

IASW SOCIAL WORK DURING COVID-19 ONGOING SURVEY

Final Report: Phase Two Easing Lockdown Restrictions (9th – 29th June)

November 2020

Background

This final report presents the data collected during phase two of Reopening Ireland/Easing Lockdown Restrictions (9th - 29th June), the third and final phase of data collection of the **IASW Social Work During Covid-19 Survey**. Data collection was structured in three phases, each mapped onto the phases for Reopening Ireland/Easing Lockdown Restrictions.

| PHASE | TIME PERIOD | SURVEY RESPONSES |
|---|-----------------------------|------------------|
| Lockdown | 12th May - 18th May | 148 |
| Phase one easing lockdown restrictions | 19th May - 8th June | 204 |
| Phase two easing lockdown restrictions | 9th June - 29th June | 104 |

104 survey responses were received during this phase. Social workers in Children and Families were the largest single group of respondents, comprising 38% of responses. This report presents the key findings from the survey data before presenting the responses to each question and comparison across the three phases of data collection. A discussion section and information on those who participated in the survey can be found at the end of the report.

Summary of Key Findings

Social workers are worried. Two out of three social workers are worried about the challenges they face in providing a service. During lockdown, this was a worry for one in three social workers. As the ongoing implications of the pandemic, and of public health restrictions on human contact and physical closeness, become clearer, the worries and challenges for social workers have increased in this third and final phase of data collection.

Social workers see the impact of life under lockdown, in particular the impact of the pandemic and the government response to it on the most vulnerable and marginalised.

'The strain on family carers and the impact of severely restricted services that are so badly needed.'

The good news is that social workers have clearly demonstrated their resourcefulness and creativity in times of crisis. They have adapted quickly and learned to use what's available and possible to maintain and develop contact and connection with service users in order to ensure their needs are met, to deliver a safe, quality service and to do their utmost to keep service users safe and supported, insofar as possible.

Many respondents were working without the resources, equipment and supports required to do their job. Essential supports missing for some were:

- IT resources and support
- Professional supervision and support
- Practice guidance and protocols (e.g., home visits)
- Essential tools for working away from the office (e.g., mobile phone)

The biggest challenge identified was being unable to work face to face with clients or doing this work in a restricted way. While IT and communication apps/tools were considered useful during this time of restrictions on physical contact, social workers were clear that working online is not a substitute for working face to face in the same physical space with service users. Social workers reported being unable to make thorough assessments and interventions without direct contact with those who require a service.

'The team are limited in carrying out risk assessments for particular types of cases such as domestic violence and sex offenders where level of questioning/discussions are quite intense and not necessarily possible to do via phone call.'

It is essential that virtual contact does not replace human contact over time if social workers are to support and safeguard people when they most need care and protection. The limitations of online working have severely impacted the nature and effectiveness of social work services and the foundations on which professional decisions are based.

Social workers need increased support to do their job in the context of

- Severe decline in face to face contact with social work peers and access to peer support and supervision
- Decrease in contact and connection with service users
- Increased demands at home and in personal life
- Loss and change in nature of many workplace supports (admin, printing, desk)
- Decreased access to professional and client supports and services
- Increased anxiety and worry generally

In order to provide essential social work services, social work employers need to provide an appropriate level of simple, practical supports to social workers to enable them to do their job.

There is a concern for many in the profession that planning at national and organisational levels is not focused on the needs of service users, that it is not taking a person-centred approach, but instead is limited to physical and medical concerns. Social workers are worried about the impact of such a narrow focus, they are worried about decisions at national level to choose not to take a psychosocial approach to supporting and meeting the needs of the most vulnerable, marginalised and silenced during this pandemic.

WHAT CHALLENGES ARE YOU EXPERIENCING?

101 respondents (97% of total).

The challenges faced by social workers fell into four broad categories: direct work; new work practices; employer response and personal life. Overall, the challenges had increased since lockdown, the biggest increase in the challenges to direct work with service users, up 9% from lockdown (54% from 45%).

Challenges for Direct Work

Fifty four per cent of responses referred to the challenges presented when unable to work face to face or when working in a restricted way with clients. These limitations on direct work impacted on effective communication and maintaining contact with clients (20%) as well as the provision of support and in carrying out assessments (17%):

'Care planning meetings not always appropriate virtually due to things like difficult family dynamics, sensitive topics being discussed or cognitive impairment of service user or family member.'

