Research Paper:
Motherhood and Home Quarantine: Exploring the Experiences of Iranian Mothers in Caring for their Children During the COVID-19 Outbreak

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ABSTRACT

Background: Following the spread of new coronavirus disease (COVID-2019) in Iran, people began a new lifestyle in quarantine to survive the disease. Mother-child relationships were affected by this new lifestyle. This phenomenological study was conducted to explore the experiences of Iranian mothers in caring for their children during COVID-19 outbreak.

Methods: This qualitative study was conducted with an interpretive phenomenological approach. The participants were selected using purposive sampling among mothers living in Tehran in 2020. The data were collected through semi-structured interviews. The participants were mothers with 7- to 9-year-old children with the experience of living in quarantine. The collected data were theoretically saturated after 17 interviews. All the interviews were recorded and transcribed, and the resulting data were analyzed using van Manen’s phenomenological approach.

Results: Four main themes were extracted from the collected data: the mother’s health and physical concerns, confusion in playing the motherhood role, concerns about educational quality and wasting learning opportunities, and concerns about the impact of financial disputes on children.

Conclusion: The experiences of the mothers as the main caregivers in home quarantine were very unique. Understanding the complexities of their experiences, beliefs, and attitudes about motherhood and caring for children in quarantine can provide useful insights for decision-makers, healthcare professionals, and mental health professionals.

Keywords: Lived experience, Motherhood, Quarantine, COVID-19, Phenomenological study

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1. Introduction

On December 31, 2019, a type of atypical pneumonia epidemic called new coronavirus disease (COVID-2019) was reported due to the spread of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in Wuhan, China (Wu, Leung, & Leung 2020). As of April 24, 2020, according to the World Health Organization, 322,626 new cases of COVID-2019 and 1,838 deaths (to the time of this study) were reported in more than 156 countries. The highest number of affected cases was reported in the United States, China, Italy, Spain, South Korea, Iran, the United Kingdom, and Japan (World Health organization, 2020). In Iran, according to official statistics, as of April 24, 2020 (to the time of this study), 87,026 persons were infected and 5,481 deaths were reported.

In their study, Farnoosh et al. stated that the primary symptoms of COVID-19 are pneumonia, fever, muscle aches, and fatigue. They also pointed out that to date no successful vaccine or antiviral drug has been clinically approved to treat the disease, and the only way to prevent the disease and control its spread is the public’s compliance with health instructions and principles (Farnoosh et al., 2020). In another study, Alimohamadi and Sepandi also reported that the quarantine as well as planning and taking effective control and preventive measures to prevent human gatherings are the possible ways to fight and control this virus (Alimohamadi & Sepandi, 2020).

Quarantine means the isolation and restriction of the movement of people who are potentially exposed to a contagious disease to reduce the spread of the disease and the risk of infection (Centers for Disease Control and Prevention, 2020). However, staying in quarantine and keeping a large group of people in this condition is associated with psychological, social, and economic effects. Khodabakhshi-Koolaee examined the psychological effects of home quarantine on Iranian students and identified four main themes, including “growth of negative feelings, confusion, and pessimism”, “developing an obsession with the body and personal cleaning and washing”, “concerns about endangering family health, and “economic concerns and fear of the post-coronavirus era” (Khodabakhshi Koolaee, 2020).

However, at the time of home quarantine, closure, and having an abnormal lifestyle, many people in the community need to stay home, and prolonging quarantine will inevitably have psychological and socio-economic reactions. In their meta-analytical study, Brooks et al. reviewed 24 articles on the effects of quarantine on medical staff and members of the community during communicable diseases in various communities. They concluded that the reviewed studies underlined the negative psychological effects of quarantine, including Post-traumatic Stress Disorder (PTSD) symptoms, such as...

**Highlights**

- Covid-19 is an emerging phenomenon that has not yet fully understood regarding its social, psychological, and economic aspects.
- Little is known about the long-term effects of living in home quarantine and its effects on family relationships, especially between mother and child.
- The mothers in this study were concerned about the health and physical issues, educational quality and wasting learning opportunities, the impact of financial disputes on children, and they were also confused about playing their motherhood role.

