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Foster care during the COVID-19 pandemic: A qualitative analysis of caregiver and professional experiences

Adrienne Whitt-Woosley*, Ginny Sprang, Jessica Eslinger

University of Kentucky, College of Medicine - Department of Psychiatry, United States of America

ABSTRACT

Background: Research is needed to facilitate better understanding of how different groups have been impacted by COVID-19, especially those in already strained service systems such as foster care. These inquiries will support further response, recovery and preparedness efforts.

Objective: This qualitative study addressed how professionals and caregivers in foster care described being affected by COVID-19 in order to support future research and planning for foster care systems in this pandemic context.

Participants and setting: A sample of foster parents and foster care professionals (N = 357) from a mostly rural, southeastern state in the U.S. participated in the study.

Methods: Qualitative analysis was conducted of 357 open-ended responses regarding the impact of COVID-19 from a survey distributed in August 2020.

Results: The coding process resulted in the identification of 15 distinct themes: Isolation & Loss of Social Support, Work Changes/Stressors, School Issues, Childcare Issues, No Impact/Positive Changes, Financial Problems, Fear of Contagion, Negative Child Welfare Impacts, Mental Health Problems/Stress, Loss of Faith/Societal Frustrations, Health & Mental Healthcare Access Issues, PPE & Testing Issues, Grief & Loss, and Marital Problems. Secondary impacts rather than direct physiologic effects of the virus were primarily reported.

Conclusions: This study underscores the various challenges facing foster care systems, and how the pandemic context is exacerbating many of these issues. Further research is needed to ensure the implementation of adequately complex and nuanced responses that target needs and avoid creating further problems for foster care.

The COVID-19 pandemic has unfolded over time with periods of varying intensity impacting different regions globally, and it continues to do so. The latest emergence of Delta and other variants are challenging healthcare and social service systems yet again in new and unpredictable ways. The global focus on this urgent health crisis is revealing itself to have many unintended yet significant consequences for children, families and the systems that serve them. Disrupted service provision and social isolation are two critical secondary problems associated with this pandemic that have created environments ripe for child neglect, abuse and exposure to family violence (Berube et al., 2021; Katz & Cohen, 2021). Further complicating matters, the foster care and child welfare populations are comprised of individuals already facing higher rates of endemic and epidemic conditions propelled by socio-political factors that create a synergy or syndemic effect that can worsen the impact of the pandemic, an especially heightened risk for racial minorities and other marginalized subgroups (Gravlee, 2020; Hooper et al., 2020; Musser et al., 2021). Helping professionals serving these children and families are not immune to the effects of the pandemic, and their work context presents even greater challenges than before as they serve a more stressed population with even less resources. It has been suggested that occupational characteristics are important factors influencing the general well-being of helping professionals during this pandemic (Filho et al., 2020). At this point, there is a need for exploratory research to facilitate better understanding of how different groups have been impacted by COVID-19 and associated secondary stressors, especially those encountered in already strained service systems such as foster care. These inquiries will support

* Corresponding author at: 3470 Blazer Pkwy Suite 100, Lexington, KY 40509, United States of America.
E-mail address: alwhit4@uky.edu (A. Whitt-Woosley).

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further response and recovery efforts and can inform preparedness for future health-related emergencies and disasters as well.

1. Pandemic-related impacts on individuals and families

Vast numbers of individuals have suffered the physical consequences of COVID-19, and many more have been affected by the various secondary stressors associated with this pandemic. Safety mandates put forth by the Centers for Disease Control encouraged social distancing and mask wearing (CDC, 2020). School and work activities largely shifted to virtual formats. For many, employment opportunities declined or ceased altogether. Data indicates that the COVID-19 pandemic has had a significant effect on the labor market across the United States, with the service industry and certain demographic groups including Blacks, Hispanics, and younger workers experiencing the highest levels of unemployment (Falk et al., 2021). Food insecurity increased, especially for individuals with lower incomes, Black and Hispanic Americans, as well as families with children (Parolin & Wimer, 2020; Wolfson & Leung, 2020; Yancy, 2020). Changes in routines and related increases in isolation have also been common sources of stress. Studies examining the effects of the lockdown suggest that the likelihood of experiencing loneliness during the pandemic may be greatest for those identifying as female, students and those with pre-existing mental health problems (Bu et al., 2020). Reductions in life satisfaction have also been found for those reporting greater social isolation (Clair et al., 2021).

