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Virtual Social Work with Families during Pandemic: A Classical Approach with a Modern Technique

Pandemi Sürecinde Ailelerle Sanal Sosyal Çalışma: Çağdaş Bir Teknik ile Klasik Bir Yaklaşım Özge ÖZGÜR^{1,*}.

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ÖZ

Ansızın başlayan, kısa sürede yayılan ve yakın gelecekte bitmesi beklenmeyen korona salgını, çoğumuzu evlerimizde ve iç dünyalarımızda içsel bir sorgulama süreciyle baş başa bıraktı. Medya yoluyla paylaşılan yeni habeler toplumdaki panik duygusunu artırdı. Şüphesiz ki Covid-19 insanlığı tehdit eden ilk virüs değil ve sonuncu da olmayacak. Sosyal mesafe önlemleri gereği ailelerle sosyal çalışma uygulaması da hızlı bir değişim geçirdi. Bu makalede sanal sosyal çalışmanın yeni sürece uyumu tartışılmakta ve Satir modelinin, güçlü varoluşsal yaklaşımının ve ailelerle çalışmanın deneyimsel/hümanist geleneğinin pandemi sürecinde destekleyici olduğu savunulmaktadır. Pandemi süreci süreci yüz yüze iletişimi sınırladığından modelin uygulanmasında farklılıklara ve adaptasyona ihtiyaç duyulmaktadır. Sanal profesyonel mülakatlar şüphesiz çoğumuz için yeni bir teknik olsa da yaklaşımımız ve hedeflerimiz hiç değişmedi. Bu çalışmada pandeminin yarattığı sanal sosyal çalışma ikliminde satir modelinin güçlü yönleri ve uygulamaya aktarım boyutu ele alınmıştır.

ABSTRACT

The corona pandemic, which started suddenly, spread in a short time and is not predicted to end in the near future, left most of us with an act of reflection in our homes and inner worlds. As the media continued to report on news the sense of panic in society increased. This is not the first virus to threaten humanity, and it will not be the last. As the social distancing measures, social workers needed to move quickly to reconfigure the support provided to families. The Satir model is situated within the experiential/humanistic tradition of working with families with a strong existential flavor and thought to be supportive in pandemic. Since the pandemic process limits the face-to-face consultation activities, there is a need for differences and adaptation in the implementation of the model. Although the virtual professional interviews are undoubtedly a new technique for most of us our approach and aims didn't change.

1.Introduction

The COVID-19 (Coronavirus) pandemic, which started suddenly, spread in a short time and predicted not to end in the near future, left most of us with an act of reflection in our homes and inner worlds. Nowadays when we are questioning our lives and our life purpose, as a social work academic, I wanted to reflect on the mission of social work as a discipline and profession that touches people. In fact, this pandemic gave me the opportunity to ask again the same question that I had postponed for a while: Wasn't the main reason and purpose of all this scientific effort to be more human? Does our scientific work make all of us more human?

While we were sniffing, wandering and exploring different flowers in our own knowledge gardens, had we denied the fact that those flowers could not bloom again without sun, food and water? Did we realize this fact only when we encountered flowers that were fading and would not bloom again? My effort in this work was to remember the main thing: the human. So I felt the need to go back on a theoretical basis. I was inspired by the period when humanistic approaches started to emerge and the masters of that period.

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In this historical transformation, which may be referred to as a turning point in the future, most of us experienced the consequences of being at home, maintaining our connection with the social world only with technology, doing business from home, fear of illness and death, anxiety for the future, and spending much more time with the family than before. In this study, I wanted to discuss the family which is an institution that we have transformed, the potential of the family, and working effectively with families in this process with Satir's approach.

2.Pandemic: As a Social Destruction and Regeneration

A pandemic is defined as "an epidemic occurring worldwide, or over a very wide area, crossing international boundaries and usually affecting a large number of people" (Last, 2001). So, an epidemic which becomes very widespread and affects a whole region or the world and causes a high degree of mortality.

