Global Health & Medicine. 2025; 7(5):395-399.

DOI: 10.35772/ghm.2025.01063

Parenting difficulties and support needs among parents having new children during the COVID-19 pandemic: A quantitative text analysis

Satomi Nomura*, Namiko Kisugi, Kazue Endo

Department of Child Nursing, National College of Nursing, Japan Institute for Health Security, Tokyo, Japan.

Abstract: Parents having new children during the coronavirus disease 2019 (COVID-19) pandemic were exposed to heightened parenting difficulties. However, pandemic-specific parenting difficulties and unmet support needs among these parents, especially fathers and parents with multiple children, remain underexplored. We conducted a study to clarify parenting difficulties and support needs of such parents by using quantitative text analysis of free-form descriptions collected from 809 Japanese parents in 2022 (first-child group: 163 fathers and 222 mothers; second-child group: 192 fathers and 232 mothers). Quantitative text analysis using KH Coder included co-occurrence network and correspondence analyses to identify parenting difficulties and support needs, stratified by sex, household income, and the presence of parenting consultants. Regarding parenting difficulties, fathers more often emphasized children's behavioral challenges, whereas mothers reported emotional struggles. Pandemic-related restrictions directly amplified parenting difficulties, including limited childcare resources, reduced social interaction, and infection-related concerns. Support needs across groups centered on financial assistance and childcare but varied by income, sex, and consultant availability. Fathers without consultants emphasized information and advice, while mothers without consultants stressed temporary childcare needs or illness-related support. Parenting difficulties and support needs reflected cultural gender norms. Policy implications include sustaining financial aid, developing gender-tailored interventions, and establishing crisis-resilient support systems.

***Keywords*:** parents, early childhood, parenting difficulties, support needs, COVID-19

1. Introduction

Parents having new children during the coronavirus disease 2019 (COVID-19) pandemic were particularly exposed to parenting difficulties due to stress and feelings of isolation, with more than 60% reporting such experiences (*1,2*). However, there is limited understanding not only of the challenges faced by fathers or parents with multiple children but also of the specific nature of parenting difficulties related to the pandemic.

Additionally, evidence indicates that parents with new children during the COVID-19 pandemic had to navigate parenting with limited support, highlighting their need for support in managing both the pandemic and parenting (*3*). However, a gap remains between the actual support needs of parents and what has been addressed in research. Clarifying the specific parenting difficulties and support needs of these parents could be meaningful not only under normal circumstances but also in informing development of timely and effective intervention strategies in the event of future global crises. Therefore, we conducted a study to clarify the unique parenting difficulties and support needs of both fathers and mothers having new children during the COVID-19 pandemic by analyzing free-form descriptions collected in our previous study.

2. Data analysis

This study analyzed free-form descriptions of general parenting difficulties, parenting difficulties related to the COVID-19 pandemic, and/or support needs from our previous study conducted in October 2022 (*2*). Participants were categorized into the first and second-child groups based on the birth order of children born during the COVID-19 pandemic. Additionally, we established subgroups of fathers and mothers within each group.

We performed quantitative text analysis on free-form responses using KH Coder (ver. 3; Koichi Higuchi, Kyoto, Japan) (*4*). All responses were reviewed to ensure that each sentence contained only one idea, and data were preprocessed by correcting misspellings, unifying synonyms, and standardizing variations. Morphological

analysis was conducted separately for the father and mother groups, segmenting responses into word units and merging incorrectly split. Common context-independent words, such as "child", were excluded. We performed co-occurrence network analysis to generate maps and calculated the number of respondents for each category. Categories were extracted by examining and interpreting the original data for groups of co-occurring words. In addition, we performed correspondence analysis to examine differences in outcomes based on external variables (household income and the presence or absence of parenting consultants). All analyses and interpretations were performed through collaborative discussion.

This study was approved by the Institutional Review Board of the National Center for Global Health and Medicine (approval no: NCGM-S-004562-00). Informed consent was electronically obtained from all participants.

3. Parenting difficulties

A total of 809 parents provided free-form responses, including 163 fathers and 222 mothers in the first-child group and 192 fathers and 232 mothers in the second-child group. Parents in the first-child group were slightly younger. Approximately 90% had partners, and most fathers were employed, compared with 60% of mothers. In the first-child group, the most common child age was 1 year; in the second-child group, the most common child ages were 2 years and 0 years for the father and mother subgroups, respectively. The boy-to-girl ratio was 1:1 across all groups.

