

“My Husband Thinks I’m Crazy”:  
COVID-19-Related Conflict in Couples with Young Children

Jessica McCrory Calarco, Indiana University, Sociology  
Emily Meanwell, Indiana University, Sociology  
Elizabeth Anderson, Indiana University, Sociology  
Amelia Knopf, Indiana University, School of Nursing

Date: September 23, 2020

Abstract

---

**Objective:** We examine how disruptions related to the COVID-19 pandemic are creating conflicts for couples with young children.

**Background:** National polls suggest that COVID-19 has led to increased conflict for couples in the U.S. Although scholars have not examined the source of these new conflicts, pre-pandemic research suggests that pandemic-related disruptions may create conflicts around paid work and parenting, economic security, politics, and health decision-making.

**Method:** This study uses the Pandemic Parenting Study, a mixed-methods study of Southern Indiana mothers, conducted April-May 2020, and involving surveys (N=139), diary entries (N=104), and in-depth interviews (N=65). We examine mothers’ reports of pandemic-related changes in their frustrations with their partners and how those changes vary with the disruptions couples have experienced during the pandemic. We then use qualitative data to understand how pandemic-related disruptions are generating conflicts for couples and what consequences those conflicts have.

**Results:** A substantial minority of mothers (39%) report pandemic-related increases in their frustrations with their partners. These frustrations are particularly common among mothers whose partners are (reportedly) providing insufficient support with pandemic parenting or dismissing mothers’ concerns about COVID-19. Mothers blame themselves for these conflicts and feel responsible for reducing them, including by leaving the workforce, beginning use of antidepressants, or ignoring their own concerns about COVID-19.

**Conclusion:** The pandemic has exacerbated longstanding sources of conflict (related to partners’ insufficient support with parenting) and created new sources of conflict (related to partners’ dismissals of mothers’ concerns about COVID-19), with serious implications for mothers, families, and public health.

Keywords

---

Relationship conflict; work and family; childcare; health; COVID-19

## Funding and Acknowledgements

---

This project was supported by the Networks, Complex Systems & Health Project Development Team within the ICTSI NIH/NCRR Grant Number UL1TR001108, as well as through Indiana University's Social Science Research Funding Program and Indiana University's Sociological Research Practicum. We are grateful to Jeff Guhin, Amelia Hawbaker, Brea Perry, and Brian Powell for their feedback and support in carrying out this project, as well as to Leo Banks, Katie Beardall, Grayson Bodenheimer, Kinsey Bromm, Caroline Brooks, Callie Cleckner, Max Coleman, Cara Davies, Rachel Desmarais, Emily Ekl, E. Friehe, Natalia Fuentes-Rohwer, Melissa Garcia, Elsie Gasaway, Benjamin Hartmann, Amelia Hawbaker, Monica Heilman, Shanita Hunt, Alisha Kirchoff, Yingjian Liang, Krystina Millar, Katie Orick, Shelly Rao, Nora Weber, Tabi Wilbur, and Chavonté Wright for their assistance with data collection and analysis.

## INTRODUCTION

In the Spring of 2020, U.S. state and local officials issued stay-at-home orders to slow the spread of COVID-19 (Gostin & Wiley, 2020). Those orders helped reduce the pandemic's death toll (Haffajee & Mello, 2020), but they also disrupted many aspects of life. Many workers were furloughed or unemployed (Alon et al., 2020; Moen et al., 2020), and others were pushed into remote work (Brynjolfsson et al., 2020). Meanwhile, school and childcare closures left millions of families scrambling to care for children at home (Garbe et al., 2020).

These disruptions appear to be taking a toll on couples and their relationships. A U.S. national poll in August 2020 found that 10% of married or partnered people are likely to separate because of the pandemic and 30% are experiencing more frequent fights with their partners (Ipsos, 2020). Building on these findings, and focusing on parents with young children, we use a mixed-methods study of Southern Indiana mothers to consider how pandemic-related disruptions may be exacerbating longstanding sources of conflict (e.g., related to parenting and paid work) and also creating new sources of conflict (e.g., related to disagreements about the seriousness of COVID-19).

Understanding pandemic-related partner conflicts is important because conflicts increase the chance of breakup and affect partners' and children's well-being (Amato, 2010; Amato & Cheadle, 2008; Schneider et al., 2016). By identifying key sources of pandemic-related partner conflicts, this study can inform interventions for reducing those outcomes. Understanding pandemic-related partner conflicts is also important for public health. Because transmission of COVID-19 often occurs within households (Li et al., 2020; Omer et al., 2020), couples' disagreements about COVID-19 may put families—and communities—at greater health risk.

## JUSTIFICATION/BACKGROUND

### *Amplifying Existing Conflicts*

Although research has not examined couples' experiences with pandemic-related disruptions, it suggests that such disruptions may exacerbate longstanding sources of relationship conflict.

Economic hardship, for example, is a key source of conflict for couples (Hardie & Lucas, 2010; Papp et al., 2009). The challenges of making ends meet lead to conflict, which lowers relationship satisfaction (Addo & Sassler, 2010; Dew, 2008) and increases intimate partner violence (Schneider et al., 2016) and relationship dissolution (Amato, 2010; Smock et al., 2005; Williams et al., 2015).

The sharing of parenting and paid work is another source of conflict that may be exacerbated by the pandemic. Intensive parenting norms (Elliott et al., 2015; Hays, 1998; Ishizuka, 2018) and limited access to affordable childcare (Ruppanner et al., 2019; Steiber & Haas, 2012) can make it difficult to juggle paid work and parenting (K. Christopher, 2012; C. Collins, 2019; Damaske, 2011; Dow, 2019; Gerson, 1985; Milkie et al., 2019). As a result, U.S. couples often share responsibilities unequally, with mothers disproportionately being stay-at-home parents (Livingston, 2018) and doing an outsized share of parenting, even when they out-earn their male partners (Bianchi et al., 2012; Bittman et al., 2003; Ciciolla & Luthar, 2019; Sayer et al., 2004). Many mothers are dissatisfied with these arrangements, which leads to relationship conflict (Kluwer et al., 1997; Streib, 2015).

Couple conflicts may also be exacerbated by disruptions to families' routines. Research on the transition to parenthood has found that new family responsibilities lead to increased stress and conflict for many couples (Nomaguchi & Milkie, 2003). Similarly, research on unemployment has found that disruptions in work roles lead to conflict within couples and also push women with male partners into more traditional gender roles, regardless of which partner becomes unemployed (Damaske, 2011; Pugh, 2015; Rao, 2017, 2020; Villalobos, 2014).

Research conducted during the pandemic also points to the possibility that these disruptions will exacerbate longstanding sources of relationship conflict. During the pandemic, some couples are reporting a more egalitarian balance of parenting and paid work (Carlson et al., 2020; Lyttelton et al., 2020). That said, other research finds a disproportionate impact on mothers and their careers. Compared to employed fathers, employed mothers have increased their parenting time by more hours and are still spending substantially more time parenting (Krentz et al., 2020). Mothers are also reducing their paid work hours four to five times more frequently than fathers (C. Collins et al., 2020; Krentz et al., 2020; Landivar et al., 2020), and they are more likely to have left the workforce because of the pandemic (Landivar et al., 2020). If mothers find themselves struggling with these disruptions, it may lead to frustrations with their partners, as well.

### *Creating New Conflicts*

Beyond amplifying existing conflicts, the COVID-19 pandemic may also be creating new conflicts for couples. U.S. public responses to the pandemic have been deeply divided, especially along political lines (Gollust et al., 2020). In politically conservative communities, people are less concerned about COVID-19 and less likely to follow social distancing guidelines (Barrios & Hochberg, 2020; Painter & Qiu, 2020). Those partisan debates have also been fueled by the prevalence of misinformation about the virus (Kushner et al., 2020).

In the context of partisan debates and misinformation, some couples may disagree about the seriousness of the pandemic and the steps necessary to reduce risk. Most couples have similar political beliefs (Iyengar et al., 2018; Thomas, 2020). That said, research shows that a substantial minority of couples disagree about politics (Bélanger & Eagles, 2007; Huckfeldt et al., 2004), reflecting, in part, the fact that women's political attitudes skew more liberal than men's (Kellstedt et al., 2010; Manza & Brooks, 1998). With respect to COVID-19, research also shows that women are

taking the pandemic more seriously and taking more steps to prevent its spread (e.g., wearing masks) (Haischer et al., 2020; Kramer, 2020).

