the questionnaire was provided to families who preferred to fill out the measurement tools online. The first page of the online questionnaire included information on the study, confidentiality of the information and voluntary participation, informed consent form explaining that parents can leave the study at any time. In addition, the parents were stated that they could call or send an e-mail to the researcher, whose contact details were given, in case they have any problem during or after the questionnaire. When the participants stated that they had read this information and agreed to participate, they continued the questionnaire. A single link was sent to each potential participant's family only once. Parents were asked to fill out questionnaires by considering all their ways of communication with children at home during quarantine periods. All responses were transferred electronically (web-based questionnaires) or manually (paper questionnaires) to the SPSS Statistics software program and analyzed.

Measures

Demographic Information Form: Parents completed a questionnaire with demographic information such as child's gender and age, as well as respondent's age, number of children, level of education, socio-economic level, family income and time spent with children (Table 1).

Parental Burnout Assessment

Parental burnout was assessed using the Turkish version of the PBA (Arıkan, Üstündağ-Budak, Akgün, Mikolajczak, & Roskam, 2020), a 23-item self-report measuring parental burnout. The PBA is a 23-item questionnaire consisting of four subscales: Emotional Exhaustion (9 items, e.g., "I feel completely run down by my role as a parent"), Contrast (6 items, e.g., "I'm no longer proud of myself as a parent"), Feelings of Being Fed Up (5 items, e.g., "I can't stand my role as father/mother any more"), and Emotional Distancing (3 items, e.g., Outside the usual routines (lifts in the car, bedtime, meals), I'm no longer able to make an effort for my child(ren)"). Items are rated on a 7-point frequency scale: never (0), a few times a year or less (1), once a month or less (2), a few times a month (3), once a week (4), a few times a week (5), every day (6). High scores reflect a high level of parental burnout. Cronbach's alphas in the current sample were .83 for Emotional Exhaustion, .77 for Contrast, .57 for Feelings of Being Fed Up and .70 for Emotional Distancing. Cronbach's alpha of the total scale was .90 in the current study.

Data Analysis

Skewness and kurtosis were examined to determine the normality of the data. Descriptive statistics (means, standard deviations, and percentages) were used to describe the demographic characteristics of the sample and study variables. And also computed one-way ANOVA to test mean differences for categorical variables (i.e., time spent with children, having a number of children), and finally, followed by post hoc analyses. In the calculations, the statistical

significance level was accepted as 5%. The results were analyzed based on a 95% confidence interval and a $p < .05$ significance level.

FINDINGS

The findings obtained in this study conducted to determine the burnout and related factors of parents during Covid-19 during quarantine periods, are presented below.

Table 1
Variance analysis results for the parental burnout according to the variable of time spent with children.

Sub-Scales	Time spent with children	N	Mean	Sd		Sum of Squares	Df	Mean Square	F	p	
PBA-Total	<1 h	13	51.15	31.04	Between Groups	4585.347	2	2292.673	10.720	.00*	2>1
	1–3 h	98	35.71	13.67	Within Groups	53041.235	248	213.876			3>1
	>4 h	140	32.47	12.95	Total	57626.582	250				
PBA-EX	<1 h	13	22.76	15.19	Between Groups	1167.050	2	583525	12.702	.00*	2>1
	1–3 h	98	15.04	6.60	Within Groups	11392.687	248	45.938			3>1
	>4 h	140	13.15	5.61	Total	12559.737	250				
PBA-CO	<1 h	13	11.53	7.52	Between Groups	179.223	2	89.611	5.670	.00*	2>1
	1–3 h	98	8.44	3.92	Within Groups	3919.726	248	15.805			3>1
	>4 h	140	7.75	3.4	Total	4098.948	250				
PBA-FU	<1 h	13	8.61	4.05	Between Groups	68.908	2	34.454	3.934	.02*	3>1
	1–3 h	98	6.97	3.00	Within Groups	2172.208	248	8.759			
	>4 h	140	6.38	2.80	Total	2241.116	250				
PBA-ED	<1 h	13	8.23	6.91	Between Groups	145.010	2	72.505	6.364	.00*	2>1
	1–3 h	98	5.24	3.20	Within Groups	2825.652	248	11.394			3>1
	>4 h	140	4.76	3.00	Total	2970.661	250				

In Table 1 the findings regarding the burnout levels of the parents in terms of the time spent with the child are provided. When the table is examined, it is seen that the burnout level of the parents, who spend 1 hour or more with their child, is significantly higher than the parents, who spend less than 1 hour, regarding the parent burnout scale total score and the ex, co and ed sub-dimensions. When examining in terms of the FU sub-dimension of the burnout inventory, the burnout level of parents, who spend 4 hours or more with their child, is significantly higher than parents who spend less than 1 hour with their children.

