

# Family Work in an Online Environment: Findings from the Fams' 'In Conversation With' Sessions Chats

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## Introduction

Since the onset of the coronavirus (CoVID-19) outbreak, the Australian Government has implemented social distancing policy to limit the spread of the virus throughout the community. While necessary to protect the health of Australians, this policy has substantially changed the way family workers have worked with families.

Out of necessity, family workers have been required to experiment with alternative modes of service delivery. This includes being required to conduct the bulk of service delivery online and over the telephone. While this has created new opportunities for service delivery, noted concerns include that there is much that remains unknown regarding delivering family work using online technologies, not least of which pertains to issues of privacy, safety, and efficacy, of providing interventions to vulnerable people in this manner.

Research on family work delivered using online technologies is limited. The few available studies show that while there are some similarities when comparing face-to-face practice with online delivery, there are important differences (1,2). Guidance is limited regarding how workers can effectively engage with service users online, including how to build and maintain a working relationship that helps people change their behavior.

Some research has found that workers prefer providing services, such as counselling, face-to-face (3-5). Research also shows that while workers assume online delivery will negatively affect engagement, this is not necessarily the case (6). Moreover, studies have found that service users are less concerned than workers about engaging online (2, 7-12).

Most of the available research has been conducted on online practice in a health context, with very limited evidence available of working online in child and family, child protection, and domestic and family violence contexts. A few studies are available of working with children and young people online (9, 13, 14). Furthermore, the evidence is scarce regarding working with involuntary clients in an online mode.

Most of the available evidence on online service delivery is of practice within a psychotherapeutic paradigm (mainly general counselling and other types of mental health interventions from this perspective). There is a scarcity of research on service delivery from psychosocial or social science paradigms (15), which primarily underpin family work. The consensus seems to be that more research is required on service delivery in an online context, in particular of the nature of worker-client engagement.

In response, Fams has started to explore how the sector can develop some of the changes to service delivery necessitated by COVID-19 into an evidence-informed, sustainable, and secure model of family work, that will result in improved outcomes for families, children and young people.

To achieve this, Fams has hosted weekly videoconferencing 'conversations' since the commencement of the Federal Government's social distancing policy. Called "In Conversation With", the purpose of these sessions has been for Fams to hear, and respond to, issues that workers and CEOs of organisations providing services to children, young people and families have experienced since the social distancing policy began. The aim has been to hear insights and experiences from professionals who are directly providing services regarding what is working well, and where difficulties have emerged.

The following reports on the findings of a secondary analysis of the written 'chats' recorded during the Fams "In Conversation With" sessions, which occurred between March and June, 2020. At the time of the study, approximately 250 workers and CEOs from across Fams' membership had attended the 12 sessions from which the data was drawn. Written 'chat' data that was relevant to the experience of providing family work interventions to children, young people and families using online technologies during this period was thematically analysed. To make sense of the important points raised in the 'chats', and as per thematic analysis methods (16, 17), the author organised and reorganised the data into conceptual categories, or themes and sub-themes. The following summarises the findings of this thematic analysis.

## Findings

Three major themes emerged regarding the provision of family support to parents during the three-month period of social distancing policy, which related to: worker and client engagement; the online working environment, and, practice issues.

### Worker and client engagement

#### Working with adults

Noted positives to engagement via online mode of delivery relate to providing increased access for some to engage, for example, clients who are geographically isolated, experiencing difficulties in social settings, living with disability. Another noted positive was that online mode of delivery provided some increased capacity for workers to see inside the house. No details were provided of this but it is arguable that potential benefit of this could be influenced by clients.

Difficulties regarding engagement via online mode of delivery related to:

- children being present during interventions
- concerns it is easier for clients to disengage than during face to face delivery
- it being even more difficult than during face to face delivery to engage with clients who are usually hard to engage
- concerns about engaging with new clients, (presumably they mean because no prior working relationship is established, but no details were provided)
- severe impediments to sighting at-risk clients (children, young people and adults).