**Plain Language Summary**

The new coronavirus disease (COVID-2019) is a pneumonia epidemic that occurred on December 31, 2019, in Wuhan, China, and then quickly has spread throughout the world. Examining the life experiences and attitudes of Iranian mothers regarding the care of their children in more than three months of home quarantine provides appropriate information on how to behave and care for children. The most important finding of this research was that the psychological pressures of quarantining and worrying about the ambiguous future and economic problems can jeopardize the relationship between mother and child, and ultimately their mental health.
as confusion and anger. Besides, psychological stressors, such as worries about prolongation of the quarantine, uncertainty about the future, fear of the disease, boredom and impatience, inadequate facilities, misinformation, mistakes, insufficient income, and financial and economic losses can occur as a result of a long-term quarantine (Brooks et al. 2020).

The pandemic has changed the lifestyle of families around the world and deprived many children of the school, sports, and group activities. A study by Cluver et al. reported increased violence and abuse against children during this period. Besides, parents suffer from additional pressures due to life changes, including economic problems, which lead to increased parenting stress and violence against children (Cluver et al. 2020). Jiao et al. examined the emotional and behavioral changes of children following the prevalence of COVID-19 and found that fear, anxiety, and sleep disorders in children aged 3 to 18 years increased during the outbreak of the virus (Jiao et al. 2020).

Given that very few studies have been conducted in Iran on the psychological effects of home quarantine and COVID-19, it is necessary to examine the psychological effects of home quarantine as an emerging and a very strange and new phenomenon in the contemporary history of Iran. To understand home quarantine and get insights into people’s experience and perceptions of living in quarantine, the interpretative phenomenological methodology can be helpful. This approach is a deep search for personal meaning and conceptualization and the lived experiences of people who had close contact and interaction with the studied phenomenon. Understanding their expectations, attitudes, and beliefs about the considered phenomenon is very important.

Understanding the differences and similarities in the perceptions of the participating mothers with children 7 to 9 concerning the physical effects of the virus and also psychological aspects of home quarantine and its effect on the motherhood role that follows the spread of disease and is still unknown can be very valuable for decision-makers and policymakers in the health system of countries. Therefore, this study was done to explore the experiences of mothers in caring for their children in home quarantine in the aftermath of the prevalence of the coronavirus.

2. Materials and Methods

This study employed a qualitative design based on van Manen’s interpretive phenomenological approach. According to van Mann, phenomenology or hermeneutic or interpretive phenomenology offers a systematic approach to the researcher to study and interpret the phenomenon of interest. This approach is used when the researcher needs to reveal a lesser-known or unknown phenomenon through an in-depth exploration of the lived experiences of the people involved in that event (Van Mann 2006; Dowling 2007; Heinonen 2015).

This study was conducted in Tehran in 2020. The research population included mothers with children aged 7 to 9 years who experienced home quarantine for the past 80 days. The participants were selected using purposive sampling, the data collection process continued until saturation, and a total of 17 mothers were interviewed. All the mothers had primary school children and their place of residence was in District 8 of Tehran. The inclusion criteria were: 1) the experience of home quarantine for the last 80 days, 2) the willingness for voluntary participation in the study, 3) having a minimum level of literacy for the interview and the ability to understand the content of the interview, 4) being a housewife to better understand the care in home quarantine, and 5) having a primary school child ranged of 7-9 years. The exclusion criteria were being divorced, being a single parent, and the mothers working outside the home.

In phenomenological studies, sampling must be continued until the data saturation point, when no new information or theme is observed in the data by increasing the sample size (Dowling 2007; Heinonen 2015). In this study, to eliminate the researcher’s bias in determining the data saturation, the sampling process was continued and the data collected from the participants were provided to three professors who were expert in biostatistics, psychology, and nursing to confirm the adequacy of the collected data.

The data were collected through semi-structured interviews developed and implemented based on the research questions and focused on the mothers’ experiences of caring for their child in home quarantine. Before the interviews, it was ensured that the participants engaged with the subject, and they were experienced in the field. It was also checked if the interviewees were involved with the subject and intended to express their psychological needs and experiences. The questions were asked based on the topics in question and following the interview guide. The questions were exploratory. Some examples of the questions are provided below:

Which word are you referring to when you hear the word “home quarantine”?
What is it like to be in quarantine??

Can you talk about your best experiences during home quarantine?

How is your life in quarantine with your child right now?

What are your main concerns about your child during the quarantine time?

