Reflections on the value of a supportive 'village' culture for parents, carers, and families: Findings from a community survey

Brett Lush

The Benevolent Society

Jennifer Boddy

Griffith University

Abstract

In communities where members actively engage with others, perceive their neighbourhood to be safe, and have a positive sense of belonging, children's safety, health, and wellbeing are enhanced. However, over the last few decades, there have been extensive socioeconomic and demographic changes in Australia, which have eroded family and neighbourhood support networks. .We surveyed local residents about whether they viewed their community as a supportive environment, with a 'village' culture, that is, a place where they had developed positive personal networks. Fifty eight parents and carers from three early childhood and education centres identified their observations, perceptions, and experiences about the community environment in which they were raising their children. The community was generally described as a good place to raise children by most residents, but for a small proportion, exclusion and stress were problematic. This small group had limited opportunity or capacity to engage in the community. Informal connections were the most common source of support, but up to 40 percent of the parents were not always able to access supports. Formal services were underutilised, particularly given the level of stress and isolation in the community. In this paper, the authors

suggest measures to help communities and family support services to better understand community cohesion and access meaningful support.

Keywords: Social support networks, social services, social capital, community development, children, family

Introduction

The proverb, "it takes a village to raise a child" has captured people's imagination and stirred spirits. What is it about 'village' culture that challenges and inspires people to think differently? Does the idea of a 'village' evoke notions of trust and reciprocity? Are trust and reciprocity in communities essential in raising resilient children? What goals might community members and service providers pursue to create a 'village' culture supportive of families? Influenced by the idea of a 'village' culture, the authors sought to understand how parents and carers perceived the community in which they lived, and how and where they accessed support when needed. It was hoped that this research would identify parental and carer perspectives about their community in the belief that, when understood, these perspectives might help services shape their delivery models to better engage with parents and carers and support them on their parenting journey. Rather than just depicting a small population of people living in close proximity, we understood a 'village' culture to primarily be one where members engage and connect with others, feel safe, and experience a sense of belonging (Le Bon & Boddy, 2010).

In many ways, the community which comprised the focus of this paper displayed a 'village' culture. There was a long recorded history based on the community's early foundations as a 'country town'. Within this 'village', there were also many engaged stakeholders raising the children, including childcare centres, child health clinics, medical centres, schools, churches, social service organisations, community groups, local and state government agencies, and the parents and carers of the children themselves.

What makes a supportive community?
Although economic and human resources, coupled with access to infrastructure and services are important in any community (Dale & Newman, 2010), a village culture is

more than this. It is also about social connectedness and positive personal networks. According to Moore (2004), "The availability of positive personal networks and supportive communities determines how well families are able to raise their children as they (and we) would like" (p. 11). Principles of inclusiveness, connectedness, equity, prudence (through life-supporting ecosystems and related socioeconomic systems), social cohesion, community trust, political efficacy, and security promote sustainable communities (Black, 2004; Poortinga, 2012). Such principles must also be reflected in service design, which should be responsive, respectful and operate in a collaborative manner (Butler, McArthur, Thomson, & Winkworth, 2012).

Involvement in the community is a key step to building vital social connections (Brown, 2001; Winkworth, McArthur, Layton, & Thompson, 2010) that helps overcome the detrimental effects of ill health and wellbeing (Murayama et al., 2013; Putnam, 2000) particularly for women (Iwase, Suzuki, Fujiwara, Takao, Doi, & Kawachi, 2012). Such support can mediate the effects of low family income on depression, thus reducing the likelihood of disruptive parenting (Lee, Anderson, Horowitz, & August, 2009). In particular, neighbourhood trust can improve psychological health (Giordano & Lindström, 2011). This is because social connections and healthy relationships build resilient families and communities (Dufur, Parcel, & McKune, 2008; Hooper, 2014; McDonald, 2011). Personal networks, including family and friends, provide essential forms of informal support to complement formal services (Moore, 2007; see also Lau & Liu, 2011):

> the ability of parents to support their children is significantly dependent upon the nature of the support they receive from their personal support network, and the ability of their personal support network members to perform this role is in turn dependent upon the nature of the support they get from the broader community. (p. 4)

Social inclusion is also enhanced where informal networks are supported (McArthur, Thomson, Winkworth, & Butler, 2010). This informal support, when available, provides time out, advice, and emotional support, and financial assistance to parents and carers (Webber & Boromeo, 2005), while also reducing rates of self-reported depression (Murayama et al., 2013). Further, children's safety, health, and wellbeing are enhanced in communities where members engage actively with others

in the community, perceive their neighbourhood to be safe, and have a positive sense of belonging (Chaskin, 2009; Edwards, 2006; Gardner, 2002; Hooper, 2014; Sayers, 2008; Woolcock & Narayan, 2000). Not having an informal network - or having one that is fragile - increases pressure on families. McArthur et al. (2010) found isolated families:

> must be able to access the social supports that could make a positive difference for them and their children. One parent [in their study] ... asked what would make a difference to her and her children [and she] answered, 'a social network'. (p. 33)

Aim

The purpose of this research was to explore the nature of supportive communities in the context of child-raising. In partnership with a network of local childcare centres in one Australian community, we examined how effective 'our village' was at supporting local families to raise their children. Using a short survey, the research aimed to:

1. Understand the experiences and attitudes of local parents and carers of young children towards the community as a place to raise a family.
2. Determine the perceived stress experienced by families in the community.
3. Learn how and where families accessed support in times of need.