'... Online platforms very different to bringing a group together where people can 'hold' each other in support.'

'Unable to run groups for bereaved children for which I have a long waiting list. Additionally, unable to provide face to face counselling to those bereaved during the Covid-19 pandemic.'

'Not being able to freely do home visits where you normally get a better feel for the family situation.'

New Work Practices

Forty six per cent of responses referred to the challenges associated with new work practices brought about by the pandemic, such as remote working (18%), safe work practices (12%) and use of technology (10%). A smaller number referred to the challenges of juggling work and home life as well as working without support from team:

'Challenge of working from home at full tilt, challenge of managing staff remotely.'

'Increased workload as result of working from home.'

'Assessing how best to work safely as restrictions lift. Every child's circumstances are different and require consideration about which visits are necessary.... how to complete safely, whether or not to use a face mask/shields when visiting etc.'

'Technology – internet or phone connections not supporting effective meetings'.

'Fighting with technology and trying to do social work in completely new and innovative ways.'

'Managing boundaries of having work information in personal space, some of which is distressing to read.'

'Elimination of work based professional informal social support networks due to homeworking, resulting in reduction in resilience and increased stress.'

Employer Response

Thirty four per cent referred to challenges presented by their employers' response to the new ways of working. These kinds of challenges included difficulties accessing necessary equipment and resources, lack of support, lack of appropriate guidance, excessive workloads, and even redeployment:

'Long delays in getting remote access and then being expected to use own laptop or have a desktop provided.'

'My mobile phone is poor quality and I am using it most of my working day to deliver a social work service'

'Staff feel they were not considered, personal circumstances were not considered, safety measures were not in place.'

'Working additional hours without the benefit of getting time in lieu.'

'Poor managerial leadership from Principal Social Worker.'

'Demands from management which are negatively impacting upon my health.'

'Service managers left to exercise broad discretion to interpret and implement the Covid_19 HR policies.'

'Being drawn into areas of practice that are not my area of expertise leaving my own mental health clients without support.'

Challenges in Personal Life

A small number (10%) referred to personal anxieties and concerns about their own health, living with uncertainty and managing childcare:

'Uncertainty, fear of infection, anxiety re childcare.'

'My own level of worry about Covid-19'

WHAT ARE YOU WORRIED ABOUT?

101 respondents (97% of total).

The most striking finding from the responses to this question is that two out of three social workers worried about providing a service. It is noteworthy that this is **double** the level of worry from the first phase of data collection, which was only 4 - 7 weeks before.

Responses to this question can be grouped into three themes:

1. worry about providing a social work service,
2. worry about the impact of restrictions on clients and
3. worries about personal life.

Worry about Providing a Social Work Service

Sixty three per cent worried about providing a social work service, the main worry being the provision of ongoing and future quality services (26%). Worries about the workplace (23%) and about the limitations of remote work (14%) were also identified.

'Worried that many families are places where children are not safe and with the current restrictions we do not have the same visibility or ability to provide immediate protection.'

'I am concerned that social workers are unable to visit some of the most vulnerable children'

'The team are limited in carrying out risk assessments for particular types of cases such as domestic violence and sex offenders where level of questioning/discussions are quite intense and not necessarily possible to do via phone call.'

'Our MDT [Multi-Disciplinary Team] is already under resourced and struggling to meet client need and so is likely to face difficulties meeting the anticipated extra need.'

'Another wave of Covid-19 and how this will be managed as we had been involved in discharging a lot of patients to nursing home care at the beginning of the pandemic, in order to free up hospital beds – as has been show this was not a good plan due to the number of deaths in nursing homes.'

'Human rights being upheld – risk is overshadowing people's rights without adequate discussion with patients & carers'

'Feel unsupported by employer, managing child protection from home without access to files.'

'That I have no work laptop from home and connection on phone is unreliable at times.'

Worries about Impact of Restrictions on Clients

Thirty four per cent of respondents worried about how their clients were coping with the ongoing public health restrictions, a similar level of worry to the earlier lockdown. Social workers expressed concern about the overall impact of the various stages of restrictions and lockdown, including the effect of reduced services and isolation on client mental health and well-being. Women at risk of

domestic violence & abuse and children at risk of harm were also a source of worry for social workers. Social workers were also concerned about the increased care burden experienced by many family carers and the experiences of people living in residential settings separated from family supports:

'Children exposed to violence and other forms of neglect.'

'Increased levels of domestic violence.'

