


Article

Challenges and Response of Korean Religions to the COVID-19 Pandemic in Korea

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Abstract: The ongoing COVID-19 pandemic has triggered many lifestyle changes and caused serious social issues such as economic disruption, restriction of social and religious activities, and an increase in anxiety and conflict. This study first elaborates the pre-pandemic status of Korean religions and the Korean government's response to the COVID-19 outbreak. Second, the study examines the debates regarding the role of religion at the initial stage of the COVID-19 outbreak, as some members of religious denominations such as Shinchonji Church of Jesus and some Protestant churches led by Pastor Chŏn's Love First Church (K. Sarangjeil) significantly contributed to its spread through their religious services and gatherings. In this regard, this study examines how the media portrayed religion in this period. When the Korean government implemented strong distance and prohibition policies for social and religious gatherings, the issue of religious freedom became a serious social issue, driving the public to think about the social role of religions when it comes to public health. Without a doubt, the COVID-19 pandemic impacted Korean society and religions, producing some negative symptoms such as the corona-blue syndrome. In this context, this study examines the role of religion in public health. The role of religion in Korea may need to change. Given that most religions in Korea such as Buddhism, Catholicism, and *Won*-Buddhism have actively cooperated with the government policy to overcome COVID-19, these religions can help heal the post-pandemic traumas and suffering from the ensuing natural or social disasters.

Keywords: Korean religions; COVID-19; pandemic; social roles of religions; healing corona-blue; governance policy



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1. Preface

According to the World Health Organization (WHO), the coronavirus disease (COVID-19) is “an infectious disease caused by the SARS-CoV-2 virus”, and it was reported by the Wuhan Municipal Health Commission in cases of “viral pneumonia” in Wuhan, People's Republic of China, in December 2019. When it became widespread across the world, WHO declared COVID-19 a pandemic on 11 March 2020. As of 22 August 2022, the pandemic has seen more than 591 million infected cases and 6.44 million deaths (<https://covid19.who.int/>, accessed on 22 August 2022). The Republic of Korea (South Korea) has reported 22 million confirmed cases of COVID-19 and 25,896 deaths to WHO (<https://covid19.who.int/region/wpro/country/kr>, accessed on 22 August 2022). The ongoing COVID-19 pandemic has triggered many lifestyle changes and caused serious social issues such as economic disruption, restriction of social and religious activities, and an increase in anxiety and conflict.

This study first elaborates on the pre-pandemic status of Korean religions and the Korean government's response to the COVID-19 outbreak. Second, the study examines the role of religions at the initial stage of the outbreak, given that some religious sects and denominations such as Shinch'ŏnji Church of Jesus (below Shinch'ŏnji Church) and Pastor

Chŏn's Love First Church (K. Sarangjeil) contributed to intensifying the COVID-19 situations. In light of this, we examined how the media captured and delivered the scenes to the public. When the Korean government implemented strong distance and prohibition policies for social and religious gatherings, the issue of religious freedom became a serious social issue, driving the public to think about the social role of religion in public health. The fact that the majority of Protestant churches had been sincere in participating in the governmental preventive measures against the COVID-19 spread has been politically ignored. In addition, the fact that the leaders of the religious freedom issues were politically against Mun Chae-in's regime was intentionally missed. Thus, the role of religion during the pandemic seems quite interesting. Therefore, this study examines the role of religion in public health.

The pandemic has certainly changed the landscape of religions, and symptoms such as the corona-blue syndrome have been exacerbated by the increasing military tension between North Korea and South Korea as well as economic instability. Can religions be revived through mass gatherings and activities? During the COVID-19 pandemic, the reputation of religions changed, either positively or negatively, reflecting Korea's political and social dynamics. How can religions contribute to overcoming post-pandemic problems? This is the question this article sought to answer.

2. Pre-Pandemic Status of Korean Religions

Korea is a unique multi-religious society, with a particular political and spiritual zeal toward human fulfillment of heaven on earth. Korean society has not only preserved its folk religious traditions such as shamanism and animism but also embraced and developed foreign religions such as Buddhism, Confucianism, and Christianity. Since the Three Kingdoms era, the influx of the three traditions of Confucianism, Buddhism, and Daoist philosophy in Korean society played an important role in forming the nation's ruling ideology as well as Korean culture. Additionally, new religious movements emerged and actively engaged in social movements during the 19th and 20th centuries. After Tonghak (Chŏndogyo), many new religious movements such as T'aejonggyo, Jŭngsangyo, and Won-Buddhism (Wŏnbulgyo) rose to cure the politically and economically dire situation in the country by establishing new religious ideas. Thus, as elsewhere in the world, Korean religions are active in their political participation and liberal and conservative activism, depending on their respective political preferences.

These days, religions in Korea seem to be declining. According to the National Census of Korea (1985, 1995, 2005, 2015; see Table 1), almost 43.9% of the entire population of Korea were believers and 56.1% were non-believers. The census also showed the total number of believers as well as the number of believers in each religion. However, given that the census asked the informants about their defined religious identity and that the religiosity of Koreans shows obvious hybridity on the multi-religious cultural soil, one cannot be certain if the 2015 census, based on self-identification, reflects the real situation of the religious population in Korea. For example, choices such as "Confucians and Buddhists," "Confucian Christians," and "Shaman Buddhists" (Baker 2008), make it difficult to ascertain a participant's particular religion. Despite its limitation, the census showed the general situation of Korean religions.

Table 1. Number of Believers in Each Religion in Korea.

	Number of Believers (Unit: 1000, in %)			
	(Data from the National Census Board)			
	Year 1985	Year 1995	Year 2005	Year 2015
Buddhism	8060 (19.9%)	10,321 (23.2%)	10,726 (22.8%)	7619 (15.5%)
Protestantism	6489 (16.0%)	8760 (19.76%)	8616 (18.3%)	9676 (19.7%)
Catholicism	1865 (4.6%)	2951 (6.6%)	5146 (10.9%)	3890 (7.9%)
Confucianism	483 (1.20%)	210 (0.4%)	105 (0.2%)	76 (0.2%)
Chöndogyo	27 (0.07%)	28 (0.1%)	46 (0.1%)	66 (0.1%)
Won-Buddhism	92 (0.23%)	87 (0.2%)	130 (0.3%)	84 (0.2%)
T'aejonggyo	11 (0.03%)	8 (0.0%)	3 (0.0%)	3 (0.0%)
Other Religions	176 (0.43%)	233 (0.5%)	198 (0.4%)	139 (0.3%)
Total	17,203 (42.5%)	22,598 (50.7%)	24,971 (53.1%)	21,553 (43.9%)

Source: The result of the census conducted in 1985, 1995, 2005, and 2015 by the Statistics Administration of Korean Government (Statistics Korea, National Statistical Portal (<http://www.kosis.kr>, accessed on 22 August 2022).

According to the national census, the three main religions, namely Buddhism, Protestantism, and Catholicism, compose almost the whole religious population in Korea. Those in other religions comprise only 1.4% (Statistics Korea 2015, see Figure 1). However, it should be noted that the national census is limited in showing accurate numbers. The choices of religion in the questionnaire are fixed on the major religions. For example, most Korean people continue to engage in ancestor worship, which is closely associated with the Confucian tradition, but the census shows a small number of Confucians. In addition, the census questionnaires do not include Shamanism or many other new and emerging religions.

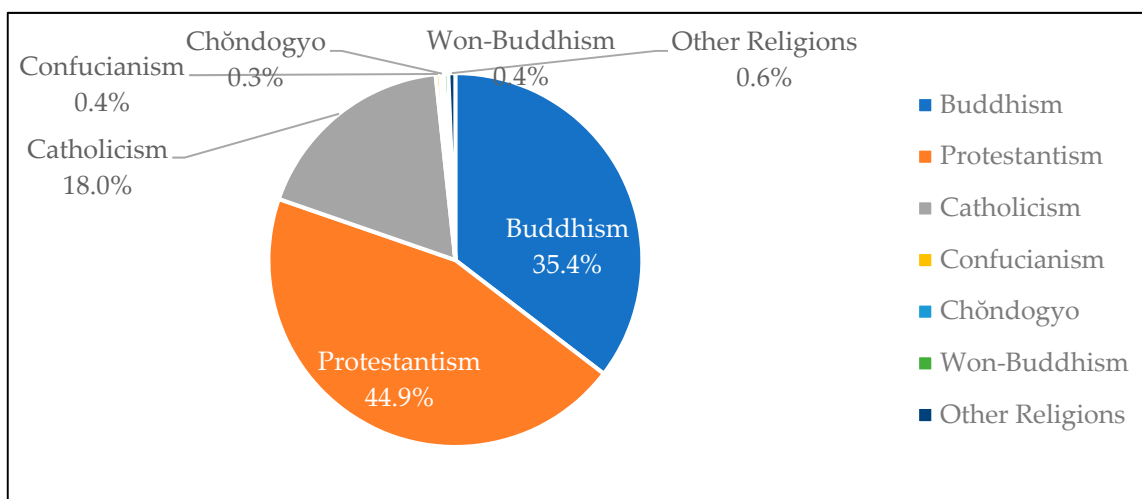


Figure 1. Composition of Religions in Korea.

Despite its methodological limitation, the census clearly indicates that religions in Korea are declining. The 2015 National Survey (see Table 1) showed that the population of believers is 21.55 million and makes up 43.9% of the total Korean population. Comparing the findings from surveys conducted in 1985 and 1995, the population grew by 8.6% (5.5 million) between 1985 and 1995 and 2.6% (2.38 million) between 1995 and 2005 (Choi 2011). This shows that the population of believers gradually grew in the same period (Lim 2019). In one sense, religions have positively influenced people to want to join them

during these two decades. However, in the recent 2015 survey, the population of believers decreased by nearly 10% from 53.1% to 43.9%.

Gallup Korea's (2021) survey on Koreans' religious perception (see Figure 2) showed changes in the religious and non-religious populations. From 2004 to 2021, the "non-religious" population continued to increase. Christianity and Buddhism gradually declined, and Catholicism remained almost unchanged. According to the 2021 Korea Comprehensive Social Survey, in 2018, before the COVID-19 pandemic, 48% of the population was non-religious, but it rose to 56% in 2021, indicating an acceleration in the decline of religious sentiments after COVID-19. The pandemic seems to prove that religion is not a way out of this disaster. Even believers are not exempt from this pandemic. This feeling may lead to a corona-blue situation, in which one feels no way out.

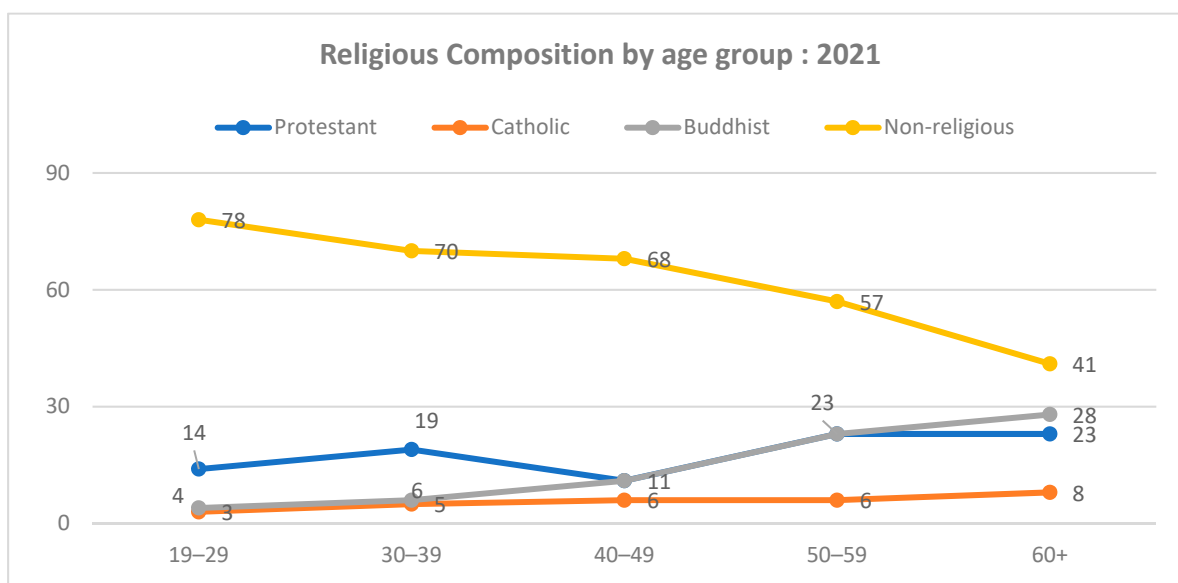


Figure 2. Religious Composition by Age Group: 2021. Source: Gallup Korea (2021), The Religion of Koreans, 2021 (www.gallup.co.kr, accessed on 15 September 2022).