On March 11, 2020 the World Health Organization (WHO) officially declared the outbreak of the coronavirus or COVID-19 as a pandemic. As the media continued to report on the spread of COVID-19 and the death statistics, the sense of panic in society increased and governments tightened their measures and still many of us are under stay-at-home orders. COVID-19 is not the first virus to threaten humanity, and it will not be the last.

Strategies such as restriction of movement, closing of many businesses and schools, social isolation / quarantine, moving work into the home were applied to control the epidemic. While these measures are extremely important in preventing the spread of coronavirus infection, this long-term house arrest affects people's social and mental health (Brooks et al, 2020). Thus, social and psychological destructions started while trying to prevent biological cell destruction.

With rapid changes in safety guidelines it's challenging for many to manage their health and mental well-being when faced with so many unknowns and socioeconomically challenges. But early detection, early quarantine and social distancing are seen as the most effective measures against COVID-19 and some countries replaced their home quarantine policy with quarantine centers which ensured pandemic prevention and control. Some countries, like New Zeland or South Korea, have been more successful in combating the pandemic by taking early and strict measures.

Thus, the pandemic has not only threaten and affect the physical health of many and resulting in numerous deaths, but also other aspects of human coexistence came under pressure, such as economic activities, psychological and social well-being, education, human rights and democratic decision-making, international relations and social and global solidarity and familial relationships. Furthermore, some groups are at additional risk, not only those who are physical vulnerable, but also those with weak mental health, weak economic and social condition or a weak social network.

To limit the viral transmission of Covid-19 infection, many countries have expanded their local quarantine policies to order a national quarantine so that strategies such as restricting movement, closing businesses and schools, implementing social isolation / quarantine, moving work and education inside the home were implemented to control the outbreak. COVID-19 came unanticipated, without planning and unimagined by all and the children are of course the most confused population for they hardly understood the situation. Children were required to be home schooled by parents. And the parents suddenly unemployed or working from home or working in a very risky work environments for coronavirus. Parents who are working cannot hug their children and spouses due to the fear of transmitting the disease. This also affects the emotional climate of the family. Whereas the quarantine and social isolation are seen the best way to limit the spread, they also force family members into a long-term relationship, which can also damage the emotional climate.

For parents, the boundaries between work and home were broken, the relationship with the child and management changed with the closure of the school and it became necessary to rearrange it (Connell and Strambler, 2020). Moreover, adults who continue to work at home try to maintain balance between work and family, as well as devote time to family members. This increased load can disrupt relationships and cause psychological problems. Factors such as living together more family members, restriction of outdoor activity, nutrition, sleep, deterioration of living habits, decrease in interpersonal relationships, presence of negative news about the epidemic, lack of information, catching an epidemic or losing a relative, etc. may hinder (Connell and Strambler, 2020).

It has been reported that violence and vulnerability increased during the epidemic period and the economic impact of the crisis increases parental stress, abuse and violence against children (Cluver et al., 2020). As a result of the Covid-19 response, domestic abuse escalates as stress factors (parenting or work-related stress, economic uncertainty or food insecurity, inadequacy) increase. In addition, families may not be able to cope with the social and economic impacts of the crisis, with public health measures in place for a long time (Usher et al., 2020). As a result, with the social isolation measures and quarantine practices, domestic violence has increased. The World Health Organization has published a report that draws attention to this situation and includes recommendations (WHO, 2020).

On the other hand, there is also an existential side of the pandemic that must be considered intellectually and philosophically. As Camus told us in his novel "plague" that in a world without meaning the plague provides a moral opportunity for people to find themselves in the struggle of sacrifice to work for the greater good: "What's true of all the evils in the world is true of plague as well. It helps men to rise above themselves" (Peters, 2020:1). So the Covid-19 pandemic may lead many people to experience existential crises within the existential possibilities, on the other hand, it also provides them the opportunity to give a meaning and to add value to their lives, and to have responsibility and awareness (Çelebi and İnal, 2020: 297).

