Learning from the Pandemic

Possibilities and Challenges for Mothers and Families

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"Being a Mother in the Pandemic Was Intense": Lived Experiences of the COVID-19 Pandemic in Britain and Japan.

In a world where not one country has achieved gender equality and where in every country women do the majority of unpaid carework, socially constructed gender norms perpetuate women's secondary status to men. The deep-rooted association between femaleness, caregiving, and the domestic is linked to the idea of female bodies as potential maternal bodies. When women become mothers, the social locations of gender and parental status intersect to exacerbate inequality.

Through qualitative research with online communities of English-speaking mothers in Britain and Japan, I examine how and why the female caregiver norm affected lived experiences of the COVID-19 pandemic. During the pandemic, "motherhood" as oppressive institution and "mothering" as positive experience were both visible in the highs and lows of lived experiences. Different-sex couples often decided it made sense for mothers to do more unpaid care, even to the detriment of their careers and wellbeing and going against their gender-equitable beliefs. Mothers felt guilt for their perceived failure as an intensive mother, ideal worker, and wife/ partner. However, mothers still enjoyed and valued this time with their families.

Gender-blind government responses to the pandemic against a backdrop of existing gender inequality saw many mothers performing the role of traditional housewife alongside homeschooling and paid employment. My findings support the case for gender transformative macro-level policymaking and crisis response, which mitigate the invisible influence of the female caregiver norm on household-level decision making. Furthermore, to achieve gender equality, we must raise the status of care in society as something everyone needs and everyone can give.

Introduction

There has been an alarming lack of public health research with a gender dimension (Smith), and gender analysis was lacking at global and national levels as the COVID-19 crisis emerged (Wenham et al.). Gender parity was set back a generation by the pandemic and has not recovered (WEF). This article presents a snapshot of the early COVID-19 pandemic captured through the lived experiences of English-speaking mothers in Britain and Japan. It contributes to knowledge of the gendered impact of the pandemic, specifically on mothers.

I first introduce the key concepts of gender, motherhood, and cooperative conflict before describing the context of Britain and Japan. After outlining the multi-method qualitative research design, I share findings under four themes: what "made sense"; social media; family; and time. Findings support the case for policies that proactively mitigate the influence of gender norms on everyday decision making and for elevating the status of care in society.

Key Concepts: Gender, Motherhood, and Cooperative Conflict

Lived experiences of mothers in the pandemic can be understood in the context of the social structure of gender (Acker; Risman), the institution of motherhood (A. Rich), and cooperative conflict between different-sex couples (Sen; Agarwal). Gender is "one of the most obvious criteria of social differentiation," forming the "basis of economic, political, and social inequalities" (Acker 936) as a significant dimension of social stratification where women have a lower status than men. As a social structure, gender is "embedded at the individual, interactional, and institutional" levels (Risman 446), constrains choice, and shapes daily lives (432). Gender norms define acceptable behaviour for men and women as part of the gender system alongside gender roles (male breadwinner/female homemaker); gender socialization (raising children for gender roles); and gendered power relations (patriarchy) (Cislaghi and Heise 410). Gender norms and roles are amplified in parenting through different societal expectations for mothers and fathers (Aarntzen; Risman). The femaleness of care is connected to the female body as a maternal body, with mothering "the archetypal caring relationship" (The Care Collective 33). Yet care has a low status, as it is the traditional "domain of women, servants or others deemed inferior, whilst simultaneously serving to reinforce the notion of that inferiority" (27–28).

Adrienne Rich distinguishes the positive lived experience and identity of "mothering" from the oppressive institution and ideology of "motherhood." Within "motherhood" is the expectation for the mental load of anticipating the needs of the family to be carried out invisibly by women (Emma). Intensive

mothering beliefs place responsibility for child welfare with the mother who should devote all her resources to childrearing (Hays). For fathers, care is masculinized, as "providing for" in the male breadwinner role, thus reinforcing the gendered division of labour (Jordan 23). The masculinized ideal worker norm demands that employees are devoted to and available for work, unencumbered by caregiving responsibilities (Williams). The incompatibility of caregiving responsibilities and intensive mothering with the ideal-worker norm pushes some mothers out of the workforce and "creates stressful lives" for those who stay (Risman 442). Internalization of the female caregiver norm leads to greater work-family guilt among mothers than fathers, influencing their work decisions (Aarntzen et al.). Furthermore, employers may assume women are less capable or committed because of actual or potential unpaid care responsibilities (ILO). This discrimination contributes to the motherhood pay gap (Grimshaw and Rubery) and maternal wall (Williams).