3. COVID-19 Outbreak and Government Response

3.1. Government Response to COVID-19 Outbreak

Korea experienced pandemics such as SARS in 2003 and MERS in 2015, but the country has not experienced an infectious disease that stayed for as long a time as COVID-19, affecting various areas such as the economy, society, and culture. Since 2020, the government has been implementing various measures such as social distancing, quarantine, and prohibition of small gatherings to cope with COVID-19. These measures can be divided into restrictive measures such as the prohibition of gatherings and restrictions on the number of people; supportive measures such as online religious activity and medical service; and punitive measures based on the degree of violation of executive orders.

In general, the followers of the various Korean religions, including Buddhists, Protestants, Catholics, Won Buddhists, and Chöndogyo practitioners, actively cooperated with the government's quarantine measures. Nevertheless, it has been inscribed on people's minds that religious gatherings and activities intensify the spread of COVID-19 because religious gatherings and activities at the Shinch'önji Church in Taegu ignited the outbreak of the virus. Along with it, according to the 2020 COVID-19 infection routes reported by the Korean Centers for Disease Control and Prevention, in religions other than Shinch'önji Church and in nursing hospitals and facilities, 33.1% of all confirmed cases were related to religion. For this reason, the Shinch'önji Church and Protestant churches were heavily criticized by society (see Table 2). However, the flip side of the same token, that most nursing

facilities are religious, is ignored. This means that religion is carrying the social burden on behalf of the government.

Table 2. Major Mass Outbreak Infection Routes by Age (20 January~30 December 2020).

Rank	Overall	Age Group			
		0–19	20–39	40–59	60+
1st	Shinch’önji Church	Family or acquaintance gatherings	Shinch’önji Church	Shinch’önji Church	Hospitals and nursing facilities
	(5213; 18.6%)	(594; 2.1%)	(2505; 9.0%)	(1596; 5.7%)	(2402; 8.6%)
2nd	Religious institutions (except Shinch’önji Church)	Educational facilities	Workplaces (call center, etc.)	Workplaces (call center, etc.)	Religious institutions (except Shinch’önji Church)
	(4059; 14.5%)	(472; 1.7%)	(938; 3.4%)	(1453; 5.2%)	(1292; 4.6%)
3rd	Hospitals and nursing facilities	Religious institutions (except Shinch’önji Church)	Religious institutions (except Shinch’önji Church)	Religious institutions (except Shinch’önji Church)	Family or acquaintance gatherings
	(3362; 12.0%)	(468; 1.7%)	(878; 3.1%)	(1421; 5.1%)	(847; 3.0%)
4th	Workplaces (call center, etc.)	Shinch’önji Church	Family or acquaintance gatherings	Family or acquaintance gatherings	Medical institutions
	(3211; 11.5%)	(366; 1.3%)	(478; 1.7%)	(914; 3.3%)	(831; 3.0%)
5th	Family or acquaintance gatherings	Sports and leisure facilities	Medical institutions	Medical institutions	Workplaces (call center, etc.)
	(2833; 10.1%)	(210; 0.8%)	(396; 1.4)	(749; 2.7%)	(820; 2.9%)

Source: [Korea Centers for Disease Control and Prevention \(2020\)](#) Press Release 31 December 2020. Coronavirus Infectious Disease-19 Outbreak in Korea.

In addition, religious services in some Protestant churches continue to be held, and some religiously-associated institutions kept going, violating the government’s prevention policies. When news regarding this appeared in the media, it seems that religion was the cause of the outbreak.

3.2. Religions Reported in the Media during the COVID-19 Era

After the outbreak of COVID-19, the image of religion became negative, as the spread of COVID-19 accelerated and conflicts in the religious communities over the government’s quarantine measures continued. The image of religion during the pandemic seemed to be dominated by the news about Shinch’önji Church.

In this study, we collected and analyzed all data on religions reported in the media after COVID-19 using Big Kinds (BIGKINDS 2022, www.bigkinds.or.kr, accessed on 15 September 2022), a database provided by the Korea Press Promotion Foundation. To this end, 54 media companies, including national and local daily newspapers, broadcasters, and magazines, were analyzed from January 2020 to December 2021 by searching “religion,” “Christianity,” “Catholicism,” and “Buddhism” (the three major religions in Korea), and “COVID-19” and then analyzing the keywords in each article and setting representative words with a high frequency of appearance. A CONCOR (Convergence of iteration correalion) analysis was performed to extract topics consistently using UCINET and NetDraw (which are social network analysis software) to understand the relationship between words.

We found that 10,533 articles appeared in the media in 2020 and 5497 articles appeared in 2021, that is, a total of 16,020 articles, with the 2020 articles accounting for 65.8% and the 2021 articles accounting for 47.8%. The most frequently mentioned words for both years are “COVID-19,” “confirmed case,” and “Seoul,” followed by “Taegu,” “Coronavirus,” and “Shinch’önji” in 2020 and “distancing phase,” “religious facilities,” and “Korea” in 2021 (Table 3). These words are ranked high as per the current situation of the respective years. In 2020, the COVID-19 group infection at Shinch’önji Church in Taegu increased social confusion, and as the COVID-19 situation persisted in 2021, it is believed that the frequency was high because of adjusting social distancing phase to counter the challenge of group infections occurring frequently in religious facilities.

Table 3. Top 10 Keyword Frequencies of “Religion” in the Media: 2020–2021.

Rank	2020		2021	
	Word	Frequency	Word	Frequency
1	COVID-19	11,986	COVID-19	10,734
2	confirmed case	4574	confirmed case	3928
3	Seoul city	2968	Seoul city	2371
4	Taegu city	1489	Phase	1211
5	coronavirus	1459	religious venues	1139
6	Shinch’önji church	1310	South Korea	1129
7	South Korea	1278	Kwangju city	1009
8	Protestants	1271	metropolitan area	975
9	metropolitan area	1138	mass infection	900
10	online	1090	coronavirus	886

The 2020 data were analyzed using CONCOR and sorted into seven types (see Figure 3). Type 1 included COVID-19, infectious diseases, Shinch’önji, Taegu, Kyöngbuk, China, foreigners, health centers, medical personnel, experts, and self-confinement. The outbreak began with foreigners entering from China and included a surge in confirmed cases in Taegu and Kyöngbuk due to mass infection in Shinch’önji Church in Taegu. It was declared to be at an “outbreak status in Korea” and was classified as “government response,” as it was related to the government’s response through government officials, experts, medical personnel, health centers, and self-confinement. Type 2 was considered to be included in this type because the president met with religious leaders, including the campaign by right-wing leaders in Protestantism (i.e., Chön Kwang-hoon) to oust the President of Korea as a response to the government policy. It was called a meeting between the president and the religious community, which is the main content of Type 2. Type 3 was about the current status overseas, and Type 4 was named “Kwanghwamun Assembly” in connection with the mass infection caused by the Kwanghwamun rally on Liberation Day by Love First Church’s opposition to the government’s quarantine measures. For Type 5, as Christianity resorted to non-face-to-face online worship due to the prohibition of rallies and gatherings and as it included content about much fake news originating in Christianity through Facebook and YouTube, “non-face-to-face worship” was selected as the keyword. Type 6 included conducting epidemiological investigations by quarantine authorities in the Seoul metropolitan area, Kwangju, and Chönnam—due to the spread of the disease through religious facilities and restaurants—and the issuing of administrative orders in case of violation of the quarantine rules; therefore, it was titled the spread of COVID-19 due to multi-use facilities. Type 7 became an issue because of group infections due to contact with confirmed patients in Pusan, Inch’ön, Ch’ungbuk, and Kyöngnam.

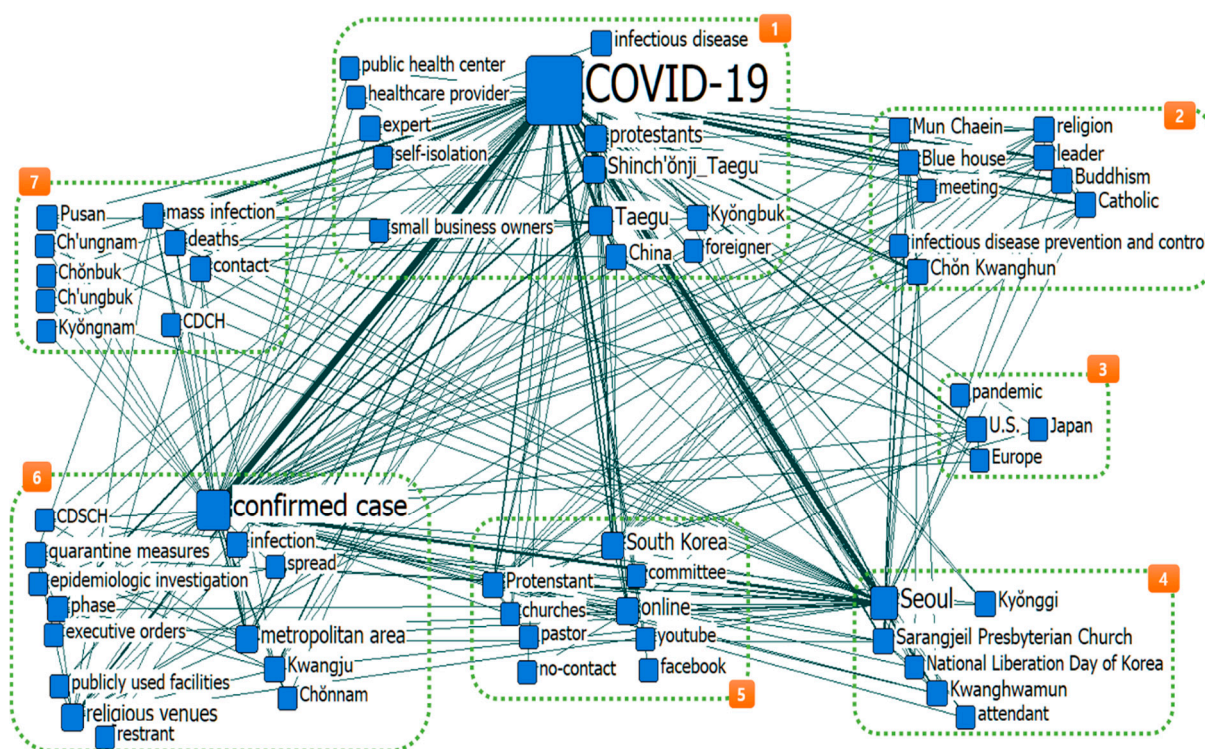


Figure 3. CONCOR Analysis Result of “Religion” and “COVID-19”: 2020. CDCH: Center Disease Control Headquarters. CDSCH: Center for Disaster and Safety Countermeasure Headquarters.

