

Article

Gender Differences in Epidemic Everyday Scenarios: An Exploratory Study of Family Life in Slovenia

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Submitted: 10 July 2022 | Accepted: 21 September 2022 | Published: 2 March 2023

Abstract

The article focuses on the changed dynamics of family life due to the first wave of Covid-19—starting in the spring of 2020—and the consequent longstanding social lockdown in the fall of 2020. We employ the concept of “forced nuclearisation” to describe the process that required a rapid reorganisation of otherwise self-evident and established social patterns and relationships, above all new adjustments of care relations both inside and outside the private sphere. The focus is on new demands in the intertwined spheres of work, school, and family obligations, especially because the private sphere has been assigned several additional functions, otherwise carried out by educational and daycare institutions. Based on an extensive dataset from a quantitative exploratory online survey conducted in two time periods, first in April 2020 and then in October 2020, this article discusses, from a comparative perspective and with a focus on gender inequalities, the main changes in practices and everyday routines such as shopping, housework, childcare, work obligations, and caring for other family members. The research aimed to identify the most obvious distinctions in family scenarios and, in particular, to point to the main social inequalities and potentially vulnerable groups within the population, who faced the forced and unexpected nuclearisation of everyday life.

Keywords

Covid-19; epidemic scenarios; family; forced nuclearisation; gender; lockdown; quantitative analysis; social inequalities; survey research

Issue

This article is part of the issue “Family Supportive Networks and Practices in Vulnerable Contexts” edited by Jacques-Antoine Gauthier (University of Lausanne) and Vida Česnuitytė (Mykolas Romeris University).

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1. Introduction

During the Covid-19 pandemic, Slovenia faced health, social, and economic challenges. From mid-March to the end of May 2020 (the pandemic officially began on 12 March and ended on 31 May 2020), the Government of the Republic of Slovenia took a series of measures that inevitably intervened in private lives, significantly changing previous everyday practices. The situation was repeated in the fall of 2020, more precisely from October 2020 to June 2021 (the second wave lasted from 19 October 2020 to 15 June 2021), with the important dif-

ference being that the period of special measures and, in particular, the lockdown was significantly longer than in the first wave.

In both periods, the government restricted people’s physical mobility, while several institutions, including educational institutions, were completely closed. Freedom of movement was limited to municipal boundaries and social contact with household members. Work activities, as well as school and study obligations, were shifted to the private sphere. Slovenia is one of the countries where the “distance learning/education” model has been in place the longest. In the second wave, only some

of the youngest pupils (from the first three grades of education) returned to school after three months of distance education, while the rest of primary school pupils and senior secondary school students gradually returned to school after more than four or five months. The rest of the secondary school students did not return to school until mid-May, while university students were mostly back only by the end of the pandemic, in June 2021.

Although the actions taken during the two waves of the epidemic were similar, there were differences in how people reorganised everyday life and how they perceived the state of emergency. While the first wave came with a shock, requiring a very rapid reorganisation of everyday life, the second wave was (based on epidemiological forecasts) somewhat expected. However, while people were able to form everyday routines based on the experience of the first wave, the second period of restrictions and necessary lockdown brought about many pressures because it lasted for several months and the measures were quite restrictive.

Using data from two quantitative exploratory surveys—the first conducted during the spring lockdown and the second during the fall lockdown—in this article we are interested in the resulting changes in the intra-dynamics of everyday life, that is, in how families have perceived, responded to, and coped with challenges of extraordinary circumstances. In other words, how the measures taken during the lockdowns influenced everyday dynamics within families, the division of family labour, existing patterns and habits, and to what extent they affected interpersonal relationships and experiences. We hypothesised that adapted everyday “family practices” (Morgan, 2011) have emerged, which have allowed families to perform core functions while taking on functions that are otherwise the responsibility of other institutions in the public sphere. It can be argued that families responded relatively quickly by being tactically resourceful in developing adapted everyday practices (cf. de Certeau, 2007), especially those related to re-organisation and integration of family and work obligations within the private sphere.

We strive to point to key gender differences and inequalities within the changed family life that most likely emerged as a result of the new social circumstances of everyday life. We assumed that the lockdowns even deepened existing inequalities and increased family vulnerability (Widmer et al., 2020). The focus was on how practices such as shopping, housework, home and garden management, childcare, work obligations, and also care for other family members changed, and to what extent. We paid attention to the comparison of the two waves of the pandemic in the spring and fall of 2020 and gender differences as a key structural dimension of the division of family labour. At the same time, we focused on perceptions of how the epidemic has changed family relationships and general well-being. Since any analysis of gender inequalities within the family should also bear in mind other structural factors that inevitably create

(experiences of) social inequalities (cf. Thorne & Yalom, 1992), we also tested some other possible factors that created social inequalities among families.

2. Everyday Life in the Lockdown Context

The lockdowns caused the breaking of many social ties, especially of care relationships with relatives outside the family. This was especially problematic because extended family (especially grandparents) is an important source of informal support in reconciling work and family life in Slovenia (Rener et al., 2006). Literally overnight, parents were fully occupied not only with their work and other daily duties but also with functions otherwise performed by schools, kindergartens, paid services for domestic and care work, etc. It should also be considered that parents in Slovenia are, in general, already to a great extent burdened with the social pressures of the culture of child-centredness and protective childhood (Švab, 2017), and consequently play an important part in children’s educational trajectories in instrumental and emotional ways (Živoder & Ule, 2020). It could be claimed that these pressures even increased in light of (health and other) uncertainties that arose when parents took over the functions carried out by educational institutions. Meanwhile, for many parents, the work sphere has also colonised the sphere of the home, as many parents have taken up remote work alongside these new care and educational responsibilities.

The epidemic restrictions caused what we call “forced nuclearisation” (Oblak Črnič & Švab, 2020), a process in which families (predominantly of the nuclear type of two-generational families of parent[s] and their children) were forced to physically limit their everyday life to the household and consequently cut off social relationships outside the family. Everyday family life was marked by closure and withdrawal from the outside social world (cf. Kellerhals et al., 1992; Widmer et al., 2020) and this process not only physically, but also symbolically reinforced the boundaries between the family and the outside world and therefore strengthened the ideology of the nuclear family. In forming various preventive measures, the government, together with various institutions (care and educational ones), unreflectively built upon the idea of the nuclear family as a self-sufficient institution with clear boundaries and did not in any way question problematic gender asymmetric division of family labour, the relocation of care and educational functions—otherwise carried out by institutions, such as kindergartens and schools—nor did they acknowledge the importance of extended family, especially grandparents, in care activities.