Not surprisingly, there are growing concerns regarding the increase of mental health problems during the pandemic. Findings from a longitudinal study by Haliwa et al. (2021) found significant increases in anxiety and stress from pre- to during the pandemic with financial concerns and effects of the pandemic on daily life found to be predictive of depression, anxiety and stress. Results of a systematic review of pandemic literature on adult mental health found lower psychological well-being and higher scores of anxiety and depression on average (Vindegaard and Benros, 2020). In a meta-analysis examining anxiety in community samples during the pandemic, Santabarbara et al. (2021) found a prevalence rate of 25% for anxiety. Risk factors were found to include the pandemic phase (i.e., earlier in the pandemic), being female, younger, unemployed, feeling more isolated, and financial problems. Fears specific to being infected by COVID have also been common, especially in the early months of the pandemic with females again having higher levels of anxiety especially related to infection risk for family members (Ciri et al., 2021; Maaravi & Heller, 2020).

The overall impact on family life during COVID-19 has also been significant. Pre-pandemic studies suggest isolation, unemployment and financial stress are risk factors for family violence (Capaldi et al., 2012), all of which have seen significant increases during the pandemic. Cross-sectional findings suggest that COVID-related stressors may contribute to increases in family and parental discord and harmful parenting (Daks et al., 2020). Longitudinal studies examining pre- to post-pandemic changes have yielded findings that suggest mixed outcomes for families. A recently published study examining responses pre (March–May 2019) and post (May–July 2020) pandemic from 127 parents in Canada found an increase in distress for parents with decreased feelings of parenting effectiveness (Gagné et al., 2021). A decrease in prosocial behaviors (decreased cooperation, empathy, sharing, mutual support) by children in the home was also found in this study. Further, there have been concerns of increased risks for domestic violence (Mazza et al., 2020) and child maltreatment (Cuartas, 2020) during the pandemic. A German study conducted with 1024 parents of underage children reported a 29% increase in child exposure to domestic violence during COVID-19 with higher levels of parenting stress, job loss, and younger parent and child age increasing risk (Calvano et al., 2021).

2. Pandemic-related impacts on professional experiences

In response to the pandemic, workers and certainly helping professionals have had to adapt to ongoing changes related to performance of job responsibilities, interactions with clients and work with colleagues. Telecommuting services have been heavily used to adapt to pandemic safety restrictions, with a substantial increase in telehealth use noted from 2019 to 2020 (CDC, 2020). Use of virtual formats, while offering increased flexibility for both professionals and clients (Hopkins & Pedwell, 2021), have also led to changes in how colleagues interact with one another, with organizations having to find new ways to maintain communication and connection between staff. Also, certain clients cannot be accessed via telehealth due to a lack of available broadband, especially those living in more rural areas (Hirko et al., 2020), and a lack of privacy and difficulty translating different aspects of service provision to telehealth have been challenges as well (Hopkins & Pedwell, 2021). A mixed-method study by Morse and Dell (2021) with behavioral health professionals in the United States similarly found reported distress related to changes in routines, concerns about COVID-19 infection, challenges to maintaining a work-home balance, technological challenges and changes in communication flow with colleagues.

