Traumas New and Old: A Two Paper Exploration of Co-Parenting Relationships and Heightened Racial Tension for Black, Latinx, and Asian Parents During the COVID-19 Pandemic

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DEDICATION

This dissertation is dedicated to all the parents of color who tirelessly, selflessly, and sometime thanklessly care for and nurture the future. To the children of color whom we love unconditionally, you are the fuel that pushes parents past areas of discomfort. It is also dedicated to my loved ones. To Lucille and Micah, you gave me the gift of parenthood and inspired me to complete this journey I started over a decade ago. You both are the reason I shoot for the stars and am happy, even when I land on the moon. To my love Kendra, you inspire me to brave the storms and celebrate the rainbows of everyday life. You are always by my side guiding and supporting me. I absolutely adore you just as is. Lastly, to the two strongest people in my world, my mom, Anh Tang, and grandma, Popo, who are no longer with us. Every step I take, I take with you in my heart.

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ABSTRACT

The COVID-19 pandemic broadly impacted the human experience since it emerged on the scene in late 2019/early 2020 (Centers for Disease Control & Prevention (CDC) 2020). Parents in the United States experienced a uniquely high level of stress related to childrearing through the pandemic and the social-political implications of pandemic-related societal decision making (Elder & Greene, 2021; Fortuna et al., 2020; Patrick et al., 2020). People of color experienced compounding stressors of the heightened racial tensions, which reached a boiling point with the murder of George Floyd on May 25, 2020, on top of decades of inequities embedded within social systems (Buchanan et al., 2020; DePouw, 2017). This two-paper qualitative dissertation study interviewed fifteen parents of color with school-aged children who are in coparenting relationships to explore two independent but related experiences of pressures faced by parents of color during the COVID-19 pandemic and temporally associated heightened racial tensions. The first paper explores stressors on parents of color related to COVID-19 (e.g., remote learning, access to services, household management, changes extended social support, etc.) and the changes in and impact on coparenting relationships, with a focus on how coparenting relationships worked to buffer and/or aggravate parental stress levels. The second paper explores how parents of color experienced, coped with, and navigated parenting during the rise in societal racial stress in late 2019/early 2020 through fall of 2022 that spurred the uptick in the Black Lives Matter movement and the beginning of the Stop Asian Hate movement. A total of 15 parents of color participated in qualitative interviews. All data were analyzed using thematic analysis. Analyses revealed several salient themes that centered around coparenting, social support, and that illuminated the unique stressors experienced by parents of color. Implications for social work practice, policy, and research are discussed.

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DISSERTATION INTRODUCTION

There is nothing new about large-scale disasters exposing and amplifying existing foundational cracks in a society (Moore, 2020). Few modern disasters, however, have been so multifaceted as the novel coronavirus (COVID-19) pandemic: the disease itself, the responses, disruptions at all levels of public life, and the accompanying rise in social and racial tensions. The novel coronavirus originated in Wuhan, China in December of 2019 and on March 11, 2020, the World Health Organization declared COVID-19 a pandemic (Adhanom, 2020). The pandemic was declared a national emergency in the United States (US) on March 13, 2020 (The White House, 2020). Shortly after, cities across the US were mandated to quarantine for what has become the largest global public health crisis in modern times (Vaterlaus et al., 2021). Although COVID-19 and the consequences of global, national, and local responses touched everyone, communities of color and parents of color were disproportionately impacted (Fortuna et al., 2020; Patrick et al., 2020) due to greater exposure to lack of childcare/education associated with the closure of schools and care centers, changes to employment, reduction of access to resources to meet basic needs, and a temporally associated heightened visibility in race-related unrest (Clawson et al., 2021; Gould & Wilson, 2020; Abedi et al., 2020; Fortuna et al., 2020).

The research herein used qualitative methods to explore two distinct but related aspects of parenting and coparenting as a person of color during the COVID-19 pandemic through two independent but related research questions. Research Paper 1 explored the experiences parents of color faced during COVID-19 and the impacts of social support, particularly as it applies to the coparent relationship, to shed light on how social support functioned within coparenting relationships in the face of external stressors. This research built on prior studies (Heaney & Israel, 2008; Lakey & Cohen, 2000; Berkman et al., 2000) to investigate the ways in which

perceived and received social support impacted the experiences of parents of color and their coparenting relationships as they navigated the COVID-19 pandemic.

Research Paper 2 explored the ways in which parents of color experienced and navigated the heightened racial political climate in an environment of altered social support with relation to parenting. In Paper 2, the goal was to provide a deeper and more nuanced understanding of the myriad challenges faced by parents of color – and supports available to them for navigating these challenges – through the dynamic racial upheaval experienced in the US since March of 2020 (e.g., societal racial stress and safety concerns that spurred the uptick in the Black Lives Matter movement and the beginning of the Stop Asian Hate movement.)

This research drew upon multiple theories and theoretical frameworks, including (1) Coparenting Relationships (Feinberg et al., 2021; McHale et al., 2019, 2008, 2002; Walsh, 2016; Feinberg, 2003, 2002; McHale & Rasmussen, 1998; Gable et al., 1994), (2) Social Support Theory (Hartley & Coffee, 2019; Maisel & Gable, 2009; Lakey & Cohen, 2000; Will & Shinar, 2000), (3) Critical Race Theory (Delgado & Stefanicic, 2017; Crenshaw et al., 1995), (4) Microaggressions Theory (Capodilupo et al., 2010; Sue et al., 2007), and (5) Intersectionality (Crenshaw, 2016, 1991) as lenses to explore (1) how Black, Latinx, and Asian/Asian American parents (referred to herein as "parents of color") in a coparenting relationship experience and cope with parenting stress and coparenting relationships during the COVID-19 pandemic; and (2) how parents of color experience, cope, and navigate parenting during the rise in racial tension and safety concerns that spurred the uptick in the Black Lives Matter movement and the beginning of the Stop Asian Hate movement.

Although "parents of color" is a broad term that evades exact definition due to the wide variety of people who might be classified or classify themselves as "of color," the term is defined

for the purposes of this research as Black, Latinx, and Asian American parents. This decision, both limiting and underinclusive with respect to the full scope of individuals who might identify as a "parent of color," was made for two primary reasons. First, Black, Latinx, and Asian American communities faced well publicized and particularized challenges during the course of the pandemic unique to their racial identity (e.g., anti-Asian violence due to rhetoric/responses as a result of the COVID-19 virus being first identified in China (Lunis et al., 2021; Vinopal, 2021; Zhou et al., 2021), well publicized anti-Black police violence (Lebron, 2021; Buchanan et al., 2020; Stoetzer, 2020), and disproportionate financial insecurity amongst the Latinx population (Noe-Bustamante et al., 2022; Clawson et al., 2021). Second, these populations were chosen for ease of recruitment due to higher population density within the school districts from which the samples were drawn. While demographic restrictions were utilized for the purposes of this study for pragmatic purposes, the limitation decisions were made with the recognition that other demographic groups not specifically recruited in this study, such as the Pacific Islander and Native American populations, were also disproportionately impacted by COVID-19 and the associated heightened visibility of racial tensions. Though one participant did identify multiracial Latinx and Native American, and the researcher highlighted that participant's voice, the researcher does not claim this is an adequate representation of Native American parents and does not formally include that demographic in this study.

This research e sample limitations as described above are also intentionally included only parents in a coparenting relationship. This approach enabled a close exploration of the bidirectional relationship between the coparenting relationship and parental experience of stressors. Because parenting within a coparent relationship is a particularized parenting experience, this research homes in on how coparent relationships were impacted by and impacted

the experience of experience of parenting through COVID-19 and the associated rise in racial tensions. This intentional sampling approach recognizes that the experience of single parenting differs significantly from the experience of parenting with a coparent. For all these reasons, this study only included parents in coparenting relationships in recruitment efforts.

The need for this research is supported by the existing research (National Institute on Minority Health and Health Disparities (NIMHD), 20170) which strongly suggests that longstanding inequities have created new inequalities and inequities in the face of the COVID-19 pandemic and its progeny (Carter, 2021). In addition, parents of color are at the intersection of two hard-hit demographics, and yet there is extremely limited available research directed specifically at their lived experiences through the COVID-19 pandemic and the associated rise in racial tensions, particularly the racial unrest in the United States that unfolded following the murder of George Floyd on May 25, 2020, through the finalization of this research in November 2022. This research aids in filling that knowledge gap, providing a base from which additional research and policy work in the fields of education, public health and social work impacting parents and families of color can launch. The findings from this research provide an important lens that may aid in the creation of well-informed and effective policies and practices benefitting parents of color.

PAPER ONE: The experiences of Coparenting Relationships and Social Support for Coparents Amongst Black, Latinx and Asian American Parents of School-aged Children During the COVID-19 Pandemic

Abstract

The COVID-19 pandemic had a profound psychological impact on people across the United States (US) (Centers for Disease Control & Prevention (CDC) 2020). The effects were felt especially heavily amongst parents of minor children (Patrick et al., 2020) and within communities of color (Carter, 2021; Goldman et al., 2021; Abedi et al., 2020; Azar et al., 2020; Garcia, 2020; Fortuna et al., 2020). Schools transitioned suddenly to online classrooms to facilitate social distancing as part of the efforts to mitigate transmission of COVID-19, which left parents to juggle the often-conflicting responsibilities of income-earning work, children's educational and childcare needs, and household maintenance (Fortuna et al., 2020; Patrick et al., 2020). These many pressures left parents in the US suffering at distinctively high levels throughout the pandemic (Elder & Greene, 2021; Fortuna et al., 2020; Patrick et al., 2020). With high levels of stress evidenced throughout the pandemic and changes in social support systems due to quarantine and isolation protocols from the CDC (2020), social support systems for many if not most parents were significantly affected, leaving some parents to rely more heavily on their coparenting relationship for social support. Although studies have started to explore the experiences of families during the COVID-19 pandemic and how various factors impacted the mental health of parents (Elder & Greene, 2021; Feinberg et al., 2021; Hiraoka & Tomoda, 2020; Karpman et al., 2020; Patrick et al., 2020), there is limited information specifically addressing the experiences of parents of color and specifically examining coparent relationships. This study intends to lay a foundation in beginning to fill those gaps by exploring the effects of living through the COVID-19 pandemic on Black, Latinx, and Asian American parents ("parents of color") of school-aged children and specifically examining changes to and within the coparenting relationship for this group of people.

Specifically, this qualitative study explored parents of color's experiences with stress related to the COVID-19 pandemic and remote learning, and the impact/use of the coparenting relationship pertaining to social support as a means of buffering parenting stress during the COVID-19 pandemic. Using a thematic analysis approach, four primary themes were revealed: 1) when faced with multiple and varied pandemic related pressures, parents of color express resilience and coping, particularly in social support, 2) coparenting relationships experienced positive changes when encountering stressors as parents of color leaned into coparent social support, 3) the role of social support within the coparenting relationship was recognized by participants as significant in buffering stress as parents of color encountered increased pandemic related stressors, and 4) parents of color still found utility and meaning in connections to their broader community. Findings from this study will assist in guiding future research and will ideally aid in the creation of well-informed policies and practices in the Social Work field pertaining to supporting parents of color.

Keywords: Parents of color, COVID-19, coparenting relationships, remote learning, parenting stress, social support

Introduction

Research has long suggested that individuals belonging to minoritized racial-ethnic groups tend to be exposed to greater stressors of various kinds relative to white individuals in the United States (US) (Williams, 2018; Williams & Harris-Reid, 1999). Structural disparities in resources play a key role in influencing levels of individual exposure to role strains (Williams, 2018; Pearlin, 1989, 1983). Parental stress is defined as the feeling or circumstance experienced when a parent perceives the demands associated with parenting exceed the personal and social resources available to meet those demands (Cooper, et al., 2009). Studies conducted prior to the COVID-19 pandemic have shown that parents of color experience higher parental stress levels relative to their white counterparts (e.g., Nomaguchi & House, 2013), yet the experiences of parents of color during the COVID-19 pandemic has been largely unexplored.

COVID-19 Virus and Response Related Stressors Among Parents of Color. The baseline stress levels of US parents were significantly impacted by the COVID-19 pandemic and the social/political responses thereto. Ineffective communication between schools, parents, and employers led to clashes between parental work responsibilities and the management of children's care and educational needs (Lee et al., 2021). Early studies demonstrated that parental stress levels rose sharply with pandemic-induced school closures (Hiraoka & Tomoda, 2020). In one study, parents were 2.4 times more likely to report higher levels of depression during the COVID-19 pandemic compared to those reported during pre-pandemic levels (Feinberg et al., 2021). The same study found that parents were 2.5 times more likely to report that their children experienced clinical levels of externalizing problems and 4 times more likely to report internalizing problems during the pandemic compared to pre-pandemic levels (Feinberg et al., 2021). In their study of 321 families of color that included a child with asthma, Clawson et al.

(2021) provided preliminary evidence that families of color, even those with healthy children,

experienced higher levels of COVID-19-related burdens relative to white parents of healthy

children. Families of color faced comparatively higher levels of food insecurity, discrimination,

resource loss and associated worry, and children of color had more psychological distress

surrounding COVID-19 relative to their white counterparts (Clawson et al., 2021). The study

concluded that "[t]he impacts of COVID-19 on families appear to be wide-reaching, negatively

affecting parent and child mental health, and key drivers of overall physical health." (Clawson et

al., 2021, p. 10-11).

For parents of color, preexisting structural inequalities compounded more universal

challenges. Because parents of color are more likely to have employment with limited sick leave

and paid time-off benefits, they are more likely to face unique difficulties in their abilities to care

for their children and themselves when the ordinary childcare structure is disrupted (Elder &

Greene, 2021; Brown, et al., 2020; Fortuna et al., 2020; Karpman et al., 2020; Patrick et al.,

2020). Parents of color are also more likely to face multifaceted disadvantages that compound

COVID-19 associated challenges relative to white counterparts (Goldman et al., 2021; Abedi et

al., 2020; Azar et al., 2020; Garcia, 2020; Gould & Wilson, 2020). For example, Black and

Latinx populations experienced both higher rates of pandemic-induced job loss *and* higher rates

of viral exposure risk due to their disproportionate populations in low-wage jobs that cannot be

done remotely (Goldman et al., 2021; Gould & Wilson, 2020). Black and Latinx workers are

disproportionately represented in industries categorized as "frontline," with limited leave and/or

flexibility to meet childcare needs in the face of near-universal remote public schooling (Gould

& Wilson, 2020; Abedi et al., 2020; Fortuna et al., 2020). On the other side of the same coin, in

March and April of 2020 the US experienced employment loss of 17.8% amongst Black workers

compared to 15.5% amongst white workers (Gould & Wilson, 2020). The combination of disproportionate representation in job loss and disproportionate reliance on in-person frontline jobs suggests that Black and Latinx parents were disproportionately burdened with employment related stressors and the associated disadvantages to their ability to support remote learning (e.g., access to consistent internet, availability of parental support, etc.) (Goldman et al., 2021; Abedi et al., 2020; Azar et al., 2020; Garcia, 2020).

Numerous studies showed that Black and Latinx parents were less likely to be able to take time away from work to transition their children to remote learning when most schools in the US abruptly stopped in-person instruction relative to their white counterparts (Brown et al., 2021; Gould & Wilson, 2020; Abedi et al., 2020). Relatedly, the compounding stressor of disruption to extra-educational resources provided by in-person school, such as school nutritional programs, broadly impacted families generally (Clawson et al., 2021) but Black and Latinx parents rely more frequently on these programs (Karpman et al., 2020) and thus likely experienced greater challenges ensuring adequate nutrition for their children. Results from pre-pandemic studies indicate statistically significant relationships between race/ethnicity and food insecurity/utilization of community food resources (Bruce et al., 2017).

When schools abruptly transitioned to remote learning in March 2020 following the World Health Organization's declaration of a pandemic and mandated stay at home orders across the US (Adhanom, 2020), many families immediately lost access to nutritional resource programs such as the National School Lunch Program and the School Breakfast Program (Dunn et al., 2020), which serve millions of US children annually (Coleman-Jensen et al., 2020). While the initial disruption was ameliorated over time in some locations as school districts implemented innovative solutions addressing structural changes (e.g., "expanding meal service

to 7 days per week, offering grab-and-go meals in outdoor locations, and providing up to a week

of meals at once" (Kinsey et al., 2020, p. 12)), food insecurity and related parent and child

psychological distress increased significantly amongst families who received free or reduced

lunch due to access disruption (Steimle et al., 2021). Disproportionate reliance tends to lead to

disproportionate impact; in the Steimle study cited above, of the 272 families included in the

study, 60.7% of families identified as Latinx (Steimle et al., 2021).

Beyond nutritional resources, the social-political responses to the COVID-19 pandemic

designed to limit viral transmission cut off services that would regularly be available as in-class

resources, such as in-class aids and Individualized Education Program (IEP) support for students

with special learning needs (Lee et al., 2021; Vaterlaus et al., 2021). After school programs were

also widely reduced or eliminated, creating additional childcare disruptions (Lee et al., 2021;

Vaterlaus et al., 2021). Further, though students were suddenly required to learn from home,

their ability to successfully do so was heavily impacted by personal family resources (computers,

reliable internet access, etc.) as many school districts lacked the inclusive procedures to provide

students access to the needed tools, resources, and services to support effective remote learning

(Lee et al., 2021; Vaterlaus et al., 2021).

Students of color were disproportionately unable to take advantage of a return to in-

person learning as the pandemic progressed, meaning more parents of color disproportionately

had to continue to manage the burdens of remote schooling (Dorn et al., 2021). For students in

4th through 8th grade as of May 2021: among white students, 15 percent were enrolled in remote

instruction, 22 percent were enrolled in hybrid instruction, and 63 percent were enrolled in in-

person instruction. Among Black students, 38 percent were enrolled in remote instruction, 23

percent were enrolled in hybrid instruction, and 39 percent were enrolled in in-person

instruction. Among Hispanic students, 32 percent were enrolled in remote instruction, 26 percent were enrolled in hybrid instruction, and 42 percent were enrolled in in-person instruction. Among Asian/Asian American students, 54 percent were enrolled in remote instruction, 21 percent were enrolled in hybrid instruction, and 25 percent were enrolled in in-person instruction (National Center for Education Statistics (NCES), 2021). Remote learning had a heavy impact on parents because they had to provide in-person educational support to their children through daily oversight of curriculum, often having to learn and teach their children the material, often while continuing to work or experiencing the stress and burdens of job loss. Additionally, when parents lost the support of supplemental school services offered by in-person school such as counseling, school lunches, extra circulars and special educational services listed in independent education plans (IEP) and 504 special needs plans, they had to either provide that support, search for alternative support, or struggle with the negative impact the lack of support had on their children.

While suffering from the disproportionately negative social impacts due to COVID-19 political responses, most communities of color also faced disproportionately negative impacts from the virus itself: notably higher rates of COVID-19 infection, hospitalization, and death. Data from November of 2021 demonstrates that as of that time, Latinx persons were 1.6 times more likely to be infected with COVID-19 and 2.1 times more likely to die than white, non-Hispanic persons (Centers for Disease Control & Prevention (CDC), 2021). Black persons were 2.6 times more likely to be hospitalized and 1.9 times more likely to die (CDC, 2021). These disparities are the result of complex, interconnected structural inequities in healthcare, income, and social-political policies that existed long before the COVID-19 pandemic began (Gracia, 2020). For example, prior research has connected disproportionately negative health outcomes

with the higher prevalence of urban and/or multigenerational living amongst people of color

(Abedi et al., 2020; Azar et al., 2020).

Coparenting and Pandemic-Related Challenges. The coparenting relationship is defined

as two parental figures of a child or children assuming overlapping or shared responsibility for

the upbringing of that child or children, who may or may not be romantically or financially

involved (Feinberg, 2003). Parents of color who were coparenting through the COVID-19

pandemic were required to adjust to new practical and emotional expectations, compelling them,

at least to some degree, to re-structure their coparent relationship in response to COVID-19 and

the resulting changes to daily lived reality. Illness, job loss/change, the desire to limit

transmission, education access/changes for children, and caregiving ability all potentially impact

previously negotiated divisions of labor between co-parents of school-aged children (Fortuna et

al., 2020; Karpman et al., 2020; Patrick et al., 2020).

Even in non-pandemic times, the interpersonal relationship between adult coparents of all

ethnic backgrounds has the potential to function as a source of support or create additional

burdens for a parent. The influence of this dynamic can increase during times of stress or

upheaval. Pre-pandemic research demonstrates that generally, in high conflict situations and at

least with respect to heterosexual dyads, fathers tend to disengage from parenting (Cabrera et al.,

2009) and mothers tend to suffer higher rates of depression (Gee & Rhoades, 2003), leading to

more punitive and neglectful parenting compared to lower conflict families (Waldfogel et al.,

2010). Other studies have shown both direct and independent negative links between parental

stress and coparenting quality (i.e., families that experienced lower parental stress enjoyed higher

coparenting quality, and vice versa) (Riina & McHale, 2012; Feinberg et al., 2010). There is a

lack of available research on coparenting specific to parents of color in general, or with respect

to managing COVID-19 pandemic-related stressors. Specifically lacking is research examining how relationships between coparents with school-aged children in the home were impacted by the COVID-19 quarantine environment; this research intends to aid in filling that information gap, at least as to Black, Latinx and Asian American parents.

Framework & Application: Social Support Theory

Somewhat reflective of the concept itself, the literature contains no single definition for the term "social support" (Pearson, 1986). One prior review of the myriad definitions identified conceptual links centering on three common elements, defining social support as: "(a) an interactive process in which (b) particular actions or behaviors (c) can have a positive effect on an individual's social, psychological, or physical wellbeing" (O'Reilly, 1988, p.863). In research by Cohen & Symes (1985), it is proffered that two central mechanisms of social support are: 1) support as a main effect, recognizing the "beneficial effect of social support" on "overall well-being" because "it provides positive affect, a sense of predictability and stability in one's life situation," and 2) support as a stress buffer, in that a) "support may intervene between the stressful event (or expectation of that event) and a stress reaction by attenuating or preventing a stress appraisal response," and b) "adequate support may intervene between the experience of stress and the onset of the pathological outcome by reducing or eliminating the stress reaction or by directly influencing physiological processes" (p. 311-312).

While social support can come from many sources, the support closest to home is often central, particularly to families of color. Prior research has shown a high level of instrumental, financial, and emotional support exchanges within multigenerational families, which are more common amongst families of color (Gilligan et al., 2020). Grandparents who are caregivers are more likely to come from ethnic/racially diverse groups and low socioeconomic backgrounds

(Hayslip Jr. et al., 2019). During the COVID-19 pandemic, multigenerational family structures experienced significant changes in available grandparent support for grandchildren and adult support toward older family members (Gilligan et al., 2020). When schools closed and frontline workers remained at work, an even larger number of families turned to grandparents and extended family to care for children than before the pandemic (Gilligan et al., 2020). This posed a significant risk to the health of caregivers, particularly to grandparents, who became more exposed to COVID-19 and for whom health outcomes related to COVID-19 were more serious (CDC, 2021).

In multigenerational families, the informal and formal care of older family members strained the already high levels psychological stress experienced by parents during the COVID-19 pandemic (Gilligan et al., 2020). As to informal (home based) care, the psychological, physical, and financial burden of maintaining a household, sustaining income-earning work, and taking safety precautions regarding viral transmission created significant strain on the "sandwich generation" as they worked to provide caregiver support for two generations: their parents and their children home from school. This additional strain can lead to an increase in formal placement of care (e.g., respite care, home health aides, or long-term skilled nursing facilities) (Gilligan et al., 2020). New or continuing placement in formal care institutions came with complications in and of itself: COVID-19 induced safety changes, mounting cost for care, and well publicized facility viral outbreaks (Gilligan et al., 2020).

Application of Social Support Theory to This Research. This study is grounded in social support theory and explores the disruption and changes to social support, particularly as it pertains to the coparenting relationship, in response to the COVID-19 pandemic and related socio-political responses. For the purposes of this study, social support was explored in three

parts: 1) the connection between social support (or lack of thereof) within coparenting

relationships and COVID-19 pandemic-related stress (Cohen & Syme, 1985); 2) the

manifestations of perceived versus received social support including actual/perceived emotional,

informational, and instrumental support in coparenting relationships (Maisel & Gable, 2009;

Will & Shinar, 2000); and 3) manifestations of social capital, the resource characterized by

norms of reciprocity and social trust enhancing or hindering parental support, and social

influence of the village on and within coparenting relationships (Berkman et al., 2000; Heaney &

Isreal, 2008).

　　　　Beyond the coparenting relationship, this research considers the impact of the entire

social support system and is grounded in an understanding that culture and available social

resources impact both perceived and received supports, as well as social support desires and

expectations. Prior research demonstrating the centrality of social support (Brener et al., 2019)

and the potentially severe consequence to disruption in social support systems (Behrendt et al.,

2021) bolstered the decision to ground this study in social support theory. Indeed, early research

into COVID-19 response related social isolation showed that feelings of loneliness due to

physical separation from friends and others were reported across age groups and by both single

people and those in living in families (Clair et al., 2021; Liu et al., 2020; Shah et al., 2020;

British Red Cross, 2020). Social isolation-induced lack of social support has been linked to

serious medical and mental health conditions, including the etiology of schizophrenia, major

depression, anxiety, social withdrawal, post-traumatic stress disorder, and learning deficits

(Gryksa & Neumann, 2022).

Framework & Application: Coparenting Relationship Theory

The coparenting relationship is defined as two or more parental figures of a child or children assuming overlapping or shared responsibility for the upbringing of that child or children, who may or may not be romantically or financially involved (Feinberg, 2003). Coparenting is recognized as a unique phenomenon, distinct from both the quality of marital or romantic relationships among couples and from each individual parent's behaviors, that is responsible for specific selections of variance across diverse child outcomes (Caldera & Lindsey, 2006). Studies suggest that coparenting dynamics affect family well-being and can influence child adjustment and parenting quality (McHale et al., 2019; Feinberg, 2003). Consistent, predictable coparenting relationships positively impact children's socioemotional adjustment independent of marital quality and/or dyadic parenting (McHale & Rasmussen, 1998; Gable et al., 1994) by improving feelings of trust, security, and self-regulation (McHale et al., 2008). Coparenting relationships have a significant influence on the parent-child relationship (Eira Nunes et al., 2020), and can also positively or negatively impact parents' own well-being (Eira Nunes et al., 2020). For example, coparenting support can reduce stress and can impact quality of romantic relationships (Eira Nunes et al., 2020). In healthy coparenting relationships, there must be an exchange, not necessarily equal, but it cannot be one-sided (Walsh, 2016). Both parties must feel that the give and get of the relationship is mutually beneficial (Walsh, 2016). Given the high energy level required of parents to manage the cumulative stressors and multiple tasks during quarantine, the involvement of multiple caregivers was likely even more impactful than in non-emergency times with respect to effectively managing daily challenges (Walsh, 2016).