In this socioeconomic context, different-sex couples cooperate to increase the total resources of the household while in conflict over how resources are used and the division of labour (Sen). Gender norms influence this cooperative conflict, including the boundaries of what can be bargained at home and negotiations in the labour market (Agarwal). Household level decisions serve to reinforce gender norms in society, as women "may 'choose' part-time or informal work that can be combined with these unpaid [care] responsibilities" so that "men 'specialize' in paid work while women 'specialize' in homemaking" (UN Women 82). Thus, in every country of the world, women do most of the unpaid carework (ILO).

Background: Mothers in Britain and Japan

As a British mother living in Japan, active in online communities, I had an opportunity to simultaneously document the lived experiences of mothers on two continents, as March to May 2020 saw school closures and the introduction of COVID-19 control measures in both countries.[1]

Comparable in size, these island nations are densely populated as well as high-income industrialized democracies with constitutional monarchies (Totman); both have failed to make progress on gender equality in the workplace (Giustini). Japan consistently ranks much lower in the Global Gender Gap Index (WEF), but the United Kingdom (UK) performs badly on economic gender equality compared to its European neighbours (Giustini). Britain and Japan have female employment rates at around 70 per cent (Gender Equality Bureau), but women are disproportionately in precarious part-time, contract, and lower-paid jobs (Brinton and Mun; Giustini; Grimshaw and Rubery; Yamamitsu and Sieg). The ideal-worker norm persists in both countries, although Japan has a more demanding work culture, and actual or

potential unpaid care affects women's employment, especially if they become mothers (Brinton and Mun; Cook; Giustini; M. Rich; Taylor et al.). Britain has "weak policy support for working mothers" (Grimshaw and Rubery 25) and the most expensive childcare among high-income countries (Cook and Grimshaw; Fawcett Society). Mothers in Japan also struggle as half of working women leave the workforce, at least temporarily, when they become mothers (Gender Equality Bureau). Intensive mothering beliefs are strong in both countries (Budds et al.; Kobayashi et al.; Koyama) coupled with negative attitudes to working mothers (Giustini). Furthermore, intensive mothering ideology is disseminated by mothers online through social media, crossing international boundaries (see Verniers). Entry to parenthood sees the balance of unpaid carework between different-sex couples shift further to women (Kobayashi et al.; McMunn et al.).

Against this backdrop of gender inequality, COVID-19 control measures in Britain and Japan were informed by advisory bodies with low female representation and did not sufficiently consider gender (UNDP; Wenham and Herten-Crabb).

Research Design

This multi-method qualitative research aimed to capture a snapshot of lived experiences of the first lockdown in Britain and state of emergency (SoE) in Japan. The first data source is one private Facebook group for mothers in Britain and two in Japan, where all content is in English. I observed and participated in the groups for eighteen months, and I combined the template organizing method (Crabtree and Miller) with ethnographic content analysis (Altheide) to look systematically at 114 pandemic-related posts and 2,394 associated comments made from February to May 2020. The second data source is an online survey developed with parents and shared through social media in June 2020. The survey was completed by 212 mothers (Britain n=176; Japan n=36). I focussed analysis on the 183 respondents who had a male spouse or partner living with them (Britain n=149; Japan n=34). The third source is ten semi-structured interviews with survey respondents, conducted on messaging apps (Britain n=6; Japan n=4). I developed a coding framework and identified themes. This research has ethical approval.