Additional specific concerns for child welfare and foster care professionals have emerged during this pandemic. Prior to COVID-19, these professionals already experienced high levels of institutional stress with large caseloads, chronic understaffing and turnover as the norm (Paris & Hoge, 2010; Rupert & Morgan, 2005). High doses of indirect trauma exposure for these professionals including foster parents were common as was the risk for developing symptoms of secondary traumatic stress (STS) and related conditions such as burnout (Bridger et al., 2020; Cieslak et al., 2014; Hannah & Woolgar, 2018; Singh et al., 2020; Whitt-Woosley et al., 2020). Emerging research on the effects of COVID-19 related stressors and experiences of STS and burnout in professionals and caregivers in foster care found statistically significant increases in STS related symptoms from pre-pandemic baseline to summer 2020 in addition to frequent experiencing of numerous COVID-19 related stressors (blinded for review). These findings suggest that certain professional groups may be at heightened risk for problems associated with COVID-19.

Given the impacts and challenges noted in the growing pandemic literature regarding home and professional life, there is a need to explore specifically how these challenges are experienced in foster care systems. This seems especially relevant to understanding the unique experiences of foster parents given the diffuse boundaries between their home and professional contexts. To date, there are no published studies specific to how the pandemic has disrupted the lives of foster care professionals and foster families. This exploratory,
qualitative study addresses the research question of how professionals and professional caregivers in foster care systems describe being affected by COVID-19 in order to support future research and planning in this pandemic context.

3. Method

Using qualitative data from a mixed methods study, this investigation analyzes 357 open-ended responses that were embedded in a cloud-based survey distributed in August 2020 to foster parents and professionals working with children involved in the child welfare and foster care systems. Invitations to participate in the survey were emailed from child welfare administrators to state sponsored foster parents, while administrators from 48 organizations invited private agency foster parents. These state and private foster care leaders also invited their professional staff (i.e. case managers, mental health professionals, educators, healthcare professionals and others) to participate in the survey.

Participants were offered a $10 incentive for completion of the anonymous survey, and if interested, were directed to an unlinked, secure form where payment details were provided. A respondent-generated code was created by and known only to the respondent so that all data were void of identifying information. Written consent was obtained prior to initiating the study and the university and state child welfare agency Institutional Review Boards approved all research protocols.

3.1. Measures

Participants who consented were asked to provide demographic information: sex (Male, Female, Other), age (as a continuous variable), marital status (Single, Married, Living with a Partner, Widowed, Separated, Divorced), educational status (Less than High School, High School, Some College, College, Graduate School, Doctorate, Other), race/ethnicity (White, Black, Asian, American Indian, Native Hawaiian, Multiracial), and job role (Foster Parent, Foster Care Worker/Case Manager, Mental Health Professional, Educator, Healthcare Professional, Other) were solicited in addition to other measures that were included in the quantitative study (blinded for review). The survey also included an open-ended question, “Please tell us about the ways the COVID pandemic has affected your life?” Responses to this open-ended question are the focus of this paper.

3.2. Analysis

Textual analysis of the 357 responses was conducted using a grounded theory approach where latent response patterns and structures were investigated with no a priori assumptions. This approach was selected due to the unique nature of the COVID pandemic condition, and the need to take an exploratory perspective to understand the impact of COVID on individuals and families. Two coders identified themes and sub-themes by reviewing the data to detect unique and repeating patterns, memoing to capture observations and decision points, coding nascent themes using keywords and phrases; and categorizing the codes into hierarchical concepts to mark relationships. An established iterative process was utilized; after round one of coding a sample constituting 50% of the responses, the two coders met to review the coding and memoing (Srivastava & Hopwood, 2009). Consensus was reached on issues where memoing revealed a divergent interpretation of the response. After two rounds of coding, an inter-rater reliability of 100% was established. The themes were then organized into tables for referencing. Examples demonstrating varying degrees of impact were noted for each theme (mild, moderate, severe).

3.3. Sample

Qualitative responses were provided by a sample of foster parents and foster care professionals in various roles that ranged from 22 to 77 years of age (mean = 43.73, SD = 10.30), with the majority female (86%). The sample also identified as Caucasian/White (91%) and Married (76%). Almost a quarter of the respondents had post graduate education (26.9%), while 58.5% reported some college, and 12% had a high school education. While the entire sample was comprised of foster care professionals, there was variety in terms of the role that each respondent played in the foster care system. The majority of the sample identified as Foster Parents (70%), followed by Educators (6.2%), Case Managers (5.6%), Mental Health and Healthcare Professionals (5% respectively), and Other (7.8% percent).