'The long term impact on the mental health of young people due to restrictions.'

'The strain on family carers and the impact of severely restricted services that are so badly needed.'

'The legacy this will leave for bereaved people.'

'Care of residents in services – their usual outlets of visitors and day centres now not available so if there are issues in units there is no one to tell.'

'I worry about how isolated some service users may be.'

Personal Worries

Twenty per cent of responses said they worried about themselves and their families, a small increase from lockdown (16%). Some were concerned about either contracting Covid -19 or infecting family members while others referred to personal concerns about living with uncertainty, childcare issues, and work/life balance.

'Worried about my own health returning to work, I am in the high risk category.'

'Keeping well and safe, worrying about bringing infection home and spreading it to family.'

'On a personal level, I'm worried about the possibility of ongoing school interruptions and the consequent difficulties in juggling work and childcare responsibilities.'

WHAT EXAMPLES OF BEST PRACTICE/KEY LEARNING CAN YOU SHARE?

95 responses (91% of total).

Social workers identified and gave examples of key learning and best practice in:

1. how they maintained contact and built connection with clients,
2. the use of technology,
3. in creative and flexible work practices, teamwork and
4. in the application of social work skills and values.

Contact and Connection with Clients

Twenty nine per cent of responses highlighted the importance of maintaining or even proactively increasing contact with clients. Examples referred to increased planning of contact, connecting with people in new ways and using core communication skills to connect with people:

'When talking to families and children make sure to keep it fun to keep engagement. Video calls, quiz over the phone, bingo, etc. as the interaction will last longer.'

'Regular phone contact with families can help families to understand that the patient is less well but is not alone.'

'Going on socially distanced walks with clients who are able or window chats if the neighbours can't hear!'

'Regular telephone contact with vulnerable services users... socially distanced visits at home or neutral places.'

'Increased contact with vulnerable clients at this time.'

Use of Technology

Twenty seven per cent of responses highlighted learning associated with the use of technology to support their work:

'How efficient and time saving team meetings on Zoom can be.'

'Key learning for me was getting familiar with Zoom and Microsoft Teams apps to support work and working with service users.'

'Using Microsoft Teams to engage children and parents in direct work'

Creativity and Adaptability

Twenty two per cent identified learning associated with creative and adaptive practice. Social workers highlighted the importance of considering how to work in new ways and described innovative work practices introduced during lockdown as an example of best practice. They also gave examples of the use of new resources to support their work:

'Have managed to get a brain injured population onto Zoom and run Zoom sessions one to one and in a group.'

'Adaptability of the social work team to the working environment and how we provide our service.'

'I found the document from IASW helpful – "Beyond the Door" example especially. As a lot of older people are feeling isolated from family. This helped me work with my patients and they said this technique helped them.'

Teamwork

Nineteen per cent of responses identified learning associated with teamwork:

'Have had safeguarding social workers and primary care social workers working together to support one residential centre with serious safeguarding concerns.'

'Communication with other agencies who continued to do home visits in order to assess risk of harm in domestic violence cases.'

'Collaborative working, it is amazing how quickly projects and processes can be implemented when there is funding and buy in from stakeholders.'

Social Work Skills and Values

Eleven per cent of responses highlighted best practice and key learning relating to the use of core social work skills and values, i.e., use of reflective practice, keeping the client at the centre of work processes and supporting human rights:

'Creating reflective space with social work colleagues to support our practice.'

'Supporting each other, focusing on the relationship aspect of social work and its importance for patients and families has been central.'

'Constant activity to fulfil HIQA or staff expectations goes against client wishes and human rights. Just because you have been labelled disabled should not mean you become a clinical case for the rest of your life, your right to say no to constant testing needs to be supported.'

QUERIES ABOUT COVID-19 AND SOCIAL WORK

68 respondents (65% of total).

Practice Queries

Twenty nine per cent of respondents had queries related to social work practice, in terms of service provision, the impact of lockdown on clients and restrictions on direct work with clients. This is a similar figure to lockdown, despite this figure rising to 45% during the second phase of data collection:

'If Covid-19 continues longer than expected, how will it impact on service provision and on service users?'

'How social workers are going to carry out risk assessments and do individual pieces of work with children?'

'At what stage can we resume home visits?'

'Families (many of whom are over 70) are very tired now having cared for their son/daughter full time with no break and limited help for four months and also in the knowledge that there is very limited access to long term residential placements.'

'Facilities where families can meet staff must be provided.'

