

# The materiality of home visits at the margins of community care before, during and after the COVID-19 pandemic

## Kotikäyntien materiaalisuus ennen koronapandemiaa, sen aikana ja jälkeen jalkautuvan hyvinvointityön marginaalissa

Kirsi Juhila <sup>a</sup>, Suvi Raitakari <sup>a</sup>, Christopher Hall<sup>b</sup>, Jenni-Mari Räsänen <sup>a</sup>,  
Suvi Holmberg <sup>a</sup> and Johanna Ranta <sup>a</sup>

<sup>a</sup>Faculty of Social Sciences, Tampere University, Tampere, Finland; <sup>b</sup>Emeritus Researcher, Department of Social Work and Social Care, University of Sussex, Sussex, UK

### ABSTRACT

The emergence of COVID-19 led to restrictions in face-to-face interaction and an increase in remote contact, creating challenges, in particular for social services in which home visits are integral. This longitudinal study concentrates on one such service: community care among vulnerable adults, which aims to safeguard their housing and living in the community. Based on a re-analysis of 120 home visits before the pandemic, we demonstrate the significance of materiality in the visits, which manifest as *home-space talk* and *body work*. We then analyse data from two focus group interviews with workers to determine what happened to this materiality during and after the pandemic. During the pandemic, home visits were carried out (1) in the usual face-to-face manner in home spaces, (2) as visits in homes without the service users present, (3) as short visits on the doorsteps of homes, (4) as outdoor (home) visits and (5) contacts via phone calls and instant messaging applications. Carrying out home visits as usual or in a manner that enabled face-to-face contact or workers' presence in homes signal the importance of materiality as well as the workers' return to previous home visit practices after the acute phase of the pandemic.

### Tiivistelmä

Koronapandemia johti kasvokkaisen vuorovaikutuksen rajoituksiin ja lisäsi etätapaamisia aiheuttaen vaikeuksia erityisesti sellaisessa hyvinvointityössä, jossa asiakkaiden luokse tehtävät kotikäynnit ovat olennaisia. Tämä pitkittäistutkimus kohdentuu tällaiseen työhön; haavoittuvassa asemassa olevien aikuisten parissa tehtävään, heidän asumistaan ja elämäänsä naapurustoissaan turvaavaan ja mahdollistavaan työhön. Analysoimalla uudelleen ennen pandemiaa tehtyä 120 kotikäyntiä osoitamme niissä läsnä olevan materiaalisuuden merkityksen, joka ilmenee *kodista 'tässä ja nyt' puhumisena ja kehollisina toimintoina*. Tämän jälkeen analysoimme työntekijöiden fokusryhmähaastatteluita siitä näkökulmasta, mitä materiaalisuudelle tapahtui pandemian aikana ja rajoitusten lieventymisen jälkeen. Pandemian aikana kotikäynnit jatkuivat (1) samanlaisina kasvokkaisina

### ARTICLE HISTORY

Received 9 December 2023  
Accepted 11 October 2024

### KEYWORDS

Home visit; materiality;  
Covid-19; community care;  
housing

### AVAINSANAT

kotikäynti; materiaalisuus;  
koronapandemia; jalkautuva  
hyvinvointityö; asuminen

**CONTACT** Kirsi Juhila  kirsi.juhila@tuni.fi

© 2024 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited. The terms on which this article has been published allow the posting of the Accepted Manuscript in a repository by the author(s) or with their consent.

kuten aiemminkin, (2) käynteinä asiakkaiden kotona ilman heidän läsnäoloaan, (3) lyhyinä keskusteluina asiakkaiden kotiovilla, (4) ulkona tapahtuvina vierailuina ja (5) puhelin- tai pikaviestisovelluskontakteina. Kotikäyntien jatkaminen entiseen tapaan, käynteinä asiakkaiden kotona ilman heidän läsnäoloaan ja erilaisten kasvokkaisten tapaamisen järjestäminen pandemian aikana, samoin kuin työntekijöiden nopea paluu aiempiin kotikäyntikäytäntöihin kertovat materiaalisuuden merkityksestä tässä kotikäyntityössä.

## Introduction

The COVID-19 pandemic changed social care and social work practices from 2020 to 2021, decreasing face-to-face contact between workers and service users. This created challenges, especially for services in which home visits are an integral part of the work, as is the case at the margins of community care. In this study, we propose that the challenges are related to the significance of materiality in home visits and that the decrease in face-to-face home visits during lockdowns highlighted the importance of the materiality, which has been largely under-researched. The study aims to answer to the following research questions: (1) What kinds of dimensions of materiality can be found in home visit interactions at the margins of community care before the pandemic, and (2) what happened to the materiality of home visits during the pandemic and right after its acute phase? The data of this longitudinal study comprise audio-recorded and observed home visits and workers' focus group interviews conducted in Finland and Sweden.

With regard to the context – 'the margins of community care' – we refer to social care work based largely on home visits with working-age adults in vulnerable life situations defined as having mental health problems and addictions accompanied by challenges in living independently. As such, they are often seen as being at risk of losing their homes. Workers are professionally educated, and their tasks include supporting service users both practically and psychosocially to ensure their living in the community and wellbeing in everyday life. Among other things, workers assist service users with their everyday activities, such as cleaning, while engaging in supportive, psychosocial discussions. Since workers are not qualified social workers with for example a responsibility to make law-based risk assessments and service decisions, we call their work social care work. Despite this difference social care work shares the same ethical premises as social work, such as respecting the right to self-determination, promoting social inclusion and working with people holistically. Social care workers and social workers also often work with the same service users and co-operate when needed. However, social workers' work among adults is more office-based, and they less frequently conduct home visits, whereas social care work emphasises conducting home visits.

