



VIRTUAL COMMUNICATION IN CHILD WELFARE

The Bottom Line

Learning how to foster connection through tele-communication is useful knowledge for when in-person communication is not possible. This way, service providers can continue to meet the needs of those who access services. This includes the need for human connection, especially those in rural and remote locations.

Importance of Tele-Communications

While in-person communication is preferable, abiding by health and safety guidelines and reaching out to individuals in rural and remote communities may require creativity in the ways in which we build connection.

Learning how to digitally/virtually communicate with children in the child welfare system (e.g., child abuse investigations, provision of mental/physical health support, child communication with caregivers, child welfare consultations with families) may open doors for reaching children in rural communities. These communities are sometimes hours away from specialized and culturally informed workers, and individuals may be able to have their immediate needs met through assistance online.

Virtual communication also benefits families with barriers to transportation that are preventing them from meeting their health needs. Some children with special needs such as autism may feel afraid and overstimulated when attending medical appointments, making it a difficult experience for the child and the caregiver. Building skill level in virtual communication allows some families to attend their appointments with more flexibility and less stress.



Concern With Tele-Communications: Logistics

Primary concerns with tele-communications include confidentiality, privacy, boundaries, informed consent, policy development, and documentation.

Possible Responses

- Update liability insurance and consent forms to include the provision of online practice. Within consent forms, include the procedure of how the communication will take place, risks that inevitably come with online communications, and a request for updated contact information.
- Develop an emergency plan that will occur should a person accessing services be in immediate danger. This may include having their address on hand and having a safe word or gesture that implies someone else has walked into the room out of camera view and the subject should be changed immediately.

Concern With Tele-Communications: Maltreatment Disclosures

Children and youth may not feel comfortable disclosing child maltreatment through virtual communications. A child may be receiving threats to prevent them from disclosing abuse. They may also be reluctant to say anything negative if their caregiver is close by.

Possible Responses

- Some service providers have found adolescents to have virtually no difference in timing and depth of self-disclosures through virtual communications as opposed to in-person.
- Children under 6 years of age may be less vocal during serious conversations about their well-being, especially in disclosing sexual abuse. Try asking simple questions about the child's life. This will allow you to have better insight than direct, abuse-related inquiries.



Concern With Tele-Communications: Video Deficit

Younger children may have a harder time focusing on the virtual interaction and experience video deficit more quickly. Research has shown that children under 3 years of age have a hard time learning from a screen and may not understand the video is happening in real-time.

Possible Responses

- Use a back and forth communication style. This would look similar to the speak, listen, respond model used in the show “Dora the Explorer”. This will help young children stay present in the interaction.
- The language young children use to communicate is play. You will get the best response out of a young child through the use of games, play, and movements.
- Communicating with caregivers may bring up difficult feelings such as anxiety, loss, or abandonment. In younger children, these feelings can manifest themselves in unusual ways, such as silliness, clinging, whining, and acting out. As a service provider, be prepared to deal with these behaviours to ensure the connection stays on track.

Concern With Tele-Communications: Lack of Intimacy

Children and youth may not feel enough comfortability or intimacy discussing mental health and well-being concerns with service providers through tele-communications.

Possible Responses

- Children and youth do well with virtual communications; however, reading your energy will affect their response. Normalize and be comfortable with any dysfunctions that occur during tele-communications.
- Ensure everyone involved knows the agenda of how the video chat will take place beforehand. If supervising parental visitation, the context of goodbyes are especially important to go over to provide closure when there is no physical contact available.
- If the child or youth would like to do or talk about something other than what you planned, follow their lead. It is better to keep them invested in the call to foster genuine connection over sticking to a plan.

Concern With Tele-Communications: Service Provider Comfortability

While service providers experience concerns that children and youth will not be comfortable with virtual communication, it is often the service providers who feel more uncomfortable with virtual communications.

Possible Responses

- One method that has shown success in allowing service providers to feel more comfortable and prepared with virtual communication is “throwing”. This is when two service providers chat over video conference, switching roles where one person pretends to be a child or an adolescent. Their job is to make the call as difficult as possible for the other service provider (e.g., not responding to questions, ending the call or having the technology malfunction, leaving the room, becoming emotional, etc.) so they are well prepared to deal with any situation the youth may throw at them.
- Plan activities to do and ways to counter negative experiences beforehand. Things like preparing online games to play, stories to tell about your day to spark conversation, interview questions to ask, etc. may help the session run a lot smoother.



For original sources and documents, please visit: www.childtraumaresearch.ca