Application of the Coparenting Framework to This Research. Coparenting relationships, when present, are an integral part of the parenting experience. As this research explored experiences of parents of color in coparenting relationships parenting through turbulent times, it is sensitized by the coparenting relationship framework, its theoretical assumptions, and theoretical domains (Feinberg, 2003, 2003). The coparenting framework, as defined by Feinberg (2003), is used herein as a structural lens. This research is grounded in four theoretical assumptions that are rooted and clarified in prior coparenting research (Feinberg et al., 2021; McHale et al., 2019, 2008, 2002; Feinberg, 2003, 2002; McHale & Rasmussen, 1998; Gable et al., 1994). First, the coparenting framework assumes that coparenting relationships cannot be defined simply based on biology, gender, marital, or legal status (Feinberg, 2003). Second, it is assumed that coparenting relationships are shaped by individual beliefs, values, desires, and expectations, which in turn are shaped by the dominant culture and subculture of socioeconomic, ethnic, religious, and racial groups (Feinberg, 2003; McHale et al., 2002). Third, it is assumed that individual social lenses and access to resources influence parenting and coparenting practice (McHale et al., 2002). Fourth, the coparenting framework assumes that families are constantly transitioning due to developmental processes occurring within all individuals (Feinberg, 2003).

Feinberg's work (2003) also identifies what he terms "domains of coparenting" (p. 5). Feinberg's four domains of coparenting were used to guide this study's exploration of coparenting relationships amongst parents of color through the challenges of the COVID-19 pandemic. Feinberg's first domain of coparenting is the degree to which parental figures agree or disagree on child-related topics such as "moral values, behavioral expectations and discipline, children's emotional needs, educational standards and priorities, safety, and peer associations" (Feinberg, 2003, p. 5). The second domain of coparenting is the division of child-related labor

such as "duties, tasks, and responsibilities pertaining to daily routines involved in childcare and household tasks" (Feinberg, 2003, p. 6). This includes invisible labor: worrying and planning, tasks that are sometimes referred to as the "mental load" and which for decades have disproportionately fallen on women in heterosexual dyads (Grose, 2021). The third domain is support versus undermining behavior between coparents (Feinberg, 2003). Supportive coparent relationships can improve both parents' and children's well-being (McHale et al., 2019; Feinberg, 2003). The fourth and final coparenting domain is the shared management of family interactions: the self-control of one's own behavior and communication between parents, parent behavior and boundaries pertaining to the coparent relationship, and the absence/presence of overt conflict and problematic behavior (Feinberg, 2003).

The Current Study

Although it has been over two years since the discovery of the COVID-19 virus, and though some studies have examined parental stress and coparenting relationships during the pandemic (Abedi, et al., 2020; Fortuna, et al., 2020), the existing studies are limited with respect to exploring and capturing the COVID-19 pandemic's influence on relationships and parental stress among Black, Latinx and Asian American parents. This study examined the experiences of coparenting relationships and social support among Black, Latinx and Asian American parents of school-aged children during the COVID-19 pandemic. This study focused exclusively on parents of color with children in primary education, grades Transitional Kindergarten to 12th, as of March of 2020.

A qualitative approach was utilized for this study with a sample size of n=15 participants, which is appropriate and within range for a thematic analysis study given that a dyadic analysis was not conducted; prior research has established that theoretical saturation is likely to be

achieved with this sample size (Fugard & Potts, 2015). The exploratory nature of this study and

practical considerations including the scope and time investment for each interview further

support this sample size (Fugard & Potts, 2015). The research explored three main research

questions:

1) What are Black, Latinx, and Asian American parents of school-aged children's
   experiences of parenting and coparenting during the COVID-19 pandemic, particularly in
   relation to their experiences of COVID-19 related stressors?

2) How did COVID-19 pandemic-related stressors impact coparenting relationships among
   Black, Latinx, and Asian American parents of school-aged children?

3) What are Black, Latinx, and Asian American parents of school-aged children's
   experiences of social support from a coparent during COVID-19 pandemic?

The rationale for approaching these questions utilizing the sensitizing concepts of

coparenting and social support theories is multifold. The coparenting framework is particularly

appropriate to this research, focused on parents of color, because it assumes that the particular

impact of a coparenting relationship is shaped by individual beliefs, values, desires, and

expectations, which in turn are shaped by the dominant culture and subculture of socioeconomic,

ethnic, religious, and racial groups (Feinberg, 2003; McHale et al., 2002) and acknowledges that

social lenses and access to resources influence parenting and coparenting practice (McHale et al.,

2002). Utilizing this framework allowed for inclusion of different coparenting structures and

captured the support, additional stress and/or barriers to stress that are associated with having a

coparent while excising the potentially confounding variable of single parenthood.

The sensitizing concepts drawn from social support theory recognize the profound impact

of social relations on various aspects of wellbeing (O'Reilly, 1988) and provide an important

lens in the exploration of coparenting relationships and stress through the COVID-19 pandemic. As external social support options narrowed during the COVID-19 pandemic in response to viral mitigation efforts, options were limited for some parents seeking both instrumental and emotional social support. This study explored whether and how social support within the coparenting relationship shifted during the COVID-19 pandemic, and parents' perceptions of such changes or stagnation.

Methods

Participants. A total of n=15 parents of color participated in the qualitative study. Of the 15 participants, all 15 self-identified as Asian American , Black, and/or Latinx parents of school-aged children with coparenting relationships. Five parents identified as Asian American , 3 identified as Black, 3 identified as Latinx, and 4 identified as multiracial: 1 as Black & White, 1 as Black, Latinx, & White, 1 as Latinx & White, and 1 as Latinx & Indigenous. Black, Latinx, and Asian American participants are parents to between 1 and 7 children with at least 1 child school-aged (Transitional Kindergarten through 12th grade) during the 2019-2020 school year. Of the 15 parents of color participating in this study, 4 of their coparents lived in a different household. One of those 4 participants expressed limited social support from their coparent prior to the pandemic and reported that this remained unchanged by the pandemic. Another of the 4 expressed pre-pandemic limited social support from their coparent that improved during the pandemic. Eleven of the participants were married, 9 were married and living with their coparent. See Table 1 in appendix D.

Of the 15 parents of color who participated in this study, 10 identified as married, 1 partnered, 1 polyamorous and 2 single. Of the 10 who identified as married, 2 were married to each other. Of coparenting relationships defined above recruited, 4 participants coparent with the

child's other parent and are not romantically involved, 9 participants are romantically involved with and coparent with the child's other parent, 1 participant coparents with his mother (the children's grandmother), and 1 participant coparents with her mother (children's grandmother) who shares legal custody, as well as with her romantic partner, and the children's other parents (refer to Appendix D for additional demographic information).

Inclusion criteria. The study utilized the following inclusion criteria for participant recruitment: (1) parent of a school-aged child(ren), (2) who coparents with a partner, ex-partner, parent, grandparent, aunt, uncle, sibling, or cousin, and (3) who identifies as Black, Latinx, or/and Asian/Asian American (only Asian American participants were ultimately recruited). Multiracial parents who identified as Black, Latinx, or Asian/Asian American were eligible to participate. All interviewees had access to a lay interpreter in their primary language, though none chose to utilize interpreter services. All interviews were conducted in English. Though 2 members of the same coparenting relationship were interviewed, each interview was assessed independently. To ensure diversity in sampling, the researcher intentionally recruited equal numbers of Black, Latinx, and Asian American parents. For the purposes of this study, the criterion of "school-aged children" is defined as a child or children attending Transitional Kindergarten (age 4) through 12th Grade (age 18) as of March 11, 2020.

Recruitment. The researcher and identified community liaisons assisted with the recruitment of participants (see Appendix C for the recruitment flyer utilized). Ms. Crystal Martinez, a community liaison and social worker in the education field, distributed the recruitment flyer within her local school/parent networks. She shared study information to potential participants, ultimately recruiting three participants for this study. Kendra Nickel-Nguy, a community liaison and volunteer with Girl Scouts of the USA, shared the recruitment flyer

information within Girl Scout Leaders' networks and within local neighborhood social media

networks (Facebook Groups). She recruited four participants for the study. Taimur Khan, a

community liaison located in and social worker in the medical field, advertised the study within a

local medical facility. He assisted in recruiting one participant. The researcher shared the

recruitment flyer information with various local children's and parenting-based organizations

and within local social media groups (e.g. Queer Parents of Color Facebook group), ultimately

recruiting the remaining seven participants for this study.

Informed Consent. Participants were provided an informed consent statement adherent

to the University of Pennsylvania's Institutional Review Board (IRB) protocols for review prior

to participation. Participants were asked before the interview began to verbally confirm they

reviewed the study's consent statement and wished to continue with their participation. All

names were changed in the result sections to maintain confidentiality.

Institutional Review Board. The University of Pennsylvania's IRB consent statement

requirement includes clarification of what is involved in participating in the research study,

information about the study procedures such as how data will be stored and how subject

confidentiality will be maintained, notice that participant involvement in this research is

voluntary, and the contact information of researcher for questions. This study was reviewed and

approved by the University of Pennsylvania Institutional Review Board to assure compliance

with Federal and University eligibility criteria for IRB review exemption authorized by 45 CFR

46.104, category 2 (IRB Protocol: 851446).

Interviewer and Research Team. The interviews were conducted by the DSW (Doctor

of Social Work) candidate, who is a licensed clinical social worker, and who identifies as a first-

generation Asian American queer cisgender female parent of two children, who were an infant

and a toddler as of March 2020. The researcher is also a person in a same-sex marriage who co-parents and lives with her spouse, and a person who experienced a job change during the COVID-19 pandemic. Deviating from a traditional reflexive thematic analysis approach which does not endorse double-coding (Byrne, 2021), one-third (n=5) interviews, were double coded by a research team consisting of (1) the DSW candidate, (2) a masters-level social work professor who identifies as an Asian queer cisgender female parent of a young adult child during the above-mentioned school years and who is in a same-sex marriage, (3) a licensed clinical social worker who identifies as a Muslim Desi/Southeast Asian queer, cisgender/gender non-conforming male, and (4) an attorney with a master's degree in social policy who identifies as a Jewish lesbian cisgender female parent. Members of the research team met telephonically and/or in person on multiple occasions to discuss confidentiality regulations and findings to ensure the data analytic strategy below was adhered to consistently. The research team, excluding the lead researcher (DSW Candidate), did not have access to the interviewee identifying information.

Data Collection Procedures. The researcher interviewed 15 Black (N=5), Latinx (N=5), and Asian American (N=5) parents. Classification as a Black, Latinx, or Asian American person was based on self-identification and may include individuals who self-identify as mixed ethnicity. Participants were given an appreciation gift of a $30 gift card to Amazon, Target, or Walmart for their participation. An in-depth semi-structured 60 to 90-minute-long video/audio interviews were conducted and recorded via Zoom utilizing the Interview Question Guide (see Appendix B and Data Analysis section below for details regarding development). Participants were provided the opportunity to opt out of the video for a voice-only Zoom interview. Central lines of inquiry explored participant experiences of coparenting relationships during the pandemic, including changes in the relationship, and the impact of co-parental support or lack

thereof. This study utilized Zoom's transcription program and secondary transcription review to ensure the accuracy of interview transcription. Zoom provided a real-time computer-generated transcript. The researcher listened to the recording of each interview and revised the transcript for accuracy. Digital transcription data were password protected, deidentified, and only stored on a cloud-based server accessible only to the research team.

Data Analysis. All interviews were analyzed utilizing thematic analysis (TA) because it is a widely accepted and utilized method for identifying, analyzing, and interpreting patterns of meaning (e.g., themes) in qualitative studies (Braun & Clarke, 2016, 2021). The use of TA allows the researcher to identify common threads extending across the set of interviews (Vaismoradi et al., 2013).

TA provides a step-by-step approach to qualitative data analysis which was strictly adhered to in this study. First, the researcher became familiar with the data presented in each interview transcription by reading through the text and taking initial notes. Second, the researcher generated initial codes from a sample of the transcriptions. Coding means highlighting text, usually phrases and sentences, that bear relation to the research questions. During the coding phase, the researcher thoroughly reviewed interview transcripts and highlighted everything relevant or potentially relevant to the research questions. Third, the research team utilized the initial codes and independently searched for themes and reviewed themes. Generating themes means turning related codes into themes; themes are broader than codes. Fourth, the research team collaboratively reviewed the themes to ensure useful and accurate representation of the data. Fifth, the researcher defined and named themes. Defining themes helps determine how to understand the data and aids the researcher in formulating and communicating the exact meanings of themes via data analysis. Lastly, the researcher wrote the

findings. Drafting the findings requires an introduction to establish each research question, aim and approach, and a conclusion that explains noteworthy findings and explains how the analysis has answered the research questions (Braun & Clarke, 2006; 2021).

Sensitizing concepts (Bowen, 2006) of coparenting domains and social support definitions that are well-established in the literature were employed throughout the data coding and analytic process. Specifically, the data were coded and analyzed with a grounding in Feinberg's four coparenting relationship concepts: (1) the degree to which parents agree/disagree; (2) division of child-related labor; (3) support versus undermining behavior between parents; and (4) shared management of the family. Further, the research team examined the relationships between coparents (given the broad definitional above) through a lens grounded in three social support concepts: (1) perceived and received social support; (2) emotional, instrumental, and informative support; and (3) social capital and social influence (Berkman et al., 2000; Heaney & Israel, 2008).

Initial codes were generated by the primary researcher using a sample size of 5 randomly selected transcripts. Because the research is guided by specific research questions and sensitized by specific concepts as discussed above, a theoretical coding/open coding process was used to generate initial codes (Vaismoradi et al., 2013). This means that the codes were developed and modified in an iterative process as coding progressed. Once initial codes were generated, the research team described above thoroughly reviewed all 15 individual transcripts and coded each line-by-line. Thirty-three percent of the transcripts (n=5) were double coded to ensure consistency amongst coders and solidify themes. The team of coders communicated identified themes in a shared document and conferred to discuss overlaps and minimize coder divergences. Conferencing took place via telephone between the researcher and each reviewer as needed

where discrepancies arose or where clarification was needed, and the researcher was able to resolve each issue that arose via consensus with and/or clarification by the coder.

The qualitative research analysis software Taguette was used to code the interviews (Rampin, 2021). The Taguette platform assisted the research team by grouping common topics and issues, and by categorizing them under labels representing conceptualized themes (Rampin, 2021). Themes were named and defined using a thematic map: a visual presentation of themes, codes, and their relationships, including a detailed description of each theme, its criteria, examples and counter examples, and other pertinent details (Vaismoradi et al., 2013).

Primary Researcher Positionality Statement. The primary researcher and interviewer acknowledges her own identities as a first-generation queer Asian American mother of young children (currently school-aged and preschool-aged). The researcher is born of refugee parents and older siblings, the first child in her family born in the US. The researcher experienced a single/no parent upbringing in a low resource environment, living in government housing. The researcher is in a homosexual marriage and is coparenting in the marriage. The researcher recognizes these demographic qualities positions her as an insider in some intersecting identities and outsider in others. The researcher acknowledges that her positionality impacts her interview style and interviewee's responses to the interview questions.

Results

Four salient primary themes were revealed from interview data. Together and independently, they illustrate the complex nature of social support manifested within coparenting relationships and its impact on stress, as well as how changes in the coparenting relationship brought on by pandemic-induced structural life changes.

First, participants overwhelmingly expressed a sense of resilience and use of adaptive coping skills – primarily social support seeking - as pandemic-related pressures persisted over time, despite often inadequate community resources. Adaptive coping skills are cognitive and behavioral efforts to manage stressful conditions such as seeking guidance and support, problem solving, logistical analysis, and positive reframing (Holahan et al., 2017). Participants reported not only using adaptive coping skills and resilience behaviors, such as leaning into available social support, but often recognized their own use of such skills: they understood themselves to have coped well in response COVID-19 stress. This is reflective of the quintessential stress-buffering hypotheses "stress reaction by attenuating:" obtaining adequate support to intervene to reduce the stress (Cohen & Symes, 1985, p. 312). Participants consistently reported that despite challenges placed in front of them, they were able to develop stress buffering strategies.

Second, while participants consistently reported increased reliance on coparenting relationships for instrumental and emotional social support, their perceptions of coparenting relationship quality varied. Although contentious relationships did not necessarily improve, most participants reported "leaning in" to coparents because of pandemic related stress. Faced with a narrowed their scope of social support resources due to COVID-19 social restrictions, many parents felt that their communication with coparents improved, and that this communication resulted in greater trust and appreciation. For many participants, coparent instrumental and emotional support, was critical in buffering COVID-19 related stress. Aside from pragmatic improvements in relationship quality, parents reported relying on coparents to reduce or relieve personal pandemic stress to a greater extent than pre-COVID-19 pandemic times.

Third, participants frequently reflected on the centrality of the social support obtained through the coparent relationship and its potential to act as a buffer to stress. Thus, not only did

participants report a higher reliance on their coparent relationships for instrumental and psychological support as discussed above, the recognized the coparent relationship as a resource with respect to stress. In the face of high ambient stress levels, the centrality of the social support aspect of the co-parent relationship became more, rather than less, prominent.

Fourth and finally, although coparenting relationship was a central source of social support, participants still found utility and meaning in connections to the broader community. Many participants turned to their "village" for and to provide social support during trying times, even in the face of COVID-19 related restrictions. Where traditional means of connection were unavailable, participants reported being creative about giving and receiving social support from their broader communities.

In the Face of Multiple & Varied Pandemic Related Stressors, Parents Expressed Resilience, Sought Social Support, and Provided Social Support. Pandemic related pressures fell into three main categories in this sample: 1) school and school district gaps in support, communication, and preparedness with respect to both parents and students, 2) overall physical and mental health/wellness of family and self, particularly as impacted by geographic factors, and 3) balancing household, childcare and employment necessities with changes in available social support. In general parents in this sample experienced elevated stress. One parent described the experience as "being placed in a blender and having it turned on."

A primary cause of stress during the pandemic reported by interviewees, particularly during the first year of the pandemic, was attributed to the limited educational support and services offered by schools and school districts. As expressed in an earlier study, schools and school districts did not adequately communicate with parenting partners (Adams et al., 2021) as educational goals and resources shifted, which led to breakdowns in the educational milestones

for children and heightened stress for parents. Frustration rose as the pandemic continued because the remote education provided by the school was lacking, basic in-person school support was limited, and digital and concrete supplies necessary for children to properly participate in remote learning were not adequately supplied such that parents were concerned that the available education was inadequate to "prepare these kids to graduate and start in the real world." For Anne, a mother of two sons in elementary school, frustration with her children's school district arose early:

> "So remote learning. Oh, that was frustrating! That was very frustrating. I commend our teachers because the Friday that school closed, we started getting instructions from teachers right away . . . But after a week or two, we were told [to] completely stop . . . we were told that because of the other students within the district didn't have those same resources. I found that frustrating because I felt that my kids were, are being held back or like instruction isn't being offered because of communication breakdowns that the district didn't have with other families. Essentially, teachers are willing to give instruction, but we were told stop . . . The district sent out a bunch of really, they just sent out a list of websites that you could look at if you wanted to. They weren't great resources. Learning stopped into a real standstill until, like they started Chromebook distribution....in April or May [2020]."

Due to schools and school districts being "unprepared," more than half of the parents interviewed reported feeling that the last months of 2019-2020 school year were a "waste" and their children "learned, absolutely nothing." Instead, those months revolved around the additional stressors that accompanied remote learning, such as issues related to technical support, for both parent and institutions. For Beth, mother of two daughters and foster parent to two boys,

the logistical pains of technology were bilateral. The teachers' abilities to teach remotely was one piece and parents' and students' abilities to navigate the new educational model, and associated technology, was another issue that impacted success in remote learning:

> "The teachers didn't know how to maneuver that whole distance learning and the parents didn't know. And the parents are supposed to help and support the kids on the other end of the computer. And the parents don't know essentially how to help and how to teach the kids. I guess we automatically had to be the teacher's assistant. To help the kids even through technology, meaning laptop and the computer and the parents have to know how to log in, log out and the parents have to be able to help assist the children in homework. That the homework happens to be in the computer and laptop so you're on laptop and you automatically need to learn all that stuff within that first distant learning."

Such logistical stressors were compounded by the loss of other school services for students with disabilities and their parents, as Individual Education Plans (IEP) and 504 plans were not adhered to in the rush to accommodate remote learning. The parents that discussed IEP and/or 504 plans felt their children were "left behind," which required parents of children who qualified for such services and were not receiving them in a particularly precarious place. For Cate, a mother of seven with all three of her school-aged children entitled to services, explained:

> "We had two on an IEP and one on a 504, and so they went from having services to pretty much nothing the first year when it came to special needs and so having to have to take up that slack especially with a child with dyslexia, that requires some specialized learning that myself or their father does not have . . . We really needed to sit with them and monitor versus like checking in with teachers occasionally and watching grades and stuff. We became instructors and . . . that became a challenge."

Most participants felt that their children would be or were "left behind" academically if they as parents could not provide a high level of "hands on" support. For Dana, a parent of two elementary and middle school children, concerns regarding her ability to provide adequate academic support took a psychological toll:

> "Besides the exposure being all stressful, it was me trying to help the kids learn because it wasn't the same as when we learn . . . I can't grasp that . . . I can't but that's all my kids are asking me for help and it was hard trying to help them with stuff that I didn't know, or I didn't understand. So, I think that was the most stressful thing was like being afraid that my kids were not going to be successful with their academic grades and stuff because I didn't know how to help them."

After disclosing initial concerns about their children's academic milestones, participants reported concerns shifting to their children's psychological well-being as the pandemic continued. Anne stated:

> "It turns into, how are our kids emotionally functioning? And how are we making sure our kids are mentally healthy and emotionally stable? And a lot of cracks in our social fabric I think [are] being exposed. And how a lot of kids, social and emotional well-being. It is important."

All parents of color interviewed expressed that in the "early days" they suffered fear and anxiety around how COVID-19 and associated responses "affects our mental well-being" after prolonged "anxiety and fear" around the "unknown" physical impacts of COVID-19. The limited information on television and social media at the time made COVID-19 feel "like a death

sentence if it was contracted" and interviewees expressed concerns about the mental impact of the resulting fear and isolation for both themselves and their children.

For participants who worked and/or reported that their partner work outside of the home, the fear regarding health and safety was heightened. The necessity of work left parents in difficult positions across the board. Five of 6 parents who identified as Latinx (multiracial included) were essential workers. Three of 6 Latinx parents had partners that were essential workers. One of 5 parents who identified as Black (multiracial included) reported being an essential worker and 2 of 5 Black parents had partners who were essential workers. One of the 5 parents who identified as Asian American reported their spouse was an essential worker. For Evelyn, parent to a teenage daughter, anxiety of being an essential worker and being partnered to an essential worker caused stress:

> "I was afraid of you know, being sick and you know family being sick. That was the biggest thing is the fear of what's going to happen. My husband, because he works for a hospital his schedule didn't change. He still had to show up for work and for me, you know, I was working still. I am working part-time with my niece so when it happened, we shut down a little bit. But we were still working . . . I was DoorDashing too. So, there was a big demand for DoorDash, so I was quite busy in that sense."

In addition to juggling remote learning and the health and safety of the household, participants felt compounded stress and responsibility in the management of everyday life under pandemic circumstances. The physical and psychological impacts of added household stress during the pandemic and loss of school support created an overwhelming situation for Frances, a mother of 4 children, currently ages 3 to 16 years old:

"It made it so stressful because it was the fact that, like you know you get you deal with your kids at home you know. But when they're at school it's kind of like for me as a mom it's my time if I'm off. My time to clean the house, my time to clean our rooms, our laundry, whatever. But having them home all the time, there was really no break, so it was like doing everything all at once, and it was stressful. It's very stressful. Made me want to pull my hair out."

The combined impact of compounded situational stressors universally impacted mental health amongst research participants. The moods fluctuated and heightened during the pandemic with many reports of anxiety and depression. Grace, with a daughter in elementary school, reported that her mood impacted her daily life:

"I kind of got really down and depressed but I tried to just focus on keeping her occupied, which helped a lot . . . I wasn't working you know, like laying around sleeping a lot . . . I definitely had to take my, I'm on medicine for depression, so I definitely spoke to my doctor and we up the dose to try and help me get through it."

Importantly, however, interviewee responses consistently showed evidence of resilience and employment of coping mechanisms – especially support-seeking behaviors. When their "world became smaller" participants found ways to cope with the exorbitant amount of stress. Although some methods of coping were potentially maladaptive and indeed some participants reported drinking "more wine" particularly in the early days of the pandemic), the trend amongst participants in this study leaned heavily in favor of effective utilization of immediate family-based social support as a positive coping mechanism. Many participants reported they "channeled [their] energy towards" family, particularly their children. Halle, a mother to a three-

year-old and an eleven-year-old, reported "I didn't want to just, you know, step away just for me when their physical and mental wellbeing to me is more important."

Overall, participants found ways to give and receive emotional and instrumental support within their family unit through the pandemic. Developing more "activities" such as "movie nights," "neighborhood walking adventures," "cooking together," "walks with the dog," "games," and "family time" for their family. For some, the increased amount of time spent with family-members improved communication practices. For example, Cate a mother of 3 school-aged children and 4 adult children, reflected on communication patterns that changed within her family unit because of COVID-19 induced isolation:

> "COVID taught us how to talk to each other. We hadn't been talking to each other and so I've gotten closer with all my kids my even my adult kids and my ex much better because of COVID you know, who else you got to talk to? And so, developing that good open communication with my daughter, and the best communication I could get with the boys, with thanks to COVID that probably would not have had it. And also, you know family time activities, it also became more. It was no longer where I was only doing the cooking or my ex was only you know heating up box food . . . All three of the younger ones [got] into cooking and you've got to cook something, you've got to make something. And so, I brought some independence in that aspect that if it wasn't for COVID, I don't think even as a parent I would have had the time or taking the time to show my autistic . . . 20-year-old the rice cooker . . . or my daughter . . . learn different kinds of soups, pull up online . . . so it did bring some positive things that kind of fell out with the business of what life had become."

One interesting trend amongst participants was that, for many participants, the act of providing social support yielded high levels of emotional satisfaction. Multiple participants reported that providing social support was a way of buffering stress for themselves and others. Simone, a former Girl Scout troop leader, found emotional benefit in creating a diversity program for troops to earn badges. Other participants reported engaging in various service activities: they reached out to their extended support system to aid in supporting their community by providing instrumental support such as "dropping off food" and "helping out" neighbors or providing a combination of informational and instrumental support to other members of the community. As Diego, father of five, three school-aged children, stated,

> "I'm the one supporting everybody with advice and stuff like that . . . I don't get support from them because the other way around. A couple of my sisters live in Mexico, so I have to once in a while help them with a dollar or two. In here, everybody that is here in a lot of them, they don't speak the language they don't understand the language so every time they get a paper. They would bring it to me so something that they don't understand, I will read it for them and explain it for them."

Many participants reported that acts of providing social support are linked to cultural values and finding ways to provide support to others through the pandemic was an effective coping mechanism for stress that left them feeling connected to their culture and community.

Coparenting Relationships Experienced Largely Positive Change in the Face of Stressors as Parents "Leaned In" to Coparent Social Support. Regardless of whether the coparenting relationship included a romantic partner, a previous romantic partner, or another family member, all participants interviewed discussed the necessity of their coparenting relationship during the turmoil of the COVID-19 pandemic. Participants consistently reported that the pandemic made

their world "smaller." On one hand, with reductions in social support from schools and school districts, extended family members, friends and workplace colleagues, parents of color were left to depend more on their coparent. For some, the confined spaces, changes in external support, and more strain and stressors negatively impacted relationships that were already strained. In the study, 5 of the 15 parents reported strains in coparenting relationships at the beginning and/or as the pandemic continued.