Forced nuclearisation revealed a sort of peculiar paradox of the very perception of the (nuclear) family as an isolated and self-sufficient entity with distinctive boundaries that separate it from its social environment. Namely, through this process, it became even more evident that the nuclear family is in no way self-sufficient,

nor is it an entity separated from other (private and public) spheres (as often ideologically pictured). On the contrary, it became even more obvious how much it depends on social ties beyond its boundaries. It became clear that relationships, especially care relationships, are built mutually, offering support, and receiving it from wider kinship networks as well as social-educational and other institutions. That the relationship with the outside world was important to families during the pandemic lockdowns could be observed, for example, through the strategies used by families that enabled openness to maintain at least minimal contact with the school, friends, and relatives through the use of the internet (Widmer et al., 2020).

Another problematic consequence of the governmental actions in the process of forced nuclearisation is the fact, that it reinforced the idea of the nuclear family as a unified entity (e.g., “we are all in the same boat”-type of arguments), denying differences in subjective experiences and social inequalities within the family and between families.

Forced nuclearisation further meant that a kind of social experiment was taking place on both macro and micro levels (Oblak Črnič & Švab, 2020), in which people had to reframe their everyday life (Risi et al., 2021) and adopt more fusional functioning (Widmer et al., 2020). Residential environments as inherently private and intimate spaces became internally hybridised as work and education became, for an indefinite period, an inevitable part of private everyday life while households became externally disintegrated and atomised. One can even speak of “a radical transformation of the space-time of everyday life” (Fuchs, 2020, p. 378).

Everyday life, otherwise characterised by routine and self-evidence, was changed in such a way that individuals were confronted with numerous challenges and demands that required a rapid reorganisation of the most taken-for-granted and established patterns of behaviour and relationships (Oblak Črnič & Švab, 2020; cf. Fuchs, 2020). First and foremost, this required adaptations of care relationships both within and outside the household. Parents were probably among the most stressed due to the collision of activities from both private and public spheres, which are usually separated both spatially and in terms of the temporal structuring of everyday life.

We cannot ignore the fact that the changed circumstances were situated in existing (structurally determined) social contexts that are characterised by various otherwise existing forms of inequality within the family. This is primarily the prevailing gender asymmetric division of family labour and the consequent problem of the reconciliation of family and work obligations, which the epidemic put into a whole new perspective. The existing research on the gender division of family labour during the epidemic also confirms this (Vuga Beršnak et al., 2020; Chung et al., 2021; Fodor et al., 2021; Hipp & Bünning, 2021; Oblak Črnič & Švab, 2020; Zoch et al.,

2021), with differences observed both at the level of division of labour and at the cognitive level (Czymara et al., 2021). Single mothers in particular faced even more specific challenges and pressures in this respect, which was confirmed by two (USA and Canadian) studies (Hertz et al., 2020; Pino Gavidia et al., 2022).

As in other Western countries (see, e.g., Bornatici & Heers, 2020; Szalma et al., 2020; Ukhova, 2020), there was a gender asymmetric division of family labour present in Slovenia before the epidemic (Kanjuro Mrčela et al., 2016), and fathers were involved in childcare only partially, as a supportive model of fatherhood prevailed, where men were involved mainly in an assisting role, while women did most of the family labour (Reiner et al., 2008). Although paid domestic labour is becoming increasingly actual in Slovenia as well (Šadl, 2006), its use is limited to urban areas and accessible only to those with enough financial resources. Therefore, it is more common that people rely on unpaid informal support offered by relatives, especially grandparents, and sometimes friends. Although there is no data available regarding if or to what extent the paid domestic work was used by families during the lockdowns, we can speculate that this source of help was radically limited for various reasons, as movement outside the home was very limited due to the strict governmental measures regarding the epidemic.

We hypothesised that these patterns of gender asymmetric division of family labour have become even more pronounced during the epidemic and involve multiple burdens, especially for women. This most likely led to tensions and stressful situations that were exacerbated by a lack of personal space for retreat, work, study, and the lack of sources of formal and informal support. Research shows that during the epidemic, women and mothers in particular were less satisfied than men or people who do not have children (Czymara et al., 2021; Hipp & Bünning, 2021).

3. Investigating Family Life During the Epidemic: Research Design, Methods, and Sample

The epidemic shook the prevailing modes of empirical research on social phenomena profoundly, especially in terms of access to the subjects of analysis. In the first spring wave, when remote work was just beginning to take hold, researchers more often turned to research methods that were already prepared for remote data collection. The Faculty of Social Sciences at the University of Ljubljana has a long tradition of online surveys (Callegaro et al., 2015), which have proven to be one of the most appropriate forms for collecting population data, including in the case of research on everyday family life.

A quantitative survey was conducted in two time periods: first in April 2020 (the first wave of the pandemic) and then in October 2020 (the second wave). Both times, the survey was conducted via Valicon's JazVem.si web panel, the largest online panel of respondents in

Slovenia. The first measurement included a larger ad hoc sample of 2,127 adult respondents, while the second measurement included only 534 respondents. The first sample was part of a large-scale survey, which was conducted in three-time waves within one month period, while the sample in October is a result of a single survey, conducted in only three days. Because the article here is deliberately limited to respondents with children in both surveys, the subsamples used are smaller in both periods—1,399 participants with children participated in April, and only 364 in October. Nonetheless, the samples in both surveys are quite similar in terms of key demographic characteristics.

Thus, 54% of men and 52% of women participated in the April survey and 52.4% of men and 47.6% of women participated in the fall survey. The majority of respondents in the April measurement were married (58%) or in an extramarital cohabitation (24.7%), as well as in October: The majority of respondents were married (60%) and 21.3% lived in an extramarital cohabitation. In both surveys, the majority of respondents were employed (54% of the April sample and 52% of the October sample). Only in terms of age structure is there a greater variation between the two samples in favour of the younger sample in the fall measurement: While the majority of respondents in April were 51–65 years old (40.7%) and about a third (34.1%) were 36–50 years old, only 16% were young (21 years or younger). In October, most respondents in the sample were between 36 and 50 years old (37.6%) and nearly one-third (29.3%) were under 21 years old, while adults between 51 and 65 years old make up one-quarter of the total (25%). Current national statistical data show that 64% of the Slovene population is between 15 and 65 years old, 21% of the population is over 65 years, and 15% of the population is between 0–15 years old (SORS, 2022). In terms of household size, the two samples are more similar: The majority of households were either two-person households (27.3% in April vs. 30.6% in October) or three-person households (26% in both surveys), while a quarter (24.2% vs. 24.9%) were four-person households. The samples are also similar in terms of the educational structure, with respondents with a four-year secondary education predominating in both measures (50% vs. 47%), followed by those with elementary or vocational education (24% vs. 28%).

