Introduction

The proliferation of cyber communication and digital technologies has transformed the way we communicate with one another. The temporal, spatial and geographical nature of communication is constantly in flux with digital innovations allowing people of all ages to be simultaneously online and offline in their everyday lives. This evolution of digital technologies has drastically impacted the practice of social work and social work education.

Additionally, the social, economic and health consequences of COVID-19 for children and families is heightening vulnerabilities with families potentially experiencing job losses, financial difficulties and school closures. These changes can have adverse impacts on children’s wellbeing and exacerbate behaviour or conduct issues and generalised feelings of anxiety and fear, and place more pressure on parents and carers for children who are now home full-time. Ultimately, children may be more vulnerable to neglect and abuse, and incidence of domestic violence may increase with social isolation making it difficult for victims/survivors to report violence or implement safety plans.

In this context, it is critical that families remain connected with services and supports. However, it is also important that the need for continued supports is balanced with the need to protect the wellbeing and safety of children, practitioners and families during the COVID-19 pandemic. Remote support work using digital and video technologies can enable practitioners to remain connected with, and supportive of, families while protecting the health and safety of all involved.

This Research to Practice Note will outline the application of digital technologies in current social work practice, the impacts of these digitised practices and key considerations for social work practitioners engaging in digitised practices, and potential for further engagement with digital technologies in social work education and practice.

Key Issues

- Remote technologies can provide a useful tool for maintaining connections with families when face to face contact is not possible.
- Online and virtual services can provide anonymity for people in small or close-knit communities.
- Remote specialist services may increase access for people with a disability or mobility issues.
- Young people may feel like they have more control over the length and nature of virtual communications.
- Virtual meetings can facilitate opportunities for supervision and networking among practitioners.
- Challenges for the use of remote and virtual technologies include how to protect client privacy and confidentiality, and the need to maintain professional boundaries.
- Some groups may lack the skills or interest in engaging in online communication.
- Virtual visits may not be appropriate if there is known or suspected domestic violence in a family.
- Digital literacy and professionalism is not usually a standard component of professional education and training programs.

June 2020
For service users of all ages, trust, staying in touch and honesty have been identified as key components of good communication, and lack of contact has led to reticence to share sensitive information due to feelings of vulnerability.41

Digital or online service delivery can facilitate social work practice that is flexible, on-demand, and idiosyncratic and responsive to the needs of the service user.42

Importantly, new technologies can also provide an opportunity to offer crisis intervention in the moment.

**IMPACTS OF TECHNOLOGY-DRIVEN PRACTICE**

The impacts of digital technology use in social work practice and education are both positive and negative. Broadly, online communication and digital technologies facilitate new opportunities for interdisciplinary service delivery and information-sharing and diversify opportunities for access to critical services and support groups for people who are socially or geographically isolated. However, there is also risk for loss of privacy, confidentiality and ethical grey areas relating to professional boundaries in practice.

**Benefits**

**Geographically isolated groups**

A well-documented benefit of online service delivery and digitised practices is the potential for connecting rural and remote communities to critical services and supports irrespective of geographic location.30 This is particularly pertinent in an Australian context where rural and remote places tend to receive fewer resources, have less well-established social service infrastructure and struggle to retain professional and specialist practitioners. The benefits of online service delivery also extend to clients who may be bound to their home as a result of a disability. Digital technologies enable isolated communities to draw services and supports from personnel based in urban centres.

Additionally, online and video platforms can facilitate a continuous relationship between practitioner and service user or client beyond established face-to-face sessions.31 For geographically isolated groups, this can theoretically extend therapeutic or support sessions beyond in-person meetings which may be less frequent so that availability of resources and supports remain consistent despite physical distance. Online and virtual services can also provide greater anonymity for clients seeking supports in close-knit rural communities where fear of stigma is a deterrent to engaging services.32

**Tailored supports for particular groups**

For some population groups, online service delivery or services delivered via social media platforms may facilitate better engagement over a longer period of time. For example, a young person in out-of-home care may be more willing to engage with services provided by a practitioner where his/her views are sought over a longer period of time via a messaging platform rather than during the course of a one-off meeting with the practitioner.33

Online games and gamified learning also serve as novel platforms for delivery of therapeutic services with potential capacity to reach populations resistant to traditional mental health interventions.