Table 2
Variance analysis results for the parental burnout according to the variable of number of children.

Sub-Scales	Number of children	N	Mean	Sd		Sum of Squares	Df	Mean Square	F	p	
PBA-Total	one child	78	30.02	10.46	Between	2627.887	2	1313.943	5.925	.00*	2>1
	two children	129	35.60	15.41	Groups	54998.695	248	221.769			3>1
	three and upper	44	39.04	19.37	Within Groups	57626.582	250				
					Total						
PBA-EX	one child	78	12.42	5.06	Between	562.049	2	281.024	5.809	.00*	3>1
	two children	129	14.78	7.26	Groups	11997.688	248	48.378			
	three and upper	44	16.72	8.70	Within Groups	12559.737	250				
					Total						
PBA-CO	one child	78	7.14	2.47	Between	155.381	2	77.690	4.886	.00*	3>1
	two children	129	8.48	4.14	Groups	3943.568	248	15.901			
	three and upper	44	9.34	5.45	Within Groups	4098.948	250				
					Total						
PBA-FU	one child	78	6.24	2.43	Between	34.950	2	17.475	1.964	.14	
	two children	129	6.82	3.10	Groups	2206.165	248	8.896			
	three and upper	44	7.31	3.46	Within Groups	2241.116	250				
					Total						

PBA-ED	one child	78	4.21	2.31	Between	95.232	2	47.616	4.107	.01*	2>1
	two children	129	5.50	3.52	Groups	2875.429	248	11.594			
	three and upper	44	5.65	4.49	Within Groups	2970.661	250				
					Total						

When considering in respect of a number of children, it may be suggested that the burnout level of parents with more than one child is significantly higher than that of parents with one child according to the burnout inventory total score. Regarding the sub-dimensions of EX and CO, the burnout level of parents with three or more children has was found to be significantly higher than parents with one child. The burnout level of parents did not show a significant difference regarding the number of children with regard to another sub-dimension of FU. On the other hand, the burnout level of parents with two children was concluded to be significantly higher than parents with one child for the sub-dimension ED.

This study also compared the mean level of parental burnout according to parent gender (see Table 3).

Table 3
Mean scores of parental burnouts with by parent gender.

Sub-Scales	Parent Gender	N	Mean	Sd
PBA-Total	Mother	212	34.72	15.38
	Father	39	33.12	14.15
PBA-EX	Mother	212	14.32	6.84
	Father	39	14.74	8.38
PBA-CO	Mother	212	8.37	4.21
	Father	39	7.38	2.88
PBA-FU	Mother	212	6.83	3.16
	Father	39	6.17	1.76
PBA-ED	Mother	212	5.18	3.47
	Father	39	4.82	3.29

The arithmetic means and standard deviation values of the answers given by parents to the questionnaire were calculated to determine their burnout levels. When the table is examined, the burnout means scores of the mothers and fathers are close to each other.

Table 4
Mann-Whitney U Tests results for the comparison by gender with nano-exposure, awareness and motivation.

PBA-EX	N	Mean Rank	Sum of Rank	U	p
Mother	212	126,93	26909,00		
Father	39	120,95	4717,00	3937,00	.056*
PBA-CO					
Mother	212	129,30	27412,50		
Father	39	108,04	4213,50	3433,50	.068
PBA-FU					
Mother	212	127,26	26979,50		
Father	39	119,14	4646,50	3866,50	.489
PBA-ED					
Mother	212	127,64	27060,50	3785,50	.368

Father	39	117,06	4565,50

Table 4 presents the results of the Mann-Whitney U Tests to examine the relationship between parent gender and parental burnout. As can be seen from the data in Table 5, there were significant differences between mothers and fathers in terms of parental burnout ($p < 0.05$), with fathers showing a higher mean rank than mothers. That is, fathers had significantly more burnout levels to sub-dimension EX than did mothers.

