INFORMAL SUPPORT IN A YORKSHIRE TOWN: INTERIM FINDINGS

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This paper:

- draws out the implicit 'rules' surrounding the giving and receiving of help;

- analyses the language in which people frame their acts of kindness;

- identifies mediating factors that can foster or inhibit mutual aid in local communities.

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Summary

This study is an exploration of informal support in the West Yorkshire Town of Hebden Bridge. We look at the small, everyday acts of kindness that sustain us throughout our lives. This has rarely been a topic for research and it could be argued that the focus on 'official' social care policy has marginalised concerns about care and support in everyday life. To try and address this gap, we used a locality-based study to examine the dynamics of giving and receiving. Our aims were to draw out the implicit 'rules' surrounding the giving and receiving of help; to understand the language in which we frame our acts of kindness; and to identify the mediating factors which can foster or inhibit mutual aid in communities.

Between April and June 2013 we carried out a 'rapid capture' survey in Hebden Bridge. The report presents some interim findings from this first phase of the research.

Beliefs about giving and receiving support

While people engaged with the topic, they often struggled to articulate their thoughts around giving and receiving. Participants often drew on the language of religious or therapeutic discourse and vocabulary associated with community in order to frame their ideas. In the course of these conversations, we identified four 'theories' that people drew on to explain their views about everyday support:

- *The moral life* – the belief that giving and receiving are morally right. Giving can be a reward in itself, but can also include notions of duty and care as a 'moral burden'.

- *The social good* – the belief that giving and receiving are essential to create a good society. This introduces notions of fairness and social justice and the idea of 'making a better world'.

- *The human condition* – a belief that there is something inherent in human beings that makes us give. Whether this is our genes or our social nature, the belief sees love, empathy and caring as intrinsically human.

- *The hope of return* – a belief that 'if we give, so shall we receive'. This was predicated on a notion of the world as functioning according to balance and fairness.

Despite the articulation of these theories, participants' actual practices of giving and receiving were more complex. Their overarching beliefs were bound about by unspoken rules which people used in the assessment of whether or not to help others.

- **Balance in giving and receiving** – reciprocity was the most important rule of all, a fair balance in giving and receiving. There are 'honourable exceptions', in the case of emergency or illness, but people can feel discomfort when 'indebted' to others.

- **Trust in giving and receiving** – in order to give and receive, people needed to trust. Long-standing relationships with those who are non-judgmental and honest enable people to construct a durable matrix of support.

- **Deserving recipients** – those who give like to feel that the recipient is worthy of help in that they feel gratitude and do not possess an unreasonable sense of entitlement. People resist being seen as 'needy', as being perceived as too demanding is often not tolerated by the giver.

- **Self-protection** – people could be self-protective and sometimes expressed concerns about recipients getting too intimate, or being 'scary' or aggressive. Men were often particularly concerned about their intentions being misinterpreted or not having the competency to help. In these circumstances, people could refuse to give help or lay down defined boundaries.

- **Duty** – a sense of 'duty', usually familial, can override all the previous rules. This duty is often embedded in loving connections. However, even when family members are seen as difficult or draining, a strong sense of duty will often ensure support continues to be given.

How people used these theories and rules depended on their particular life experience. To tease out this interplay, we looked again at what they said through the lens of four overlapping 'domains':

- **Society** – the influence of the wider socio-political and economic context.

- **Geography and culture** – the impact of the small town, semi-rural nature of Hebden Bridge.

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- ***Families and other relationships*** – the influence of inter-personal relationships.

- ***Emotions*** – how emotional responses to the world influence giving and receiving.

By identifying the mediating factors of giving and receiving within each of these domains we can understand: how the rules are generated and enacted in practice; how giving and receiving are mitigated by life experiences; and identify the range of ways that people respond to these interrelated life experiences.

Society

People were acutely aware of the current culture of economic austerity. This awareness could make them more sensitive to those they saw as in need. Prevailing discourses around 'welfare dependency' could also reinforce people's fears about their own dependency. Some people felt that society was increasingly individualistic, work obsessed, competitive and, at times, selfish. We identified three main responses to these perceptions about society:

- *Resignation*: a general disillusionment at the loss of supportive social connections and generosity in society.

- *Counter action*: actively mitigating negative social change by community organising, alternative counter-cultures and organisations such as food co-ops, environmental action groups and self-help groups.

- *Persistence*: that one had to 'chip away' and 'do what you can' for oneself and the people around you, regardless of changes in wider society.

Geography and culture

The prevailing culture of people's formative years was an important mediating factor. People talked about coming from hill-farming communities where good neighbourliness was essential, or about living in isolated areas where they depended on support from neighbours, where harsh winters and flooding were not uncommon. Hebden also felt 'knowable' and special because it was small and people were more community minded. This was the reason many had moved to the town and people felt that this had a self re-enforcing influence on the community.

However, only a small number of people felt completely comfortable in receiving support from others and for those who did, this was often linked to an upbringing with some religious element where giving and receiving were part of a philosophy of life. Many participants also made reference to Northern working class backgrounds, which they felt valued relationships over material wealth. Yet, that same culture also taught a strong sense of individual independence, which could make the need for help seem like a weakness. In this way, cultures could be experienced as both supportive, and simultaneously as harsh and inflexible.