'Difficulties with relationship building with people with dementia while wearing masks.'

Agency Queries

Twenty six per cent raised queries in relation to their role within their agency. Social workers had questions about access to current and future resources for both staff and clients as well as queries about planning processes within their agency:

'Will extra resources be provided to manage the social issues that will arise in the coming weeks and months?'

'A roadmap is being worked on for intellectual disability services but more detail with dates to aim for would be really helpful for families and service users.'

'Why was there a lack of clear direction and different teams within the country responding very differently?'

Queries about the Social Work Profession

Twenty five per cent of responses raised queries in relation to the social work profession. Respondents asked about the profile and visibility of social work, redeployment and about ethical issues which arose during the pandemic.

'I would like to see social workers better represented along with other HSCP colleagues at a national level in terms of policy formation and decision making.'

'Social work needed to be offered as part of frontline services. I believe families really suffered without the support they usually receive from their social worker due to change of work practices, delays in safe online platforms being set up, redeployment of social workers.'

'That social work is seen as an essential service and roles not redeployed elsewhere.'

'Much of our work is meeting face to face with people. I am concerned that managers who are not social workers will put barriers to us meeting people (even if this is done in a safe way after our own risk assessments, due to their own fears about Covid, I fear that our professional judgement is being taken away from us and we cannot make decisions until they are okayed.'

'There has been a lack of consideration of the role of Safeguarding teams within community, nursing home and day care settings.'

'A lot of human rights issues raised, lack of visits for residents in nursing homes, prisoners and social isolation of same.'

WORKING DURING LOCKDOWN

(99% response rate (103 responses))

The survey asked ‘Where were you physically located during lockdown?’. Fifty six per cent of responses indicated that they were based at home, 50% were in their usual place of work, while 7% were redeployed to another place of work. Fifteen respondents described themselves as working between home and their office, with one response indicating that they were based in a school.

Respondents were given a list of resources needed to work at home (mobile phone, laptop, guidance for online work, etc.) and asked to indicate which resources their employer had provided. There were small improvements in the provision of resources by employers compared to the last phase of data collection when social workers were provided with either the same or less support from their employers than they were during lockdown. The provision of an appropriate work station was the resource that saw the largest improvement with 52% of respondents provided with this resource by employers compared to 40% during lockdown.

It is very interesting to note that while no one said their employer provided childcare in the lockdown sample (first phase of data collection), 9% of respondents during this final phase said their employer provided childcare.

| Employer Provided Resources | 12 th May – 18 th May | 19 th May -8 th June | 9 th June – 29 th June |
|--|---|--|--|
| Good wifi connection | 45% | 46% | 53% |
| Laptop or desktop computer | 72% | 70% | 78% |
| Mobile phone | 75% | 76% | 78% |
| Appropriate work station | 40% | 38% | 52% |
| Guidance/Protocols for working from home | 72% | 70% | 73% |
| Guidance/protocol for working online | 73% | 66% | 69% |
| Necessary software to do your job | 72% | 67% | 74% |
| Childcare | 0% | 5% | 9% |

WHAT ONE THING COULD YOUR ORGANISATION DO TO BETTER TO SUPPORT YOUR WORK IN A LOCKDOWN SITUATION?

102 respondents (98% of total)

Social workers requested:

1. increased access to technology,
2. adequate support and guidance, and
3. that social work be valued and acknowledged.

Provision of Information Technology Resources

Twenty eight per cent asked that their employer provide additional information technology resources (hardware and software), additional training and support, and online access to files. Respondents also requested wi-fi, laptops and phones:

'Get virtual workspaces up and running, staff still waiting to be set up on Microsoft teams.'

'Provide the right technology even now as the restrictions in terms of social distancing will be here for a long time.'

Request for Additional Supports

Twenty seven per cent of responses related to requests for additional supports mainly in the form of organisational support to check in with staff and supports to flexible and remote work practices:

'Inquire as to how workers are doing. I don't think I was asked once by my line manager or my senior manager if things were okay at home or if I had any concerns about going out on site, especially during lockdown period.'

'More ordinary phone calls and general well being check ins – less reliance on email and technology.'

'Allow staff to work remotely if they can and choose to.'

'More flexible working times.'

Request for Additional Guidance

Eleven per cent requested additional organisational support around guidance, communication and information:

'Better communication.'

'More communication from management to all levels.'

'Clearer guidance on back to work safety protocols.'