How do you assess life in quarantine with your child?

Can you talk about your most unpleasant experiences during home quarantine?

Have you ever talked to your friends or husband about living in quarantine?

At the beginning of the interview, the researcher introduced herself and talked about the objectives of the study. Each interview lasted 45 - 65 min. All interviews were conducted by telephone due to quarantine conditions and based on a predetermined appointment. After each interview, the recorded interview was transcribed for subsequent coding and analysis.

The collected data were analyzed using the van Manen’s six-step interpretive phenomenological approach: 1) turning to the nature of lived experience, 2) investigating experience as we live it, 3) reflecting on the essential themes, which characterize the phenomenon, 4) describing the phenomenon in the art of writing and rewriting, 5) maintaining a strong and orientated relation to the phenomenon, and 6) balancing the research context by considering the parts and the whole (van Manen 2006; Heimonen 2015). The researcher’s engagement with the main research question in the whole research process is one of the necessities of conducting an interpretive phenomenological study. The researcher’s constant focus on the research problem (the mother’s experience of home quarantine) at all stages of the study contributed to the extraction of the themes and their interpretation.

To ensure the validity and reliability of the study, the credibility and trustworthiness criteria proposed by Lincoln and Guba were used (Lincoln & Guba 1990; Cope 2014). The validity of the research process was further confirmed by choosing the right context, the data triangulation of the collected data with previous studies on psychological issues faced by medical staff and normal people in quarantine, the experiences of mothers and close and continuous participation and engagement of the participants in the interpretation of the data, referring to the

3. Results

Table 1 presents the participants’ demographic data, including age, education, employment, number of children, and the children’s information, such as age, education, and gender. Based on the results of the study, the participants’ experiences of home quarantine were categorized into 15 primary categories and four main themes as presented in Table 2.

The mother’s health and physical concerns

The participants stated that during the prevalence of coronavirus and home quarantine, they encountered some problems, including the child’s neglect to observe health tips, insufficient discharge of the child’s physical energy, the child’s weight gain due to inactivity, the child’s increased anxiety and worry about staying at home, and the increased obsession with washing and cleaning. For example, concerning the child’s neglect to observe health tips, one of the participants said:

“I keep insisting that she should not touch things with her hands, but she is careless, and says, ‘I’m at home, so why should I wash my hands? And she constantly argues with me’.

Some mothers were worried that their children are not able to discharge their energy and were constantly playing and making noise in the house. For example, a mother said:

“My son has no activity to do and he always feels like playing with a ball at home. We are living in an apartment and he makes a lot of noise that disturbs the neighbors. He breaks the furniture when playing in the house”.

Meanwhile, at the time of the virus epidemic, some mothers were concerned about their child’s weight gain due to a sedentary lifestyle. As a case in point, one of the participants said:
another subtheme that emerged from the interviews was the child’s increased anxiety and worry about staying at home. For example, a mother said:

“My son is very anxious and bored. He misses his friends at school. He is having a very boring time and he always likes to go out, especially since he was not nail-biting for a while, but now he’s doing it again”.

Some of the participants also stated that due to the frequent advice to wash hands they developed an obsession with washing and cleaning. For example, a participant said:

“I wash my hands so frequently that my hands are sore and sensitive and it interferes with what I have to do for my children. Since I’m always disinfecting myself and the things in the house, I’m constantly feeling a sore throat and burning eyes”.

Confusion in playing the motherhood role

The participants stated that they were confused about their role during the home quarantine. This confusion was related to issues, such as the mother’s disagreement and conflict with the child, restricting the child, verbal punishment and arguing with the child, and permanent mediation to end paternal-child disputes.

According to the participants, their disagreements with the child increased during the home quarantine period. For example, a mother said:

“I don’t want to argue with him, but he’s always naughty and doesn’t listen to me or fights with his sister. Sometimes I have to argue with him”.