4. Results

The coding process resulted in the identification of 15 distinct themes which are presented in the order they were encountered and identified in the dataset: Isolation & Loss of Social Support, Work Changes/Stressors, School Issues, Childcare Issues, No Impact/Positive Changes, Financial Problems, Fear of Contagion, Negative Child Welfare Impacts, Mental Health Problems/Stress, Loss of Faith/Trust & Societal Frustrations, Health & Mental Healthcare Access Issues, PPE & Testing Issues, Grief & Loss, and Marital Problems. The responses aligned with each theme demonstrated a range of intensity as well as demonstrations of the variety of ways that the participants reported the pandemic had affected their lives.

Of the 347 responses analyzed, Change in Routines was the most frequently observed theme which was observed in 25% of the responses. Isolation & Loss of Social Support (14%), School Issues (12%) and Work Changes/Stressors (10%) were the next most frequently observed themes indicating a significant percentage of negative impacts from the pandemic reported overall. However, it is notable that No Impact/Positive Changes was also a prominent theme observed in 9% of the responses. Other themes observed to a similar degree included Childcare Issues (9%), Financial Problems (7%), Fear of Contagion (8%) and Mental Health Problems/Stress.
Table 1
Themes and supporting quotes identified regarding the impact of COVID-19 (N = 357).