For this article, we focused on data on everyday practices during the spring and fall lockdowns and the perceptions of relationships and personal well-being in lockdown. We sought to identify changing practices by asking questions about the intensity of particular tasks or practices, and we were particularly interested in gender differences in the division of family labour, care of other relatives, and care of one's own health. The second domain measured changes in attitudes and well-being using questions on self-assessment of general well-being, mental and physical health, and perceptions of relationships with spouses, children, parents, friends, neigh-

bours, and colleagues. Consequently, the data analysis is conducted in two thematic strands: first, we focus on the changed practices of everyday life during the lockdown period, and second, on attitudes and perceptions of new circumstances. Statistical analysis of the data is both univariate and bivariate, mostly using ordinal variables. Associations between variables are tested using the Chi-square test and, in some cases, Spearman's correlation coefficient. The results are representative of the Slovenian online population aged 18–75 by gender, age, education, and region.

4. Results

We assumed that families were already under significantly greater pressures and strains due to their existing roles and the assumption of new functions otherwise performed by care and educational institutions during the lockdown period. Given existing gender inequalities in the division of family labour and work-life balance (Szalma et al., 2020), we assumed that these patterns were exacerbated during the epidemic, resulting in multiple burdens, particularly for women: not only domestic and care work, but also home-based education and work responsibilities.

Before turning to the analysis of the subsample of families, it is important to know the trends in the overall sample. First, we examined the effects of lockdown in April (Figure 1) and October 2020 (Figure 2), as they reveal two things: First, how already in the first wave of the epidemic certain practices simply receded from everyday life and, on the contrary, certain practices intensified. Secondly, we analysed which of these changes were characterised by a more sustained intensity or vice versa. The survey question in the survey was: How does self-lockdown affect your habits and activities, both in the home and in the wider community, compared to before? Do you do the following things less frequently or more frequently/intensively?

The main deficits in April 2020 (Figure 1) were at the level of social contact and all activities related to physical mobility outside the home: There was a significant decrease in social contact with friends (74.6%) and relatives (64.5%) and with colleagues (70.2%). Work commitments were also rated as less intense than usual during the epidemic by 37.2% of respondents. On the other hand, there was a significant increase in housework (20.7%), especially cleaning up the house and garden (25.2%), which is to be expected given the spring epidemic and reduced opportunities for exercise and travel. At the same time, there was a significant shift in daily routines toward more attention to self (14.7%) and health (15.1%), which may indicate that the global disease situation has also brought an increased awareness of the importance of one's own well-being and health.

In October 2020 (Figure 2), most of the changes continued, but with some differences: Relationships with relatives, work colleagues, and friends were predominantly

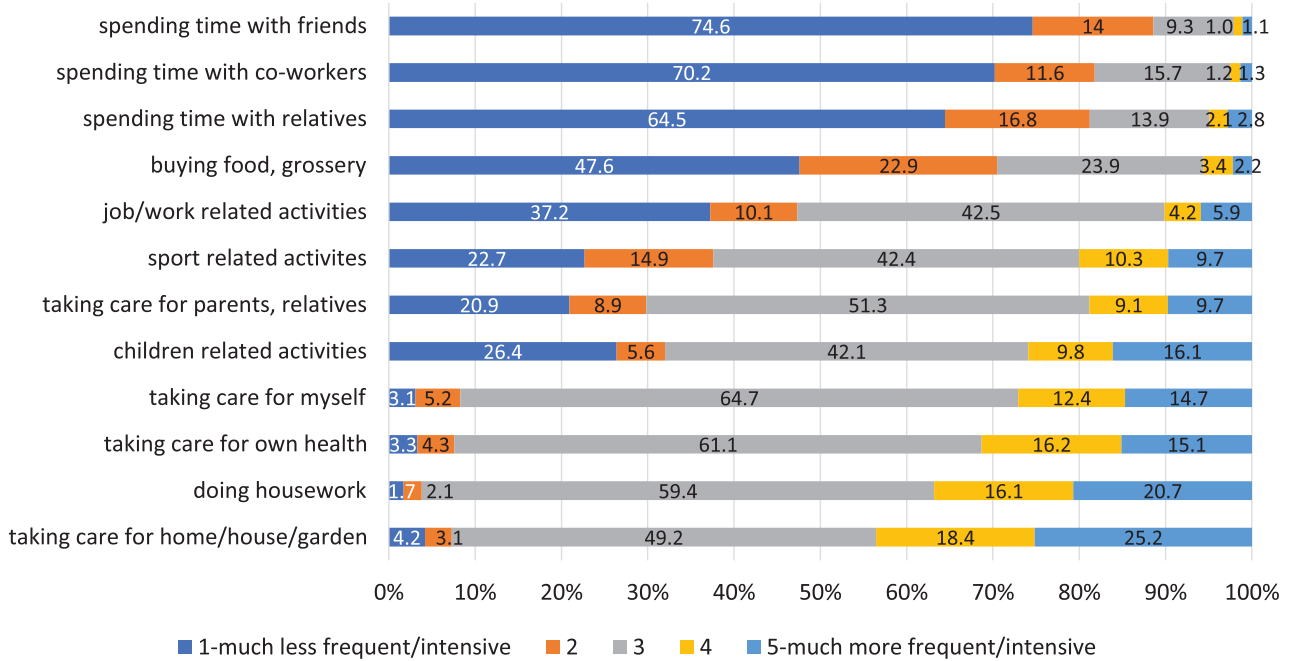


Figure 1. The effects of lockdown on everyday practices and activities (in percentages, April 2020).

less frequently maintained, while activities related to home and garden management (61.9%) or housework (66.5%) remained more or less the same. The intensity of caring for one’s health (61.3%) and personal care (61.6%) also seem to remain the same. However, some other activities have become more flexible, such as grocery shopping, sports, or professional activities. Here, the sample is more diverse, although for the majority of respondents both activities have remained more or less the same. Caring for parents or dealing with children seems to have remained the same for at least part of the

sample, but for another part of the respondents, it has intensified (10%) or even decreased (19.7%).