Largely Positive Shifts in the Division of Child-Related Labor. For parents of color in this study, mothers and grandmothers in heterosexual coparenting relationships generally held the "mental load" and often "dad took his queues from mom." As structural changes disrupted old patterns during the pandemic, some participants reported that they were able to divide the labor load more toward "dad" by providing "instructions" to dad. For example, Beth reported: "my husband helps more. He helps me with house chores things, and he helps me with the dishes. He helped me with clothes because I think he have seen me by the end of the day. I'm exhausted."

The shift in child-related labor divisions also occurred in same-sex relationships. For Olivia, mother to a son in elementary school, "pre-pandemic it's all, a lot of it falls on me;" and that the pandemic was "stressful on our relationship." However, she reported that relationship dynamics shifted and they began to "work as a team together but it definitely was a lot of trial and error for us." She noticed a change with respect to parental monitoring of her son's school-related activities:

> "The biggest change is that my wife is actually monitoring what our son is doing as far as his work making sure his work is done, making sure his folders are organized and just all of those type of micromanaging type things. Just more shared responsibilities with that, it's not just my responsibility to make sure that that gets done."

Perceptions of the division of child related labor and the rationale for such division may also be influenced by gender. For example, Adam, father of two sons, reported that parenting labor was split by "our strengths...our weaknesses." So, the children's mom "focused on the details making sure that they have their homework done and their work [is] done" and he focused on "their extracurricular activities" such as "coaching baseball."

Limited Shifts in Coparent Agreement Levels Regarding Childrearing Approaches. The degree to which parents reported agreeing or disagreeing with their respective coparent about childrearing practices and goals was found to remain largely unchanged in the face of COVID-19 related stressors. Participants reported no changes in the extent to which they agreed or disagreed about childrearing practices and goals that were attributable to COVID-19 related stress, even where stress caused fissures in other areas. For example, for Evelyn, the pandemic did not create much change in this area. Though she became less "tolerant of [her coparent's] political views" they both "were on the same page" when it came to parenting decisions regarding their daughter. For Halle, mother of two, who coparents with her son's biological father with whom she is no longer romantically involved, differing parenting styles and lack of communication set a foundation for coparent conflict:

> "It's always been a two-family. So, for the most part it's me that does most of it. Even if I tell him he's in trouble because he got in trouble at school or at home and I send him to his dad and tells dad, "Well right now he's grounded off of these things", that never really sticks."

Here too, the pandemic did not fundamentally change their relationship: Halle's relationship with her son's father was already strained and remained strained throughout the pandemic because they "didn't agree."

Coparents generally engaged in supportive (non-undermining) coparenting behaviors in the face of increasing stressors. In general, all parents in this sample reported that "communication became very key" in navigating COVID-19 related stressors. In addition, natural changes in children as they enter and exit different developmental stages created moving targets with family management for many participants, which underscored the importance of a supportive coparenting alliance. For example, Adam, a father of two sons noticed changes in his oldest son:

> "Our oldest - it's become a lot more challenging . . . We just want our kids to listen, be good and be responsible and that's what we try to teach them to be kind. So, I think that's like the common core of our families it's you know be a good family member . . . Basically, be a good person that's what we try to teach our kids."

Similarly, for Simone, who indicated she was coparenting with her ex-husband, the key to cohesiveness in the coparenting relationship is giving her ex-husband "respect as her father." "Out of respect" she comes to an "understanding." There are "differences in how we raise our kids," but the "best course for us" is to "always try to find a compromise" and/or "talk it out."

Some participants attributed positive developments in the coparenting division of household responsibilities to the COVID-19 pandemic itself, particularly with respect to the coparent alliance and exchange of instrumental support. For Cate, who was separated from her husband for four years prior to the pandemic, the coparenting relationship completely changed:

> "Four years before the pandemic was when we finally completely split. So, it kind of pushed us to communicating more . . . We saw right away that we had to change, you know things had to change . . . We didn't have [a coparenting relationship] pre- pandemic

that we developed . . . Much more... making the same rules, whereas before it was the rules at mom's house are mom's house rules, the rules are dad's house are dad's house rules. Now we have shared rules . . . We were able to talk out some rules."

Support from Cate's separated husband in the form of greater instrumental assistance with their children's basic needs created a better alliance and working relationship between the coparents and between the coparents and their children. She shared, "yesterday, I'm more broke because it's summer I don't have as much financial aid, so I told my ex, I said, 'They're hungry, everybody here is hungry. What do you want to do?' . . . He's like, 'All right, I'll grab dinner.'"

For mothers of color who stayed at home, the household duties that often "fell" on them pre-pandemic continued to do so during the pandemic, but over the course of the pandemic they reported that they began to "lean on" their coparents for support. For some, the COVID-19 pandemic provided an opportunity for their coparent to be around more due to shifts to remote working, and they reported that their coparent was able to assist more with child rearing and household maintenance. Coparents felt that additional instrumental support "helped a lot" to buffer some of the added stress from life that was more fully taking place within the context of home. For Penelope, a stay home mother of three school-aged children, the COVID-19 pandemic shifted her husband's physical availability and his work obligations.

"He [would] be gone for a really long time like he goes to India or China, and those would be like one or two weeks at a time. And so, it was, I felt like a lot of times I was a single parent and just doing all the things for the kids. But once he stopped traveling, he was around more. I mean he is still working a lot but he was still you know able to eat dinner with us every day, and . . . it definitely helps when there's someone else to help you talk to the kids and do things with them, so it got better . . . When [he] is home, he

usually helps out a lot like he'll cook sometimes and . . . he always helps clean. [He] helps take care of the kids . . . He's been around more and so able to do more."

Participants who coparented in the same household credited having "similar parenting styles," being "flexible," and/or "talking things out" and "communicating" for "getting through" as helpful strategies for navigating COVID-19 related stressors during the last two years. Most participants agreed the "focus" for both/all coparents was the wellbeing of their children and that presenting, a "united front" was important. Most parents reported that they did "not disagree with each other in front of the kids." While most parents reported that they were able to "make it sound like mom and dad is one," parents who reported a strained relationship indicated that this was more challenging to accomplish. For example, Frances, mother of four children between the ages of 3-16 years old, who shares custody of her children with her mother and daily childcare responsibilities with her partner, had a strained relationship with her mother prior to the pandemic. On one hand she states during the pandemic her mother engaged in undermining behavior: "She'll do that in front of him (son), because it's like you're undermining my authority in front of him, which now, I have a situation to where sometimes he'll talk back to me." On the other hand, her partner engaged in supportive behavior: "My husband doesn't play that, like she your mother and you're going to respect her."

Participants Recognized the Central Role of Social Support Provided by the Coparent Relationship with Respect to Stress Buffering. Perceived, received, and provided social support, including actual/perceived emotional, informational, and instrumental support within coparenting relationships, became increasingly important and more noticeable in the lives of participants during COVID-19 restrictions. Participants reported reflecting on which relationships provided meaningful support in difficult times as they navigated parenting in the

face of COVID-19. For Frances, mother of four, the perception of instrumental social support from her coparents (partner and mother) was tied to the individual emotional social support coparent relationship she perceived with each of them.

> Frances reported feeling that it is "just me and him honestly . . . I love my mom my dad . . . I wish you could get a little bit more support, but we've learned to deal with it . . . we've had a lot of issues, I guess every family has issues of course . . . You come to realize that the ones who are supposed to want good for you are the ones that are secretly hoping you fail . . . Unfortunately, I've dealt with that a lot."

The perceived lack of emotional support from her mother has clouded her ability to see the instrumental support her mother provides. For example, Frances also acknowledged:

> "They live with her. We live at her house . . . She's watching TV and they'll (kids) be playing in living room. She will bring them McDonald's or buy pizza. If I asked her to buy diapers for the baby, she'll do it . . . I don't want to take away from what she has done."

For Beth, mother of two daughters and foster parent to two sons, noted that when she "had the support of my husband it was better because he really helped me out." She expressed having his support made it "more manageable," the combination of instrumental and emotional social support was central in reducing stress. The necessity of this combination with respect to coparent social support satisfaction was echoed by multiple participants, who reported turning to their coparent for the instrumental support of "help around the house" and with "the kids," as well as for the emotional support of being their "cheerleader" and the person they "talked to." Multiple participants also reported utilizing their coparent as a source of comfort with respect to

informational support during confusing times, relying on the coparent to "[give] me another perspective."

In general, most participants reported a higher reliance on their coparents for emotional and instrumental support than prior to the pandemic. With their world becoming more "isolating" and stressful, parents of color in this study often leaned into their relationship with their coparent rather than out of it. In some cases, this was precipitated by COVID-19 related stressors (e.g., loss of employment, changes in employment expectations, remote learning, changes in social support, etc.) For example, Simone's husband lost his job at the beginning of the pandemic, and he got a job offer on the east coast, requiring her to move during the pandemic for his employment. Simone's daughter did not want to move to the east coast, so she moved in with her father in Los Angeles for the first time. After living with him for 4 months she decided to move back in with Simone and her husband on the east coast.

> "She was able to go live with him, which never happened before. And she never would desire to live with him either because of the pandemic. I had to move across the country . . . I feel like I want to say, maybe there is more communication between us but that's simply because she was there, and I'm going to call every day . . . checking in with her father and making sure she's mentally okay."

The change in her daughter's living situation and associated increases in communication between Simone and her ex-husband facilitated Simone's ability to feel more "comfortable" calling him.

Participants who were essential workers reported particularly high levels of gratitude to their coparent for their role in buffering stressors as they navigated the challenges of having their children in remote schooling while continuing to physically report to work. They had to lean on

their coparent and extended family for more instrumental support. Diego, an essential worker with 5 children, worked 6 long days a week due to the increased demands of HVAC repairs during the pandemic. His workload changed due to the high volume of needed repairs and increased conflict with customers who "try to take their bad mood out on you," which "stressed me a little bit." Instrumental support from Diego's mother was central to the family's functionality. Diego reported, "without my mom I will not be able to handle this. She been so helpful with all this, with the kids. She is pretty much for the one to [do] everything."

While increased reliance on coparent support in buffering stress was widely expressed, it was not universally expressed. As a result, participants who did not find stress-buffering support in their coparent found themselves seeking other sources of support outside the coparent relationship to get their needs met. For example, one of the 11 parents of color living and married to their coparent, Evelyn, mother to a teen daughter, expressed a disconnect in their social support from their coparent due to political differences. Although Evelyn indicated that she and her husband were on the same page in coparenting plans and practices (e.g., "we both had very similar and parenting styles, I think we both had certain things we wanted to instill in her"), personal social support strains began to appear due to "less tolerance for the way he believes . . . he has lost tolerance for me . . . Our fundamental differences are impacting our marriage." She turns to her "family" and "friends" for emotional support. "[I] pretty much just find support emotional support from family [and] friends."

Halle, mother to two children, who expressed tensions in the coparenting relationship with her son's father, stated, "I'm mostly responsible for everything. My son's dad doesn't really assist with school. When he tries to do homework, it ends up in a fight most of the time so it's pretty much me with his schooling to make sure everything gets done and that's the same [as] it

was before." The lack of instrumental coparenting support from her son's father and the non-existing support from her daughter's father during COVID-19 was exacerbated when her daughter got became sick with cancer, which led Halle to take a leave from her essential employment at a hospital and forced her to turn her parents for instrumental support with son's schooling. "It went from seeing them a few hours every day to seeing them most of the day, every day. They're the ones that end up watching him." The contrast between Halle's and Evelyn's responses with other participant responses indicates that the inability to rely on a coparent relationship for buffering stress is not necessarily tied to whether or not the coparenting relationship is functioning well in relation to childcare.

While the Coparenting Relationship was a Central Source of Social Support, Participants Still Found Utility and Meaning in Connections to the Broader Community. Participants discussed their perceptions of availability of social support and their experiences of receiving it within the context of their larger community: the loss of community-based social support relationships, changes to existing relationships, and support gains in new relationships. Despite the isolation induced by mitigation measures, Ann, mother to two sons, utilized her community social support network to "look for more external resources to prop up this family." Indeed, many parent participants reported looking to their village to support through the pandemic, though they also reported facing changes in the manifestations of support they typically received from their community in pre-pandemic times. For example, although lot of instrumental support they received from the school, school districts, community and government were lost such as "free lunches," parents of color are appreciative of the substitution provided in many states such as food stamps, take away lunches, the "stimulus checks," "food pantries," etc., which were "very helpful" in ameliorating the "extra cost" associated with pandemic limitations.

Participants did report profound losses in emotional support, with many stating that the emotional connection they had with their churches, community, and friends was changed forever.

For Cate, "I was active in church before the pandemic. I was active in a lot of veteran's groups before the pandemic. When the kids weren't with me, I was always out doing things . . . After the pandemic, it has changed a lot for me. A lot of the veterans do not use zoom, so I lost a lot of those contacts. Even with church, my Bible study groups all pretty much fizzled out. Church did become online, but churches, for me and our families were more of a social outlet too. We lost a lot, and I haven't, we haven't picked that aspect of our faith up."

Still some participants found different or creative ways to connect with their existing social support to buffer the stressors. For Beth,

"I'm grateful to have a handful of friends . . We were able to give each other ideas, we were able to bounce ideas from each other, share struggles and to be able to share our . . . what went right with each other, so we were able to bounce ideas from each other. We were able to facetime each other. We were able to text each other for more support emotional support. My groups are friends, once a month, we had a mommy night in. And we just have wine together and we chat. Just vent about our husband. We were to vent about our kids, and we were just laugh about it."

In addition to existing social support, participants discussed developing new social support relationships with their broader community during the pandemic. For Simone,

"I developed like a friendship over Instagram with a former schoolmate of mine, who went to college with me, who I would never have talked to before. But somehow, like we bonded I don't even know how it happened, but like now I message her all kinds of things."

While some found social support closer to home. For Olivia,

"I met this person right before the pandemic who happened to live in my neighborhood, and I swear to God we both said it saved our lives. Literally been talking more now during that time we walked four miles every single day. [It] was a lifesaver because you're so separate from everybody else everybody that like your support. I was separated from everybody that I considered my support group because either they were with their families, or they were just so far away. I wasn't at work anymore to have this person that was my accountability person as far as walking, was in my mind big stress reliever."

The need to be connected to a larger community and specific cultural dynamics also influenced the types of social support practices participants felt comfortable accepting and providing. Many participants reported that an element of "trust" is needed before social support from the larger community could be accepted. For example, Dana, mother to a daughter and son, is part of a self-described "military family" and spent the early days of the pandemic in Europe. Though she found some support within the military community, the lack of long-term relationship building, and development of trust limited her ability to find emotional and instrumental support through pandemic challenges. She explained,

"Since we were overseas, you know we're paying for childcare and all this stuff. So that took a lot out of our paycheck. So, being back home, having family here that helped us

out a lot financially and then also just peace of mind to know that they're with family and they're safe . . . Being home and having our family here and our close friends that we've known for a long time, and I know they care. And they see my kids and raised help raise my kids pretty much at that point. That I'm willing to trust them and allow them to help out with my children. So being home had a lot more people, and then you know, like friend to talk to . . . [I] know that if I had questions or anything like that you would be there, and I know some are so blunt and honest that they would tell me exactly what I need to hear. So, it's good to be back to people that you know . . . where someone that you meet for a year or two and then they're gone and then at that point, you may not have built that relationship with them where you can be honest, and you know tell them what needs to be heard versus what they want to hear."

Stories like Dana's reflect the general trend: while broader community social support remained meaningful, social support that was obtained through the coparenting relationship took on a heightened role during COVID-19.

In moving forward, participants overwhelmingly recommended that public education enhance their approaches in communication, streamline virtual educational platforms, enhance virtual student support, improve the flexibility of IEP & 504 services, and provide adequate access to necessary resources needed for their children's academic and social success (school counselor or mental health support). Parents of color reported that they would like the government to improve public health approaches and delivery of basic supplies during a national emergency.

Discussion

To the best of the researcher's knowledge, this is the first study to explore the complexities of COVID-19 pandemic-related stress in connection to coparenting relationships and social support amongst parents of color in the US. This study was made possible by the generosity of the fifteen parents of color who not only discussed and identified many impactful stressors experienced during the COVID-19 pandemic (including but not limited to stressors related to their children's schools & school districts (limitations in effective communication and adequate support), concerns about child educational and emotional wellbeing, difficulties balancing work obligations and child/house care, and concerns regarding household management and work-life balance), but lent insight into their lived experiences navigating the stress, particularly in relation to their coparent-based social support. The participants' stories and the themes conceptualized from these stories highlight the need to for future research, as well as attention to policy and practice in education and family support services. The findings from this research can inform policy and practice with respect to generating more effective school-based resources for families of color, improving public health and social support programing supportive of coparent relationships, and investments in culturally competent health and social services. The findings from this research also highlight the importance of conducting and expanding research with an eye toward improving the lived experiences of minoritized populations.

Findings from this study represent a departure from several existing studies that have been conducted on coparenting relationships, social support, and families of color. Most glaring was the deviation between the prior literature and this study's findings regarding social support and the coparenting relationship. At the start of the COVID-19 pandemic, early research painted

a bleak picture for domestic relationships. At least one study that took place in the early stages of

the COVID-19 pandemic found that divorce inquiries rose in late 2020, with data collection

showing a 122% increase in inquiries between June and October 2020 (Savage, 2020). In the US,

a major legal contract-creation website announced a 34% rise in sales for its basic divorce

agreement in 2020 (Savage, 2020).

The stories told by participants in this study, who were reflecting on their experiences

over two years after the COVID-19 pandemic was first declared, presented an unexpected

narrative in the face of early studies and predictions. The relevant findings were conceptualized

in four independent but related themes. First, coparenting relationships experienced positive

changes when encountering stressors as parents of color leaned into coparent social support.

While early predictions and studies indicated parents may pull away from their coparents in the

face of external COVID-19 pandemic related stress, participants in this study consistently

reported that with a narrowed scope of available social support, they relied on their coparent

relationship in new and critical ways. The coparenting relationship was one relationship that

experienced increased rather than decreased points of contact during a time when most external

ties were eliminated or reduced to virtual contact to curb viral spread. Participants reported that

key aspects of the coparent relationship (communication, division of household labor, division of

child-related labor) improved – perhaps out of necessity – thus improving the perceived overall

quality of the coparent relationship.

Second and relatedly, most participants reported utilization of the social support from

their coparenting relationship as a buffer to stress to an equal or greater extent than in pre-

COVID-19 pandemic times. Whether out of necessity in the face of reduced social support

options, shifts in priorities, or other factors, coparents of color, coupled or separated, specifically

leaned into their coparenting relationships to buffer stress associated with the adversities of

COVID-19. Only one participant expressed new strains on their personal/romantic relationship

with their coparent due to differing political views, but even this participant did not report a

change in marital status or changes in coparenting practices (i.e. child-related decision making

and labor) or quality. All other participants in this study reported either improved coparent social

support or no change in coparent social support (particularly in instances where the relationship

was strained prior to the pandemic).

Potentially accounting for differences between this study and earlier reports is the time

difference between fall of 2020 and fall of 2022. Importantly, while the COVID-19 pandemic was

still ongoing at the time of interviews, the initial upheaval of early 2020 was passed and in-

person school had largely resumed across the US. Also potentially contributing to the surpising

findings are the the limited focus of this study on parents of color as opposed to married

individuals generally, and the limited sample size of this study. The apparent contradiction

between the findings of this research and early COVID-19 pandemic predictions indicates that

additional research investigating the longterm impact of COVID-19 stressors on parents of color

and the coparenting relationship is needed.

Other themes identified in this research were also out of step with early research and

predictions regarding the impact of COVID-19 related stressors. Another important finding was

the third conceptualized theme: resilience and use of adaptive coping mechanisms in the face of

the unexpected and unusual stressors associated with the COVID-19 pandemic. This finding was

unexpected based on the prior research and literature review. Earlier studies predicted that that

"[t]he impacts of COVID-19 on families appear to be wide-reaching, negatively affecting parent

and child mental health, and key drivers of overall physical health." (Clawson et al., 2021, p. 10-

11). Again, the interviews for this study took place in the summer of 2022, after the early chaos of the COVID-19 pandemic and after schools had largely resumed in-person instruction for the 2022-23 academic year. The misalignment between this study's theme of resilience and adaptive coping with the earlier predictions of highly negative impact opens the door to many avenues of future research and should refocus starting presumptions when engaging in research of this demographic.

Fourth and finally, though the coparenting relationship was consistently identified as central, participants consistently reported utilization of other systems for social support, though to a lesser extent than in pre-COVID-19 pandemic times. Participants reported that they built stronger relationships not only with their coparenting partners, but with their children and larger family support systems. The most frequently used sources of support were immediate and extended family. Additionally, despite COVID-19 imposed limitations on broader socialization, participants reported maintaining connections and reliance on various aspects of the larger community for social support, sometimes finding creative ways to connect in the face of social distancing protocols. This theme links back to the initial and prominent theme of adaptive coping mechanisms and resilience: even with reduced access and mobility, parents of color found ways to connect.

Implications. Potentially the most important implication of this research is that parents of color, undoubtedly a group that faces more structural challenges than many other demographics, are resilient and they view themselves as resilient. Because this research was exploratory and intended to lay groundwork for additional studies going forward, this finding can serve as an important starting point for research looking to identify potential interventions in buffering stress. Parents of color should not be approached as victims or as individuals in need of

rescue. They should not be underestimated with respect to their ability to mitigate their own stress. In the face of challenges, parents of color are competent and creative with respect to finding adaptive solutions to buffering their own stress. Researchers and policy makers should approach parents of color as partners and collaborators in finding and implementing ways to reduce or remove resource inequities and access barriers. Importantly, parents of color have ideas for improvement – their voices can and should be heard.

Another central implication is that the coparenting relationship has the potential to meaningfully buffer external stress for parents and thus should be prioritized as a target of intervention. While coparenting has been studied significantly with respect to the nexus between the coparenting relationship and parents' relationships with children/the act of parenting, the researcher was unable to finding published prior research directly examining the use of the coparenting relationship as an independent stress buffer for parents themselves. In this study, however, the consistency with which participants reported "leaning in" to their coparent relationship during times of increased external stressors for the purpose of social support/stress buffering indicates that the coparent relationship, under the right circumstances, has great potential to mitigate the negative effects of stress. The findings of this research suggest that the coparent relationship should be identified as one to be supported and prioritized in both research and policy, not only for the sake of children but for the benefit of parents themselves.

Finally, it is important to recognize that the resilience and capability of parents of color does not remove the fact that they experienced a significant amount of disproportionate stress. Participants in this sample attributed additional burdens to lack of advance emergency planning within schools, poor communication from schools, and lack of physical resources amongst school district and public entities. Though certain stressors are inherent in a pandemic

environment and difficult to eliminate (e.g., fear of illness), other stressors were conceivably preventable. Participants carved their own solutions in the face of systemic failures, but they were very aware that many systems did indeed fail them as they navigated parenting through the COVID-19 pandemic.

Opportunities for Future Research. Further research into identified areas of community-based social support weaknesses evidenced within public education, emergency assistance, and public health is necessary to inform potential interventions, with grounding principles driven from this study. Despite their recognition of their own resilience, participants were able to clearly identify systemic weaknesses that exacerbated their stress levels during the COVID-19 pandemic. Participants consistently identified inadequate communication, coordination, support, and resources from school districts as sources of significant stress during COVID-19 remote schooling. These service failures compounded parental stress and created gaps in educational and social-emotional support for school-aged children of color, and they carry the potential for impact spanning generations. Understanding and ameliorating the gaps in service that occurred during COVID-19 induced remote schooling is critical, not only to enhancing the lives and wellbeing of parents and children of color going forward, but also to preventing repletion in the event of future crisis. Though schools have largely returned to in-person instruction as of the date of this drafting, the parents of color that participated in this study carry the trauma of the COVID-19 shutdown school year with them. As evidenced by this study, they can look with the benefit of hindsight and suggest meaningful avenues for policy change. Additional research and additional interventions will be necessary to minimize the impact of the trauma for both parents and students alike and to prevent similar lack of emergency preparedness in the future.

Another important area for additional research is the extent to which the coparenting relationship is capable of buffering stress for parents in times of crisis. Prior research is clear that the quality of the coparenting relationship generally impacts the wellbeing of parents – indeed, the quality of the coparenting relationship is often recognized as a factor of central importance in the relative adjustment and parenting for both parents following a divorce (Brokker, 2006; Ahrons & Miller, 1993). Prior research has demonstrated that the quality/supportive nature of coparenting acts positively impact the romantic dyadic relationship and buffers parenting stress (Durtschi, J. et al., 2017). The findings from this research, however, expand on the concept of the coparent relationship as a buffer by indicating that social support received from a coparent relationship can act as an independent, affirmative stress buffer for parents, even where the coparents are not in a romantic dyad. This research highlights the multi-contextual significance of the coparent relationship and associated social support, and invites additional research on coparenting so that its impact can be fully understood.

Future research should investigate how the coparenting relationship can be supported, particularly in times of stress – stress both related to parenting and unrelated to parenting. Is there a way to support utilization of the coparent relationship in adult stress buffering proactively, as opposed to counting on the reactive reliance generated by a crisis? Much of the past research has focused on coparenting interventions that are child-centered (see, e.g., Directed Coparenting Intervention as outlined by Garber, 2004, or the Focused Coparenting Consultation Model by McHale and Iarce, 2010). These practices are geared toward higher-conflict coparents. A larger longitudinal quantitative study on the role of the coparenting relationship in buffering stress of parents would be useful, as would experimentation with targeted interventions in non-high conflict coparenting dyads facing situations of high external stress (e.g., job loss, illness,

etc.). Such further research may generate new opportunities to support parents in utilizing the social support available in their coparent relationships to buffer stress.

Limitations. The study's quality is necessarily dependent on the interviewer's skills and each participant's openness; particularly the influences in their responses/participation by perceived personal biases of the interviewer and/or the interviewer's idiosyncrasies (Anderson, 2010). The qualitative study design also means that rigor can be more difficult to maintain, assess, and demonstrate (Anderson, 2010) in contrast to a broader quantitative study. However, given the exploratory nature of this subject, the western standard of rigor is not necessarily desirable because it can hinder the knowledge and experiences of the minoritized populations in qualitative research (Keikelame & Swartz, 2019). Finally, although this study uses the term "parents of color" as a catchall for the sample group, it recognizes that Black, Latinx, and Asian American parents are in no way exhaustive of all who might identify as a "parent of color" and that this research is underinclusive of all "parent of color" experiences.

Paper Two: The experiences of Black, Latinx, and Asian parents of school-aged children's

during the racial political upheaval of 2020/2021.

Abstract

Though racial tensions in the United States (US) have been rising over recent decades (DePouw, 2017), there was a significant uptick of xenophobia toward people of Asian descent in the US in the Spring 2020 associated with the spread of the COVID-19 virus (Lunis & Markos, 2021) and racial tensions reached a tipping point following the murder of George Floyd, a Black man, by police on May 25, 2020 (Buchanan et al., 2020). Parents of color, an already vulnerable population, were forced to deal with the stressors associated with the COVID-19 pandemic itself along with compounded stress associated with the heightened racial tensions and increased visibility social inequities that were exacerbated during the COVID-19 pandemic (Clawson et al., 2021; Gould & Wilson, 2020; Abedi et al., 2020; Azar et al., 2020; Gracia, 2020). There is limited information about the ways in which the effects of the rise in racial-political social tension temporally associated with the COVID-19 pandemic have impacted Black, Latinx, and Asian American parents ("parents of color") of school-aged children, their parenting practices, and their social support.

