COVID-19's Impact in Korean Kinship Foster Care Children

When experiencing stress because of a disaster, boys and girls may respond, and be affected, differently. Analysis of developmental outcomes measured before and during the pandemic showed no significant changes. However, significant interaction effects existed between time (before and during the pandemic) and gender, indicating that boys and girls recorded different patterns of change before and during the COVID-19 pandemic.

1. Introduction

The COVID-19 pandemic—a global health crisis—started in 2019. The resulting control and prevention measures significantly impacted social institutions and the lives of ordinary individuals. For example, the way we work has changed; there have been massive layoffs worldwide and remote working has become extremely popular. Additionally, children and families have undergone major lifestyle changes because of remote learning and a lack of childcare following school and daycare closures [1][2][3].

Gender is a crucial factor to consider when analyzing the impact of COVID-19 on child development. Stress responses and the impacts of environmental changes may differ depending on a child's gender. Previous research on child development indicates that in stressful situations, girls tend to have more internal issues such as anxiety, whereas boys tend to display externalized behaviors such as aggression [4][5]. Another study [6] showed that females tended to depend more on emotional support to cope with COVID-19 compared to males. Therefore, it is necessary to explore gender differences in child development during the COVID-19 pandemic.

Korea introduced foster care in 2003, following the recommendations of the UN Committee on the Rights of the Child (UNCRC hereafter) to provide more family-like care to children in out-of-home care [7]. Korea has been providing out-of-home care services mostly through childcare institutions. These services are now more diversified to include foster and group homes. Unlike adoption, foster care aims to bring the child back home as soon as possible and provide protection at home, which is a significant difference compared to institutional care [8]. However, previous studies [7][9] have shown that children tend to stay in foster homes for extended periods, for example, an average of eight to nine years in the case of upper elementary students in Korea.

Since the establishment of formal foster care in 2003, it has commonly been categorized into three primary types in both the child welfare academic field and practice: general foster care (non-kinship), grandparent foster care, and other relative foster care due to the jurisdiction of law. Although the categorization of the three types was removed from the law in 2021, it is still widely accepted by researchers and practitioners due to the long period of utilization of these categories. Approximately 90% of foster parents in Korea are grandparents or other relatives of the foster child [10]. Previous research [7][11][12] has suggested that foster kinship families and children in Korea do not received proper case management. For example, case management mostly involves cash subsidies and the supply of goods, whereas accessibility to therapy and other medical services is limited [11]. The interruption of in-person social welfare services, due to the social distancing measures adopted in Korea during the pandemic, has increased the difficulties in providing welfare services to foster homes. Under such circumstances, it is highly likely that when schools and daycare centers were closed during the pandemic, kinship foster children received support from and communicated with only kinship carers and foster home family members.

2. Kinship Foster Care in Korea

In the 1980s, Korea witnessed a rapid increase in family breakdown due to the urbanization and industrialization that occurred since 1960s. Prior to that, Korea had been primarily an agricultural society for a long time, characterized by a strong emphasis on familism. However, urbanization and industrialization prompted population migration in pursuit of jobs and individualization. Both these trends led to weakened family ties and bonds. The family breakdown resulting from these changes in society has imposed a significant burden on childcare institutions responsible for receiving and safeguarding children from fragmented family backgrounds. The number of childcare institutions has grown over time and has traditionally been the primary choice for children in care [13].

However, as previously mentioned, a significant shift in Korea's out-of-home care services occurred after the recommendation of the UNCRC in 2003. In response, the government introduced formal family foster care to align with the UNCRC's guidance. Additionally, revisions were made to the Child Welfare Act to provide legal support for formal foster care [7][14].

This legal support resulted in a significant increase in foster care placements, with many of these placements being based on kinship. This increase was also motivated by the inclusion of "child-headed families" into the foster care system. As defined by the government, "child-headed families" referred to families in which individuals under 18 years of age lacked their biological parents and assumed the responsibility, in the absence of their parents, of caring for cohabiting grandparents or other relatives who were unable to work due to incapacity or illness. These children took on responsibilities associated with running the household, covering both the emotional and economic aspects of functioning as the head of the household. The government provided financial assistance to child-headed families with the primary aim of ensuring essential living conditions, though lacking appropriate social work services, including out-of-home care services [13]. For this reason, child-headed families were not recognized as informal care arrangements or suitable government interventions. Criticism from both domestic and international sources prompted the government to view kinship care as a viable alternative [7]. However, this transition primarily involved renaming "child-headed families" as foster care homes, without necessarily relocating vulnerable children to appropriate foster care environments [7][14].

At present, there are no longer any child-headed families in Korea that could transition into kinship care. However, the majority of foster carers continue to be grandparents or other relatives. This inclination can be attributed to traditional culture's emphasis on bloodlines. Particularly, older adults often feel a sense of responsibility to care for children who share their own bloodline [12].