The question is how families coped with pressures and constraints. In particular, we were interested in how gender differences within families manifested in each wave of the epidemic and what activities and conditions affected family life in the longer term. In what follows, therefore, we show how these practices and trends were distributed exclusively among households with children, as illustrated by gender differentiation in both periods. We focus in particular on changes in household and

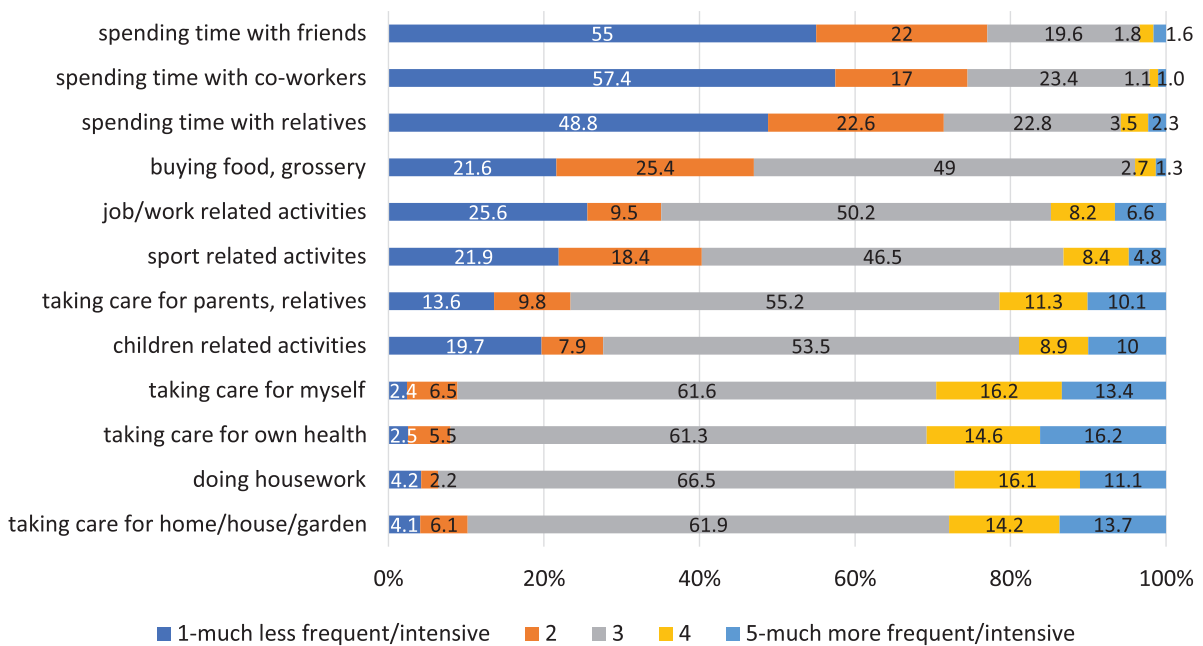


Figure 2. The effects of lockdown on everyday practices and activities (in percentages, October 2020).

caregiving tasks, as it is not insignificant how families managed work and family obligations.

4.1. Changing Everyday Practices of Families

The potential changes within the families in both periods were, in a statistical sense, analysed using the method of cross-tabulations with Chi-2 tests. In this way, the relationships between the chosen variables, which have a primarily ordinal scale, and gender, which is a nominal variable, were tested (using two-tail statistical significance $p \leq 0,001$). For all the considered comparisons taken into account, findings which showed statistically significant distinctions in terms of gender differences are primarily presented. Where this was not the case, the data are interpreted accordingly to statistical tests.

In terms of family labour, data show some differences between the two epidemic waves and accord-

ing to the gender of the respondents. In April 2020, women were significantly more burdened with housework (Figure 3): As many as 28% reported that their workload was much greater (compared with 14% of men); the Chi-2 test value was 46.26. In contrast, in the second wave, both genders reported equal workloads (71% of men and 72% of women); here the Chi-2 test was 13.89. Thus, housework hit women particularly hard in the spring, when altogether 41% of women reported housework was more intensive than before the epidemic lockdown. Moreover, home and garden management (Figure 4) were also significantly more stressful for women in wave 1, with 31% doing it more intensively than before (compared with 23% of men); here, the Chi-2 value in April was 17.44, while in October was a bit higher, 26.47. Thus, families maintained trends and rules of domestic responsibilities through home and garden management that were identical to the existing gen-

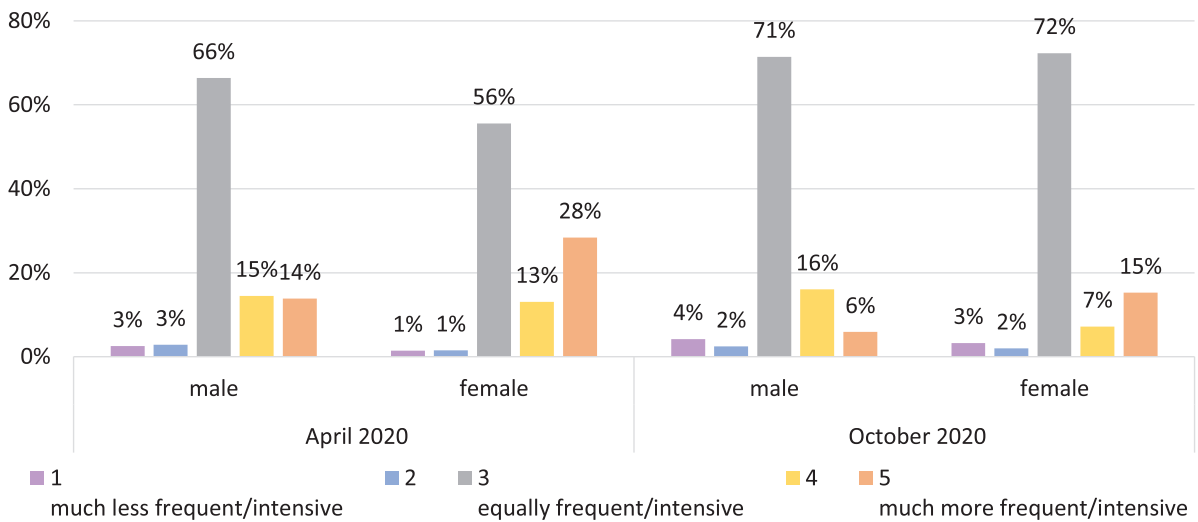


Figure 3. Housework by gender in two epidemic waves.