| Themes                                | Description                                                                 | Sample quotes (mild, moderate, severe impact)                                                                 |
|---------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Change in Routines                    | Major changes in daily life for adults and foster youth                     | - “Less active.”                                                                                           |
|                                       |                                                                             | - “School and working from home have been huge adjustments.”                                                |
|                                       |                                                                             | - “It's changed absolutely everything for almost everyone.”                                                 |
| Isolation & Loss of Social Support    | Loss of access to connections                                               | - “Less access to hobbies that are outside of the home.”                                                   |
|                                       |                                                                             | - “Major impact on coping skills, exercise routine and socializing with friends and colleagues.”           |
| School Issues                         | Loss of in person education and/or difficulties with online education       | - “Isolation, added responsibility, online school paired with online work is demolishing our peace and confidence.” |
|                                       |                                                                             | - “The children being out of school is causing negative changes in their moods and behaviors as they are becoming bored and unable to socialize.” |
|                                       |                                                                             | - “Schooling 5 kids under 10 is very difficult. Unrealistic expectations of work to be completed. Not having computers for all of the kids.” |
| Work Changes/Stressors                | Changes in workplace practices or work access,                              | - “Not being able to have in person contact with clients.”                                                 |
|                                       | including loss of employment                                                | - “Working from home has taken away the ability to interact with and vent to coworkers in the office setting and I often find myself feeling alone in treating the clients I work with in the foster care system.” |
|                                       |                                                                             | - “Work-life balance has been non-existent. Full-time parent and full-time employee at home is impossible to sustain.” |
| Childcare Issues                      | Loss of or limitations in access to childcare                               | - “Finding daycare for fosters was tough.”                                                                  |
| No Impact/Positive Changes            | No impact or improvements in individual or family life secondary to the pandemic | - “Significant changes to work schedule and the stress of working from home while being in the caregiving role.” |
|                                       |                                                                             | - “It took away our support systems. Therapy was delayed and we were overwhelmed working from home and caring for children.” |
| Fear of Contagion                     | Fear or worry regarding contracting or spreading COVID                       | - “Nothing changed.”                                                                                        |
|                                       |                                                                             | - “Allowed me to be home with my kids. I have enjoyed that.”                                               |
|                                       |                                                                             | - “It has made me really think about what's important and prioritize those areas of my life.”                |
| Negative Child Welfare Impacts        | Disruptions in service provision, court proceedings and/or foster family functioning secondary to the pandemic | - “It’s overall been a good re-set for my family, we are doing quite well.”                                 |
|                                       |                                                                             | - “Overall worry for everyone's health and safety.”                                                         |
|                                       |                                                                             | - “Visits with bio family and their lack of compliance with masks, social distancing, etc. is very stressful because it puts risk on us and the other children living in our home.” |
|                                       |                                                                             | - “Constant fear of getting others sick and choosing to stay home and away from family/friends often because of this even if I am not showing any symptoms.” |
| Financial Problems                    | Financial difficulties or loss of income                                    | - “My hours have been cut at work.”                                                                         |
|                                       |                                                                             | - “Lost job.”                                                                                              |
|                                       |                                                                             | - “I'm getting evicted.”                                                                                   |
| Mental Health Problems/Stress         | Any degree of emotional challenges, distress or specific mental health problems | - “The stress and anxiety on the children is very real. Their lives have been turned upside down.”          |
|                                       |                                                                             | - “It has made it hard to de-stress. It feels like there are no escapes.”                                    |
|                                       |                                                                             | - “Anxiety and fears of the pandemic are never ending.”                                                     |
| Loss of Faith/Trust & Societal         | Descriptions of the negative impact of sociocultural and/or political issues in the pandemic context | - “It has made me more aware of what is really going on in our government.”                                |
| Frustrations                          |                                                                             | - “Frustration with political systems. Impact on family business and interactions with friends.”            |
|                                       |                                                                             | - “Complete mistrust of government institutions due to incompetent federal leadership, it has made me wonder how I could ever trust a vaccine developed in this country. That is leaving us with an uncertain future and possibly hard decisions to make about who and what institutions to trust.” |
| Health & Mental Healthcare Access     | Disruptions in service provision                                             | - “At first the foster baby could not get his check-ups.”                                                  |
| Issues                                |                                                                             | - “Children have not had counseling. They are too young for televisits to be beneficial.”                   |
|                                       |                                                                             | - “DCBS worker has been absent. Very frustrated. Unable to get therapies for foster children and very overwhelmed with virtual learning since I have 5 children.” |
| PPE & Testing Issues                  | Issues regarding the use of or access to necessary COVID precautions and resources | - “Making sure I have enough thermometers in the house so if I need to watch that each day that child has his own.” |
|                                       |                                                                             | - “The wearing of the mask is not possible for me as it causes me to have a (continued on next page)          |
The more extreme impact of Grief and Loss was only reported by a small percentage of participants (1%), as was Loss of Faith/Trust & Societal Frustrations (3%), Marital Problems (1%), Health & Mental Healthcare Access Issues (3%) and PPE & Testing Issues (1%). Significantly for this foster care sample, the theme of Negative Child Welfare Impacts was observed in 8% of the responses.

The coding process included organization of responses by themes, and various quotes by the participants demonstrated the range of impacts experienced up to and during this phase of the pandemic. The responses seemed to fall along a continuum of those mildly to severely impacted, and Table 1 provides sample quotes to demonstrate this range of impacts with increasing intensity for each theme identified as well as a brief description of each theme. For example, some participants described personally experiencing “significant anxiety and distress” related to their pandemic experiences of Isolation & Loss of Social Support, while others described their experience as merely being “hard to see the toll it has taken on young people.” Regarding Financial Problems, a range of impacts from receiving less hours at work to experiencing eviction was noted. Although, some themes seemed to have less variability in terms of intensity. For example, School Issues and Childcare Issues seemed to be described primarily with a moderate degree of impact. When this theme was mentioned, it was generally described as being a problem that was upsetting and affected the individual and/or family's functioning in some significant way. Similarly, Negative Child Welfare Impacts was a theme that was mostly characterized by descriptions of severe impacts in terms of distress and disruptions in individual or family functioning. Examples of impacts described for this theme included closures of foster homes and foster parents deciding to no longer foster, children in foster care not having visitation with biological family members for extended periods of time, children in foster care not receiving contact or services from child welfare workers and majorly delayed court dates and permanency decisions. One participant described the pandemic and its secondary effects