It is also possible to evaluate this existential effect created by the pandemic in terms of the social work profession. The pandemic undermined the social work's historical value commitment to social justice and human rights while overturning our insistence on the importance of human relationships. Walter-McCabe (2020) argues that, pandemic leads us to our role as social workers. We are needed and called by our Code of Ethics to practice our social work values: Service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence. As the population is increasingly isolated from social distancing, stay at home precautions/orders, isolation, and quarantine, the anxiety and depression are increasing. Furthermore, in addition to working at the interpersonal levels, there is a need for increased macro level social work.

Social work and social workers have long been concerned with families. Most approaches to social work with families have focused on individual pathology and problem solving or have considered problems of a family member. And the other approaches have focused on growth, function, and healing.

The Satir model is situated within the experiential/humanistic tradition of working with families with a strong existential flavor. Virginia Satir added more of a spiritual component which is now an important aspect of the therapist's growth and part of the therapeutic process. The main focus is on change towards greater wholeness, more harmony, greater responsibility and, ultimately, a fuller life (Banmen, 2002:22).

The Satir model of human communication and growth continues to be a major alternative for the present and the new situation after pandemic. The model can be used with the new insights and awareness that the coronavirus pandemic brought into our lives.

3. Social Work with Families during Pandemic: From Real to Virtual

The speed of transmission and spread of COVID-19 and the social distance measures have also confronted the social work profession, which practices face-to-face by its nature, with an ethical confrontation. Six key themes relating to social workers' ethical challenges and responses were identified by IFSW (2020):

- 1. Creating and maintaining trusting, honest and empathic relationships via phone or internet with due regard to privacy and confidentiality, or in person with protective equipment.
- 2. Prioritizing service user needs and demands, which are greater and different due to the pandemic, when resources are stretched or unavailable and full assessments often impossible.
- 3. Balancing service user rights, needs and risks against personal risk to social workers and others, in order to provide services as well as possible.
- 4. Deciding whether to follow national and organizational policies, procedures or guidance (existing or new) or to use professional discretion in circumstances where the policies seem inappropriate, confused or lacking.
- 5. Acknowledging and handling emotions, fatigue and the need for self-care, when working in unsafe and stressful circumstances.
- 6. Using the lessons learned from working during the pandemic to rethink social work in the future.

As the social distancing measures, social workers needed to move quickly to reconfigure the support provided to children, young people, families and carers. Social workers need to utilize effective strategies to strengthen families to respond, care, and protect a future for the world's children (Clark et al., 2020).

The relation of social work with technology and the issue that technology can replace face-to-face interview technique is not a new debate. There have been some researchers who supports the inclusion of technology in social work practice. Mattison (2012) emphasized the consumer demand for online clinical services has been growing faster than the professional response and the "e-mail" when used as an adjunct to traditional meetings with clients, offers distinct advantages and also risks. For some, there remains considerable debate regarding whether technology should be implemented as a supplement to or substitute for traditional face-to-face approaches (Barak and Grohol, 2011; Wodarski and Frimpong, 2013). The discussion on the use of technology in clinical applications continues over the "e-therapy" concept. E-therapy is a term that has been coined to describe the process of interacting with a therapist online in ongoing conversations over time when the client and counselor are in separate or remote locations and utilize electronic means to communicate with each other (Manhal-Baugus, 2001). E-therapy allows simultaneous (synchronous) and time-delayed (asynchronous) communication between the individual and the professional. Also some writers (Castelnuovo et.al., 2003) argued that computer-mediated communication provides new tools that can be fruitfully applied in psychotherapy and these new technologies do not substitute for traditional techniques and approaches but they could be used as integration in the clinical process for enhancing it. So, with e-therapy, as a new modality of helping people, we can resolve life and relationship issues by synchronous and asynchronous communication between patient and therapist. For them, etherapy is not an alternative treatment, but a resource that can be added to traditional psychotherapy (Castelnuovo et.al, 2004). But undoubtedly, it was not expected that the pandemic would emerge at such a rapid pace and would necessarily lead social workers to virtual practice, whether they were voluntary or not.