We comprehensively analyzed the 2021 data using CONCOR and classified them into 6 types (see Figure 4). Based on the keywords, the main issue of Type 1 was titled “payment of COVID-19 emergency disaster support due to COVID-19, Seoul, Kyŏnggi-do, emergency disaster support funds, small business owners, experts, and medical personnel,” and Type 2 consisted of a meeting between president Mun Chae-in and religious leaders and an online Easter joint service and was divided into a “meeting between the president and religious leaders” and “Christian online service.” Type 3 was related to the Kwanghwamun rally against the government’s COVID-19 response, led by Pastor Jeon Kwang-hoon of Love First Church and was classified as “Kwanghwamun rally.” Type 4 included Kwangju, Jŏnnam, quarantine, quarantine authorities, group infection, epidemiological investigations, and quarantine rules and was named “quarantine measures due to group infections.” Type 5 was classified as “multi-use facility management,” as it included multi-use facilities, religious facilities, restaurants, karaoke, Taejeon, Ch’ungbuk, distancing phases, and management. Type 6 included Pusan, Inch’ŏn, Kyŏngnam, Ulsan, Kyŏngbuk, metropolitan areas, schools, nursing hospitals, confirmed patients, spread, and life treatment centers. Due to the increase in the number of confirmed cases in nursing hospitals and schools, tests and treatments at screening clinics and medical services (if confirmed) were provided at residential treatment centers, and this was classified as “increase in the number of confirmed cases and medical services support.”

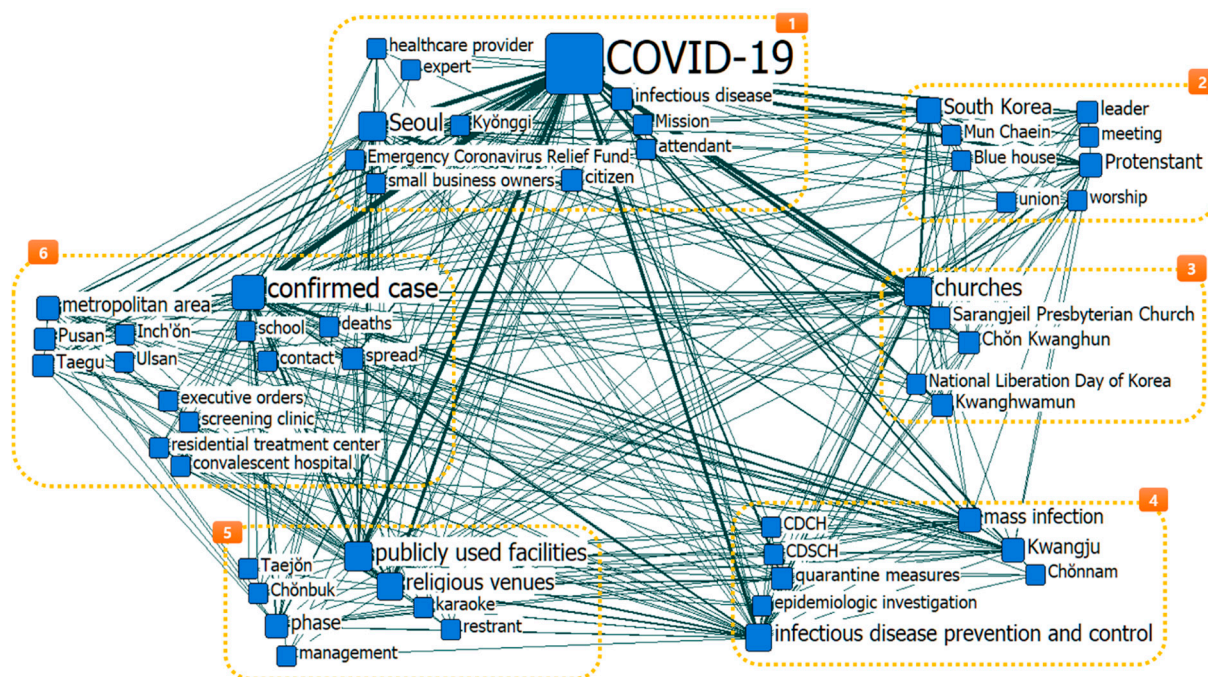


Figure 4. CONCOR analysis result of “Religion” and “COVID-19”: 2021. CDCH: Center Disease Control Headquarters. CDSCH: Center for Disaster and Safety Countermeasure Headquarters.

The CONCOR analysis results on religion in the COVID-19 era, as they appeared in the media, could be divided into the spread of COVID-19, quarantine, government response, cooperation system, and problems. Issues related to the spread of COVID-19 included Shinch’ōnji Church, religious facilities, and group infections, and these corresponded with quarantine authorities, quarantine rules, and epidemiological investigations. With the government’s response, restrictive measures included distancing, non-face-to-face religious activities, quarantine rules, and administrative orders; support included emergency disaster support and medical services; and the cooperative system included the government, religious circles, experts, and medical personnel.

The outbreak of COVID-19 was partly mediated by the Shinch’ōnji Church and some Protestant churches at its initial stage; accordingly, the government imposed a 15-day suspension on religious gatherings (21 March 2020). From then on, most religious institutions developed measures to support online religious activities, considering the status of COVID-19 and social situations, and issued administrative orders in case of violation of quarantine rules. The government’s strong ban later caused the issue of religious freedom among right-wing religious leaders. However, it should not be ignored that, with regard to the issue of religious freedom, most Koreans including religious ones and even Protestants do not think that religious freedom is a higher priority than public health.

3.3. Freedom of Religious Gathering Issue

Korean Government’s strong policy on the prohibition of gatherings and restrictions on religious gatherings was politicized by the right to discuss the issue of religious freedom. The legal basis for prohibitions was Article 49 of the “Infectious Disease Control and Prevention Act,” which is an order to prevent the rapid spread of infectious diseases in Korea (S. R. Kim 2020). Specifically, Pastor Chōn, Kwang-Hoon, who was a right-wing political leader, had strongly protested the government-imposed restriction on public gatherings as he mobilized his political campaign against Mun Chae-in’s administration. With political ingenuity, he accommodated the issue of religious freedom in his political campaign, as he continued to demonstrate his opposition to the Mun Chae-in government, thus violating the government’s quarantine measures, resulting in the spread of COVID-19.

Therefore, when the Seoul Metropolitan Government banned Love First Church from holding rallies on the grounds that it violated quarantine rules, the Christian Council of Korea, whose chairman was Chŏn, Kwang-Hoon, issued a statement saying, “The executive order to suspend worship in the church is illegal and is religious suppression” (TCCCK 2020b). He also organized “Free Citizens’ Solidarity for Restoration of Worship” and protested by filing a constitutional petition and an administrative lawsuit, saying that the ban on face-to-face church worship for COVID-19 prevention was unconstitutional (Nam 2022). Indeed, although the Christian Council of Korea criticized the government’s strong policy suspending worship in Protestant churches as religious suppression and held a series of mass rallies at Kwanghwan in Seoul, the vast majority of Koreans viewed it as a right-wing political campaign against the administration and as a major factor in spreading COVID-19, and it resulted in a cultural disgust toward Protestant churches. This protest may be seen as representing the Protestant church’s position on freedom of religious assembly, but ordinary citizens including lay Christians have developed distrust for religion as a whole, especially Protestantism.

In the academic circle, it triggered a constitutional debate on whether or not the restrictions on basic rights guaranteed under the Korean Constitution for freedom of religion were appropriate (S. R. Kim 2020). Nam highlighted the possibilities and limitations of restricting religious freedom by executive orders in the COVID-19 context focusing on the precedents of the Federal Court in the United States (Nam 2022). In contrast, Han explains how the Catholic Church in Korea cooperated with the Government’s prevention measures; they not only faithfully followed the guidelines of the Vatican but also broadly understood the position of the Korean government, without causing unnecessary clashes or conflicts (Han 2020).

In this process, the role of the media, including mass media and social media, should not be overlooked. They framed this issue as an issue of religious freedom. However, in reality, it was quite politicized because they completely disregarded the majority of Protestant churches participating in the government’s distancing policy, only focusing on the Kwanghwamun rally, which was anti-government and conservative. Unlike the politically inclined right-wing Protestants, most Korean religions actively cooperated to overcome the pandemic, considering that the government’s policy to ban or restrict religious gatherings during the COVID-19 pandemic was critical for the recovery of public health and interests.

4. Impact of the COVID-19 Pandemic on Korean Society and Religions

During the pandemic, despair and fear among the middle or low-middle classes mainly due to the socio-economic deterioration were critical. The feeling of no way out causes people to experience an extreme mood of depression. Under similar circumstances, in the past, people usually consulted their religions, praying for help and deliverance. However, the ban on religious gatherings intensified the feeling of having nowhere to go. Moreover, the right-wing campaign for religious freedom generated a feeling of cultural disgust toward religion, especially Protestantism. The combination of socio-economic misfortunes and religious disgust has fermented the so-called corona-blue syndrome, a feeling of “nobody helping me or us.”

4.1. Changes in Social Group Participation

Looking at the percentage of people participating in social organizations according to Statistics Korea’s (2015) social survey (see Table 4 and Figure 5), the participation rate in 2021 seems to have decreased by 46% to 35.8%, compared to 2019, before the COVID-19 outbreak, indicating that social group activities were dampened by the pandemic. In 2021, the group participation rate was in the order of social groups (61%), hobbies, sports, and leisure groups (49.4%), and religious groups (26.6%). The participation rate in religious organizations by age group was 17% for those in their thirties and younger, 25–27% for those in their forties and fifties, and 40.5% for those in their sixties and older, which showed

that the participation rate in religious organizations increased with age, especially after retirement (age 60 and above).

Table 4. Participation Rate of Social Organizations by Age in the Past Year: 2021.

Group	Age (%)				
	20–29	30–39	40–49	50–59	60+
Fraternization Group	65.2%	64.7%	58.7%	65.6%	57.5%
Religious Organization	16.7%	17.3%	24.9%	26.6%	40.5%
Leisure Organization	58.3%	51.2%	52.4%	48.9%	37.2%
Civil Society Organization	7.1%	4.5%	8.1%	9.6%	8.4%
Academic Organization	9.6%	5.5%	5.9%	5.3%	1.5%
Community Society Group	1.2%	5%	7%	8.9%	11.2%
Do Not Participate	60.9%	66%	62.9%	59.5%	68.9%

Note: Individuals who responded that they participated in at least one detailed group participation item in the group participation survey. Source: [Statistics Korea \(2015\)](http://kosis.kr), Social Survey (<http://kosis.kr>, accessed on 15 September 2022).

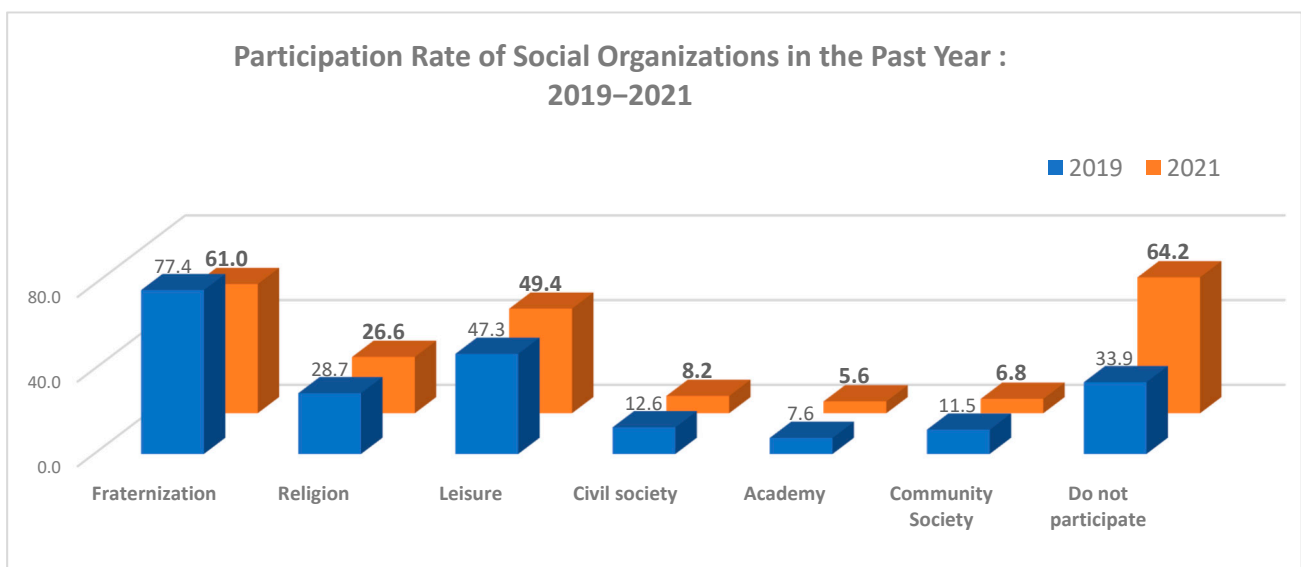


Figure 5. Participation Rate of Social Organizations in the Past Year. Source: [Korea Institute of Public Administration \(2021\)](http://kosis.kr), Korea Social Integration Survey (<http://kosis.kr>, accessed on 15 September 2022).