This qualitative study explored how parents of color experienced, coped with, and navigated parenting and social support relationships in the face of the heightened racial tensions and safety concerns that spurred the uptick in the Black Lives Matter movement and the beginning of the Stop Asian Hate movement among 15 parents of elementary school-aged children. Reflexive thematic analysis revealed four salient themes:: 1) a lifetime of discrimination in form of microaggressions set the backdrop for the experience of coping with heightened racial tensions, 2) experiences of social support relationships during heightened racial tensions were important yet varied, 3) the combination of parents' background with microaggressions and current sense of heightened racial tensions impacted parenting practices,

and 4) participant experiences of discrimination amongst and between various minoritized populations was a prominent focus. Findings from this study will assist in better directing and focusing future research conducted with parents of color about their experiences with race and racism, particularly as related to parenting and use of social support. The results of this research will also aid in directing well informed and culturally competent Social Work practice with families and communities, as well as policies aimed at ameliorating stressors for parents of color surrounding race and racism.

Keywords: Parents of color, race, racism, CRT, intersectionality, microaggressions, intersecting identities, social support, parenting stress, Black Lives Matter, Stop Asian Hate

Introduction

COVID-19 has amplified the racial inequalities in the United States (US) socially,

politically, economically, physically, and psychologically (Abrams & Szefler, 2020). The

association of the novel coronavirus with the nation of China, reinforced by then-US President

Donald Trump's description of COVID-19 as the "Chinese Virus" (Rogers et al, 2020), fueled a

massive uptick in discriminatory and hate incidents against the Asian and Asian American

community in the US, with approximately 1 in 5 persons of Asian descent experiencing a hate

incident between March 19, 2020, and September 30, 2021 (Yellow Horse et al., 2021). A formal

organization, "Stop AAPI Hate," was formed on March 19, 2020 "in response to the alarming

escalation in xenophobia and bigotry resulting from the COVID-19 pandemic" by a coalition

including "the AAPI Equity Alliance (AAPI Equity), Chinese for Affirmative Action (CAA),

and the Asian American Studies Department of San Francisco State University" (Stop AAPI

Hate Coalition, 2021, para. 1). The slogan "Stop Asian Hate" became associated with various

protests condemning hate incidents against persons of Asian descent (see, e.g., Lunis & Markos,

2021). In March of 2021, renewed attention was called to the movement when a white male

murdered eight people, including six women of Asian descent, at Asian-owned spas in Atlanta,

Georgia (Vinopal, 2021).

The Black community likewise experienced a heightened visibility of racial tension

during the first year of the COVID-19 pandemic. After the murder of George Floyd, a Black

man, at the hands of a Minneapolis police officer on May 26, 2020, the Black Lives Matter

movement and protests condemning police brutality and racially motivated violence against

Black people spread across the US (Buchanan et al., 2020). Though the Black Lives Matter

movement started in July 2013 after the acquittal of George Zimmerman, a white male, in the

shooting death of 17-year-old Trayvon Martin, a Black teenager, continuous incidents of violence and murders of Black people, up to and including the murder of George Floyd, created a boiling point for racial tensions (Lebron, 2021). The 2020 Black Lives Matter movement was one of the largest movements in the country's history advocating for policy and criminal justice reform (Buchanan et al., 2020). Although 2020's Black Lives Matter movement shed a light on the deep-rooted issue of racism in the country and emphasized the desire for change, it also highlighted the division of people in US and gave space for people to publicly express racist views (see, e.g., Stoetzer, 2020).

The Stop Asian Hate and 2020 Black Lives Matter movements were both responsive to and concurrent with a surge in overtly racist activity and sentiments in the US. While some described the heightened visibility of racial discrimination as a "racial reckoning," others noted that many regressive steps and explicit acts of racism and xenophobia called this description into question (Blake, 2021). For example, on a political level, between January 1 and May 14, 2021, at least 14 states enacted 22 new laws that restrict voting access (Berry et al., 2021). COVID-19 related restrictions placed by government entities spurred protests by largely white groups that co-mingled racist elements (Hoskin, 2020). In one incident, protestors stormed the Michigan State Capitol, with Governor Gretchen Whitmer decrying the event and its racist elements, including the presence of "Swastikas and Confederate flags, nooses and automatic rifles[.]" (Timberg et al., 2020, para. 33). On January 6, 2021, protestors erecting a hangman's noose, waving the Confederate flag, and wearing white nationalist paraphernalia (including an Auschwitz Concentration Camp T-shirt) invaded the United States Capitol attempting to halt the certification of President Joe Biden's election (Ray, 2021).

There are many studies that generally explore the experiences of people of color related to racism (e.g., Williams, 2018; Pieterse & Powell, 2016). There is also significant body of literature on parenting and race, with findings of prior studies revealing the importance of racial socialization, talking to children about race and racism (Lingras, 2021; Rodriguez et al., 2008), and critical race parenting, which involves "a critical analysis of systems of oppression, including institutional racism, and is embedded within the lived experiences, knowledge systems, values, and pedagogies," particularly among families of color due to the "unpunished police violence against Black and Brown youth" in the US in recent times (DePouw & Matias, 2016, p. 237). In addition, there are studies on the impacts COVID-19 and race among specific minoritized communities (e.g., Noe-Bustamante, et al., 2022; Lee & Waters, 2021; Zhou, et al., 2021). However, there is a dearth of information on the lived experiences of parents of color navigating life and parenting with respect to race and racism in the US during COVID-19: a unique time when both social support systems were impacted, and racial tensions were heightened and visible. The lack of research into how parents of color navigated this time for themselves and addressed the pressing issues of race and racial tensions with each other and with their children impedes the provision of support for families as they navigate ongoing grand future experiences with racism. This research was conducted to aid in filling that knowledge gap.

Frameworks & Application: Critical Race Theory and Intersectionality

In their book *Critical Race Theory*, Richard Delgado et al. (2017) define Critical Race Theory (CRT) as a movement – a collection of activists and scholars engaged in the study, discourse, and transformation of relationships among race, racism, and power. Legal scholars (Delgado & Stefanicic, 2017; Crenshaw, 2016, 1991) framed its principal concept and other theorists and scholars have provided substantial contributions over the decades (see Dill &

Zambrana, 2009; DeReus et al., 2005). At its core, CRT places race at the center of analysis

(Delgado & Stefanicic, 2017; Crenshaw, 2016, 1991). It has several foundational tenets, which

can be summarized as follows: 1) racism is ordinary, not aberrational; 2) the concept of interest

convergence, which stipulates that black people only achieve civil rights victories when the

interests of black people and white people converge (Bell, 1980); 3) race is a social construct; a

product of social thought and relation; 4) minoritized groups periodically undergo "differential

racialization" and are attributed various negative traits based on the interest of whites; 5) related

to the theses of intersectionality/anti-essentialism, no individual can be fully identified by

membership in any single group; and 6) people of color are uniquely qualified to tell their own

stories as posited by "voices of color" (Delgado et al., 2017, p. 9-10).

Though CRT is decades old, the racial tensions associated with the ongoing race-based

violence, including murders and maltreatment of Black people by members of law enforcement,

recently moved it into popular culture debate. While CRT is being introduced in some

educational curricula around the nation, it simultaneously has been met with both support and

fierce opposition (Sawchuk, 2021). Many vocal critics misrepresent any discussion or narrated

history surrounding race and racism in the classroom as CRT, regardless of whether the actual

tenets of CRT are involved or not. Intense reactions to the education of children around race and

racism spill over from the public education context to the more personal domain of family

discussion. Talking to children about racism and oppression, particularly where young children

are involved, can be seen by white individuals as tainting the innocence of children (Robinson,

2008). However, for many parents of color, this engagement is nothing new and is necessary to

prepare children of color for the world as it exists (Matias & Bitz, 2016; Burton et al., 2010).

During the COVID-19 pandemic, parents of color not only navigated increasingly prevalent and

conspicuous racial tension for themselves, but they also had to relate and contextualize the difficult social climate for their children. CRT's foundational concept of intersectionality demonstrates and affirms that what may appear personal and intimate (e.g., parenting, parent-child conversation) is in fact complex and contextualized by lived experiences and personal identities within historical and modern structures of power and inequity (DePouw, 2017).

The conceptual underpinnings of intersectionality can be dated back to the late 1960s. It was born of women of color; those who recognized that true liberation was not possible without "attending to the oppressions of race *and* class *and* gender" (Collins et al., 2016, p. 45; emphasis original). Literature and scholarship from this time explored the "interconnectedness of race, class, gender, and sexuality in their everyday life experiences" (Collins et al., 2016, p. 48). Patricia Hill Collins, a foundational scholar in the area, spoke of the "interlocking nature of oppression" in her work *Learning from the Outsider Within* (Collins, 1986, p. 19; Collins et al., 2021). It was Kimberle' William Crenshaw (1991) who coined the term "intersectionality" in response to feminist conversations about acknowledging intra-group differences with respect to varied experiences and positionality (Crenshaw, 1991). The intersectionality framework requires viewing an individual's various social and political identities in combination to understand how they can create different modes of discrimination and privilege (Crenshaw, 2016, 1991). An intersectionality framework allows for movement beyond the "single-axis thinking [that] undermines legal thinking, disciplinary knowledge production, and struggles for social justice" (Cho et al., 2013, p. 787).

Intersectionality expands beyond constructs of race and gender; it is a frame that examines intersections of gender identity, sexuality, ability, class, age, religion, language, education, immigration status and more (Cho et al., 2013). Understanding parenting dynamics

and parents of colors' lived experiences from an intersectionality framework acknowledges that everyone has their own unique experiences of discrimination and privilege; it incorporates individual intersecting identities and identities between family members (DePouw, 2017; Crenshaw, 1991). The intersectionality framework acknowledges that "identities between family members are contingent upon one another" and in some contexts, "how we are perceived in relation to one another influences how we are perceived as a group" (DePouw, 2017, p. 59). Importantly, intersectionality is a framework "that effectively addresses complex individual, relational, structural, and ideological aspects of domination and privilege arising from forms of difference treated oppressively" (Ramsay, 2014, p. 453). For example, a low-income mother of color will have more and different parenting stressors than a low-income white mother.

Application of CRT and Intersectionality to this study. In 2021, Patricia Hill Collins and her colleagues published *Intersectionality as a Critical Social Theory*, pulling from the broad scope of scholarly use of intersectionality to establish four "guiding premises" of an intersectional project: 1) race, class, gender, sexuality, nationality, ethnicity, ability, age, and similar markers of power are interdependent and mutually construct one another; 2) intersecting power relations produce complex, interdependent social inequalities; 3) the social location of individuals and groups within intersecting power relations shapes their experiences within and perspectives on the social world; and 4) solving social problems within a given local, regional, national, or global context requires intersectional analyses" (p.694). These premises are present in this study, which intentionally recruited for, represented, and amplified minoritized voices with various and complex intersecting identities.

The qualitative nature of this study lends itself to intersectional grounding; footing within the framework of intersectionality supports this study's goal of providing a rounded picture of

the experiences of parents of color navigating as series of concurrent challenges unprecedented in modern history. Further, CRT and intersectionality support the need for this study because their tenets are grounded in the premise that race is woven into every fabric of life and is experienced and expressed differently depending on individual positionality. This study is responsive to the theoretical frameworks in that it takes a qualitative, participant-led approach by allowing interviewees to express and define their own complex experiences through narrative response. The participants themselves define their own experiences with respect to navigation of racial tensions for themselves and as parents. The analysis of the interview transcripts, rooted in CRT and intersectionality theoretical frameworks, focuses on highlighting and amplifying minoritized voices, placing the participants at the center of their own stories.

Framework and Application: Microaggressions

In the groundbreaking work *Racial Microaggression in Everyday Life: Implications for Clinical Practice,* scholars Sue & Capodilupo et al. note that the term was first coined in 1970 (Pierce, Carew, Pierce-Gonzalez, & Willis, 1978, p. 66) and evolved to refer to the sort of brief, everyday incidences and messages that denigrate or devalue people because of their membership in a racial group (Sue et al, 2007). There are three forms of microaggression: 1) microassault: "a blatant verbal, nonverbal, or environmental attack intended to convey discriminatory and biased sentiments;" 2) microinsult: "unintentional behaviors or verbal comments that convey rudeness or insensitivity or demean a person's" identities; and 3) microinvalidation: "verbal comments or behaviors that exclude, negate, or dismiss the psychological thoughts, feelings, or experiential reality of the target group" (Torino, et al., 2018, p. 4). Various studies have explored the negative impacts of microaggressions on individuals' health among racially minoritized populations (Sue, 2021; Sue et al., 2020; Wong, et al., 2014). Prior research has also explored sex-based

microaggressions (e.g., Capodilupo et al., 2010) and microaggressions against the LGBTQ

(lesbian, gay, bisexual, transgender, queer/questioning) population (Nadal, 2010). For LGBTQ

people, heterosexist and transphobic discrimination have continued through interpersonal

interactions extending from overt expressions, otherwise known as macroaggressive (e.g.,

bullying, hate crimes, blaming the community for disease) to more subtle forms of

discrimination (Nadal, 2018). In an article examining hundreds of qualitative and quantitative

studies over the decades, Nadal (2018) found that LGBTQ individuals who experienced

microaggressions also reported experiencing various negative mental and physical health

conditions such as depression, low self-esteem, anxiety, and trauma.

In addition, limited but emerging research explores the concept of intersectional

microaggressions: the forms of discrimination that may be influenced by more than one identity

(e.g., race, gender, sexual identity, religion, etc.) (Nadal, 2015). Research thus far supports the

conclusion that intersecting identities influence the experiences of microaggressions through the

manifestation of oppression in relation to singular identity, such as racial microaggressions or

sexual identity microaggressions (Torino, et al., 2018). Microaggression theory provides a lens

for exploring how small, interwoven indignities of everyday life directed at minoritized

populations impact various factors of wellbeing as well as influence the expectations and

assumptions of individuals.

Application of Microaggression Theory to this research. The need for inclusion of

microaggressions theory as a framework in this study arose responsively from the results of

participant interviews in this research. Though the researcher did not anticipate the need for

application of the microaggression framework, the prominence of microaggressions as a

conceptualized theme amongst interviews made clear that use of the framework would benefit

the analysis. Microaggressions theory provides a singular frame for a series of subtle yet impactful phenomena that minoritized communities face. Prior research has discussed the need for and construction of a critical and intersectional model when exploring microaggressions in research, emphasizing "the important interconnections among of various microaggression elements, such as perpetration (relationship, role, power, method), contexts (intimate settings, institutions, institutional microclimates, sociopolitical contexts), and responses (engagement, disengagement)" (Vacarro & Koob, 2019, p. 1338.) Here, the research approaches microaggressions as defined in previous research through nine categories: 1) assumptions that a person of color is not a true American, 2) assumptions of lesser intelligence, 3) comments that convey colorblindness or denial of the importance of race, 4) assumptions of criminality or dangerousness, 5) denials of individual racism, 6) promotion of the myth of meritocracy, 7) assumptions that one's cultural background and communication styles are pathological, 8) treatment as a second-class citizen, and 9) endurance of environmental messages of being unwelcome or devalued (Sue et al., 2020). Analysis of participant responses using the microaggression framework promoted full capture of meaning in narratives, ensuring that small but significant influences in participant perception of race/racism navigation were fully accounted for.

Framework & Application: Social Support Theory

The concept of social support has been described as "support accessible to an individual through social ties to other individuals, groups, and the larger community" (Lin et al., 1979). Though the literature contains no singular definition for the term "social support" (Pearson, 1986), a prior collection of research summarized social support as: "(a) an interactive process in which (b) particular actions or behaviors (c) can have a positive effect on an individual's social,

psychological, or physical wellbeing" (O'Reilly, 1988, p.863). In foundational research by Cohen & Syme (1985), social support was found to operate in relation to stress in two central ways: 1) support as a main effect, which there is a "beneficial effect of social support" on the "overall well-being" because "it provides positive affect, a sense of predictability and stability in one's life situation," and 2) support as a stress buffer in that (a) "support may intervene between the stressful event (or expectation of that event) and a stress reaction by attenuating or preventing a stress appraisal response," and (b) "adequate support may intervene between the experience of stress and the onset of the pathological outcome by reducing or eliminating the stress reaction or by directly influencing physiological processes" (p. 311 &312).

A lack of social support can have serious mental and physical health consequences. A well-known longitudinal project known as the "Alameda County Studies" showed that individuals who did not have ties to others, both male and female, were 1.9-3 times more likely to die from cancer, heart disease, cerebral vascular disease, and various other ailments over a nine-year period as compared to individuals with significant social support (Berkman, 1995). Inadequate social support has also been linked to depression (Paykel, 1994), seasonal mood disorders (Michalak et al., 2003), and negative responses to dysthymia treatment (Oxman & Hull, 2001). Higher levels of social support have the opposite effect; for example, research has shown it to be an important factor in decreasing functional impairment in individuals with depression (e.g., Travis et al., 2004). For parents, social support can enhance psychological well-being despite inordinate parenting stress (Park, 2020). In fact, prior research has shown social is proven to be good intermediary between parenting stress and life satisfaction (Park, 2020).

When exploring experiences of social support and the way social support functions in relation to stress, it is important to recognize the influence of intersectionality through identity-

influenced family histories and/or the evolution of cultural norms necessarily impact perceived and received social support. Social support sources, expectations surrounding social support and how social support is received, perceived, and provided vary across individual intersectional identities. Though the COVID-19 pandemic changed the landscape of social support for nearly everyone, each community and individual experienced a unique impact due to variance in norms, needs, and expectations. For example, there are spaces of social support unique to communities of color that may be a particular and unique loss to such communities during a shutdown of public spaces, generating losses not equally experienced by white counterparts. For example, in *Cutting Along the Color Line*, Dr. Quincy Mills describes the importance of Black barber shop as "the public intimacy of grooming renders barber shops a private space in the public sphere for Black men" (2013, p. 7). What started as a necessary skill for Black slaves serving as valets to barber their white masters became one of the few spaces for Black people to earn a living once in free spaces became a beacon for support and mobilization (Balls-Berry et al., 2015). For Black communities, barber shops, beauty salons and churches have historically been a huge part of communal social support (Mills, 2013). Former President Barack Obama stated, in describing racism induced anger in Black communities, "That anger may not get expressed in public. But it does find voice in the barbershop or the beauty shop or at the kitchen table" (Andrews, 2008, p. 2), which reflects the safe-space role of barber shops and beauty shops in Black communities.

Like Black communities, social support within Latinx communities has been tied to extended family, social capital, and faith (Liou et al., 2018). Cultural or social capital is the resource characterized by norms of reciprocity and social trust (Heaney & Isreal, 2008). Its process of thoughts and actions of others influences on social interaction (Berkman et al., 2000.) Family, friends, and partners have been identified as particularly impactful within Latinx

communities in buffering stress (Ginzburg et al., 2021). As with Black communities, religious institutions are generally integral to support systems within Latinx communities, particularly the Catholic churches (Lee et al., 2018; Liou et al., 2018). With the closure of churches, some people, particularly migrant workers, have turned to prayer meetings or home bible study for religious support during COVID-19 (Kanamori et al., 2021). For Latinx parents, whose social support systems may be especially heavily reliant on community resources for instrumental food and financial support through the pandemic (Clawson et al., 2021), the instrumental support of family and friends was critical during COVID-19 shutdowns as formerly relied-upon systems became unavailable (Szabo, 2021). There is evidence to suggest that grandparents, for example, have been integral support in child rearing during school closure during for Latinx parents (Szabo, 2021). However, the increased reliance on family and friends for instrumental support was complicated by the nature of the pandemic: intergenerational caregiving also meant increased risk of viral spread to elders that may be more vulnerable to severe COVID-19 illness and death (CDC, 2021).

In Asian American communities, cultural expectations influence what social support for coping with stress looks like, and it can differ significantly from the Western model of social support transaction. Though Asian American communities are diverse and their experiences with social support cannot be reduced to a 'one-size-fits-all' conceptualization, prior research indicates there is evidence of some cultural trends. For example, Asian American communities have been found to prioritize forms of social support that do not risk disturbing relationships, inflicting worries, or creating embarrassment (often referred to as the concept of "saving face") (Kim et al., 2008). Thus, social support in Asian American communities may be utilized without directly disclosing and discussing problems (Kim et al., 2008). For example, an Asian American

parent may talk to their primary care provider about a physical ailment, like a headache, instead of discussing the stress that is impacting the physical or creating they physical ailment.

In addition to cultural factors, research has shown that social support experiences are impacted by multiple intersecting identities such as age, gender identity, social economic, race/ethnicity, and sexual orientation (Frost et al., 2016; Caetano et al., 2013.) Men, women, and non-binary people may receive, seek, and expect social support in different ways. For example, at least one study has suggested that women are more active in initiating support relationships, and men are more open to support from a woman than from another man – such gender differences impact both perceived and received social support and the role of social support in an individual's life (Szell & Thurner, 2013). Similarly, findings from another study show that older men are less likely to initial social support and older women report less perceived social support (Caetano et al., 2013). Lesbian and bisexual women may typically rely primarily on their families, whereas gay and bisexual men may be more likely to rely primarily on other chosen family of fellow lesbian, gay and bisexual individuals (Frost et al., 2016). Over the past decade, there has been a decline in Latinx individuals within the US turning to religious institutions for social support due to generational and political shifts (Funk & Martinez, 2020) Therefore, the intersection of various identities can lead to unique social support systems for parents of color. Thus, it is possible that a Latinx queer parent may avoid support from religious institutions and lean on the support of their LGBTQI community, whereas a Latinx parent who is older or more recently migrated to the US may be more likely to turn to their religious institution for instrumental support (Lee et al., 2018).

In addition to the recent heightened racial tensions, the concurrent public health crisis of COVID-19 also impacted social support accessibility. Precautions determined necessary to curb

the spread of COVID-19 caused the closure of beauty salons and barber shops, as well as other community gathering spaces such as churches. Closures of these spaces had a profound negative emotional and practical impact on Black communities (Watkins et al., 2021; DeSouza et al., 2020). The closures were "uniquely taxing to the mental health of African Americans, particularly older African Americans, who must cope with American racism without physical access to the Black Church for the first time in history" (DeSouza et al., 2020, p.7). Parents of Asian descent faced a unique pandemic-related stressor: the sharp rise in racial and ethnic discrimination, by approximately 30% compared to pre-pandemic times, leading to a higher need for emotional support (Lee & Waters, 2021). All these various factors laid the landscape for how social support was expected, desired, given, and received for participants in this study.

Application of Social Support Theory to This Research. This study is grounded in social support theory and uses the stress-buffering hypothesis (Cohen & Syme, 1985) to ground the exploration of how the use of social support systems buffered (or, in some cases, failed to buffer) stress related to the heightened racial tensions and socio-political responses associated with the COVID-19 pandemic, with particular attention to the impact on parenting in relation to race and racism. In this study, the impact of social support was examined from four primary angles: 1) social support generally as a means of buffering stress, 2) perceptions of social support as genuine and the impact on efficacy of social support as a stress buffer, 3) social influence of the proverbial "village" (Berkman et al., 2000; Heaney & Israel, 2008) on parenting experiences and practices with respect to race, and 4) individual social lenses, access to resources, and their impact on parenting practices with respect to race. This research is grounded in an understanding that culture and available social resources impact both perceived and received support, as well as social support desires and expectations.

The Current Study

Although the COVID-19 pandemic has been particularly difficult for parents in general (Patrick, et al., 2020), parents of color faced an intersecting crisis: a profound rise in explicit racism and xenophobia (Blake, 2021; Berry et al., 2021) that led to and coincided with visible waves of resistance (Buchanan et al., 2020). The heightened race-based social tensions compounded strain on the already stretched social support for parents of school-aged children (Elder & Greene, 2021; Fortuna, et al., 2020). Despite the prevalence of media attention, there is limited existing information on the impact heightened racial strain had on parents of color, whose social resources were already weakened by COVID-19 and associated restrictions. To fill this gap, this study explores the following research questions:

1) What are Black, Latinx, and Asian American parents' experiences with race and racism during the rise in racial tensions temporally associated with the COVID-19 pandemic?

2) What are Black, Latinx, and Asian American parents' parenting practices related to race before and during the increase racial tensions temporally associated with the COVID-19 pandemic?

3) What are the experiences of Black, Latinx, and Asian American parents with respect to navigating the complexities of race relations with respect to their social support systems?

This qualitative study explored the experiences of heightened racism, parenting practice regarding to race, racism and power, as well as associated changes in social support, amongst 15 parents of color. This research considered the impact of the entire social support system and utilized social support theory to explore the unique experiences parents of color had associated with the heightened visibility of racial tensions by asking research participants to describe the changes that occurred in their social support systems because of or conjunctively with the

heightened racial tensions and political responses thereto accompanying the COVID-19 pandemic. This research also approached questioning and response review from a critical race theory and intersectional lens, recognizing and amplifying the full scope of participant voices.

Methods

Participants. All participants self-identified as an Asian American , Black, and/or Latinx parents of at least one school-aged child, defined for the purposes of this study as age a child attending Transitional Kindergarten through 12th grade during the 2019-2020 school year. Of the 15 participants, 5 identified as Asian/Asian American , 3 identified as Black, 3 identified as Latinx, and 4 identified as multiracial: 1 as Black & White, 1 as Black, Latinx, & White, 1 as Latinx & White, and 1 as Latinx & Indigenous. Twelve participants identified as female, 2 identified as male, and 1 identified as gender queer/transgender male. Two or the 15 participants identified as Lesbian, Gay, Bisexual, Transgender, Queer & Intersex (LGBTQI). The sample size of n=15 participants likely achieved theoretical saturation (Fugard & Potts, 2015). Please see Table 1 in Appendix D.

Inclusion criteria. The study used the following inclusion criteria for participation: (1) parent of at least one school-aged child as defined above, (2) individual coparents with a partner, ex-partner, parent, grandparent, aunt, uncle, sibling, or cousin, and (3) individual identifies as Black, Latinx, or/and Asian American . Multiracial parents who identify as Black, Latinx, or Asian American were included. In recognition of the different stressors and circumstances faced by single parents as opposed to parents in a coparenting relationship, participants in this study were limited to parents parenting within a coparenting relationship. Although interpreter services were offered, all interviews were conducted in English.

Recruitment. The researcher and identified community liaisons participated in the recruitment of participants (see Appendix C for the recruitment flyer utilized). There were three community liaisons who assisted with recruitment. Crystal Martinez, a community liaison, and social worker in the education field, distributed the recruitment flyer within school/parent networks in her community. She shared study information to potential participants, ultimately recruiting 3 participants for this study. Kendra Nickel-Nguy, a community liaison and volunteer with Girl Scouts of the USA, shared the recruitment flyer information within Girl Scout Leaders' networks and within local neighborhood social media networks (Facebook Groups). She recruited 4 participants for the study. Taimur Khan, a community liaison and social worker in the medical field, advertised the study within a local medical facility. He assisted in recruiting 1 participant. The researcher shared the recruitment flyer information at various local children's and parenting-based organizations and within local social media groups (e.g. Queer Parents of Color Facebook group), ultimately recruiting the remaining seven for this study. All potential participants called or emailed the researcher directly from the contact information that was printed in the recruitment flyer.