Besides, restricting the child, verbal punishment, or warning were other methods used by some mothers to discipline their children during the home quarantine. For example, a mother said:

Table 1. The participants’ demographic data

<table>
<thead>
<tr>
<th>No.</th>
<th>Mother’s Age</th>
<th>Education</th>
<th>Occupation</th>
<th>Child’s Age</th>
<th>Number of Children</th>
<th>Child’s Education</th>
<th>Child’s Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>40</td>
<td>Diploma</td>
<td>Housewife</td>
<td>8</td>
<td>1</td>
<td>Second grade</td>
<td>Female</td>
</tr>
<tr>
<td>2</td>
<td>35</td>
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<td>Housewife</td>
<td>7</td>
<td>1</td>
<td>First grade</td>
<td>Male</td>
</tr>
<tr>
<td>3</td>
<td>39</td>
<td>Bachelor</td>
<td>Housewife</td>
<td>9</td>
<td>2</td>
<td>Fourth grade</td>
<td>Male</td>
</tr>
<tr>
<td>4</td>
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<td>Housewife</td>
<td>8</td>
<td>2</td>
<td>Second grade</td>
<td>Male</td>
</tr>
<tr>
<td>5</td>
<td>38</td>
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<td>Housewife</td>
<td>8</td>
<td>2</td>
<td>Second grade</td>
<td>Male</td>
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<tr>
<td>6</td>
<td>40</td>
<td>Diploma</td>
<td>Housewife</td>
<td>8</td>
<td>2</td>
<td>Second grade</td>
<td>Male</td>
</tr>
<tr>
<td>7</td>
<td>36</td>
<td>Bachelor</td>
<td>Housewife</td>
<td>9</td>
<td>2</td>
<td>Fourth grade</td>
<td>Male</td>
</tr>
<tr>
<td>8</td>
<td>29</td>
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<td>Housewife</td>
<td>9</td>
<td>2</td>
<td>Third grade</td>
<td>Male</td>
</tr>
<tr>
<td>9</td>
<td>36</td>
<td>Ph.D.</td>
<td>Housewife</td>
<td>8</td>
<td>1</td>
<td>Second grade</td>
<td>Male</td>
</tr>
<tr>
<td>10</td>
<td>38</td>
<td>Bachelor</td>
<td>Housewife</td>
<td>8</td>
<td>2</td>
<td>Second grade</td>
<td>Male</td>
</tr>
<tr>
<td>11</td>
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<td>Bachelor</td>
<td>Housewife</td>
<td>7</td>
<td>1</td>
<td>First grade</td>
<td>Male</td>
</tr>
<tr>
<td>12</td>
<td>37</td>
<td>Bachelor</td>
<td>Housewife</td>
<td>7</td>
<td>2</td>
<td>First grade</td>
<td>Female</td>
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<tr>
<td>13</td>
<td>35</td>
<td>Bachelor</td>
<td>Housewife</td>
<td>9</td>
<td>1</td>
<td>Third grade</td>
<td>Male</td>
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<tr>
<td>14</td>
<td>36</td>
<td>Master</td>
<td>Housewife</td>
<td>8</td>
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<td>Second grade</td>
<td>Female</td>
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<tr>
<td>15</td>
<td>39</td>
<td>Master</td>
<td>Housewife</td>
<td>8</td>
<td>1</td>
<td>First grade</td>
<td>Female</td>
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<tr>
<td>16</td>
<td>39</td>
<td>Bachelor</td>
<td>Housewife</td>
<td>7</td>
<td>2</td>
<td>First grade</td>
<td>Male</td>
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<tr>
<td>17</td>
<td>30</td>
<td>Master</td>
<td>Housewife</td>
<td>8</td>
<td>1</td>
<td>Second grade</td>
<td>Female</td>
</tr>
</tbody>
</table>
“I didn’t let him play computer games for a while because he didn’t listen to me. I hid the tablet, but he got very angry. I gave it to him when he apologized. He didn’t do such things when he went to school”.

The mothers participating in the study stated that sometimes they had to constantly prevent conflicts and quarrels between their husband and children. For example, a mother said:

“My husband has gotten very short-tempered, and has problems with his job. When he is at home he is touchy and starts arguing with the kids if they make noise, and I’ll send the kids to their room soon to avoid any problem”.

Concerns about the quality of education and wasting learning opportunities

Some participants complained about the poor quality of education and the closure of the schools and stated that their children were socially isolated and were constantly playing computer games. They reported concerns about the quality of virtual education, constant worries about not doing homework properly, wasting opportunities to learn new skills, and excessive time spent by the children playing computer games.

For instance, one of the mothers said:

“My main concern is my child’s education. Children don’t learn anything through WhatsApp and online courses”.