The burnout levels of the parents are provided in the following table.

Table 5
Statistical information on the items of the parental burnout.

Items	**X**	**Ss**
1-I have the sense that I'm really worn out as a parent	**2,0837**	1,56875
2-When I get up in the morning and have to face another day with my child(ren), I feel exhausted before I've even started	1,3904	,95444
3-I find it exhausting just thinking of everything I have to do for my child(ren)	1,2988	,80147
4-My role as a parent uses up all my resources	1,5259	,98505
5. I feel completely run down by my role as a parent	1,5498	1,00025
6. I'm so tired out by my role as a parent that sleeping doesn't seem like enough	1,1952	,69119
7. I'm in survival mode in my role as a parent	1,1793	,58286
8. I have zero energy for looking after my child(ren)to the development of my child.	**2,1355**	1,61666
9. I have the impression that I'm looking after my child(ren) on autopilot	1,5697	1,07244
10. I can't stand my role as father/mother any more	1,3586	1,06532
11. I feel like I can't take any more as a parent	1,6175	1,62639
12. I can't take being a parent any more	1,6534	1,12578
13. I feel like I can't cope as a parent	1,4701	1,04024
14. I don't enjoy being with my child(ren)	**1,9004**	1,70001
15. I do what I'm supposed to do for my child(ren), but nothing more	1,2629	,86867
16. Outside the usual routines (lifts in the car. Bed time meals), I'm no longer able to make an effort for my child(ren)	1,0876	,41023
17. I'm no longer able to show my child(ren) how much I love them	1,1116	,56878
18. I'm no longer proud of myself as a parent	1,3267	1,09034
19. I'm ashamed of the parent that I've become	1,3705	1,14986
20.I tell myself that I'm no longer the parent I used to be	1,4104	1,22757
21. I have the impression that I'm not myself anymore when I'm interacting with my child(ren)	1,2908	,89391
22. I don't think I'm the good father/mother that I used to be to my child(ren)	**1,8207**	1,39561
23. I feel as though I've lost my direction as a dad/mum	**1,8645**	1,69870

The arithmetic means and standard deviation values of the answers given by parents to the questionnaire were calculated to determine their burnout levels. When examining mean scores of the items in the parental burnout scale, it is observed that the following items were marked most, respectively: "I have zero energy for looking after my child(ren)to the development of my child ($\overline{x}$=2,13)", "I have the sense that I'm really worn out as a parent ($\overline{x}$ =2,08)", "I don't enjoy being with my child(ren) ($\overline{x}$ =1,90)", "I feel as though I've lost my direction as a dad/mum ($\overline{x}$=1.86)", and "I don't think I'm the good father/mother that I used to be to my child(ren) ($\overline{x}$=1,82)".

DISCUSSION AND CONCLUSION

The changes in health, social, economic and psychological areas during the pandemic period have affected family life and child-parent communication in different respects, and have caused

significant changes almost in all aspects of daily life. These changes pose more risk for parents with regard to parental burnout. When examining the literature, it is observed that there are a limited number of studies to determine the effect of the quarantine, announced due to COVID-19, on families both in Turkey and in other countries (Attanasio, Blundell, & Conti, 2020; Başaran, & Aksoy, 2020; Lee, & Ward, 2020). In periods without any pandemic, many parents have problems regarding their parental roles (Raphael et al. 2010). Their children's behavior or health problems, educational difficulties, and even concerns about daily tasks can all cause parents to experience stress. Parental stress is temporary for many parents, and does not affect their lives much. However, parental stress may result in parental burnout for 5-20% of parents (Roskam et al., 2018; Séjourné et al., 2018). Parental burnout is similar to parenting-related stress and is a stress-related disorder, but parental burnout goes far beyond typical parenting-related stress (Mikolajczak et al. 2018). Parental burnout is specifically defined as "the long-term response to chronic and overwhelming parental stress" (Mikolajczak et al. 2019). The parents with parental burnout have physical symptoms such as physical and mental exhaustion, increasing somatic complaints and decreased sleep quality, emotional distancing from their children, and a sense of inadequacy in parental roles (Mikolajczak et al.2018; Roskam et al. 2018).