Disagreements about COVID-19 may be a source of serious conflict for some couples. Although research has not examined this possibility directly, it does show that couples with different religious views and attendance report more conflict than couples who have similar views and practices (Curtis & Ellison, 2002). Similarly, couples who vote differently report more conflict, less communal orientation, and less relational resilience following the election (Afifi et al., 2020). Some politically liberal women with conservative husbands even feel compelled to hide their political views (van Duyn, 2018). Such findings suggest that disagreements about other ideologized and politicized topics—like the COVID-19 pandemic—may be a source of conflict for couples, as well.

Disagreements about health risks may be especially frustrating for mothers. Mothers are often responsible for “cognitive” labor in families (Daminger 2019), which includes making family health decisions (MacKendrick, 2018; Read & Gorman, 2010; Reich, 2016). If mothers’ partners challenge their COVID-related decisions, that may undermine mothers’ decision-making authority and possibly lead mothers to question their own assessments, as well.

## DATA AND METHODS

### *Data*

Our data come from Wave 1 of the Pandemic Parenting Study (PPS), a novel mixed-methods longitudinal study conducted during the COVID-19 pandemic. The PPS builds off a pre-pandemic study of mothers of young children, the Social Networks and Parenting Study (SNAP). SNAP began in 2018, recruiting pregnant women through prenatal clinics in Monroe County, Indiana and following them from pregnancy for two years postpartum (N=250). All mothers from the SNAP study were invited to participate in the PPS, though a few are no longer living in Southern Indiana.

Wave 1 of the PPS involved three types of data collection: surveys, diaries, and in-depth interviews. Some mothers participated in all three parts; others participated in one or two. Participants received payments for each part. 139 mothers completed the Wave 1 survey, which was fielded between April 1 and April 15, 2020 and asked mothers about their experiences during the pandemic and the impact of the pandemic on their day-to-day lives, including employment, childcare, relationships, routines, decision-making, and well-being. Diary surveys were fielded on April 15, 16, and 17, 2020 and asked mothers to reflect on what they did the previous day, what they experienced, and how they were coping; 104 mothers completed at least one diary. In-depth interviews with 65 mothers were conducted from April 15 through May 7, 2020 and asked mothers to discuss in more depths their experiences, challenges, and coping strategies during the pandemic.

Data collection took place in the early stages of COVID-19's spread across the U.S. As of April 1, when data collection began, there had been only 30 confirmed cases in Monroe County (Indiana State Department of Health, 2020). Despite that small number of cases, however, Indiana's residents were already subject to stay-at-home orders, which remained in place until just before our last week of interviews (Chapman, 2020). As a result, businesses and services (including childcare centers) were closed as we conducted our research, and local schools were implementing remote instruction (Thompson, 2020). At the time, masks were not required in the county or the state, but the CDC began recommending use of facial coverings in public (a reversal of its initial guidance) just two days after we began our study (Dwyer & Aubrey, 2020). Although variations in state and local policies make it difficult to describe an "average" policy response to the pandemic, Indiana's policies do not appear notably different from other nearby states' (Moreland, 2020).

### *Dependent Variable*

Our dependent variable measures pandemic-related changes in mothers' frustrations with their partners. The Wave 1 survey asked "Compared to how often you felt frustrated with your spouse/partner before the COVID-19/Coronavirus pandemic, how often do you feel frustrated with your spouse/partner now?" Response options included much more often, somewhat more often, about as often, somewhat less often, or much less often than before.

### *Independent Variables*

Our key independent variables include factors that may contribute to pandemic-related changes in mothers' frustrations with their partners. That includes pandemic-related disruptions to mothers' paid work and parenting arrangements, pandemic-related changes in mothers' financial stability, partners' support of mothers' steps to manage risks during the pandemic, and differences between mothers' and partners' political views.

*Pandemic-related disruptions to mothers' paid work and parenting.* The Wave 1 Survey asked "How, if at all, has the COVID-19 pandemic affected your paid employment and income?" We recoded these responses into three categories: employed, stay-at-home, and unemployed. Employed mothers have remained employed during the pandemic (though in some cases with reduced hours/pay, and in some cases are using paid time off). Unemployed mothers lost their jobs or were furloughed during the pandemic and had not returned to work at the time of the survey. Stay-at-home mothers were not working for pay pre-pandemic and have remained at home during the crisis. Mothers were also asked "Which of the following best describes the current [pandemic] childcare arrangements for the children in your household?" We recoded responses into two categories: childcare and no childcare. Mothers with childcare were sending children to a center or home daycare, receiving childcare from



a paid sitter/nanny, or receiving regular care (paid or unpaid) from a friend or family member other than their partner. Mothers without childcare were not receiving any of these forms of childcare.

*Pandemic-related changes in mothers' financial stability.* The Wave 1 Survey asked “Compared to how financially secure you felt before the COVID-19 pandemic, how financially secure do you feel now?” We recoded responses into three categories: less secure, as secure, and more secure.

*Partner support of mothers' pandemic risk management steps.* The Wave 1 Survey asked: “How supportive is your spouse/partner of the steps you are taking to prepare for or protect against COVID-19/Coronavirus?” Possible answers included not at all supportive, not very supportive, somewhat supportive, very supportive, and extremely supportive. All mothers selected either somewhat, very, or extremely supportive. Thus, our analyses only include these three categories. Wave 1 also asked mothers to report their own and their partners' level of concern about COVID-19 (ranging from extremely to not at all concerned) and to report which steps they and their partners were taking to manage health risks during the pandemic (e.g., washing hands regularly, wearing a mask in public, limiting trips to public places, avoiding close contact with non-household members).

*Couples' political views.* Wave 1 Diaries asked mothers to report their own and their partners' political ideologies using a slider ranging from 1 (extremely conservative) to 7 (extremely liberal). We calculated the difference between mothers' and partners' ideologies. The maximum difference reported was 5 points. The mean difference was .5 points. We then recoded these differences into three categories: much different views ( $>1.5$  points different), somewhat different views ( $0.6-1.5$  points different), and similar views ( $\leq 0.5$  points different). Wave 1 Diaries also asked mothers to report their own and their partners' political party identifications.

### *Data Analysis*

*Survey Data.* Using mothers' responses to Wave 1 survey questions, we examined mothers' reports of changes in their frustrations with their partners and how those reports varied across groups. Given the small sample size, we present a series of crosstabulations identifying the proportions of mothers reporting each level of frustration. For some key comparisons, we also calculated and present z-scores to test the statistical significance of differences between groups.

*Diary and Interview Data.* Next, we examined mothers' responses for evidence of partner conflicts. We first read and reread the diary entries and then coded the diary entries in Excel. For each entry, we indicated whether the entry mentioned frustrations related to finances, paid work, parenting, politics, or health decision-making. We also highlighted text from each entry that illustrated those conflicts. After coding the diary entries, we sorted the coded entries by mothers' financial status, mother's employment/childcare access, partners' support for mothers' COVID-related risk management steps, and couples' political ideologies. We then reread the grouped, coded entries for evidence of key themes and wrote memos identifying those themes and illustrating them with key examples. We carried out a similar coding process for the interview transcripts.

### *Sample*

Our sample includes mothers who participated in any part of PPS Wave 1. Our quantitative analyses focus on mothers with a spouse or partner at the time of the PPS survey (N=134). Our qualitative analyses include mothers without partners (N=104), as some of these mothers spoke about conflicts they have experienced with former partners while co-parenting during the pandemic. Demographic data for the Wave 1 PPS participants are included in Table 1.