Families and friendships

Whilst early caregivers can model good, supportive relationships, they can also set up patterns that are hard to shift. For many, the family was a pivotal site of learning about caring for themselves and others and one which enabled them to form strong supportive bonds. However, many people reported negative childhood experiences of parenting, which appeared to have a lasting effect on the way they engaged with support in their adult lives. Families often encouraged giving while simultaneously demanding rugged independence. This seemed to stem from a sense that asking for help would be construed as a weakness or a moral failing. Many people felt that asking for help was to be seen as a 'charity case', as wanting 'something for nothing', the very opposite of reciprocity.

In contrast to the bind of family duty, people felt able to choose amongst friends according to their need. In friendships, the rules of reciprocity were more fiercely adhered to and contractual bonds were often less binding. However, friendships were not without difficulties and people often spoke about being careful who they shared information with. In the case of both family and friends it seemed that there was a sense of not wanting to be vulnerable, of wanting to maintain a sense of pride and independence.

Emotions

There were clearly positive emotions related to giving support, people talked about feeling good about themselves when they gave and feeling a connection with and empathy for others. Whilst giving help seemed relatively unproblematic, asking for and receiving help could be experienced as emotionally painful and evoke a range of difficult emotions, most notably embarrassment, shame and humiliation. For some people, asking for help could potentially damage their self-image as it was associated with the expression of vulnerability and dependency. The

feelings of shame also seemed to be connected to being 'indebted' to others, which might create a loss of face and social standing. For some, this conflict about receiving support could result in a 'defensive self-reliant' style of relating, where people refused help even when they desperately needed it. It seemed that the admission of vulnerability could be the very barrier to asking for help at the point at which it was most needed.

Some initial conclusions

- Decisions about giving and receiving support are often made on the basis of affective, rather than deliberative or rational, processes and it is not clear how these interact with norms of reciprocity. We need to take account of the role of social conflict and emotions in the 'decision-making ecology' around informal support.

- Positive emotions are important, especially in relation to giving support. This lends credence to research in the 'positive psychology' tradition, which suggests that engaging in helping others boosts well-being.

- However, difficult emotions may prevent people asking for or receiving support. This may relate to research which suggests that people are more affected by 'bad' or threatening experiences, than neutral or 'good' experiences.

- Not all informal support and care is experienced positively. This can reinforce a sense of dogged independence, yet a position of self-reliance can be precarious because when dependency is unavoidable it can create conflict and compound feelings of shame and humiliation.

- Giving and receiving support is constantly negotiated within a complex 'moral economy' of familial, local and societal expectation and does not happen spontaneously. In this sense, it exists as an ecosystem which requires cultivation and individual regulation because it can evoke personal hurts and disappointments.

- At this stage, people did not speak about being negatively affected by wider discourses of risk and regulation. Regulation may well be an issue for people when they consider whether to give help, but their primary concern was the 'risk' of engagement and focused on the costs and benefits of giving and receiving.

- The reluctance to admit needing help from others appears to be strongest amongst people who may have higher support needs (such as older and disabled people). This resonates with other research suggesting that the individualistic 'autonomy/independence myth' circulating in wider culture, and promoted by successive governments, may have been internalised by people in unhelpful ways. People may feel the need to socially distance themselves from any associations with neediness or 'dependency'.

1. Introduction

This report is based on findings from the first phase of a two-year research project in the West Yorkshire town of Hebden Bridge. The research is funded under the JRF programme on 'Risk, trust and relationships', which examines informal support in an ageing society. The project is being carried out by a partnership between the University of Central Lancashire and 'red' consultancy.

The literature in the field emphasises the need for 'low level community kindness' (Lindley *et al.*, 2012) or 'neighbourliness' (Pilch, 2006) across society, not just for older people (who may be just as likely to *give* support, as well as *need* support from others). However, we do take into account the knowledge that isolation can increase with age and older people tend to be in greater need of this social resource (Dalley, 2012; Lindley *et al.*, 2012). Therefore, whilst this research does not specifically focus on older people, we include a greater proportion of middle to older aged people in our sample. This helps us to provide more relevant data for our focus on informal support in an ageing society.

Although we may believe that small, everyday, acts of kindness sustain us throughout our lives, this has rarely been a topic for empirical research. Indeed some have argued that the focus on official social care policy and practice has actually marginalised and devalued concerns about care in everyday life (Barnes, 2012; Williams, 2003):

> "Care is so fundamental to our capacity to live together that we simply cannot see its significance...[Therefore] we need to be able to recognise care, and its absence."
> Barnes, 2012, pp.3–6

To try and address this gap, we use a locality-based study to examine the dynamics of giving and receiving support in one particular area. Our aims are; to draw out the implicit 'rules' surrounding the giving and receiving of help from others; to understand the language in which we frame our acts of kindness; and to identify the mediating factors which can foster or inhibit mutual aid in local communities.

Our research is grounded in:

- A psycho-social approach: a belief that giving and receiving support are influenced by a complex interplay of affective and social factors (Lindley *et al.*, 2012). This means that we need to pay attention, not

only to individual needs, but also to the socio-political context in which those needs are produced and experienced (Froggett, 2002).

- An ethics of care perspective: we see support as a political as well as personal issue where care in everyday life is essential to the well-being of society as a whole, not just those in receipt of care services (Barnes, 2012).

- A belief that investigations about 'informal' support should not be used to legitimise a wider political agenda of undermining formal and semi-formal welfare provision (Morris, 2011).

Our research will be conducted in two main stages. This interim report concerns the first phase of the research where we begin to identify how people in the locality understand the concept of help/support through a 'rapid capture' survey in the locality. In phase two of the research we will use ethnography, semi-structured and in-depth biographical interviews with key community members to explore in more depth the themes which emerged from stage one. This will include working with at least three identified sites in the locality to enable us to refine our definitions of different kinds of low intensity support and explore more fully the psycho-social factors which inhibit and facilitate the giving and receiving of informal support. This will enable us to develop case study narratives to illustrate and understand participants' day-to-day lived experiences of informal support.