Classification as a Black, Latinx, or Asian American person was based on self-identification and included individuals who self-identified as mixed ethnicity. The researcher employed several strategies to ensure a ensure a diverse study sample. First, the sample size of 15 was divided evenly between recruited race identities: 5 Black parents, 5 Latinx parents, and 5 Asian American parents were interviewed. Second, the researcher aimed to recruit at least one identifying male participant from the Asian American , Black and Latinx community. Third, the researcher recruited for and identified participants with intersecting identities within the sample (e.g., membership in multiple ethnic groups, gender diversity, etc.). Participants were given an

appreciation gift of $30 in the form of a gift card to Amazon, Target or Walmart for sharing their experiences.

Informed Consent. Participants were provided with a consent statement that adhered to the University of Pennsylvania's IRB for review prior to being interviewed. Before interviews began participants verbally confirmed that they reviewed the study's consent statement. For confidentiality, all participant names were changed on transcripts and in this paper.

Institutional Review Board. The study was reviewed and approved by the University of Pennsylvania Institutional Review Board to assure compliance with Federal and University eligibility criteria for IRB review, exemption authorized by 45 CFR 46.104, category 2 (IRB Protocol: 851446).

Interviewer and Research Team. The interviews were conducted by the DSW candidate, who is a licensed clinical social worker, and identifies as a first-generation Asian American queer cis female parent. The researcher also identifies as a parent of two bi-racial pre-school-aged children (as defined for the purposes of this study above) and a married person coparenting within a same-sex marriage. To reduce researcher biases and provide an outside perspective in theme generation the interviews were coded and double coded by the research team. This team consisted of (1) DSW candidate, (2) a master's level social work professor who identifies as an Asian queer cis female parent of a school-aged child in a homosexual marriage, (3) a licensed clinical social worker who identifies as a Muslim Desi/Southeast Asian queer cis gender non-conforming male, and (4) an attorney with a master's degree in social policy who identifies as a queer Jewish cis female parent of bi-racial children. The research team met 2 times over a period of a month to discuss confidentiality regulations and findings to ensure the data analytic strategy was adhered to. The researcher also met 1 to 2 times individually with members

of the research team to provide clarification and support as needed over the 4-week period. Any questions or incongruencies that arose were resolved through clarification and/or consensus. Only the lead researcher (DSW candidate) had access to participant identifying information.

   Data Collection Procedures. In-depth semi-structured 60 to 90-minute-long video/audio interviews were conducted and recorded via Zoom utilizing the Interview Question Guide (see Appendix B for guide and the data analysis section regarding construction of interview questions). Recordings of each interview were stored on a password protected cloud-based storage platform. Participants were provided the opportunity to opt out of the video for a voice-only Zoom interview. Zoom's real-time transcription program and secondary transcription review were employed to ensure the accuracy of interview transcriptions. The lead researcher completed secondary review of transcripts by listening to the digital audio recording and reviewing the computer-generated transcript for accuracy while correcting any errors. The digital transcription data is password protected, deidentified, and only accessible to the research team. All transcription data was analyzed utilizing qualitative analysis platform Taguette (Rampin, 2021).

   Data Analysis. This study utilized thematic analysis ("TA") (Braun & Clarke, 2006; 2016; 2021) informed by sensitizing concepts derived from the grounded frameworks. Sensitizing concepts are "interpretive devices [used] as a starting point for a qualitative study" (Bowen, 2006, p. 14). This research was informed by the sensitizing concepts of critical race theory, intersectionality, microaggressions, and social support theory in the analysis of the qualitative data. All members of the research team coded responses in a manner sensitized to the ordinariness of racism and the social systems which sustain and promote inequity favoring white

individuals and communities, while assessing how new policies and reactions to increased racial

tensions changed (or did not change) the social and cultural landscape.

Thematic analysis was selected as the analytic approach for this study because it is a

widely accepted and utilized technique for identifying, analyzing, and interpreting patterns of

meaning (e.g., themes) in qualitative studies (Braun & Clarke, 2016, 2021). The use of TA

allowed the research team to identify common threads extending across the set of interviews

(Vaismoradi et al., 2013). The research team followed the step-by-step approach to qualitative

data analysis that comprises TA.

First, the lead researcher familiarized herself with the data presented in the interview by

reading through the transcription text and taking initial notes. Second, initial codes were

generated by the primary researcher using a sample size of 5 randomly selected transcripts.

Coding involved highlighting text, generally phrases and sentences, bearing relation to the

research questions. During the initial coding phase, the research team thoroughly reviewed

randomly assigned interview transcripts and coded data line-by-line. Because the research was

guided by specific research questions and sensitized by specific concepts as discussed above, a

theoretical coding/open coding process was used to generate initial codes (Vaismoradi et al.,

2013). This means that the codes were developed and modified in an iterative process as coding

progressed through the various transcripts. Third, the research team used these data to generate

themes and review themes. Generating themes involved forming related codes into themes;

themes being broader than codes. The research team communicated identified themes in a shared

document and conferred via telephone individually with the researcher to discuss overlaps and

minimize coder divergences. The researcher resolved divergences through clarification and

consensus with each coder. Fourth, the research team met regularly to review the themes to

ensure useful and accurate representation of the data. Fifth, the research team defined and named themes. Defining themes helps determine how to understand the data and aids the researcher in formulating the exact meanings of themes. Lastly, the researcher wrote the results of data analyses (findings).

Themes were named and defined using a thematic map: a visual presentation of themes, codes, and their relationships, including a detailed description of each theme, its criteria, examples and counter examples, and other pertinent details (Vaismoradi et al., 2013). In producing a final study from the data, the researcher drafted an introduction to establish each research question, aim and approach, and a conclusion explaining the main takeaways and highlights how the analysis has answered the research questions (Braun & Clarke, 2006; 2016; 2021). In a departure from traditional reflexive thematic analysis (Byrne, 2021), thirty-three percent of the transcripts were double coded to ensure consistency amongst coders and to ensure that all themes were captured and conceptualized. All data were analyzed using the Taguette platform, which assisted the research team by grouping common topics and issues, and by categorizing them under labels representing themes (Rampin, 2021).

Researcher Positionality. The researcher and primary interviewer acknowledges her own positionality as a first-generation queer Asian American mother of young children (pre-school-aged as defined for the purposes of this study and currently school-aged and preschool-aged). The researcher is a first-generation American from a refugee family and experienced a single/no parent upbringing in government housing. The researcher is in a homosexual marriage and is coparenting within the marriage. The researcher recognizes these demographic qualities positions her as an insider in some intersecting identities and outsider in others. The researcher

acknowledges that her positionality may impact her own interview style and interviewee's responses to the interview questions.

Results

Participant demographic data have been described previously in Research Paper 1 and are in Table 3, Appendix D. All participants reported that the racial tensions were stressful. A total of four themes were revealed from the data: First, a lifetime of discrimination in form of microaggressions set the backdrop for the experience of coping with heightened racial tensions. A subtheme of location and representation as central factors contextualizing and influencing the reality of lived experiences was conceptualized as well, as several participants reflected on how their physical location (including changes to physical location during the COVID-19 pandemic) impacted their lived interactions with racial tensions. Second, participant experiences of discrimination amongst and between various minoritized populations was a prominent focus. Third, experiences of social support relationships during heightened racial tensions were important yet varied. Fourth, the combination of parents' background with microaggressions and current sense of heightened racial tensions impacted parenting practices.

A Lifetime of Racism in the Form of Microaggressions. Participants reflected on how their pre-pandemic experiences with microaggressions oriented them to the world and how that orientation impacted their navigation through the changes in prominence of overt racism that coincided with the early 2020s. While participants had ample experience with micro-aggressive racism, they broadly reported visceral reactions (whether externally expressed or not) to the boldness and visibility of racism during the COVID-19 pandemic period.

Participant responses were unified with respect to their experiences during the early 2020s rise in racial tensions by a common thread: though racism was more visible, it was nothing

new. It was an unveiling of what always lied just beneath the surface. Though participants generally did not report pre-2020s overtly racist victimization, every participant reported experiencing some level of consistent race-based microaggressions that created their understanding of reality with respect to race, as well as their understanding of their own position within their community and the larger society.

As participants reflected on their lives and interactions with racial oppression, the primary theme that arose was a lifetime of microaggressions: small ways in which they were treated as "less than" and/or "targets" because of their race, gender identity and/or sexual identity. The experiences of microaggressions – particularly for women of color – was consistently described as a backdrop to life. Simone, a Black woman, shared experiences of encounters in which she was assumed to be unintelligent, and situations in which she had to endure environmental messages of being unwelcome or devalued. She recalled,

> "While my experiences of being Black in America weren't, I guess what the norm would seem as something major . . . Microaggressions that like play on your psyche and make you feel less than and make you feel like you don't belong here." She recalled her experiences as a student at UCLA, where she encountered comments such as "How did you get here? You must run track. You must . . . like it must be something, you couldn't have just gotten here like on academics. And again. It's not kind of blatant like all 'this nigger is here.' It's nothing like that. But it made me feel like damn, do I not deserve to be here? Am I not supposed to be here?"

Evelyn, a Latinx woman in the field of engineering, recalled frequent encounters with gender-based microaggressions. She recalled that statements like "who is she sleeping with to win that bid" made her feel that as a woman, her merits and talents were minimized or dismissed.

Several participants told stories of routine micro-aggressive experiences; comments that convey colorblindness or denial of the importance of race, or dismissive or demanding statements such as "you all look alike," which is commonly heard in the Asian American community. The assumption that a person of color is not a true American and being told to "only speak English" was experienced as hurtful by all participants who described this particular microaggression, as were insinuations of criminality. For example, Simone recounted that when she was buying a house, she was accused by the seller of "put[ting] down cash on the house like drug money."

The experience of being treated like a second class-citizen was also widely expressed among participants in this sample. Olivia, a Black queer woman, reported that not being "recognized as having a family" because of her LGBTQI identity felt dismissive of her life and her family's existence. As is evidenced by the prevalence of microaggressions in participant discussion, racism (including systemic racism) is often experienced in quiet and slowly crushing ways, rather than in loud noticeable ways. For example, Dana an Asian American woman, shares a story,

> "My daughter was going to kindergarten, and they had me fill out a form on languages. 'Do you speak a different language at home?' When I checked yes, they referred my daughter to a speech therapist. And so, I was like well why would you refer her to that when both myself and my husband speaks English. I was like the only thing you asked me was 'Does any of the parents speak a different language?'. . . How is this going to affect my daughter, these stereotypes."

Visceral reactions to racial tensions were reported universally across all study participants. For Adam, an Asian American man, the rise in hate crimes in the early 2020s across

America created a heightened awareness of his own vulnerability and negatively impacted his mental health. Adam expressed primarily reacting with anger:

> "anger - just pure out anger. To the point I'd lay down at night and seethe . . . lose sleep over it because I was so angry my heart rate would go up . . . it [was] just really infuriating about the way that you know Asians are treated in this country. Especially after this and no help to the former presidential administration . . . seeing all these lawmakers like turn down you know or vote against like legislation that's supposed to protect Asians . . . it's just infuriating like where's this world, what is this country coming into."

Many participants discussed a physiological manifestation (e.g., tears, sadness, anger) of the impact racism has had on their lives, particularly as they developed a sense of powerlessness in their group membership. The uptick in racial tensions in the early 2020s "made me rethink my whole entire life," stated Olivia, a Black queer woman, as she recounted the ways in which racism has impacted her mental health.

Other participants shared trauma responses to racial tensions. For Larry, the trauma manifested as dissociation. He reflected that the heightened racial tension "has affected me in that way, and I already had detached, detachment and disorganized issues." Penelope, an Asian American woman explained,

> "as Asian people we tried to like ignore things. For me personally, like I just tried it because people have always said things to me . . . I just tried to ignore it (same as above – what is 'it'?) a lot of times and this is how I cope with it. Because if I think about it too much it just really just causes lots of stress and sadness."

While only one participant expressed a lack of change in personal encounters and experiences of oppression attributable to recently heightened racial tensions, she articulated a clear recognition of and disturbance by the broader increased visibility of accepted oppression in society. Simone, a Black woman, explained:

"We're able to see a lot more because of social media. Everything is filmed. Everything is immediate, and so it's on Front Street for everybody to see. No, it's not just within our own communities, within our families, within our circles. within our shared experiences, cause . . . if it's not your experience then you wouldn't know it even existed. You hear stories about it but it's not really believable because you're like that doesn't happen. But when you witness it, and when you feel it and when you know people personally, then it's a shared experience . . . Has the conversation change for people of color? I don't think they've changed. Has the conversation changed for people who may not have gone through such things? Maybe, I think it's more of a discussion.... because it cannot be ignored. It's because of social media because of how immediate everything is, and how visible everything is."

All Asian/Asian American participants reported a particularly noticeable change in their own experiences of racism beginning in 2020; at the same time, each contextualized the changes against their prior lived experiences. Participants reported moving from being treated as invisible in society and falling outside of "Black or White" (Sue, et al., 2020) racial rhetoric, to being increasingly singled out for their Asian identity due to purported associations with COVID-19. For Adam, an Asian American man, experiences of overt expressions of oppression overlayed against a backdrop of microaggressions causing a safety/fear response:

"I hide behind a mask because of my ethnicity and the stuff that you're seeing on the news on TV . . . it's not easy for an Asian person, especially with President Trump calling everything the flu the kung flu, the China virus . . . I don't feel safe in society and seeing all the racial tension and the anti-Asian violence happening all over the United States . . . I've had side eyes. I've had people walk on the other side of the aisle purposefully like you're trying to avoid walking down the aisle at Safeway or purposely giving me all this leeway to walk across or walk on the sidewalk. I'm very aware of how I was perceived."

The increased awareness of limited social capital for Asian and Asian American participants began due to the well-publicized association of China with the COVID-19 virus. President Donald Trump calling COVID-19 the "Kung Flu" or "China Flu" fueled xenophobia and left some participants feeling on edge. Asian and Asian American participants expressed higher incidents of racist encounters over the last two years and perceived this increase was due to COVID-19 pandemic originating from China. Parents also reported, however, that the shift in attention toward anti-Asian racism was simply new icing on an old cake. As Beth, an Asian American woman explained,

"Asians[s], we have faced so many racial discriminations [in the United States,] down to the first wave of Asian[s] coming, Chinese. The second wave of Asian[s] coming in, Japanese. They have faced so much racial tension. And then you have the third wave, which is a lot of refugees. And we have, they have face racial discrimination. Now each discrimination is different."

While most participants observed that COVID-19 appeared to provide a new justification for anti-Asian racism and exacerbated its visibility, all participants in this study did express that at

least to some extent, a lifetime of microaggressions had already left them with the knowledge that their social capital was at least somewhat limited.

Location and Representation are Integral Parts of Lived Experiences for Parents of Color. As part of participant reflections on microaggressive incidents and how those incidents shaped their experiences and perceptions, participants recognized the significance of their physical location and immediate surroundings as central to their experiences. Penelope, an Asian American woman who grew up in Arkansas and moved during the pandemic to Washington State, had a unique opportunity to experience the importance of location with respect to experiences of racism. She reported,

> "I was like the only Asian person like pretty much anywhere [in Arkansas], like everywhere I go just me or my brother. So, I got used to people saying things, and so it made me not want to talk to people, so I just avoid them . . . People here in Washington are a lot more diverse and it's easier . . . because in Arkansas we were mixed race couple . . . with Trump and everything it was a lot of people were more openly racist in Arkansas."

This impact of location was also felt and recognized by participants who self-identified as living in a "safe' area, which appeared to buffer or protect against both overt acts of racism and microaggressions. Anne, an Asian American woman who grew up in Sacramento, California, noted, "there's a large amount of Asians in the Sacramento area. I think I've always had that benefit of having, being a little bit insulated." Nonetheless, Anne was very aware that there was a broader national rise in overt racism, especially with respect to anti-Asian hate crimes:

"the world events make you a little bit hyperaware that there are people that will single

you out and even unprovoked can be cruel and do things out of the norm. So, it did, it

does put me on guard more in those take a toll. But again, I have to be more careful being

out in the world and running day to day errands."

For Rose, a Latinx woman raising a Black daughter and moved from New Jersey who

Texas during the COVID-19 pandemic, worries about racism in her new state were top of mind.

She reported worrying about her daughter and for her own safety when traveling outside of the

community in which she resides:

"living here in Texas, especially in the church, I hate to say that people don't see how

something can be viewed as racist you know or some comments . . . My daughter in pre-

K was called a monkey, in pre-K . . . [traveling] gets a little fearful for me . . . when our

car broke down in Alabama literally right past the confederate flag and I was just like oh

God I'm so terrified."

For parents in this sample with diverse and intersecting identities, geographic location influenced

their sense of safety substantially. Participants demonstrated a very real awareness that living or

even being in certain areas can be physically dangerous and psychologically damaging, both due

to targeted hate crimes and increased acceptability of microaggressions and everyday racism,

described by one participant as "death by millions of cuts."

Recognition of Individual Positionality and Tensions Between Minoritized Groups.

An unexpected theme that emerged from these data was the impact of tensions between various

minoritized communities. Participants the importance of recognizing their own complex

positions in a semi-hierarchical web of other minoritized communities. Additionally, particularly

amongst female, genderqueer, mixed-race, and non-heterosexual participants, intersecting identities were central to lived experience in coping with racial tensions both before and within the early 2020s.

Participants in this study consistently expressed a recognition that they interact with their various racial, sexual, educational, gender and socioeconomic identities with respect to external relationships, particularly the experiences of being seen as "other" and learning to treat and see people with different identities as "other." Participants explored their constant awareness of their position as a member of an ethnic minority group. Simone, a Black woman, explained,

> "Race is an issue for me because of my skin color and because of my ethnicity. I'm never able to forget that I'm not a non-minority, even though we are not the minority. But that's not something that I forget. I go to sleep, knowing that I'm black, and what society sees is my place, and I wake up knowing that. And my daughter leaves a house, my husband leaves the house and I hope they come back."

Many participants reported reflecting on their ideas about their own membership in a minoritized community and their ideas about other minoritized communities in the early 2020s. For example, Diego, a Latinx man who has had limited but negative interaction with law enforcement, shared how reflection on his own experiences of racism helped him relate to the plight of Black males with respect to racism in law enforcement despite his differing positionality. After the murder of George Floyd and the associated rise in Black Lives Matter protests, he shared about his own

> "bad experience that I had with cops . . . I thought 'he's going to shoot me. What the hell!' I did . . . You know, [that] was the first time that it made me feel that way and I

understand a lot of Black people right on that. If they treat me this way, I can only imagine how they can treat African Americans or other race[s]."

Others reported the opposite: noticing increasing divides between and within minoritized groups as tensions rose. Many participants reported perceiving their broader community as increasingly fragmented and the feeling of divide amongst and between different communities of color within the US. Two participants felt the Black Lives Matters movement was not sufficiently inclusive of other racial groups and the transgender population. For Larry, a Black genderqueer transgender man, "even with Black Lives Matter, it was immediately evident that folxs of trans experience were not included [in] Black Lives Matter." One participant - a Latinx, Native American and White cis woman - said it "felt like Indigenous lives didn't have any matter . . . It put a lot of racial divides . . . Whereas before my kids will say 'I'm a person of color' to now it's like no, 'I'm an Indigenous person.'"

These tensions observed by participants between different minoritized communities appeared dominant over any sense of unity across groups. In particular, all, Asian American participants expressed that they experienced discrimination from other minoritized groups. As one reflected, "a lot of people blame this whole pandemic on Asians. That Asians were the one who cause this pandemic and it caused a lot of unnecessary harm to Asians." For Beth, an Asian American woman, the media fueled the racial divide substantially. She shared that

"Asian race blamed the Black race because the media kept showing most attacks were being done on Asians were [perpetrated by] Black [people]. So, a lot of the media, showing where a lot of the Black race attacking the Asian race and specifically elderly Asians. And so, it caused a lot of tension in the Asian race to feel some sort of animosity towards the Black race because that's what the media kept showing. Media kept pushing

Blacks attacking Asians, Blacks attacking Asians, Black attacking [Asians,] and so

there's a lot of animosity among the Asian community towards Black [people]."

Although the social/political movements that occurred during the pandemic raised

awareness of various racial tensions within and between minoritized communities, almost all

participants were quick to report that the phenomenon of "othering others" is not new. In

general, they viewed discriminatory practices of 'othering' constantly and have felt it long before

2020. Rose, a Latinx woman, reported "having even a Black child and you're not Black, it's hard

in that aspect . . . One person said to me, 'What do your people know about raising our people?'"

Diego, discussed the phenomenon of othering people within and amongst his own Latinx

community, stated, "honestly, I think Latinos and Black/African Americans, we create these bad

[images]. So, it's a lot about bad apples in those two races and police just afraid. Just afraid to.

We bad . . . I think we created that."

Still, others felt that heightened visibility of the struggles different communities of color

faced created an opportunity for more unity between communities of color. Dana, an Asian

American woman, felt an increased sense and importance of unity upon becoming more aware

that there are experiences in which we all (people of color) become the 'othered.' She stated,

"we should have been standing up together to fight this because now the shift has gone

from seeing African-Americans being attacked to the shift going to seeing, like all the

Asian people be attack[ed] . . . If we would have been fighting for this as a whole, this

might have been a little bit better."

While participants identified the importance of their positionality as a member of a

minoritized racial group, they also frequently pointed out the influence of their intersecting

identities. Some participants pointed out the complexities of positionality that stemmed from their own personal appearances. While most participants in this study expressed that the world sees them as Black, Latinx, Asian, Asian American , and/or biracial, others discussed an ability to "pass." Halle, Latinx and White woman, explained that "most people see me as white . . . I look white." She acknowledged that her appearance impacts her interactions with others. Rose, a Latinx woman, discussed similar sentiments with respect to being seen and treated as "white." For both Rose and Halle, experiences with racism often occur when people assume they are 'white' and therefore others feel freer to express racist sentiments. Halle recalled,

> "I've been around some racist people . . . who do not like Hispanics and they will just keep, they will just make racist comments." Although both women expressed that 'passing' complicates line walked with their racial identity of Latinx. "I just kind of look at them and . . . like that's not something that's okay to say regardless."

Participants who reported higher incomes reflected on how having financial resources positioned them to avoid some of the financial and practical stressors other parents of color discussed, particularly for one parent who was able to private school their children when the pandemic hit. While within the sample of this study educational status was not tied to individual economic position, participants acknowledged that access to resources was so tied. Evelyn reflected, "I'm very fortunate, because my husband does work for a hospital and he has a very good [insurance] plan, where we were able to have several meetings with health care providers, mental health care providers so we're very fortunate in that." In general, participants expressed an understanding that socioeconomic positionality significantly impacted their COVID-19 experiences access to basic services such as health and mental health care.

The recognition of complex positionality and conflict between and amongst minoritized groups was express amongst female, gender-diverse, and queer participants more so than others. *All* female participants reported their intersecting gender identity compounded experiences of racial oppression, creating a lifetime of microaggressions that contextualize their expectations with respect to their own treatment within and outside their race group. For example, one participant reported that experiences of microaggressions occurring at institutional gateways have had a lifelong impact that contextualizes her reactive behavior as racial tensions rise (e.g., overperforming, acceptance of oppressive behavior, etc.). Evelyn, a Latinx woman, recalled that,

> "In college I was one of two women in the program, in an engineering program. You know that you throw that aspect in too, then you really feel self-conscious, then you really feel like you have to prove others wrong that their mentality of you 'can't be successful, you can't do this.' I had a counselor in high school tell me 'Oh, you know you're Mexican, you can't be an engineer.'"

Evelyn's identity as a Latinx person and as a woman could not be separated: they compounded each other in her lived experiences.

For participants with intersecting LGBTQI identities, experiences of external oppression were compounded by intrafamilial oppression. For example, Olivia, a Black queer woman, reported struggling with being recognized by her wife's family, creating tensions: "my wife is pretty much... half and half. She was [with] her mom and her uncle.... She is the only one that can take care of them mainly because they don't recognize her as having a family, so if she has no family there's no reason why she can take care of them." Similarly, for Larry, a Black genderqueer trans man, interactions with the world changed after he started transitioning, "I had an incident right prior to this, where I was pulled over driving while Black. I thought because I'm masculine

presenting, for a simple traffic stop. I had guns pulled on me." He discussed other incidents of interactions doing everyday things that were impacted by public perception of him as a queer/masculine Black person. He explained, "It doesn't matter. I'm a Black trans man. It doesn't matter that I hold two degrees in women's studies and several certificates . . . There was no way to get around it or make room for it."

The Uptick in Racial Tensions Temporally Associated with the COVID-19 Pandemic Induced Reflection upon and Changes to Participant Social Support Resources and Coping. Participants consistently reported that the uptick in racial tensions that were temporally associated with the COVID-19 pandemic prompted them to reflect upon their social support network, and the ways in which they sought support from specific relationships within that network. While some reported improvements (e.g., more open conversations, reckoning with past microaggressions), others reported fissures and, in some cases, even terminations of relationships. This theme links to the theme of microaggressions in that participants' previous experiences with "quiet racism" created a baseline of frustration with which they encountered more overt forms of racism. . Contrasting lived experiences with family and peers of a different race (particularly white family and peers), or with people who have different gender/sexual orientations, prompted individuals to engage with their support networks to process and understand racial tensions differently, leading to new understandings, new conflicts, and various experiences in-between.

Some participants reported that the increased visibility of racial tensions opened a door to more open communication regarding the impact of racism on individuals and groups. Olivia, a Black queer woman explained that while she experienced past microaggressions,

"people I call my close friends . . . I am very lucky in the fact that, like they have come to me and say I'm sorry I didn't have to even say anything to them, like they recognize it that was what they were doing, and that they will say to me, you know I'm really sorry, I had no idea. I didn't mean to offend you or anything like that . . . I was really nervous about having those kinds of conversations because it's really not easy. The easy thing to do is just kind of fade out and like you know, I'm probably going to offend them anyways and just not be part of their lives anymore."

For some participants, acknowledgement and discussion with trusted support network members facilitated exchange of emotional support and were experienced as healing. .

Indeed, several participants reported increases in both perceived and received social support when they became vocal about their concerns and struggles related to racism. Ann, an Asian American woman, noted,

"trusted friends, neighbors - I think some of them were surprised to hear that, as an Asian female, that I am hyper aware of my ethnicity. That I did have consider my day at day actions a little bit differently because of that heightened tension on the Asian... [friends] are more support sort of once they were made aware of that."

Nearly all interviewees reported re-orienting whom they looked to for social support, building stronger connections with some while, on the other hand, recognizing connections that were not serving them. Dana, an Asian American woman, recalled that some of her social connections "didn't think there was anything wrong with what was going on. But I think the ones that did understand, we had a better bottom - like our bond became greater. For us . . . to be able to see and know that this isn't the life that we want for our children."

A continual recognition amongst participants was that individual and unique lived experiences influenced perceptions of reality. For Evelyn, this phenomenon led to fractures and changes in one of her closest relationships: her husband. As a Latinx woman married to a White male, Evelyn discussed increased strain with her husband and improvement in her relationship with her teenage daughter, which she attributed primarily to the racial/political tension.

> "My daughter . . . it brought us closer. We were able to discuss and talk about, you know our experiences . . . but with my husband, I think he still doesn't see it. I'll try to give examples of why there is racial conflict or why people of color are just less tolerant of putting up with it anymore."

For Grace, a Black, Latinx, & white woman, racial tensions halted her relationship with part of her extended family: "I rarely talked to my white side of my family. They just . . . [are] in support of the police officer that caused him (George Floyd) to die. They were more on his side, and I had to remove myself from them because they became really toxic." Many participants reported that friends and family were "arguing," and "heated conversations" took place on Facebook and other social media platforms. Many "lost relationships" due to conflicting views on race and racism.