Findings

I present findings under four themes (what "made sense", social media, family, and time) alongside the images which I created to share findings with the Facebook groups (see Figures 1-5). Quotes are anonymous, used with consent, and referenced by country, ages of children (if known), and source. One

mother described the findings summaries as confirming her "thoughts and anxieties" (Japan, Facebook). Participants were positive about their experience in the research: "I really appreciate you allowing me a forum to say all this stuff!" (Britain, infant and three, interview); "Thank you for listening to me complain!!" (Japan, fifteen, interview); and "It's great to know that I could put into words what many of us were feeling" (Britain, Facebook).

Doing What "Made Sense"

This theme addresses how mothers felt decision making about household division of labour during lockdown/SoE was influenced more by circumstances than preferences (see Figure 1).
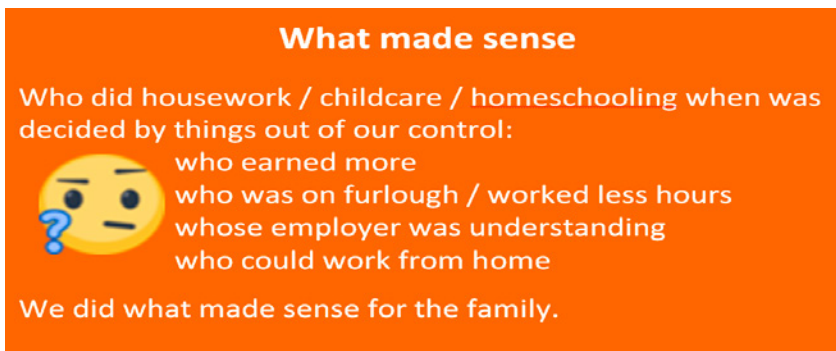

What made sense

Who did housework / childcare / homeschooling when was decided by things out of our control:

who earned more
who was on furlough / worked less hours
whose employer was understanding
who could work from home

We did what made sense for the family.

Figure 1: Findings Summary

Nine of the ten interviewees greatly increased time spent on unpaid care because of their employment situation, with almost two-thirds of survey respondents saying they were primarily responsible for unpaid care. Reasons given for this division of labour include maternity leave, furlough, male partners having to go out to work, and male partners having less flexible employers. These mothers expressed resignation, saying it "made sense," it "fell" to them, and they "didn't have a choice". One mother ran the household, a business, and took care of elderly in-laws as her husband had to go out to work. She, however, found the situation fair: "I am home too so it makes sense" (Japan, fourteen, interview). Others expressed frustration:

> So, before we even had kids (or got married) I was very VERY clear that I would do half and no more. Half the housework, half the childcare. No more. 50/50 or nothing. So, we've been able to maintain something pretty close to than [sic] until the pandemic, when his work became really important, and of course I became the person who had to keep the house running. (Japan, one and five, interview)

> I am a committed believer in gender equality, but I'm finding it so hard to live my beliefs. My work is much more flexible than my husband's, and as a result, I'm running the household and doing most of the associated tasks. Even when I'm not actually doing the tasks, I'm asking him to do them. (Britain, nine, survey)

The ability to negotiate with employers affected family dynamics. Some said husbands found it more difficult to work flexibly: "I'll decline meetings if she [daughter] needs me, or take her out for fresh air. My husband just keeps her in his office and doesn't feel comfortable stepping away from his desk. This has been a source of tension" (Britain, two and pregnant, survey). Another described working full time from home while her husband was an essential worker: "He helped as much as he could and took as many days off as he could, but his work wouldn't cut his hours regularly, so that was hard" (Japan, two and seven, interview). One mother was relieved not have to negotiate with anyone:

> I am thankful I am on mat leave and not trying to work from home and provide childcare as well. I think this would really have put pressure on our relationship in whose work gets prioritised when we both work in high pressure jobs. […] our roles are more conforming to traditional wife/ husband roles but I think that is by virtue of me being off work. (Britain, newborn and two, survey)