Religious people’s activities in religious organizations showed a decrease in 2021 compared to 2019, before COVID-19 (see Figure 6), and in 2021, the number of people who were “affiliated with a religious organization but not active” and “sometimes active” increased, while the number of individuals who were “actively participating” decreased slightly to 4.8%. By age group, the percentage of those who were “inactive” in 2021 increased in all age groups compared to 2019 and the number of individuals who were “actively participating” decreased in those in their forties and younger but slightly increased in those aged 50 and older, which showed that the rate of those actively participating increased with age (see Figure 7).

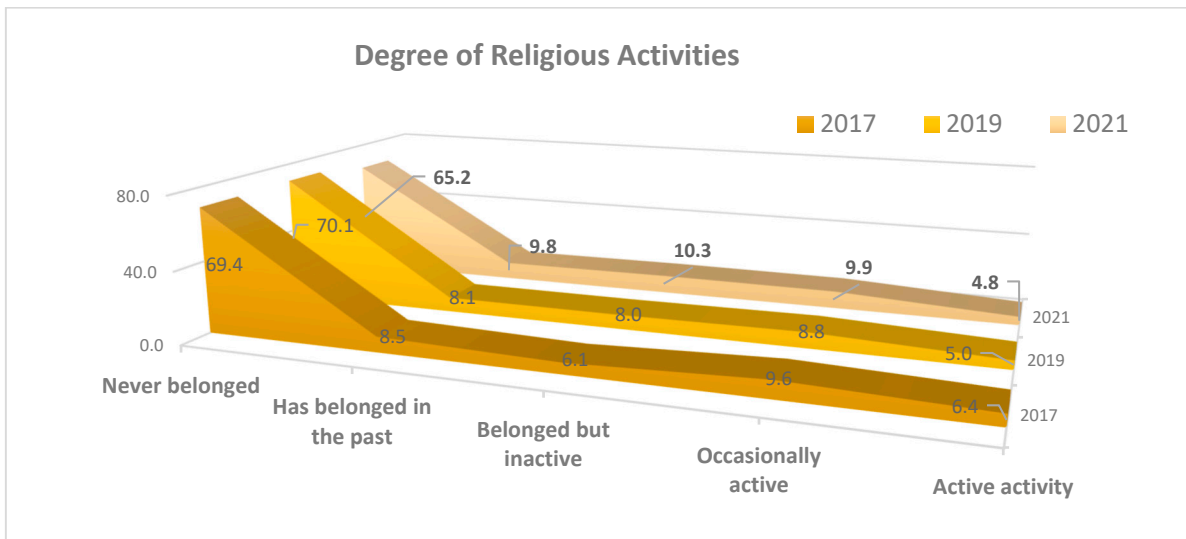


Figure 6. Degree of Religious Activities. Source: Korea Institute of Public Administration (2021), Korea Social Integration Survey (<http://kosis.kr>, accessed on 15 September 2022).

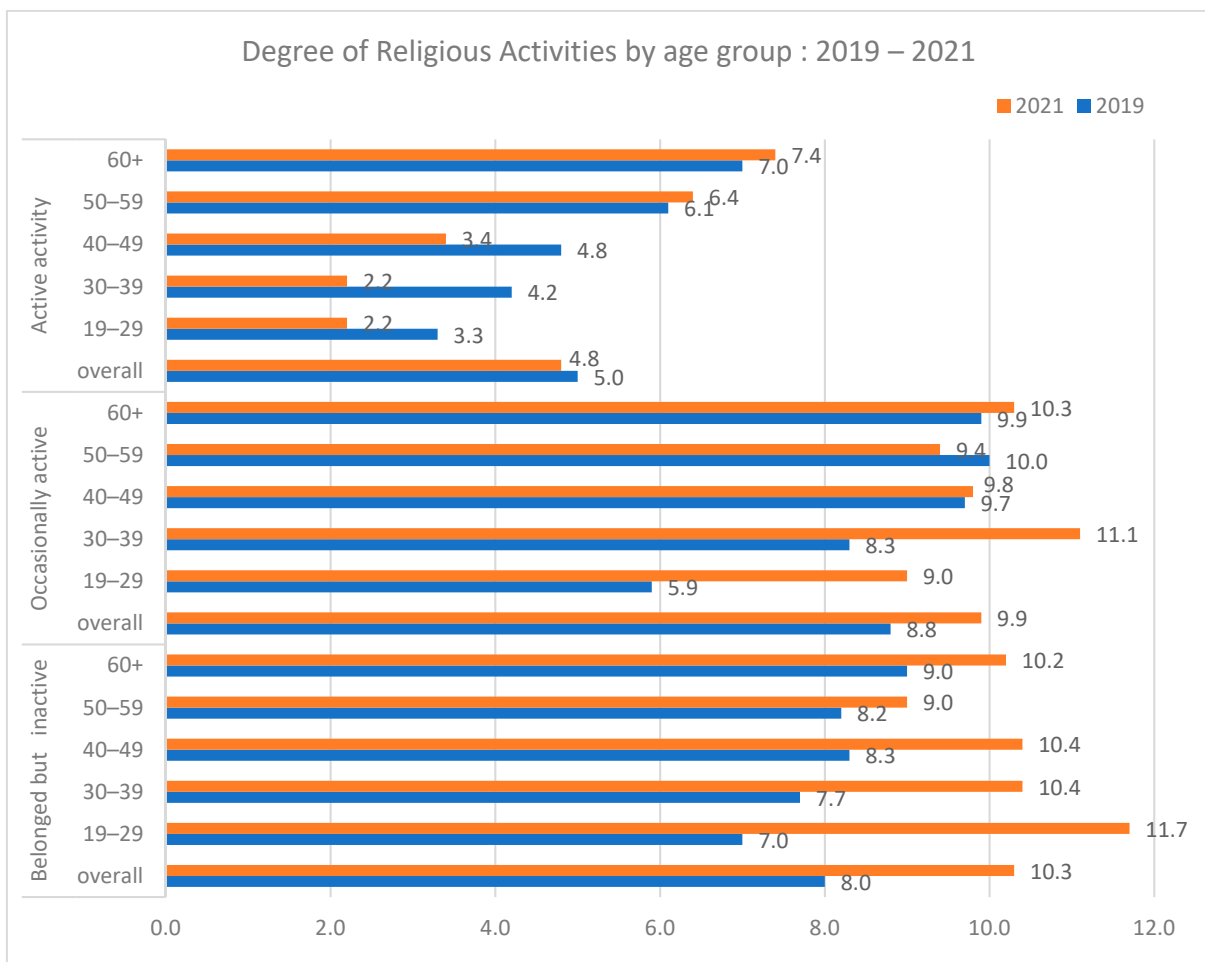


Figure 7. Degree of Religious Activities by Age Group. Source: Korea Institute of Public Administration (2021), Korea Social Integration Survey (<http://kosis.kr>, accessed on 15 September 2022).

4.2. Religious Activities among Leisure Activities

According to the National Leisure Activity Survey (Korea Institute of Public Administration 2021), leisure activities in which people participated at least once in the past year were in the following order: meeting friends, chatting/talking on the phone, family visits, and social gatherings (see Figure 8). In terms of the difference between before and after COVID-19, leisure activities that involve a large number of people, such as volunteering activities, club meetings, and social gatherings, decreased by 36.9–58.1% to 3.9%, 6.5%, and 23.4%, respectively. In addition, due to the social distancing policy that limited the number of people in meetings or prohibited gatherings to prevent the spread of COVID-19, the decrease was greater than that in other leisure activities.

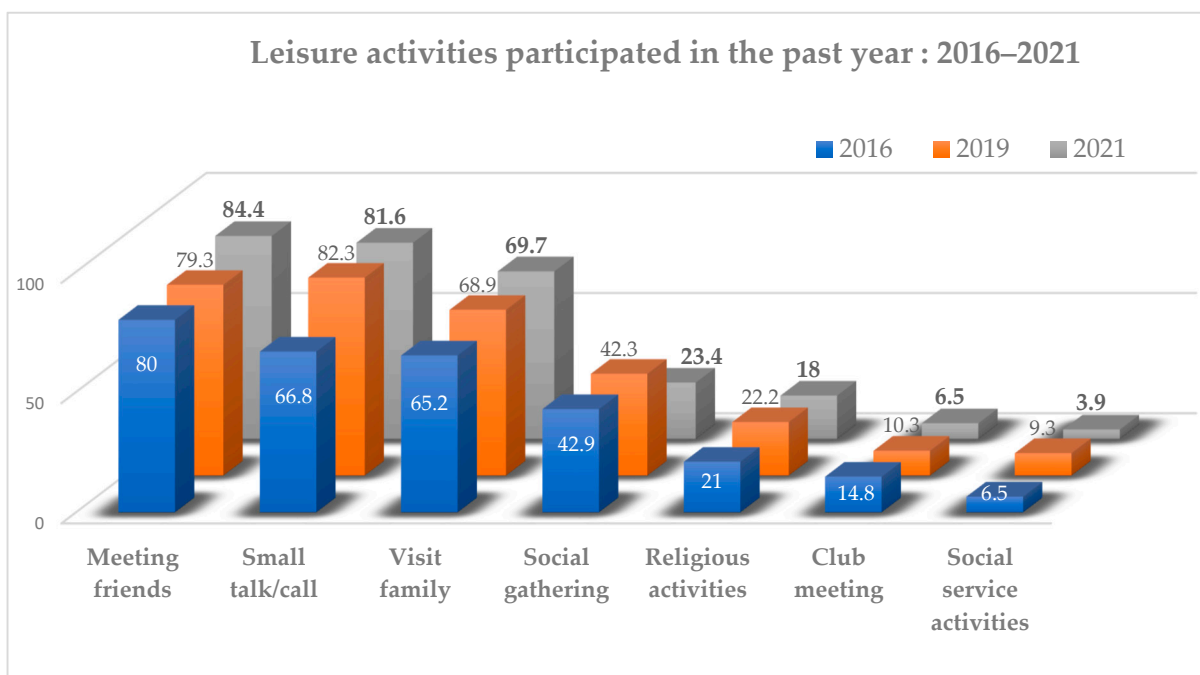


Figure 8. Participation Rate for Leisure Activities: 2016–2021. Source: Korea Institute of Public Administration (2021), Korea Social Integration Survey (<http://27.101.209.87/Sviewer/index.php?kid=22032810311657114>, accessed on 15 September 2022).

Religious activities ranked fifth (at 18%) among leisure activities in which people participated more than once in 2021, but it was the highest (at 6.8%) for the “continuous participation rate” (see Figure 9). The high “continuous participation rate” of religious people in religious activities seems to be due to the 17.4% of people in their forties and older, especially those in their sixties and older.

