Virtual home visits during the COVID-19 pandemic: social workers' perspectives

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Abstract

The home visit is a key aspect of child and family social work. Following the announcement of lockdown in England, all but the most urgent of home visits 'went virtual' overnight. During lockdown, we spoke to 31 child and family social workers across 9 local authorities in England as they began to undertake virtual home visits. Here, we focus on social workers' reflections on virtual practice and consider the possibilities, limitations and future implications of virtual home visiting.

Introduction

Child and family social work involves getting close to children physically, emotionally and cognitively in order to understand their experiences, their needs and to assess their safety. Such 'intimate practice' (Ferguson, 2017: 5) involves listening, talking, seeing, feeling, as well as professional touch (Baeza et al, 2018). Recent research indicates that the physical environment of the home can both complicate and enrich the tasks of assessment and intervention with children and families (Cook, 2020; Saltiel and Lakey, 2019). The embodied, sensory experience of the home visit, such as strong smells and pets (Muzicant and Peled, 2018) together with the emotions experienced by the worker can act as a vital source of information during visits (Ferguson, 2017; Cook, 2020). The shift to virtual home visiting during lockdown therefore had immediate and profound implications for workers' capacity to make sense of children's lives. This article discusses the rapid implementation of virtual home visits in child and family social work, identifying the risks and unexpected benefits of virtual communication with families.

The research

This rapid response research was carried out between the 19th March - 13th June, 2020, covering the period before and after the announcement of lockdown. During this period, we were already talking to social workers across England as part of an ongoing research project on the retention of experienced workers. We continued to speak to practitioners as the landscape of practice shifted dramatically, and this allowed us to capture social workers' responses to the pandemic as it unfolded. In-depth, qualitative telephone interviews were undertaken with 31 child and family social workers from across 9 local authorities in England. These were audio-recorded, transcribed and analysed using Braun and Clarke's (2006) six-stage model of thematic data analysis.

Findings

Navigating the virtual home visit

Following lockdown, the way that social workers engaged with children and families changed overnight. All but the most urgent in-person visits were replaced by virtual contact. In the days following the announcement of lockdown, social workers expressed misgivings about virtual visits. These concerns focused on their ability to build meaningful relationships, support families and complete accurate assessments 'through a computer screen'. However, over the first fortnight, there was a striking change of mood among workers - they began to express much greater optimism about

the opportunities afforded by virtual practice. Workers described using a variety of platforms for virtual home visits, including FaceTime, WhatsApp, Zoom, Microsoft Teams and Skype. Virtual visits did not replace in-person visits as a straightforward substitute. Instead, virtual communication with families invited a 'little and often' approach. Workers described making greater space for 'chit chat phone calls' and checking in with parents via text. These interactions could pave the way for longer video calls. Interacting with families through a screen created a sense of emotional distance, which workers needed to overcome.

> I was chatting with an 11-year-old last week and he was quite engaged as I managed to get Minecraft as a background - so that really worked! He did really well, we weren't sure whether he'd speak to me online, but he did... But it's not the same as being able to sit on the floor and play, and be there. There's that distance to the engagement, I feel. (SW44)

Creativity and improvisation on the part of the social worker has been recognised as key to successful home visiting (Ferguson, 2018). To overcome the sense of distance during virtual home visits, creativity was more important than ever. For young children, the first objective was to orientate them towards the screen to see the social worker. To do this, workers described various creative strategies including singing nursery rhymes as a way to draw infants' gaze towards the mobile device. With older children, workers described instigating basic games over video call, such as noughts and crosses. As they were working from home, workers delved into their own children's toy boxes, using dolls, tea sets and other toys to initiate play through the screen. Some social workers experimented with backgrounds and emojis available on video call platforms. In the example above, locating a Minecraft background was a real breakthrough moment in the social worker's relationship with the child. Once workers had captured the child's interest, they used various creative strategies to gather information. They described asking children to give them a 'tour' of the house using their mobile phone, and using a 'show and tell' approach, encouraging children to bring objects to show them. One social worker described asking a child to 'imagine the room is your spaceship – can you show me round?' These strategies helped social workers to initiate a reciprocal interaction during which they could begin to understand children's experiences and their everyday lives. Recognising the value of a physical link between them and the child, social workers described sending hardcopies of worksheets, genogram templates and other resources in the post. These materials were then used as a focal point in subsequent virtual interactions with children.

Advantages of virtual home visits

The shift to virtual home visiting allowed social workers to be far more responsive to families. Previously workers may have scheduled a visit and travelled to the family home. As practice moved online, workers described making a quick video call in response to a text from a parent. The 'little and often' approach invited by virtual working had some unexpected benefits. Many social workers described understanding more about families' everyday lives, despite the physical distance. Prior to lockdown, many workers spent the greater part of their day travelling to home visits. With the need for travel removed, some workers expressed feeling more energised and focused in their interactions with families and commented that they could be available for a greater number of families throughout the working day. The benefits of virtual communication were particularly apparent in social workers' interactions with young people. Social workers described how online communication – particularly texting - encouraged greater openness:

I think… some young people… feel more comfortable talking to us over the phone via video, and even having a WhatsApp text conversation. I think that's probably more their world… than sitting in front of someone in a room and having a conversation… I think we probably shy away from that, from doing anything too heavy… around anxieties about it being written down [and] what if its misconstrued, but actually that's how a lot of them communicate with a lot of those friends… online chat services are particularly popular with boys (SW53)

Despite their reservations about text messaging, the indirect nature of texting could encourage more open, frank conversations and provided a 'gentle' way into difficult subjects. When families were able to interact with their social worker 'on their terms' i.e. via text, rather than scheduled visit, some social workers reported improved relationships with parents. Some workers reflected that the children and families they were most worried about at the start of lockdown actually fared better without frequent, intrusive in-person social work visits:

It's quite ironic given the concerns about some families… but… most of them have worked through it well… There may be something in that, in terms of not putting too much pressure on people, or expectations, and they actually… do better than you think. (SW54)

This perhaps echoes the contentious notion that, in some circumstances, social work intervention may represent a harm in itself, placing additional pressures on families.

