

Component 2:

Relationships within Communities



Near or far, if it's good we will come

During the archive review segment of this research project, the importance of linking people to a community which would support their wellbeing or recovery was reported to be a common part of delivery in programmes funded via PDI. This community re-engagement and/or support appeared in different forms; it could be help with new skills to get back to work, a walking group or a family daytrip to an attraction or the seaside. Often, the intention is that this type of support would result in people being reconnected with the community in which they live, and the services that were based there.

We were interested to find out what people understood by notions of 'community', and the role relationships have in developing or sustaining these communities.



Near or far, if it's good we will come.

GROUP MEMBER

People create communities around them based on who they connect with. This means that a community can be women who attend the same support group or young people who have similar family dynamics.

The most important finding in this section relates to the notion of what a 'community' is. From the research, we learned that

the communities people have strongest relationships in are often communities of shared connection or experience, rather than geographical communities.

This means that a community that is most valued can be the group of women who attend the same group each week, rather than the neighborhood they live in. Often, the supported people only interacted with each other during the groupwork sessions – they did not meet up out with the groups, even if they went to the same schools or lived in the same small towns; the relationships were confined to their relationship with the service.

The feelings of finding a shared experience with someone was incredibly important; and often was exceptionally powerful in supporting people to understand their own experiences or situation.



The biggest thing that came out [from a group session for children living in kinship care] was [a child] ran over to his Grandmother [who he lives with] and said, 'Gran, do you know they [the other children] live with their grans too?' And it was just huge... he just recognised – you know, "I'm not the only person" [who lives in kinship care]. Yeah. And that was a big moment for him.

PRACTITIONER

The way that space was described by people in the research may explain this. Having spaces to congregate safely with their chosen 'community' was described as having immense importance to how engaged people felt with the support offered. The reason that people choose to meet only in the specific place, i.e. the third sector building, appeared to be because it was a recognised 'safe' place to attend or connect with, and so because people were more comfortable containing their relationships, or indeed the relationship to the issues they were receiving help for, to that particular group.



I think one of the big things I've noticed is the friendships that have developed in the families. They, the young people, might not be the same age, but they [all young carers] have got this bond with the other carers, you know they are going on holiday together.

PRACTITIONER

The compartmentalisation of aspects of people's lives, i.e. the support received by a young person affected by a parent's alcohol use, was not a failure to connect with their communities, rather a way of managing very complex emotions and experiences in a safe and moderated way. It also reflected a preference for keeping particular elements of life to a particular day, with no perceived need for it to encroach into other elements of life. For example, one day a week to check in with peers and a third sector worker at a support group, was often enough. While there will always be a need for place-based support and building communities, for many living with drugs and alcohol 'community' building means a community of interest, rather than location, is essential to first build confidence to get out in wider circles.



It gets you out the house, helps you meet people, gets me volunteering

GROUP MEMBER

The routine and knowing that that group happened once a week was often explained as all that was wanted or needed, and that people could get on with the rest of their lives for the rest of the week. Having access to a regular social support network even just once a week contributes to notions of stability, increases motivation for continuous development, and gives a steady stream of access to social situations in which to build relationships. This supports the literature previously mentioned in the scoping and archive review which discusses how attending support services improves access to and development of a 'social capital'.



I like to have a wee group on a Friday, it gives me a good start to the weekend and doesn't make the days feel so long in between support.

GROUP MEMBER

In terms of building these 'communities of connection', sharing new experiences and experiencing an equality of vulnerability in doing something no one has done before, were said to help build these connections between people. Experiences such as this are often found in group work, such as outdoor skills workshops and team building. Individuals in a group, or family members, are able to share in learning a new skill or trying something together simultaneously and have a shared experience to talk about. These shared experiences are what builds connections, and then relationships.