According to Reamer (2020), some social workers embrace opportunities to deliver virtual social work and some of them converted all or segments of their practice to online and digital delivery before the pandemic. Many social workers believe that distance counseling services offer a number of compelling advantages especially for the clients who have limited mobility. Bordnick (q.t.in Getz, 2018: 6) argues that we can use the environment to bring the real world, or a realistic representation of the real world, to a safe clinical setting in order to work on coping skills to prevent relapse. So that allows us to assess relapse triggers and teach better refusal skills and they will be more empowered to use those skills when confronted in real life. And he also adds that the technology can be leveraged for multiple uses and presents many exciting opportunities.

Cook and Zschomler (2020) investigated how social workers have responded to the challenges of social distancing in their work with families. They argued that:

- 1. Children and families must be consulted about the recent changes to social work practice.
- 2. There should be virtual working efforts for unexpected benefits for social work with children and families, particularly for engaging with young people.
- 3. Virtual engagement has limitations, particularly for child protection and assessment work.
- 4. Virtual home visits create additional risks for professional judgement particularly around identifying hidden risks.
- 5. Professionals must proactively address barriers to digital inclusion to ensure families have a voice within virtual meetings and reviews.
- 6. Remote working has significant impacts on child and family social workers these must be addressed to ensure worker wellbeing and retention.

All of these issues required social work to rethink and reexamine classical and contemporary approaches in working with families. Thus, social work is faced with the task of adapting the approaches and techniques of working with families to this sudden and complex situation.

In this process, social workers continued to support the family and family members by using telephone and/or virtual tools. They have been using Microsoft Teams for meetings and reviews and some of them have used Zoom, WhatsApp and FaceTime and other virtual tools available.

Cook and Zschomler (2020:4) described some benefits and risks of virtual meetings for family participation in meetings and reviews. As a benefit families participating from their home often felt more relaxed and confident to contribute than when sitting with other professionals in a formal setting and virtual meetings could offer greater autonomy for some family members. Also, there was dramatically improved participation for young people in meetings and reviews. Virtual meetings also allowed for staged participation where young children and less confident young people could 'listen in' to the meeting via a parent or carer's device and join later if/when they felt comfortable.

There are also risks of virtual meetings when working with families. Socioeconomic status and living in an area of deprivation are risk factors for digital exclusion. Also, most families had not become familiar with Microsoft Teams, preferring FaceTime, WhatsApp or Zoom which placed them at a disadvantage. And there is a confusion about which platforms could be safely used for confidential meetings (Cook and Zschomler, 2020: 4).

Virtual interviews are undoubtedly a new technique for all of us. Although we use it frequently in social life, our use as a professional technique is quite new. Although the technique is new, our

approach has not changed. This spatial and physical distance does not prevent people from touching their hearts and souls, activating their desire for change, and supporting them in their transformation process. I think one of the approaches that will best aid this transformation with technical distance is Virgina Satir's approach. I think that this approach, which focuses on internal development and the transformational change of family members and the whole family is one of the most effective approaches in reaching the family in this unexpected process and not leaving them alone in dealing with the new situation that the pandemic has created.

4. Reconsidering Satir's Approach with Virtual Social Work

The necessity of increasing the time spent by family members together and transferring all the positive and negative energy into the family do not only have negative consequences. In addition, there is the potential to develop positive emotions and behaviors, such as reorganizing parenting, seeking ways to make the time spent quality less confrontational, and providing social support that reduces current disease anxiety. Social workers can adapt old techniques to new virtual settings in order to support families and family members.

In order to understand the family during the pandemic process, it is useful to reconsider the meaning of the family and its transformation. There is no strict consensus among social scientists as to what constitutes a family. Demographers, sociologists, policy planners, and decision makers have varying perspectives on definitions of family based on what is identified as key components of a family like family functioning, child rearing or family relationships (Emlen, 1995). Families are defined through a range of terms for various reasons, including providing information for government and regulatory agencies, social service programs and community organizations, researchers and academics, and families themselves. A general systems theory's definition of family is evident in western society and is used by demographers and for purposes related to national statistics. Terms such as "economic family" or "family group" extend the definition to include extended family members living at the same dwelling so the boundary of the household unit defines what is considered 'family'. Besides of residential location, clear boundaries of a family unit may also be defined by biological or legal relationships (Tam et al., 2017). Under the current circumstances, it would not be wrong to call each unit as a "family" that lives in the same house and/or names itself as a family with any ties. Although definitions change, the social, emotional, economic and cultural impact of the family on the individual remain their importance.

