



What Works for
**Children's
Social Care**

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CHILD AND FAMILY SOCIAL WORK DURING THE COVID-19 PANDEMIC: A RAPID REVIEW OF THE EVIDENCE IN RELATION TO SOCIAL WORK PRACTICE, NATURAL DISASTERS AND PANDEMICS

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About What Works for Children's Social Care

What Works for Children's Social Care seeks better outcomes for children, young people and families by bringing the best available evidence to practitioners and other decision makers across the children's social

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CASCADE is concerned with all aspects of community responses to social need in children and families, including family support services, children in need

services, child protection, looked after children and adoption. It is the only centre of its kind in Wales and has strong links with policy and practice.

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EXECUTIVE SUMMARY

Introduction

The 2020 Covid-19 pandemic created unprecedented challenges for child and family social workers in the UK, and for many of the families they work with. While the UK has for a long time been shielded from the effects of most large-scale natural disasters (and pandemics), those living in other parts of the world are not so fortunate. Social workers in these countries will therefore have valuable experience and knowledge that we in the UK might learn from.

Methodology

We used a rapid review approach to find relevant literature. In order that the report could be published within a short timeframe, we restricted our search to English-language articles published within the past ten years and accessible via Cardiff University library. Articles were screened for inclusion or exclusion by single researchers and were not analysed for quality of evidence or risk of bias. We included 10 studies in total.

Key findings

We found a limited amount of relevant literature that met our inclusion criteria. The majority of these studies relate to social work during and after a natural disaster. One considered social work and the H1N1 epidemic (commonly referred to as 'swine flu'). We identified three key themes:

- 1. Impact on children and families** – almost all children will have some awareness of the natural disaster, even if they are not directly affected, and many will experience anxiety, trauma and grief. Children may feel unsafe (or more unsafe than usual) and their normal routines will be disrupted. More families will need increased support.
- 2. Impact on practitioners** – many practitioners will also be affected by anxiety, trauma and grief, either because of the natural disaster itself or because of their work with others (e.g. secondary trauma). Practitioners are likely to be physically separated from their colleagues and normal sources of support, necessitating a greater reliance on self-care. Practitioners may feel unsure about how best to support those affected and will not necessarily have attended specific training about natural disasters or pandemics. There may be additional opportunities for practitioners to develop and demonstrate empathy with people who use services, based on their shared experiences of the disaster.
- 3. Impact on ways of working** – Social workers may find it helpful to adopt a model of crisis intervention, at least in the short-term. Crisis intervention is a model of working that sees a crisis as often also being an opportunity for change. The model provides guidance on how help can be structured to enable short and longer-term change. Social workers will play an important role in helping to coordinate the work of other agencies and helping to ensure where possible that responses are focused at the community-level.



BACKGROUND

The 2020 Covid-19 pandemic and associated 'lockdown' of social and economic activity in the UK has created unprecedented challenges for child and family social workers – and for the families they work with. One key challenge is how social workers can support families most effectively, when workers and social work organisations themselves are also affected by the pandemic and when vulnerable families are under even more stress and strain than usual. From bushfires in Australia, to earthquakes in China, and floods in Canada, social workers in many countries around the world have experience and expertise that UK social workers might learn from. The aim of this review has been to identify lessons from the existing literature on 'disaster social work' and consider how these might be applied to child and family social work in this country.

certainly increased the frequency and intensity of hurricanes (Holland and Bruyère 2014) and the human toll of an earthquake may be worsened due to poor living conditions such as overcrowding and poorly constructed buildings (Lewis 2003). Thus, the dividing line between natural disasters and pandemics, is not necessarily clear. These discussions are beyond the scope of this review, however there are clear parallels between the two in relation to practitioner and family experiences and service responses.

What is Disaster Social Work?