Regarding general parenting difficulties, 11–14 categories were identified in each group. The proportions of these categories were broadly similar across groups, with no clear sex differences. The most frequently reported difficulty was concern about how to discipline or treat children, which was expressed by approximately 10–20% of participants across groups. Other prominent difficulties included managing behavioral issues of children (Table 1). Correspondence analysis revealed differences by household income. Among low-income fathers in both groups, specific behavioral difficulties such as not sleeping were emphasized. Middle- and high-income paternal responses were similar; however, fathers in the first-child group often reported uncertainty or hesitation regarding their own parenting approaches, whereas fathers in the second-child group reported behavioral challenges such as tantrums. Among mothers,

Table 1. Proportion of respondents in each category

	First-child group		Second-child group	
Category	Fathers (*n* = 118) *n* (%)	Mothers (*n* = 178) *n* (%)	Fathers (*n* = 159) *n* (%)	Mothers (*n* = 193) *n* (%)
General parenting difficulties				
Concerns about disciplining my child	22 (19)	17 (10)	26 (16)	29 (15)
Difficulties when things do not go as expected	15 (13)	-	-	23 (12)
Communication difficulties with my child	12 (10)	20 (11)	-	13 (7)
Uncertainty about correct parenting approaches	-	26 (15)	-	17 (9)
Child does not follow instructions	10 (8)	11 (6)	32 (20)	28 (15)

	First-child group		Second-child group	
Category	Fathers (*n* = 78) *n* (%)	Mothers (*n* = 151) *n* (%)	Fathers (*n* = 107) *n* (%)	Mothers (*n* = 160) *n* (%)
Parenting difficulties related to the pandemic				
Lack of social interaction	17 (22)	51 (34)	13 (12)	57 (36)
Restricted outings and leisure	17 (22)	37 (25)	39 (36)	50 (31)
Coping with COVID-19 restrictions	15 (19)	26 (17)	21 (20)	29 (18)
Self-restraint due to fear of infection	-	34 (23)	-	24 (15)

	First-child group		Second-child group	
Category	Fathers (*n* = 110) *n* (%)	Mothers (*n* = 147) *n* (%)	Fathers (*n* = 119) *n* (%)	Mothers (*n* = 145) *n* (%)
Support needs				
Need for financial assistance	39 (35)	38 (26)	40 (34)	47 (32)
Need for childcare services	37 (34)	66 (45)	45 (38)	63 (43)
Need for accessible consultation	9 (8)	12 (8)	13 (11)	14 (10)
Need for support with unexpected events	9 (8)	14 (10)	6 (5)	9 (6)
Desire for improved parenting environment	-	13 (9)	-	12 (8)

parenting difficulties clearly varied by income. Low-income mothers in the first-child group struggled with children's behaviors that did not match expectations, whereas those in the second-child group faced challenges in managing sibling differences. In the middle-income group, mothers across both groups focused more on children's behavioral difficulties, including the terrible twos (physical aggression commonly seen in toddlers (*5*)). High-income mothers in the first-child group emphasized judging the appropriateness of their parenting, whereas mothers in the second-child group often experienced self-blame regarding their attitudes toward their children. Furthermore, parenting difficulties also differed depending on access to parenting consultants. Parents without a consultant tended to emphasize practical difficulties such as the lack of available support. In contrast, those with a consultant more often expressed general concerns about parenting.

4. Parenting difficulties related to the pandemic

Parenting difficulties related to the pandemic yielded 7–10 categories across groups. Common challenges included restrictions on outside activities and coping with infection, reported across all groups. Only mothers emphasized self-restraint due to concerns about infection. In the correspondence analysis, both groups of middle-income fathers reported difficulties related to restrictions on social activities including reduced interaction with others. High-income fathers in the first-child group more often emphasized the limitations of childcare resources, whereas fathers in the second-child group highlighted concerns about fewer opportunities for children to develop sociality and the increased burden of infection-control practices. Clear differences by income were also observed among first-child mothers. Low-income mothers described feelings of isolation due to staying at home, while high-income mothers expressed difficulties stemming from restrictions on leisure and opportunities for free outings. In contrast, mothers in the second-child group, regardless of income, more often reported difficulties related to restrictions on children's outdoor activities. When stratified by access to parenting consultants, parents without consultants tended to emphasize emotional difficulties such as insufficient support or lack of opportunities for relaxation. In contrast, parents with consultants, regardless of the number of children, more frequently highlighted challenges related to restrictions on social activities.