To date, kinship care accounts for 90.3% of all foster care homes, whereas non-kinship care accounts for 8–9%. The 2021 statistics on foster children show that 6468 children (65.4%) are cared for by grandparents, and 2466 children (24.9%) by other relatives who are related by blood or via parents' marriage [10]. The children in grandparent foster care account for 0.12% of the total child population, and the children in other relative foster care account for 0.04% [15][16].

Foster care service in Korea is managed by the Ministry of Health and Welfare (MOHW), the National Center for the Rights of the Child (NCRC), and foster care support centers. Foster care support centers and non-governmental organizations oversee cases of foster homes and foster children's parents. According to the 2021 statistics, there are 18 foster care support centers nationwide and 225 case managers. On average, each center has six case managers, one therapist, and one independent living coordinator [10].

One case manager manages an average of 84 foster care children, 69 foster homes, and 5271 cases annually, which is a heavy workload [10]. Owing to the large volume of kinship cases assigned to a single manager, the kinship foster carer and children do not receive proper services and support. For example, services and support for the kinship carer primarily include counseling via phone and in-cash or in-kind support [17][18][19][20]. Case managers tend to provide more face-to-face counseling, home visit services, and referrals to therapy services to non-kinship foster families to retain them [11]. Moreover, kinship carers tend to be older, with less education and income compared to non-kinship carers [20]. Such disparities are also evident in the kinship foster care status of other countries, including the United States, the United Kingdom, and Australia [21][22].

Researchers in Korea [7][11][12] have mainly compared the developmental outcomes of kinship and non-kinship foster children because, despite their high representation, kinship foster care homes are not adequately managed or supported. This results in a poorer environment for children in kinship foster care, compared to general foster care.

Earlier studies indicated that children in kinship foster care show less anxiety, aggression, and delinquency, as well as more positive developmental outcomes compared to their peers in general foster care [23]. However, later research [24] has

suggested that kinship carers experience extreme parenting stress, which lowers family adaptability, and, in turn, exacerbates the foster child's behavioral problems. A longitudinal analysis [12] found that when children were first placed in foster homes, those in kinship foster care showed better developmental outcomes in most aspects compared to those in general foster care. However, over time, the latter group showed better developmental outcomes than the former group. A comparative study of the five-year developmental outcomes of children in kinship foster care and childcare institutions [9] reported similar results. At baseline, foster children in kinship foster placements outperformed their peers in childcare institutions. However, the achievement gap gradually decreased, and those in institutions showed even better results in certain areas [9]. Against this backdrop, where foster children in kinship foster care exhibit more negative developmental outcomes than those in general foster care, it is necessary to determine how the COVID-19 pandemic has impacted their development. Additionally, in Korea, very few studies have considered gender a significant variable when analyzing the developmental outcomes of kinship foster care children. Therefore, it is imperative to identify the impacts of the pandemic on the development of kinship foster children and gender disparities to improve child welfare intervention strategies.

3. COVID-19 and the Development of Children in Foster Care

Many studies have indicated that the pandemic has had a more negative impact on children and youth than on adults. Children had to stay at home for an extended duration; they could not go to school, lacked peer interaction and physical activities, and endured various stressful restrictions [25][26][27]. Additionally, the pandemic severely impacted children receiving out-of-home care; for example, childcare disruptions increased foster parents' stress and parenting and financial pressures, which in turn increased the risk of foster care termination or rejection. Uncertainties surrounding school and day care also limited double-income foster parents' foster care capabilities [28][29][30]. Conflicts between foster parents and children also escalated because social distancing measures required them to spend more time at home. Children who had newly entered foster homes during the COVID-19 pandemic struggled to adapt and felt isolated because of poorer access to in-person services from foster care or social workers and a reduction in social support amidst increasing financial burden [29].

Foster parents' stress and parenting pressure increased because of the pandemic-related strain on the childcare system. Additionally, childcare problems especially hurt the finances of working foster parents. These pandemic-induced circumstances increased the risk of foster care placement disruption [28][31]. Additionally, family reunification rates dropped because meetings between foster children and their parents were limited. Face-to-face interactions were also restricted, and infected children were rejected for foster care. Such experiences negatively impacted child development [32][33][34].

The COVID-19 pandemic has negatively impacted the psychosocial adaptation of foster children. Many foster children are already exposed to a high risk of internalizing and/or externalizing behavioral problems because of their circumstances; for example, separation from family or abuse [35][36]. Additionally, the pandemic has increased the psychological risks to children. Children in foster care reported greater psychological and emotional distress, including depression, anxiety, fear, post-traumatic stress disorder (PTSD), and irritation [37][38][39][40][41][42]. These psychological changes and stress tend to transform into external behaviors, such as aggression, rage, and attention deficiency, which deteriorate one's quality of life [26][43]. Moreover, foster children were exposed to a greater risk of losing their sense of belonging, experiencing loneliness and frustration, and becoming disobedient when they could not meet their family during the pandemic [34][44].