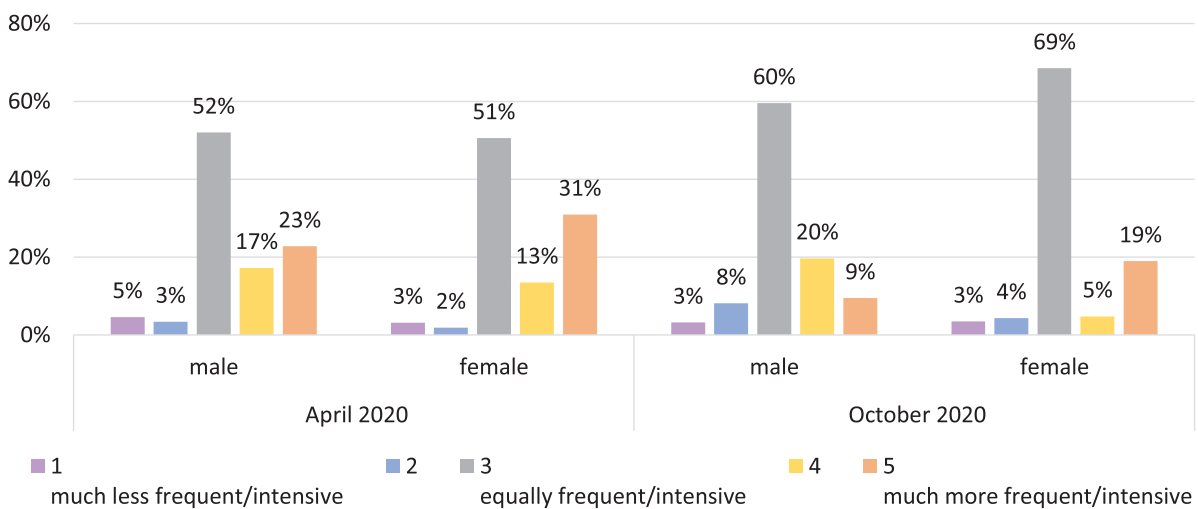


Figure 4. Home and garden management by gender in two epidemic waves.

der division, and it could be argued that the epidemic did not significantly change these, but only increased the pre-existing burden of women.

Similarly, but in some places much more diversified, families faced childcare (Figure 5): 42% of male respondents felt that it was equally intensive during the epidemic, with 19% of men indicating that it was more intensive than before. The Chi-2 value in April was 21.53. However, a quarter of women (26%) agreed that childcare was more intense during the first period of lockdown. In addition, a fifth of men (20%) indicated that occupation with children was less intense than before, in comparison to 24% of women. It seems that at least for some small part of the sampled respondents, childcare was not the most demanding obligation during the lockdown. However, when measured in October, practically both genders estimate that engagement with children has remained the same—50% of men and 48% of women agree; here the Chi-2 value was almost identical, 21.27. Nevertheless, the distribution of perceived inten-

siveness with childcare remained unequally reported between both genders, but also within single gender as well.

In addition to duties and obligations at home and childcare, we also used the same set of questions to assess changes in the intensity of other obligations. For example, there were already clear gender differences in the assessment of work obligations (paid job) in wave 1: 49% of women (compared to 30% of men) reported having fewer work obligations, while significantly more men (50%) than women (34%) reported having the same number of work obligations as usual. In October, the gender ratio remains the same, except that the percentage of women who expect to have fewer work obligations is slightly lower (35% of women vs. 23% of men).

A similar pattern emerges in the assessment of care for elderly end relatives, except that women reported having fewer obligations in this field than before the epidemic; in April, the Chi-2 value was 27.00, while in the October test it was 10.87 (Figure 6).

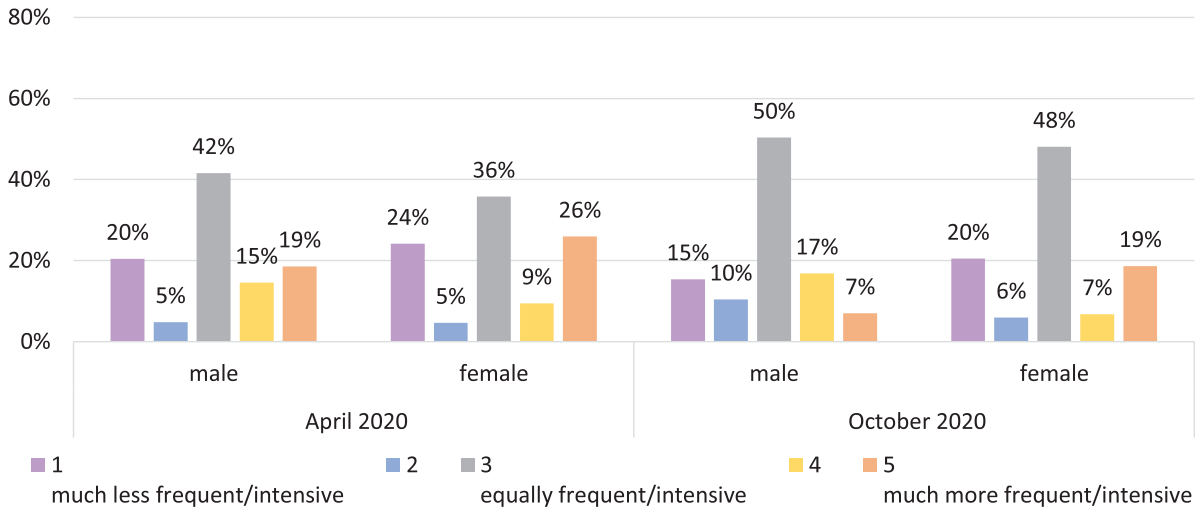


Figure 5. Childcare by gender in two epidemic waves.