Studies of social work and social care practices during the pandemic have revealed the innovative ways in which workers maintained contact through service visits and presented the benefits of digital interactions (see Calcaterra & Landi, 2023; Casquilho-Martins et al., 2022; Cook & Zschomler, 2020a; Copson et al., 2022; Ferguson et al., 2022; Fiorentino et al., 2023; Pink et al., 2022). However, the same studies also emphasise that not all work could be carried out remotely. Hence, hybrid work that integrates digital and face-to-face encounters is argued to be a new, better model for work in, for example, child protection, which has previously placed emphasis on face-to-face home visits (see Pink et al., 2022). We agree with these viewpoints that underline the benefits of hybrid practices. However, we want to add to this conversation by highlighting issues that draw from human geography on homes as special places of worker – service user interaction (e.g. Dyck et al., 2015; Juhila et al., 2016; Milligan, 2000; Twigg, 1999). If workers and service users meet digitally while service users are in their own homes and workers are in offices or their own homes, the materiality of home visits is limited as a shared resource in the interaction. Can we then even talk about *home* visits? Although many texts have thus far been written on (digital) home visits during the pandemic, home as a

special place of interaction, the materiality of visits and the consequences of its possible disappearance have not yet been thoroughly discussed (cf. Green & Moran, 2021; Kong et al., 2022).

One viewpoint related to the materiality emphasised in earlier studies is the simultaneous presence of control and care in home visits (e.g. Ferguson et al., 2021). Workers' physical entering into private home spheres can be seen as control, guiding for example service users to internalise certain cultural norms on how homes should look and be like. Caring in turn can be defined as taking care of service users' basic needs and providing necessary practical and emotional support in their everyday lives. This study shows that both control and care were present and entwined in a specific way during the pandemic.

In this text, we first go through the literature on home visits during the pandemic. After that, we answer to the first research question by re-analysing our previous research findings on 120 home visits from the point of view of their materiality at the margins of community care. We then answer the second question on the materiality of home visits during the pandemic and after its acute phase by analysing focus group interviews with social care workers conducted in 2022.

### Home visits during the pandemic

Throughout the pandemic, workers in social and health care faced major disruptions to their work practices. They were expected to continue to offer their services to vulnerable service users, but their normal ways of carrying out their work became a serious health risk both to themselves and service users (Cook & Zschomler, 2020a; Ferguson et al., 2022; Kong et al., 2021). Lockdowns, social distancing, isolation and shortages of appropriate personal protective equipment severely restricted their ability to safely meet with service users face to face. Globally, governments and local policies, procedures and mandates suddenly advised or required remote working, forcing workers to confront difficult decisions as to how to maintain contact with service users (Ferguson et al., 2022; Harikari et al., 2021). This raised difficult practical and ethical considerations as to whether and how service users in vulnerable situations could be met with in accordance with safety guidance (Banks et al., 2020). Furthermore, there were concerns about how service users were managing the new health risks and social restrictions. Some service users were at high risk of contracting the virus. However, they were simultaneously at risk from the associated social isolation brought about by the closure of and restrictions on access to health and social care services (Kong et al., 2021). Existing inequalities and social injustices were exacerbated, and workers had to develop new ways to support service users (Flood et al., 2020; Scully, 2023).

Commentators have highlighted how restrictions on home visits during the pandemic impacted the 'core' of work (Banks & Rutter, 2022), 'their natural environment' (Kong et al., 2022, p. 2838) or the 'lynchpin of practice' (Featherstone et al., 2021, p. 158). The pandemic forced a re-construction of what constitutes home visits in light of new risks and restrictions, leading to increased scrutiny (Banks & Rutter, 2022; Cook & Zschomler, 2020a; Manthorpe et al., 2021). Kong et al. (2022) quoted an experienced adult care worker who shared that 'Nothing beats a proper home visit' (p. 2843), highlighting that to get a full understanding of the service user's life situation, there is a need for the workers to use their sensual bodies – for their abilities to move, look, smell and touch (see also Copson et al., 2022).

Although it was advised that face-to-face contact and thus visits to service users' homes were to be avoided during the pandemic, it was also argued that for workers to do their work in an ethical and sustainable manner, in-person contact was necessary in some cases (Rutter & Banks, 2021). Therefore, social workers and social care workers used discretion in assessing the risks of making in-person home visits. However, in an international study of workers' ethical dilemmas, Banks et al. (2020) reported confusion over how to make such judgements. A study of social workers providing adult services in England (Manthorpe et al., 2021) reported that although the agency might have had a policy of not performing home visits, the workers 'were exercising professional judgement by themselves [to make a home visit], reliant on feelings and professional experience,

conscious of the dangers of missing information' (p. 1886). A home visit was sometimes justified as a worker's personal decision, by the characteristics of the service users, as in 'certain cases where you need to see the person, you need to see what's going in the home environment', or by the seriousness of the decisions being made (Manthorpe et al., 2021, p. 1885).