| Themes               | Description                                      | Sample quotes (mild, moderate, severe impact)                                                                                                                                 |
|----------------------|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Grief & Loss         | Impact of deaths and loss related to COVID       | "Mom who lives in same house probably had virus but no test kits available. Had to self-quarantine in her room.”                                                                                 |
|                      |                                                  | "Saddened to see so much death and loss in the world.”                                                                                                                                              |
|                      |                                                  | "Daughter in law passed away leaving our son to raise their 10 day old daughter.”                                                                                                                  |
| Marital Problems     | Disruptive impact on marriages in the pandemic context | "Lack of childcare and things to do on date nights has strained marriage.”                                                                                                                               |
|                      |                                                  | "My spouse and I are having marital troubles. We are on opposite ends of the spectrum when it comes to the beliefs/concerns of the pandemic.”                                                 |
|                      |                                                  | "All of the above in addition to traumatized children was creating havoc on our marriage and other children.”                                                                                  |
| Service Provision    |                                                  |                                                                                                                                                                                                 |
| Court Delays         | "Termination of Parental Rights (TPR) has been rescheduled and court dates because of COVID-19.”                                                                                                        |
|                      | "There have been delays in court dates, prolonging TPR.”                                                                                                                                             |
|                      | "Delayed court dates are extremely frustrating.”                                                                                                                                                         |
|                      | "Court dates keep changing.”                                                                                  |                                                                                                                                                                                                 |
| Visitation Disruptions| "My foster son was sent to bio parents with very few visits with bios and no overnights because of COVID-19. He went home to practically strangers because court did not want to delay reunification any longer.” |
|                      | "Fosters lost visits with family, causing severe mood change.”                                                                                                                                         |
|                      | "Foster child unable to have face to face contact with birth family.”                                                                                                                                 |
| Placement Disruptions/| "I experienced a disruption during this time with a child who had been with me for 1.5 years, TPR on the horizon. Kids out of school, all of us stuck at home 24/7, teletherapy appointments that were not very effective, not having access to my family (we were trying to abide as much as possible by the guidelines of staying home and away from other people) who are my absolute biggest support definitely contributed to the disruption. There were other behavioral issues and I had several other children at the time, so it wasn't the only thing. But the virus definitely impacted my ability to be at my best when dealing with behavioral issues and just feeling very isolated with all the kids.” |
|                      | Delays                                           | "Delayed getting our next placement. Trying to be patient waiting for a new placement. Our previous children were moved to extended family just prior to Christmas. Difficult time to lose children that had been with us for 17 months.” |

(6%). The more extreme impact of Grief and Loss was only reported by a small percentage of participants (1%), as was Loss of Faith/Trust & Societal Frustrations (3%), Marital Problems (1%), Health & Mental Healthcare Access Issues (3%) and PPE & Testing Issues (1%).
as resulting in the “perfect storm” which led to a placement disruption. Table 2 provides additional sample narratives regarding these foster care specific points of intersection with the pandemic and its disruptive effects.

As noted with Negative Child Welfare Impacts, the responses associated with each of these themes demonstrated the variety of ways that COVID-19 had impacted the participants' lives and the many specific areas of impact. When describing themes of Isolation & Loss of Social Support, participants noted limitations in access to family, friends, co-workers, social events and milestones, other environments, stores, needed resources, church, recreational groups and activities. The most frequently reported theme was Change in Routines which also demonstrated the myriad ways participants had experienced pandemic related disruptions. Examples included changes associated with avoiding crowds, having little structure or no real schedule, having no physical contact with others outside of their home, spending more time at home, not having public activities, using more sanitizer and increased cleaning and physical hygiene. A similar range of responses was noted with each theme with variability being the main consistency under each category of experience.