Practitioners told us that trips and experiences are incredibly useful in building relationships, but only when they are part of a larger programme of support. Trips, the kind that involve taking an individual away for a period, can be counterproductive long-term. While the skills and experiences shared there build confidence and are enjoyed at the time, practitioners felt that they have little long term impact once people get home; because all the aspects of the trip are experienced as an individual, rather than as a family, or a 'connected community'. Those we spoke to recognised universally that there are great parts about the trips, principally meeting people and making connections. Trips that included peers or family members were felt to be very useful in improving family dynamics, as they built shared experiences, and something to talk about after the trip ended. Reflecting on the trip and what it meant for individuals, what they learned, and what it meant for their relationships with family, peers or friends was felt by practitioners to be key, and the thing that made the trip worthwhile in the longer term.



That's kind of why I left outdoor [group work]. Because you were raising their self-esteem almost negatively... you're making them feel really good about themselves, but you weren't giving them the skills to then go and deal with what was going on at home.

PRACTITIONER

It appears it is not the activity itself that builds the opportunity for positive development, it's the connections made with others during the trip that are most useful; and when it's within the context of longer term support, that sense of community, connections or family lasts, long after they get home.

We found that there was a distinction between rural and urban areas in supporting people to become connected to community supports. Participants from rural areas said it can be hard for people in need of support to become involved in community projects or activities in rural areas with smaller populations, as it is harder to keep anything private, and so people worry about their friends and neighbours finding out about their drug or alcohol issue.



Some of the young people that we support have a criminal record and so I think trying to get them back into the community to the volunteer work or work or anything kind of can be difficult because their face is all over Facebook or the paper and that creates a barrier.

PRACTITIONER



There has been an awful lot of things that I've thought you know I really liked. But I've always found a really good excuse for not being able to go. Yeah, it's one of those things... if you can find an excuse, and there's this part of you that doesn't want to go then you won't go. People might judge me.

PARENT

When speaking to people and practitioners who worked and were supported in urban areas, this fear of people knowing your business did not appear to prevent people engaging in community projects or support groups. In urban areas, stigma was still a large part of why people are still fearful and hesitant of accessing support projects, but explained this stigma as experienced in a collective sense (towards people who live with drugs and alcohol in general), rather than personal (stigma associated directly

to a someone's personal experiences of living with drugs and alcohol) that appeared more common in people living in more rural areas.



The other big one is stigma. Yeah, the stigma that comes along. For the young person, their parents' lifestyle. People will often say to them, 'aw your mum's a junkie'. So young people distance themselves from certain situations. Going into a club or something, and I think sometimes the clubs themselves have a lack of understanding of like, what might be going on with people. It's partly society which is the barrier itself.

PRACTITIONER



It's hard to feel part of a community when there's no community. The alcoholics and drug users have the biggest communities.

YOUNG PERSON

Reflections

It was clear from the research that creating relationships in a community isn't limited to a geographical location. For some people their community is who they connect with most – a community of interest.

It is important to see the individual, beyond the issue they are receiving support for, and to understand that people have lives out

with a service. People may prefer to leave that element or identity of themselves (i.e. the child with a parent who has an alcohol issue, the mother who has had children removed), squarely in the safety of the support service, which should not be viewed as a negative. Humans have different identities in different settings, and compartmentalising relationships is a perfectly normal part of human interaction – and an effect of stigma.

It is also clear that people who receive support are often content with a degree of compartmentalisation of their lives, appearing to be happier to contain that particular part of their life (support as a parent with an addiction, or support as a teen in kinship care for example) or identity into that particular space or time. Part of this compartmentalising may have been as a result of the shame that is so often felt by people affected by drugs or alcohol, and so there is a preference to share that part of their identity in this safe, trusted space. What is vitally important therefore, is creating opportunities for 'communities of connection' to meet, share and build peer-based relationships, rather than focusing only on getting people connected to the geographical community in which they live.

Making connections with others in similar situations appears to be what is most beneficial to people accessing support. The connections and relationships described were rarely what would be identified as therapeutic relationships – rather relationships based on consistency, routine, equality and presence.