'provide relevant updates.'

Request to Value Social Work

Nineteen per cent of responses asked that social work be acknowledged and valued:

'Recognise the challenges instead of introducing more challenges during a national crisis.'

'Believe that workers do work from home and express that view to the workforce.'

'Value social work and stop seeing us as just administrators.'

'Value social work in mental health as being important.'

'Address reduced staff morale.'

'Acknowledge the impact these times have on staff.'

ANY OTHER COMMENTS?

35 respondents (34% of total)

35% of comments received related to organisational support. The majority of comments were that agency support around the impact of the pandemic on staff was poor:

'No consideration was given to my personal and family circumstances and the demands placed upon me. This has been a truly traumatic time and my personal health been negatively impacted. I feel completely unsupported by my organisational and this has resulted in me deciding to leave social work.'

'I have no childcare, have three kids, one with additional needs, husband who also needs to work from home. Work not supportive.'

'I didn't have access to childcare or laptop until two weeks ago, near end of lockdown, it was very stressful. I was expected to take annual leave and discouraged from taking unpaid leave.'

'I know fellow workers who feel pressurised to use their own personal phones and computers at home. I have refused to do so as they are not safe.'

A smaller number of respondents commented that flexible working arrangements were helpful:

'My ideal is working from home where possible. I also get more done in 5 hours at home than I do in a full day at the office.'

'A flexible working from both the office and home is required going forward for a flexible lifestyle.'

TABLE 1**KEY FINDINGS COMPARED ACROSS PHASES OF DATA COLLECTION**

| Survey Question | Subthemes | 12-18 th May | 19 th May – 8 th June | 9 th June -29 th June |
|--|---|-------------------------|---|---|
| What are you worried about? | Impact of restrictions on clients | 36% | 33% | 34% |
| | Providing a social work service | 33% | 46% | 63% |
| | Personal worries | 16% | 21% | 20% |
| What challenges are you experiencing? | Remote work/restricted direct work with clients | 45% | 53% | 54% |
| | New work practices | 40% | 36% | 46% |
| | Response & support from employer | 30% | 30% | 34% |
| | Challenges in personal life | 21% | 13% | 10% |
| What queries about Covid-19 and social work do you have? | Practice Queries | 27% | 45% | 29% |
| | Agency Queries | N/A | 20% | 26% |
| | Role & Profile of Social Work | 22% | 15% | 25% |
| What examples of best practice/key | Use of Technology | 31% | 33% | 27% |

| | | | | |
|--|-------------------------------|-----|-----|-----|
| learning can you share? | Contact & Connection | 24% | 34% | 29% |
| | Teamwork | 22% | 20% | 19% |
| | Creativity | 17% | 19% | 22% |
| | Social Work Skills and Values | N/A | N/A | 11% |
| What one thing could your organisation do better to support your work in a lockdown situation? | Additional Technology | 23% | 27% | 28% |
| | Social Work is Valued | 23% | 11% | 19% |
| | Clear Guidance | 15% | 16% | 11% |
| | Additional Supports | N/A | 25% | 27% |
| Where are you physically located when working during lockdown? | Home Base | 62% | 65% | 56% |
| | Work Base | 46% | 44% | 50% |
| | Redeployed | 5% | 5% | 7% |
| | Variety of Work Locations | 13% | 16% | 13% |

DISCUSSION

Looking back over the course of the three data sets, social workers delivered clear and consistent messages from frontline practice about what was happening for the most vulnerable and marginalised in Irish society during the pandemic. These messages are of the utmost importance for policy makers, employers and social work professionals. Children and adults living with violence, abuse or neglect, family carers, people with disabilities, people with mental health difficulties, those with drug/alcohol problems were all often left without essential social work and primary care services. Social workers saw that the absence of, and drastic reduction in, essential support services coupled with the reduced access to personal networks during restrictions, dramatically increased the risks and stresses experienced by these populations. In simple terms, the situation of the most marginalised worsened over the seven-week period of data collection.

Levels of worry about providing a social work service dramatically increased for social workers since lockdown. While one in three worried about providing a service during lockdown, that figure rose to two out of three in the final phase of data collection, a time period of only 4 -7 weeks. Social workers worried about providing ongoing, quality services, (for example, while not being able to visit children at risk of abuse and/or neglect,) and they worried about how social work services can cope with the anticipated increased demand for services. Worries about the limitations of remote working and about the workplace also increased. The overriding worry for social work is that those who need a social work service and supports are not getting what they need.