5. Discussion

The individualized nature of experiences of this pandemic is demonstrated in the variety of themes that emerged as well as the varying intensity of impacts described by participants in this study. The most common themes included change in routines, isolation/loss of social support, and school and work changes with moderately frequent reporting of childcare issues, mental distress, fear and financial problems. These themes have all been noted in other studies of the pandemic, suggesting that members of the foster care system experience universal stresses as well as those unique to the child welfare context. These themes represent many of the issues being reported on internationally as the secondary pandemic (Tummalal & Muhammad, 2020). Research has found that children and adolescents in particular have been seriously impacted by the closure of schools, cancelling of activities and lack of routine while social distancing as evidenced by increased reports of stress, loneliness, sadness and even an increase in youth suicide (Manzar et al., 2021; Oosterhoff & Palmer, 2020). This is consistent with how the adult respondents in this study described the impact on foster youth. It seems likely that emerging research will show that children with special needs such as many of those in foster care will be even more adversely impacted. One study of adults found having complex Posttraumatic Stress Disorder (PTSD) to be a risk factor for increased COVID-19 related distress (Tsur & Abu-Raiya, 2020). This connection needs to be explored in our foster youth given that many of them also suffer from complex post-traumatic stress.

Responses from many of the caregivers in this study illustrated the significant impacts of disrupted routines and other secondary stressors on parental stress in addition to child well-being, especially when service provision to their children was disrupted. Another study of kinship care families noted increased parental stress during this pandemic especially in those also experiencing economic hardships, illustrating how combinations of factors and stressors can create contexts ripe for distress and impaired functioning in these already challenged families (Xu et al., 2020). Other studies of the general population have shown caregivers to be experiencing heightened levels of parental stress when childcare, school and other necessary services are not accessible which was also echoed in the descriptions of the caregivers in this study (Calvano et al., 2021; Chung et al., 2020; Rodriguez et al., 2021). Unfortunately, these same studies also found increased risks for child maltreatment during a time when children are less visible to reporting sources or those who can intervene on their behalf, creating that “perfect storm” for unmitigated child abuse and neglect that even foster and kinship families may not be able to escape (Rodriguez et al., 2021). Notably, direct impacts of the virus and even fear of contagion were less prominent themes, which provides further support that at least up to this point in the pandemic, the primary effects on families and professionals in foster care are related to secondary pandemic issues.

While challenging work conditions was a prominent theme overall, many of the responses were specific to working in the foster care system. Some participants commented on how it was difficult to not have in person contact with clients and how the lack of supportive contact with co-workers was associated with feeling alone or isolated. A few other studies to date have noted how child welfare professionals in particular require supportive work contexts in order to engage in resilient behaviors and adapt to their workplace and personal challenges during this pandemic given the high stress nature of these occupations (Filho et al., 2020; Levine et al., 2020). It has been noted, however, that pandemic challenges are creating opportunities for change and innovation that support improvements such as increased workplace flexibility and new methods for engaging busy families afforded by telehealth and digital technologies. This was further echoed by respondents in the present study as 9% of responses contained some suggestion of positive change or at least no negative impact from the pandemic.

It is important to highlight some of the foster care and child welfare specific issues described given that this was a moderately prominent theme (8% of responses), and descriptions suggested a high intensity of impact. These included reports of home closures due to a lack of school and childcare, prolonged court delays, insufficient supports for special needs children and placement disruptions related to pandemic stressors which are all very serious problems with significant consequences. There is limited research on these specific impacts during COVID-19 to date though there is accumulating evidence of an increase in the incidence of child maltreatment in the general population, less frequent reporting of child maltreatment to authorities, increased impacts on mental health for adolescents with maltreatment histories and extensive court closures and delays (Cappa & Jijon, 2021; Guo et al., 2020; Katz et al., 2021; Lawson et al., 2020; National Center for State Courts, 2020; Whelan et al., 2021). The findings of the present study and others reflect the complexity of the foster care and child welfare systems, and how pandemic stressors are exacerbating problems in a manner that warrants attention and policy shifts.
5.1. Limitations