Limitations of virtual home visits

Social work with children and families is an inherently mobile, embodied practice (Ferguson, 2018). As one social worker phrased it, there was therefore a risk of becoming 'static personally, as well as professionally' (SW56) when working virtually. The distance between social workers and families created by virtual working had significant implications for assessment:

It's a definitely a limitation. Being able to see what the eye contact would be like, how the child looks… get a sense of what the home condition is like. It's not possible to get an accurate view of what the home is like if you're not there in person (SW52)

Almost all social workers interviewed talked about the difficulties of reading body language, and subtle social cues online. The sensory experience of the home, the atmospheres and emotions that are part of face-to-face home visiting were partially lost during virtual visits. Workers were concerned they would be more likely to miss hidden risks to children, particularly as they could not be sure they were speaking to them alone:

I had a video call with some children. They said they were happy for mum not to be in the room. I feel confident that mum wasn't in the room. But obviously if I was sitting in the room then I would know if she was sitting in the room behind the phone. (SW50)

Virtual home visits presented additional risks in terms of confidentiality and safety. In cases of domestic abuse, workers did not know whether the call was being monitored and if so, whether this would place the caller at additional risk. Social workers were clear that some subjects were simply not appropriate for discussion online. One social worker described how a parent had become understandably 'distraught' when another agency had asked her to discuss traumatic experiences over Skype (SW43). Workers were aware that virtual communication, with its limitations, could disadvantage and potentially even re-traumatise parents and children unless handled with great sensitivity and caution. For these reasons, social workers typically regarded new referrals, child

welfare concerns and initial assessments as contraindicated for virtual visits. Workers typically undertook these as an essential in-person visit using PPE and social distancing measures as far as possible. Workers reported a distinct qualitative difference between virtual visits where they had a prior relationship with the family, and cases where the first contact took place online. Establishing new relationships online was a challenge for social workers across all areas of practice. Digital exclusion (DfDCMS, 2020) was another significant barrier to virtual visiting:

> What surprised me is the number of families who don't have WiFi in their homes and you can't do a video call because you're mindful of not wanting to use their data, or they don't have the signal or aren't able to download (SW47)

Many families could not afford the data costs associated with video calls or did not have a reliable internet connection. For families who were not deemed sufficiently 'high risk' for an essential in-person visit, this meant that they were less able to contact and receive support from their social worker.

Discussion

Reflections on virtual home visits

Virtual working afforded unexpected benefits for social work with children and families, particularly for engaging with young people. However, virtual home visits have significant limitations for initial assessments, particularly in the context of child welfare concerns. Among the social workers we interviewed, there was a general expectation that virtual practice would become 'the new normal' in social work. While many workers could see the opportunities that this afforded, they were deeply concerned that virtual practice would conveniently feed into the cost-cutting, austerity agenda. Working at home allowed social workers to be more responsive to service users. However, back-to-back contacts with families, combined with the loss of direct peer support from colleagues could leave workers feeling exhausted and dispirited. When conducting virtual home visits, social workers needed to manage sensitive and confidential discussions. This could be challenging for workers living in shared accommodation, or without a designated office space. Social workers described varying levels of support from their organisations around virtual visits. Some local authorities moved quickly to provide workers with the necessary mobile devices for remote working, others moved more slowly. Having an emotionally supportive team could help workers to manage the challenges of virtual visiting (see Cook *et al,* 2020b). For these reasons, it is vitally important that local authorities regularly review the sustainability of remote working arrangements to ensure worker wellbeing, retention and maintain good practice.

In line with the DfE's (2020) coronavirus guidance, local authorities initially prioritised 'high risk' cases for both in-person and virtual home visits during lockdown. This, together with the 'little and often' approach encouraged by virtual practice meant that some families were being contacted more frequently by their social worker. Social workers reported that some families were understandably distressed and frustrated by this intrusive surveillance in the already stressful context of lockdown. At the time of this research, systems were rapidly being developed to audit contacts with priority 'high risk' cases. It is therefore important that local authorities remain alert to the risk of increasing unnecessary coercive and oppressive interventions with children and families during the pandemic. As a result of the necessary prioritisation of 'high risk' cases, workers were concerned that families in need might become invisible during lockdown. Many social workers were concerned that, in the future

they would need to provide greater justification to visit families who did not meet the threshold for safeguarding intervention.

Concerns have been raised about inappropriate assessments during lockdown, and the risk that they may disadvantage and even re-traumatise vulnerable parents (ATD 4th World, 2020). While social workers noted the advantages afforded by virtual practice, many shared the concern that judgements based on virtual visits were 'less robust'. This emphasises the need for judgements made during lockdown to be re-visited and regularly reviewed. Given the ongoing risks posed by COVID-19, it is likely that virtual home visits will be a feature of child and family social work for some time to come. As the infrastructure around virtual practice continues to develop, it may be that child and family social work operates as a hybrid model of virtual and face-to-face practice. There is therefore an urgent need to consult children, young people, parents and carers about their experiences of virtual social work practice.

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