As the risk of viral transmission is lower outdoors, one option was for workers to meet service users outdoors instead of in their homes. For example, some meetings took place on doorsteps, in the garden or during a walk in the park (Holmberg & Räsänen, 2021; Kong et al., 2021). It was reported how workers walked alongside service users in the park, and how informal environment made the interaction more relaxed and enabled more person-to-person talk than the sometimes intrusive home visits (Cook & Zschomler, 2020a, pp. 402–404).

Although face-to-face interactions continued via socially distanced and protected home visits and outdoor visits, the pandemic also rapidly increased the number of digital encounters. Service users were contacted through a variety of social media platforms, phone calls, texts and other online platforms (Cook & Zschomler, 2020a, p. 402). Cook and Zschomler (2020a, 2020b) identified the advantages and limitations of digital home visits. They reported considerable creativity demonstrated by social workers in establishing new forms of online contact. Home visits became shorter but occurred more frequently and were followed up with phone calls or texts. Regarding outdoor visits, Cook and Zschomler (2020a) found that 'the indirect nature of texting could encourage more open, frank conversations and provided a "gentle" way into difficult subjects' (p. 404). The combination of a quicker response rate and reduced travel meant contact with service users could be more flexible, occur more often and constitute better use of work time (see also Ferguson et al., 2022).

In summary, face-to-face home visits and digital visits have their respective strengths and weaknesses. However, less attention has been paid to the differences between the various ways to contact service users in terms of materiality. Face-to-face home visits and outdoor visits enable workers and service users to meet in situ, whereas in digital visits, the parties are physically apart from each other and in different places. Furthermore, as demonstrated later in the article, different channels and places to meet allow for different activities to be performed and objectives to be met.

## Findings on the materiality of face-to-face home visits before the pandemic

To answer the question of what kinds of dimensions of materiality can be found in home visit interactions before the pandemic, we re-analysed our research findings on the practices at the margins of community care in Finland and Sweden. From 2017 to 2019, we collected 120 audio recordings of face-to-face home visit interactions and related ethnographic field notes between social care workers and service users in seven service settings targeted at adults defined as having mental health problems or addictions who were often accompanied by challenges in living independently. The regional ethics committee reviewed the research plan before the data collection in 2017. Service users and workers were asked to provide written consent forms before the commencement of data collection. They were told that participation was voluntary and confidential, and they could withdraw their consent at any stage.

The 120 audio-recorded home visits and related field notes have thus far served as empirical data for several peer-reviewed publications, where we have analysed home visit interactions for example from the points of view of the participants' identities, emotion work, workers' institutional gaze, creating a sense of home and doing substance use and mental health work (Juhila et al., 2022; Ranta & Juhila, 2020; <https://research.tuni.fi/margi/geohome>). For the purposes of this text, we re-analysed our studies by coding all findings related to the material dimensions of home visit interactions. We located two intertwined aspects of the materiality of home visits: home-space talk and body work.

The materiality of the home is present in conversations that draw on the spatial and physical aspects of homes, such as their furniture, decorative items, photos, cleanliness, smells and pets. Notably, workers do not only make silent observations of homes' materiality for the purposes of

evaluating service users' situations. Instead, they often speak aloud and verbalise their observations, as do service users (Juhila et al., 2022). Both parties also respond to each other's observations. Hence, the materiality of the home becomes the topic of encounters. We refer to this kind of discussion as *home-space talk*.

Home-space talk can be accomplished within a frame where a service user takes the position of host, and a worker takes the position of guest. For example, a worker might comment on the nice view from a balcony, or a service user might show a worker a photo of a child's birthday party (Juhila et al., 2016). In the more common professional service user frame, home-space talk, usually initiated by workers, can have several functions (Juhila et al., 2022). Workers can use it to point out and criticise certain aspects of homes, such as trash on the floor. Furthermore, it can be used when offering advice (e.g. saying that it is not healthy to eat the old food visible on a kitchen table) or when displaying concern (e.g. wondering whether a service user has enough strength to take care of a pet). In some cases, discussion of the proper number of material possessions is at the core of interactions; workers might comment on a (too) large number of various goods in homes or very empty homes with only a few pieces of furniture and no personal items. Another remarkable function of professional home-space talk is its facilitation of positive assessments and compliments of, for example, homes' interiors and cleanliness, often in comparison to previous states of affairs.

In addition to home-space talk, the materiality of home visits manifests in interactions as *body work*. By body work, we refer to non-verbal actions, bodily presence and any sensory stimuli experienced during home visits (see Günther, 2021; Kong et al., 2022; Twigg et al., 2011). These are closely tied to homes as geographical places. Private homes as places of worker – service user interactions enable very different body work than interactions in, for example, offices and digital spaces. To start with, service users must let workers in by opening the door, and workers must cross thresholds to enter private homes. They are usually invited to sit down. All these actions must be improvised, as home environments vary and service users might guide workers to move in their homes in certain ways.

As with home-space talk, body work can occur in the visiting or professional frames. In the visiting frame, workers and service users can, for example, have coffee or play with a cat together. The functions of body work in the professional frame are manifold. It can be used to check (e.g. by opening a fridge) that a service user has enough food (Juhila et al., 2022). Another function is to demonstrate how to carry out particular household tasks, such as how to use a microwave. Furthermore, workers and service users might perform other activities together in homes, such as cleaning, cooking and decorating. Aside from being in, moving around in and performing some physical actions in homes, workers can use their bodily senses to assess the atmosphere and situation of a home and the people living there by looking, hearing, smelling and touching.