Disaster social work is the practice of social work before, during and after a natural disaster (Alston et al. 2016). The World Health Organization (WHO) defines a natural disaster as 'an act of nature of such magnitude as to create a catastrophic situation in which the day-to-day patterns of life are suddenly disrupted' (Assar 1971). This definition includes earthquakes, tsunamis, hurricanes, floods, wildfires and heat waves. Such events often have an immediate impact on human life, as well as longer term impacts on health, well-being and social and economic activity. Pandemics are not included in this definition, because they can only occur in the presence of human beings. Natural disasters can occur even in unpopulated areas of the planet. It is of course true that natural disasters are certainly *influenced* by human activity, and their consequences depend on human reactions to them. For example, climate change has almost



RAPID REVIEW

The following sections outline the research questions we have addressed and the methods we used to find and analyse relevant literature.

Research questions

The research questions for the review were broad, as our preliminary searches indicated that the extent of published literature in relation to social work during pandemics, and to a lesser extent, natural disasters, was relatively limited. As a result, we wanted to ensure that our research questions were broad enough to allow for an inclusive search strategy. The questions we addressed are as follows:

1. How is social work undertaken during or after a natural disaster different to 'practice as normal'?
2. How can social work undertaken during or after a natural disaster help support families and keep children safe?

Literature search

We undertook a search of the literature on 19th May, using two databases – ASSIA and Sociological Abstracts. (See Appendix 1 for more details of the search strategy).

After removing duplicates, titles and abstracts were reviewed by a single researcher. Studies that appeared to meet the eligibility criteria were obtained in full and reviewed again by a single researcher. The reference lists of these studies were examined for any additional references not identified via our initial search. Any studies identified via reference list searches were included for screening regardless of their publication date. In addition, a previously identified review paper was included due to being highly relevant and the reference list from this paper was examined in

the same way (Harms et al. 2020). Data extraction was completed by a single researcher, including items such as - the study author(s), publication date, aims of the study, methods, sample size, sample selection, approach to data analysis, main findings, and the authors' recommendations for practice or policy.

▪ Inclusion criteria

- English-language full-text publications, accessible via Cardiff University
- Journal articles published between 1st January 2010 and 12th May 2020
- Case studies, observational studies, trials, systematic or other types of reviews and meta-analyses
- Purpose of the article is to describe or provide evidence in relation to social work practice in the context of natural disasters or pandemics

▪ Exclusion criteria

- Articles focused on practice in non-community settings (e.g. in hospitals)
- Articles focused on end-of-life care
- Articles focused on populations other than children and families

▪ Outcomes of interest

- The impact of natural disasters and pandemics on children and families
- The impact of natural disasters and pandemics on social work practitioners and ways of working



Results

Figure 1 shows a flow diagram of the search results and how exclusion criteria were applied at the different stages. Table 1 shows an overview of the 10 studies included in the final review.