Table 1: Demographic characteristics of mothers in the PPS Wave 1 sample, by participation type

	Survey N	Diaries N	Interviews N
Total	139	104	65
Male partner	132	97	60
Female or other/non-binary partner	2	2	1
No current partner	5	5	4
White, non-Hispanic	125	94	59
Other races/ethnicities (including multiracial)	14	10	6
Advanced Degree	49	40	29
Bachelor's Degree	48	40	21
No Bachelor's Degree	42	24	15
Employed pre-pandemic	82	61	40
Not employed pre-pandemic	48	37	25
Conservative/Conservative-leaning	32	32	22
Liberal/Liberal-leaning	56	59	35
Moderate	10	11	4
Partner Conservative/Conservative-leaning	40	42	28
Partner Liberal/Liberal-leaning	47	48	27
Partner Moderate	6	6	2
Sufficient funds for bills (April 2020)	114	86	59
Insufficient funds for bills (April 2020)	16	11	6
More financially secure now than pre-pandemic	11	8	7
As financially secure now as pre-pandemic	58	41	28
Less financially secure now than pre-pandemic	61	48	30
Receiving government support	29	20	13
Not receiving government support	101	79	52

PPS demographics are consistent with those of Southern Indiana, where initial recruitment took place (U.S. Census Bureau, 2019). Monroe county is roughly 83% white, non-Hispanic; surrounding counties, where some respondents live, are up to 95% white, non-Hispanic. 46% of Monroe County residents ages 25 and over have at least a Bachelor's degree, and 60% of women ages 16 and over are in the labor force. 21% of Monroe County residents live in poverty, and the median household income (in 2018 dollars) is \$47,075. Monroe County is home to Indiana University, with other major industries including healthcare, medical device manufacturing, military, and mining. Politically,

Southern Indiana is divided. In 2016, 59% of Monroe County voters chose Hillary Clinton, and 35% voted for Donald Trump; in the surrounding counties, up to 74% of voters voted for Donald Trump (Politico, 2016). Although the PPS is not representative of the U.S. population, its mixed methods data and its focus on couples in a politically and socioeconomically diverse community makes it useful for understanding how the pandemic may be exacerbating longstanding sources of conflict (e.g., those related to couples' sharing of parenting and paid work) and generating new sources of conflict (e.g., those related to the politicization of health decisions about COVID-19).

## QUANTITATIVE RESULTS

### *Frustrations with Partners regarding Pandemic Health Decision-Making*

39% of mothers in our sample reported that their frustrations with their partners have increased during the pandemic. Meanwhile, only 15% of respondents report experiencing fewer frustrations with their partners than they did pre-pandemic. These findings, in turn, are consistent with national polls showing that more couples are experiencing conflicts in the wake of COVID-19 (Ipsos, 2020).

Examining how pandemic-related changes in partner frustrations vary across mothers, we find that increased partner frustrations are particularly common among employed mothers without childcare. As we see in Table 2, employed mothers without childcare are the only ones (12%) who said they are now much more frustrated with their partners than they were pre-pandemic. This is significantly different than what we see for stay-at-home mothers (0%;  $p < .05$ ). Compared to other groups, employed mothers without childcare are also less likely to report a decrease in frustration with their partner during the pandemic (6% versus 25% for employed moms with childcare, 15% for stay-at-home moms, and 40% for unemployed moms). In this case, the differences between employed moms without childcare and employed moms with childcare, and between employed moms without childcare and unemployed moms are both statistically significant ( $p < .05$ ). The two mothers in our sample with female or other/non-binary partners were both employed without

childcare; one reported that her frustration with her partner was the same as before, and the other reported being somewhat less frustrated now than pre-pandemic.

Table 2: Frequency of mothers' reports of changes in their frustrations with their partners, by employment status and childcare arrangements (Wave 1 Survey)

	Changes in Frequency of Frustration with Partners										
	Much more now			Somewhat more now		Same now as before		Somewhat less now		Much less now	
	N	N	prop	N	prop	N	prop	N	prop	N	Prop
Employment/Childcare											
Employed, childcare	20	0	.00	7	.35	8	.40	4	.20	1	.05
Employed, no childcare	49	6	.12	18	.37	22	.45	2	.04	1	.02
Stay-at-home mom	46	0	.00	15	.33	24	.52	7	.15	0	.00
Unemployed	10	0	.00	3	.30	3	.30	4	.40	0	.00
Total	125	6	.05	43	.34	57	.46	17	.14	2	.02

Second, we find only limited evidence of a link between changes in financial security and changes in mothers' frustrations with partners. As Table 3 shows, the proportion of mothers reporting increased frustration is greater among mothers with reduced financial security than among those with similar or improved financial security (44% vs. 35% vs. 30%), but these differences are not statistically significant. Consistent with these findings, interviews revealed that expanded federal unemployment benefits and CARES Act payments helped reduce some of the economic stress families may have otherwise experienced (e.g., because of job or income loss) during the pandemic.

Table 3. Frequency of mothers' reports of changes in their frustrations with their partners, by mothers' reported changes in family economic security (Wave 1 Survey)

Changes in Economic Security	Change in Frequency of Frustration with Partner						
	More frustrated now than before			About as frustrated now		Less frustrated now than before	
	N	N	prop	N	Prop	N	Prop
More Secure Now than Before	10	3	.30	5	.50	2	.20
As Secure Now as Before	56	20	.36	30	.54	6	.11
Less Secure Now than Before	59	26	.44	22	.37	11	.19
Total	125	49	.39	57	.46	19	.15

Third, the proportion of mothers reporting increased partner frustrations is larger among those whose partners are less supportive of the steps they are taking to reduce COVID-19 risks. As Table 4 shows, increased partner frustrations are more than twice as common among mothers with somewhat supportive partners as they are among mothers whose partners are extremely or very supportive (82% versus 39% and 33%). These differences are both statistically significant ( $p < .05$ ). As noted above, neither of the two mothers in our sample with female or other/non-binary partners reported an increase in frustrations with their partner; both also reported that their partners were “extremely supportive” of their risk-related steps. Thus, all mothers who reported that their partners were only very or somewhat supportive had male partners.

Table 4. Frequency of mothers’ reports of changes in their frustrations with their partners, by partner support for mother’s pandemic steps (Wave 1 Survey)

Partner Support of Mother’s Pandemic Risk-Related Steps	Change in Frequency of Frustration with Partner										
	Much more now			Somewhat more now		Same now as before		Somewhat less now		Much less now	
	N	N	prop	N	Prop	N	Prop	N	Prop	N	Prop
Extremely supportive	78	3	.04	23	.29	37	.47	14	.18	1	.01
Very supportive	36	1	.03	13	.36	19	.53	2	.06	1	.03
Somewhat supportive	11	2	.18	7	.64	1	.09	1	.09	0	.00
Total	125	6	.05	43	.34	57	.46	17	.14	2	.02

Fourth, changes in partner frustrations are only weakly related to political views. As Table 5 shows, among mothers with much different views than their partner, 50% reported an increase in partner frustration, compared to 30% of mothers with somewhat different views and 33% of those with similar views. These differences are not statistically significant at traditional (.05) levels. The two mothers in our sample with female or other/non-binary partners both reported similar political views as their partners (very liberal), meaning that all mothers in our sample whose partners reported different political views had male partners.

Table 5. Frequency of mothers' reports of changes in their frustrations with their partners, by differences in mothers' and partners' political ideologies (Wave 1 Survey; Diary Surveys)

Political Differences	Change in Frequency of Frustration with Partner						
	More frustrated now than before			About as frustrated now		Less frustrated now than before	
	N	N	Prop	N	Prop	N	prop
Much different views	14	7	.50	4	.29	3	.21
Somewhat different views	33	10	.30	19	.58	4	.12
Similar views	42	14	.33	19	.45	9	.21
Total	89	31	.35	42	.47	16	.18

Taken together, these survey results suggest that pandemic-related increases in couple conflicts are likely related to: 1) disruptions in families' paid work and parenting arrangements, and 2) disagreements regarding the steps mothers are taking to reduce risks related to COVID-19. Our next task, then, is to use our qualitative data to understand how these disruptions and disagreements may lead mothers to feel more frustrated with their partners now than pre-pandemic.

## QUALITATIVE RESULTS

### *Frustrations Related to Pandemic Parenting*

In interviews and diaries, mothers who reported increased partner frustrations often linked those frustrations to their partners' (perceived) lack of support with pandemic parenting. These patterns were particularly common among employed mothers without childcare. Vanessa (white, advanced degree) was working full-time from home as a mental health counselor. Meanwhile, at the time of the surveys and interview, Vanessa's husband (white, bachelor's degree) was using paid time off to care for their toddler, before he was scheduled to start a new job in June 2020. Despite not having work responsibilities, however, Vanessa's husband regularly interrupted Vanessa for help:

I'm glad I have a job and all of that stuff, and my company's letting me work remotely, but my husband is staying home for the month, and that is stressful. He's not used to being a stay-at-home parent, and I feel like he struggles understanding

this is my work time, and he thinks I can help parent when I have meetings, and he wants me to help, and there's that conflict and stress.... [It's] hard because I feel like I want to yell at him all the time, and I don't want to really do that, but I don't understand why we can't identify Monday through Thursday 9:00 to 6:00 is my work time. If I'm free, I'll let you know if I have a cancellation... but ultimately I'm working, so I need to be available and especially when I do all of my crisis stuff. So, I don't know if they're going to pop on my screen and be like, "Hey, Vanessa, take this call." or "There's somebody suicidal. You need to talk to them." I can't just be like – "Sorry, I'm teaching my daughter real quick." I can't do that.