To sum up, the presence of home-space talk, body work and their various functions in home visits at the margins of community care proves that materiality matters in doing this kind of work. If workers cannot be physically present in service users' homes and meet them face to face, crucial elements of social care work are left out.

## Revisiting the research field after the acute phase of the pandemic

As our research findings showed that materiality plays a significant role in the home visits conducted at the margins of community care, we decided to revisit our research field to study what happened to the materiality of home visits during the pandemic and right after its acute phase. The plan was to hear social care workers' reflections about their work, both during the pandemic in general and from the materiality point of view in particular. We were especially interested in whether and how home-space talk and body work were and could be replaced during the pandemic.

We conducted two focus group interviews during spring 2022, after the acute outbreak phase of the pandemic, in two of the seven service settings of our original study – one specialised in mental health and the other in addiction-related problems. To ensure the coherence of the study, we invited workers whose home visits we had analysed from the material point of view before the pandemic to

participate in the interviews. Three workers were part of one focus group interview (109 minutes) and four were part of the other (88 minutes). Five of the interviewees were women and two were men; all were white and had a several years of history working at the margins of community care. They represented well the workers in all studied service settings. The same ethical review and principles implemented in the original research project applied to this study.

Before the interviews, we sent the workers a short summary on the materiality of home visit interactions based on our research findings. In the interviews, we asked the workers to reminisce about the early stages of the pandemic, to describe concrete changes in their daily practices, to assess how the pandemic impacted service users and their life situations and to reflect on the different stages of the pandemic.

The analysis of the interviews was thematic. We captured from the data ‘a detailed and nuanced account of one particular theme’ (Braun & Clarke, 2006, p. 83), specifically the ways of continuing or replacing face-to-face home visits during the pandemic, especially from the point of view of materiality. Under this main theme, we located five sub-themes that represent the ways of continuing or replacing home visits: (1) home visits carried out as usual, (2) home visits without service users present, (3) home visits on doorsteps, (4) outdoor (home) visits and (5) contacts via phone calls and instant messaging applications. Depending on the place of work, these five ways have different implications on the materiality described as home-space talk and body work, causing the level of materiality to vary from intensive to absent.

## Ways of continuing or replacing face-to-face home visits during the pandemic

### *Home visits carried out as usual*

Face-to-face home visits maintained their status as central and usual to social care work during the pandemic: ‘We have done home visits in a normal way’. By ‘normal’, the interviewee refers to the time before the pandemic, when face-to-face home visits were the main way of carrying out work. At first, the workers found the situation confusing, as the instructions regarding their work conditions and practices shifted, and other health and social care services were shut down or shifted to online-only contact. In many cases, they believed that there was no other way to carry out work supporting housing and living in the community than to conduct home visits as usual: it had to be done, despite the restrictions, to avoid housing crises and unsafe conditions and to ensure that service users could move to new apartments:

It was an absolute necessity [to make home visits] in order to get the flats empty and people to move [from old flats to new ones]. At that time, we already had face masks. It was kind of improvising—certain situations and crises at homes were such, and we decided among ourselves to take care of them although it was not always quite according to the regulations.

Home visits carried out as usual involved support work that is based on intensive materiality in home spaces. They were necessary when the service users’ needs were urgent, complex and could not be dealt with remotely. In such work, it is pivotal that both the service user and the worker are physically present in the home space and doing concrete tasks together:

I think that it demands being present and being in the same space and doing things. And also because the needs of help are so touchable. You have to clean or move stuff, fix them or bring something [to the flat]. So it is absolutely important [to be present].

Home visits carried out as usual enable workers to ensure that tasks in the home space are completed. Often, service users do not find verbal instructions and guidance from a distance helpful, especially if they have neurological-cognitive or drug-related difficulties. It makes a difference if workers are physically present at homes:

It’s just a totally different thing to advise and guide only by talking compared to being there as an example, modelling and being alongside [of service users].

Working in the home space with the service user enables a combination of talking and doing in social care work. Concrete, practical help is often needed alongside psychosocial support, and home visits carried out as usual are a way to provide both at the same time and place. In addition, the workers emphasised that the home space offers an essential setting in which to get to know service users, their lifestyles, interests, strengths and troubles.

### ***Home visits without service users present***

The workers also developed a style of home visit carried out without the service users present to continue their body work and to follow instructions to maintain a safe distance:

We got keys [to the flats] from the service users, or they opened the door and went out themselves. Or they gave us keys, and we went to the flat to clean it. Then we just closed the door and called [to the service user] that a job has been done, you can come back to home.

Such home visits require a high level of trust between the worker and the service user. The home space itself reveals the service users' current functioning and how the social care work can be accomplished in the physical home space, even if service users are not present; 'it produces so much information, [and] there are people's papers and photos and possessions from past lives'. These visits were made above all to safeguard the service users' tenancy. However, this way of doing home visits eliminates an important aspect of social care work: doing daily physical activities together with services users and having simultaneously supportive discussions.