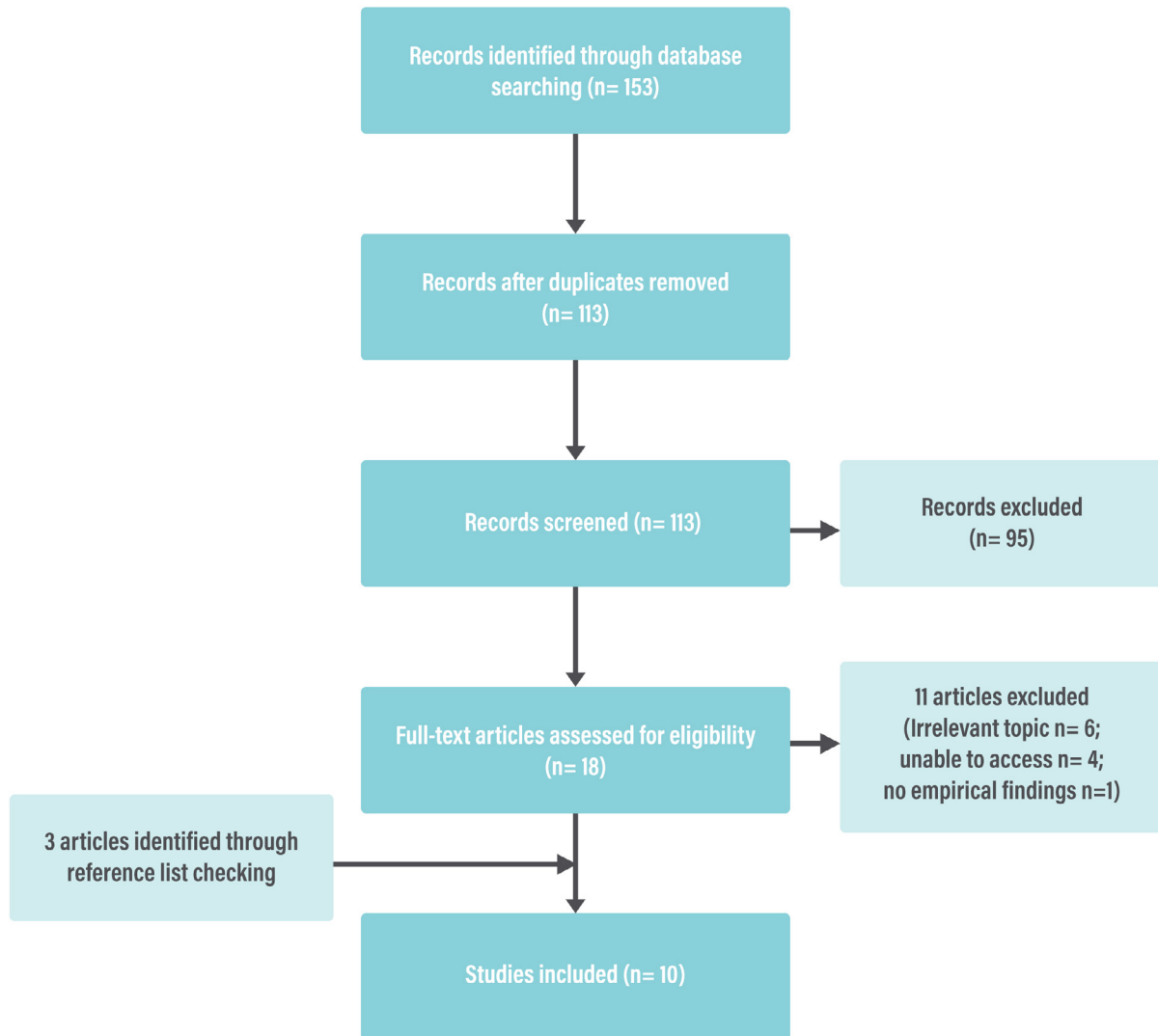


Figure 1: PRISMA flow diagram of the rapid review (Moher et al. 2009)



Table 1: Overview of the 10 studies included in the rapid review

Paper	Natural disaster and country setting	Focus	Methodology and methods	Sample	How is social work undertaken during or after a natural disaster different to 'practice as normal'?	How can social work undertaken during or after a natural disaster help support families and keep children safe?
(Drolet et al. 2013)	H1N1 (swine flu) in Canada	The effects of the H1N1 on social work student placements	Mixed methods, online survey	University social work programme coordinators (n=16)	There was little disruption in social work placements due to H1N1, however some placements required students to be vaccinated before attending and one placement was cancelled due to concerns about an outbreak of the virus in a women's shelter	
(Fulton and Drolet 2018)	Floods in Canada	The experiences of social workers supporting families after the floods	Qualitative, interviews	Social workers (n=37)		Post-disaster recovery support must to be responsive to the unique needs of children and young people, including factors such as age, gender, socioeconomic status and culture
(Harms et al. 2020)	Earthquakes, tsunamis, volcanic eruptions, landslides, hurricanes, floods and wildfires, international	The empirical evidence in relation to social work practice in the context of natural disasters	Qualitative, scoping review	38 articles	Practice is framed by models of crisis intervention; problems such as trauma, grief and chaos are much more prevalent; social workers may have less access to support, they may have to cope with the same natural disaster as the rest of the community and secondary trauma is more likely; coordination among services may be less than ideal	Disasters can reduce a child's sense of safety and intensify feelings of grief; children may experience loss of family members and friends, and be especially vulnerable to malnutrition, disease, injury, nightmares and harm from others