Of survey respondents, 9 per cent said their husbands became the primary caregiver in lockdown/SoE out of necessity. However, mothers who did less unpaid care than their partners also experienced feelings of guilt (see theme four). For 10 per cent of the survey respondents, they recognized a shift to more equitable division of unpaid care: "I don't share the childcare with my partner, but he has been doing twice as much as he did before the pandemic" (Japan, school-age, survey). Being at home allowed some fathers to take on some mental load: "The biggest change from the pandemic is him knowing our daughters [sic] routine and growing in confidence to manage it himself and not asking me questions and anticipating her needs more" (Britain, two and pregnant, survey).
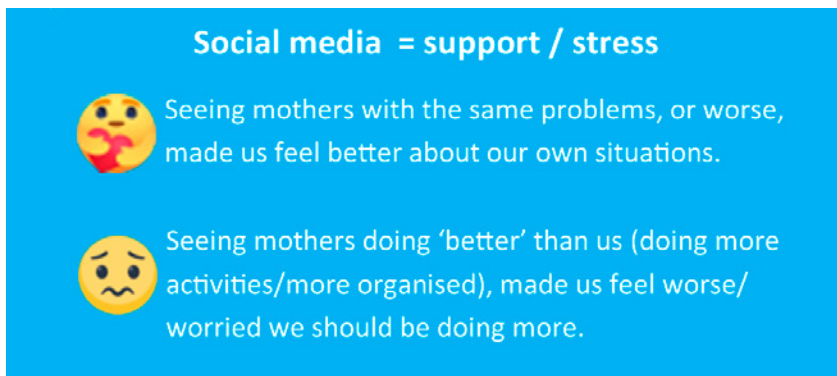
However, all survey respondents in Japan and 97 per cent in Britain said they "know what needs to happen when" for the family; they carried the mental load of whether to do a task. Furlough, reduced work hours, or presence at home for fathers did not always translate into increased carework. Mothers were eager to explain: "It's a massive adjustment for my husband" (Britain, three and nine, survey); "This looks like my partner won't help, but in reality, he just doesn't always know how" (Britain, two, survey); "My husband has a brain full of his work things" (Japan, nine and twelve, survey); "He doesn't enjoy having so much involvement in the childcare, so I feel like I can't ask

him to do anymore" (Britain, one, interview); and, "With a new, breastfed baby, I didn't feel like there was much he could do" (Britain, newborn and three, interview).

Evidently, choices in lockdown/SoE were constrained by circumstances and influenced by gender norms.

Social Media: Support and Stress

During social distancing, the Facebook groups were sources of trusted information and social support. At the same time, mothers got overwhelmed by information that was not always useful and felt inadequate when comparing themselves to others (see Figure 2).

Social media = support / stress

Seeing mothers with the same problems, or worse, made us feel better about our own situations.

Seeing mothers doing 'better' than us (doing more activities/more organised), made us feel worse/ worried we should be doing more.

Figure 2: Findings Summary

Mothers sought trusted information and advice from peers. Of the Facebook posts I reviewed, 60 per cent contained some form of information sharing, and 20 per cent contained a request for information. The associated comments contained official information, personal experiences, advice, humour (including memes), and venting. As the Facebook groups are private, they are conducive to sharing personal experiences. Information posts fell under the following categories: food (e.g., shopping and cooking); education (e.g., homeschooling and early years activities); and health and hygiene (e.g., COVID-19 prevention and testing). The English-speaking mothers in Japan were especially reliant on peer support for finding information in English and for translating information in Japanese to English.

Mothers felt supported by reading posts from others like them who were having similar experiences: "It was comforting to know that other people were feeling a little lost and trying to find solace with other like minded [sic] people" (Britain, two, seven, ten, and pregnant, interview). Another described reading posts on one Facebook group a particularly good source of support, "just from

knowing I'm not alone", but found other groups less helpful because those mothers were having "really different experiences" to her (Japan, two and seven, interview). Mothers recognized they faced different challenges in lockdown/SoE depending on the ages of their children.