The research focuses on Hebden Bridge, a market town in the Calder Ward of the Metropolitan Borough of Calderdale, on the border of Yorkshire and Lancashire, in the North West of England. This site was chosen not for its 'representativeness' but because in many ways it is atypical. It has a reputation for being a cohesive town with strong support networks based on established community activism as well as traditional extended families. The perception of the town, as a place where mutual aid and community ties are strong, makes it a potentially rich context for the exploration of low intensity support.

2. Hebden Bridge

Hebden Bridge ('Hebden') nestles in a steep valley on the Yorkshire side of the Pennine Hills. It grew at the end of the nineteenth century as a thriving mill town, a major producer of woollen goods for urban markets, but its manufacturing status was undermined with the introduction of cheaper imports. By the 1960s, its story echoed that of a hundred other mill towns across the north, a lack of local employment, few facilities and deteriorating housing stock (Spencer, 1999).

In the 1970s, however, Hebden began to experience a revival with the influx of a new wave of urban dwellers; artists, writers, musicians and 'New Age' activists who were seeking a place to settle, a place to explore their creativity and develop alternative lifestyles. This inward 'hippy' migration continued into the eighties, developing Hebden's reputation as an alternative refuge. People started to see its potential for a more community-based way of life that was felt to be missing in more urban environments (Barker, 2012).This potential also resulted in an inward migration of lesbian, gay and bisexual people who have chosen to live in the town. More recently, a sizeable population of well-educated professionals have chosen Hebden as a place to live and work (it is within easy commuting distance of a number of cities such as Leeds, Manchester and Preston) or to retire.

There is also a feeling locally that inward migration in the last decade has resulted in an increasing 'gentrification' of Hebden Bridge. The local website 'HebWeb' describes these more recent incomers as 'wealthier yuppie types' and there is a sense that these new arrivals have yet to find a place in a town where hill farmers rub shoulders with crystal healers, lesbians and city commuters. At the same time, it is important not to over-stress the diversity of that inward migration, as Hebden has a largely white population (less than 5 per cent of the population are classified as non-white).

In terms of its age profile, Hebden Bridge is equally atypical. Migration on the part of educated professionals and early retirees has led to a 'bump' in the 45–59 age group, and the younger 16–24 age group constitute a lower proportion of the population than for England overall.[1] This may have implications for the town, in terms of support, as its population ages.

Many of these recent migrants have also engaged with local community politics and been active in the Hebden Bridge Community Association

(HBCA). The association raised funds to refurbish the Town Hall, after negotiating with the council to create an asset transfer to HBCA. This type of activity is characteristic of a town like Hebden, where there are a multitude of self-help groups, community groups and local networks which combine to create an active and vibrant community.

3. The rapid capture street survey

The intention of this informal survey was to gather qualitative data from as many respondents as possible in a short timeframe. The survey did not aim to capture a representative sample (although we worked in a range of sites in order to ensure diversity in our respondents), or to generate statistical data. We aimed to generate a large amount of data from a broad sample in order to begin to outline the social rules in the field of informal support.

The aim of the exercise was to:

- identify the language of giving and receiving and understand how people speak about informal support;

- begin to identify the 'rules' and 'theories' of giving and receiving and how they are enacted in everyday life;

- begin to unpick how these understandings are filtered through life experiences, and embedded in life contexts;

- identify key themes to explore in later phases of the research;

- select sites and individuals for the next stage of the research.

The survey consisted of six questions about the giving and receiving of help as well as some basic information about the respondents (see Appendix for questionnaire). We collected 151 responses from people on the streets of Hebden Bridge in a survey that took place over five days between April and June of 2013.[2]

Who we spoke to

Of the 151 people we spoke to, 69 (46 per cent) were male and 82 (54 per cent) female.[3] All the participants were white. The participants were largely from Hebden Bridge itself (72 per cent) and the surrounding area. A total of 94 per cent lived in West Yorkshire and 91 per cent lived in the Calderdale area of West Yorkshire.

Table 1: Area breakdown of respondents

Area	Number	Percentage
Hebden Bridge town (post code HX7)	109	72
Surrounding area (other Halifax post codes HX2/HX3/HX4/HX5/HX6)	19	13
Todmorden	9	6
Other, West Yorkshire	6	4
Outside West Yorkshire	9	6
Total	**151**	**101***

Note: *Total figure rounded up

The sample was weighted towards the middle to older age range of respondents, which reflected our targeting of slightly older respondents.

Table 2: Age breakdown of respondents

Age group	Number of respondents	Percentage
Not known	22	14.6
0–25	3	2.0
26–45	25	16.6
46–55	22	14.6
56–65	42	27.8
66–75	19	12.6
75+	18	11.9
Total	**151**	**100%**

Note: People were also asked if they regarded themselves as having a disability and 26 of the respondents (20 per cent) identified themselves as disabled.

Data analysis

Using an iterative process of data analysis and an interpretation panel, we analysed the responses of our participants to identify some beliefs around giving and receiving support, and the 'rules' which inform that process. This allowed us to identify some key factors which appeared to mediate informal support.

It is important to note that at this stage we are only able to report what people were prepared to disclose in the constraints of a street survey, therefore, we can only give a partial picture of people's experiences of giving and receiving support. We cannot claim it reflects what people actually do (or do not do) in relation to supporting each other, but we will explore this further in the next phase of the research.