Given the exploratory nature of this qualitative study, there are limitations that prohibit generalizability beyond this sample. First, this was a self-selected group of respondents that does not necessarily reflect the experiences of this or other statewide foster care systems in the U.S. or abroad. Because this is a study of pandemic experiences, both the timing and regional context of experiences are highly influential. These findings reflect only a snapshot in time from a group of adults in a mostly rural, southeastern foster care system in the U.S. It will be important for future studies to note differences in more urban settings as well as in other regions and countries, and to collect data directly from children regarding their experiences. Also, there is such a dearth of research on the impact of the COVID-19 pandemic in foster care that there was limited guidance for the approach to this study, and thus only one qualitative question was included. However, over 300 responses were received on a variety of themes, which fulfilled the purpose of this study to generate data to guide future investigations.

5.2. Recommendations

Many issues were raised during this study that warrant further investigation and consideration for action. While this study is not generalizable beyond this group of participants, the significant impact of the issues raised by multiple respondents suggests that some actions should be taken, and the effectiveness of those actions studied and refined accordingly. This pandemic context heightens the urgency of translating research to practice to improve and preserve clinical and population health (Ramsey et al., 2019). An important recommendation to consider as a translational research target is the development of policies and action plans for children in adversity that bring together representatives from multiple child-serving systems and public health officials, are comprehensive in nature and reduce the potential for iatrogenic harms to children from the COVID-19 response (Brown et al., 2020; Wilke, Howard, & Pop, 2020). Attention to ensuring access to necessary services (health and mental health, education, childcare) as well as basic economic resources must be part of the planning, and social distancing measures should change with the severity of outbreaks on a local level to prevent further hardships. Other studies have noted the importance of minimizing separations of families and disruptions in visitation in light of social distancing policies, as well as avoiding prematurely discharging children from residential care or reuniting families because of pandemic related challenges (Wilke et al., 2020; Wilke, Howard, & Goldman, 2020). There are also growing concerns regarding court delays related to pandemic shutdowns and resulting case backlogs. Recommendations for the state court systems in the U.S. include providing timely communication to involved parties, triaging all new and existing cases, and reviewing submissions prior to hearing dates to ensure that hearings are meaningful and productive (National Center for State Courts, 2020). Research on the prevalence and significance of all of these issues as well as the effectiveness of any associated response efforts is needed.

Additional recommendations to consider include those pertaining to service provision and supports for helping professionals and caregivers in foster care. First, it is critical that foster care professionals screen families for the impact of stressors associated with COVID-19 (Fallon et al., 2020). There are some simple screening tools available such as the Coronavirus Impact Scale (Kaufman & Stoddard, 2020) that can assist with this process and help providers identify areas for support that could help stabilize placements. Also, it seems critical that mental health and other supportive service provision continues for foster families even during periods of social distancing as these are essential services. While telehealth has been a useful resource during the pandemic, providing trauma therapy or mental health services to children in particular warrants careful planning to ensure the necessary conditions of safety and privacy (Racine et al., 2020). Racine et al. (2020) also suggest that as the evidence base for teletherapy for maltreated children grows, it would be beneficial for therapists to engage in supportive communities of practice via telehealth and share emerging information and data on potential best practices in these pandemic conditions. Lastly, it will be important to find both preventive and interventive supports for caregivers during these trying times given the accumulating evidence regarding parental stress. Consideration of establishing parental crisis hotlines, online parent support groups and routine interval screenings of resource needs and pandemic stressors affecting families is indicated (Fore, 2021), as is the ongoing study of the effects of these efforts and pandemic planning measures.

5.3. Conclusion

The COVID-19 pandemic has raised many complicated questions regarding how to meet the needs of all children and families during these trying times. Foster care and other child serving systems have been historically challenged with the need to address complex issues and avoid creating more harms along the way. The current attention and investment of resources to address contemporary concerns affecting families and helping professionals should prompt further study and efforts to support foster care now and beyond the COVID-19 pandemic.

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