Firstly, parental burnout is addressed in terms of the time spent with children during quarantine periods. Accordingly, the burnout level of parents who spent one hour or more with their children has been found to be significantly higher than parents who spent less than one hour regarding total burnout inventory and sub-dimensions EX, CO and ED. For the sub-dimension FU, the burnout levels of parents who spent four hours or more with their child have been concluded to be significantly higher than those of parents who spent less than one hour with their child. Parents have a higher risk for symptoms of parental burnout during periods of limited social contact. The parents, obliged to limit social contact and to stay with their children at home, may become vulnerable especially in these periods. In this regard, investigations show that constant close contact under stress is a risk factor for aggressive behavior and violence (Brooks et al., 2020; Greenaway, Jetten, Ellemers, & Van Bunderen, 2014; Reynolds et al., 2008). Families had to spend an average of extra 49.7 hours on childcare per week due to the pandemic (Sevilla, & Smith, 2020). The time parents spend for encouraging or educational activities with their children in developmental respect are important determinants of childhood development (Attanasio, Blundell, & Conti, 2020; Kalil, & Ryan, 2020; Price & Kalil, 2019). The changes caused by the COVID-19 pandemic in parenting employment may increase the time parents spend with their children, but it may have also changed the organization and patterns of family life, including how parents spend time at home and with their children.
The research concludes that there is a positive significant relationship between the number of children at home and the total score of parental burnout with the sub-dimensions PBA-EX, PBA-CO, and PBA-ED. These conclusions are in accordance with other studies reporting a relationship between parental burnout and the number of children. Accordingly, the burnout level of parents with more than one child is significantly higher than parents with one child according to the burnout scale total score. Regarding the sub-dimensions PBA-EX, PBA-CO, the burnout level of parents with three or more children is significantly higher than parents with one child. For the sub-dimension PBA-ED, the burnout level of parents with two children is significantly higher than parents with one child. Regarding PBA-FU, parental burnout does not differ significantly according to the number of children.

The parents could not benefit from support systems in quarantine periods due to social distancing. Therefore, it was determined that 24% of parents lost their childcare and 35% had difficulty in managing their childcare tasks (Patrick et al., 2020; Pew Research Center, 2020).

Studies report that the number of children that parents should care (especially having many children) has an important place among the risk factors associated with burnout (Sanchez Rodriguez, 2019; Kawamoto, Furutani, & Alimardani, 2018; Le Vigouroux, & Scola, 2018; Mikolajczak et al., 2017; Mikolajczak et al., 2018; Mousavi et al., 2020; Sorkkila, & Aunola, 2020; Vinayak, & Dhanoa, 2017). In this respect, the conclusions regarding the number of children at home are consistent with the literature (Kawamoto et al., 2018); Le Vigouroux and Scola, 2018; Lindahl Norberg et al., 2014; Mikolajczak et al., 2018). Le Vigouroux and Scola (2018) urge that the more children there are in a family, the higher the parental burnout. In particular, high number of children shows that the level of emotional exhaustion, one of the sub-dimensions of parental burnout, increase and the sense of loss of parental success, raises in accordance with the number of children (Le Vigouroux, & Scola, 2018). A global survey providing data from 27 countries between 30 March and 6 April 2020 demonstrates that in addition to being single and younger, being in quarantine with multiple children is particularly associated with increased stress levels (Kowal et al., 2020). Just as being a first-time parent with a young child is a risk factor for emotional distancing from that child, similarly, having a large number of children is considered a risk factor for both emotional distancing (ED) and loss of parental success, that is, a sense of inadequacy in parenting roles (Roskam et al., 2017). While having more than one children affect mother-child relationship positively under normal conditions, parents are observed to have more quality relationship with a single child in the Covid-19 process. Taking care of more than one child may be suggested to be more challenging because the quarantine process causes parents to have additional responsibilities.