4. Early findings: Giving and receiving support

The language of giving and receiving

Most people we spoke to were interested in and engaged with the topic, but we noted that they often struggled to articulate their thoughts around giving and receiving support. This may be because these were taken-for-granted experiences, embedded in everyday life and rarely articulated explicitly. In addition, there is no universally agreed language to describe the subject matter (hence the necessity of the research in the first place). Because of this, people could easily get confused with more formal support and services (which people are more likely to be asked about). Moreover, we were asking participants to reflect on their experiences in a public space, and some were understandably reluctant to share personal information or beliefs on so fragile an acquaintance. In the early stages of the research, we noted that women tended to be more willing to stop and talk to us, so we made a conscious effort to increase the numbers of men in the sample. We noticed that men, on the whole, seemed less comfortable speaking about these issues and said less than women.

Despite these constraints, once people grasped the subject, they were generally willing to share their thoughts and experiences. Participants tended to draw on broader discourses, for example, people often used the language of religious or therapeutic discourse and vocabulary associated with community and neighbourhood, to express their thoughts about the subject. Perhaps not surprisingly, in a sample which was all white and representative of middle-older age groups, people often seemed to draw on Judao-Christian traditions and the language of the bible in order to describe their thinking around giving:

> "There but for the grace of God go I; I'm no hero but I think it's important to quietly get on and do what I can."

> "My Quaker upbringing. You're taught that it's the duty of the fittest and strongest to help the weaker and poorer."

The notion of reciprocity, in particular, was often framed using religious language, whether the participants professed a faith or not. It seemed that early cultural influences may have given people a language which they often used to frame their understanding:

> "You give out what you want to receive. Do unto others as you want them to do unto you."

> "I like to treat people the way you want to be treated yourself."

People sometimes drew on the more contemporary language of feelings that has become commonplace in western cultures, with the increasing prevalence of therapy in people's lives (especially residents of a town like Hebden). People did not just have sympathy for others, they had 'empathy' for their experiences and were keen to respond appropriately.

> "It's part of being in Hebden Bridge, empathy, and putting yourself in their position."

> "It's part of life that you don't want to see people suffering, empathy."

Not surprisingly, people also used the language of community to frame their understandings of giving; it was about 'neighbourliness', living in a community, being 'connected'.

> "I need to feel I'm not alone, have community contact. I need to feel connected to a community. I'm sure that I get most from it; feeling useful."

What seemed important was not the belief system that the language represented, but more its ability to encompass the experience of the participant. Respondents appeared to 'mix and match' the language they used, drawing on expressions and vocabulary which were available to them, regardless of their own belief systems, to help them to express their experiences and thoughts about informal support.

Perhaps the most significant finding here was the struggle that some respondents had finding the language to describe their experience. It is likely that the availability of a clear and common language to describe experience has an impact on how it is framed and enacted. We will explore this further in the next phases of the research.

Asking for help

Whilst respondents universally saw giving help as a 'good thing', paradoxically they were often less positive about the notion of having to ask for, or accept help, from others. While the aim of the survey was to provide qualitative data about the nature of informal support, it was striking

that many participants reported being reluctant to ask for help. The desire of our respondents to be independent was a dominant theme in the research and on further analysis we found that certain factors seemed to influence people's willingness to ask for help (these factors are explored in more detail later in the report).

Beliefs about giving support

Participants cited a wide range of reasons why they would give support to others. These could be self-interested motivations or emerge from a more altruistic value base, but underpinning their understandings were often wider beliefs about the nature of giving and receiving in society. These were, in a sense, overarching ethical or explanatory 'frameworks for living', by which people made sense of the world. We identified four key underlying 'theories' of giving support:

1. The moral life

Beliefs based in, or derived from, religious or ethical cultures and values – giving and receiving are the 'right thing' and part of living a moral life. This could be very positive for the giver, as the feeling of doing good was in itself a reward. However, this could also include notions of duty and responsibility and, for some, caring responsibilities were a moral burden they felt they could not simply shrug away, even at a cost to themselves:

> "My motivation is Jesus, he is the saviour of the world, he has forgiven my sins and it's about being like him, following his example and living a good life."

> "Basic morality. I'm not a church person but believe that you do unto others as you want them to do to you."

2. The social good

Related to the moral life – this belief proposes that giving and receiving are essential to create a good society. This is different to "goodness" in a moral sense but tends to encompass notions of fairness and social justice, the purpose of behaving in such a way is to make a better world:

> "The world would be a better place if more people helped each other."

3. The human condition

There are theories of human nature which propose that there is something inherent in human beings that makes people care and give. This can be our genes, our social or 'herd' nature or our 'basic humanity'. This theory encompasses ideas of love, empathy and caring as human connectedness is intrinsically human. For example, we may give to others because we empathise with their suffering ('I've been there so I know what it's like'):

> "I see giving as part of my make-up really – that is what I do."

> "Got to do it. It's life. It's part of being human."

4. The hope of return

The hope of return is the belief that 'if we give, so shall we receive'. This is also a belief predicated on a notion of the world as functioning according to balance and fairness. In this world, goodness will ultimately be justly rewarded or repaid.
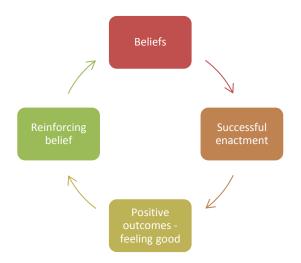
> "Do unto others as you want them to do to you."

> "*Quid quo pro*; what goes around, comes around."