Despite not wanting to yell at her husband, Vanessa sometimes became too frustrated not to:

I was in a session earlier today, and [my daughter] comes running in my door, and I was horrified. I'm like [to my patient] – "Oh my gosh, I'm so sorry." Then I went out there, and I was like [to my husband] – "Make sure she doesn't come in! What's wrong with you?" I probably could have handled that a little better, but I feel like we're all so pent up, and there's no stress relief.

Like Vanessa, many of the employed mothers we talked with felt frustrated with the lack of effective support they received from their partners at home.

That imbalance of parenting responsibilities was apparent even in couples where only the mother remained employed. Felicia (white, advanced degree) was working from home in marketing, and her husband (white, some college) was furloughed from his warehouse job, but Felicia has continued to take primary responsibility for housework and childcare. As Felicia wrote in a diary:

My husband is laid off, but I am still working full-time... So we got into a bit of a fight because I felt like he should do more around the house since he is home.



Like Vanessa and Felicia, employed mothers reported feeling frustrated when their partners relied heavily on them to manage pandemic parenting responsibilities, despite not working for pay.

Even when mothers and their partners were both employed and working from home, and even when they tried to share paid work and parenting evenly, mothers often perceived themselves to be doing an unfair share, which then led to frustration with their partners. Natalie and her husband, for example, are PhD students (both white) who have tried to split parenting and work evenly:

We're balancing being at home and getting work done. Usually my husband works during the mornings because that's when he's able to be the most productive, and then I work in the afternoons and he watches our daughter. We kind of just trade off that time... [But] I've taken more of the load of watching our daughter probably just because I'm giving up the most productive time of day so that he can work.... [And my husband is] actually getting a ton done, because I take our daughter in the mornings and he's able to get stuff done, but I kind of have the same issue where 1:00 o'clock hits and I'm like, well it's nap time, even though it's technically my time to work, I would rather take a nap.

Like her husband, Natalie preferred to work in the mornings. Ultimately, however, Natalie deferred to her husband's preferences, taking the morning parenting shift herself. As a result, Natalie was often too tired to get much done during her afternoon work shift, and she frequently ended up staying up late to work instead. As she wrote in a diary entry: "The most challenging part of the day was needing to get work done on a paper, but my husband was "in class" over Zoom so I needed to watch my daughter. I coped with it by staying up later than usual and working up until bedtime." Those challenges, in turn, have taken a toll on Natalie and her relationship with her husband, leading to more frequent conflicts over how best to manage their shared parenting demands.

Despite taking on (or at least feeling as though they have taken on) an unfair share of pandemic parenting, many mothers blamed themselves for feeling frustrated with their partners. Chloe (white, advanced degree) has been working full-time from home in university administration; her husband (white, high school graduate), a manager for a mining company, has continued to work outside the home. As a result, Chloe is also caring for her infant daughter, whose childcare closed:

I get up about 6:30. I shower, I get on my computer and try to get through as many emails as possible until my daughter wakes up between 7:15 and 7:30. I get up, get her dressed, give her a morning bottle. I have my computer set up in our living room at a table. That's where all her toys are. I turn on Sesame Street or kids' videos on YouTube, and then she plays in the living room. Probably about 8:30, I make her breakfast and then while she's eating, I'm trying to work. Then she'll play for a while. It depends on the day right now... how much work I can get done while she's playing versus how much attention she needs from me. She goes down again about 11:30, usually sleeps until about 1:00... I'll fix her lunch. I'll try to answer some emails during that time. I have a team Zoom meeting at 3:00 o'clock. Usually she's in my lap messing with stuff during that. My husband has been going into work earlier so that he can get off a little earlier. He's usually home between 3:30 and 4:00, and then I try to work. He takes over child care during that time, and I try to work till about 5:30, and then we prep [our daughter]'s dinner, get her ready for bed, get her down for bed, and then we eat dinner. Depending on the day, I might try to do some more work. Sometimes I'm just exhausted, and I just zone out in front of the TV for an hour, and then I try to be in bed by 9:30.

Chloe went on to describe how that schedule limits the time and attention she has for her husband:

The hardest part has been not feeling as productive and as successful in any area. I end most of my days feeling like I didn't get enough work done and I didn't give enough attention to my daughter. That's been the hardest part. Let alone I'm not giving any attention to my husband.

Rather than blame the pandemic, Chloe and other mothers blamed themselves for the partner conflicts they were experiencing. Recall Vanessa saying “I probably could have handled that better” and Natalie blaming herself for wanting to sleep at nap time. Such guilt is consistent with other research showing that employed mothers in the U.S. often hold themselves accountable for the challenges they face in balancing work and family demands, even when those challenges are far beyond their control (K. Christopher, 2012; C. Collins, 2019; Damaske, 2011; Gerson, 1985).

Although stay-at-home mothers also reported doing a disproportionate share of pandemic parenting, they generally did not describe parenting as a source of increased conflict. A few stay-at-home mothers described minor frustrations related to keeping their children quiet while their partners were working from home. In most cases, though, stay-at-home mothers said the pandemic has not substantially disrupted their family's paid work and childcare arrangements and thus has not generated more parenting-related partner conflicts. That includes Lisa (Hispanic, advanced degree), a stay-at-home mother with three children, who was homeschooling pre-pandemic. Lisa's husband (white, advanced degree) is an editor who began working from home during the pandemic:

I'm the one that's primarily at home. I'm the one that's educating the children and things like that, doing most of that work. It hasn't changed a whole lot. In fact, that's good in general, and on purpose to kind of keep the routine and keep the structure and not just turn everything upside down for the kids. In some ways it's nicer having my husband at home because if there is something, then he's right there.

Like other stay-at-home mothers, Lisa did experience frustrations during the pandemic, but having her husband working from home actually helped to alleviate those frustrations. As Lisa explained:

Without having things like play dates, where I would get out of the house more, I think maybe two or three weeks in, there was one day where I was just like, “Ahhh! I need to have some space!” And so since then [my husband has] been really conscious to, like, there was one or two nights where he was like, “You know what, I’ll just take the kids out for a walk and then you can have some time alone.”

Like Lisa, stay-at-home mothers tended not to report substantial increases in their frustrations with their partners, especially if their partners were working from home and thus able to provide even small amounts of parenting support.

#### THE CONSEQUENCES OF CONFLICTS AROUND PANDEMIC PARENTING

Pandemic parenting conflicts appear to be taking a serious toll on mothers and their relationships. In some cases, mothers have cut back their work hours or left the workforce to reduce conflicts. Pre-pandemic, for example, Erica (white, advanced degree) was working part-time as a data analyst, and her husband (white, bachelor’s degree) was working full-time in marketing while going to graduate school. When the pandemic hit, Erica’s first-grader’s school closed, as did the childcare center/preschool that her one-year-old and four-year-old attended (though Erica has continued paying for care to guarantee access when they reopen). As a result, Erica is now (according to her) primarily responsible for parenting, even during her paid work hours (two hours, three days a week). That disproportionate share of the pandemic parenting has led Erica to consider dropping out of the workforce, at least temporarily. As she explained: “I might ask my boss if I could take a couple months off for the summer because it’s just really hard to do.... It doesn’t feel worth it to have the money continue.” For mothers like Erica, the lack of support they received from their partners with pandemic parenting, and the frustrations that stemmed from that lack of

support, made dropping out of the workforce (at least temporarily) seem like a better option than continuing to juggle paid work and parenting at the same time.

Because of conflicts around pandemic parenting, other mothers found childcare, despite the health risks. Sydney (white, some college), for example, works in retail; her husband is a technician (white, associate's degree), and they have three children—two school-aged (children from Sydney's husband's previous relationship) and a one-year-old who attended a childcare center pre-pandemic. Early in the pandemic, Sydney's husband was working from home, but Sydney cut back on her work hours to care for her one-year-old and help the older children with e-learning. Because of those new arrangements, Sydney reported being “much more frustrated” with her partner. Sydney noted in a diary that the only enjoyable part of her day was “just being able to be back at work” rather than with her family. To reduce those frustrations, Sydney eventually asked her mother to provide full time childcare. By the time we interviewed Sydney in May, she and her husband had been receiving childcare for a few weeks, and their conflicts had (according to Sydney) markedly improved. At the same time, however, Sydney worried about the possibility of exposing her mother to COVID-19, noting “[my] parents don't really have any underlying health conditions, so I'm not too concerned, but I'm still being precautious because I do work [outside the home], so the risk is there.”