The most frequently used places for leisure in the past year were vacant areas around the house, restaurants, large supermarkets, and cafés; while movie theaters and multi-use facilities ranked second in 2019 (before COVID-19), they ranked 11th in 2021, and parks rose from sixth to second. Those in their forties and younger used cafés as places for leisure, but those in their fifties and older went to mountains more than to cafés, showing differences between age groups. Of the 70 places for leisure, religious facilities ranked eighth in 2019 and 13th in 2021, and by age group, the usage among individuals in their fifties and older gradually increased compared to those in their forties, showing that the use of religious facilities increased with age (see Table 5).

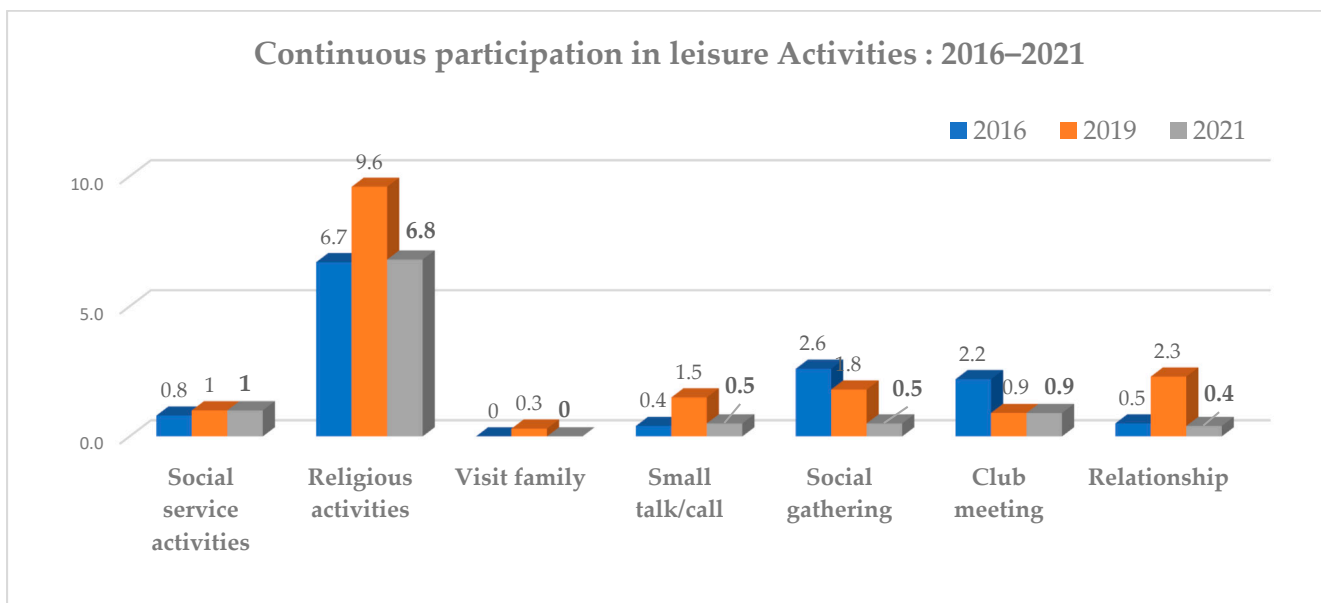


Figure 9. Continuous Participation in Leisure Activities: 2016–2021. Source: Korea Institute of Public Administration (2021), Korea Social Integration Survey (<http://kosis.kr>, accessed on 15 September 2022).

Table 5. The Most Used Places of Leisure in the Past Year.

Year	1st Choice	2nd Choice	3rd Choice	4th Choice	5th Choice	Ranking of Religious Facilities
2016	Restaurant	Open space around the house	Park	Café	Supermarket	11
2019	Open space around the house	Movie theater	Restaurant	Supermarket	Café	8
2021	Open space around the house	Park	Restaurant	Café	Supermarket	13
Age						
20–29	Café	Open space around the house	Restaurant	Park	Gym	28
30–39	Open space around the house	Café	Restaurant	Park	Supermarket	25
40–49	Open space around the house	Restaurant	Park	Café	Supermarket	22
50–59	Open space around the house	Park	Restaurant	Supermarket	Mountain	11
60+	Open space around the house	Park	Traditional market	Restaurant	Mountain	9

Source: Ministry of Culture, Sports and Tourism (2021), National Leisure Activity Survey (<http://kosis.kr>, accessed on 15 September 2022).

4.3. Intensifying Corona-Blue Syndrome

People who experience disasters are known to develop mental and psychological disorders as well as physical diseases and social dysfunction. Particularly, mental disorders such as depression and post-traumatic stress disorder increase with decreased immune function due to anxiety or lethargy and increased physical disease. With the prolonged COVID-19 in Korea, psychological maladjustment is emerging as a serious issue alongside various other problems.

A term that has emerged in our society due to COVID-19 is “corona-blue.” Corona-blue is a neologism that combines “coronavirus” and “blue” and is also called corona depression. Corona-blue, or corona depression, refers to symptoms of depression that people develop due to changes in their lives caused by the spread of COVID-19. In short, it refers to the social phenomenon in which psychological contraction, isolation, depression, and helplessness are felt during the COVID-19 pandemic.

In a 2021 big data analysis related to corona-blue, “depression,” “overcoming,” “prolongation,” “mind,” and “anxiety” were identified as the top keywords related to COVID-19 (Lim 2021). Of these, depression had the highest frequency and weight, and among the top keywords, the emotion-related ones were depression, anxiety, lethargy, stress, difficulty, and worry. In other words, corona-blue’s most important feature is the emotion of depression, which seems to be accompanied by various emotional disturbances such as anxiety, lethargy, and stress. In an August 2020 online survey of 1031 adults aged 20 to 65 about their health conditions caused by COVID-19, 40.7% of the respondents said they had experienced “COVID-19 depression,” and in a study conducted on adults, 42.8% of participants had experienced depression after the COVID-19 outbreak, 36.1% had experienced anxiety, and 23.6% had experienced stress. In a survey of 2000 adults aged 20 or older, it was reported that the percentage of people who experienced anxiety/depression “somewhat” and “severely” due to COVID-19 increased by 8.3% from 47.5% in 2020 to 55.8% in 2021, but expressions such as “somewhat” and “severely” were ambiguous.

Besides, the Ministry of Health and Welfare’s survey was conducted from March 2020 to December 2021, and it provides important data for identifying the corona-blue phenomenon, as the criteria for depression are clearly determined. According to the data from the Ministry of Health and Welfare (2021, see Table 6), the scores for depression symptoms in December 2021 decreased, but they were still high for women and people in their thirties. The December 2021 score (27 points) was 5.0 points, down from March by 5.7 points, and maintained a lower level compared to 2020. The ratio of depression risk groups (10 points or more out of the total score) was 18.9%, down by 3.9% from March (22.8%). By sex, women scored 5.7 points in depression symptoms, which was higher than that for men (4.4 points), and depression risk groups were higher in women at 23.1% than in men (14.9%) (see Figure 10). By age group, those in their thirties had the highest rate of depression symptoms and depression risk groups. Those in their thirties scored 6.4, that is, 1.5 times higher than those in their sixties and older (4.2 points), who had the lowest score, and the rate of depression risk groups was 27.8%, which was twice that of those in their sixties (13.8%) and 1.7 times higher than that of those in their fifties (16.0%).

Table 6. Depressive Symptom Score and Rate of High–Risk Depression: 2020–2021.

	2020.3	2020.5	2020.9	2020.12	2021.3	2021.6	2021.9	2021.12
Depressive Symptoms Score *	5.1	5.1	5.9	5.5	5.7	5.0	5.1	5.0
High-Risk Depression (%)	17.5	18.6	22.1	20.0	22.8	18.1	18.5	18.9

* Depressive symptoms score: 0–4: normal; 5–9: mild; 10–14: moderate; 15–19: less severe; 20–27: severe.

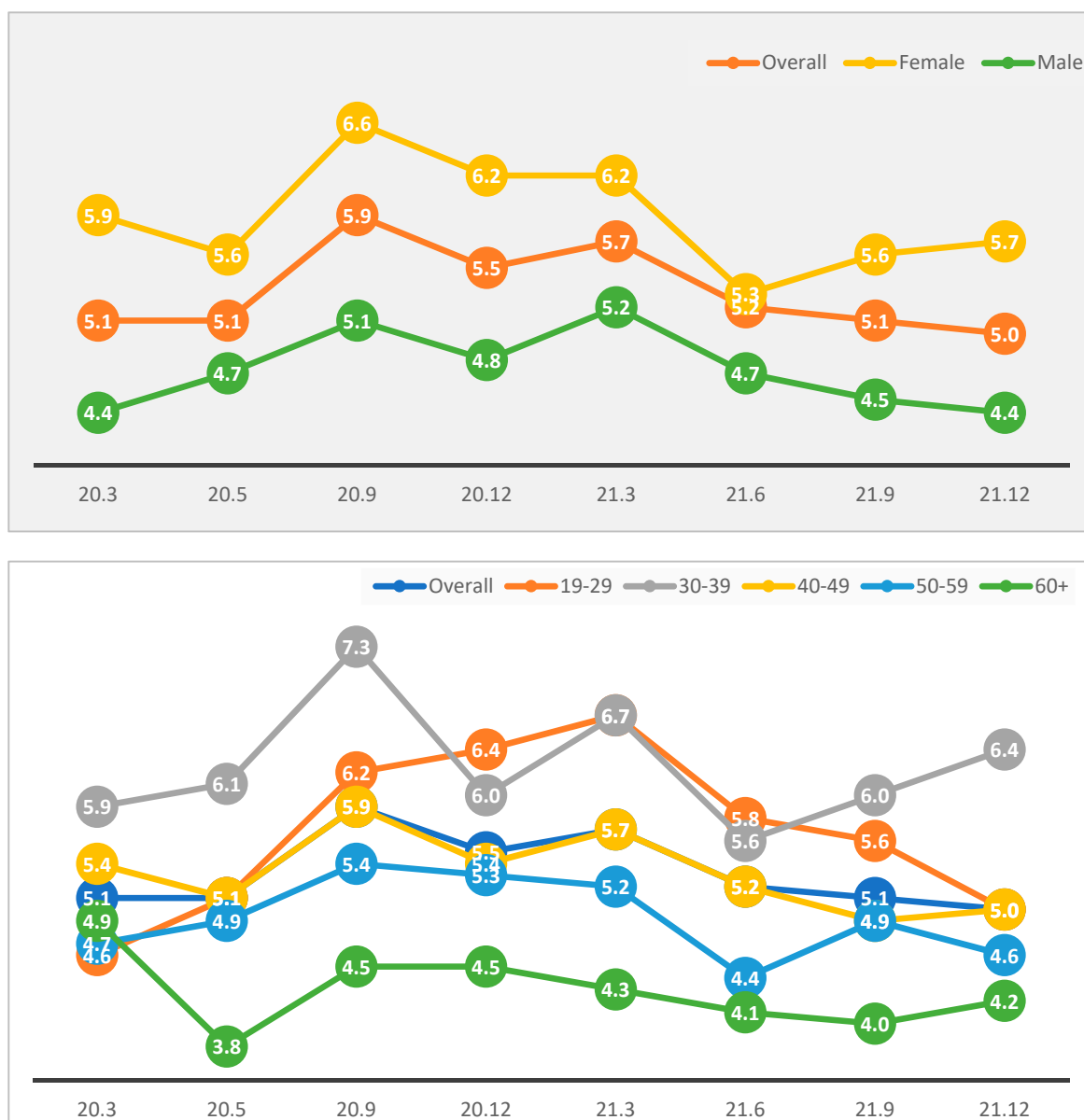


Figure 10. Depressive Symptoms Score by gender, age: 2020–2021. Source: (Ministry of Health and Welfare 2021).

The rate of suicidal thoughts increased steeply after the March 2020 survey (9.7%), rising to 16.3% in March 2021, but it decreased from the June 2021 survey and was 13.6% in the December survey. By sex, men had a higher percentage than women, and in the December survey, the difference was not significant with 13.8% and 13.4%. By age, the twenties and thirties were 17–18% higher than the fifties and sixties (9–10%) (see Table 7).