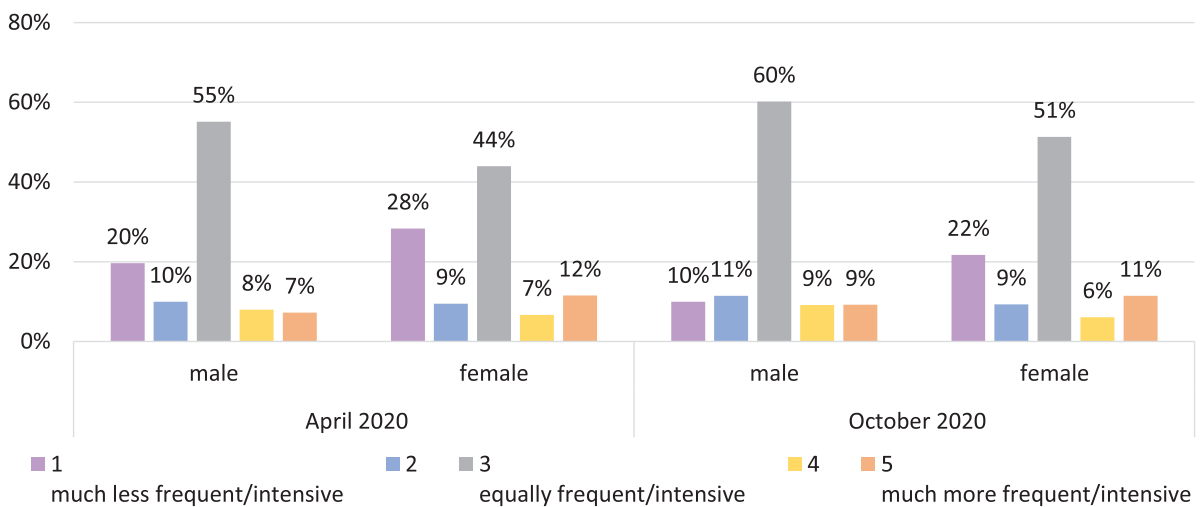


Figure 6. Care for elderly and relatives by gender in two epidemic waves.

In April, the majority of men estimated their workload with care for the elderly and relatives to be the same (55%) or lower (20%), while only 44% of women estimated it to be the same and 28% of women estimated their parental workload to be lower. In October, the situation became even more “normal” or equal for men (60%), but this is also partly the case for women (51%).

4.2. Relationships and Personal Well-Being

We were also interested in possible changes in relationships with children and partners, as family life has become physically confined to the home and constant contact with family members has become much more inevitable. However, data on relationships with children in the family (Figure 7) show that the situation is practically very stable in both periods and is also practically the same by gender: 69% of men and 67% of women consider the relationship to be unchanged, with the proportion of men having fallen only slightly in October (to 65%). Also, in terms of statistical differences, this is one of the rare cases which showed no significant differences

between both genders. That the relationship has worsened is, apparently, very rare and for some it is even evident that it has improved, which is also fairly consistent between genders. The assessment of the relationship between partners (Figure 8) was even more stable: In the spring, 73% of men and the same proportion of women (73%) rated the relationship as stable. In the second fall wave, only slightly fewer women answered that the relationship was the same (69%). Statistically, this comparison between the genders in both periods showed no actual significance.

The extent to which the experience of lockdowns has affected men and women differently can also be inferred from data assessing general well-being and health. We asked a series of questions about the possible effects of lockdown on various things or conditions, particularly relationships, health, etc. Respondents answered on a scale from 1 to 5, with possible answers being that the situation or attitude has gotten much worse (1) or worse (2), stayed about the same (3) or improved (4), or gotten much better (5). The majority of respondents felt that overall well-being had remained

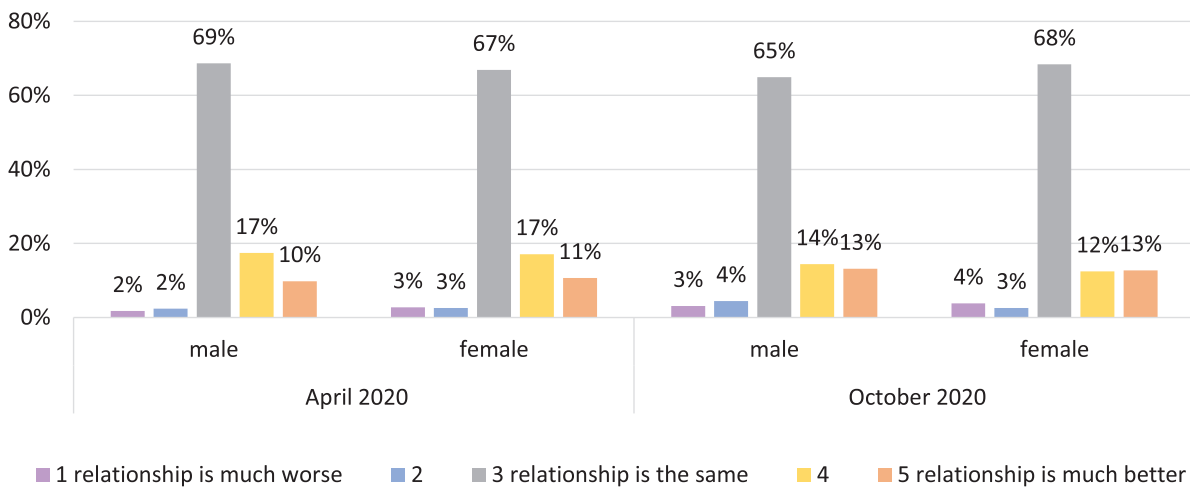


Figure 7. Relationship with children by gender in two epidemic waves.

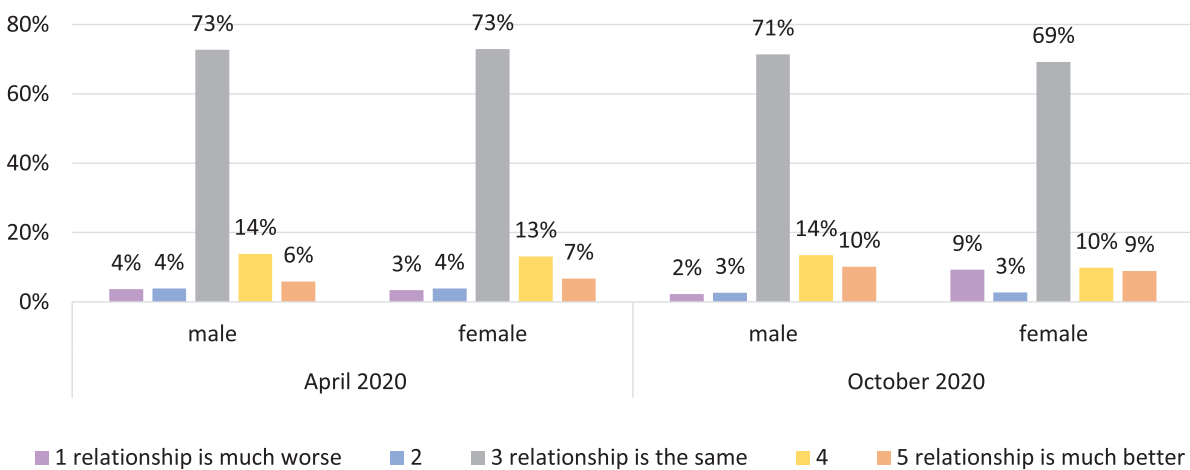


Figure 8. Relationship with a partner by gender in two epidemic waves.