Undoubtedly, industrialization and technology brought the result of the family sharing its influence and functionality with other systems and institutions. After the industrialization and new marketplace during the last few decades working life has totally changed. While manual labor is diminishing the mentally strenuous work increasing. The working hours have become more flexible and people have to do overtime without extra payment. So that the home is becoming a site of evening and weekend work. These changes also have effects on the family life (Turtiainen et.al., 2007: 477). There are sociological discussions on this great change. Some writers suggest that changes in working life and harder competition in the labour market have affected family life. For example people have less free time to spend with their family, family members do not eat together anymore and the economies of families with children are becoming more challenging. I is also suggested that the overall societal place of the family has changed so that traditional family values and the family itself have eroded (Aapola et al. 2005. Otd in: Turtiainen et.al., 2007: 478). This is accompanied by new family forms and competing views of parenting, which have led to a situation in which the concept of the family itself has become more contested. And also, postmodern theorists have emphasized individualization, choice and voluntarism. In this way, the relationship with and authority of parents is under negotiation (Giddens, 1991. Qtd in: Turtiainen et.al., 2007: 478). With coronavirus pandemic it is apparent that family has been more influential in our individual lives and family issues have become more

visible more than ever before. The family re-established a central position in human and social life. Although not as much as before the industrialization, the place of the family began to strengthen again. After the COVID-19 measures, the family took over the duties of other institutions partially and/or temporarily (at least for now) with its pros and cons.

As domestic problems surfaced and the need for support increased during the pandemic period, social distance rules led to a limited demand and provision of this support. Especially during the home quarantine and curfews, families searched for a new balance in the home. We were able to learn very little about what was going on during this period. However, we know that negative responses such as domestic violence are used as well as positive ways to balance the family system.

The fact that the pandemic process caused more time to spend with home and family, in a way, brought about the search for a positive balance. Satir's family approach offers an effective and meaningful framework in revealing the positive potential of the family and ensuring both individual and familial integrity. In Satir's model, human growth is natural and moves in a positive direction and the deeper understanding of connecting with self and personal growth are learned and practiced in the family. Banmen (1986: 480) explains Virgina Satir's theory as her starting point of her theory base is the moment of union that consists of one egg and one sperm. This begins with a dynamic balance of constancy and change. First, the two cells are unite and then they divide. They divide again and again creating change toward a system of millions of cells and each cell carries its own constancy, its genetic endowment, and guides to its own optimal function within that system. With the birth process change continues and the baby experiences growth and through growth change becomes reality by entering a world of new systems. For Satir (Satir et al., 1991) the family system is the first and most influential one among these systems. The person is a multidimensional system, which she depicted in the Iceberg metaphor and the Mandala with its eight interactive components of the Self.

The Satir's model embraces four universal meta-goals which are thought to be helpful and supportive in the virtual meetings to be held during the pandemic process in order to cope with family issues. These are (Banmen, 2002:11); raising self-esteem, helping clients to be their own choice makers, becoming responsible and becoming congruent.

These meta-goals continue to be valid and effective in understanding the psychosocial impact of the pandemic by both the individual and the family and in the empowerment of the individual / family in the interviews conducted by social workers. Thus this meta-goals will help the families to reveal the feelings and fear about the pandemic process and their future.

Satir developed a transformational process model in which the therapist and the family join forces to promote wellness among the family members. The center of the model process consists of all those interactions and transactions, translated into methods and procedures, which help the individuals in the family, and the family system itself, move from a symptomatic base to wellness. This process, called family reconstruction which is looking for ways to "externalize internal processes" (Satir et al., 1991).