If we combine the depressive symptoms score and the suicidal thoughts ratio, it seems necessary to establish and manage detailed measures for mental health in women and people in their thirties.

Table 7. Rate of Suicidal Ideation by Gender and Age: 2020–2021.

		2020.3	2020.5	2020.9	2020.12	2021.3	2021.6	2021.9	2021.12
Overall		9.7	10.1	13.8	13.4	16.3	12.4	13.8	13.6
Male		10.1	10.2	14.5	13.2	17.4	13.8	14.6	13.8
Female		9.2	10.0	13.2	13.6	15.1	11.0	13.1	13.4
Age	19–29	10.1	15.9	20.0	17.0	22.5	17.5	16.7	17.3
	30–39	12.6	12.1	18.3	14.7	21.9	14.7	19.3	18.3
	40–49	10.6	9.4	10.1	13.3	15.3	12.9	14.0	14.0
	50–59	6.8	8.5	11.4	12.5	12.5	9.3	10.6	10.4
	60+	8.6	4.7	10.7	9.9	10.0	8.2	9.0	8.7

Regarding the corona-blue phenomenon, Lee Eun-hwan explained that with the spread of COVID-19, not only those subject to quarantine but also ordinary citizens faced substantial changes from their pre-COVID-19 lives, such as isolation and inability to go out, which led to an increase in the number of people experiencing depression and lethargy (Lee 2020). Moreover, since they could not meet people and continued living disconnected lives due to the infectious disease, there was an increase in social isolation. In an online survey conducted in August 2020 (see Figure 11), 32.1% of those who experienced corona-blue said that their depression was caused by “social isolation due to refraining from going out and meeting people.” Other responses included “health concerns due to the spread of infection” (30.7%), “difficulty in maintaining employment or jobs” (14.0%), and “weight gain due to lack of physical activity” (13.3%).

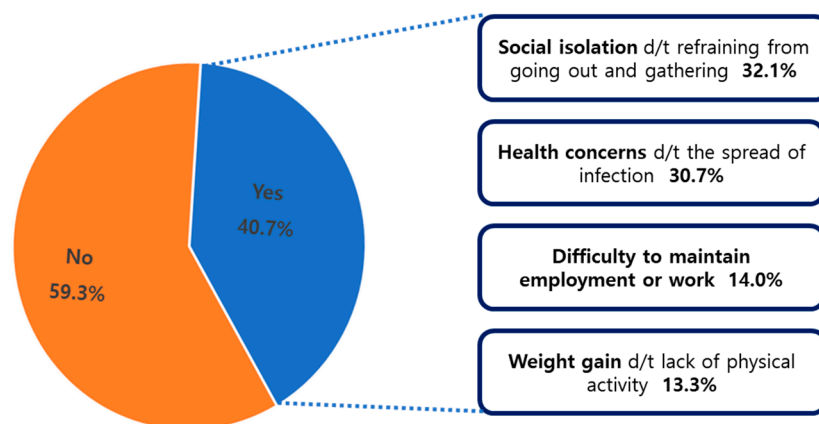


Figure 11. Corona-blue Experience and Causes in South Korea. Source: (HIRAS 2020).

In the 2021 survey (see Figure 12), 66.4% of the respondents said that COVID-19 had “a disruptive/very disruptive effect on their daily lives,” indicating that many people’s lives were disrupted by COVID-19. Depression and emotional difficulties increased by more than 45% in individuals in their twenties and older. The increase was more than 50% for people in their forties and fifties, and housework and child care duties increased significantly for those in their thirties and forties. With COVID-19, people in their forties and fifties seem to have faced more difficulties than other age groups—those in their fifties due to a decrease in income, increased depression, and mental difficulties and those in their forties due to increased housework and childcare.

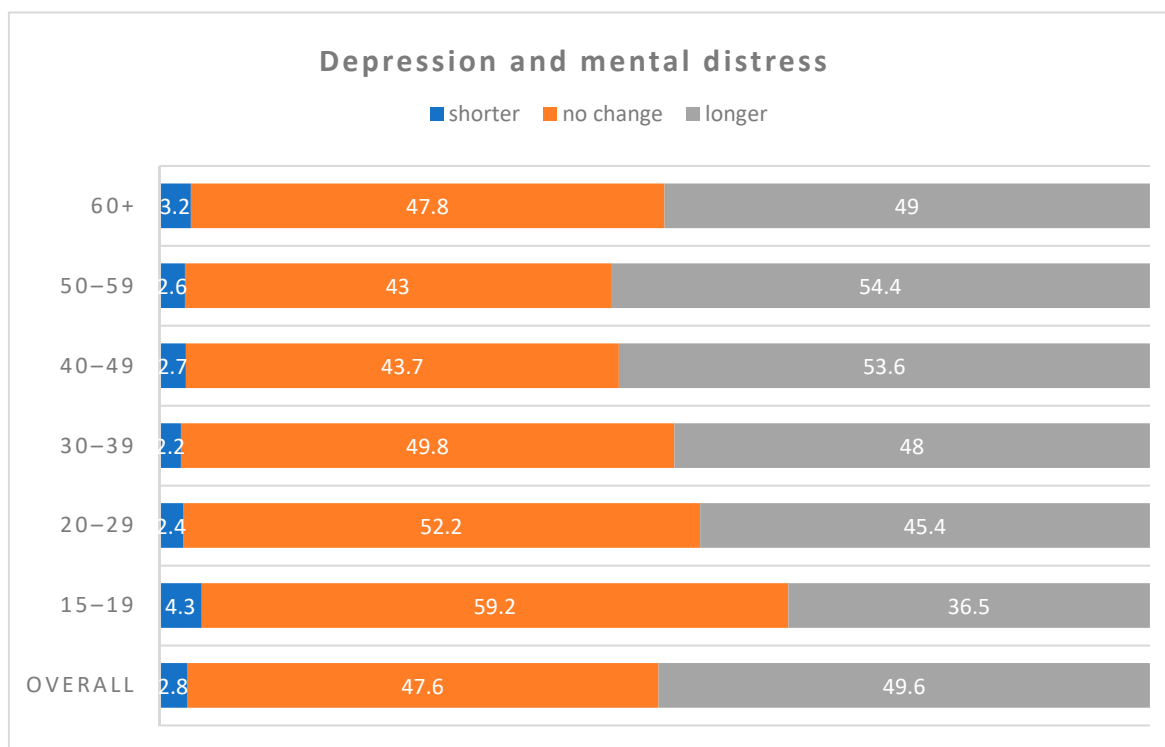


Figure 12. Changes in Daily Life During the COVID–19 Pandemic. Source: Ministry of Gender Equality and Family (2021), Gender Equality Survey (<http://kosis.kr>, accessed on 15 September 2022).

Depression is known to be accompanied by emotional, cognitive, and behavioral symptoms such as helplessness, strong negative thoughts, decreased motivation and initiative, insomnia, irritation, anxiety, and worry and physical and physiological symptoms such as decreased appetite, weight change, and loss of vitality. Depression has a wide range of symptoms, and once it occurs, it not only reduces the quality of an individual’s life significantly but causes maladjustment and discomfort in different dimensions of life. Moreover, as it can lead to suicide in serious cases, it is necessary to pay close attention to the current situation in which corona-blue is spreading as a social phenomenon. Corona-blue must not be seen as the problem of a specific individual or class; rather, it must be regarded as a social disaster and a task to be solved together, and all members of society, including government agencies, should make an effort to come up with support measures. The survey results also showed that 73.0% of 2000 adult respondents nationwide said they needed mental health services to deal with the psychological pain caused by COVID-19, with 76.6% of female respondents and 69.4% of male respondents demanding such services.

5. Response of Korean Religions to the COVID-19 Pandemic and Related Challenges

5.1. Response of Korean Religions to the COVID-19 Pandemic

Can religion help people to find a way out of this corona-blue syndrome? The Korean religions formed a government–religion COVID-19 response council in September 2020, and religious councils in each city and province were formed in April 2021 to respond to COVID-19. While forming the government–religion council, the government urged the religious community, “This is a time when mental quarantine (spiritual quarantine) and querencia are urgently needed for our people suffering from corona-blue and corona anger, and we’ll take care of physical quarantine, so the religious community should get actively involved in mental quarantine” (Officer for Government Policy Coordination 2020), and the religious community requested that “government authorities recognize religious groups as major partners in cooperation and joint practice for quarantine, not targets of restraint and restriction” (Officer for Government Policy Coordination 2020). The role of

the religious community as expected by the government was the provision of spiritual support to people, and the role that the religious community wanted was the provision of companionship to the community.

In fact, religious teachings have very useful tools to alleviate people's anxiety, especially during disasters such as this pandemic. For example, a crucial goal in Buddhist practice is to achieve nirvāṇa (liberation) from the world of saṃsāra (transmigration) and to be reborn in the Pure Land by teaching about the cause of birth, aging, disease, and death—the four noble truths. The Buddhist community prepared guidelines for responding to COVID-19 and suspended the operation of 137 temple stays nationwide in February 2020, and the Korean Buddhist Jogye Order actively participated in quarantine by suspending popular and Buddhist ceremonies as the government restricted the number of people attending religious events in August 2020 in accordance with the government's "second stage of social distancing" measures (Moon and Kang 2022). In addition, the Buddhist Environmental Solidarity performed the work of "thinking about life, nature, and the future" (Shin 2021) through the "Stop and Look Back" campaign to prevent the spread of COVID-19.

In the case of Catholicism, the Roman Catholic Church is the authority, and since the start of the outbreak, it has actively cooperated with the government's quarantine policy (Kyung and Lee 2021; Kyung et al. 2020). With the spread of COVID-19, Pope Francis suspended community mass at all the churches in the Vatican, and on 19 March 2020, the Apostolic Penitentiary announced a policy to allow collective absolution as the method for confession (Apostolic Penitentiary 2020; Kim 2021a). In particular, the statement that "The Plenary Indulgence is granted to the faithful suffering from Coronavirus, who are subject to quarantine by order of the health authority in hospitals or in their own homes . . ." allowed absolution through the religious faith of individuals required by the Vatican even if one did not participate in Catholic mass directly. This symbolically shows the transition from a priest-centered Catholic mass and direct participation in sacramental rites to an individual's devout religious behavior. As COVID-19 spread, in February 2020, the Korean Catholic Bishops' Conference released a statement that it would actively cooperate with the government's quarantine measures and make it an opportunity for maturity to overcome the crisis (Korean Catholic Bishops' Conference, The Korean Catholic Central Council 2020). Sacraments, including the mass, were suspended or reduced. In 2020, the Pope proclaimed the social order Fratelli Tutti, 2020 and is considered to have "presented a milestone for Catholic churches around the world in the post-COVID-19 era" (Kim 2021b).

In the case of Protestantism, as cases of mass infection amplified around Protestant churches, religion was recognized as the cause of social problems rather than the solution. In February 2020, when the COVID-19 infection began to spread around the Shinch'ŏnji Church, a new sect in the Protestant community, and consequently, the phenomenon of Shinch'ŏnji hatred spread (National Human Rights Commission of Korea 2020). In a report by the Christian Social Affairs Research Institute titled "Case Study of COVID-19 Infections in Religious Facilities," of the 54 cases of religious-activity-related group infection, an overwhelming 51 were found to be Protestant-related (Kim and Goo 2020). Jung (2021) critically evaluated the Protestant community, saying, "Instead of reflecting on itself, the behavior of some conservative Protestant groups served as a reason for further strengthening civil society's negative perception of the entire Protestant community."