The participants also mentioned their dissatisfaction with their children wasting new learning opportunities, such as learning English, sports, or music. A mother said:

“My child hasn’t attended her English classes for more than three months now and I’m sad that her life is being wasted”. Another participant stated, “she doesn’t do her homework well. Children have to practice at school. This opportunity has been missed at present and it’s not clear that if the kids have learned anything this year”.

Table 2. The primary and main themes extracted from the participants’ interviews

<table>
<thead>
<tr>
<th>Primary Categories</th>
<th>Main Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>The child’s neglect to observe health tips</td>
<td></td>
</tr>
<tr>
<td>Insufficient discharge of the child’s physical energy</td>
<td></td>
</tr>
<tr>
<td>The child’s weight gain due to inactivity</td>
<td></td>
</tr>
<tr>
<td>The child’s increased anxiety and worry about staying at home</td>
<td>The mother’s health and physical concerns</td>
</tr>
<tr>
<td>The mother’s increased obsession with washing and cleaning</td>
<td>Confusion in playing the motherhood role</td>
</tr>
<tr>
<td>The mother’s disagreement and conflict with the child</td>
<td></td>
</tr>
<tr>
<td>Restricting the child</td>
<td></td>
</tr>
<tr>
<td>Verbal punishment and arguing with the child</td>
<td></td>
</tr>
<tr>
<td>Permanent mediation to end paternal-child disputes</td>
<td></td>
</tr>
<tr>
<td>Concerns about the quality of virtual education</td>
<td></td>
</tr>
<tr>
<td>Constant worries about not doing homework properly</td>
<td>Concerns about the quality of education and wasting learning opportunities</td>
</tr>
<tr>
<td>Wasting opportunities to learn new skills</td>
<td></td>
</tr>
<tr>
<td>Excessive time spent playing computer games</td>
<td></td>
</tr>
<tr>
<td>Deepening marital disputes</td>
<td></td>
</tr>
<tr>
<td>The permanent argument with the husband due to economic crises</td>
<td>Concerns about the impact of financial disputes on children</td>
</tr>
<tr>
<td>Severe anxiety about the financial crisis and the uncertain future</td>
<td></td>
</tr>
</tbody>
</table>

Client-Centered Nursing Care

Concerns about the impact of financial disputes on children

One of the main concerns of self-employed people who had to stay home during the quarantine time was financial problems and consequences. Constant conflict over economic issues has led to mothers' boredom and interference in their parental role. The participants pointed to deepening marital disputes, the permanent argument with the husband due to economic crises, and severe anxiety about the financial crisis and the uncertain future as some issues they faced at the home quarantine time.

For example, a participant said:

“I have had problems with my husband already, but these conditions and the bad economic situation have made us argue more often to the extent that sometimes I’m not in the mood of dealing with the children. I got depressed and go to bed by taking sleeping pills”.

The participants also described their experiences of economic problem and their concerns about the post-coronavirus era and an uncertain future awaiting them, leading to additional psychological problems. According to one of the participants,

“Things will only always stay the same, and this situation will end, but what will happen in the future with these high prices and psychological problems. What will happen to my husband’s job? I’m afraid the economic situation will get worse day by day. I think we should be more afraid of the future than now”.

4. Discussion

As stated earlier, this study was done to explore the experiences of Iranian mothers in caring for their children during the COVID-19 outbreak. Accordingly, the studied issue was what the Iranian mothers experienced in caring for their children in home quarantine.

One of the main themes that emerged in this study was the mother’s health and physical concerns in their new lifestyle in home quarantine. The participants pointed to some issues experienced by them, such as the child’s neglect to observe health tips, insufficient discharge of the child’s physical energy, the child’s weight gain due to inactivity, the child’s increased anxiety and worry because of staying at home and the mother’s increased obsession with washing and cleaning. This finding is consistent with the results of a study by Khodabakhshi-Koolaee who showed that university students who were married and had children were concerned about washing and cleaning during the home quarantine due to the outbreak of the COVID-19, and reported frequent use of disinfectant fluids (Khodabakhshi-Koolaee 2020).