### ***Home visits on doorsteps***

During the beginning of the pandemic in particular, in the midst of confusion and uncertainty, the workers started to organise brief doorstep home visits to see the service users, stay connected with them and bring necessary items. This enabled more visits to service users: 'It used to be [before the pandemic] so that one visit took a whole morning, [but during the pandemic] we sometimes visited four, even five homes and brought a bag [with food] and had a short chat'. However, the time for visits was very limited, and the workers' ability to utilise or perform materiality in home spaces decreased:

It was just saying hello and asking whether money matters are okay and rent has been paid. I remember that the number of those [kinds of visits] increased. Well, we skipped cleaning, but doing laundry was sometimes really ... we had tens of laundry bags sometimes [in the unit's facilities].

Materiality and body work is manifested in bringing groceries and other household necessities to service users as well as in carrying items in and out of the flats, such as laundry. From the doorstep, the workers could also see into the home space or discuss its condition, although from a distance and with limited access. Time devoted to psychosocial discussions with service users was also reduced.

### ***Outdoor (home) visits***

Another method through which workers managed pandemic restrictions while continuing to meet with service users was a relocation of the home visit from the home space to outdoors, to the surroundings of the home or to the community: 'We went out with people [service users] just to meet them and, for example, pick up coffees from some cafeteria that was open. Then we went to a park or took a walk'.

Although outdoor visits were already a well-known working method for these workers, this method's use increased during the pandemic. Going outdoors meant that work was conducted literally by foot. Thus, service users and workers travelled outside together when the majority of services and businesses were closed: 'The only option was to walk, and we really did walk'.

Before the pandemic, outdoor visits supported service users by allowing workers to accompany users to a doctor's appointment or when shopping, for example. During the pandemic, the aim of social participation diminished and changed to keeping the service users active and providing

them with at least one form of social contact. The workers reported both pros and cons of outdoor (home) visits. Walking sometimes allowed the service users to discuss their inner feelings and thoughts: 'When walking outside side by side and not having eye contact and such, you can also get into quite deep matters'. However, these visits carried the risk that relevant, home space-related topics would be bypassed, as they did not necessarily emerge outside the home context:

I sometimes wondered whether we really talked about everything with everyone when we met outside. Did we leave something essential unnoticed and without asking? [...] I sometimes felt [during the pandemic] uncertain how [service users] coped there at home.

A public meeting place often means compromising service users' privacy, and workers needed to be aware of possible eavesdroppers: 'You have to look around, and if somebody is coming, you have to stop talking or lower your volume for that moment, and we avoided discussing diagnoses or matters like that if somebody was walking behind'.

### **Contacts via phone calls and instant messaging applications**

Some home visits were replaced with phone or video calls via instant messaging applications (such as WhatsApp), enabling workers and service users to talk and see each other's faces. Nevertheless, these methods of communication excluded the affordances of the materiality of home and body work. Calls are not a new way of maintaining contact, as they have long been used alongside physical home visits. From the workers' point of view, the total replacement of home visits with phone or video calls was not appropriate. This was especially the case with service users who lacked the skills to use digital tools. Furthermore, advice given from a distance was seen as less effective because it could not fully consider the service users' conditions or situations. Thus, physical presence and body work were often needed:

It is quite tricky to advise from that kind of a [remote] distance in that you surely can't do the dishes or take the trash out. It doesn't work with these people. There needs to be [face-to-face] interaction. Also, as Maria [another worker] just said, the challenges with service users with neuropsychiatric disorders are also a big issue. Guiding and planning activities and making them come to life is not just like saying [to the service user]: 'Yes, you can do that, definitely'.

The workers rejected simply asking the service user to, for example, show how the flat looked via video phone calls:

Worker 1: No, no.  
 Worker 2: No. It was thought of, but then we always had a possibility to get into the flat.  
 Interviewer: So you chose going physically instead?  
 Worker 1: Yes.  
 Worker 4: Yes. It would have felt like surveillance or something like that. It would have felt like saying, 'Please show us. Your mummy will check. What sock is over there?'  
 Worker 1: So, no.  
 Worker 4: It would have been a little disrespectful.

The workers' responses indicate that being physically present in service users' homes and discussing, for example, the cleanliness of the flats would have felt less controlling and more respectful than asking the service users to show the conditions of their homes via video. This further emphasises the importance of face-to-face home visits.

### **Discussion and conclusion**

In this article, we focused on materiality in home visits at the margins of community care. First, we demonstrated how materiality was manifested before the pandemic as home-space talk and as body work in face-to-face interactions between social care workers and service users in home spaces. We then proceeded to determine what happened to this materiality during the pandemic and after its



acute phase. The strength of this study is that we have been able to study home visit practices in the same community care settings from 2017 to 2022, which includes years before, during and after the height of the COVID-19 pandemic. A longitudinal research design enabled us to recognise the presence and meanings of materiality in home visits. Another strength is the documentation of the community care workers' innovative and diverse solutions for maintaining contact with the service users living in vulnerable situations and taking care of them during the pandemic. This is valuable knowledge that can be used to prepare for future pandemics and other crises.

The workers' tendency to conduct face-to-face visits as usual during the pandemic signals the importance of materiality. With the permission of the service users, the workers were also able, in some cases, to visit homes without the service users present to check, for example, whether there was a need to do some cleaning (body work). Both of these ways for carrying out home visits included intensive materiality in the home spaces.