Mothers also described being "overwhelmed" and "swamped" by information online: "I'm considering taking myself off FB [Facebook] for the next few weeks, as it is pushing my anxiety levels through the roof. I'm trying so hard to keep calm and carry on until I read yet another 'fact' and then I start to crash" (Britain, Facebook). Another said, "I have started to avoid it [social media]" (Japan, fifteen, interview). Sometimes information did not solve the problem: "I think we have all the tips in the world. But what is actually happening to other mums who have got to fit preschoolers childcare and full time [sic] work?" (Britain, Facebook). Seeing peers online seemingly doing well contributed to guilt and stress:

> Theres [sic] a lot of unspoken competition with parenting, and I think in the pandemic it was sometimes hard to see people who looked like they had it all together (baking, homeschooling, doing activities like camping in the garden, etc.) when sometimes I was just making it though the day (Britain, two, seven, ten, and pregnant, interview).

Mothers used social media to seek and share trusted information from peers but risked information overload. They could validate their own experiences and feel supported but risked developing feelings of failure by comparing themselves to others.

Family: Never Alone, Feeling Alone

The early days of the pandemic were characterized by extreme highs and lows: "Lock down [sic] was a real rollercoaster" (Britain, three, survey). Survey respondents gave three words to describe the lockdown/SoE, and most words described feelings, almost 70 per cent with negative sentiments (see Figure 3). Half of the respondents gave a mixture of seemingly incompatible positive and negative sentiments, for example "stressful, relaxing, scary." It was "enjoyable" yet "monotonous" and "liberating" yet "claustrophobic." The juxtaposition of "family" and "lonely" in Figure 3 speaks to mixed lived experiences on the theme of family.
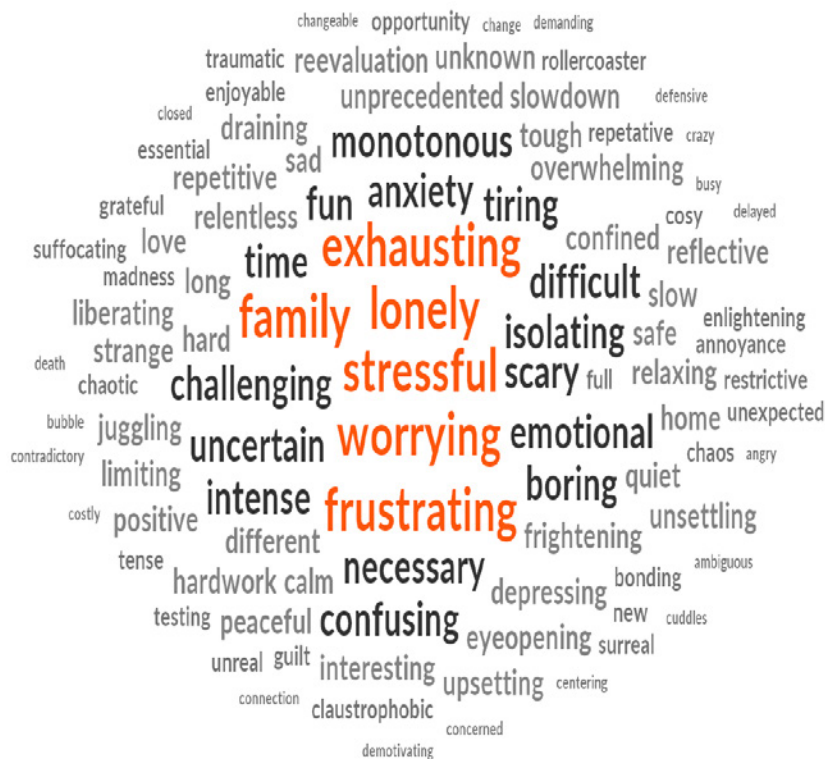
Figure Three: Survey—What Three Words Would You Use to Describe the Lockdown/ SoE?

When asked what positive aspects of the lockdown/SoE (if any) they would like to continue, 67 per cent of respondents living in Britain and 53 per cent in Japan mentioned spending time with family. For some, increased time spent together strengthened family relationships: "Our children are much closer to their father. Previously mum was always the only person they wanted, but now they are asking for Dad to do things with them and wanting to cuddle Daddy" (Britain, survey). Mothers in Japan described increased contact with family members abroad through video calls. However, the Japanese government did not legally require people to stay home and when I shared figure three on Facebook, one mother in Japan commented that her husband had to work in another city so "family" did not describe her experience.