In another study, Wang et al. (2020) showed that Chinese children who stayed at home during quarantines at the time of the COVID-19 outbreak suffered from a sedentary lifestyle, weight gain, poor diet, and distress in sleep cycles due to inactivity and not going to school. Besides, it is revealed that confusion, conflicting negative emotions, failure, lack of information, and insufficient knowledge are the psychological consequences affecting people living in quarantine due to an epidemic and unknown disease. It is also pointed out that people living in quarantine for a period longer than 10 days gradually show PTSD symptoms (Brooks et al. 2020). A study by Jiao et al. also showed that Chinese children reported a high rate of behavioral and emotional disorders, such as fear, anxiety, worry, nightmares, and low appetite at the time of the outbreak of the COVID-19 (Jiao et al. 2020)

The second main theme identified in this study was confusion in the motherhood role. The participants reported some issues, such as disagreement and conflict with the child, restricting the child, verbal punishment and arguing with the child, and permanent mediation to end paternal-child disputes. Constant care for children, their anxiety and impatience, the lack of playgrounds and not spending time with friends, and the mothers’ worries about caring for the family members cause serious tensions between the mother and children. It has been suggested that providing children with accurate and appropriate information about the prevalence of the virus reduces anxiety and worries experienced by parents and children (Jiao et al. 2020).

The third main theme that emerged from the analysis of the participants’ experiences was concerns about the quality of education and wasting learning opportunities. Khodabakhshi-Koolaee explored the experiences of Iranian students living in home quarantine due to the prevalence of the COVID-19 and concluded that students were dissatisfied with the quality of distance education and felt that they had lost good educational opportunities due to the new living conditions (Khodabakhshi-Koolaee 2020). Similarly, the mothers were also dissatisfied with the experience of distant learning and felt that their children had missed the opportunity to learn essential skills, such as learning English, music, and sports.

Finally, the fourth main theme identified in this study was the participants’ concerns about the impact of financial dis-
putes on children and fear of the post-coronavirus era. The Iranian mothers were constantly in conflict with their husbands over economic hardships, high costs of living, and job insecurity. Peterman et al. (2020) found that domestic violence against women and children is on the rise worldwide, especially in developing countries due to quarantine, economic problems, and the resulting poverty. Similarly, Van Gelder et al. showed that intimate partner violence increased during the days of home quarantine due to economic problems and concerns (Van Gelder et al. 2020).

Khodabakhshi-Koolaee also showed that Iranian students felt very insecure due to economic problems and the loss of jobs, and especially feared the post-coronavirus era, the end of the virus outbreak, and its consequences (Khodabakhshi Koolaee 2020).

In general, attention to children’s mental health, providing accurate information about the COVID-19, and the use of online counseling and psychotherapy services for parents and children can reduce the negative psychological effects of facing the virus and living in a home quarantine (Liu & Bao, et al. 2020; Liu & Yang, et al. 2020). The mothers’ awareness of the support and care centers for informing and preventing domestic violence and using the services of care organizations during home quarantine and after the end of the outbreak due to the economic consequences afterward seems essential (Van Gelder et al. 2020).

This study was conducted with some limitations. First, the participants in the study were only mothers living in District 8 of Tehran. Second, due to the special conditions of home quarantine, it was not possible to conduct face-to-face interviews with the participants; thus, they were interviewed by telephone and using additional notes.

5. Conclusion

The mothers who participated in the study had a very unique home quarantine experience due to the COVID-19 outbreak. This study showed that mothers’ experiences of caring for their children in home quarantine are very important and maybe lasting. The prolonged closure of schools and educational centers, playgrounds, parks, and stadiums can have a negative impact on children and their parents. Children miss the opportunity of social life. Furthermore, if the quarantine requested is prolonged, policymakers and decision-makers should provide clear information to members of the community about the disease and its aftermath.

For instance, people should exactly know how long the quarantine is, what its type is, and how it is possible to access facilities. The possibility of treatment and receiving these facilities should be also clear. Given that one of the most important concerns of Iranian families is job security, the government is required to provide some facilities to prevent employee dismissal and layoff.

Ethical Considerations

Compliance with ethical guidelines

This research was approved by the Khatam University (Code: IR.KHATAM.REC.1399.10). Written consent was obtained from the participants for conducting and recording the interviews; their participation was voluntary and they could withdraw from the study as they wished; confidentiality of the participants’ information, including their names, phone numbers, and addresses was guaranteed.

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Authors’ contribution

All authors contributed in preparing this article.

Conflict of interest

The authors declared no conflict of interest.

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