Variants of these beliefs were frequently articulated and often related to one another. These were not mutually exclusive and people often draw upon more than one belief in tandem. All of these beliefs had a similar effect in that if the 'believer' managed to act in the world according to their professed belief, they should feel positive about themselves and perceive themselves as useful and virtuous. This, in turn, can contribute to our motivations for giving. Therefore, we can draw from the participant's beliefs a virtuous and ideal cycle of giving:

The ideal 'cycle of giving'

Figure 1: Cycle of giving

This 'ideal' model would (in theory) result in a constant virtuous cycle of giving support. However, in practice, the process of giving and receiving is rarely so simple. Such a model is underpinned by behaviourist principles and assumes an underlying human rationality, yet we know that people often do not act autonomously or rationally in accordance with their expressed ideals and beliefs. We may say this is the difference between people's 'espoused theories' of giving and receiving support, and their 'theories in use' (Argyris and Schön, 1974*)*. In other words, the difference between what people say they do and what they actually do. Whilst our espoused theories of giving and receiving help are easier to make explicit, the structures that govern our actual behaviour tend to be more tacit, and implicit, complex factors get in the way, including situational circumstances and negative experiences. We will identify some of these mediating factors later in this section.

In addition, whilst people readily articulated why people should support others, it was much harder for them to articulate why they might accept support from others. When people talked about examples of giving and receiving help, it was clear that their assessments were complex and multi-faceted. In other words, they did not always fit the conscious beliefs about helping that people articulated. In practice, there were many informal 'rules' that people developed about giving and receiving help.

The rules: The conditions of giving and receiving support

Balance in giving and receiving

All of the beliefs identified above implicitly relate to underpinning norms of reciprocity. Moreover, reciprocity seemed to be the most important rule of all – that there must be a fair balance in giving and receiving. This tends to be internally monitored and constantly adjusted according to circumstances. There are times when an imbalance in giving and receiving is tolerated, such as when the person is a close family member or if someone experiences illness or disability. This could be referred to as an 'honourable exception'. However, any imbalance is often hard for the potential receiver of help to tolerate and people find it very difficult to accept help if they do not feel able to return it. People often expressed discomfort in feeling 'indebted' to others. It seems important that people do not feel 'dependent' or 'needy' on the one hand, or 'put upon' on the other:

> "It's like a computer game in a way, where you see how many points you've got and how many they've got and you can see where you are with someone."

This finding supports the available literature, which consistently emphasises the importance of reciprocity (Breheney and Stephens, 2009; Dalley *et al.*, 2012; Lindley *et al.*, 2012). In particular, it lends some support to what has been identified in the literature as 'direct' reciprocal pro-sociality, where the helper expects the person helped to return the favour in some way; and 'indirect' reciprocity, where the person believes that, if they are helpful, it will induce others to be helpful, which will then indirectly benefit the helper (Dalley *et al.*, 2012). In addition, Bowers *et al.* (2013) highlight the importance of distinguishing between the twin notions of 'mutuality' and 'reciprocity', which are often used interchangeably. In this study we regard 'mutuality' as the sharing of support between peers, whilst 'reciprocity' could be defined as the assessment of the flow or balance in that sharing. This distinction will be important as we explore these notions in later phases of the research.

Trust in giving and receiving

Trust was also seen as essential to decisions about giving and receiving support. In order to give and receive help from others, people felt that they needed to trust people's motivations and believe them to be acting in good faith. In contrast, people often said they rejected help when it came from a source that they felt was patronising or demeaning. The personal qualities of the helper are a key factor in the decision of the receiver to accept help. Long-standing friends or family, a loving relationship, people who we believe are non-judgmental and will be honest with us – these all tell us that someone is trustworthy and enables us to construct a durable matrix of support around us. However, even this may be delicate and precarious at times.

> "When you think someone has something to gain from it. Sometimes it's about people themselves; it makes them feel better if they think you feel bad or are needy."

> "People who help others might do it for ego reasons to portray a certain image of being strong."

The importance of trust is not surprising, especially as it is a precondition for our necessary interdependence. In an examination of the care of older people, Lindley *et al.* (2012) found that care could only be effectively given when accompanied by a relationship of trust. Trust is a key facilitator in giving and receiving.

Deserving recipients

Here, the potential giver of support feels that they must believe the person 'deserves', or is worthy of, help. For example, they must not be ungrateful, have an unreasonable sense of entitlement, they must be able to take care of themselves whenever possible and not be (as one person put it) a 'black hole'. Equally, people do not want to occupy the position of 'neediness' since people who are seen as too demanding are often not tolerated:

> "Probably people that I don't feel deserve it, people who are perfectly capable of helping themselves and getting on with it."

> "If someone's milking it. If they're capable but can't be bothered, you begin to resent it."

Self-protection

People spoke of taking into account what risks they are prepared to take when deciding whether to give help. This is not necessarily about physical safety as such but more about protecting/maintaining their sense of self and needing to feel in control. Some concerns were expressed about people overstepping the mark by getting too close or too intimate or by being invasive and 'taking over'.

> "When I first had the baby sometimes people offered help and I felt like it was sometimes because they thought you were doing it wrong, it wasn't really help, just pushy."

If people asking for or offering help are scary or aggressive, or it involves intimate relationships where there is acrimony, people will often protect themselves by refusing help or laying down clear boundaries. This is usually to protect the potential helpers from becoming 'embroiled' in other people's business or over-involved; or the receivers from feeling uncomfortable or unsafe:

> "I don't want to interfere in any family matters. I don't want to say anything wrong, or if I don't know the others involved. You can't judge. You don't know how others will react."