Two participants discussed how in some instances, attempts from social connections to improve social support felt performative, rather than genuine or authentic. They perceived that their social connections were more interested in looking as though they cared about racial injustice than combatting racial injustice. Olivia recalled,

> "Many white people reached out to me like, 'What can I do for you?' And that felt really weird to me because . . . I was Black . . . You're trying to help me and just telling them,

you know it's more than just a skin thing. You have to look at where people are coming from. You have to really look at people it's not just you know that you're not colorblind anymore, it's seeing like because you have not had these opportunities . . . you don't just walk up to the most comfortable Black person that you have in your life and say, 'how can I help you?'"

For Larry, a Black parent, social support that felt performative prompted him to limit the interactions with his social support network.

"I'm realizing now that I'm really not having a lot of conversations around any of this with the majority of my friends, because I have to leave a part of myself out. I feel, often in order to do that . . . made me really take stock of some relationships and to admit when something was superficial . . . Really, and so it checked some relationships, I think it got rid of some extra weight."

Two participants discussed expansions of their social support networks through engagement in activism, which also functioned as a coping mechanism. Olivia, a Black queer woman, explained,

"I couldn't stand by and wait for me to be that mom that saying, 'But my son was so good.' . . . So, I'm like that could be my son next so easily . . . So, I went to that protest. I need to support those moms that are going through that because that's the worst nightmare, I mean for any mom... [for] your child to die. And to die so senselessly, to die because they have a cell phone in their hand."

For Simone, a Black woman, activism took the form of providing informational support to others by "creat[ing] a badge program [for Girl Scouts] that could be a starting point for conversations .

. . for the youth with adults to talk about injustice in society, and not just the Black Lives Matter movement."

Though reconfigurations of social support networks were widely reported among participants in this study, social support itself – whether received, perceived, or provided - served an important function in participants' lives.

Evolving from Family-of-Origin Parenting Approaches: Focusing on What is Close to Home.

Across the board, parents in this study experienced racism (both the micro-aggressive and explicit) as just part of living – something they experienced as children and that their own children would invariably experience. While participants reported various ways in which their own families of origin managed racism, nearly all participants reported that they did not anticipate meaningful change in racial tension in their lifetimes, and thus felt compelled to prepare their children for similar experiences. For Penelope, an Asian American woman with mixed white and Asian American children who reported that she "was like the only Asian person like pretty much anywhere" she went, minimizing racism's impact and accepting it as part of the fabric of life was expressed as less of an intentional choice and more of a default. She describes the ways in which traumatic encounters with racism impacted her parenting approach regarding race and racism:

> "I just tried to ignore it, because I mean, I don't feel like there's a lot that I can do about
> it . . . I tell my kids you know how I feel when people say things like that, and you know
> we talked about how they would feel if you know things like that happened to them . . .
> we have to be careful about the things that we say to other people and make sure you

know that we're not trying to offend anybody . . . I don't really cope; I think I just I don't

think or talked about it a lot with them."

Grace, a Black, Latinx, and white woman, expressed similar sentiments.

"Can you change people? No, all you can do is either remove yourself from the situation

or you know you can try and explain like your perspective on it, and if you feel as though

it's not going anywhere, or if that's not what you're comfortable doing, you just remove

yourself from the situation."

Participants were consistent in their perception of racism as inevitable. "I'm not able to

forget that I am Black in this country and that my life is not valued, and that we are not safe at all

here. No matter who we are, no matter how much money we have, no matter what your

socioeconomic status is, we are not safe, no matter what." Similarly, Simone, a Black woman,

explained that from her perspective, "racial discrimination was there and will always be there."

For almost all participants, the reality of the inevitability of racism has an impact on how to

navigate the world safely and teach their children to navigate the world.

An exploration of parenting approaches around race uncovered a sort of resigned

acceptance amongst participants that racism would impact their experience and their children's

experience in the world. Simone, a Black woman who had routine encounters with teachers and

school administrators before the pandemic that she interpreted as micro-aggressive or outwardly

racist (e.g., she shared that her child had been punished for giving another kid a "concussion"

from "across the yard" with a "ball she wasn't playing with," as well as being told by the teacher

daughter's essay was "throw[n] out because she could [not] have written it"), discussed race,

racism and parenting with as something to be constantly navigated, but likely never to be

overcome. Simone reported frequent encounters of subtle racism. These encounters impacted

parenting choices as well as her parenting practices:

> "I had to always make sure [my daughter] understood who she was and how people saw
>
> her, and it played out time and time again in elementary school. And I kept her at that
>
> school simply because it was an amazing school, and they have amazing opportunities for
>
> these students and amazing resources."

Keeping her daughter in a racist space for the betterment of her daughter's education was a

difficult decision, and one influenced by feelings of inevitability of encountering racism. Such

specific instances were consistent with the overall sense that while issues of racism are real and

important topics of parent/child discussion, they are not going anywhere. It's best to prepare your

child for the world as it exists.

As parents were faced with developing parenting practices around race for their own children,

particularly considering the heightened racial tensions of the early 2020s, they had to reconcile

the way they were raised with their own evolving views. For example, Adam, an Asian

American cis man whose parents taught him to "be the model minority, don't say anything,"

struggled with his family of origin's messaging of assimilation. He expressed that he has recently

come to realize that "when you're the model - The model minority don't say anything, no change

happens for you and you're always going to be stuck at the bottom and looked down upon."

Frances, a Black and White cis woman said, "I've never seen color, my parents never, you know,

[*sic*.] taught us to see color." Though Frances describes receiving this color evasive frame from

her parents, she also discussed being called derogatory names growing up, and more detailed

conversations about race and racism she has had with her Black partner, revealing the

complexities of received messaging and lived experiences. Larry, a transgender man learned to code switch, a tactic his still uses in varying environments.

While participants universally reported growing up with evasive/defensive strategies for avoiding racism, current events compelled many of them to question the efficacy of those methods. Participants consistently noted that over last few years, it appeared "more people feel comfortable" performing overtly racist acts, and racism became more "visible." Recent years of social tensions created heightened awareness of race, racism, and power due to changes in politics, COVID-19 related tensions, and heightened media attention on both racist and counter-racist activities. Over two thirds of participants reported that these recent events "accelerated" or "spurred" parenting practices around race in which they may not have otherwise engaged.

While nearly a third of the participants reported their previously planned approach to parenting practices about race did not change, content was impacted by cultural climate. Thirteen parents of color expressed that when parenting their children around issues of race, they focused on how race and racism would impact their children and how their children should act to avoid problems and advocate for themselves specifically, rather than on broader systemic issues or more general topics related to race/racism. In general, most parents reported engaging in continual, small conversations with their children rather than sitting them down for a specific "race talk" or discussing the complex history of race in the US.

In describing their own parenting practices around race, participants consistently focused on the "close to home, "meaning their immediate and proximal social ecology – their children, their experiences, their community – as opposed to broader issues related to race and racism when it came to parenting their children. Most focused on teaching their children how to cope and survive in a racist world, as opposed to approaching conversations of systemic change, with near

universal consistency. "Be a good person," "a productive member of society," "be kind," and "call out injustice when you see it" were typical responses when participants were asked about how they approach issues of race and/or racism with their children. For Evelyn, a Latinx woman, approaching race and racism with her school-aged child was about empowering her to reach for her dreams and stand up for herself opposed to focusing on societal injustices. She recalled one of her own moments of empowerment in which she challenged a racist incident in her life, which in turn inspired her approach to teaching her child about how to cope with similar experiences: "I could have just not said anything and just let it slide, but it probably would have eaten me up, and every time I saw her after that I'm sure it would have just eaten at me." Others incorporated the role of racial identity with a particular focus on self-esteem. For example, Rose, a Latinx woman with a kindergarten-age daughter, shared that her parenting practices are driven by her desire to be her a "proud to be a little Black girl" and that she works to "build her up" by providing daily "affirmations on beautiful . . . I'm strong. I'm smart."

Though conversations were focused close to home, they occurred with an underlying awareness of familial vulnerability. For parents of color who participated in this study, highly public incidents caused them to reevaluate their own social capital (Kawachi & Berkman, 2014) and physical vulnerability, creating increased feelings of insecurity for some accompanied by increased worry about the safety of their children, which resulted in parenting approaches wherein they addressed the dangers of racism more directly with their children and at an earlier age. For example, participants reported being very aware of the "horrendous number of males of color that are shot by our police," and realizing "[you] are a target your whole life and not even realizing how much of a target [you are]." A few participants commented on the fact that the failure of municipalities to convict perpetrators of police violence prompted parents to prepare

their children for the realities of racism through proactive conversations. For example, Anne, , an Asian American woman, shared that:

> "Current events that happened during that shutdown have prompted conversations to make us aware of our ethnicity . . . It has made us a little bit more hyperaware . . . it forces us as parents to have those conversations a little bit earlier than we intended to those and in the manner that we had to have those. But it is part of children growing up too."

Some participants expressed that their children were becoming more aware of racial divides from their broader community, which in turn opened the door for direct conversations between themselves and their children. For example, a participant with mixed and Indigenous heritage explained,

> "the kids became more aware of an understanding of murdered and missing Indigenous women, which I don't think really clicked with them before. But then once they saw the violence, they started to understand what it was about. And having thoughts on and then you know having discussions with our friends . . . My friends and then able to sit down with especially my 17-year-old and have those discussions . . . We had a lot of discussions around race and social equity."

Regardless of whether discussions begin with the parent or are brought to the parent by the child, one thing was consistent across all participants: the conversations came down navigating racism, personal safety, and personal confidence as opposed to challenging systemic racism or encouragement of activism. For many parents in this sample, the larger issue of

systemic racism in America appeared to be the elephant in the room: it was an enormous and difficult issue– and many preferred to avoid addressing it altogether due to its magnitude.

Discussion

This is the first known study to explore the experiences of parents of color during the heightened racial strain associated with the COVID-19 pandemic and how those experiences interplayed with social support networks and parenting practices. By capturing the stories of parents that navigated (and continue to navigate) the heightened racial tensions that rose to prominence during the early years of the COVID-19 pandemic, this study memorializes a pivotal point in time. Parents of school-aged children grew up with one set of expectations and experiences around racism and bore witness to a significant change in culturally accepted expressions of racism. They had to navigate these changes not only for themselves but for their children. Examining this point in time provides unique insight into how parents of color experience race-related tensions and how their experience impacts their parenting practices and decisions.

A lifetime of discrimination in form of microaggressions set the backdrop for the experience of coping with heightened racial tensions. A salient theme identified in this research is that prior experiences and conditioning with respect to racial tensions is heavily impactful in how individuals respond to and cope with a period of heightened racial tensions. In the early 2020s, individuals who had grown up living with and learning to navigate a certain kind of racism largely defined by microaggressions found themselves navigating a new landscape of overt racist expression. The fact that participants reported their pre-2020 racism experience as defined by microaggressions should not be minimized or construed as insignificant. Research has demonstrated how the "little cuts" of microaggressions take a significant toll on mental health

(Sue, 2021). Still, coping skills that parents learned to deal with microaggressions did not necessarily translate to what happened in the early 2020s.

In the 2010s and early 2020s, advancements in technology created an environment in which video recordings of racist incidents were widely available and prevalent. Both conventional media and social media coverage from all perspectives have thrust race and racism into a new kind of spotlight in American culture. For example, when media covered National Football League player Colin Kaepernick "taking a knee" during the national anthem to protest racial inequities people from all over the country reacted loudly, both in support and expressing extreme distress, and in many cases racist vitriol, over Kaepernick's decision (Doehler, 2021). Where racism had been an undercurrent, it began moving to the center of public discourse.

With the understanding that their prior lived experience served as a baseline for their encounters with the heightened racial tensions temporally associated with the COVID-19 pandemic, participants discussed how they processed the increased visibility of racial tensions. Participants reported having visceral reactions to the increase in racial tensions in the news and on social media, and in everyday discussion. Several participants reported swells of emotions as events portrayed in the media and present in social discussion triggered long memories of small, but not insignificant, mistreatments. The importance of even perceived racism should not be underestimated: it can and does have significant consequences.

Social stress theory conceptualizes racism as a social stressor that can produce negative health consequences for members of minoritized racial groups (Anderson, 2012). Though this theory was not a sensitizing concept for this study, it lends meaning to the study's results. Participant reports of depression, anxiety, and fear of bodily harm lend support to the notion that the consequences of racism have very real physical and mental health consequences. Stress is

associated with accelerated cellular aging, which can wear down body systems and result in a variety of illnesses and even premature mortality (Williams and Mohammed 2009). The findings from this study indicate that parents of color were not only living with a baseline level of stress from a lifetime of experienced microaggressions but were also exposed to an acute level of stress resulting from heightened racial tensions on top of an already acutely stressful time: a pandemic. While participants themselves recognized some immediate consequences, more consequences may yet reveal themselves in the future.

As a final note on this topic, it is important to mention the absence of discussion amongst the participants regarding the history of white supremacy in the US and the structural inequities that developed overtime (sometimes termed "structural racism" (Njoku et al., 2021)) such that parents of color are positioned to be subjected to and impacted by both micro and macro race-based aggressions in the first place. The findings of this study are necessarily bound by the data, and structural inequities and the history of white supremacy were not raised by the participants. This is perhaps due to the line of questioning, the time-bound view of the study (focused on the early 2020s), or the way participants themselves have contextualized their own experiences in their self-narrative. While not expressly discussed by participants, the undercurrent of structural racism borne of white supremacy is well documented in other COVID-19 related research (Sikka, 2022; Njoku, et al., 2021). The researcher acknowledges structural racism as a potential unnamed factor in participant experiences of microaggressions and express racial tensions.

Participant experiences of discrimination amongst and between various minoritized populations was a prominent focus. Another somewhat theme that was conceptualized with respect to participants' personal experiences of the rise in racial tensions in the early 2020s was how positionality within minoritized communities, and how tensions between minoritized

communities, impacted experiences. Unsurprisingly, internal and external conflict related to individual positionality was most prominent amongst those who were members of multiple minoritized groups: particularly women and the LGBTQI community. This aligns with prior research that has documented to multifaceted struggles of people who must navigate multiple rigidly defined and independent communities, such as an ethnic community, the LGBTQI community, and society at large (Morales, 1989).

The mixed feelings of alignment and misalignment between racially minoritized groups also aligns with prior research, which evidences a history of complex inter-racial relations. This research is particularly prominent in the area of political science, where the potentiality for "rainbow coalitions" of minoritized voters is evaluated (Besco, 2015; Shah, 2008). Such research notes that while various minoritized ethnic groups may have common interests, they are often "portrayed . . . as competing for scares resources and political inclusion rather than as potential allies and coalition partners" (Shah, 2008, p. 466). The complexities of inter-minoritized group relationship were borne out in this study. While many participants discussed how, within their own minoritized communities, there was a push-pull relationship with other minoritized communities, others described being able to relate more to other minoritized communities, while still others described frustration that some minoritized communities were being highlighted in large scale conversations at the perceived expense of others. The relational web between minoritized communities impacted how participants viewed their own status, both in terms of social capital and community belonging (e.g., identifying as a person of color as opposed to only an Indigenous person). As with the impact of social support, it is difficult to draw a single conclusion from the transcripts with respect to the impact of inter-minoritized group conflict. What can be said with certainty is that the issue was present; its role seems to be evolving. As

parents of color grapple with changing racial landscape, their perceptions of themselves, their

positionality, and their relationship to other minoritized groups are shifting.

*Experiences of social support relationships during heightened racial tensions were

important yet varied*. One factor known to ameliorate or buffer stress is social support. While

poor social support is linked to depression (Paykel, 1994), seasonal mood disorder (Michalak et

al., 2003), negative response to dysthymia treatment (Oxman & Hull, 2001), and comparatively

worse physical health outcomes (Berkman, 1995), strong social support has the opposite effect

(Travis et al., 2004). Here, however, the impact of social support is difficult to pinpoint, as

conflicts and alliances in the face of racial upheaval were varied. Some relationships were

solidified or created, generating social support, while other relationships broke down or

weakened. The importance of social support is not in dispute, but the exact nature of its impact

with respect to the population in this study is questionable light of the combination of weakened

and strengthened connections expressed by participants. Between connections lost and gained,

while social support remains critical, overall impact may be neutralized.

*The combination of parents' background with microaggressions and current sense of

heightened racial tensions impacted parenting practices*. As parents of color navigated a

changing racial landscape for themselves, they faced an additional challenge: contextualizing the

climate of heightened racial tension for their children. Just as the heightened racial tensions of

the early 2020s were placed upon a foundation of lived experience characterized largely by

microaggressions, so was the new urgency of parenting with respect to race placed upon an ever-

present challenge for parents of color: preparing their children to navigate the world with certain

cards already stacked against them. With respect to parenting practices, the dominant theme was

a focus on the personal: personal safety, awareness of race as fact, and individual child self-

esteem building. Unexpectedly, very few of the participants reported discussions of systemic racism and/or opportunities for large scale cultural change, and those who did had the conversations at the behest of their children who broached those topics with other members of their social support system first. Instead, parents focused on what was in the immediate control of their child: they made sure their child was aware of their positionality as a member of a minoritized group, they build up their confidence with affirming language, and they talked to their children in small everyday ways about challenges they might face because of their membership in minoritized groups.

With respect to navigating the compound complexities of race relations in parenting, the primary theme that emerged was acceptance and, relatedly to some extent, avoidance. Participants largely did not report challenging racism – instead, they navigated it as a fact of life. Participants expressed a sort of exhausted resignation; they indicated a sense that a certain amount of racism simply must be tolerated to exist as a parent of color. A strong example of this was one participant describing keeping her child in a school that was high performing despite repeated instances of racist encounters with the administration. The parent chose not to change schools because of a perceived educational advantage and additional access to resources and accepted a certain level of racism as a necessary part of the exchange. The overt expressions of racism in the early 2020s led to a greater sense of urgency with respect to talking to children about race, but it did not significantly shift the content or result expectations.

Implications. Findings from this study provide an important aid in understanding and serving a population disproportionally impacted by racism, and racial upheaval over the pandemic: parents of color. Parents of color in this study reported exhaustion and a sense of resignation to the reality of raising children in a society inherently stratified by race and other

intersecting identities that are accompanied by varying degrees of social capital. Parents

repeatedly discussed the ways in which microaggressions experienced from an early age set a

particularized background for understanding and navigating the world, and it was against this

background that they approached parenting through the early 2020s. While the urgency and

timing of discussions may have accelerated in some cases, the content was largely unaffected

and directed at personal safety and navigation of a society that inherently favors some racial

groups over others.

Opportunities for Further Research. This study is exploratory, and ultimately, the key

implication is the need for further research. . Importantly, findings from this study indicate that,

regardless of how large-scale the national discourse on race and racism is, parents of color are

primarily focused on their daily lives and the welling of their children. Additional research into

how (and if) entities (municipalities, school districts, etc.) can interact with this intimate level of

processing to improve outcomes for parents and children would be useful.

Limitations. Most of the limitations of this research are a function of and inherent to the

qualitative study design. The study's quality is necessarily dependent on the interviewer's skills

and each participant's candidness; participants may have been influenced in their

responses/participation by perceived personal biases of the interviewer and/or the interviewer's

idiosyncrasies (Anderson, 2010). The qualitative study design also means that rigor can be more

difficult to maintain, assess, and demonstrate (Anderson, 2010) in contrast to a broader

quantitative study. However, the western standard of rigor can undermine the knowledge and

experiences of the minoritized populations in qualitative research (Keikelame & Swartz, 2019).

Additionally, because parenting, coparenting, race, and political/social experiences are complex

and potentially sensitive topics, there may be limitations regarding interviewee comfort in speaking candidly to the interviewer.

Finally, while this study uses the term "parents of color" as a catchall for the sample group, it recognizes that Black/Latinx/Asian/Asian American parents are in no way exhaustive of all who might identify as a "parent of color" and that this research is underinclusive of all "parent of color" experiences. In addition, the researcher recognizes even within the identified "parents of color" demographic in this study inequalities and differences exist within and between: Black, Latinx, and Asian and Asian American populations experience life differently, as do male, female, and gender-queer populations. Including each of these demographic groups may skew results that would be different and/or more defined with a narrower qualification set for research participants. Ideally, the narrative nature of the interview process utilized will allow for identification of unanticipated divergences between and amongst groups and individuals to aid in guiding further exploration.

DISSERTATION CONCLUSION

"We have no choice of what color we're born or who our parents are or whether we're rich or poor. What we do have is some choice over what we make of our lives once we're here."

- Mildred Taylor

This two-paper dissertation explored the experiences of parents of color as they navigated dual crises: (1) a pandemic and associated social and systematic responses unprecedented in modern times and (2) a sharp rise in racial tensions and the visibility of racial tensions. Though the entire United States (US) felt the impact of these two colliding moments in history, parents of color who were parenting school-aged children were naturally in the crosshairs. These parents had to respond to and manage the stressors of the COVID-19 pandemic, which included not only the stressors associated with the virus itself but the practical and emotional impact of the sudden loss of nearly all childcare and educational support, *and* they had to process for themselves and their children a disturbing rise in the presence and visibility of racial tensions. Individuals parenting within a coparenting relationship had an additional variable factoring into their experience: the relationship with their coparent and how it helped or hindered their experience of parenting through a pandemic.

This qualitative, exploratory study was done in a two-paper format to provide space for deep exploration into how parents faced each coinciding but independent crisis: COVID-19 and the temporally associated rise in racial tensions. Of course, because parents faced these stressors simultaneously, they compounded each other and are inherently intertwined in actual lived experiences. Fifteen participants were interviewed, and a thematic analysis was conducted to identify important themes. The connected, compounded nature of COVID-19 pandemic related

stressors and stressors resulting from the temporally associated rise in racial tensions is apparent from the themes that arose in each independent study.

In Paper 1, the research examined how parents in coparenting relationships navigated the myriad stressors associated with the COVID-19 pandemic, from the virus itself to the closure of schools and loss of various external support services. Using Social Support Theory and Coparenting Relationship Theory as sensitizing concepts, the research explored the experiences of parents of color as they parented and coparented through the pandemic. Participants discussed the impact of COVID-19 related stressors on the coparenting relationship, and parents' experience of coparent social support during the COVID-19 pandemic. A thematic review of the interview transcript revealed several interesting results.

First, though parents of color faced significant stressors during the COVID-19 pandemic, they also exhibited significant resilience and sue of adaptive coping skills. Parents identified (1) school and school district gaps in support, communication, and preparedness, (2) overall physical and mental health of family and self, and (3) balancing household, childcare and employment necessitates in the face of changes in available social support as primary stressors. In the face of these stressors, however, participants found ways to adapt and thrive through using adaptive coping strategies (e.g., creating new family routines, increasing physical activity, etc.). Even in the face of reduced opportunities, participants found ways to connect and derive social support from their communities. With respect to the coparenting relationship, participants reported "leaning in" to their coparent for social support, both emotional and instrumental. Participants generally reported improved communication and development of a more positive view of the coparent relationship as stressors were navigated together, whether the coparents were in an independent relationship with one another or not.

In Paper 2, the research examined how the experience of parenting and coparenting through a period of heightened racial tension impacted parents of color and their parenting practices. Using Critical Race Theory, Intersectionality, Social Support Theory, and Microaggressions Theory as sensitizing concepts, the research explored how parents of color experienced the rise in racial tensions that co-occurred with the COVID-19 pandemic, giving rise to the Stop Asian Hate movement and the increased visibility of the Black Lives Matter movement. The research delved into parents' parenting practices around race, and how – if at all – parenting through this period of heightened tensions impacted their parenting practices in this area.

Participants overwhelmingly reported entering the period of heightened racial tensions with a personal background defined by a lifetime of microaggressions. These small injustices were generally perceived as a fact of life – something to be lived with and navigated. Participants – especially those who identified female or LGBTQI – were highly aware of how their own intersecting identities impacted their personal lived experience. Even though participants had experience with racism and microaggressions, the uptick in visibility of racial tensions took a heavy toll, impacting mental health and altering relationships. Participants reflected on how their experiences were dependent of factors such as their physical location and social groups.

In discussing parenting practices, participant responses were framed strongly by their lived backdrop of consistent microaggressions. Participants reported focusing on the practical and close to home – teaching their children to be aware, to be safe, to be strong. There were minimal (though not absent) discussions of large-scale activism; instead, parents focused on preparing their children to survive and thrive in the world as it is. Participants described racism

and oppression as an inevitable obstacle to navigate; they did not envision large scale changes for their children. There was an overall feeling of inevitability.

What ties these two independent papers together is this overarching conclusion: parents of color face serious obstacles, but they navigate them. They persevere. They get creative and make the most of their situation; they pivot as necessary; they prepare their children for reality without wishful thinking. Of all the various, important, nuanced themes revealed by these research papers, one word rises as definitive: resilient.

Scholars, activists, policy makers, educators – anyone reading these papers -- should not misconstrue the impressive resilience of parents of color with the absence of need for practical, systemic change. Parents of color can and do cope, but systemic challenges take their toll. In both Paper 1 & 2, parents of color were primarily focused on the impact the COVID-19 pandemic and exposure to heightened racism had on their children. In discussing their struggles, parents of color expressed pandemic related stress related to their children's school sand school district communication and resources, which negatively impacted their children's educational developmental and psychological well-being. They were concerned that heightened racial tensions were negatively impacting the physical and psychological safety of their children; they worried about how the heavy weight of lifelong racism would affect their children.

When developing their own solutions, parents of color relied on coparent support and utilization their "village." They availed themselves of social support relationships that "prop [their] family up." They did not, in general, feel that systems were in place in their communities to support them. Communication and resources were lacking with respect to external supports. Though these studies were exploratory, and they revealed that there is much work to be done when it comes to public and institutional efforts to support parents and families of color.

In communities of color, there is inherent power in storytelling. This study shares important stories in hopes of sparking interest for future research into how parents of color can be best served and supported in communities. Ideally, further research and evidence-based policy solutions will generate progressive change in support and resources for communities of color, particularly parents of color. Society's ability to support parents as they raise the next generation of leaders, healers, educators, and problem solvers will directly impact the future for each one of us. If there is even a possibility that our collective future benefits from this work, the work was worth doing.

REFERENCES

Abedi, V., Olulana, O., Avula, V., Chaudhary, D., Khan, A., Shahjouei, S., Li, J., & Zand, R. (2020). Racial, economic, and health inequality and covid-19 infection in the United States. *Journal of Racial and Ethnic Health Disparities*, *8*(3), 732–742. https://doi.org/10.1007/s40615-020-00833-4

Abrams, E. M., & Szefler, S. J. (2020). Covid-19 and the impact of Social Determinants of Health. *The Lancet Respiratory Medicine*, *8*(7), 659–661. https://doi.org/10.1016/s2213-2600(20)30234-4

Adams, E. L., Smith, D., Caccavale, L. J., & Bean, M. K. (2021, April 8). *Parents are stressed! patterns of parent stress across COVID-19*. Frontiers. Retrieved March 12, 2022, from https://www.frontiersin.org/articles/10.3389/fpsyt.2021.626456/full

Adhanom, T. (2020, March 11). *Who director-general's opening remarks at the media briefing on COVID-19 - 11 march 2020*. World Health Organization. Retrieved January 23, 2022, from https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020

Ahrons, C. R., & Miller, R. B. (1993). The effect of the postdivorce relationship on

paternal involvement: A longitudinal analysis. American Journal of Orthopsychiatry, 63, 441-450.