the same, with a marked difference in favour of men: 74% of men said well-being had remained the same in April, while only 64% of women said well-being had remained the same. Here, the Chi-2 test was statistically significant (with a value of 21.37). In addition, 27% of women (compared to 16% of men) said that well-being had worsened, but there was a clear gender difference in the assessment that overall well-being had improved: overall, 16% of women (compared to 10% of men) said this.

Mental health was assessed quite differently (Figure 9): Although the majority of respondents said it had remained the same (74% of men and 58% of women), altogether 27% of women said it had worsened in April (compared with 16% of men). Mental health also had the highest Chi-2 test value in April (37.64). More revealing, however, is the figure for the October measurement for both genders: 26% of men said it had worsened, while 33% of women said it had; with a Chi-2 value of 13.79.

Physical health also remained at the same level as before the epidemic for the majority of respondents, again with significantly fewer women (67%) than men (74%) answering this question; the difference between genders was statistically significant with a Chi-2 value of 14.23. In October, however, physical well-being declined more sharply again among men, with only 69% rating it as remaining the same, but showed no statistically significant differences; in October, the Chi-2 test value was only 4.64. Gender differences are thus evident in all three indicators of well-being, with male respondents rating their general well-being and physical and mental health in autumn worse than male respondents in the spring wave.

4.3. Correlations of Social Factors With Childcare Burdens

Although the focus of this article has been primarily on gender differences within families in coping with the epi-

demical everyday reality, the data collected at both time points nonetheless offer other possible tests and considerations, particularly concerning other potential factors that may have determined families' coping with the epidemic, especially since any analysis of gender inequalities within the family should also take into account other structural factors that inevitably create (experiences of) social inequalities (Thorne & Yalom, 1992).

The results of correlation analysis using the Spearman rho-test, which is a suitable measure for testing potential relationships between the ordinal variables show that the pressure of childcare is strongly associated with other socio-demographic variables such as age, employment status, education, marital status, and household size (see Table 1). The correlation analysis of the April 2020 database of households with children showed that households with more members and employed respondents with higher education living with a partner seemed to be more burdened with childcare than the others. However, the most significant but negative correlation is shown concerning age: younger respondents were—expectedly—also less burdened with childcare than the older ones.

However, in the first wave of the epidemic, gender was not so much a key differentiator of the burdens with children within the families, but other sociodemographic indicators had a greater impact. For this reason, we repeated the same analysis on the sample of families in the fall survey (October 2020) to check whether the strength of each sociodemographic factor persisted, declined, or remained the same. Thus, we were interested in which sociodemographic variables had the greatest relation with childcare in the fall epidemic wave (see Table 1).

Namely, compared with April, some sociodemographic factors were no longer statistically significant in the fall: This was true for marital status and again for gender. Employment, on the other hand, showed a stronger correlation than in the spring, while the household size

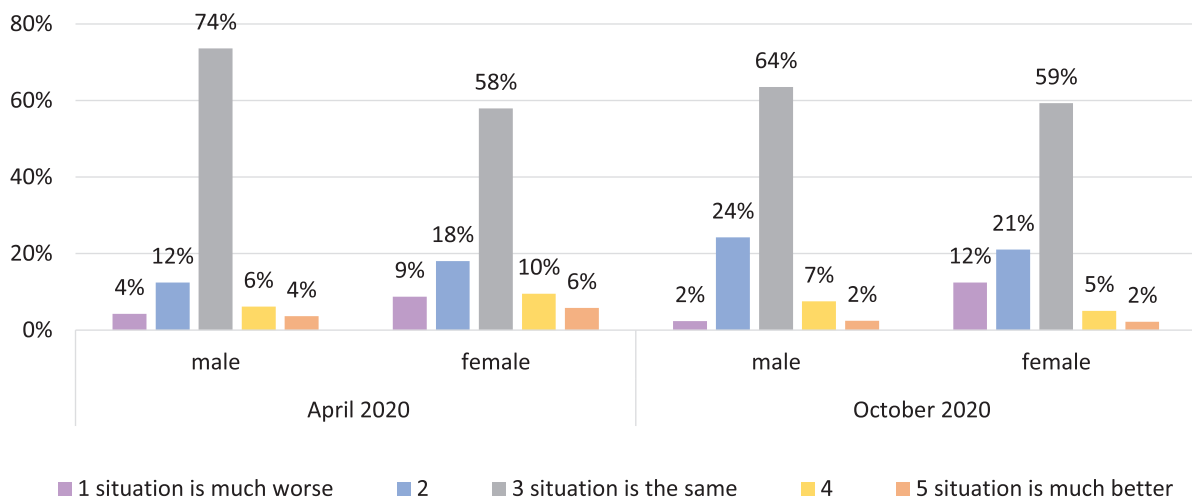


Figure 9. Personal well-being and mental health by gender in two epidemic waves.

Table 1. Spearman correlation coefficient between socio-demographic variables and childcare in April and October 2020.

		Education (recoded)	Single or living with a partner	Employed (no/yes)	Gender (recoded)	Household size	Age group	Childcare
April 2020								
Childcare	Correlation Coefficient	.251**	.140**	.408**	.054	.451**	-.502**	1,000
	Sig. (2-tailed)	,000	,000	,000	,058	,000	,000	
	N	1246	1233	1220	1249	1249	1249	1249
October 2020								
Childcare	Correlation Coefficient	.208**	.108	.412**	.056	.370**	-.507**	1,000
	Sig. (2-tailed)	,000	,051	,000	,314	,000	,000	
	N	326	324	321	326	326	326	326

and education of the respondent had a slightly lesser influence. Of all the chosen variables, only age remained an important predictor of a greater engagement with children in the fall (again with a negative coefficient value). Thus, the fall wave resulted in a significantly higher level of childcare for families with employed and better-educated parents in larger households.