## Working with children and young people

Using an online working environment with children and young people had limited and mixed responses. Where some children were noted to enjoy seeing their worker online, and the online platform enhancing the capacity of some to engage in school, other children and young people were reported to be harder to engage online. As noted in the work with adults, the preferred and default form of engagement seemed to be face to face. However, there were comments that adaptive and creative responses to working with children and young people online have helped them remain engaged with workers. Further exploration of the experience of workers working online with children and young people is required, especially as it relates to the extent to which the mode of delivery supports or hinders the purpose of the work being undertaken.

## Online working environment

Chat themes related to the online work environment included: difficulties related to using the internet, which was the primary communication platform; workers needing to choose from multiple and diverse online engagement types; and, safety.

Concerns related to using the internet were directly related to internet access, people not having hardware adequate to conduct family work interventions, and having poor levels of technology literacy, which exacerbated already heightened communication issues. Access to the internet was hampered by poor coverage, especially in rural areas, and limited data in a situation when people are using the internet much more. Issues raised related to inadequate hardware included access to inadequate hardware for the requirements, for example, parents having to use smartphones rather than computers during family work sessions, families having high simultaneous demand for the single or few devices that were in the house, for example children needing to use the device for schoolwork when parents needed it for their family work session. Poor technology literacy, regarding both the internet and hardware was noted to hamper engagement, although no additional details were provided.

Workers reported using a combination of phone, video conferencing and podcasts / vodcasts / webinars to deliver services. There was a diverse range of software used. The 14 mentioned were: Discord, Doxy.me, Facebook (multiple options), FaceTime, Google Hangouts, GoTo, Instagram Chat, Microsoft Teams, Skype, SnapChat, Storypack, Tik-Tok, WhatsApp, and Zoom. Needing to choose from multiple and diverse online engagement types added to the burden of delivery.

Two issues were raised related to safety when engaging in an online working environment. While these were not explored in detail, they related to workers' concern that their clients were unsafe during online sessions, particularly when vulnerable people were discussing sensitive matters, especially when the abusive person was present in the house. Workers also raised concerns about cyber security when discussing sensitive matters.

## Practice issues

The third main theme relates to issues that arose for staff related to their experience of practice when working with families online or over the phone, compared to face-to-face, and related support needs staff noted they required, due to the different nature of family work intervention delivered in online mode.

Regarding differences between delivering interventions face-to-face, compared to online or over the phone, workers noted there was added burden of learning to make the technology work, increased fatigue working online rather than face-to-face and vicarious trauma issues, and practice constraints. No details were provided of these issues. However, workers did raise a range of different types of supports they required due to these

increased burdens. These included a need for networking opportunities, professional development related to the new mode of delivery, supervision and team meetings.

## Conclusion

The take home message from the written 'chats' recorded during the Fams' "In Conversation With" sessions, between March and the end of June 2020, is that while workers are open to online and phone modes of delivery once a working relationship is established, face-to-face practice is a preferred approach to family work with adults, children and young people. However, details for this preference were limited.

There were some concerns, requiring of more in-depth exploration, that online delivery has an overall negative impact on worker/client engagement, especially when there is no previously established working relationship. Other issues reported, which also require further exploration, relate to differences inherent in the mode of delivery between working with people in an online/phone context compared to face-to-face, and how these influence the primary purpose of family work, which is to help families change.

Very few details were provided to explain or explore why these themes are an issue, and how they might impact worker practice, and client change. Furthermore, study limitations include that the available data is only the written chat, and not data from the verbal conversations conducted during the sessions. The data is also limited by being comprised of the insights of those who attended the sessions and, even more so, by only being the insights of those who wrote in the chat window during these sessions.

Therefore, further in-depth exploration of these engagement issues is required. Furthermore, additional data is required of the experiences of workers who have successfully engaged, and built productive working relationships with new clients. It is recommended that a follow up study is conducted exploring these issues in greater depth, including a more comprehensive analysis of the available research evidence.

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