Method

Participants

Thirteen Early Childhood Education and Care (ECEC) services were offered the opportunity to participate in the survey. The total number of families with children enrolled across the 13 ECEC services was 395 families of which 58 families (14.68%) responded to the survey. All participants had a child under the age of five as is the case with ECECs. Thirteen (13) responses (22.4%) were completed directly online with the balance of 45 completed on hard copy. All the respondents were connected with just three of the thirteen ECEC services with 27 responses (46.5%) coming from a single ECEC service. The low response rate across the 13 services and the over representation from a single ECEC service is a limitation to this study.

The Community

The community surveyed is situated on the outskirts of the Gold Coast with a population of approximately 25,140 people (Australian Bureau of Statistics [ABS], 2006; Gold Coast City Council, 2011). According to the 2011 Australian Bureau of Statistics Census data, the community has a higher number of couples with children at home than the entire Gold Coast city (31.7% as opposed to 27.5%) and a higher proportion of single parents (13.1% as opposed to 11.1% for the city). The community has a varied spread of housing types from unit living to rural acreage and a mix of people from both very low and high levels of socioeconomic status. There are also above average levels of public housing in the community compared to the rest of the city (4.3% compared to 2.3%). Rental rates are diverse but on average it is more affordable than other parts of the city. Only 18.3% of households were paying in excess of $400 per week rent compared to 32.1% of households in the city. One of the key features of the surveyed community is its long history and strong local identity. Residents often describe the community as well connected with a strong local identity and community spirit. Evidence of this broad public opinion can be seen in the high attendance rates at the many local sporting, cultural and celebration events. This connection to place and people cultivates a village style relationship model within the community.

Measures

A survey of 11 items was compiled with questions that were adapted from several research instruments, including the Indicators of Community Strength (Victorian Department of Planning and Community Development, 2008), the Families, Social Capital and Citizenship Survey (Australian Institute of Family Studies, 2001) and the Neighbourhood Cohesion Instrument (Buckner, 1988). Survey items were brief and questioned participants about their perceptions regarding the family friendliness of the neighbourhood, formal and informal supports/connections and sources of stress. Specifically, items included (i) their neighbourhood as a place to raise children (1 item), (ii) child minding and opportunities for community involvement (2 items), (iii) personal stress relating to finances, support, and advice (3 items), and (iv) practical support in relation to accessible services and housing needs (3 items). The final survey item asked participants to nominate their primary sources of support when under stress, selected from a range of personal options and services known to be

available. It was expected the survey would take approximately five minutes to complete and was designed for participants with below average literacy skills.

Procedure

Introductory letters, information statements, and hard copies of the survey were given to each director of the 13 local childcare centres in the community to distribute to their parent group. It was then the responsibility of each director to forward this information to staff, parents, and carers alike. The survey was open for one month. Parents and carers could complete the survey in one of two ways, either on a hard copy which was given to them by their childcare service provider or by responding to an online survey.

Results

Perceived family friendliness of the community

Almost 70% of respondents regarded their community as either a good or very good place to raise children. However, 22% of people rated the community as only a fair place to raise a family and 8% believed it was a poor place to raise a family. Thus, 30% did not experience the community as a supportive place to raise children.

Social connectedness and support

When asked whether or not they had opportunities to get involved in community, cultural, or recreational activities, 90% responded yes or mostly. Seventy-four percent thought they had opportunities to have input into matters affecting them or their families. Only 10% of respondents indicated that if they were unavailable to care for their child/ren for a day or evening they would not have anyone to enlist to help. Almost half of those who did not have child care support also reported limited opportunities to get involved in community, cultural, or recreational activities. Thus, the findings indicate a 'double barrier' for these isolated parents and carers.

Just over 62% of people surveyed indicated they were sometimes, often, or very often unable to access support when they needed it. However, almost all respondents (97%) had someone trustworthy to whom they could turn for advice. The overwhelming majority of respondents identified family, friends, relatives, neighbours, and childcare providers as their primary sources of help in times of need.

It was surprising to discover that only a very small proportion of people, less than 6%, accessed government or non-government family support services. When questioned about accessibility to community resources, such as banks, shops, and medical centres, just over 96% of people felt they had, or mostly had, easy access to these community resources.