Mothers valued this time with family, but it was also difficult: "Being a mother during the pandemic was intense. There was very little alone time…. It was amazing to have this uninterrupted time together, but it's a double

edged sword" (Britain, two, interview), and "it has been a very strange experince [sic] going from really enjoying spending time with kids to being sick of each others [sic] faces" (Britain, five, survey). Despite never being alone, mothers felt isolated: "Unless I phoned family, there was no interaction outside of the children. It was very lonely a lot of the time" (Britain, three and infant, interview). English-speaking mothers in Japan felt "cut off from the community" while their partners went to work (Japan, two, survey). There were downsides to social media (see theme two), but the Facebook groups were online communities where mothers could connect.

Family: Never alone, feeling alone

We enjoyed being with family (more than we thought). Eating more meals together was great.

We needed a break from family. We felt isolated. Sometimes we just needed support from mum friends (not husbands/partners).
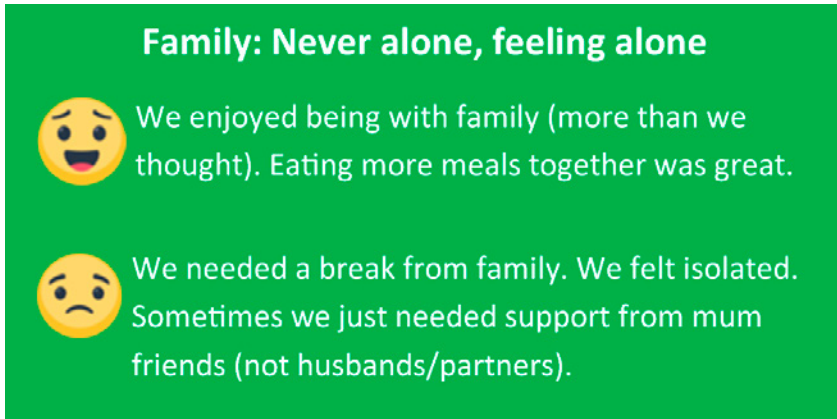
Figure 4: Findings Summary

Overall, deeper connections with family were possible and valued, but mothers still felt lonely and disconnected from external support (see Figure 4).

More Time and No Time

Another dimension of the highs and lows of lockdown/SoE was mothers' experiences of time (see Figure 5).

Mothers enjoyed less "rushing" and "clock watching"; they had fewer commutes, extracurricular activities, and in-person events. Three quarters of survey respondents made positive comments about time. A quarter of survey respondents mentioned they had more time for food-related activities (e.g., family mealtimes, cooking, baking), which they wanted to continue post-pandemic.
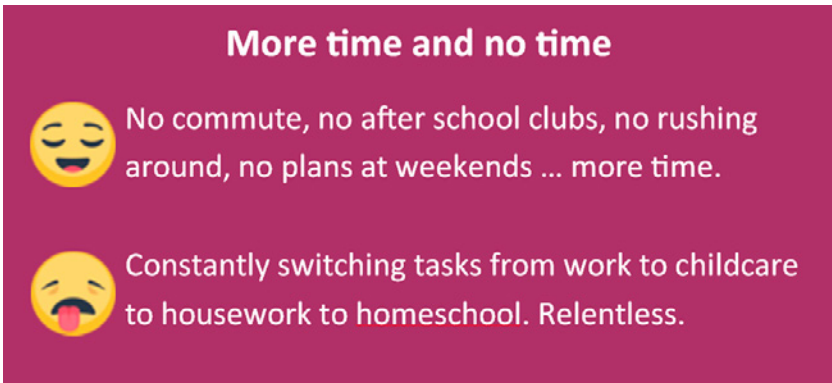
Figure 5: Findings Summary