Levels of worry about the impact of reduced services and social isolation on client mental health and wellbeing remained a worry for one in three social workers throughout all three phases of the survey. Women and children suffering domestic violence and abuse, people who need mental health services and carers coping without help, respite or support were frequently mentioned. Those most in need of care, support and/or protection did not have access to vital services. In addition, the impact of the pandemic and of public health restrictions has been to remove the informal support networks for many with restrictions on visiting, on contact and the need for the medically vulnerable to physically isolate.

Social workers adapted and responded at local and organisational levels, finding creative ways to connect with clients and provide a service. However, their needs analysis, innovations and learning often remained local or organisational as there has been an absence of involvement of social work expertise at national planning level. The absence of the social work perspective and expertise at this level means that the needs of the most marginalised and those made more vulnerable by the pandemic are not seen and heard.

Social workers have demonstrated leadership, adaptability and creativity as they respond to those needs that were already present and to those emerging. The survey has found that despite ever increasing levels of need, social workers are not always provided with the basic tools and supports to do their job. In fact, there was very little improvement in the levels of resources provided by employers throughout the survey. Social work efficiency and productivity can only have been hampered as a result. Social workers did, however, provide clear messages as to the supports they needed from their employers. They are:

1. Increased access to technology
2. Adequate support and guidance
3. To be valued and acknowledged

Social workers were profoundly concerned about the impact of the loss of face to face to contact with individuals and families in need of a service. The survey has provided much information about the use of Information and Communications (ICT) in social work. During lockdown, social workers quickly adapted to using ICT tools in their work, identifying many benefits. However, the limitations have also become clear. Some service users simply don't have the technology or the skills to participate, creating a digital divide and unequal access to services. In addition, many respondents said they were unable to complete assessments or interventions with children and families due to the gaps in information that could be gathered and the limitations on relationship building when meeting online. It is clear that while ICT supports to virtual working can be very helpful tools, they are no substitute for physical presence when working with clients.

During the final phase of data collection, seven per cent of social workers reported that they had been redeployed. Although we cannot say definitively that all were redeployed to swabbing and tracing, this is the main area of work to which social workers (and many other Health & Social Professions) have been redeployed. At the time of writing, eight months since the first lockdown, social workers are still being redeployed to swabbing and tracing services. The policy of removing essential services from the most marginalised and vulnerable at a time of reduced social contact and supports is one that is damaging the health and welfare of too many. This policy decision has unnecessarily left too many vulnerable people without social work services while living with the risk of violence, abuse and/or neglect in their homes. It is imperative that social workers, a profession providing vital services, are not redeployed to swabbing and tracing. To do so, increases the risk and harms to many people as well as increasing the burden on those struggling to cope and manage on a day to day basis.

One cross-cutting theme from the survey was the profile and visibility of social work, particularly in relation to policy formation and development. There is a clear need for the expertise and perspectives of social work at national level, to inform and influence the choices of policymakers as they respond to the psychosocial needs of the population. The social work profession witnesses and manages the fallout from the pandemic alongside individuals, families and communities, navigating ways forward, building on strengths and finding solutions. Social work is very often practiced in crises and is uniquely positioned to inform, guide and support policy and service responses to the current crisis.

THE SURVEY PARTICIPANTS

This report is informed by 104 responses received during Phase 2 of Easing Lockdown Restrictions/ Reopening Ireland, i.e., from the 9th- 29th June 2020.

Respondents were largely based in Dublin (51%) and Cork (9%).

Most (59%) described themselves as experienced social workers, 20% as managers and 11% as social work supervisors.

The majority (38%) worked in Children and Families services, 19% in adult services, 16% in adult health and 4% in criminal justice. 22% chose the category of 'other' (7 in Disability Services, 9 in Medical/Health related social work, 2 in Academia,...)

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An advisory group was established to

1. Support and advise on data analysis
2. Review emerging themes and results
3. Advise on dissemination of key findings and results with a view to making relevant information available to key stakeholders

Many thanks to the members of the group for their generosity in sharing their time, expertise, advice and support. Their perspectives strengthened and enriched the survey at all stages of the research process. Members of the group were:

- Sarah Donnelly, School of Social Policy, Social Work and Social Justice, UCD
- Niamh Flanagan, Department of Applied Social Studies, Maynooth University
- Vivian Geiran, School of Social Work and Social Policy, TCD and IASW Board Member

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