Other kinds of considerations came under this 'rule'; such as those relating to wider perceptions of risk, gender and socio-cultural norms. For example, one male participant made the following judgement about giving help:

> "I wouldn't help with little kids, because society is so horrendous. Even close friends, I wouldn't babysit because there's too much of a blame culture. The way the media is – I wouldn't lay myself open."

Men were often particularly concerned about their intentions being misinterpreted or not having the competency to help.

Duty

A sense of 'duty', usually familial, can override all the previous rules. This duty is often embedded in strong and loving connections. However, even when family members or situations are seen as difficult or draining, a strong sense of duty in a family culture will often ensure support continues to be given:

"I have an older brother with disabilities who I help with everything, practical, financial, medical, all sorts of help. I've been doing it for a good number of years since my mum died; she did everything for him and I took over I suppose. Its family responsibilities, I couldn't turn my back on him, although I've been tempted!"

Factors mediating giving and receiving support

Whilst people's 'beliefs' and 'rules' informed their willingness to give and receive help, there appeared to be a complex interplay between people's consciously articulated beliefs about informal support and what they actually did. In this section we start to identify some of the factors that people felt influenced their actual practices of giving and receiving. We locate these factors within four interrelated 'domains of experience' (adapted from Froggett, 2002):

- Society – how the wider socio-political and economic context influenced people's understandings and actions around giving and receiving.

- Geography and culture – how the small town, semi-rural nature of Hebden Bridge mediated people's understandings of giving and receiving.

- Families and other relationships – how inter-personal relationships help to form people's thoughts and behaviours around giving and receiving.

- Emotions – how people's emotional responses and personal feelings influence our responses to giving and receiving.

These domains are overlapping, inter-related and shape people's individual experiences of giving and receiving support. More than this, people's experiences within these domains can create, reinforce or counter many of the more explicit social rules which guide our actions. By identifying the mediating factors within each of these domains, we can begin to develop a more nuanced picture of how giving and receiving is enacted in social life. By using this approach we can understand: how the rules are generated and enacted in practice; how people's actual experiences of giving and receiving support are mitigated by their life experiences; and identify the range of ways in which people respond to these complex and interrelated life experiences.

Society

People were acutely aware of the changing nature of wider society and of prevailing social norms which did not always value kindness or mutual support. In particular, people referred to the current culture of economic austerity and cuts to public service provision. This made some of them sensitive to those they saw as in need of support during these difficult times. People seemed to be aware of the prevailing discourse around 'welfare dependency' and it seemed likely that this tapped into and reinforced their underlying fears about their own dependency. For some, this awareness increased their need to be 'independent'.

Some people also felt that society was increasingly individualistic, work obsessed, competitive and, at times, selfish. Many expressed a sense that people generally seemed to have less time for others and that this could make it harder to ask for or receive help. We identified three main responses to these perceptions about society:

Resignation: This response was characterised by a general fatalism and disillusionment in the breakdown of social connections and generosity. This response was usually expressed by older people who felt isolated and left behind by new developments, both in society and in their local neighbourhoods, which they felt negatively impacted on people's willingness to look out for one another. It also tended to be characterised by a perception that society was changing for the worse and sometimes nostalgia for a past within living memory when people seemed to be more caring to one another. This often meant they expressed some regret at their lack of supportive connections:

> "The street used to be a social space – we used to put up lines across the street for kids to play badminton, but that's changed since the rise of prosperity."

> "I've seen the world change. Even the leaders of the world don't help each other. You try to keep your head down and take it easy."

Counteraction: a number of participants responded to the wider context by involvement in attempts to create a better society through the creation of alternative counter-cultures and involvement in alternative social organisations such as food co-operatives, environmental action groups and self-help groups.

"I actively choose to spend my money off the stock exchange. I try to make every purchase local."

Persistence: These responses tended to be characteristic of people who had less clear-cut views about the way that society was changing. This response was expressed by a general feeling that one had to chip away, on a low key basis, and do 'what you can' for oneself and the people around you, regardless and independent of changes in wider society. This response includes people who felt that they always make efforts to help those around them, as well as those who feel that in times of austerity it is even more important to help people who are likely to be struggling:

"No matter what the government does or says, looking after each other is normal for a lot of people."

Geography and culture

An important mediating factor was the prevailing culture in which people spent their formative years. People often talked about involvement in particular organisations whose cultures had helped imbue them with a sense of social responsibility towards others. This may have been religious/spiritual, political or socially conscious upbringing:

"I come from a family who were very politically active and believe you should be socially engaged and responsible."

"The way I was brought up. Irish working class culture. The further you go up the social class, the more people just look out for themselves."

This often related to key factors like class, geography and place. Some of these factors seemed to have a more straightforward and positive influence on helping relations. For example, some respondents talked about being from hill-farming communities where there was often a developed culture of helping each other out. Here, good neighbourliness was essential for sustaining livelihoods in what was often a harsh and increasingly marginalised existence:

"I get help from the next door neighbour. I live on a farm so they're more likely to help me if I need to move a pig or bring a bale."

Others spoke about living in isolated areas where they depended on support from neighbours, especially during the winter when they were 'snowed in' or flooded (a not uncommon occurrence in Hebden). Here,

events which were out of individual control, such as natural disasters, could position helping within the 'honourable exception' category of 'the rules of giving'. Moreover, this sense of social connectedness and responsibility could spill over and positively affect the relational culture of the place or neighbourhood more generally:

> "When snowed in, a group of us organised a dig; and when the lane was washed away, likewise. You can't survive in a village without helping each other."