5. Support needs

Support needs were divided into 5–9 categories across groups. Common categories included the need for financial assistance and childcare support. Fathers more frequently expressed needs related to parenting consultation, whereas mothers more often hoped for improvements in the parenting environment (Table 1).

Figure 1 presents differences in paternal support needs based on external variables. Support needs also varied by income level. Low-income fathers in the first-child group emphasized the need for support in unexpected events including infection or illness. Fathers in the middle- and high-income groups more consistently expressed needs for financial assistance and childcare services. Within the middle-income group, fathers in the first-child group emphasized the importance of support for couples, such as time together, while fathers in the second-child group more frequently referred to support specifically directed toward parents such as opportunities to take a break. Among mothers, differences in support needs by household income were observed only in the second-child group. Low-income mothers in this group tended to emphasize the need for assistance when they or their children became ill, as well as support from local centers. In contrast, high-income mothers more frequently expressed a desire for continuous parenting support and called for the abolition of income restrictions on such support. Responses in the first-child group, however, primarily centered on economic support and childcare services (Supplemental Figure S1, *https://www.globalhealthmedicine.com/site/supplementaldata.html?ID=111*). Support needs also differed according to consultants. Fathers without consultants expressed stronger needs for information and accessible places to seek advice, whereas fathers with consultants more frequently mentioned economic support. Among mothers, those without consultants tended to emphasize the need for temporary and safe childcare, whereas mothers with consultants highlighted more general forms of parenting support.

6. Cultural and gender context of parenting roles

This study yielded three key findings. First, although fathers and mothers shared many similar parenting difficulties, their emphases diverged. Fathers more often described concerns about children's behaviors, whereas mothers reported uncertainty and worries about their parenting practices. Second, pandemic-related restrictions directly amplified parenting difficulties, highlighting the unique impact of COVID-19 on family life. Third, while support needs were broadly consistent across groups, centered on financial assistance and childcare services, they also varied by sex, income level, and the access to parenting consultants. These findings suggest that support tailored to specific parental characteristics is essential for both ordinary times and crisis situations.

Gender differences in parenting difficulties and support needs were consistent with the findings of previous studies (*6,7*), but we also observed that the cultural context of parental roles in Japan was strongly reflected in the results. In Japan, social norms continue to assign disproportionate weight to the paternal role