Performing home visits during the pandemic also involved meeting service users at the doorsteps of their homes. This represented limited materiality in the sense that the workers could not observe home spaces and discuss them with the service users. However, these doorstep visits, as well as outdoor visits (outside the home), allowed for the continuation of face-to-face interactions and social contact. The workers found outdoor visits useful, although they noticed that only talking about homes without seeing the home spaces and doing things there together led to the loss of an essential material aspect of their work and in their relationships with the service users. They also noted that home-space talk decreased; service users were more likely to talk about everyday aspects of their home lives when the conversations actually took place within the home. The workers also assessed the use of audio and video calls, finding that increasing their use was necessary for maintaining contact, but these conversations restricted materiality and provided the workers with only limited information.

The workers indicated that after the initial confusion of the pandemic lockdowns, they developed new and creative ways to engage with service users (cf. Banks & Rutter, 2022). Although the materiality of home visits via home-space talk and body work was limited or absent in audio and video calls and in outdoor visits, these methods offered the workers more opportunities to interact with service users. Outdoor visits facilitated a new atmosphere for discussions in a neutral location and the possibilities for visiting new, meaningful places for the service users. The workers also emphasised that the service users who found digital technologies easy to use regarded remote communication as comfortable, going so far as to describe it as enabling more intimate engagement than face-to-face visits (see Pink et al., 2020). These virtual methods of communication have been used and will continue to be used, even after the pandemic, due to the benefits of the hybrid way of conducting work (Pink et al., 2022).

Above all, the workers emphasised that face-to-face home visits are irreplaceable, as they offer time for discussion and engaging in activities together in the home spaces. Homes are the most appropriate places to become acquainted with service users and build confidential relationships. Knowledge and trust are generated when the materiality of the home enables service users and workers to discuss the home and engage in joint activities within the home spaces. For these reasons, as the most critical period of the pandemic was ending, work was continued in the homes, as had been done prior to the crisis; however, the hybrid tools – remote calls and outdoor visits – were integrated with traditional visits. Thus, the pandemic did not cause any major digital turn in the studied service settings. This is similar to what has occurred and has been promoted with a return to face-to-face (home visit) interactions in other social care services (e.g. Children's social care, 2022, p. 7, 16). Hence, our conclusion is that although the pandemic resulted in the creation of new ways to contact service users, these methods cannot replace face-to-face home visits. However, these new methods can be used as complementary tools in community care among adults. For example, outdoor visits at neutral locations have some advantages over home visits, such as allowing easier discussions with service users about their inner thoughts.

Continuing to conduct face-to-face home visits at the margins of community care while under extreme pandemic restrictions can also be interpreted as affirming the importance of materiality

in social care work. If the goal of the work is to safeguard and support service users in living in their homes and communities, it is not possible to do such work exclusively with remote methods (see also Rutter & Banks, 2021). Workers need to be present in the everyday lives of service users to view and communicate about their homes and to perform physical body work, such as cooking and cleaning, with service users, in addition to engaging in psychosocial discussions.

Our findings make visible the simultaneous presence of care and control during home visits at the time of the pandemic. Carrying out standard home visits, visiting service users on their doorsteps and outdoors and attempting to maintain contact virtually highlight strong ethics of care, as service users were not left to survive on their own. However, these ways of maintaining contact with service users also carry a controlling dimension. For example, visiting homes without service users present had a clear control function; the workers wanted to check that everything was in order in these homes. Unfortunately, our study lacked reflections of the service users on caring and control during the pandemic; this would have provided a fuller picture of the situation, including the service users' perceptions and any unintended consequences of the alternative methods used.

The meanings and importance of materiality depend on the context. When the focus of work is, for example, assessing the need for child protection or disability services, shared physical activities in homes with service users are not at the centre of the work. However, home as a physical place of service encounters always matters in some way and becomes intertwined in worker – service user interactions. For example, in child and family social work, face-to-face contact has been justified by the importance of being physically present in the same (home) space, which can strengthen emotional closeness and allow workers to collect sensory-based and contextual knowledge (Calcaterra & Landi, 2023; Casquilho-Martins et al., 2022; Copson et al., 2022). For these reasons, the materiality naturally embedded within home visits is a relevant interactional resource for both social care workers and social workers. This is recognisable in the Finnish discussions and developments regarding adult social work; instead of meeting service users in social work offices, adult social workers seeing them in their home environments and conducting visits in collaboration with social care workers has been increasingly emphasised (Karjalainen et al., 2021).

The inability to fully conduct face-to-face home visits during the pandemic did have at least one continuing positive outcome in that it has accelerated important discussions concerning the places and devices of social (care) work, as evidenced by the increase in publications on home visits, which were previously more limited. However, there is no unambiguous answer to the question of what constitutes a 'proper' place to meet service users; such a place is tied to the aims and objectives of the encounter and requires practical, ethical reflection in situ.

## Acknowledgements

We would like to thank the members of the MARGI research group for their valuable comments regarding our paper.

## Disclosure statement

No potential conflict of interest was reported by the author(s).

## Funding

The research was supported by the Ministry of Social Affairs and Health of Finland [grant number VN/13614/2021] and European Social Fund [grant number S22386].

## Notes on contributors

*Kirsi Juhila* is Professor in social work at the Faculty of Social Sciences, Tampere University. Her research interests include institutional practices in social welfare settings, social work communication, and the issues of social exclusion, marginalisation, segregation, community care, home and homelessness.