Qualitative research undertaken with service users also indicates that there is an expectation that social work practitioners are able to use a variety of cyber communication methods and understand the importance of online communication in the digital era.24 Particularly among younger service users, knowledge of social networking is considered critical to an understanding of the everyday experiences of young people, and to the provision of support.

For children in out-of-home care or who have been adopted, studies exploring the implications of digital contact with birth families have reported high levels of satisfaction among young people.35, 36, 37 Specifically, digital contact affords greater control and freedoms to youth who maintain online contact with birth relatives.38, 39, 40

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Research highlights the potential for telehealth and teletherapy services to engender a feeling of safety in service users owing to the anonymity afforded by some online platforms and the accessibility of available help.29

Interdisciplinary service provision and information sharing

Interdisciplinary service provision and information sharing is made significantly more feasible with the advent of digitisation. Professionals from discrete specialties and across practice areas can more easily communicate and collaborate with one another both to share research outcomes and best practices, and to offer wrap-around supports to service users.43 More services from multiple providers can be offered on online portals which in turn can allow practitioners to gather diverse datasets across a range of population groups and service needs. Video platforms that allow multiple callers to join a virtual meeting can facilitate meetings between practitioners, families and specialised service providers to link families to extended supports as required.

CURRENT APPLICATIONS OF TECHNOLOGY IN SOCIAL WORK PRACTICE

Administrative applications

Digital technologies are most commonly used in social work practice for data entry, management of service delivery and monitoring purposes.2 For example, cyber communication is typically used to schedule appointments and meetings and ICTs are critical for documenting and storing key data relating to service users and relevant services.3

Therapeutic and supplementary applications

There are examples of social workers using a variety of digital technologies to communicate with service users, supplement face-to-face therapy and provide services outside the office setting.4, 5, 6 The extent to which social workers are making use of available technologies to communicate with service users and deliver services remains unclear, however research suggests that technology use is growing.7, 8 Some examples highlighted in the literature include referral of service users to psycho-educational apps, self-guided interventions and websites as an adjunct to therapeutic services,9, 10 use of personal mobile phones to support their work and communication with service users,11, 12 and use of videoconferencing for supervision of fieldwork in social work education.13 Generally, these examples indicate that technology-use in social work practice and education is supplementary to the traditional modes of contact, service provision and learning.14

Limits to current applications

The limits to technology use extend to the social work curricula with research suggesting that despite a saturation of technology in the learning environment, there is minimal exposure to issues surrounding digital literacy and professionalism.18 Consequently, social work students are likely to enter the workforce with inadequate digital knowledge and skills to competently navigate digitised practices in the field.

Reticence to expand use of digital technologies in social work practice is occurring despite evidence of its successful application in professions such as psychology, medicine, pharmacology and nursing.19 For these disciplines, ‘telehealth’ services involving use of ICTs in the provision of consulting, treatment and monitoring services have greatly assisted patients who are socially or geographically isolated, or unable to travel.20 Moreover, evaluations of telehealth and teletherapy services delivered via video-conferencing or related cyber communication methods have demonstrated positive outcomes in terms of
the social or clinical relationship established\textsuperscript{21, 22} and the subjective wellbeing of clients\textsuperscript{23, 24, 25} in terms of reducing symptoms and improving functioning.\textsuperscript{26} Importantly, teletherapy services also tend to appeal to groups who may not have previously had access to traditional services (due to rurality, remoteness or disability) and who may have otherwise avoided face-to-face therapy. For example, Best, Manktelow and Taylor (2014)\textsuperscript{27} suggest that young men are more likely to reject traditional therapy and engage in teletherapy. Similarly, sexual minority youth have been found to gravitate towards social services delivered in an online environment as a safer alternative to offline service delivery.\textsuperscript{28}

**CHALLENGES**

There are a number of risks associated with digitised social work practices. Issues surrounding privacy, confidentiality and professional boundaries are most pronounced.\textsuperscript{44, 45, 46}