For some mothers, pandemic-parenting partner conflicts have been serious enough to harm mothers' physical and mental health and require intervention from mental health professionals, as well. At the beginning of the pandemic, Audrey (white, bachelor's degree) lost her retail job and her toddler's childcare center closed. Meanwhile, Audrey's husband (white, associate's degree), a healthcare worker, continued working outside the home and worked longer hours than usual, leaving Audrey as the primary caregiver. Those disruptions led to frequent conflicts:

I think some of it was that he didn't really know how to deal with the stress of his job [during the pandemic] and took it out on me and took it out on us. Not in, like,

an abusive way. Just grumpy all the time he was home. And not thoughtful or considerate and acting like he didn't wanna spend time with us. So that was part of it.... With [my husband] and I, it's either really good or really bad and there's not really a lot of in between. We don't spend that much time together because he's very busy, and then when we do, we play board games for a while sometimes, or just pretty much ignore each other because we know we're going to get into a fight, just because that's how the day has been.

Before the pandemic, Audrey and her husband were trying to have another baby. In part because of their fights, however, Audrey decided she was not ready for another baby. And yet, Audrey reports her husband ignored her desires and impregnated her without her consent. As Audrey explained:

We had started thinking about trying to get pregnant and kind of trying to get pregnant... [Then] the pandemic hit. I decided that I don't want to have a baby right now. I didn't feel like I was ready to deal with that again at the moment. And I think I said that to [my husband] multiple times that I wasn't ready to have another baby yet. And I know I at least asked him specifically to just always pull out during sex until I said otherwise. Which was usually something he would ask during sex if he didn't know for sure. And then he just didn't ask. And I happened to be ovulating. And [pulling out] was something that I had specifically asked him to do. So I think the term sexual assault is appropriate... Because it's very clear that it wasn't something I was okay with. It wasn't something that I consented to.

Faced with unemployment, an unintended pregnancy, and serious challenges in her relationship with her husband, Audrey began experiencing depressive symptoms. As Audrey explained:

[My husband] and I were fighting a ton... when the pandemic hit. And that was awful. It was a real bad time. And that kind of resulted in me getting pregnant.

Which was also awful. But things are finally starting to even out a little bit. With a combination of antidepressants, therapy.... I had started therapy for the first time last year. I've always struggled with anxiety and depression and then between having [my daughter] and being home all the time it just wasn't a good mix. So I started therapy last year. And then I started it again when I got pregnant again because it was really, really messing with my mental health. And I've started an antidepressant as well because I was in bad shape. And those things have helped a lot.... We're gonna start marriage therapy within the next few months. It has not been a good time. But I'm at the point where I think it will get better.

Because of her husband's income and access to health insurance, Audrey has been able to get the care and medication she needs. As a result, and despite the challenges they have faced, Audrey is hopeful about the future of her relationship with her husband. At the same time, Audrey also acknowledged later in the interview that her other options are limited, because she and her daughter rely on her husband for all their financial support.

### *Frustrations Related to Pandemic Decision-Making*

In addition to conflicts around pandemic parenting, some mothers also reported frustrations related to their partners' (perceived) dismissals of their concerns around COVID-19. Those frustrations were particularly common among mothers reporting gaps between their own political views and those of their partners. Jillian (white, advanced degree), for example, works as an ICU nurse and identifies as "Independent, near Republican." Her husband (white, high school graduate) works in a manufacturing plant, and Jillian identifies him as a "Strong Republican." When asked how serious she thinks the virus is and how serious of a threat it poses to the community, Jillian immediately noted the difference between her perception and her husband's saying:

It's very serious virus and very serious threats. My husband, God love him, kept going on about how the flu kills more people and I say "No, but we test more people for the flu, one, so that's why there are more cases and two, the flu doesn't typically kill you if you're healthy." It can, I mean, but it doesn't kill as fast.... My husband thinks I'm crazy, but I'm glad that they shut down concerts and sporting events. I'm glad that they shut down what they shut down when they did because I think it could be a thousand times worse but I also agree that we need to slowly open our economy back up. He is ready for things to open back up. He's bored. He thinks we need to open the economy back up.

Jillian and her husband also disagreed about the necessity of masks:

I think they're going to start making [my husband] wear [masks] at work when they start bringing hourly people back. [And he is] kind of griping about them, [but] I don't even want to hear it because we wear them 12 or 13 hours a day at work."

As an ICU nurse, Jillian had seen, first-hand, the deaths of patients with COVID-19. As an ICU nurse, Jillian also fully understands the science around COVID-19 and the importance of wearing masks and taking other protective steps to stop the spread of the virus. Jillian's husband, however, dismissed her concerns, seeing her ideas as "crazy," instead. Those dismissals, in turn, were a source of frustration for Jillian in her day-to-day interactions with her spouse.

Like Jillian, other mothers also reported feeling frustrated when their partners dismissed their COVID-related concerns. Cassidy (white, bachelor's degree) noted that when it comes to health matters, she is more "rigid" while her husband (mixed race, bachelor's degree) is more "relaxed." Those disagreements have been a source of conflict during the pandemic:

He's very like – 'I'm not going to give into fear, and I'm not going to get all worked up about this.' [But] sometimes I'm like – 'No, I'm afraid.' I'm the type of person



like I want to feel what I'm feeling. I don't want to be told not to feel what I'm feeling, but then after I'm done feeling it, then let's move forward. That type of thing. So, we're a little bit different in that area, so that has caused some conflict.

Like Cassidy, mothers whose partners dismissed their concerns about COVID-19 experienced those dismissals as a rejection not (just) of the science around the pandemic but of their feelings and fears. That sense of rejection, in turn, led frustration and conflict for those mothers.

Some divorced mothers also reported frustrations with their former partners' dismissal of their concerns about the pandemic. Denise (white, advanced degree) described how her ex-husband (white, advanced degree) is taking the virus less seriously than she does, noting:

My ex-husband still sometimes will see [friends] inside his apartment. When I take [our son] for a walk I only let [our son] get out of the stroller to run around in a grassy space where there's nobody else around. [My ex] will let [our son] get on playground equipment, because his rationale is that nobody else is allowed to get on the playground equipment, so the playground equipment ought to be clean.

Denise went on to describe disagreements with her ex about managing risks during the pandemic:

I do not agree with this playground strategy. I asked a few questions, but ultimately he's responsible for decision-making for [our son] when [our son] is with him. I asked questions, as a way to express my concerns, but left it at that. There are some people in my life that feel I should be fighting for [my son] not to be visiting his father right now, to keep him in within one house. Especially because his father has laxer concerns than I do. But I have just accepted that, mostly because of legal issues, have just decided to accept that, to absorb that risk, as sort of the amount of risk that we are, that I'm able for us to endure during this.

Because of her ex-husband's laxness, Denise wanted to keep her son at home. Ultimately, however, and to avoid breaking legal custody agreements, Denise allowed her son to continue visiting her ex.

Although most conflicts around pandemic decision-making stem from mothers' efforts to get their partners or ex-partners to take COVID-19 more seriously, a few mothers reported frustrations with their partners' efforts to get them to take more protective steps. In these cases, however, mothers' frustrations stemmed not from a lack of concern about COVID-19 but from the added burden of risk management. As Alana (Hispanic, advanced degree) wrote in an open-ended survey response:

In my last conversation with my partner, we disagreed about the extent to which we needed to clean boxes and other containers that we received from a grocery delivery.

I agreed that it needed to be done, but he spent more than an hour doing so.

As Alana's comment suggests, her frustration with her husband (Hispanic, advanced degree) stemmed not from disagreement about the seriousness of the pandemic but rather the time he spent cleaning the groceries—time Alana spent watching their toddler, instead. Similarly, Heather (white, some college), a stay-at-home mother with five children, told us that her husband (white, some college), who was still working outside the home (in construction), offered to live in their camper to avoid the possibility of getting anyone in the household sick. Heather decided against it (though she was very concerned about COVID-19), as she did not want to be solely responsible for parenting 24 hours a day. As with Alana and Heather, when mothers felt frustrated with partners' efforts to take more protective steps, those frustrations stemmed less from a lack of concern about the virus than from the added burden (especially the added parenting burden) those extra steps created for them.

#### THE CONSEQUENCES OF CONFLICT OVER PANDEMIC DECISION-MAKING

Conflicts over pandemic decision-making have had real consequences for mothers, their relationships, and public health. Faced with pushback from their partners, some mothers began

doubting themselves and their beliefs about the seriousness of the pandemic. Anna (white/Asian, advanced degree, not strong Republican) described how her husband (white, advanced degree, Republican) dismissed her concerns about the virus and how she has responded, noting:

He's a little more immune to the media hype. He has a little more of a skeptical ask questions [approach]. "Is this really true? I should look into it." He's better at filtering through the emotional stuff and I'm a lot more prone to feeling the emotions.... I think [the pandemic has] just given us a lot more opportunity to just work together more and learn to trust my husband with his decisions... so that we don't just start nitpicking each other for no reason.