Perceived stress

Almost 91% of respondents believed their home met their housing needs. However, 70% of respondents indicated that they were under stress due to high rental or mortgage costs. Twenty-eight percent indicated that, if required, they would not be able to access up to $2000 within two days to cover an unforeseen expense.

Discussion

Most respondents (62%) did not have to access support in times of need and very few respondents sought help from formal family support services (6%). People were more likely to seek it through informal options like family, friends, partners, neighbours, and childcare services. Either the pathways to support for many parents and carers with young children in the community are unclear or the methods used to deliver support to families need to be questioned. Butler et al. (2012) and Moore (2007) noted services may need to move from a professional skill-based approach to a relationship-based approach and from a professionally-directed service to a family-centred practice in order to effectively intercept and engage with families in their time of need.

The response to the survey from the potential population catchment was only 14.68%. All the respondents had children enrolled in one of three participating ECEC services (from a total of 13 ECECs) with 27 responses (46.5%) coming from a single ECEC service. The non-engagement of the other ten local ECEC services and the over representation from a single ECEC service may have skewed the study findings. However this pattern of results may reflect some engagement practices at these centres that could be replicated and studied in more detail. Distribution and promotion of the survey information to families relied upon the enthusiasm of the ECEC directors for this research project. Using ECEC services to recruit respondents also meant that parents and carers who were not accessing these

services were excluded from the study. This study showed that only a small percentage of families were accessing formal services (in addition to ECEC), suggesting that the sample may have missed a large group of families who were isolated from any systems of care. Given this potential bias and the small sample size (N=58), it is not possible to generalise the results to all parents. Although the study was small it provides important insight into the experiences and needs of parents who were accessing ECEC and it adds weight to discussions about the interrelationship between social support, service infrastructure, and socioeconomic status.

These findings have suggested that community organisations should examine their family support programs using the following questions: (i) Are services provided in a way that reaches those who are under stress, isolated and unsupported? (ii) Does the service complement and strengthen the important role of informal and natural support networks? and (iii) Does the service provide opportunities for families to engage in important decisions about their families and their community?

A holistic approach to service delivery must be fostered and encouraged by service provider leaders and managers so that the function and culture of family support services is one that positions them as *part of* a community rather than simply *a service for* the community. This point is well made by McArthur *et al.* (2010):

> Central to the concept of social inclusion is recognition that it is not sufficient for service systems to collaborate so that children and families have improved access to services and that services improve in quality and relevance. Rather, social inclusion depends on creating environments necessary to increase citizens' social, economic and civic participation in their communities. (p. 1)

Areas for further research

Research on community capacity building and early childhood development requires family support services to have flexible approaches to their practice. They must find a common language with parents, carers, and others working with children and families to better understand early childcare workers', parents', and carers' perspectives and beliefs about raising children. This would help family support services to engage parents, carers, and childcare services in developmental

opportunities for children, thus enhancing 'school readiness' and empowering parents and carers. Questions requiring further exploration include:

1. How could family support services integrate their family support strategies to include childcare workers, parents, and carers when working with families?
2. What strategies could family support services incorporate into their practice to build social capital and social inclusion for the families they work with?
3. How can family support services structure their intake processes to best meet both the formal and informal service entry points that families will use?
4. How do practitioners working with children and families perceive their role? Are they a *part of* the community they work in or do they simply offer a *service for* the community?

Creating strong, healthy, family friendly communities certainly requires ready access to parks, schools, public transport, shopping facilities (social infrastructure) and health and community services (social services), but these alone are not enough. Although the provision of social infrastructure and social services is universally recognised as vitally important to building and sustaining a healthy community, the third component for a healthy community, social cohesion, is also important. Indeed, this study has shown that informal social networks are more often used by families in raising their children or managing the stress associated with maintaining a family. Only a small proportion of families access formal services. For those who are under stress, isolated and unsupported, informal networks may be the most effective way of engaging them in the community. Strategies to deliberately build social inclusion and cohesion should form an integral part of the process of planning, developing, and delivering social infrastructure and social services. The degree to which these three components - social infrastructure, social services, and social cohesion - all work together may affect the quality and sustainability of favourable outcomes for children and families living in those communities.

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Biographical notes

Brett Lush is a Community Development Project Worker with the Northern Gold Coast Early Years Centre and active member in his local community.

Jennifer Boddy is senior lecturer in the School of Human Services and Social Work at Griffith University, where she teaches courses on the socio-political context of social work practice, research methods, and social work theory. She has maintained an active role in social work practice, serving as a member of several community organisation advisory boards as well as the Australian Association of Social Work

national social policy committee. She is currently working on studies that explore environmental social work, community capacity building, advance care planning and feminism.