Anderson, C. (2010). Presenting and evaluating qualitative research. *American Journal of Pharmaceutical Education*, *74*(8), 141. https://doi.org/10.5688/aj7408141

Anderson, K. F. (2012). Diagnosing discrimination: Stress from perceived racism and the mental and physical health effects*. *Sociological Inquiry*, *83*(1), 55–81. https://doi.org/10.1111/j.1475-682x.2012.00433.x

Anderson, L., & Scherer, Z. (2021, October 8). *See how marriage and divorce rates in your state stack up*. Census.gov. Retrieved October 13, 2022, from https://www.census.gov/library/stories/2020/12/united-states-marriage-and-divorce-rates-declined-last-10-years.html

Andrews, H. (2008, March 18). *Obama's message resonates*. POLITICO. Retrieved March 12, 2022, from https://www.politico.com/story/2008/03/obamas-message-resonates-009109

Azar, K. M., Shen, Z., Romanelli, R. J., Lockhart, S. H., Smits, K., Robinson, S., Brown, S., & Pressman, A. R. (2020). Disparities in outcomes among COVID-19 patients in a large health care system in California. *Health Affairs*, *39*(7), 1253–1262. https://doi.org/10.1377/hlthaff.2020.00598

Barrera, M. (1986). Distinctions between social support concepts, measures, and Models. *American Journal of Community Psychology*, *14*(4), 413–445. https//doi.org/10/1007/bf00922627

Balls-Berry, J., Dacy, L. C., & Balls, J. (2015). *"Heard it through the grapevine": The Black Barbershop as a source of health information*. Hektoen international : a journal of medical humanities. Retrieved March 9, 2022, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4749262/

Behrendt, M., Lietaert, I., &; Derluyn, I. (2021). Continuity and social support: A longitudinal study of unaccompanied refugee minors' Care Networks. Journal of Immigrant & Refugee Studies, 20(3), 398–412. https://doi.org/10.1080/15562948.2021.193032

Bell, D. A. (1980). Brown v. Board of Education and the interest-convergence dilemma. *Harvard Law Review*, *93*(3), 518. https://doi.org/10.2307/1340546

Berkman, L. F. (1995). The role of Social Relations in Health Promotion. *Psychosomatic Medicine*, *57*(3), 245–254. https://doi.org/10.1097/00006842-199505000-00006

Berkman, L. F., Glass, T., Brissette, I., & Seeman, T. E. (2000). From social integration to health: Durkheim in the New Millennium. *Social Science & Medicine*, *51*(6), 843–857. https://doi.org/10.1016/s0277-9536(00)00065-4

Berry, P., Fowler, G., Waldman, M., Ortegon, M., Garber, A., & Wilder, W. (2021, May 28). *Voting laws roundup: May 2021*. Brennan Center for Justice. Retrieved January 23, 2022, from https://www.brennancenter.org/our-work/research-reports/voting-laws-roundup-may-2021#footnote1_kx06egj

Besco, R. (2013). Rainbow coalitions or inter-minority conflict? racial affinity and diverse minority voters. *SSRN Electronic Journal*. https://doi.org/10.2139/ssrn.2325159

Blake, J. (2021, May 25). *There was no racial reckoning*. CNN. Retrieved January 23, 2022, from https://www.cnn.com/2021/04/18/us/george-floyd-racial-reckoning-blake/index.html

Bowen, G. A. (2006). Grounded theory and sensitizing concepts. International Journal of Qualitative Methods, 5(3), 12-23. https://doi.org/10.1177/160940690600500304

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Braun, V., & Clarke, V. (2016). Thematic analysis. *The Journal of Positive Psychology*, *12*(3), 297–298. https://doi.org/10.1080/17439760.2016.1262613

Braun, V., & Clarke, V. (2021). Conceptual and design thinking for thematic analysis. *Qualitative Psychology*. https://doi.org/10.1037/qup0000196

Brener, L., Broady, T., Cama, E., Hopwood, M., de Wit, J. B. F., &; Treloar, C. (2019). The role of social support in moderating the relationship between HIV centrality, internalised stigma and psychological distress for people living with HIV. AIDS Care, 32(7), 850–857. https://doi.org/10.1080/09540121.2019.1659914

Byrne, D. (2021). A worked example of Braun and Clarke's approach to reflexive thematic analysis. *Quality & Quantity*, *56*(3), 1391–1412. https://doi.org/10.1007/s11135-021-01182-y

British Red Cross. (2021). *Life after lockdown: Tackling loneliness among those left ...* Retrieved January 23, 2022, from https://www.redcross.org.uk/-/media/documents/about-us/research-publications/health-and-social-care/life-after-lockdown-detailed-policy-recommendations.pdf

Bokker, P. (2006). Factors that influence the relationships between divorced fathers and

their children. Journal of Divorce and Remarriage, 45, 157-172. doi:10.1300/J087v45n03_08

Brown, S. M., Doom, J., Watamura, S., Lechuga-Pena, S., & Koppels, T. (2020). Stress and parenting during the global covid-19 pandemic. https://doi.org/10.31234/osf.io/ucezm

Bruce, J. S., De La Cruz, M. M., Moreno, G., & Chamberlain, L. J. (2017). Lunch at the Library: Examination of a community-based approach to addressing summer food insecurity. *Public Health Nutrition*, *20*(9), 1640–1649. https://doi.org/10.1017/s1368980017000258

Buchanan, L., Bui, Q., & Patel, J. K. (2020, July 3). *Black lives matter may be the largest movement in U.S. history*. The New York Times. Retrieved January 23, 2022, from https://www.nytimes.com/interactive/2020/07/03/us/george-floyd-protests-crowd-size.html

Burton, L. M., Bonilla-Silva, E., Ray, V., Buckelew, R., & Hordge Freeman, E. (2010). Critical race theories, colorism, and the decade's research on families of color. *Journal of Marriage and Family*, *72*(3), 440–459. https://doi.org/10.1111/j.1741-3737.2010.00712.x

Cabrera, N. J., & Bradley, R. H. (2012). Latino fathers and their children. *Child Development Perspectives*, *6*(3), 232–238. https://doi.org/10.1111/j.1750-8606.2012.00249.x

Cabrera, N. J., Shannon, J. D., & La Taillade, J. J. (2009). Predictors of coparenting in Mexican American families and links to parenting and child social emotional development. *Infant Mental Health Journal*, *30*(5), 523–548. https://doi.org/10.1002/imhj.20227

Caetano, S. C., Silva, C. M. F. P., & Vettore, M. V. (2013). Gender differences in the Association of Perceived Social Support and social network with self-rated health status among older adults: A population-based study in Brazil. *BMC Geriatrics*, *13*(1). https://doi.org/10.1186/1471-2318-13-122

Capodilupo, C., Nadal, K., Corman, L., Hamit, S., Lyon, O., Weinberg, A., & Sue, D. (2010). The manifestation of gender microaggressions. In D. Sue (Ed.), *Microaggressions and marginality: Manifestation, dynamics, and impact* (pp. 193–216). New York, NY: Wiley.

Carter, K. (2021, April 30). *Researchers involve communities of color in examination of COVID-19 disparities*. American Psychological Association. Retrieved January 23, 2022, from https://www.apa.org/members/content/covid-19-disparities

Castaldelli-Maia, J. M., Segura, L. E., & Martins, S. S. (2021). The concerning increasing trend of alcohol beverage sales in the U.S. during the COVID-19 pandemic. *Alcohol*, *96*, 37–42. https://doi.org/10.1016/j.alcohol.2021.06.004

Center for Disease Control and Prevention (2020, August 18). CDC Social Vulnerability Index. Retrieved December 29, 2021 from https://www.atsdr.cdc.gov/placeandhealth/svi/fact_sheet/pdf/SVI_FactSheet_v10152020-H.pdf

Centers for Disease Control and Prevention. (2020, December 29). *Mental health, substance use, and suicidal ideation during the COVID-19 pandemic - United States, June 24–30, 2020*. Centers for Disease Control and Prevention. Retrieved January 23, 2022, from https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm

Clawson, A.H., Nwankwo, C.N., Blair, A.L, Pepper-Davis, M., Ruppe, M.N., & Cole, A.B. (2021). COVID-19 Impacts on Families of Color and Families of Children With Asthma, Journal of

Pediatric Psychology, 46(4), 378–39. https://doi-org.proxy.library.upenn.edu/10.1093/jpepsy/jsab021

Cho, S., Crenshaw, K.W., & McCall, L. (2013). Toward a Field of Intersectionality Studies: Theory, Applications, and Praxis. Signs, 38(4), 785–810. https://doi.org/10.1086/669608

Cobb, S. (1976). Social support as a moderator of life stress. Psychosomatic Medicine, 38(5), 300–314. https://doi.org/10/1097/00006842-197609000-00003

Cohen, S., & Syme, S. L. (1985). *Social Support and Health*. Academic Press.

Coleman-Jensen, A., Rabbitt, M.P., Gregory, C.A., & Singh, A. (2020). Household food security in the United States in 2019 (ERR-275). U.S. Department of Agriculture, Economic Research Service.

Collins, P.H. (1986) Learning from the outsider within. The sociological significance of Black Feminist thought. *Sociological Problems* 33(6):14–32.

Collins, P. H., da Silva, E. C., Ergun, E., Furseth, I., Bond, K. D., & Martínez-Palacios, J. (2021). Intersectionality as critical social theory. *Contemporary Political Theory*, 20(3), 690–725. https://doi.org/10.1057/s41296-021-00490-0

Collins, H. P., & Bilge, S. (2016). Getting the History of Intersectionality Straight? In *Intersectionality* (pp. 63–88). essay, Polity Press.

Cooper, C.E., McLanahan, S.S., Meadows, S.O., & Brooks- Gunn, J. (2009). Family structure transitions and maternal parenting stress. *Journal of Marriage and Family*, 71, 558.

Crenshaw, K.W. (1989). Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics. University of Chicago Legal Forum 1989:139–167.

Crenshaw, K.W. (1991). "Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color." *Stanford Law Review* 43(6),1241–1299.

Crenshaw, K., Gotanda, N., Pellar, G., & Thomas, K.(Eds.). (1995). *Critical race theory*. New York: New Press.

Delgado, R., & Stefancic, J. (2017). *Critical race theory* (third edition) : An introduction. New York University Press.

DePouw, Christian (2018). Intersectionality and critical race parenting, *International Journal of Qualitative Studies in Education*, 31:1, 55-69. DOI: 10.1080/09518398.2017.1379620

DePouw, C., & Matias, C. (2016). Critical race parenting: Understanding scholarship/activism in parenting our children. *Educational Studies: Journal of the American Educational Studies Association, 52(3), 237–259*. https://doi.org/10.1080/00131946.2016.1169182

DeReus, L., Few, A. L., & Blume, L. B. (2005). Multicultural and critical race feminisms: Theorizing families in the third wave. In Bergtson, V.L., Acock, A.C., Allen, K.R., Dilworth-Anderson, P., & D. M. Klein (Eds.), *Sourcebook of family theory and research* (pp. 447-468). Thousand Oaks, CA: Sage.

DeSouza, F., Parker, C.B., Spearman-McCarthy, V., Duncan, G.N., Myers, M. (2020). Coping with Racism: a Perspective of COVID-19 Church Closures on the Mental Health of African Americans. *Black J Racial Ethn Health Disparities*. 2020 Oct 2 : 1–5. doi: 10.1007/s40615-020-00887-4

Dill, B.T., & Zambrana, R.E. (2009). Emerging intersections: Race, class, and gender in theory, policy, and practice. New Brunswick, NJ: Rutgers University Press.

DiAngelo, R. (2018). White fragility: Why it's so hard for white people to talk about racism. Beacon Press.

Doehler, S. (2021). Taking the star-spangled knee: The media framing of Colin Kaepernick. *Sport in Society*, 1–22. https://doi.org/10.1080/17430437.2021.1970138

Dorn, E., Hancock, B., Sarakatsannis, J., & Viruleg, E. (2021, June 23). *Covid-19 and learning loss--disparities grow and students need help*. McKinsey & Company. Retrieved January 30, 2022, from https://www.mckinsey.com/industries/public-and-social-sector/our-insights/covid-19-and-learning-loss-disparities-grow-and-students-need-help

Dunn, C. G., Kenney, E., Fleischhacker, S. E., & Bleich, S. N. (2020). Feeding low-income children during the COVID-19 pandemic. *New England Journal of Medicine*, *382*(18). https://doi.org/10.1056/nejmp2005638

Durtschi, Jared A, Kristy L Soloski, and Jonathan Kimmes. "The Dyadic Effects of Supportive Coparenting and Parental Stress on Relationship Quality Across the Transition to Parenthood." *Journal of Marital and Family Therapy*. 43.2 (2017): 308–321. Web.

Eira Nunes, C., Roten, Y., El Ghaziri, N., Favez, N., & Darwiche, J. (2020). Co-parenting programs: A systematic review and Meta-Analysis. *Family Relations*, *70*(3), 759–776. http://doi.org/10.1111/fare.12438

Elder, L., & Greene, S. (2021). A recipe for madness: Parenthood in the era of Covid-19. *Social Science Quarterly*, *102*(5), 2296–2311. https://doi.org/10.1111/ssqu.12959

Feinberg, M. E. (2002, September). *Coparenting and the transition to parenthood: A framework for prevention*. Clinical child and family psychology review. Retrieved January 23, 2022, from http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3161510/

Feinberg, M. E. (2003). The internal structure and ecological context of coparenting: A framework for research and Intervention. *Parenting*, *3*(2), 95–131. https://doi.org/10.1207/s15327922par0302_01

Feinberg, M. E., Jones, D. E., Kan, M. L., & Goslin, M. C. (2010). Effects of family foundations on parents and children: 3.5 years after baseline. *Journal of Family Psychology*, *24*(5), 532–542. https://doi.org/10.1037/a0020837

Feinberg, M. E., Mogle, J., Lee, J. K., Tornello, S. L., Hostetler, M. L., Cifelli, J. A., Bai, S., & Hotez, E. (2021). Impact of the COVID-19 pandemic on parent, child, and family functioning. *Family Process*. https://doi.org/10.1111/famp.12649

Fortuna, L. R., Tolou-Shams, M., Robles-Ramamurthy, B., & Porche, M. V. (2020). Inequity and the disproportionate impact of covid-19 on communities of color in the United States: The need for a trauma-informed social justice response. *Psychological Trauma: Theory, Research, Practice, and Policy*, *12*(5), 443–445. https://doi.org/10.1037/tra0000889

Frost, D. M., Meyer, I. H., & Schwartz, S. (2016). Social support networks among diverse sexual minority populations. *American Journal of Orthopsychiatry*, *86*(1), 91–102. https://doi.org/10.1037/ort0000117

Fugard, A. J. B., & Potts, H. W. W. (2015). Supporting thinking on sample sizes for thematic analyses: A quantitative tool. *International Journal of Social Research Methodology*, *18*(6), 669–684. https://doi.org/10.1080/13645579.2015.1005453

Funk, C., & Martínez, J. (2020, May 30). *Fewer Hispanics are Catholic, so how can more Catholics be Hispanic?* Pew Research Center. Retrieved April 29, 2022, from https://www.pewresearch.org/fact-tank/2014/05/07/fewer-hispanics-are-catholic-so-how-can-more-catholics-be-hispanic/

Gable, S., Crnic, K., & Belsky, J. (1994). Coparenting within the family system: Influences on children's development. *Family Relations*, *43*(4), 380. https://doi.org/10.2307/585368

Garber, B. D. (2004). Directed co-parenting intervention: Conducting child-centered interventions in parallel with highly conflicted co-parents. *Professional Psychology: Research and Practice*, 35(1), 55–64.

Gee, C. B., & Rhodes, J. E. (2003). Adolescent mothers' relationship with their children's Biological Fathers: Social Support, social strain and relationship continuity. *Journal of Family Psychology*, *17*(3), 370–383. https://doi.org/10.1037/0893-3200.17.3.370

Gilligan, M., Suitor, J. J., Rurka, M., & Silverstein, M. (2020). Multigenerational social support in the face of the COVID -19 pandemic. *Journal of Family Theory & Review*, *12*(4), 431–447. https://doi.org/10.1111/jftr.12397

Goldman, N., Pebley, A. R., Lee, K., Andrasfay, T., & Pratt, B. (2021, April 6). *Racial and ethnic differentials in covid-19-related job exposures by occupational standing in the US*. medRxiv : the preprint server for health sciences. Retrieved January 23, 2022, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7685333/

Gould, E., & Wilson, V. (2020, June 1). *Black workers face two of the most lethal preexisting conditions for coronavirus-racism and economic inequality*. Economic Policy Institute. Retrieved January 23, 2022, from https://www.epi.org/publication/black-workers-covid/

Gracia, J. N. (2020). Covid-19's disproportionate impact on communities of color spotlights the nation's systemic inequities. *Journal of Public Health Management and Practice*, *26*(6), 518–521. https://doi.org/10.1097/phh.0000000000001212

Grose, J. (2021, April 21). *Why women do the household worrying*. The New York Times. Retrieved January 23, 2022, from https://www.nytimes.com/2021/04/21/parenting/women-gender-gap-domestic-work.html

Gryksa, K., & Neumann, I. D. (2022). Consequences of pandemic-associated social restrictions: Role of social support and the oxytocin system. *Psychoneuroendocrinology*, *135*, 105601. https://doi.org/10.1016/j.psyneuen.2021.105601

Hartley, C., & Coffee, P. (2019). Perceived and received dimensional support: Main and stress-buffering effects on dimensions of Burnout. *Frontiers in Psychology, 10.* https://doi.org/10.3389/fpsyg.2019.01724

Hayslip, B., Fruhauf, C. A., & Dolbin-MacNab, M. L. (2017). Grandparents raising grandchildren: What have we learned over the past decade? *The Gerontologist*, *59*(3). https://doi.org/10.1093/geront/gnx106

Heaney, C., & Isreal, B. (2008). Social networks and social support. In K. Glanz, B. Rimer, K. Viswananth, & F. Edition (Ed.), *Health Behavior and Health Education Theory, Research,and Practice* (pp. 189-210). San Francisco, CA: John Wiley & Sons, Inc.

Hiraoka, D., & Tomoda, A. (2020). Relationship between parenting stress and school closures due to the covid -19 pandemic. *Psychiatry and Clinical Neurosciences*, *74*(9), 497–498. https://doi.org/10.1111/pcn.13088

Holahan, C. J., Ragan, J. D., & Moos, R. H. (2017). Stress. *Reference Module in Neuroscience and Biobehavioral Psychology*. https://doi.org/10.1016/b978-0-12-809324-5.05724-2

Hoskin, M. N. (2020, April 25). *The whiteness of anti-lockdown protests*. Vox. Retrieved January 23, 2022, from https://www.vox.com/first-person/2020/4/25/21234774/coronavirus-covid-19-protest-anti-lockdown

Humphreys, K. L., Myint, M. T., & Zeanah, C. H. (2020). Increased risk for family violence during the covid-19 pandemic. *Pediatrics*, *146*(1). https://doi.org/10.1542/peds.2020-0982

Kanamori, M., Castaneda, D., Self, K. J., Sanchez, L., Rosas, Y., Rodriguez, E., Shrader, C.-H., Arroyo-Flores, J., Johnson, A., Skvoretz, J., Gomez, D., & Williams, M. (2021). Why re-invent the wheel? social network approaches can be used to mitigate SARS-COV-2 related disparities in Latinx seasonal farmworkers. *International Journal of Environmental Research and Public Health*, *18*(23), 12709. https://doi.org/10.3390/ijerph182312709

Karpman, M., Gonzalez, D., & Kenney, G. M. (2020, May 21). *Parents are struggling to provide for their families during the pandemic*. Urban Institute. Retrieved January 23, 2022, from https://www.urban.org/research/publication/parents-are-struggling-provide-their-families-during-pandemic/view

Kawachi, I., & Berkman, L. F. (2014). Social Capital, social cohesion, and health. *Social Epidemiology*, 290–319. https://doi.org/10.1093/med/9780195377903.003.0008

Keikelame, M. J., & Swartz, L. (2019). Decolonising research methodologies: Lessons from a qualitative research project, Cape Town, South Africa. *Global Health Action*, *12*(1), 1561175. https://doi.org/10.1080/16549716.2018.1561175

Kim, H. S., Sherman, D. K., & Taylor, S. E. (2008). Culture and social support. *American Psychologist*, *63*(6), 518–526. https://doi.org/10.1037/0003-066x

Kinsey, E. W., Hecht, A. A., Dunn, C. G., Levi, R., Read, M. A., Smith, C., Niesen, P., Seligman, H. K., & Hager, E. R. (2020, November). *School closures during COVID-19: Opportunities for innovation in meal service*. American journal of public health. Retrieved January 23, 2022, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7542295/

Lake, James (2020, June 15). *A mental health pandemic: The second wave of covid-19*. Psychiatric Times. Retrieved October 13, 2022, from https://www.psychiatrictimes.com/view/a-mental-health-pandemic-the-second-wave-of-covid-19

Lakey, B., & Cohen, S. (2000). Social support theory and measurement. In S. Cohen, L. G. Underwood, & B. H. Gottlieb (Eds.), Social support measurement and intervention: A guide for health and social scientists (pp. 29–52). Oxford University Press. https://doi.org/10.1093/med:psych/9780195126709.003.0002

Lebron, C. J. (2021). *The making of black lives matter: A brief history of an idea*. Oxford University Press.

Lee, J., Hong, J., Zhou, Y., & Robles, G. (2019). The relationships between loneliness, social support, and resilience among Latinx immigrants in the United States. *Clinical Social Work Journal*, *48*(1), 99–109. https://doi.org/10.1007/s10615-019-00728-w

Lee, S. J., Ward, K. P., Chang, O. D., & Downing, K. M. (2021). Parenting activities and the transition to home-based education during the COVID-19 pandemic. *Children and Youth Services Review*, *122*, 105585. https://doi.org/10.1016/j.childyouth.2020.105585

Lee, S., & Waters, S. F. (2021). Asians and Asian Americans' experiences of racial discrimination during the COVID-19 pandemic: Impacts on health outcomes and the buffering role of social support. *Stigma and Health, 6*(1), 70–78. https://doi.org/10.1037/sah0000275

Leinhardt, S. (1977). *Social Networks: A developing paradigm*. Academic Press.

Lin N, Simeone RS, Ensel WM, Kuo W. Social support, stressful life events, and illness: A model and an empirical test. *J Health Soc Behav*. 1979; 20:108–19.

Lin, N., Ye, X., & Ensel, W. M. (1999). Social support and depressed mood: A structural analysis. *Journal of Health and Social Behavior*, *40*(4), 344. https://doi.org/10.2307/2676330

Lingras, K. A. (2021). Talking with children about race and racism. *Journal of Health Service Psychology*, *47*(1), 9–16. https://doi.org/10.1007/s42843-021-00027-4

Liou, D. D., Ambroso, E., & Antrop-González, R. (2018). Latinx parental expectations in the home. *The Wiley Handbook of Christianity and Education*, 365–379. https://doi.org/10.1002/9781119098416.ch15

Liu, C. H., Zhang, E., Wong, G. T., Hyun, S., & Hahm, H. "C. (2020). Factors associated with depression, anxiety, and PTSD symptomatology during the COVID-19 pandemic: Clinical implications for U.S. young adult mental health. *Psychiatry Research*, *290*, 113172. https://doi.org/10.1016/j.psychres.2020.113172

Lunis, K. A., & Marcos, M. (2021, May 3). *'this is nothing new': Stop Asian hate protesters, in their own words*. NBC Boston. Retrieved January 23, 2022, from

https://www.nbcboston.com/news/local/this-is-nothing-new-stop-asian-hate-protesters-in-their-own-words/2346889/

Maisel, N. C.& Gable, S. L. (2009). The paradox of received social support. *Psychological Science, 20(8)*, 928–932. https://doi.org/10.1111/j.1467-9280.2009.02388.x

Matias, C. E., & Bitz, S. (2021). Critical race parenting in education. *Oxford Research Encyclopedia of Education*. https://doi.org/10.1093/acrefore/9780190264093.013.1562

McCabe, K. M., Yeh, M., Lau, A., Garland, A., & Hough, R. (2003). Mental Health Services Research, 5(3), 137–147. https://doi.org/10.1023/a:1024439317884

McHale, J. P., & Irace, K. (2010). Focused coparenting consultation: Helping parents coordinate to support children. *Independent Practitioner*, 30, 164–170.

McHale, J., & Rasmussen, J. (1998). Coparental and family group-level dynamics during infancy: Early family precursors of child and family functioning during preschool. *Development and Psychopathology*, *10*(1), 39–59. https://doi.org/10.1017/s0954579498001527

McHale, J. P., Kuersten-Hogan, R., Lauretti, A., & Rasmussen, J. L. (2000). Parental reports of coparenting and observed coparenting behavior during the toddler period. *Journal of Family Psychology*, *14*(2), 220–236. https://doi.org/10.1037/0893-3200.14.2.220

McHale, J.; Lauretti, A.; Talbot, J.; Pouquette, C. (2002). Retrospect and prospect in the psychological study of coparenting and family group process. In: McHale, JP.; Grolnick, WS., editors. *Retrospect and prospect in the psychological study of families.* (pp. 127-166). Mahwah, NJ: Lawrence Erlbaum Associates, Inc.

McHale, J., Khazan, I., Erera, P., Rotman, T., DeCourcey, W., & McConnell, M. (2008). Coparenting in diverse family systems. In M. C., Bornstein (Ed.). *Handbook of parenting: Being and becoming a parent (vol. 3)*. Retrieved from http://books.google.com/books

McHale, J. P., Negrini, L., & Sirotkin, Y. (2019). Coparenting. *APA Handbook of Contemporary Family Psychology: Foundations, Methods, and Contemporary Issues across the Lifespan (Vol. 1).*, 483–502. https://doi.org/10.1037/0000099-027

Michalak, E. E., Wilkinson, C., Hood, K., Dowrick, C., & Wilkinson, G. (2003). Seasonality, negative life events and social support in a community sample. *British Journal of Psychiatry*, *182*(5), 434–438. https://doi.org/10.1192/bjp.182.5.434

Mills QT. *Cutting along the color line: black barbers and barber shops in America.* Philadelphia, PA: University of Pennsylvania Press; 2013.

Morales, E. S. (1989). Ethnic minority families and minority gays and Lesbians. *Marriage & Family Review*, 14(3-4), 217–239. https://doi.org/10.1300/j002v14n03_11

Moreira, D. N., & Pinto da Costa, M. (2020). The impact of the COVID-19 pandemic in the precipitation of intimate partner violence. *International Journal of Law and Psychiatry*, *71*, 101606. https://doi.org/10.1016/j.ijlp.2020.101606

Moore, R. (2020, August 24). *2020 is exposing emergency management gaps*. NRDC. Retrieved March 13, 2022, from https://www.nrdc.org/experts/rob-moore/2020-exposing-emergency-management-gaps

Nadal, K. L. (2018). A decade of microaggression research and LGBTQ communities: An introduction to the special issue. *Journal of Homosexuality*, *66*(10), 1309–1316. https://doi.org/10.1080/00918369.2018.1539582

Nadal, K. L., Rivera, D., & Corpus, M. (2010). Sexual orientation and transgender microaggressions in everyday life: Experiences of lesbians, gays, bisexuals, and transgender individuals. In D. Sue (Ed.), *Microaggressions and marginality: Manifestation, dynamics, and impact* (pp. 217–240). New York, NY: Wiley.