The family reconstruction process helps the body and mind move beyond stress, survival, and coping to a more positive way of expressing and experiencing life. It is a way of looking difficult situations with new glasses. For family members it creates a way to own their wholeness so people have a chance to see themselves and family members in a way that exposes their beliefs, ignorance, unawareness, and misunderstandings (Satir et al., 1991). This transformation model offers a valid and functional perspective in understanding the anxiety and pressure that the pandemic creates on both the individual and the family, family members gain their own inner awareness, and the family regain functionality as a unit that produces life energy, not a consumer.

Since the pandemic process limits the face-to-face consultation activities, there is a need for differences and adaptation in the implementation of the model. Banmen (2002: 19-22) outlines the general aspects of Satir model therapeutic session. The table below shows how the social worker's professional practices and skills may differ in real settings and virtual settings:

Table 1: Practicing Satir's Model in Real and Virtual Sessions

• In real sessions	• In virtual sessions
The therapist prepares himself or herself both internally and externally. That includes centering oneself, focusing one's energy on the client, becoming prepared to receiving and accepting the client.	 These aspects are the same for virtual settings.
As the client enters the office, the therapist makes contact with the client. At first, a few social interactions might help. Contact is very important in the Satir model for assessing the clients' coping stances during this time	• Contact can be ensured by eye- contact and with other verbal and nonverbal communication. So, asking to use the camera might help them to ensure eye-contact. But it also may bring challenging privacy and confidentiality issues such as having another person in the room. The social worker cannot see the person if he/she is outside the camera range. Or the clients may experience discomfort and insecurity and worry about recording their video images. So there should be a contract and informed consent as well as physical arrangements in order to maintain security and comfort.
• After the contact the therapist is ready to listen to the problem. "What brings you here today? What would you like to look at today? What are we going to work on today?" might be questions that will begin the clients' sharing of their problems. This is to keep the story short and use it as part of the context within which to do therapy.	Using technology effectively and learning the virtual communication are important in engagement. Avoiding disruptions and adapting changes are also important especially at the beginning.
Once there is a general sense of what is happening to the client or clients, the therapist starts the process of helping the client formulate the	Avoiding interferences and protecting privacy may be difficult. Making arrangements before the meetings and being realistic about the home

problem into some positively circumstances are important. The directional goals for each part of the social worker should be adaptable to internal process: goals for feeling, these changes and should ask the goals for perception, goals for questions by considering these issues. expectations, goals for yearnings, and, finally, goals for behavior. Goal setting is a joint effort between These aspect is the same for virtual therapist and client, but it includes settings. goals for the whole person, not just behavior or cognition. Sometimes, clients are out of touch The effort of the clients to experience with their inner self, or are confused, themselves and to increase their depressed, or extremely angry. What awareness of themselves may take is needed then is some effort by time in virtual settings. But also the therapist and client to explore the client may feel more comfortable by, internal functions of the client. for example, closing the camera and only talking about himself/herself. Also the technology may allow the clients to use other sources about themselves. For example showing their childhood photos or opening a song from the computer which best describes their feelings. Once the goal setting starts, and it is In virtual settings the willingness and hoped still during the first session, the commitment may effected by the clients' ability to make informed client is asked to make a commitment to working on making changes. "Are choices and communicate their you willing to work on achieving that expectations by virtual tools. The goal?" "Is that something you are social workers should assess these willing to work on?" "Will that goal needs and provide the needed help you to change your reaction?" resources for the clients. "Are you ready to commit to working on that goal?" Often therapist seem to assume that clients are committed to change when they are only willing to talk about it, or, worse, they expect the therapist to do the work for them. The major task in the Satir model is This aspect is the same for virtual working on change. This is best settings. achieved when the process experiential. The therapist takes an active part in taking the clients into their internal experience and works on helping the clients to change the negative impact of their many experiences.