In this study, it was also investigated whether there was a difference between the burnout levels of the parents. Arithmetic mean and standard deviation values of the answers given by the parents were calculated in order to determine the burnout levels of the parents. The results are significant as the parents filled out questionnaires by considering especially quarantine periods. Although the number of father is little, their mean scores are high, thus, this is different from previous studies reporting that mothers have higher parental burnout. In other words, burnout seems to have more harmful consequences for fathers than for mothers. A great number of studies argue that mothers, who are primary and permanent caregivers of children, experience more parental burnout than fathers (Le Vigouroux, & Scola, 2018; Lebert-Charron et al., 2018; Mikolajczak et al., 2018; Roskam et al., 2018; Roskam, & Mikolajczak, 2020). The mothers, having younger children or more children or whose husbands are not capable of cooperating in parental responsibilities, suffer more from burnout (Hubert, & Aujoulat, 2018; Mikolajczak et al., 2018; Sorkkila, & Aunola, 2020). However, few studies report father burnout in the literature. The conclusions of this study are in accordance with the findings of these few studies. Alon et al. (2020) and Hupkau and Petrongolo (2020) argue that some fathers became primary caregivers during the Covid 19 quarantine periods and this temporary change could lead to a shift in gender social norms. A number of studies were carried out in different countries, affected by the COVID-19 pandemic, to test this hypothesis, and a significant increase in fathers' involvement in childcare has been observed (Del Boca et al.,2020; Farre et al. (2020). Van Bakel et al. (2018) found out that fathers (compared to mothers) showed more signs of parental burnout. It is observed that changes have occurred in the sharing of housework duties among parents during the pandemic, and fathers have paid more attention to homecare and education of their children in this new system (Mangiavacchi, Piccoli, & Pieroni, 2020). Many fathers have started to work-from-home during the pandemic and also have taken charge of childcare. The responsibilities of fathers have increased in this period, when schools and nurseries were closed and need for general care increased (Alon et al., 2020). Gender socialization process prepares fathers less than mothers to cope with the task of caring for children. Therefore, fathers may become more vulnerable to the requests associate

with a role not considered an integral part of gender role and being male. The parents with parental burnout experience physical symptoms such as physical and mental exhaustion, increasing somatic complaints and decreased sleep quality, emotional distancing from their children, and a sense of inadequacy in parental roles (Mikolajczak et al. 2018; Roskam et al., 2018).

On the other hand, research conclusions showed that parents obtained the highest scores from the following items of the inventory: "I have zero energy for looking after my child(ren); I have the sense that I'm really worn out as a parent; I don't enjoy being with my child(ren); I feel as though I've lost my direction as a dad/mum; I don't think I'm the good father/mother that I used to be to my child(ren)". Parents stated that their stress increased during the quarantine period (Jiao et al., 2020; Ueda, Stickley, Suekive, & Matsubayashi, 2020). This stress is caused by children, requesting more interest, the Covid-19 process itself and spouses, providing insufficient support. On the other hand, the closure of schools and nurseries significantly forced parents to meet their children's care needs (Alon et al., 2020).

Limitations and Suggestions

The global COVID-19 pandemic is a source of stress out of the family system. While considering the novelty and ambiguity of this disease, it is likely to be perceived as a major stressor for many parents and children. Research shows that parents' perceived impact of the COVID-19 is associated with increased parenting stress (Chung, Lanier, & Ju, 2020). Despite some limitations, this study provides many conclusions for prevention and intervention programs. Intervention programs should start with families and parents. These programs can be adapted to cope with daily tasks and should aim to increase parents' self-efficacy by activating their strategies and resources and developing their strengths. Internet-based services, technology, social media, and mobile applications may be used for both preventions of pandemic related fears and providing information and services.

Parental burnout should not be limited to parents of the children in the preschool period. For this reason, future studies should cover a larger sample, this sample should consist of a wider age range, from infants to youth and their parents.
This study is the first to address the relationship between parental burnout and the time spent with children. Thus, it is necessary to carry out further studies on this subject.

This study has several limitations. The first limitation is the very small percentage of fathers in the study. Future studies that delve more deeply into possible gender differences in parental burnout outcomes are therefore needed. On the other hand, data were obtained between April and September 2020.

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