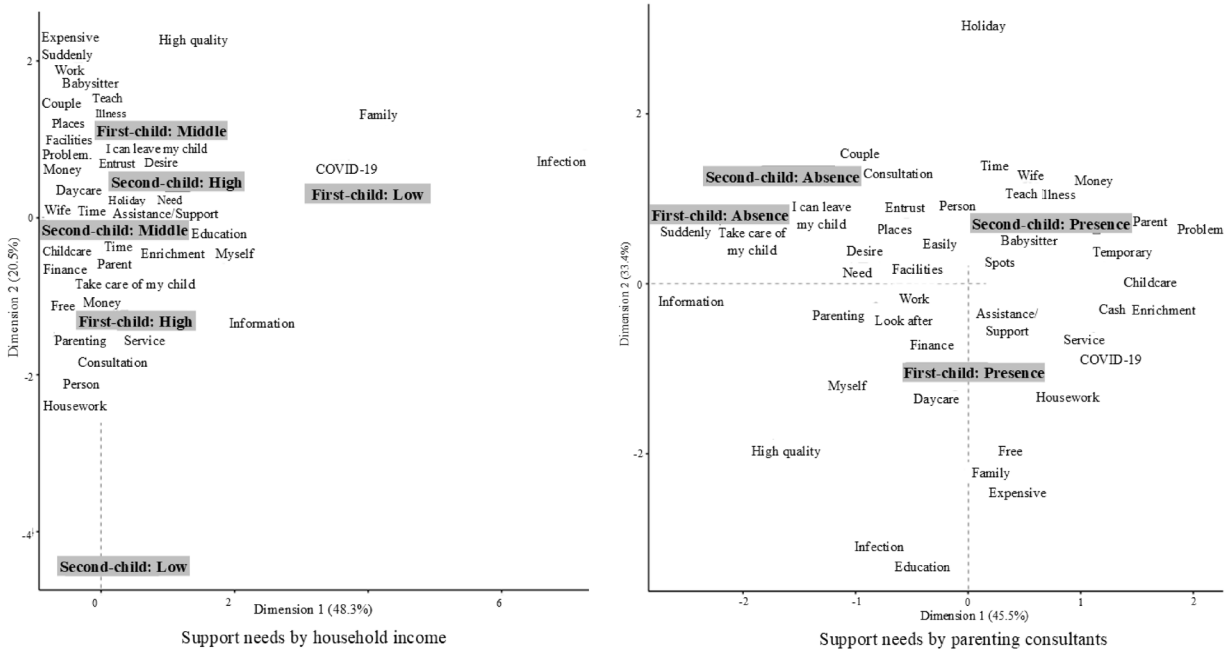

Figure 1. Correspondence analysis of support needs by household income and parenting consultants in fathers. Annual household income was classified as follows: Low: < 3,000,000 yen; Middle: 3,000,000–10,000,000 yen; High: > 10,000,000 yen. Parenting consultants were classified as follows: Presence: with consultants; Absence: without consultants.

as financial providers, which limits opportunities for active parenting and often positions fathers as secondary caregivers (*8*). Fathers with limited social resources faced particular challenges, as they lacked access to information and support that could help mitigate parenting difficulties. The COVID-19 pandemic exacerbated this imbalance, as fathers experienced increased parenting burdens while external resources, such as childcare facilities, were restricted (*9*). This underscores the importance of reforming societal perceptions of fatherhood and providing practical support. Such measures may include father-friendly parenting workshops addressing common difficulties such as crying or tantrums, peer-support networks for sharing strategies, and workplace policies that enable men to participate more actively in daily parenting.

Maternal parenting difficulties in our study were characterized by emotional concerns, including uncertainty about whether they were "good mothers", and feelings of isolation from staying at home to prevent COVID-19. These patterns reflect prevailing expectations that position mothers as primary caregivers. Mothers often experience psychological strain in the process of adapting to their maternal role (*10*). Traditional norms in Japan, epitomized by the "Good Wife, Wise Mother" ideal, continue to place disproportionate responsibility for caregiving on women (*11*). Such context may amplify mothers' tendencies toward self-criticism and feelings of inadequacy, thereby increasing their emotional burden during ordinary times and crises. Therefore, targeted interventions are needed, such as accessible counselling services, community-based support to enhance maternal self-efficacy, and illness-related backup care that provides reassurance when formal services are disrupted.

The pandemic context also highlighted the need to strengthen support for parents. Restrictions on childcare access and reduced interpersonal exchange during the COVID-19 pandemic acted as stress multipliers for both fathers and mothers. These findings indicate that measures must ensure the sustainability of social activities for both parents and children during emergencies, when parenting support is most needed.

7. Policy implications and limitations

The findings of our study suggest policy implications such as sustaining financial aid, developing gender-tailored programs, and establishing crisis-resilient support systems that remain accessible even during pandemics. However, this study has some limitations. Some extracted words with low frequencies may have been overlooked, as quantitative text analysis relies on word frequency and co-occurrence patterns. Additionally, variability in the length of free-form responses may have limited the contextual accuracy of the analysis. Furthermore, the findings are culturally specific to Japanese parents, whose parenting practices and gender role expectations are shaped by unique social norms. Therefore, the generalizability of the results to other cultural contexts is limited. Future cross-cultural replication studies are required to examine whether similar patterns of parenting difficulties and support needs emerge in different sociocultural settings.

In conclusion, among parents having new children

during the COVID-19 pandemic, fathers more often described children's behavioral challenges, while mothers expressed emotional struggles, amplified by cultural norms and pandemic restrictions. These findings highlight important policy directions, including gender-tailored programs, sustainable financial aid, and crisis-resilient childcare, to promote healthy parenting.

Acknowledgements

We would like to thank the participants of this study. In addition, we are deeply grateful to Takahide Omori for his insightful discussions and valuable suggestions, which greatly contributed to the development of this article.

Funding: This research was supported by the Policy-based Medical Service Foundation in Japan.

Conflict of Interest: The authors have no conflicts of interest to disclose.

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Received May 31, 2025; Revised August 29, 2025; Accepted September 4, 2025.

Released online in J-STAGE as advance publication September 10, 2025.

**Address correspondence to*:
Satomi Nomura, Department of Child Nursing, National College of Nursing, Japan Institute for Health Security, 1-2-1 Umezono, Kiyose-shi, Tokyo 204-8575, Japan.
E-mail: nomuras@adm.ncn.ac.jp