- Changes in the areas of feelings, perceptions, expectations, yearnings, and behavior are the basic therapeutic areas of work. The rest of the process is person specific; it is driven by the yearnings and positively directional goals of the client, not just the problem.
- This aspect is the same for virtual settings.
- •
- Anchoring changes is also an important aspect of change therapy. This important therapeutic process includes accepting the change, internalizing the change, making room for the change in the different parts of the internal process and integrating the change.
- This aspect is the same for virtual settings.
- •
- Before the session ends, the therapist, with some input from the client or the family, gives homework designed to put into practice the changes that were worked on or achieved during the therapy session. Homework, according to the Satir model, is usually focused on internal change instead of the old behavioral activity like going for a walk or taking a bubble bath.
- Virtual tools can be used much more effectively and creatively in assigning homework. For example, the client may choose to send an e-mail and receive feedback via e-mail instead of bringing up his homework during the interview. Or, they may want to tell about their inner change by sending a written message, not verbally, during the interview. All these ways of expression actually provide comfort for the client in a way. In later stages, he may choose to write less, speak more and / or establish more eye communication.
- With a short summary of the work achieved, the session comes to an end.
- This aspect is the same for virtual settings.

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Satir's model focus on the client and not get lost in the "problem" or "symptom." Clients can connect with their own life energy and allow that life energy, or life force, to become their own center of being. Then they will have access to all of the rewards and responsibilities possible at their own level of competence (Banmen, 2002). Although a positive change has been achieved through face-to-face interviews in this journey of inner discovery and achievement of competence and congruence, it will be seen in time whether the same effects can be achieved in the virtual settings.

5.CONCLUSION

The pandemic which has not only threaten and affect the physical health of many and resulting in

numerous deaths, but also other aspects of human coexistence. The family which is both the strength and disadvantaged part of the pandemic process, both effected and influenced the ongoing process. With pandemic the family has been more influential in our individual lives and family issues have become more visible more than ever before. Social work and social workers have long been concerned with families.

Pandemic also leads many people to experience existential crises within the existential possibilities and also provides them the opportunity to give a meaning and to add value to their lives, and to have responsibility and awareness. It is also a possibility for social work to reconsider working with families. Most approaches to social work with families have focused on individual pathology and problem solving or have considered problems of a family member. The other approaches have focused on growth, function, and healing like the Virgina Satir's. The Satir model is situated within the experiential/humanistic tradition of working with families with a strong existential flavor. Satir developed a transformational process model in which the therapist and the family join forces to promote wellness among the family members. This process, called family reconstruction which is looking for ways to "externalize internal processes". This transformation model offers a valid and functional perspective in understanding the anxiety and pressure that the pandemic creates on both the individual and the family, family members gain their own inner awareness, and the family regain functionality as a unit that produces life energy, not only a consumer.

In this process, social workers continued to support the family and family members by using telephone and/or virtual tools. They have been using Microsoft Teams for meetings and reviews and some of them have used Zoom, WhatsApp and FaceTime and other virtual tools available. The virtual work brings both advantages and disadvantages especially related with the ethical issues which IFSW (2020) identified.

Since the pandemic process limits the face-to-face consultation activities, there is a need for differences and adaptation in the implementation of the model. Such as ensuring the first contact by eye-contact from video meeting and with other verbal and nonverbal communication. The camera might help them to ensure eye-contact. But it also may bring challenging privacy and confidentiality issues such as having another person in the room. The social worker cannot see the person if he/she is outside the camera range. The clients may experience discomfort and insecurity and worry about recording their video images. So there should be a contract and informed consent as well as physical arrangements in order to maintain security and comfort. The client also may feel more comfortable by, for example, closing the camera and only talking about himself/herself. Also the technology may allow the clients to use other sources about themselves. For example showing their childhood photos or opening a song from the computer which best describes their feelings. Virtual tools can be used much more effectively and creatively in assigning homework as well. All the ways of expression actually provide comfort for the client in a way. In later stages, he may choose to write less, speak more and / or establish more eye contact. Although a positive change has been achieved through face-to-face interviews in this journey of inner discovery and achievement of competence and congruence, it will be seen in time whether the same effects can be achieved in the virtual settings.

As a result, although the virtual professional interviews are undoubtedly a new technique for most of us our approach and aims didn't change. As professionals our roles are still to activate clients' desire for change, and to support them in their transformation process and these have become more important than ever before.

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