Rapid Reviews COVID-19

Review 1: "Supporting Families to Protect Child Health: Parenting Quality and Household Needs During the COVID-19 Pandemic"

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RR:C19 Evidence Scale rating by reviewer:

- **Reliable.** The main study claims are generally justified by its methods and data. The results and conclusions are likely to be similar to the hypothetical ideal study. There are some minor caveats or limitations, but they would/do not change the major claims of the study. The study provides sufficient strength of evidence on its own that its main claims should be considered actionable, with some room for future revision.

Review:

This preprint, "Supporting families to protect child health: parenting quality and household needs during the COVID-19 pandemic" presents survey data from a large, predominantly Canadian sample of families. The sample is primarily composed of mothers and is of relatively higher socioeconomic status, which limit the generalizability of the findings. However, the study provides a snapshot of family stressors during the pandemic and their relations to parenting behavior.

The authors state that their study shows that several family-based risk factors, such as unmet child care needs and parent depressive symptoms, are associated with lower quality parenting (i.e., higher laxness and overreactivity, less support for child behavior). These findings are generally supported by the data and methods used. These findings are also very consistent with previous research and not unexpected. However, the qualitative data provides richness and context to the findings as they relate to the particular stresses of the COVID-19 pandemic and its effects on families. The policy implications of the data are clear, particularly regarding unmet childcare needs, and decision-makers should consider the claims in this study actionable with limitations, based on the methods and data. Limitations are discussed below.

Race/ethnicity is not reported by the authors, which limits interpretability of the results. It is not clear why the 1.5-8 child age range selected – what are the unique aspects of parenting at these ages and how might they extend to other ages of children? Relatedly, parents were prompted to respond regarding their "most challenging child," which makes sense when measuring stress but could be explicated more clearly. The quantitative findings are not presented in detail in the results section of the manuscript, and instead only referred to in Tables 2 and 3. More detail is needed in the text. Of the many regressions presented, relatively few are statistically

significant, and there is limited discussion of what these patterns of findings do and do not. Relatedly, there are many variables used to assess parenting but clear hypotheses are not presented to distinguish them. It may be that combining these variables into composite parenting scores would yield similar findings in more interpretable ways. Finally, it is not clear if depression was present prior to the pandemic or if parents have experienced an exacerbation in depressive symptoms during the pandemic, which would have implications for the types of support that may benefit parents during this time.