In addition, this expressed willingness to receive help was often related to certain upbringings and cultures which emphasised the morality and necessity of giving *and* receiving. There were actually a very small number of people who expressed being comfortable with accepting/receiving support from others. Some of this appeared to relate to certain religious upbringings where giving and receiving support appeared less problematic and the 'rules of reciprocity' seemed to matter less:

> "I'm very good at it. I'm very grateful for help and think I was brought up to accept it. It works both ways – it's uncomfortable for everyone if you say no. My dad was a minister and help is given in many ways."

Many participants made some reference to coming from Northern working class backgrounds. They felt that this culture valued relationships over material wealth and this made them more likely to support their neighbours and invest in their localities. At the same time, this culture held potentially conflicting messages. Whilst they were taught to value and support others, they were also given a strong sense of individual independence and a demand to 'stand on your own two feet'. This strong sense of independence could make it difficult for them to ask for help and the need for help could be perceived as a weakness or failing of the individual or their family. In this way, cultures could be experienced as both supportive and collectivist and simultaneously as harsh and inflexible:

> "I don't ask. I help everyone else. I always want to do the best, maybe I think it's a failing, like I can't cope. I'm not a spring chicken and think I should know what to do and carry on. It's a familial thing, my upbringing, being from a good West Yorkshire coping hills family."

A number of respondents also referred to the environment of the local town. This was partly because it was small and 'knowable', but also that it

felt a 'special kind of place' because people tended to be more community minded:

> "Sense of community; Hebden is really special. People are sensitive to each others' needs."

> "We all help each other. In a bigger city, people are scared. I don't think they are less friendly but they are scared of the unknown. There's all the stories in the media about violent crime."

> "You can't survive in a village without helping each other. I'm very community minded and always get involved."

Of course, this was often precisely the reason many of the 'incomers' had moved to the town in the first place and people often felt that this spirit has had a self re-enforcing influence on the community:

> "Hebden is that kind of place; lots of older people who grew up with that kind of community spirit. Also, a lot of the incomers were those kinds of hippies who brought that kind of thinking with them as well, they chose to come here."

> "It's the essence of being in a community; I've felt it more profoundly since I've been in Hebden Bridge."

Families and friendships

Our first experience of giving and receiving is usually within the family, and those early experiences play a formative role in the development of people's later responses to giving and receiving. In particular, our early experiences of being 'mothered', or cared for as an infant, can have a pivotal role in shaping how we experience giving and receiving in our lives and our 'capacity to care' for others (Hollway, 2006). These early experiences often develop into particular styles of relating to others (Bollas, 1992).

Our early caregivers also 'model' the giving and receiving of support and by witnessing their behaviour we, in turn, learn (or reject) what is expected of us. Whilst early caregivers and parents could model good supportive relationships, they can also set up particular dynamics and patterns that can be hard to shift.

Even in our very short street-based interview, many respondents referred to the importance of these early formative experiences, usually within the

family, to their current styles of giving and receiving support. Some saw their family as a pivotal site of learning how to care for themselves and others. These people thought that this learning stood them in good stead throughout their lives and enabled them to form strong social supportive bonds:

> "I have lots of help from different people. I've always been looked after by people when I needed it. I carry on helping people. It's just from my family – it was drummed into me, if you help people they help you."

It is hardly surprising that the family was a key site where people learned about care and support, but this experience is also shaped by other factors such as the culture of the person's family of origin (and this, in turn, was often related to place and class) and also the size of family. A number of respondents thought that being part of a big family had been helpful in learning to help and receive help from others:

> "I'm from a big catholic family and saw my mother help out."

> "I come from a big family and you have to support each other. You don't think about it. Just feel it. I don't think "I'm doing something good"."

> "I've had a good life and it's easy to ask for help. I'm from a big family and we stick together. I've never needed anyone else yet."

In these examples, collective support and mutual aid were learned of necessity at an early age, and this way of relating and exchanging support often continued into adulthood. However, in some cases the very close-knit nature of family ties can mitigate against receiving support from outside that close network, leaving people in difficulty if the family network breaks down because of acrimony or bereavement. The last quote above hints at the potential precariousness of this position, if support is confined to the family.

Families were not always havens of nurturing and support and many people reported negative early childhood experiences, particularly in the context of being mothered or parented. This appeared to have a lasting effect on the way they engaged with support in their adult lives:

> "I don't ask anyone so no-one asks me – I have the most selfish mother in the history of the world. I was physically dealt with, but

otherwise I had to take care of myself, so maybe that's why I'm the way I am."

Equally, just as local cultures often imparted conflicting messages about giving and receiving, so did families. Families often encouraged the giving of help at the same time as rugged independence was demanded:

> "In general, I think it's easier to give than to receive. I tend to rely on myself, I don't like to feel dependent on someone else. As a child I was expected to get on with it, my mum used to say "you aren't ill - just go to school!" Being ill or needy wasn't met with nice attention so I learnt just to get on with it."

The tension at the heart of such messages could be damaging for individuals who struggled to live up to the high standards of giving demanded by their upbringing (which resulted in feeling that they had to deny their own vulnerability and needs). In this way, some family cultures could encourage members to be outward-looking and to give aid to those outside its boundaries, but at the expense of family members themselves:

> "I've always been very independent and didn't like asking for help, stemmed from mum who always said you should stand on your own two feet; you only ask when you are desperate."