However, time was also a source of stress, connected to mothers retaining the role of family organizer (see theme one). The indeterminate length of the lockdown/SoE and the pandemic was challenging: "How long will this last? When will life return to 'normal'?" (Japan, nine and twelve, survey) and "It was so hard to plan a structure or rhythm without an idea of the light at the end of the tunnel" (Britain, two, interview). Mothers with paid employment had their working day extended, fragmented, and interrupted: "My working hours are squeezed in early and late while I try to keep the little ones quiet so my partner can have meetings in peace" (Britain, two, four, and sixteen, survey). Another, whose husband went out to work, described a typical day:

> I would work 5am-7am then do breakfast, bath, dress, set up kids [sic] activities, work 10-11 then cook and eat dinners baby would then nap from 12-1:30 so I would work then but [the] older two by this point were always arguing, fighting, bored, annoyed, so it wasn't a pleasant or productive work time … check emails at 4:30pm … bedtime routine from 5:15-7pm … At 7:30pm Id [sic] start work again until 10pm. (Britain, seven, four, and infant, interview)

Time pressure affected mental health: "I can't continue to work with all three or two or even one [children] home and keep my sanity … I already feel beyond breaking point" (Japan, Facebook) and "It's just not possible. I find my mental health quickly deteriorating. I'm a little fed up with pretending it's doable if we have 'good organisation'" (Britain, two under four, Facebook). Mothers saw their careers being harmed: "My colleagues without children had no idea. None" (Japan, one and five, interview). Some parents "tag-teamed" and "muddled through" with no time together as a couple and less time for leisure or sleep: "I just wanted a break! Rather than going from task

to task, work to childcare and housework" (Britain, one, survey).

Family mealtimes were valued, but responsibility for food was time consuming: "Because my partner was working, it fell back on me to arrange food deliveries/work out how to get food into the house (pandemic shopping with child [is] not easy!)" (Britain, two, interview). Another described how food affected her employment:

> Constantly having to make sure there was enough food in the house for the next few days as I didn't feel I could take the kids into the shops, constantly making sure there was food they would both eat, constantly ensuring I didn't miss deadlines at work (I did of course), constantly trying to carve out time for my own work. (Japan, one and five, interview)

Lack of time was linked to guilt: "Guilt—not doing enough work / not spending enough time with children / not helping husband enough" (Britain, two and five, survey). A mother who was the primary earner described "mummy guilt" for not spending more time with her children "Despite seeing them more! I wonder if that is some internal sexism where I feel like i [sic] should be doing more than my partner, or if it's just harder to disconnect at work when it's in the home and they're here too" (Britain, one and four, survey). Another felt guilty for the impact on her husband: "It made my spouse feel vulnerable to take unpaid leave from his work to care for the child, although that was the best decision for the family. I also felt really guilty for the time I took to work, knowing how exhausting all day with a toddler could be" (Japan, survey).

Time was precious and affected mental health. Lack of time caused stress and guilt, but spending time with family was valued. Breaking from routines could be freeing, but mothers also struggled to fit everything into each day.

Discussion

Alongside the lows of "motherhood" were the highs of "mothering" experience (A. Rich). The findings show that mothers did enjoy and value family time, so the narrative of mothering in the pandemic should not be entirely negative (see also Craig and Churchill; O'Reilly; M. Rich; Shibusawa et al; Weaver and Swank). However, the lived experiences of these mothers in Britain and Japan were shaped by circumstances characterized by structural gender inequality and by gender norms, which influenced decision making about the division of labour at home and even how the mothers felt about those decisions.

Cooperative conflict (Sen) was visible in the findings, as mothers described rational decisions for the good of the household within the constraints of their employment and the rules of lockdown/SoE. However, their choices were also

constrained by the social structure of gender (Risman). It "made sense" for mothers on maternity leave, furloughed, with lower-paid or part-time work, or who had been made redundant to take on more unpaid carework and adjust any paid work (Craig and Churchill; Fawcett Society et al.; Yamamura and Tsustsui). Yet it is because they are mothers that they were more likely than their husbands/male partners to be in those situations (Alon et al.; Andrew et al.; Cook and Grimshaw; Yamamitsu and Sieg). Mothers did more unpaid care to the detriment of their careers, long-term earnings, and mental health (Alon et al.; Fawcett Society; Hupkau and Petragolo; Oxfam International; Yamamura and Tsustsui).