Rather than get into arguments with her husband, Anna has instead tried to "learn to trust [her] husband with his decisions." As a result, mothers like Anna have ended up deferring to their husbands' less cautious preferences, even when science was on their side.

Meanwhile, mothers who held their ground in such disagreements have had to take on the work of managing risk. Maureen (white, some college), for example, reported that her husband thought she was being "overdramatic" about COVID-19:

When this stuff first started, I think my husband thought I was being a little bit overdramatic maybe and panicky because that's naturally what I do. That's me. We are not fans of President Trump, but I think when he saw that President Trump was taking it seriously after kind of downplaying it for the weeks prior, that made him realize that it was a big deal. We had a little bit of different ideas of stuff, but he came around eventually. I was overly cautious, and I'm glad I was now. At the very beginning, I was able to buy a few weeks' worth of formula, and if I didn't take it as seriously, then we would have been without formula for a couple of weeks.

Maureen's husband "came around eventually," but in the meanwhile, the work of preparing for the pandemic fell to Maureen. That included stocking up on special formula her daughter drinks because of allergies, as well as toilet paper and cleaning supplies. It also included donating personal protective equipment from their family plumbing business to local senior centers and hospitals.

Faced with these dismissals, some mothers continued trying to persuade their partners to take more protective steps. Although these mothers were sometimes successful, the process created a great deal of frustration. In April 2020, Bianca (white, some college) reported that her husband was not wearing a mask in public, not regularly washing his hands, and only "somewhat supportive" of steps she was taking to manage COVID-19 risks. In an interview in May, Bianca described how she eventually persuaded her husband (Asian, advanced degree) to wear a mask:

It was a process, because especially while he was still working [outside the home], I don't think he was taking it as seriously as I was. Still going to the stores just to look for things he wanted and working on projects here and then running out to the store for little things. No mask or gloves or anything.

Ultimately, Bianca was able to persuade her husband to start wearing a mask and taking fewer trips to the store. Despite those changes, however, Bianca also told us that, as of May, her husband was still not washing his hands regularly (he prefers to wear gloves to the store), and that he was much more eager than she was to get back to normal social interactions.

## DISCUSSION

The disruptions that COVID-19 has caused to work and family life appear to be taking a serious toll on couples and their relationships (Ipsos, 2020). Focusing on couples with young children, and drawing evidence from a mixed-methods study of Southern Indiana mothers, we examine how pandemic-related disruptions have contributed to relationship conflict. We find that a substantial proportion of mothers are more frustrated with their partners now than pre-pandemic,

reflecting both the exacerbation of longstanding sources of conflict (related to partners' insufficient support with parenting) and the creation of new sources of conflict (related to partners' dismissals of mothers' concerns about COVID-19). These conflicts have serious consequences—pushing some mothers to leave the workforce, take antidepressants, and doubt their concerns about COVID-19—and also important implications for research and policy.

First, our research suggests that the pandemic has amplified longstanding conflicts around parenting responsibilities. With schools and childcare centers closed, many mothers report doing a disproportionate share of pandemic parenting (C. Collins et al., 2020; Krentz et al., 2020; Landivar et al., 2020). As we see here, those responsibilities are taking a toll not only on mothers' careers (C. Collins et al., 2020; Krentz et al., 2020; Landivar et al., 2020) but also on their relationships. These added parenting responsibilities appear to be highly detrimental to the relationships of employed mothers without childcare, even if their partners have not been working for pay.

Second, our findings reveal that mothers blame themselves for partner conflicts over pandemic parenting. Prior research finds similar self-blame around mothers' struggles to balance paid work and parenting (K. Christopher, 2012; C. Collins, 2019; Damaske, 2011; Gerson, 1985). Self-blame is problematic, however, in that (at least from mothers' accounts) their pandemic-related parenting conflicts have been driven largely by partners' failure to provide adequate parenting support. Despite fathers' perceived failure, however, mothers are the ones working to address these conflicts. In some cases, that means finding outside childcare (despite the health risks). In other cases, that means sacrificing their own paid work or sleep to meet their children's and partners' needs at home.

Third, we find that COVID-19 may be creating new sources of challenges for couples by leading some partners to question mothers' concerns about the seriousness of COVID-19. These findings reveal the consequences of political (Barrios & Hochberg, 2020; Gollust et al., 2020; Kushner et al., 2020; Painter & Qiu, 2020) and gender (Haischer et al., 2020; Kramer, 2020) gaps in

attitudes about COVID-19. Specifically, and like other pre-pandemic research (Afifi et al., 2020; Bélanger & Eagles, 2007; Huckfeldt et al., 2004; van Duyn, 2018) we find that disagreements about politicized topics like the COVID-19 pandemic can be a serious source of conflict in families.

Fourth, we find that the politicization of science disrupts families' health decision-making processes and increases exposure to risks. Mothers often take primary responsibility for family health decision-making (MacKendrick, 2018; Read & Gorman, 2010; Reich, 2016), with men ceding that "cognitive" labor to (female) partners (Daminger, 2019). As we see here, however, a substantial minority of fathers appear to be questioning mothers' views of the pandemic and challenging mothers' efforts to keep themselves and others safe. Although some mothers described successfully persuading their partners to take the pandemic more seriously, other fathers continued to dismiss mothers' requests and concerns. In some cases, fathers even convinced mothers to doubt their own fears about the virus and take it less seriously, thereby putting their families and communities at risk.

This study is not without limitations. Our participants are primarily white, non-Hispanic; most hold at least a bachelor's degree. Thus, our participants' experiences may be different from those of other mothers. Black mothers, for example, are often embedded in kin networks that provide support with childcare (Brewster & Padavic, 2002; P. H. Collins, 2005; Dow, 2016, 2019; Gerstel, 2011; Radey & Brewster, 2007; Sarkisian & Gerstel, 2004), and they may experience their roles as workers and mothers as more "integrated" than conflicting (P. H. Collins, 2005; Dow, 2016, 2019). As a result, pandemic parenting demands may impact Black mothers and their partners differently than they do white mothers. Furthermore, and with respect to pandemic decision-making conflicts, polls suggest that white people's attitudes about COVID-19 are more varied than those of people of color (Gecewicz, 2020; Igielnick, 2020). Thus, mothers of color could differ from white women in the extent to which disagreements about COVID-19 are creating new sources of partner conflicts.

Our study is also limited in its reliance on mothers' reports. Couples may have differing accounts of their contributions to domestic labor (E. Christopher, 2020; Lee & Waite, 2005; Press & Townsley, 1998; Vagni, 2019), and some research suggests that male partners report higher levels of involvement in pandemic parenting than their female partners report for them (Carlson et al., 2020). As scholars have argued, however, it may ultimately be partners' perceptions of time that matter more than actual time in determining how time is experienced (E. Christopher, 2020). Similarly, and as shown here, perceptions of time may contribute to conflicts in couples, as well.

Despite these limitations, our study contributes to the literature by identifying key sources of pandemic-induced conflicts and their implications for couples, families, and public health. This is critical for informing interventions to support couples and their children. Frequent and serious relationship conflicts increase the risk of relationship dissolution and intimate partner violence (Amato, 2010; Clements et al., 2004; DeMaris, 2000; Michalski, 2005; Schneider et al., 2016) and are also detrimental for children (Amato & Cheadle, 2008). Thus, interventions to alleviate pandemic-related couple conflicts are necessary to reduce the harm of the pandemic, both on people's physical health (by encouraging compliance with guidelines) and also on couples' and children's well-being.

Such interventions are especially important for mothers like Audrey, for whom the pandemic may make difficult or dangerous relationships harder to escape. Women are more able to leave relationships if they are financially independent (Rogers, 2004; Sayer & Bianchi, 2000). To give mothers like Audrey the option to leave difficult or dangerous relationships, policymakers should ensure that women have access to financial resources that are not tied to or predicated on employment. This could mean making TANF less restrictive, funding universal healthcare, and also extending the expanded unemployment benefits put in place through the CARES Act of 2020.