As discussed above, the COVID-19 pandemic has impacted both the mental health of children in foster care and their educational development [45]. These children are vulnerable to learning loss because of the absence of learning opportunities or learning disruptions [40][46][47][48][49][50][51]. A study of high school students in foster care [46] showed that school closure limited their access to their school network, which led to a loss of the sense of community and participation deficiency. School-related restrictions limited social activities, causing these children to feel helpless. They also faced developmental risks because of losing opportunities to participate in arts and sports activities, interact with teachers and peers, and access medical services and therapies [30][40][52].

The pandemic limited the access to and supply of human and material resources required by children in foster care. When foster parents failed to cope with the lack of resources, such as not being able to give children more care and attention, it aggravated the difficulties of children in need of psychological and emotional therapy [30][44][45]. Children in kinship care are typically looked after by their elderly grandparents or other older relatives. In these situations, instead of addressing the challenges of limited resources for children, older foster parents exhibited an elevated risk of experiencing caregiving instability when they contracted COVID-19 [34][53]. Kinship foster care homes that suffered pandemic-induced financial difficulties as well as parenting stress experienced even harder times [17].

Although extensive research has been conducted on the challenges faced by foster children during the pandemic, empirical studies on its impact in Korea are lacking. However, a recent qualitative study on children in institutional care [54] found that social distancing measures violated children's right to liberty, as they were unable to access learning and social welfare services and/or meet their parents. These findings highlight the severity of the pandemic's impact on socially vulnerable foster children, underscoring the need for comparative studies on developmental outcomes before and during the COVID-19 pandemic to better understand the effects of the pandemic on their psychosocial adaptation and development.

In summary, previous research has indicated that the occurrence of COVID-19 has had a significant impact on children's development. In particular, pandemics cause emotional and behavioral problems in children, such as low self-esteem, depression, anxiety, and aggression [55]. Owing to school closure, children experienced a sense of isolation and loneliness. Additionally, they lost interest in school life and their dependency on digital devices increased [56]. Based on a study that conducted a systematic review of empirical research on the negative effects of mobile phone use [57], it has been demonstrated that excessive use of digital devices has an impact on psychological problems. Furthermore, frequent use of mobile devices has been associated with adverse effects on children's emotional and behavioral adjustment [58].

4. Gender Differences in Children's Development during Disaster

Children are more vulnerable than adults to crises, and therefore, more negatively impacted [59]. The United Nations Development Programme (UNDP) estimates that women and children are 14 times more likely to die from a crisis or disaster than male adults [60]. Additionally, boys and girls are affected differently by disasters. For example, in the wake of Hurricane Katrina in the United States, more girls reported PTSD symptoms than boys [61]. Girls are more likely to exhibit PTSD symptoms after a disaster, and their symptoms tend to be related to mood and anxiety [62]. A survey conducted three months after the 1999 Athens earthquake revealed that girls showed higher PTSD and depression scores than boys [63]. Existing research on disasters and trauma indicates that females display more symptoms [64], and similar differences were reported for children and youth based on their gender.

An increasing number of studies indicate that the impact of the COVID-19 pandemic manifested differently in children, depending on their gender. For example, a Japanese study [65] found that more boys experienced behavioral problems, such as hyperactivity and trouble with peers, than girls, whereas more girls experienced emotional symptoms, such as anxiety related to learning loss. A British study [66] indicated that the pandemic's impact on mental health was greater for girls than for boys and found a negative correlation between gender disparities and family income. A study on children in the Asia-Pacific region [67] showed that female youth were more concerned about the pandemic compared to their male peers.

Children living in residential care showed similar patterns during the lockdown. Girls were more negatively affected compared to males in terms of social relationships. As they could not attend school, they experienced a sense of drifting away from their friends. They were also dissatisfied with online interactions, and felt a stronger sense of loneliness compared to boys [68].

A few researchers [56][69] in Korea have attempted to identify the impact of the pandemic on child development; however, these studies were not based on data measured before and during the pandemic. Previous studies have suggested that changes in the usual life pattern during the pandemic increased children's stress, and this increase was more pronounced among children from low-income families [56]. According to a similar study conducted during the pandemic, girls experienced more anxiety and stress compared to boys [69].

To sum up, disasters such as the COVID-19 pandemic negatively affect the children and youth. Previous studies from home and abroad have indicated that girls are more negatively impacted and display more internalizing behaviors, such as depression and anxiety, compared to boys [62][66].

Additionally, in the context of kinship care in Korea, scholars have to explore whether kinship foster parents, who are generally older than non-kinship foster parents, respond differently to children's gender during a disaster. Given the longstanding influence of Confucianism, ideas of prominence of men over women and traditional gender stereotypes could still remain, especially among the older generation [70][71].

Furthermore, the impact of traditional gender stereotypes upheld by kinship caregivers might have influenced children's beliefs and behaviors at home. According to a study [70], children who have lived with their grandparents tend to display more pronounced gender role stereotypes compared to children who have not, showcasing a stronger inclination towards

the traditional belief that males should be breadwinners, while females should take on the role of housewives and caregivers within a patriarchal framework.

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