In this series of spreading COVID-19 patients in relation to Protestant churches, the Christian Council of Korea (with Kim Hyun-sung as the acting president) said in a Christmas message in 2020, "In 2020, many people are suffering, moaning and are in pain from COVID-19" (TCCCK 2020a). Note that the Christian Council of Korea is the same organization that conducted an anti-government political campaign led by Pastor Chŏn, Kwang-Hoon during the pandemic. Stressing that the church, which should take the lead in praying for people's health and the country's safety, has been cited as one of the spreaders of COVID-19, and it should repent and reflect on itself, he said, "I hope everyone can cooper-

ate to end COVID-19 by following quarantine guidelines such as social distancing” (Christian Daily, <https://www.christiandaily.co.kr/news/98350>, accessed on 15 September 2022).

Additionally, reports regarding group infections at unauthorized Protestant educational facilities such as I’m Ministry; International Mission, an unauthorized educational facility related to the Protestant church, and the mass infection at Two Commandment School in Kwangju were published and became the object of social criticism. As a result, progressive Protestant ecumenical groups NCKK, YMCA, and YWCA held a joint press conference at the 100th Anniversary Hall of Christianity on 29 January 2021, and stated that “... We deeply apologize to the people as we look back on ourselves before the disastrous reality in which the Korean church is recognized as the main force that harms the health of the people today” (Han’györe 2021). The religious studies community stated that the Protestant “Shinch’önji phenomenon” and the anti-quarantine phenomenon of some Protestant sects were a “religious disaster” (Shin 2021), similar to infectious diseases.

Alternately, some groups of New Religions in Korea emphasized COVID as a warning and asked people to be vigilant against the spread of diseases such as plague and to seek fundamental healing. (Park 2012; Yun 2017). It predicted that mysterious diseases caused by the evils of material civilization will become prevalent, sacrificing many lives. It regarded material desires and resentments as the causes of diseases prevalent in society (Park 1997). Additionally, it called the devastation of people dying due to mysterious diseases and viruses “pyönggöpp (K. 병겁; C. 病劫)” or rampant disease. Donghak’s founder Suun said, if “hanül” (K. 하늘, Heaven) is served with sincerity and respect, one will be cured of spiritual diseases without using medicine and survive even an unprecedented mysterious disease. He emphasized the importance of one’s perspective (Yoon 2021). Predicting that a mysterious disease would spread all over the world, Jungsangyo’s founder Jungsan thought that the great disease could be cured by resolving resentment and coexistence through mental and physical comfort and that healing is possible when “üit’ong” (K. 의통, “salvation and unification through healing”) is transmitted (T’aesunjillihoe 1974). Sotaesan, the founder of Won-Buddhism, talked about the phenomena and problems of a sick society in the “Sick society and its treatment,” and emphasized that a spiritual civilization should be created to use material civilization well in the *Scripture of Won-Buddhism* (DIAWBH 2016). Among these Korean religions, Won-Buddhism can be seen as a representative example of rapidly converting almost all religious events and rituals to non-face-to-face by actively accepting government policies and reorganizing the system into cyber edification through television and internet broadcasting.

5.2. Increasing Charity Activities in Korean Religions

Contrary to the politically manipulated campaign for religious freedom, most religions in Korea have recognized the role of religion in society, having extended their charity works to various areas in society.

According to the results of a survey on the integrity and reliability of social organizations conducted by the Social Integration Survey (Korea Institute of Public Administration 2021), the integrity and reliability of all organizations, including the central government, the National Assembly, large corporations, and religious institutions, increased by 0.2 and 0.3 points, respectively, compared to 2019. As of 2021, institutions with high integrity and reliability were medical institutions, educational institutions, and financial institutions (in that order), with a mean of 2.5 points for integrity and 2.6 points for reliability. Religious institutions scored 2.5 points in both integrity and reliability, with integrity being average and reliability being below average.

Regarding the degree of efforts to resolve social conflict by social group (see Figure 13), the scores in all groups, including education and the National Assembly, rose in 2021 compared to the previous survey, and the National Assembly showed the highest increase of 0.5 points. As of 2021, the scores were in the decreasing order of education, religious organizations, the government, and the media, and the average score continued to rise from 2.8 points in 2017 and 2.9 points in 2019 to 3.2 points in 2021. In 2017, religious organiza-

tions scored 2.9 points, higher than the average, but after that, the level of efforts to resolve social conflicts has been recognized as normal, with the scores being average (see Table 8).

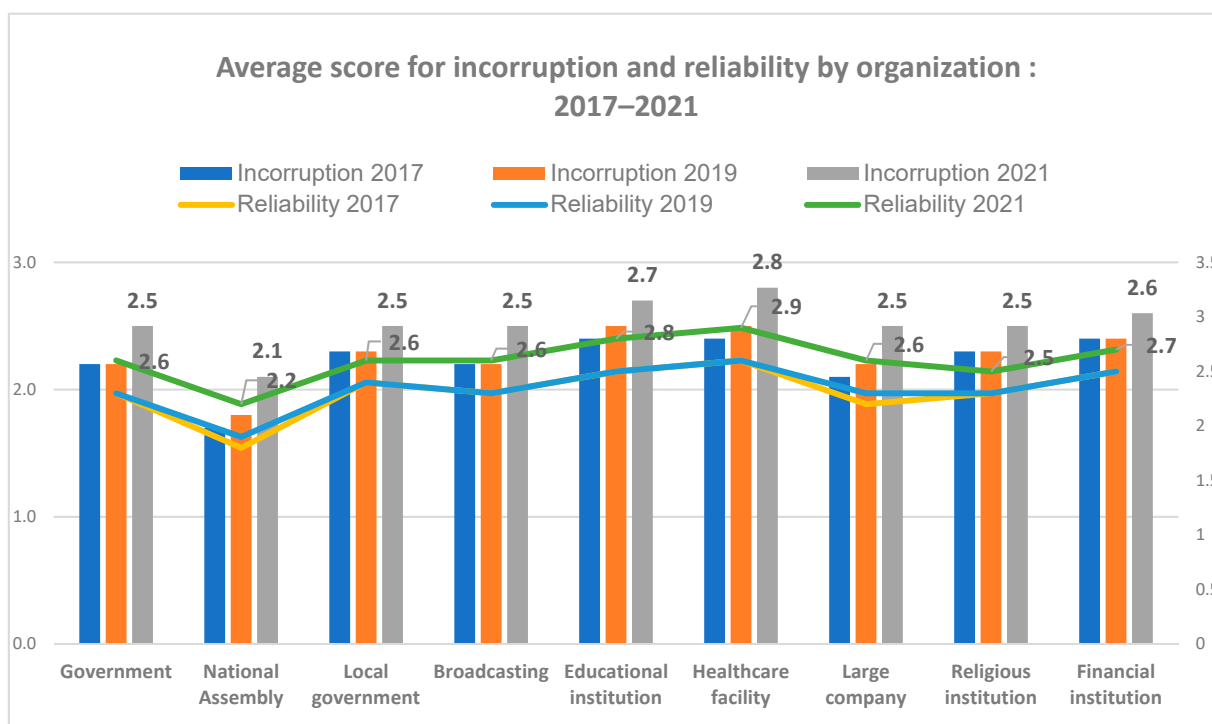


Figure 13. Average Score for Incorruption and Reliability by Organization. Source: Korea Institute of Public Administration (2021), Korea Social Integration Survey (<http://kosis.kr>, accessed on 15 September 2022).

Table 8. Scores on Perception of the Degree of Effort by Group for Resolving Social Conflicts.

Group/Year	Education Department	National Assembly	Corporations	Trade Unions	Legal Professions	Civic Organizations	Media	Government	Religious Organizations
2017	3.1	2.4	2.7	2.8	2.7	3.1	2.9	3.0	2.9
2019	3.1	2.5	2.9	2.8	2.8	3.0	2.8	2.9	2.9
2021	3.5	3.0	3.2	3.1	3.1	3.2	3.2	3.2	3.2
Age									
19–29	3.6	3.0	3.2	3.1	3.1	3.1	3.2	3.2	3.1
30–39	3.4	2.9	3.2	3.1	3.0	3.2	3.1	3.2	3.1
40–49	3.5	3.0	3.2	3.1	3.1	3.2	3.2	3.3	3.2
50–59	3.5	3.0	3.3	3.1	3.1	3.2	3.2	3.2	3.2
60+	3.5	2.9	3.2	3.2	3.1	3.2	3.2	3.2	3.2

Groups that needed to make central efforts for social integration were, in decreasing order, the government, the National Assembly, and the media, and compared to 2019, businesses and civic groups increased by more than 100% to 25.8% and 16.7%, respectively. The government and the media accounted for 40.3% and 27.1%, respectively, a 20% decrease, and religious organizations accounted for less than 5%, the lowest among the target institutions (see Table 9). Before COVID-19, people expected roles to be played by a small number of groups, such as the government and the National Assembly, to facilitate social integration, but since then, it was found that they looked to different groups such as corporations, civic groups, and legal circles.

Table 9. Groups that Should Play a Central Role in Social Integration (1st and 2nd priority).

Group/Year	Education Department	National Assembly	Corporations	Trade Unions	Legal Professions	Civic Organizations	Media	Government	Religious Organizations
2017	19.8	45.0	12.6	6.9	6.7	8.2	35.6	61.6	3.6
2019	22.3	45.2	12.3	10.6	11.9	7.4	33.6	53.6	3.1
2021	18.0	37.7	25.8	16.1	14.7	16.7	27.1	40.3	3.5
Age									
19–29	15.1	37.3	27.6	15.5	13.0	16.9	30.6	40.8	3.3
30–39	17.9	35.5	23.1	17.4	14.9	16.6	29.8	40.6	4.1
40–49	21.6	36.3	25.7	16.5	17.2	16.2	24.6	38.9	3.0
50–59	18.7	40.7	26.0	17.0	15.7	16.6	26.1	36.9	2.3
60+	17.0	38.0	26.2	15.1	13.2	16.9	25.9	43.1	4.6

Source: Korea Institute of Public Administration (2021), Korea Social Integration Survey (<http://kosis.kr>, accessed on 15 September 2022).

Religious organizations need to recognize these problems and re-establish and implement the direction of religion’s social role to help people change their perceptions.

Donation refers to giving property for charity or public work without expecting a return and includes the donation of goods, cash, and talent. Considered important by many religions, data from Statistics Korea (2015) shows that the cash donation rate from 2017 to 2021 gradually decreased from 24.3% to 24%, then to 20.6%. The donation rate similarly decreased in the younger generation aged below thirty, but for individuals in their forties and older, it increased until 2019 and then decreased in 2021, showing differences by age group (see Figure 14). In terms of donation method, donations were made in the order of sponsorship through fundraising organizations, direct sponsorship to targets, and sponsorship through religious organizations until 2019, but after COVID-19 in 2021, the order was sponsorship through fund-raising organizations, religious organizations, and direct sponsorship. Sponsorship through religious organizations made up 32.7% in 2021, an increase of 115% compared to 2019. Direct sponsorship and sponsorship through work showed little change, and sponsorship through fundraising groups decreased by 9% to 55.2% (see Figure 15). These changes in donation methods show that Korean society expects religious organizations to play a role in social welfare through donations rather than resolving social conflicts or social integration.