<p>(Hickson and Lehmann 2014)</p>	<p>Wildfires in Australia</p>	<p>Whether social work practice following wildfires is different from 'practice as normal'</p>	<p>Qualitative, online surveys and interviews</p>	<p>Social workers (n=22)</p>	<p>Higher levels of uncertainty and unfamiliarity, heightened demands for help, a higher likelihood of trauma and bereavement and a system operating in a more chaotic way than normal</p>	<p>In similar ways to 'practice as normal' – in Australia, this often involves travelling long distances, physical separation from the organisation and colleagues and hard to manage self-care</p>
<p>(Huang et al. 2014)</p>	<p>Earthquakes in China</p>	<p>The experiences of social workers supporting survivors of the Wenchuan Earthquake</p>	<p>Qualitative, interviews</p>	<p>Social workers (n=6)</p>	<p>A focus on disaster recovery; lack of government support; rapid changes; insufficient supervision and support; lack of cooperation and coordination between agencies; lack of experience and knowledge about disaster recovery</p>	
<p>(Kreuger and Stretch 2003)</p>	<p>Floods in the USA</p>	<p>What makes children more likely to experience symptoms of post-traumatic stress disorder (PTSD)</p>	<p>Quantitative, questionnaires and standardised measures of PTSD</p>	<p>Children and adolescents (n=3,876)</p>		<p>Workers need to understand the potential impact on children and actively assess for signs of trauma, anxiety and depression; when school attendance is disrupted, children may need additional support to manage; additional outreach work may be needed for families with greater levels of need</p>
<p>(Mason et al. 2017)</p>	<p>Global environmental changes including hurricanes and typhoons, international</p>	<p>The empirical evidence in relation to social work practice and global environment changes</p>	<p>Qualitative, scoping review</p>	<p>112 articles</p>		<p>Workers need to engage with communities and or use participatory approaches; service provision must be tailored for local social and cultural needs; workers need specific training to enhance their cultural competence and ability to work with trauma</p>



(Sim et al. 2013)	Earthquakes in China	The experiences of social workers supporting survivors of the earthquakes	Qualitative, surveys	Social workers (n=45)	A lack of clarity about the social work role; a lack of integration between theory and practice; rapidly changing needs and demands on services	
(Tudor et al. 2015)	Earthquakes in New Zealand	The role of community activities in post-disaster recovery	Qualitative; interviews and focus groups	Community members (n=32)	A greater focus on community-level interventions, and less on individuals	
(Wang and Lum 2013)	Earthquakes in China	Different social work roles in disaster interventions	Qualitative; interviews and focus groups	Not reported		Survivor wellbeing can be enhanced using new support systems including advocacy and coordination; workers can help enable collaboration between different professions and organisations; workers can develop shared empathy with survivors when they are also affected by the disaster



DISCUSSION

Most of the studies included in this review have focused on social work during and after natural disasters, rather than pandemics. Nevertheless, there are some key themes that we have identified in relation to the possible impact of natural disasters on children and families, on practitioners and on different ways of working. We discuss each of these key themes in turn below.

The methodologies used in the studies were primarily qualitative (n=8), with one quantitative study and one that used mixed methods. The most common methods were interviews and surveys or questionnaires. Two of the qualitative studies were scoping reviews of existing literature. All of the studies were based in North American or in the Asia-Pacific region. The types of natural disasters considered included earthquakes, floods, flu, hurricanes and wildfires. The focus of the majority of the studies was on the experiences of social workers and how they adapted their practice and what roles they fulfilled when responding to natural disasters. One study considered the effect of flooding on children. However, for the most part, the experience of and effect on families is not the focus of these studies.