**Suvi Raitakari**, Docent/adjunct professor, works as a University Lecturer in social work degree programme at the Faculty of Social Sciences, Tampere University. Her research interests focus on adult social work, home-based welfare work, Covid-19 in the margins of society, qualitative and interaction research method.

**Christopher Hall** is an emeritus researcher. His research interests include child protection practices, social work interaction and narrative research.

**enni-Mari Räsänen** is a University Lecturer in social work at the Faculty of Social Sciences, Tampere University, Finland. Her main research interests concern the issues of technologies, transferring of information, integrated and multi-professional work and home visiting as well as professional responsibilities and boundaries in different social work practices. Her methodological interests are based on ethnomethodological studies of institutional talk and interaction.

**Suvi Holmberg**, D.Soc.Sc, works as a University Lecturer at the Faculty of Social Sciences, Tampere University / Pori Unit. Her research interests focus on qualitative health research, discursive methods and sociocultural meanings of illness (especially cancer) in the context of everyday life.

**Johanna Ranta**, DSocSci, is a Postdoctoral Researcher at the Faculty of Social Sciences, Tampere University. In her research, she applies ethnomethodological, ethnographic and discursive methods to examine the meanings of various meeting places in substance use services. Her recent studies focus on institutional interactions and practices in home-, street- and dark web-based services for people using drugs.

## ORCID

Kirsi Juhila  <http://orcid.org/0000-0002-5244-3669>

Suvi Raitakari  <http://orcid.org/0000-0003-1485-865X>

Jenni-Mari Räsänen  <http://orcid.org/0000-0002-9616-3044>

Suvi Holmberg  <http://orcid.org/0000-0002-0974-0975>

Johanna Ranta  <http://orcid.org/0000-0003-2064-3110>

## References

- Banks, S., Cai, T., de Jonge, E., Shears, J., Shum, M., Sobočan, A. M., Strom, K., Truell, R., Úriz, M. J., & Weinberg, M. (2020). Practising ethically during COVID-19: Social work challenges and responses. *International Social Work*, 63(5), 569–583. <https://doi.org/10.1177/0020872820949614>
- Banks, S., & Rutter, N. (2022). Pandemic ethics: Rethinking rights, responsibilities and roles in social work. *The British Journal of Social Work*, 52(6), 3460–3479. <https://doi.org/10.1093/bjsw/bcab253>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp0630a>
- Calcaterra, V., & Landi, C. (2023). Child protection social workers in Italy and the Covid-19 challenges: Redefining services to support children and their families. *Child & Family Social Work*, 28(2), 395–404. <https://doi.org/10.1111/cfs.12971>
- Casquilho-Martins, I., Belchior-Rocha, H., & Moro, S. (2022). Unfolding social work research to address the COVID-19 impact: A text mining literature analysis. *The British Journal of Social Work*, 52(7), 4358–4377. <https://doi.org/10.1093/bjsw/bcac025>
- Cook, L. L., & Zschomler, D. (2020a). Virtual home visits during the COVID-19 pandemic: Social workers' perspectives. *Practice*, 32(5), 401–408. <https://doi.org/10.1080/09503153.2020.1836142>
- Cook, L. L., & Zschomler, D. (2020b). *Child and family social work in the context of COVID-19: Practice issues and innovations*. [Briefing paper]. Norwich: CRCF. <https://ueaeprints.uea.ac.uk/id/eprint/75973/>
- Copson, R., Murphy, A. M., Cook, L. L., & Neil, E. (2022). Relationship-based practice and digital technology in child and family social work: Learning from practice during the COVID-19 pandemic. *Developmental Child Welfare*, 4(1), 3–19. <https://doi.org/10.1177/25161032221079325>
- Dyck, I., Kontos, P., Angus, J., & McKeever, P. (2015). The home as a site for long-term care: Meanings and management of bodies and spaces. *Health & Place*, 11(2), 173–185. <https://doi.org/10.1016/j.healthplace.2004.06.001>
- Featherstone, B., Gupta, A., & Morris, K. (2021). Post-pandemic: Moving on from 'child protection'. *Critical and Radical Social Work*, 9(2), 151–165. <https://doi.org/10.1332/204986021X16177977296051>
- Ferguson, I., Disney, T., Warwick, L., Leigh, J., Cooner, T., & Beddoe, L. (2021). Hostile relationships in social work practice: Anxiety, hate and conflict in long-term work with involuntary service users. *Journal of Social Work Practice*, 35(1), 19–37. <https://doi.org/10.1080/02650533.2020.1834371>
- Ferguson, H., Kelly, K., & Pink, S. (2022). Social work and child protection for a post-pandemic world: The re-making of practice during COVID-19 and its renewal beyond it. *Journal of Social Work Practice*, 36(1), 5–24. <https://doi.org/10.1080/02650533.2021.1922368>