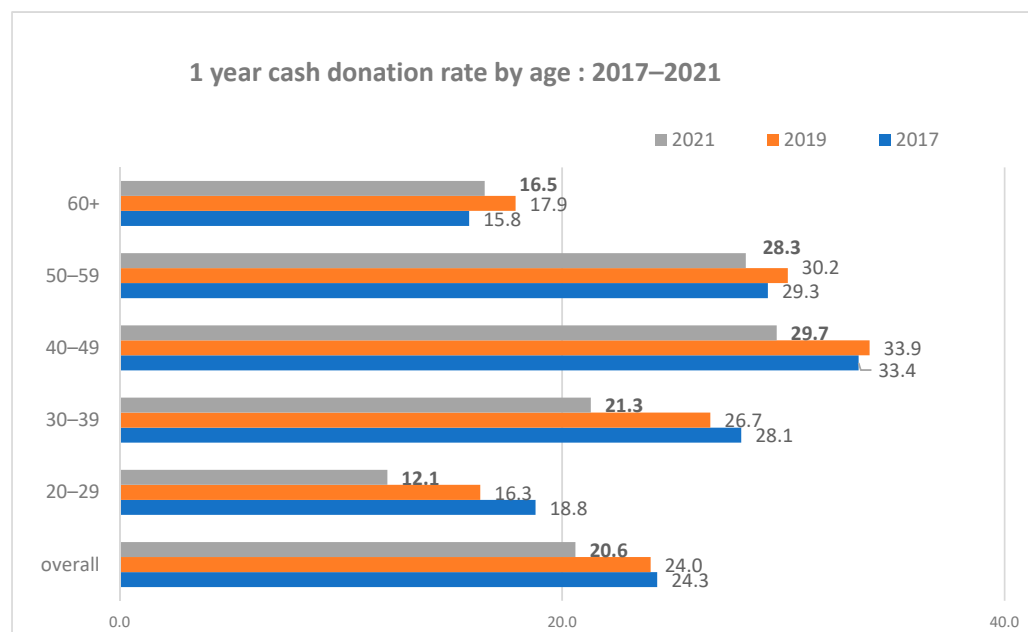


Figure 14. One-Year Cash Donation Rate by Age: 2017–2021.

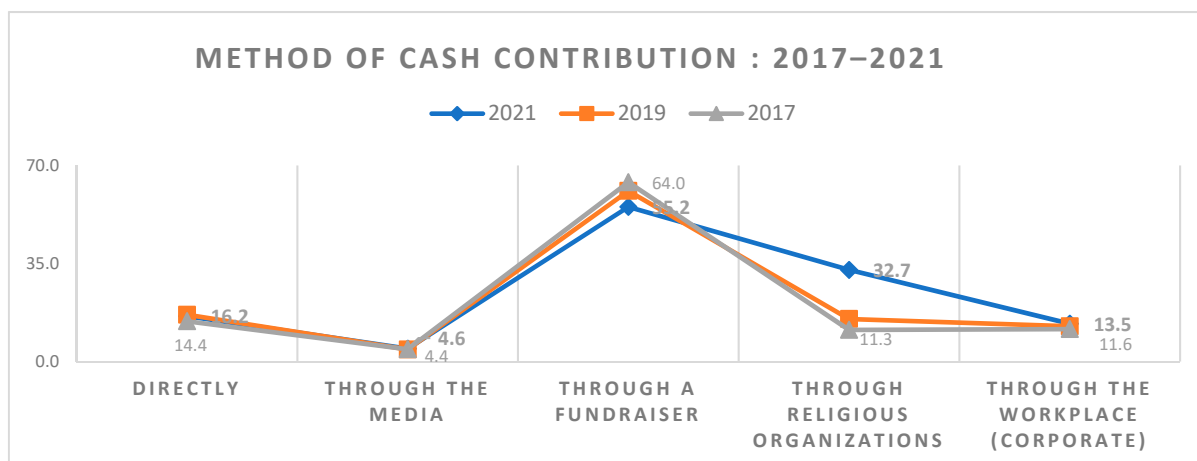


Figure 15. Method of Cash Contribution by Year: 2017–2021; Source: Statistics Korea (2015), Social Survey (<http://kosis.kr>, accessed on 15 September 2022).

During the COVID-19 pandemic, almost all social activities were restricted and participation in religious activities decreased, while cash donations directly to religious organizations increased. Korean religions have actively engaged in charity activities to provide shelter and food to the homeless. In addition, some religions actively played a role in providing religious buildings and hospitals to the government for the treatment of COVID-19 patients. This shows people’s high expectation for social service and charity works in the religious community.

5.3. Challenges in Healing Corona-Blue Symptoms

As we are expecting a post-pandemic phase, it is our primary religious task to overcome the corona-blue syndrome, a feeling of no way out. While the government is focusing all administration on treating COVID-19 pandemic patients, which is a socially visible phenomenon by providing substantial financial and medical care, it is neglecting the invisible and serious corona-blue phenomenon. To cope with the COVID-19 pandemic and its impact, the National Trauma Center has formed a COVID-19 integrated psychological support group since 2020, with mental health welfare centers and regional trauma centers across the country to provide psychological support. Major services include the operation of the disaster psychology support headquarters and on-site counseling centers, visitation mind-relief buses, mind program applications, Kakao Talk channels, and psychological support for disaster response personnel. The local community also operates healing programs, such as forest therapy programs, psychological counseling and mental health programs, horticultural therapy programs, and art therapy programs. As their titles suggest, these programs usually focus on experience. Hence, it will be necessary to gain expertise and continuity so that the programs can have actual emotional therapeutic effects rather than being one-off programs.

It is also noteworthy that despite high demands for mental health services, 72.1% of the respondents said they had no experience using such services. Although they are highly aware of the need to improve mental health, there still seem to be practical difficulties, mental conflicts, or lack of publicity in finding and applying for suitable services, adjusting schedules, and participating at the right time. Therefore, increasing accessibility and participation rates are as important as providing mental health services for service targets to receive actual help.

Differentiated interventions and multi-level approaches are also needed not only by the general public but also by population groups such as children, adolescents, vulnerable groups, and medical workers to promote mental health effectively. It is also necessary to provide appropriate intervention methods by psychological problem area. Ultimately, it is necessary to establish a more detailed mental health support system, run high-quality

programs, and expand public relations strategies, focusing on available resources in the community in addition to the role of government agencies. Given the high demand for mental health services, there is a need to improve accessibility and participation in services, differentiated interventions, and multiple-level approaches by area of psychological problem and population group.

Regarding the urgent need for interest in and support for mental health, especially corona-blue, from a different perspective, this is a time when the therapeutic role of religion is needed more than ever. The essentially positive perspective of religion and love toward humans based on religious spirituality have sufficient healing power. In particular, people who are depressed have negative and pessimistic thoughts about themselves, the world, and the future, and their emotional state is dark and gloomy. Therefore, it is very important to look at their existence as human beings with a warm perspective. In addition to psychological stability based on this, the spirit of religion and experience of devotion and service can help improve life's difficulties linked to psychological maladjustment.

Furthermore, the fact that most modern religions carry out religious activities centered on the community and form a strong human and material network in the community can be used for healing activities. In other words, if religions use the networks they formed with the community to launch a psychological support service to overcome corona-blue, it will have the advantage of developing and operating programs suitable for the community and its residents because they already know the characteristics of the community. If that happens, not only will the participation rate increase out of need, but more active participation can also be induced through promotion using the networks. Moreover, since these programs will reflect religion's spiritual view of the world and human beings, they can be a more essential and effective approach to healing and recovery. The content will be a matter of "mind," which is the core of "spirituality" and human existence.

With the COVID-19 pandemic, religion has faced a challenging situation unlike any other. Existing methods of edification, such as worship and preaching through face-to-face contact, have limitations, and religious activities that had been primarily conducted face-to-face shrank significantly to comply with social distancing rules. In particular, distrust and avoidance of religion have spread further due to the problem of group infection centered on some religious groups and the incomprehensible behavior of religious leaders. Religions are looking for solutions by introducing online methods, but it is perhaps time to look back on religion's original purpose and role and redesign a direction to move forward rather than finding a solution by changing the method. Jang considers that the current crisis should provide an opportunity to deeply reflect on the nature of religion, the reason for religion's existence, and the mission and social role that religion can play, suggesting that we enter the path of the "mind revolution" to foster the power of the mind, of spirituality and understanding to actively and autonomously respond to the external scientific revolution and stand as a subject that is awake each moment (Jang 2021). Korean Religions face difficult challenges in overcoming not only the COVID-19 pandemic but also in finding a new direction to heal corona-blue, a disease of the mind brought about by human history and the times. Although it is painful, healing will begin from a mind that can see the current crisis as an opportunity.

6. Conclusions

In comparison with other developed countries, Korea's response to COVID-19 is considered to have been quite successful, with a high level of positive support from the public. With the spread of COVID-19 in Korean society, the issues of freedom of religious assembly and the public nature of religion were raised. However, the enforcement of religious gatherings by some conservative Protestant churches and Shinch'ŏnji Church became a catalyst for the spread of COVID-19 and a target of social criticism.

In general, the Korean religious community actively accommodated the government's COVID-19 policy and cooperated for the health and safety of citizens while limiting and changing attendance at religious ceremonies. Although the Korean government imple-

mented a strong social distancing policy, citizens were able to have a relatively normal life, without border closures or mass lockdowns. Pew Research Center reported on a survey of members of the public regarding whether their countries had done a good job dealing with the coronavirus outbreak: nearly all adults (97% and 96%, respectively) in Singapore and New Zealand, about nine out of ten in Australia and Taiwan and seven out of ten in South Korea rated their governments' responses to the coronavirus outbreak positively. On the other hand, the researchers found that "Japan is the exception in the Asia-Pacific region, with 64% saying Japan has done a *bad* job dealing with the coronavirus outbreak. About half or more in the U.S., Spain, France, Belgium and Germany also rate their pandemic responses negatively." (PRC 2021). In the UK, the Telegraph reported that Korea could teach the world how to live with COVID, by showing a framework for how to deal with future epidemic threats. Although mainland China and Hong Kong kept to a "zero Covid" policy with border closures and mass lockdowns, South Korea, like Singapore, opted for a more targeted "low COVID" rather than "zero COVID" approach. When the West had been struck by "fatalism," Korea, New Zealand and Taiwan had taken a cautious approach that kept infections down while allowing citizens to have relatively normal lives (Telegraph 2022). When the number of COVID-19 infections was rapidly increasing in March 2022, the Wall Street Journal (United States) predicted that Korea could become the first country to transition to an endemic COVID situation because of it having the highest vaccination rates among adults, high trust in the public health system, and the right tools to emerge from the pandemic. South Korea has one of the world's highest vaccination rates, with 96% of adults having received two doses. At just 0.13%, the country has one of the lowest death rates from the virus globally—about a 10th the rates in the US and the UK (Wall Street Journal 2022). Based upon these facts, Korea is considered as the first to downgrade the threat level it assigns to the virus, effectively lifting the emergency powers.

Without the religious community's commitment to the social public interest, negative perceptions of religion will be amplified and its social role will weaken. Changes in the religious landscape of Korean society occurred rapidly over time. Buddhism was the center of traditional religion during the Three Kingdoms and Koryŏ Dynasty, but Confucianism took the center stage during the Chosŏn Dynasty, and Tonghak (Chŏndogyo) played a central role in the Tonghak Revolution and the 3.1 Independence Movement as new religions emerged in the 19th and early 20th centuries. After liberation, as Protestant and Catholic democratization movements and social roles arose, there was rapid growth. The religious landscape changed significantly depending on what positive role religion played for the public in civil society.

In the COVID-19 era, a new type of religious ritual is emerging, with a shift from face-to-face to non-face-to-face. In terms of content, it has become an opportunity to explore the concept of the sacred and the profane in doctrinal interpretation and change the place and form of faith. Individual and family-oriented faith has been shown to be possible by attending religious rituals in the church and the cathedral. By paving the way for a personal sacrament, provided a new way of interpreting salvation and absolution apart from a priest-centered structure that is responsible for religious ceremonies.

The medical system focused on COVID-19 quarantine and treatment at the government level is limited; thus, it cannot directly solve problems such as social anxiety, mental instability, and depression caused by COVID-19. The religious community needs a new social role to prepare active alternatives to social pathological phenomena and problems that the government or civic groups cannot address.

Since the emergence of COVID-19, the hatred of certain religions is the highest, except the hatred against politicians, but given that donations through religious groups have increased compared to the pre-COVID-19 era, Korean religions continue to play a role in public welfare. Rather than being content with religious faith and performance, it is time for the religious community to play a positive and active role in mental health, such as overcoming the corona-blue syndrome and preventing the increase of suicide.

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