Nadal, K. L., Davidoff, K. C., Davis, L. S., Wong, Y., Marshall, D., & McKenzie, V. (2015). A qualitative approach to intersectional microaggressions: Understanding influences of race, ethnicity, gender, sexuality, and religion. *Qualitative Psychology*, *2*(2), 147–163. https://doi.org/10.1037/qup0000026

National Institute on Minority Health and Health Disparities (2017*). NIMHD Research Framework.* Retrieved on December 23, 2021, from https://nimhd.nih.gov/researchFramework

National Center for Education Statistics (2021). *The NCES Fast Facts Tool provides quick answers to many education questions (National Center for Education Statistics)*. Retrieved March 13, 2022, from https://nces.ed.gov/fastfacts/display.asp?id=372

Noe-Bustamante, L., Krogstad, J. M., & Lopez, M. H. (2022, February 25). *For U.S. latinos, COVID-19 has taken a personal and financial toll*. Race & Ethnicity. Retrieved March 7, 2022, from https://www.pewresearch.org/race-ethnicity/2021/07/15/for-u-s-latinos-covid-19-has-taken-a-personal-and-financial-toll/)

Nomaguchi, K., & House, A. N. (2013). *Racial-ethnic disparities in maternal parenting stress: The role of structural disadvantages and parenting values*. Journal of health and social behavior. Retrieved January 23, 2022, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3836435/

Njoku, A., Joseph, M., & Felix, R. (2021). Changing the narrative: Structural barriers and racial and ethnic inequities in covid-19 vaccination. International Journal of Environmental Research and Public Health, 18(18), 9904. https://doi.org/10.3390/ijerph18189904

O'Reilly, P. (1988), Methodological Issues in social support and social network Research. Social Science and Medicine, 26 (8) (1988), pp. 863-873, 10.1016/0277-9536(88)90179-7.

Oxman, T. E., & Hull, J. G. (2001). Social support and treatment response in older depressed primary care patients. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, *56*(1). https://doi.org/10.1093/geronb/56.1.p35

Park, E.-Y. (2020). Parental caregiving burden, depression, social support, and life satisfaction: A Multigroup Analysis of social support for parents of young children with brain lesions. *Rehabilitation Counseling Bulletin*, *65*(3), 227–237. https://doi.org/10.1177/0034355220983461

Patrick, S. W., Henkhaus, L. E., Zickafoose, J. S., Lovell, K., Halvorson, A., Loch, S., Letterie, M., & Davis, M. M. (2020). Well-being of parents and children during the covid-19 pandemic: A national survey. *Pediatrics*, *146*(4). https://doi.org/10.1542/peds.2020-016824

Paykel, E. S. (1994). Life events, social support and Depression. *Acta Psychiatrica Scandinavica*, *89*(s377), 50–58. https://doi.org/10.1111/j.1600-0447.1994.tb05803.x

Pearlin, L., (1983). Role Strains and Personal Stress. In: Pearlin LI, editor. *Psychosocial Stress*. (pp. 3–32). New York: Academic Press.

Pearson, J.E. (1986), The Definition and Measurement of Social Support. Journal of Counseling & Development, 64: 390-395. https://doi.org/10.1002/j.1556-6676.1986.tb01144.x

Pieterse, A., & Powell, S. (2016). A theoretical overview of the impact of racism on people of color. *The Cost of Racism for People of Color: Contextualizing Experiences of Discrimination.*, 11–30. https://doi.org/10.1037/14852-002

Pierce, C., Carew, J., Pierce-Gonzalez, D., & Willis, D. (1978). An experiment in racism: TV commercials. In C. Pierce (Ed.), Television and education (pp. 62–88). Beverly Hills, CA: Sage.

Pudasainee-Kapri, S., & Razza, R. A. (2015). Associations among supportive coparenting, father Engagement and attachment: The role of race/ethnicity. *Journal of Child and Family Studies*, *24*(12), 3793–3804. https://doi.org/10.1007/s10826-015-0187-6

Rampin, R. (2021). Taguette: open-source qualitative data analysis. Journal of Open Source Software, 6(68), 3522, https://doi.org/10.21105/joss.03522

Ramsay, N.J. Intersectionality: A Model for Addressing the Complexity of Oppression and Privilege. *Pastoral Psychol* **63,** 453–469 (2014). https://doi.org/10.1007/s11089-013-0570-4

Ray, R. (2021, January 12). *What the Capitol Insurgency reveals about White Supremacy and law enforcement*. Brookings. Retrieved January 23, 2022, from https://www.brookings.edu/blog/how-we-rise/2021/01/12/what-the-capitol-insurgency-reveals-about-white-supremacy-and-law-enforcement/

Riina, E. M., & McHale, S. M. (2012). The trajectory of coparenting satisfaction in African American families: The impact of sociocultural stressors and supports. *Journal of Family Psychology*, *26*(6), 896–905. https://doi.org/10.1037/a0030055

Robinson, K. H., & Jones-Diaz, C. (2016). *Diversity and difference in early childhood education: Issues for theory and Practice*. Langara College.

Rodriguez, J., McKay, M. M., & Bannon, W. M. (2008). The role of racial socialization in relation to parenting practices and youth behavior: An exploratory analysis. *Social Work in Mental Health*, *6*(4), 30–54. https://doi.org/10.1080/15332980802032409

Rogers, K., Jakes, L., & Swanson, A. (2020, March 18). *Trump defends using 'Chinese virus' label, ignoring growing criticism*. The New York Times. Retrieved January 23, 2022, from https://www.nytimes.com/2020/03/18/us/politics/china-virus.html

Savage, M. (2020, December 6). *Why the pandemic is causing spikes in break-ups and divorces*. BBC Worklife. Retrieved October 9, 2022, from https://www.bbc.com/worklife/article/20201203-why-the-pandemic-is-causing-spikes-in-break-ups-and-divorces

Sawchuk, S. (2022, January 19). *What is critical race theory, and why is it under attack?* Education Week. Retrieved January 23, 2022, from https://www.edweek.org/leadership/what-is-critical-race-theory-and-why-is-it-under-attack/2021/05

Schieffler, D. A., & Genig, J. (2021). The Orthodox Church and the mental health burden of a pandemic: A narrative Mini-Review. *Journal of Religion and Health*, *60*(5), 3209–3216. https://doi.org/10.1007/s10943-021-01326-2

Shah, B. (2008). 'Is yellow black or white?': Inter-minority relations and the prospects for cross-racial coalitions between Laotians and African Americans in the San Francisco Bay Area. *Ethnicities*, 8(4), 463–491. https://doi.org/10.1177/1468796808097074

Shah, S. G., Nogueras, D., van Woerden, H. C., & Kiparoglou, V. (2020). The COVID-19 pandemic: A pandemic of lockdown loneliness and the role of Digital Technology. *Journal of Medical Internet Research*, *22*(11). https://doi.org/10.2196/22287

Sikka, T. (2022). Covid-19 and Race: News Coverage of structural racism and the role of John Henryism and racial weathering in BAME covid-19 deaths. Javnost - The Public, 29(2), 215–229. https://doi.org/10.1080/13183222.2022.2042949

Smith, T. B., & Silva, L. (2011). ethnic identity and personal well-being of people of color a meta-analysis. Journal of Counseling Psychology, 58, 42-60. Retrieved March 13, 2022, from https://scirp.org/reference/referencespapers.aspx?referenceid=3118239

Steimle, S., Gassman-Pines, A., Johnson, A. D., Hines, C. T., & Ryan, R. M. (2021). Understanding patterns of food insecurity and family well-being amid the Covid-19 pandemic using Daily Surveys. *Child Development*, *92*(5). https://doi.org/10.1111/cdev.13659

Stoetzer, P. (2020, July 13). *Undeterred by racist responses, Black Lives Matter protesters plan Saturday March in Taneytown with message of Love*. baltimoresun.com/maryland/carroll. Retrieved January 23, 2022, from https://www.baltimoresun.com/maryland/carroll/news/cc-blm-event-taneytown-20200710-3fnopzpqwrac3lblnpdjlkmety-story.html

Stop AAPI Hate Coalition. (2021, December 9). *About. Stop AAPI Hate* Retrieved January 2, 2022, from https://stopaapihate.org/about/

Sue, D. W. (2021, March 30). *Microaggressions: Death by a thousand cuts*. Scientific American. Retrieved October 9, 2022, from https://www.scientificamerican.com/article/microaggressions-death-by-a-thousand-cuts/

Sue, D. W., Bucceri, J., Lin, A. I., Nadal, K. L., & Torino, G. C. (2020). 20. racial microaggressions and the Asian American Experience. Contemporary Asian America (Third Edition), 464–488. https://doi.org/10.18574/nyu/9781479849994.003.0027

Sue, D. W., Capodilupo, C. M., Torino, G. C., Bucceri, J. M., Holder, A. M., Nadal, K. L., & Esquilin, M. (2007). Racial microaggressions in everyday life: Implications for clinical practice. *American Psychologist*, *62*(4), 271–286. https://doi.org/10.1037/0003-066x.62.4.271

Szabo, J. (2021). Online or in-person instruction? factors influencing COVID-19 schooling decisions among Latinx families in Houston, Texas. *AERA Open*, *7*, 233285842110533. https://doi.org/10.1177/23328584211053323

Szell, M., & Thurner, S. (2013). How women organize social networks different from men. *Scientific Reports*, *3*(1). https://doi.org/10.1038/srep01214

The White House. (2020, March 13). *Proclamation on declaring a national emergency concerning the Novel Coronavirus Disease (COVID-19) outbreak [Proclamation]* Retrieved December 23, 2021, from https://trumpwhitehouse.archives.gov/presidentialactions/proclamation-declaring-nationalemergency-concerning-novel-coronavirus-disease-covid-19-outbreak/

Thimsen; A.F. (1 April 2022). What Is Performative Activism?. *Philosophy & Rhetoric,* 55 (1): 83–89. doi: https://doi.org/10.5325/philrhet.55.1.0083

Timberg, C., Dwoskin, E., & Balingit, M. (2020, May 2). *Protests spread, fueled by economic woes and internet subcultures*. The Washington Post. Retrieved January 23, 2022, from https://www.washingtonpost.com/technology/2020/05/01/anti-stay-home-protests/

Torino, G. C. (2019). *Microaggression theory: Influence and implications*. Wiley.

Travis, L. A., Lyness, J. M., Shields, C. G., King, D. A., & Cox, C. (2004). Social support, depression, and functional disability in older adult primary-care patients. *The American Journal of Geriatric Psychiatry*, *12*(3), 265–271. https://doi.org/10.1097/00019442-200405000-00005

United Nations Population Fund (UNFPA) (2020). *Impact of the COVID-19 pandemic on family planning and ending gender-based violence, female genital mutilation and child marriage. Interim Technical Note*. Retrieved on January 19, 2022 from https://www.unfpa.org/resources/impact-covid-19-pandemic-family-planning-and-endinggender-based-violence-female-genital

Vaismoradi, M., Turunen, H., & Bondas, T. (2013). Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. *Nursing & Health Sciences*, *15*(3), 398–405. https://doi.org/10.1111/nhs.12048

Vaterlaus, J. M., Shaffer, T., Patten, E. V., & Spruance, L. A. (2021). Parent–child relationships and the COVID-19 pandemic: An exploratory qualitative study with parents in early, middle, and late adulthood. *Journal of Adult Development*, *28*(3), 251–263. https://doi.org/10.1007/s10804-021-09381-5

Vaccaro, A., & Koob, R. M. (2018). A critical and intersectional model of LGBTQ microaggressions: Toward a more comprehensive understanding. *Journal of Homosexuality*, *66*(10), 1317–1344. https://doi.org/10.1080/00918369.2018.1539583

Vinopal, C. (2021, March 18). *What we know about the Atlanta spa shootings that killed 8, including 6 Asian women*. PBS. Retrieved January 24, 2022, from

https://www.pbs.org/newshour/nation/what-we-know-about-the-atlanta-spa-shootings-that-killed-8-including-6-asian-women

Waldfogel, J., Craigie, T., & Brooks-Gunn, J. (2010). Fragile families and child wellbeing. *The Future of Children*, *20*(2), 87–112. https://doi.org/10.1353/foc.2010.0002

Walsh, F. (2002). A family resilience framework: Innovative practice applications. *Family Relations*, *51*(2), 130–137. https://doi.org/10.1111/j.1741-3729.2002.00130.x

Walsh, F. (2016). Strengthening family resilience (3rd ed.). Guilford Press.

Wang, W. (2020, December 31). Number 1 in 2020: The U.S. divorce rate has hit a 50-year low. Institute for Family Studies. Retrieved October 13, 2022, from https://ifstudies.org/blog/number-1-in-2020-the-us-divorce-rate-has-hit-a-50-year-low

Watkins, M., Bailey, J., & Gere, B. (2021, June 1). *Investigating the impact of barbershops on African American Males' Mental Health*. Counseling Today. Retrieved March 2, 2022, from https://ct.counseling.org/2021/05/investigating-the-impact-of-barbershops-on-african-american-males-mental-health/

Wills, T. A., & Shinar, O. (2000). Measuring perceived and received social support. In S. Cohen, L. G. Underwood, & B. H. Gottlieb (Eds.), Social support measurement and intervention: A guide for health and social scientists (pp. 86–135). Oxford University Press. https://doi.org/10.1093/med:psych/9780195126709.003.0004

Williams, D. R. (2018). Stress and the mental health of populations of color: Advancing our understanding of race-related stressors. *Journal of Health and Social Behavior*, *59*(4), 466–485. https://doi.org/10.1177/0022146518814251

Williams, D. R., & Mohammed, S. A. (2008). Discrimination and racial disparities in health: Evidence and needed research. *Journal of Behavioral Medicine*, *32*(1), 20–47. https://doi.org/10.1007/s10865-008-9185-0

Williams, D.R & Harris-Reid, M. (1999). *Race and Mental Health: Emerging Patterns and Promising Approaches*. In: Horwitz AV, Scheid TL, editors. A Handbook for the Study of Mental Health: Social Contexts, Theories, and Systems. (pp. 295-314). New York: Cambridge University Press.

Wong, G., Derthick, A. O., David, E. J., Saw, A., & Okazaki, S. (2013). The what, the why, and the how: A review of racial microaggressions research in psychology. *Race and Social Problems*, *6*(2), 181–200. https://doi.org/10.1007/s12552-013-9107-9

World Health Organization (2020, March 11) *Novel coronavirus (2019-nCoV): Situation report-51.2020*. Retrieved on December 22, 2021, from https://www-who-int.proxy.library.upenn.edu/docs/default-source/coronaviruse/situation-reports/20200311-sitrep-51-covid-19.pdf?sfvrsn=1ba62e57_10.

World Health Organization (2020, March 11). *Novel coronavirus (2019-nCoV): Situation report–51.2020*. Retrieved on December 22, 2021, from https://www-who-int.proxy.library.upenn.edu/docs/default-source/coronaviruse/situation-reports/20200311-sitrep-51-covid-19.pdf?sfvrsn=1ba62e57_10.

World Health Organization (2020, April 16). *WHO Director-General's opening remarks at the Mission briefing on COVID-19*. Retrieved on December 27, 2021, from https://www-who-int.proxy.library.upenn.edu/dg/speeches/detail/who-director

Yellow Horse, A. J., Yang, T.-C., & Huyser, K. R. (2021). Structural inequalities established the architecture for covid-19 pandemic among Native Americans in Arizona: A geographically weighted regression perspective. *Journal of Racial and Ethnic Health Disparities*. https://doi.org/10.1007/s40615-020-00940-2

Zhou, S., Banawa, R., & Oh, H. (1AD, January 1). *The mental health impact of covid-19 racial and ethnic discrimination against Asian American and Pacific Islanders*. Frontiers. Retrieved March 13, 2022, from https://doi.org/10.3389/fpsyt.2021.708426

APPENDIX A

Consent Statement and Demographic Questions

__Consent statement:__

You are being asked to take part in a research study. Your participation is voluntary which means you can choose whether to participate. If you decide to participate or not to participate there will be no loss of benefits to which you are otherwise entitled. Before you decide, you will need to know the purpose of the study, the possible risks and benefits of being in the study. Please note, the interviewer will confirm you have read the consent statement and agree to participate in this study before asking interview questions.

What is the purpose of the study? This study will fulfill the University of Pennsylvania dissertation requirement for a Doctorate degree in Social Work. The purpose of this study is to explore: 1) how parents of color experience and cope with parenting stress and coparenting relationships during the compounded stressors of the COVID-19 pandemic and quarantine; and 2) how parents of color experience, cope with, and navigate through parenting and coparenting during the heightened visibility of racial tensions and safety concerns related to the Black Lives Matter movement and Stop Asian Hate movement.

Why was I asked to participate in the study? You are being asked to join this study because as parent who identifies as Black, Latinx, or/and Asian who was impacted by school closures/remote schooling and changes in political and social movements, your experiences are important to understand to aid in implementing additional resources. The criteria of your school-aged child(ren) are that they were attending Early Kindergarten (age 4) through 12th Grade (age 18) as of March 11, 2020.

What about confidentiality? Your participation in this study is confidential and the research team will take appropriate steps to safeguard your information once collected in locked cabinets, password-protecting any digital files, and reframing from utilizing any identifier that violates your personal health information. Furthermore, once upon completion of dissertation defense, the researcher will destroy all information within a year. While all efforts will be made to protect your confidentiality, interceptions of personal data are possible.

Who can I contact if I have questions? If you have any questions regarding this study, please contact Mary Nickel-Nguy at nguym@upenn.edu or call (206) 491-9710. All calls and emails will be returned within 4 days.

By completing the demographic questionnaire below and participating in an interview, you are agreeing to participate in this study. Thanks for your participation. Please complete the questionnaire below and return before your interview.

Demographic Questions:

1. What is your gender identity?
   a. Male
   b. Female

    c. Non-Binary

2. What is your age?

    Enter age _____

3. What is your ethnicity/race?
   a. Asian
   b. Hispanic or Latino
   c. African American or Black
   d. Two or more ethnicities/race (please write in)

4. Where were you:
   a. Born in the US to immigrant parent(s)
   b. Born in the US to US-born parents
   c. Born in in another country and naturalized US Citizen
   d. Born in another country and living in the US

5. What is your marital status?
   a. Single
   b. Partnered
   c. Married
   d. Divorced/Separated

6. If partnered, how long have you been with your partner?

    ____Year(s)____Month(s)

7. What is the ethnicity of your partner?
   a. Asian
   b. Hispanic or Latino
   c. African American or Black
   d. Caucasian or White
   e. Native American
   f. Pacific Islander
   g. Two or more ethnicities/race

8. What is the gender identity of your partner?
   a. Male
   b. Female
   c. Non-Binary

9. What is the highest level of formal education completed?
   a. Less than high school degree
   b. High school graduate (e.g. high school diploma, GED)
   c. Associate's degree
   d. Bachelor's degree
   e. Master's degree
   f. Doctorate's degree

10. What is your current employment status?
   a. Not working outside the home
   b. Part-time employment
   c. Full-time employment

11. What is your annual income?
   a. $34,999 or less
   b. $35,000–$49,999
   c. $50,000–$74,999
   d. $75,000–$99,999
   e. $100,000 or more

12. How many children do you have?

   _____child(ren)

13. What is your child (ren) age, gender and race/ethnicity?

   Child:

   Child:

   Child:

   Child:

14. Who do you coparent with?
   a. Partner/Spouse
   f. Child(ren)'s other parent
   g. Grandparent
   h. Sibling
   i. Other

APPENDIX B

Guided Interview Questions

Introduction: Good (morning/afternoon), my name is Mary, and I would like to start by thanking you for participating in this interview. Before we can begin, have you reviewed the consent statement at the beginning of the questionnaire, which clarified the study involves research, information about the study procedures including how data will be stored and how subject confidentiality will be maintained, your involvement in this research is voluntary, and the contact information if you have questions? *[If not, a copy will be provided to be reviewed before the interview continues.]* Great. I am going to talk to you today about your experiences as a parent and coparent since schools shut down and went to remote learning in March 2020. I also want to talk about your experiences parenting through the heightened racial tensions we started seeing over the course of the COVID-19 pandemic. I'm going to ask you some questions, feel free to ask me repeat, clarify or skip the question at any time. Halfway through the interview, I am going to pause to give us a 10-minute break. If you need a break at any other time, please let me know. Do you have any questions before we get started? Great - let's get started.

1) Tell me about your family. How old are your kids? How many do you have? Where are they in school?

2) When schools closed for in-person learning and went remote in March 2020, how did your daily schedule change?

3) How did remote learning, household management, and balancing work/life impact you emotionally & physically?

4) What were the things that caused you stress at the beginning of the pandemic?

5) How have those things that caused you stress early in the pandemic changed as the pandemic continued?

6) What did you do to relieve the stress during the pandemic?

7) Looking back, are there resources you wish you would have had while your children were in remote schooling?

8) How has your relationship with your parenting partner changed from before the pandemic to the present, if at all? Can you describe the prepandemic coparenting relationship, and post-pandemic coparenitng relationship?

9) How has the way you share parenting responsibilities changed from before the pandemic and up through today?

10) How do you make decisions when it come to childrearing issues with your coparent, and how has that changed from before the pandemic through today?

11) How do you resolve issues or conflicts regarding your child(ren) with your coparent and how has that changed from before the pandemic through today?

I'm going to stop here for a 10-minute break, let's meet back here at [time]. [Use gathered information to revise next question set as necessary/appropriate]. Welcome back – I'm going to start by asking some questions about your social support during the pandemic.

12) What did your support system look like in the months before the pandemic started?

13) How did your support system shift over the course of the pandemic?

14) Have you discussed race, race relations, racial tension, or other related topics with your support system since March of 2020? If so, what prompted those conversations?

15) [If yes above] Can you describe some of those conversations?

16) What physical and psychological impacts did the heightened racial tensions during the pandemic have on you, if any?

17) What impacts did heightened racial tensions during the pandemic have on your relationships with your extended support system, if any?

18) How has the rise in racial tension during the pandemic impacted your parenting approaches, if at all?

19) How has the rise in racial tension impacted your relationship with your child(ren), if at all?

20) What Looking back, are there resources you wish would have been in place while parenting during a time of pandemic and heightened racial tension?

21) Would you like to share anything else about your coparent relationship, parenting or/and race?

Thank you very much for your time and participation today. Those are all the questions I have. Do you have any questions for me before we conclude? Thank you again, goodbye.

APPENDIX C

Are you a Black, Latinx, and/or Asian parent with a child between the ages of 7-18 years old who attended school during the 2019-20 school year?

If so, you may be eligible to earn a $30 e-gift card by participating in an academic study of parental and coparenting experiences during COVID-19 lockdown and the Black Live Matters and Stop Asian Hate movements.

Requirements

- Self-Identify as Black, Latinx, or/and Asian
- Have a child or children that attended in-person Kindergarten to 12th grade during to 2019-20 school year
- Have a co-parent (can be a romantic partner or other friend/family member, does not need to live with you)

Your Participation

You will be asked to complete a short demographic questionnaire and participate in 90-minute guided interview explore your parenting and coparenting relationship/experience during the largest public health crisis and the heightened visibility of racial political tensions.

Thank You Gift

To show appreciation, participants will be thanked with a $30 e-gift card to Amazon, Walmart or Target after the questionnaire and interview is completed.

If you believe you meet the criteria and would like to participate in this study, please contact Mary Nickel-Nguy at nguym@sp2.upenn.edu or call (206) 491-9710. Feel free to contact Mary with questions.

APPENDIX D

Table 1: Demographic Information

Characteristics of Interviewee (N=15)		
Characteristics	Numbers/Frequencies	Percentage/Standard Deviations
Age in Years		
Range	29-60	NA
Mean	45.13	32.98
Median	45	NA
Racial/Ethnic Identities		
Black	3	20%
Asian	5	33.33%
Latinx	3	20%
Black/White	1	6.67%
Latinx/Native American	1	6.67%
Latinx/White	1	6.67%
Black/Latinx/White	1	6.67%
Gender Identities		
Female	12	80%
Male	2	13.33%
Gender Queer/Transgender Male	1	6.67%
Education		
High School Degree	4	26.67%
Bachelor's Degree	8	53.33%
Master's Degree	3	20%
Employment Status		
Not working Outside of Home	3	20%
Part-time	4	26.67%
Full-Time	8	53.33%
Work Location of Participants		
Remote Employment	6	40%
In-person Employment	6	40%
Stay Home Parent	3	20%
Annual Household Income		
$34,999 or less	2	13.33%
$35,000-$49,999	2	13.33%
$50,000-$74,999	4	26.67%
$75,000-$99,999	2	13.33%
$100,000 or more	4	26.67%

Table 2: Demographics Marriage Statistics

Characteristics of Interviewee (N=15)		
Characteristics	Numbers/Frequencies	Percentage/Standard Deviations
Relationship Status		
Married	10	66.67%
Partnered	1	6.67%
Polyamorous	1	6.67%
Single	3	20%
Coupled Relationship Length (N-12)		
Less than 10 years	2	16.67%
10-19 years	6	50%
More than 20 years	4	33.33%
Coparenting Relationship		
Child's Other Parent	4	26.67%
Partner & Other Parent	9	60%
Child's Grandparent	1	6.67%
Child's Grandparent/ Partner/Other Parent	1	6.67%
Numbers of Children		
Range of Children	1-7	NA
Mean Children	2.53	6.61
Median Children	2	NA

Table 3: Participant Intersecting Identities

Demographic N=15							
Gender	Age	Race/Ethnicity	Citizen Status	Partner's/ Coparent's Ethnicity/Race	Partner's/ Coparent's Gender	Highest Education Completed	Income
Female	39	Black	Born in the US to an immigrant & a non-immigrant parent	Black	Male	Master	$50,000–$74,999
Female	45	Asian	Born in the US to US-born parents	Asian	Male	Bachelor	$100,000 +
Male	48	Asian	Born in the US to immigrant parents	Asian	Female	Bachelor	$100,000 +
Female	40	Asian	Born in the US to immigrant parents	White	Male	Bachelor	$100,000 +
Female	33	Black/White	Born in the US to US-born parents	Black	Male	High School	$34,999 or less
Female	29	Black/White/ Latinx	Born in the US to US-born parents	Black White (mom)	Male Female	Bachelor	$35,000–$49,999
Female	43	Latinx	Born in the US to US-born parents	White	Male	High School	$50,000–$74,999
Female	46	Black	Born in the US to US-born parents	White	Female	Bachelor	$34,999 or less
Female	49	Asian	Born in another country and naturalized US Citizen	Asian	Male	Master	$100,000 +
Female	42	Asian	Born in another country and naturalized US Citizen	Asian	Male	Bachelor	$75,000- $99,999
Female	52	Latinx/Native American	Born in the US to an immigrant & a non-immigrant parent	White	Male	Bachelor	$34,999 or less
Gender Queer/Trans Male	60	Black	Born in the US to US-born parents	White	Non-binary	Master	$50,000–$74,999
Male	52	Latinx	Born in the US to an immigrant & a non-immigrant parent	Latinx	F	High School	$50,000–$74,999
Female	60	Latinx	Born in the US to immigrant parents	White	Male	Bachelor	$75,000- $99,999
Female	39	Latinx/White	Born in the US to an immigrant & a non-immigrant parent	White	M	High School	$35,000–$49,999