In addition to long-term financial interventions, short-term interventions are also necessary to alleviate couples' pandemic-related conflicts. First and foremost, policymakers should take steps to

stop the spread of the virus and make it safe to reopen schools, childcare centers, and businesses. Such solutions will be difficult to achieve, however, given politically entrenched disagreement about COVID-19 (Barrios & Hochberg, 2020; Gollust et al., 2020; Kushner et al., 2020; Painter & Qiu, 2020). Thus, specific steps may also be necessary to reduce parenting and decision-making conflicts. In terms of parenting, that could include paying workers to stay home and not work or ensuring that all families have access to affordable childcare during the pandemic. In terms of decision-making conflicts, potential solutions could include clear, scientifically-informed communications from political and public health leaders about the steps necessary to reduce the spread of the virus. As mothers like Cassidy suggested, seeing leaders like President Trump take the pandemic seriously can ultimately persuade fathers that the pandemic is “a big deal.”

#### REFERENCES

- Addo, F. R., & Sassler, S. (2010). Financial Arrangements and Relationship Quality in Low-Income Couples. *Family Relations*, 59(4), 408–423.
- Afifi, T. D., Zamanzadeh, N., Harrison, K., & Torrez, D. P. (2020). Explaining the impact of differences in voting patterns on resilience and relational load in romantic relationships during the transition to the Trump presidency. *Journal of Social and Personal Relationships*, 37(1), 3–26.
- Alon, T., Doepke, M., Olmstead-Rumsey, J., & Tertilt, M. (2020). *The Impact of COVID-19 on Gender Equality* (Working Paper No. 26947; Working Paper Series). National Bureau of Economic Research.
- Amato, P. R. (2010). Research on Divorce: Continuing Trends and New Developments. *Journal of Marriage and Family*, 72(3), 650–666.
- Amato, P. R., & Cheadle, J. E. (2008). Parental Divorce, Marital Conflict and Children’s behavior Problems: A Comparison of Adopted and Biological Children. *Social Forces*, 86(3), 1139–1161.
- Barrios, J. M., & Hochberg, Y. (2020). *Risk Perception Through the Lens of Politics in the Time of the COVID-19 Pandemic* (Working Paper No. 27008; Working Paper Series). National Bureau of Economic Research.
- Bélanger, P., & Eagles, M. (2007). Partisan Cross-Pressure and Voter Turnout: The Influence of Micro and Macro Environments\*. *Social Science Quarterly*, 88(3), 850–867.



- Bianchi, S. M., Sayer, L. C., Milkie, M. A., & Robinson, J. P. (2012). Housework: Who Did, Does or Will Do It, and How Much Does It Matter? *Social Forces*, 91(1), 55–63. Bittman, M., England, P., Sayer, L., Folbre, N., & Matheson, G. (2003). When Does Gender Trump Money? Bargaining and Time in Household Work. *American Journal of Sociology*, 109(1), 186–214.
- Brewster, K. L., & Padavic, I. (2002). No More Kin Care?: Change in Black Mothers' Reliance on Relatives for Child Care, 1977-94. *Gender & Society*, 16(4), 546–563.
- Brynjolfsson, E., Horton, J. J., Ozimek, A., Rock, D., Sharma, G., & TuYe, H.-Y. (2020). *COVID-19 and Remote Work: An Early Look at US Data* (Working Paper No. 27344; Working Paper Series). National Bureau of Economic Research.
- Carlson, D. L., Petts, R., & Pepin, J. R. (2020). *US Couples' Divisions of Housework and Childcare during COVID-19 Pandemic* [Preprint]. SocArXiv.
- Chapman, L. (2020). Holcomb Extends Indiana Stay-At-Home Order By 2 Weeks. *Indiana Public Media*. <https://indianapublicmedia.org/news/holcomb-extends-indiana-stay-at-home-order-by-2-weeks.php>
- Christopher, E. (2020). Capturing Conflicting Accounts of Domestic Labour: The Household Portrait as a Methodology. *Sociological Research Online*, 1360780420951804.
- Christopher, K. (2012). Extensive Mothering: Employed Mothers' Constructions of the Good Mother. *Gender & Society*, 26(1), 73–96.
- Ciciolla, L., & Luthar, S. S. (2019). Invisible Household Labor and Ramifications for Adjustment: Mothers as Captains of Households. *Sex Roles*, 81(7), 467–486.
- Clements, M. L., Stanley, S. M., & Markman, H. J. (2004). Before They Said "I Do": Discriminating Among Marital Outcomes Over 13 Years. *Journal of Marriage and Family*, 66(3), 613–626.
- Collins, C. (2019). *Making Motherhood Work: How Women Manage Careers and Caregiving*. Princeton University Press.
- Collins, C., Landivar, L. C., Ruppanner, L., & Scarborough, W. J. (2020). COVID-19 and the gender gap in work hours. *Gender, Work & Organization*, n/a(n/a).
- Collins, P. H. (2005). Black Women and Motherhood. In S. Hardy & C. Wiedmer (Eds.), *Motherhood and Space: Configurations of the Maternal through Politics, Home, and the Body* (pp. 149–159). Palgrave Macmillan US.
- Curtis, K. T., & Ellison, C. G. (2002). Religious Heterogamy and Marital Conflict: Findings From the National Survey of Families and Households. *Journal of Family Issues*, 23(4), 551–576.
- Damaske, S. (2011). *For the Family?: How Class and Gender Shape Women's Work* (Illustrated Edition). Oxford University Press.
- Daminger, A. (2019). The Cognitive Dimension of Household Labor. *American Sociological Review*, 84(4), 609–633.

- DeMaris, A. (2000). Till Discord Do Us Part: The Role of Physical and Verbal Conflict in Union Disruption. *Journal of Marriage and Family*, 62(3), 683–692.
- Dew, J. (2008). Debt Change and Marital Satisfaction Change in Recently Married Couples\*. *Family Relations*, 57(1), 60–71.
- Dow, D. M. (2016). Integrated Motherhood: Beyond Hegemonic Ideologies of Motherhood. *Journal of Marriage and Family*, 78(1), 180–196.
- Dow, D. M. (2019). *Mothering While Black*. University of California Press.
- Dwyer, C., & Aubrey, A. (2020). CDC Now Recommends Americans Consider Wearing Cloth Face Coverings In Public. *NPR.Org*.
- Elliott, S., Powell, R., & Brenton, J. (2015). Being a Good Mom: Low-Income, Black Single Mothers Negotiate Intensive Mothering. *Journal of Family Issues*, 36(3), 351–370.
- Garbe, A., Ogurlu, U., Logan, N., & Cook, P. (2020). Parents' Experiences with Remote Education during COVID-19 School Closures. *American Journal of Qualitative Research*, 4(3), 45–65.
- Gecewicz, C. (2020). *Amid pandemic, Black and Hispanic worshippers more concerned about safety of in-person religious services*. Pew Research Center.
- Gerson, K. (1985). *Hard Choices: How Women Decide About Work, Career and Motherhood*. University of California Press.
- Gerstel, N. (2011). Rethinking Families and Community: The Color, Class, and Centrality of Extended Kin Ties<sup>1</sup>. *Sociological Forum*, 26(1), 1–20.
- Gollust, S. E., Nagler, R. H., & Fowler, E. F. (2020). The Emergence of COVID-19 in the U.S.: A Public Health and Political Communication Crisis. *Journal of Health Politics, Policy and Law*.
- Gostin, L. O., & Wiley, L. F. (2020). Governmental Public Health Powers During the COVID-19 Pandemic: Stay-at-home Orders, Business Closures, and Travel Restrictions. *JAMA*, 323(21), 2137–2138.
- Haffajee, R. L., & Mello, M. M. (2020). Thinking Globally, Acting Locally—The U.S. Response to Covid-19. *New England Journal of Medicine*, 382(22), e75.
- Haischer, M. H., Beilfuss, R., Hart, M. R., Opielinski, L., Wrucke, D., Zirgaitis, G., Uhrich, T. D., & Hunter, S. K. (2020). Who is wearing a mask? Gender-, age-, and location-related differences during the COVID-19 pandemic. *MedRxiv*, 2020.07.13.20152736.
- Hardie, J. H., & Lucas, A. (2010). Economic Factors and Relationship Quality Among Young Couples: Comparing Cohabitation and Marriage. *Journal of Marriage and Family*, 72(5), 1141–1154.
- Hays, S. (1998). *The Cultural Contradictions of Motherhood*. Yale University Press.