The influence of gender norms on what happened to mothers in lockdown/SoE could also be seen in the findings (Agarwal; Ferrer and Parvez Butt). Division of unpaid labour between mothers and fathers cannot be fully explained by working hours or earnings (Andrew et al.). Expectations of mothers as caregivers (Hays) and fathers as ideal workers (Williams) affected how policies were implemented and rules interpreted. For example, some mothers in this research said employers were less accommodating of fathers' unpaid care responsibilities (Cook). During the first lockdown in England, mothers were more likely than fathers to do paid work while supervising children and experienced more interruptions (Andrew et al.). In Japan, if fathers had to be present in the office, then mothers of younger children stayed home (Yamamura and Tsustsui). The UK furlough scheme disproportionately excluded women, and some employers discriminated against mothers in its implementation (Cook and Grimshaw).

Gender norms also affected how mothers felt about the situation. Mothers in this research variously expressed guilt for the following: conforming to traditional gender roles; not being the primary caregiver; failing to reach intensive mothering ideals as displayed on social media (Connolly; Verniers); failing to pass as an ideal worker (Williams); and not being a supportive wife/partner. Work-family guilt connected to gender stereotypes affected mothers more than fathers (Aarntzen et al.). If the father was at home or had reduced work hours, they did not necessarily increase their unpaid carework accordingly (Andrew et al.; Wenham and Herten-Crabb; Yamamura and Tsustsui), and this was often justified by the mothers in this research (see also Fawcett Society et al.). If the father became primary caregiver, the mothers in this research carried the mental load in a context of uncertainty, where being well organized was praised on social media (Connolly).

It was known that "gender inequities exacerbate outbreaks, and responses that do not incorporate gender analysis exacerbate inequities" (Smith para 2) and that the surge in need for carework in the COVID-19 pandemic would disproportionately affect women (Wenham et al.). Yet the British and Japanese governments did not respond with gender-sensitive policies, and the female

caregiver/male breadwinner roles were reinforced (Ferrer and Parvez Butt; Yamamistu and Sieg; O'Reilly).

Working from home was not a gender-transformative government policy in 2020; it was a response to a public health emergency. There was hope that the normalization of flexible working and home working in the pandemic could help shift social norms (Alon et al.; Hupkau and Petrongolo) along with the increased involvement of fathers at home (Andrew et al.). However, the lived experiences of these mothers in Britain and Japan showed how gender norms were often replicated. As we emerge from the pandemic, mothers are still more likely to work from home and/or flexibly in order to do more unpaid carework (Cook; Taylor et al.), risking exclusion from career advancement and lower levels of wellbeing and motivation (Deloitte; Hupkau and Petrongolo).

Although these lived experiences are not generalizable, the findings are consistent with other studies in reflecting the highs and lows of the pandemic (see O'Reilly). I did not measure or control for ethnicity, income, or education level to allow rapid data collection by survey and because it was not feasible to collect that information from the Facebook groups. For Japan, I was only able to review literature published in English.

Conclusion

Gender norms affected mothers' lived experiences of lockdown/SoE in Britain and Japan in their socioeconomic circumstances, division of labour at home, and how they felt about their situation. These findings support the case for gender transformative macrolevel policies and gender-sensitive crisis response designed to mitigate the effect gender norms have on meso and microlevel decision making, ultimately aiming to shift those norms. Even the mothers in this research who held strong beliefs in gender equality found it did not "make sense" to live those beliefs at a time of crisis. Norm change requires policy changes and wider changes in discourse (Cislaghi and Heise). The lower status of care and of females and the enduring association between the two must be dismantled for mothers and fathers to thrive in gender-equal societies around the world.

Endnotes

1. Schools in Japan closed on March 2, 2020. The SoE began on April 16. Most schools reopened by June, but after-school clubs, preschools, and daycares were not fully open until July. Remote working was requested by the government but not permitted by all employers (M. Rich; Yamamura and Tsustsui). Britain went into a legally enforced lockdown on March 23, 2020, which eased in June. Most children did not return to school until September. Only essential workers could travel to work.

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