The impact on children and families

Seven of the studies identified how natural disasters can impact directly on children and families, both during and afterwards. Most severely, children who live through natural disasters are more likely to experience the death and loss of family members and friends than in more normal times. Even if they are not directly affected by death and loss themselves, many children will nevertheless be aware that more people than usual are dying and suffering as a result of the natural disaster, whether through media reports or simply via their conversations

with others. Experiences of grief and trauma among those affected directly will be more prevalent, but the same may also be true for those indirectly affected too.

In addition, as the natural disaster impacts on regular ways of gaining support and help, so more families will need additional support. Family members may be physically separated from one another, and hence unable to help one another as normal. Social and community groups, both informal and formal, may be unable either to cope with rising levels of demand or unable to function at all because of the natural disaster. Children may feel less safe than usual, particularly when their normal routines are disrupted, for example if schools are closed or their parents are unable to work. Children may experience increased feelings of fear and anxiety and be more likely to experience frequent or troubling nightmares.

Family members of any age may be more vulnerable to harm, including harm caused by other people. Individual levels of vulnerability will depend in part on any existing medical or mental health problems and their social and economic circumstances. Although child and family social workers will understandably be concerned about child safety during and after the natural disaster, there will also be many other people from different age groups who may also be additionally vulnerable and at greater risk of harm.

The impact on practitioners

Practitioners are also likely to be affected by the impact of natural disasters in a variety of ways, some of which are similar to those which may be anticipated for children and families. The nature of these impacts can be organised into three sub-themes – support, uncertainty and shared experiences with people who use services.



Five of the studies highlighted the issue of *support for practitioners*, both in relation to an increased need for it and a greater difficulty in accessing it. Because of the natural disaster, practitioners are more likely to need support in their work and with their emotional and social well-being. From working with people who use services, and seeing how they are affected by trauma, grief and loss, practitioners will themselves be at greater risk of secondary trauma. Yet just when more support is needed, so it may be more difficult to organise. Practitioners are likely to be physically separated from their usual places of work, and from their managers, supervisors and colleagues. There will be a greater reliance on self-care, as opposed to care provided by others. During an epidemic or pandemic, some practitioners may need additional medical care themselves, because of their own pre-existing medical problems or to enable them to work with especially vulnerable groups of people (for example, they may need to be vaccinated against the disease).

Three of the studies identified how practitioners during and after the natural disaster may feel a *lack of certainty* about what they can do to help. Practitioners may not know what to do for the best, they may not have been expecting or planning for the natural disaster and their training to date may not have prepared them adequately for it.

Finally, for this theme, four of the studies consider how natural disasters may *create opportunities for shared experiences* between practitioners and people who use services. For example, practitioners themselves may have lived through the natural disaster or be living through the aftermath. They may encounter some of the same problems as people who use services in relation to community-level disruptions and personal loss and grief. This may include intensified feelings of grief, anxiety and depression. While such feelings can be problematic, especially when adequate support may not be immediately accessible, they may also help practitioners and people who use services to experience a sense of shared empathy.

The impact on ways of working

From the literature, we also identified how natural disasters may impact on professionals' ways of working. The nature of these impacts can be organised into three sub-themes – theory and practice, a focus on community and the role of the social worker.

Three of the studies referred to links between social work *theory and practice* in the context of natural disasters. It was suggested that there is a lack of integration between the two. This issue is routinely identified by practitioners in relation to 'practice as normal' (Stepney and Thompson 2020) but was highlighted as a particular problem in relation to social work practice during and after a natural disaster. Social workers with experience of working during and after natural disasters indicated that even the social work theories and models they found helpful at other times were less helpful when considering how best to support families during such events. Having said this, one particular theoretical model was identified as being more helpful than most - that of crisis intervention. Crisis intervention aims to ensure that practice is focused on support during times of acute difficulty (Faubert 2019). The model assumes that more typical coping strategies and support mechanisms have been disrupted or are no longer effective, if only temporarily. Using a model of crisis intervention, the worker would seek to make plans in relation to any imminent danger, to rapidly establish a collaborative relationship, to identify major problems, explore emotional responses and the possibility of alternative coping mechanisms. Crisis intervention theory also invites us to consider how the crisis itself may also be an opportunity for change both in the short and longer-term.