- Huckfeldt, R., Mendez, J. M., & Osborn, T. (2004). Disagreement, Ambivalence, and Engagement: The Political Consequences of Heterogeneous Networks. *Political Psychology*, 25(1), 65–95.
- Igelnick, R. (2020). *Most Americans say they regularly wore a mask in stores in the past month; fewer see others doing it*. Pew Research Center.
- Indiana State Department of Health. (2020). *ISDH - Novel Coronavirus: Indiana COVID-19 Dashboard*.
- Ipsos. (2020). *As pandemic drags on, relationships are getting more serious*. Ipsos. <https://www.ipsos.com/en-us/news-polls/relationships-covid19>
- Ishizuka, P. (2018). Social Class, Gender, and Contemporary Parenting Standards in the United States: Evidence from a National Survey Experiment. *Social Forces*, 28.
- Iyengar, S., Konitzer, T., & Tedin, K. (2018). The Home as a Political Fortress: Family Agreement in an Era of Polarization. *The Journal of Politics*, 80(4), 1326–1338.
- Kellstedt, P. M., Peterson, D. A. M., & Ramirez, M. D. (2010). The Macro Politics of a Gender Gap. *Public Opinion Quarterly*, 74(3), 477–498.
- Kluwer, E. S., Heesink, J. A. M., & Van De Vliert, E. (1997). The Marital Dynamics of Conflict over the Division of Labor. *Journal of Marriage and Family*, 59(3), 635–653. JSTOR.
- Kramer, S. (2020). More Americans say they are regularly wearing masks in stores and other businesses. *Pew Research Center*.
- Krentz, M., Kos, E., Green, A., & Garcia-Alonso, J. (2020). *Easing the COVID-19 Burden on Working Parents*. Boston Consulting Group.
- Kushner, S. G., Goodman, S. W., & Pepinsky, T. B. (2020). *Partisanship, Health Behavior, and Policy Attitudes in the Early Stages of the COVID-19 Pandemic* (SSRN Scholarly Paper ID 3562796). Social Science Research Network.
- Landivar, L. C., Ruppanner, L., Scarborough, W. J., & Collins, C. (2020). Early Signs Indicate That COVID-19 Is Exacerbating Gender Inequality in the Labor Force. *Socius*, 6.
- Lee, Y.-S., & Waite, L. J. (2005). Husbands' and wives' time spent on housework: A comparison of measures. *Journal of Marriage and Family*, 67(2), 328–336.
- Li, W., Zhang, B., Lu, J., Liu, S., Chang, Z., Peng, C., Liu, X., Zhang, P., Ling, Y., Tao, K., & Chen, J. (2020). Characteristics of Household Transmission of COVID-19. *Clinical Infectious Diseases*.
- Livingston, G. (2018). *About 1 in 5 U.S. moms and dads are stay-at-home parents*. Pew Research Center.
- Lyttelton, T., Zang, E., & Musick, K. (2020). *Gender Differences in Telecommuting and Implications for Inequality at Home and Work* (SSRN Scholarly Paper ID 3645561). Social Science Research Network.
- MacKendrick, N. (2018). *Better Safe Than Sorry*. University of California Press.

- Manza, J., & Brooks, C. (1998). The Gender Gap in U.S. Presidential Elections: When? Why? Implications? *American Journal of Sociology*, 103(5), 1235–1266.
- Michalski, J. H. (2005). Explaining Intimate Partner Violence: The Sociological Limitations of Victimization Studies. *Sociological Forum*, 20(4), 613–640.
- Milkie, M. A., Nomaguchi, K., & Schieman, S. (2019). Time Deficits with Children: The Link to Parents' Mental and Physical Health. *Society and Mental Health*, 9(3), 277–295.
- Moen, P., Pedtke, J. H., & Flood, S. (2020). Disparate Disruptions: Intersectional COVID-19 Employment Effects by Age, Gender, Education, and Race/Ethnicity. *Work, Aging and Retirement*.
- Moreland, A. (2020). Timing of State and Territorial COVID-19 Stay-at-Home Orders and Changes in Population Movement—United States, March 1–May 31, 2020. *MMWR. Morbidity and Mortality Weekly Report*, 69.
- Nomaguchi, K. M., & Milkie, M. A. (2003). Costs and Rewards of Children: The Effects of Becoming a Parent on Adults' Lives. *Journal of Marriage and Family*, 65(2), 356–374.
- Omer, S. B., Malani, P., & Rio, C. del. (2020). The COVID-19 Pandemic in the US: A Clinical Update. *JAMA*, 323(18), 1767–1768.
- Painter, M., & Qiu, T. (2020). *Political Beliefs affect Compliance with COVID-19 Social Distancing Orders* (SSRN Scholarly Paper ID 3569098). Social Science Research Network.
- Papp, L. M., Cummings, E. M., & Goeke-Morey, M. C. (2009). For Richer, for Poorer: Money as a Topic of Marital Conflict in the Home. *Family Relations*, 58(1), 91–103.
- Politico. (2016). *Indiana Election Results 2016: President Live Map by County, Real-Time Voting Updates*. Politico.
- Press, J. E., & Townsley, E. (1998). Wives' and Husbands' Housework Reporting: Gender, Class, and Social Desirability. *Gender & Society*, 12(2), 188–218.
- Pugh, A. J. (2015). *The Tumbleweed Society: Working and Caring in an Age of Insecurity*. Oxford University Press.
- Radey, M., & Brewster, K. L. (2007). The influence of race/ethnicity on disadvantaged mothers' child care arrangements. *Early Childhood Research Quarterly*, 22(3), 379–393.
- Rao, A. H. (2017). Stand By Your Man: Wives' Emotion Work During Men's Unemployment. *Journal of Marriage and Family*, 79(3), 636–656.
- Rao, A. H. (2020). *Crunch Time: How Married Couples Confront Unemployment*. University of California Press.
- Read, J. G., & Gorman, B. K. (2010). Gender and Health Inequalities. *Annual Review of Sociology*, 36, 371–386.

- Reich, J. A. (2016). *Calling the Shots: Why Parents Reject Vaccines*. NYU Press.
- Rogers, S. J. (2004). Dollars, Dependency, and Divorce: Four Perspectives on the Role of Wives' Income. *Journal of Marriage and Family*, 66(1), 59–74.
- Ruppanner, L., Moller, S., & Sayer, L. (2019). Expensive Childcare and Short School Days = Lower Maternal Employment and More Time in Childcare? Evidence from the American Time Use Survey. *Socius*, 5, 2378023119860277.
- Sarkisian, N., & Gerstel, N. (2004). Kin Support among Blacks and Whites: Race and Family Organization. *American Sociological Review*, 69(6), 812–837.
- Sayer, L. C., & Bianchi, S. M. (2000). Women's Economic Independence and the Probability of Divorce: A Review and Reexamination. *Journal of Family Issues*, 21(7), 906–943.
- Sayer, L. C., Bianchi, S. M., & Robinson, J. P. (2004). Are Parents Investing Less in Children? Trends in Mothers' and Fathers' Time with Children. *American Journal of Sociology*, 110(1), 1–43.
- Schneider, D., Harknett, K., & McLanahan, S. (2016). Intimate Partner Violence in the Great Recession. *Demography*, 53(2), 471–505.
- Smock, P. J., Manning, W. D., & Porter, M. (2005). "Everything's There Except Money": How Money Shapes Decisions to Marry Among Cohabitors. *Journal of Marriage and Family*, 67(3), 680–696.
- Steiber, N., & Haas, B. (2012). Advances in explaining women's employment patterns. *Socio-Economic Review*, 10(2), 343–367.
- Streib, J. (2015). *The Power of the Past: Understanding Cross-Class Marriages*. Oxford University Press.
- Thomas, R. J. (2020). Online Exogamy Reconsidered: Estimating the Internet's Effects on Racial, Educational, Religious, Political and Age Assortative Mating. *Social Forces*, 98(3), 1257–1286.
- Thompson, C. (2020). Closed for COVID: County schools announce closures due to coronavirus concerns. *The Hoosier Times*.
- U.S. Census Bureau. (2019). *U.S. Census Bureau QuickFacts: Monroe County, Indiana*. <https://www.census.gov/quickfacts/monroecountyindiana>
- Vagni, G. (2019). Alone Together: Gender Inequalities in Couple Time. *Social Indicators Research*, 146(3), 487–509.
- van Duyn, E. (2018). Hidden Democracy: Political Dissent in Rural America. *Journal of Communication*, 68(5), 965–987.
- Villalobos, A. (2014). *Motherload: Making It All Better in Insecure Times*. Univ of California Press.
- Williams, D. T., Cheadle, J. E., & Goosby, B. J. (2015). Hard Times and Heart Break: Linking Economic Hardship and Relationship Distress. *Journal of Family Issues*, 36(7), 924–950.