One possible explanation for the at least slight decline in the influence of other factors would be that by the fall, the “normalisation” of epidemic daily life had already taken place: distance schooling had become the new reality, as had remote work, and the permanent period of lockdown, together with the curfew, meant a necessary turn toward a domesticised culture for all families. As a result, the factors that increased the burden of childcare in the spring remained mainly similar in autumn, but with some specific changes: socio-economic demographic variables, particularly employment and age, came to the fore as a greater burden: working from home and distance schooling have become constants, and families have found it more difficult to adapt.

5. Discussion and Conclusions

The epidemic lockdown and the consequent forced nuclearisation profoundly transformed everyday life and roughly divided family practices into two groups. While certain activities have largely decreased or even disappeared due to the lockdown and limited mobility, others, especially those related to home and basic needs, have intensified. Changes were more intense in the first lockdown because they happened much faster compared to the second lockdown, which was to be expected and certain behaviour patterns had already been consolidated based on the experiences of the first lockdown.

Forced nuclearisation caused the redistribution of activities, which took place to some extent along the existing gender inequalities. In the context of family labour, where we measured changes in housework,

home and garden management, childcare, and care for elderly and relatives, three main characteristics emerged: the gender asymmetric division of labour; the increased burden of additional tasks on women; and the relatively similar patterns when comparing the two lockdowns. Our study confirmed that women were more burdened in particular with housework and childcare, and although this was not so much the case in the second lockdown, this does not mean that women were less under the pressure of these responsibilities as the second lockdown was extremely long. It seems that families maintained pre-epidemic patterns of a gendered division of family labour, and the epidemic only increased the pre-existing burden of women. However, the longest closure of the educational system forced families, especially women with children, to dramatically adapt to new everyday realities.

Nevertheless, data on changes in relationships within families and personal well-being in both epidemic waves do not show such a coherent picture. We hypothesised that forced nuclearisation would, in general, bring more tension to family relationships as family life became physically confined to the home and constant contact within the family became inevitable. However, the data on family relationships show that the situation was quite stable in both periods with no major gender differences. Similar results were also revealed in a study on the everyday life of military families during the first lockdown in Slovenia (Vuga Beršnak et al., 2020), while a German study by Möhring et al. (2021) on the other hand showed a general decrease in family satisfaction, and a Swiss study revealed some vulnerable groups (among them are women due to the workload) expressed some decline of life satisfaction during the lockdown (Kuhn et al., 2021). Interestingly, a Polish survey, which examined positive aspects of the Covid-19 pandemic in the first lockdown, revealed that the perceived positive aspects were directed towards individual rather than general social well-being and were more defensive than progressive,

while at the same time socio-demographic differences were not so strong (Krajewski et al., 2021).

The Slovenian findings may imply the importance of family and family ties, and positive aspects of child-centredness in general (Reiner et al., 2006), where spending quality time with family members, especially with children, is highly valued. It could be even said that during the epidemic, Slovenian families, at least to a certain extent, demonstrated characteristics of the so-called “shelter” family type, where “withdrawal into the family group is considered desirable whereas external contacts are considered frustrating and dangerous” (Kellerhals et al., 1992, p. 310). This was probably partly related to the unknown health risks due to the new virus, while it was very important to people that families were safe during the lockdown, without serious long-term consequences.

Also, the majority of family respondents felt that overall well-being had remained the same in both lockdowns, but with a marked difference in favour of men (which is in accordance with the German study by Möhring et al., 2021). While it worsened for more women than men, it has also improved for more women than men. Regarding mental health, the situation has worsened for much more women than men (although for the majority it remained on the same level as before the lockdown). The same can be said for physical health, which also remained at the same level as before the epidemic for the majority of respondents, but with clear gender differences. However, in the fall lockdown, physical well-being declined more sharply again among men.

Gender differences are thus evident in all three indicators of well-being, with a somewhat greater impairment for men in the fall in comparison with the spring wave. Nevertheless, the situation has worsened in general for more women than men. This is for sure an additional indicator that women were under greater pressure concerning responsibilities during both lockdowns and that this was especially problematic during the second lockdown, which was much longer. This could be due to a variety of reasons, including multiple stresses experienced by women during the epidemic, the reduction in social contacts, and, last but not least, worries and fears related to other consequences of the epidemic emergency (financial difficulties, loss of employment, etc.). Given that paid work has moved into the home for many, it should not be overlooked that even if the scope of responsibilities in the sphere of paid work has not changed much, significant pressures have arisen from the demands of synchronous responsibilities (e.g., paid work, full-time housework, childcare, and helping children with school obligations) and balancing work and family. As in the German study by Hipp and Bünning (2021), we can also confirm a “pessimistic view” by which lockdowns more likely worsened the situation for many women.

The present study, which was essentially exploratory due to the rapid emergence of an exceptional situation,

revealed only basic patterns of reorganisation of everyday practices and relationships in families in Slovenia under the changed circumstances of the lockdowns due to the epidemic. Major structural factors have in some way deepened existing social inequalities and thus produced different experiences and coping strategies, with government interventions or assistance only able to mitigate the resulting hardships for certain, albeit already disadvantaged social groups.

At the same time, the present findings point to the need for further, more detailed (quantitative and qualitative) studies that would allow for a conceptually stronger argumentation of perceived differences within epidemic everyday life. This involves not only explaining the differences already identified but also a deeper understanding of the family strategies or responses of households facing forced nuclearisation and the relocation of functions usually carried out by public institutions (such as kindergartens and schools) to the privacy of the home.

To conclude, the pandemic (and consequent political decisions) undoubtedly permanently changed social relations and fundamentally affected the structural features of everyday life. Forced nuclearisation with the ban on free movement, the closure of public institutions, and the switch to remote work have profoundly affected private lives, which are socio-demographically segmented and heterogeneous. It is, therefore, worthwhile to focus further research more broadly and to perceive the longer-term consequences of politically intended regulations that have, at least in Slovenia, problematically triggered a set of conditions that reinforce, rather than necessarily eliminate social inequalities.

Acknowledgments

The authors acknowledge the financial support from the Slovenian Research Agency (research core funding No. P5–0183, Social Psychology and Sociology of Everyday Life for Alenka Švab, and No. P5–0136, Political research for Tanja Oblak Črnič).

Conflict of Interests

The authors declare no conflict of interest.

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