Four of the studies identified the need for social work responses to *focus on community*. The rationale for this is that because natural disasters are community-level events, it therefore makes little sense for service responses to be organised solely around the needs of individuals. A focus on community might involve coordinating services (see below) and advocacy work. One paper



recommended that social workers would benefit from specific training on community-based work and in particular the question of being culturally competent.

Finally, four of the studies consider the *role of the social worker* and how they might best utilise their skills and time. The key suggestion was that social workers could help effectively by coordinating the work of other agencies. These same studies noted that during and after the natural disaster, it is only to be expected that service coordination will suffer. Therefore, while in times of 'practice as normal' the social work role in relation to service coordination might be relatively minor, during and after the natural disaster it should become a major focus.

Implications for social work practice in England

What might these findings mean for England in relation to the Covid-19 pandemic? There is already emerging evidence of how social workers and services are responding to the changed landscape of practice and the changing needs of families. In this section, we consider the three key themes we identified from the literature in relation to some examples from this emerging evidence.

We know already that the impact on children and families has been significant, for many, and unequal. Black and minority ethnic groups have been affected more seriously than others, with higher proportions of people contracting the virus and dying as a result (Kirby 2020). The longer-term effects of the pandemic, in relation to educational attainment and mental health problems, are also likely to be felt unequally (Major and Machin 2020). Rates of domestic violence have also increased during the lockdown and children and their parents and other family members will have suffered as a result (Bradbury-Jones and Isham 2020).

Even when they have not been directly affected by it, we can anticipate that most children will be aware of the pandemic. Some children will experience the loss of a family member or see

that a family member has been seriously unwell. Many more children will experience disruption to their normal routines, for example being unable to visit grandparents and other family members. Children may be more anxious than normal and be feeling both the educational and social effects of missing out on a full-time education. Transitioning back into something like normal life will not necessarily be easy for children and their families, although for many it will be a relief. Social workers will need to be mindful, as they are no doubt already, of the likelihood that situations of abuse may have been worsened because of the pandemic (Romanou and Belton, 2020). Many parents and carers will be exhausted from meeting their additional caring responsibilities, particularly when children have been out of school for so long. Others will have lost their jobs or otherwise been impacted financially, making what may have been a difficult situation at the best of times even more precarious now.

The impact on practitioners has also been significant. Workers and managers alike have had to adapt rapidly to remote working, being physically separated from colleagues and their usual sources of support, as well as from many families. Somewhat fortuitously, we undertook a survey of work-related stress and support in four local authorities in England just before the onset of the lockdown. We intend to repeat the survey in the autumn and provide a before-and-after snapshot of how the pandemic may have impacted upon working conditions and levels of stress. Not all practitioners have the means to work from home efficiently – and not all families have access to communications technology either. While some local authorities have been able to provide workers and families alike with tablets, laptops and mobile phones, there has been no uniform approach.

Despite the challenges outlined above, the pandemic also offers an opportunity to think again about approaches to practice and to explore with families how they have managed without the close support offered by schools, social workers and other professionals ([Featherstone and Bowyer, 2020](#)). As the theory of crisis intervention



suggests, a crisis may be far from desirable yet still offer an opportunity for long-lasting change. Similarly, for practitioners themselves, taking time to reflect on the experience of working during the pandemic would be a valuable exercise. While having to work remotely, and also managing caring responsibilities and other challenges brought on by the pandemic, it may also serve to promote greater autonomy and more creative ways of providing support. A number of social workers have found that keeping in touch with teenagers has been easier by the use of communication technologies. Some young people have taken a much more active role in formal meetings held remotely than they would have done for meetings held face-to-face. Such meetings may also be shorter and involve fewer people. Workers have also found creative ways of engaging with younger children, for example by organising treasure hunts via video calls (Turner, 2020). Despite the evident success of these different approaches, it is also worth noting that they will not work for everyone and for some children and families, if not all, personal contact is both necessary and desirable (Ferguson et al. 2020).