**Confidentiality and privacy issues**

Digital practices or online communication via social media risks compromising the confidentiality and privacy of both service user and practitioner and their family and friends respectively.\textsuperscript{47} Often, the extent to which social networking sites are secure is unknown and consequently, practitioners cannot always rely upon the built-in security controls of an online forum to protect private information. This problem is exacerbated by a lack of regulation of online social work practice which generates uncertainty for practitioners negotiating the risks of digitised practices.\textsuperscript{48}

Generally, video platforms should be chosen with consideration for the available security measures to minimise risk of data breaches. Also, practitioners should explain to families how their privacy will be protected. It is important to establish who is present during a virtual meeting or visit, and to reassure families that the practitioner is in a private place free from distractions and the possibility of others overhearing or seeing the conversation. For families, wearing headphones can also assist with privacy during the virtual session.

**Unclear professional boundaries and dual relationships**

An issue commonly highlighted in qualitative research reporting on social workers’ concerns regarding digitised practices is the slippery slope of unclear boundaries between practitioner and service user. For example, online communication can give the impression of 24/7 availability which can in turn, create opportunities for service users to feel rejected when they don’t receive an immediate response from a practitioner, and can traverse professional boundaries where practitioners feel compelled to respond to messages on evenings and weekends.\textsuperscript{49}

It is important that clear guidelines and expectations are set that establish how and when service users can expect to be in communication with practitioners. For example, the practitioner should establish ideal times for a virtual visit or meeting including the duration and frequency of visits in discussion with the family and with consideration for the family’s goals and the urgency of their circumstances. Also, it is recommended that practitioners only use their work email to exchange client files or communicate with clients or service users and abstain from using their personal email or contact details.

Similarly, practitioners should be mindful of their online presence and information that may be accessible to clients via social media platforms.
High-risk circumstances

Where there is known or suspected domestic violence in a family, or there is a need to undertake a safety and risk assessment of a child at risk of significant harm, virtual visits are not appropriate. Generally, it is important to weigh the risks that already exist in a family home, the urgency of the case, the potential benefits of a virtual visit and the importance of face-to-face contact for each individual case.

Unequal access to, and familiarity with, technology

Access to, and familiarity with, technology is not universal and an emergent risk with increasing reliance on digitised practices is that differential technological competence may add to the vulnerabilities of individuals and groups in need of intervention and services. Older age groups often report a lack of interest in, or skills suited to online communication. In the context of children in kinship care, older groups of grandparent age are likely to be in a care role and require consistent supports. For these groups, and others that may not be comfortable or familiar with digital communication, it is important to ensure service provision remains consistent regardless of the delivery medium.

To assuage any anxiety felt by families using digital or video technology, it is important to acknowledge that this is a different way of connecting and communicating and may take a bit of time to adjust to. It is also important for families to be encouraged to practice using the technology prior to a virtual meeting to maximise familiarity and comfort with the platform. Similarly, it is recommended that practitioners have a back-up plan such as a phone call in the event that the technology fails.

CONCLUSION

With COVID-19, online and video communication is increasingly becoming a critical part of ‘face-to-face’ social work practice. However, the benefits and challenges of online service provision extend beyond the current pandemic. Digital practices are increasingly a part of everyday life and are triggering changes in the practice landscape. For example, expectations for service delivery and communication mediums revolve more than ever around the digital. Further research around social work practice and technology is needed to harness the potential for digitised and online practices to effectively enhance current services. Similarly, training in online service delivery and new technologies needs to be embedded within social work education.

It has become vital for social workers to understand the role that social media and digital technologies play in the lives of their clients. In this context, it is important that social work look to digital and online technologies as a strategy for innovation and calibration of therapeutic practices rather than as an adjunct to traditional service delivery.
REFERENCES

In order of first appearance


22. Greenhow, S., S. Hackett, C. Jones, E. Meins, and M. Bell, Chatting Online with my Mother: Post-Adoption Contact in the Facebook Era (SASS Research Briefing No 13, Durham University, 2014)