- Fiorentino, V., Romakkaniemi, M., Harrikari, T., Saraniemi, S., & Tiitinen, L. (2023). Towards digitally mediated social work – the impact of the COVID-19 pandemic on encountering clients in social work. *Qualitative Social Work*, 22(3), 448–464. <https://doi.org/10.1177/14733250221075603>
- Flood, C. M., MacDonnell, V., Philpott, J., Thériault, S., & Venkatapuram, S. (2020). *Vulnerable: The law, policy and ethics of Covid-19*. University of Ottawa Press.
- Green, L., & Moran, L. (2021). Covid-19, social distancing and the ‘scientisation’ of touch: Exploring the changing social and emotional contexts of touch and their implications for social work. *Qualitative Social Work*, 20(1-2), 171–178. <https://doi.org/10.1177/1473325020973321>
- Günther, K. (2021). “Body work” in home-based substance abuse care. *Social Inclusion*, 9(3), 256–264. <https://doi.org/10.17645/si.v9i3.4310>
- Harrikari, T., Romakkaniemi, M., Tiitinen, L., & Ovaskainen, S. (2021). Pandemic and social work: Exploring Finnish social workers’ experiences through a SWOT analysis. *The British Journal of Social Work*, 51(5), 1644–1662. <https://doi.org/10.1093/bjsw/bcab052>
- Holmberg, S., & Räsänen, J.-M. (2021). From home to community: Reflecting emotions related to mobility. *Social Inclusion*, 9(3), 245–255. <https://doi.org/10.17645/si.v9i3.4323>
- Juhila, K., Hall, C., & Raitakari, S. (2016). Interaction during mental health floating support home visits: Managing host-guest and professional-client identities in home-spaces. *Social & Cultural Geography*, 17(1), 101–119. <https://doi.org/10.1080/14649365.2015.1042401>
- Juhila, K., Holmberg, S., Lydahl, D. & Hall, C. (2022). ‘Observing and commenting on clients’ home environments in mobile support home visit interactions: Institutional gaze, normalization and face-work, *Housing, Theory and Society*, 39(1), 82–97. <https://doi.org/10.1080/14036096.2020.1838944>
- Karjalainen, P., Kivipelto, M., Liukko, E. & Muurinen, H. (2021). *Osallisuutta ja toimintakykyä vahvistava aikuissosiaalityö: Opas ammattilaisille*. <https://urn.fi/URN:ISBN:978-952-343-648-0>
- Kong, S. T., Noone, C., Quintana, A., Pharoah, C., Wills, D., Shears, J., Sildatke, K., Roberts, W., Thanki, V., Stepanova, E., Charnley, H., Smith, R. S., Banks, S., & Hawkes, S. (2021). *Social work during COVID-19: Learning for the future. Challenges, best practice and professional transformation*. The Professional Association for Social Work and Social Workers. <https://durham-repository.worktribe.com/output/1604313/>.
- Kong, S. T., Noone, C., & Shears, J. (2022). Social workers’ sensual bodies during COVID-19: The suspended, displaced and reconstituted body in social work practice. *The British Journal of Social Work*, 52(5), 2834–2853. <https://doi.org/10.1093/bjsw/bcab207>
- Manthorpe, J., Harris, J., Burridge, S., Fuller, J., Martineau, S., Ornela, B., Tinelli, M., & Cornes, M. (2021). Social work practice with adults under the rising second wave of Covid-19 in England: Frontline experiences and the use of professional judgement. *The British Journal of Social Work*, 51(5), 1879–1896. <https://doi.org/10.1093/bjsw/bcab080>
- Milligan, C. (2000). ‘Bearing the burden’: Towards a restructured geography of caring. *Area*, 32(1), 49–58. <https://doi.org/10.1111/j.1475-4762.2000.tb00114.x>
- Pink, S., Ferguson, H., & Kelly, L. (2020). Child protection social work in COVID-19: Reflections on home visits and digital intimacy. *Anthropology in Action*, 27(3), 27–30. <https://doi.org/10.3167/aia.2020.270306>
- Pink, S., Ferguson, H., & Kelly, L. (2022). Digital social work: Conceptualising a hybrid anticipatory practice. *Qualitative Social Work*, 21(2), 413–430. <https://doi.org/10.1177/14733250211003647>
- Ranta, J., & Juhila, K. (2020). Constructing a sense of home in floating support for people using drugs. *Qualitative Social Work*, 19(4), 685–700. <https://doi.org/10.1177/1473325019847262>
- Rutter, N., & Banks, S. (2021). *Rethinking rights, responsibilities and risks: Ethical challenges for UK social workers during Covid-19*. International Federation of Social Workers (IFSW). <https://www.basw.co.uk/system/files/resources/rethinking-rights-responsibilities-and-risks.pdf>.
- Scully, J. L. (2023). COVID, vulnerability, and the death of solidarity: “Who do we not save?”. *Journal of Bioethical Inquiry*, 20(4), 601–606. <https://doi.org/10.1007/s11673-023-10250-x>
- Twigg, J. (1999). The spatial ordering of care: Public and private in bathing support at home. *Sociology of Health & Illness*, 21(4), 381–400. <https://doi.org/10.1111/1467-9566.00163>
- Twigg, J., Wolkowitz, C., Cohen, R. L., & Nettleton, S. (2011). Conceptualising body work in health and social care. *Sociology of Health & Illness*, 33(2), 171–188. <https://doi.org/10.1111/j.1467-9566.2010.01323.x>
- UK Government. (2022). *Children’s social care 2022: Recovering from the COVID-19 pandemic*. GOV.UK. <https://www.gov.uk/government/publications/childrens-social-care-2022-recovering-from-the-covid-19-pandemic/childrens-social-care-2022-recovering-from-the-covid-19-pandemic>.