Limitations

The primary limitation is that we conducted a rapid rather than a systematic search of the literature. This increases the likelihood that we did not locate every relevant study. We restricted our search to English-language articles published in the past decade and accessible via Cardiff University library. We also searched in only two databases and did not evaluate the studies for quality of evidence or risk of bias. In addition, all but one of the papers refer not to social work during or after a pandemic but during and after a natural disaster. Screening of the studies we did locate was generally completed by a researcher working individually, rather than by a team of researchers working together. This increases the likelihood that screening decisions were subject to individual-level bias.



CONCLUSIONS

There is a limited formal evidence-base for leaders in social work to draw upon when considering how best to support families and protect children during the Covid-19 pandemic. From the international literature, it is clear that social work practice during and after natural disasters can be exceptionally challenging. These challenges can be considered in three main themes as identified previously. Firstly, there is an impact on children and families, with children either being affected directly or indirectly, and families requiring more support. Secondly, there is an impact on practitioners in numerous ways, including increased anxiety, physical separation from colleagues, and some uncertainty of how best to support families in this new situation. Finally, there is also an impact on the ways of working for social workers, which can include adopting a crisis intervention approach and social workers also playing an important coordination role for other agencies.

The key lessons from the studies included in this review can be summarised as follows. First, practitioners need to be especially sensitive to the presence of trauma and grief, and to the experiences of children during the pandemic, which may have led to them feeling less safe (even where they have not been directly affected by Covid-19). Second, organisations should continue to support their staff through challenging times, particularly when the lockdown has necessitated working in physically distanced ways. Practitioners can be affected by secondary trauma from their work with families, and directly by the pandemic itself. Such a combination will for many workers increase their stress and lower their coping capacity, at least in the short-term. Organisations will need to ensure that support mechanisms are in place that take account of these difficulties and that expectations for workers are reasonable. Finally, and perhaps

most importantly, pandemics and other natural disasters offer a very suitable opportunity to implement crisis intervention modes of working. This means, of course, responding to the needs of families that result from the pandemic, but it also means not losing the opportunity to reconsider established ways of working. Returning to 'practice as normal' after the pandemic may be desirable in many cases. It would certainly have the advantage of feeling comfortable. Yet to do so would also represent a missed opportunity. Some different ways of working developed due to the pandemic may be advantageous in normal circumstances too. Thus, the pandemic offers a rare chance to change practice for the better in ways that would previously have seemed unthinkable.

In many parts of the world, natural disasters cause widespread loss of life, homes and livelihoods. The pandemic in the UK is both similar and different. Many people in the UK have lost their lives. Still more have suffered as a result of missing out on school, losing their jobs and because of heightened feelings of stress, anxiety and depression. Social workers have been prevented by the lockdown from supporting many families in ways they are accustomed to, most notably by visiting them at home. As one could have predicted, practitioners and managers have responded creatively and with dedication to find other ways of supporting families (Ferguson et al. 2020). Many of those families have no doubt also taken care of themselves and one another, without the need for professional input or oversight. Thus, the pandemic has represented a huge challenge for social workers, but also an opportunity to stop, reflect and, quite possibly, to do things differently in future.



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APPENDIX

Search strategies

Two searches were run in the databases. The following key terms were used:

- (“social work” OR “social worker” OR “social workers”) AND (“natural disaster” OR earthquake OR tsunami OR volcano* OR landslide OR hurricane OR flood* OR wildfire)
- (“social work” OR “social worker” OR “social workers”) AND (pandemic OR epidemic)

The results were limited to scholarly journal articles available in English language and published between 1st January 2010 and 12th May 2020.

ASSIA (Applied Social Sciences Index and Abstracts) contains records from over 500 journals across 19 different countries. It seeks to provide comprehensive coverage of disciplines including health, social sciences, psychology, sociology, politics, race relations and education.

Sociological Abstracts provides access to the international literature of sociology, including areas such as social work, social policy, and human services.



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