In this way a number of people reported either not having their own needs met, or witnessing their (usually female) relatives putting other people's needs above their own:

> "I had a good Yorkshire grandmother who was always willing to help others and she influenced me. She lived from the heart. I'm comfortable in giving but I think "do I deserve it?" I think it's generational – my daughters aren't like that. My grandma thought about everyone but herself."

This strong familial culture of independence seemed to stem from a sense that asking for help would be construed as a weakness or a moral failing. It was part of familial pride to be able to cope and not to need help:

> "It's rare that I do get help. I feel I have to be independent; that I'd have to find the means to pay someone. I've never experienced help through my family without asking. It makes me feel vulnerable to ask. I reckon my family would translate asking for help as weakness."

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There was a feeling from many of our respondents that to ask for help was to be seen as a charity case, as wanting 'something for nothing'; the very opposite of reciprocity. People had a fear of being seen as one of the 'undeserving', perhaps a reflection of the wider political agenda expressed within the culture of the family:

> "I get it from my dad. What goes round comes round. It's like finishing the circle. I prefer to give than receive. Do I deserve it? I don't want something for 'owt, I feel like I have to earn it. My dad always said you have to earn things."

In contrast, relationships with friends were regarded in a largely positive way. In friendships, people were able to be selective and chose friends according to their needs and the balance in the relationship at the time. In friendships, in contrast to families, the rules of reciprocity and balance were more fiercely adhered to and contractual bonds were often less binding. However, even friendships were not without difficulties as the following quote illustrates:

> "Friendships; if you talk to friends, they have information they can use against you if anything goes wrong."

People often spoke about being careful who they shared information with, and they often chose carefully when considering who to unburden themselves to. In the case of both family and friends, it seemed that there was a sense of not wanting to be vulnerable, of wanting to maintain a sense of pride and independence, a feeling which is echoed in the next section.

Emotions

Across these domains, individuals were exposed to a range of experiences which shaped their understandings and responses to giving and receiving help. As people negotiated these complex, and often contradictory, landscapes they were also processing their own emotional needs and reactions to these contexts.

Not surprisingly, the subject of giving and receiving support triggered many emotional responses from our participants. There were clearly positive emotions related to giving support, especially when the rules of giving and receiving were generally adhered to. People talked about feeling good about themselves, feeling connected to others and feeling empathy with other people's situations:

> "Because I've had the help myself, I know it's important, people want to know they aren't on their own."

Whilst we noted that the *giving* of help seemed to be less emotionally problematic, asking for help and actually receiving help could be experienced as emotionally painful. For some of our respondents, asking for, and receiving, help seemed to evoke a range of difficult emotions, most notably embarrassment, shame and humiliation. For these people, there was a sense that asking for help could potentially damage the way they felt about themselves and the way they were seen by others. This seemed to be strongly associated with fears of expressing any sense of vulnerability and the need to feel strong and independent rather than 'needy' or 'dependent' on others. This fear of vulnerability seemed very strong in some of the people we spoke to who referred to avoiding self-disclosure because they did not like to expose their needs or perceived inadequacies to others. Such feelings were inevitably a very powerful mediator when asking for or receiving help:

> "I wouldn't ask for help, I'd either do it myself or it wouldn't get done, I'd feel too proud to ask for help ... I feel extremely embarrassed if I have to ask for help, I'd feel humiliated, weak really, like I couldn't manage for myself."

These people felt that they could only accept help from others if absolutely forced to do so:

> "I tend to be very independent – I'd only ask *in extremis*. I'd practically have to have a broken leg. I don't want to be dependent."

As a result, people appeared to consciously self-regulate and monitor their help-seeking, only seeking help in situations which could be perceived as an emergency or an 'honourable exception'. However, as we have also seen, honourable exceptions are often perceived as practical crises such as floods or natural disasters, in which the community helps out, rather than more personal or individual circumstances. In this way, some people found it hard to ask for help even when they experienced physical or mental health problems (which might be considered 'honourable exceptions'):

> "I suffer from depression ... with the neighbours, they sometimes knock on and would offer help, but I feel ashamed and embarrassed, I leave the curtains drawn."

"I'm not very good at receiving help. Last year I had pleurisy and my partner works long hours and I found it really hard asking people to go to the shops. Even if it is something physical, I don't find it easy. I need to feel in control. Me personally – I want to be successful and in control and coping. I suppose I see it as a weakness."

We spoke about the rule of reciprocity earlier, and the desire not to be 'beholden' to others did seem to be one factor which drove this reluctance to ask for help:

"After [our daughter] was born there was lots of people wanting to help; people did the washing-up, we had too much help offered really and we were kind of helpless and couldn't give back. It feels like you are taking advantage and I still feel like we've got something we need to make up."

When giving and receiving were out of balance, people often had a strong emotional reaction. The feeling of being 'indebted' to others seemed to be accompanied by loss of face and social standing, creating feelings of shame and embarrassment. In our concern to ward off such feelings we may avoid situations where they might be evoked:

"I like to think of myself as independent and there's a fine line between help and charity, I've got too much pride to accept charity. I'll take it if I have to I suppose; it depends how often it's happening, if I'm constantly having to seek help it would make me feel disempowered. I feel like I should be able to cope generally, day-to-day. If I couldn't, it would affect my self-esteem."

Whilst most people seemed relatively comfortable in following the general rule of reciprocity in giving and receiving, for some there was intense and often painful conflict about their experiences of giving and receiving support. For example, some referred to not receiving help from others when they desperately needed it and this negative experience influenced the way they experienced help in the future. This can result in a 'defensive self-reliant' style of relating where people refuse help even when they need it. Such refusal can also result in bitterness and resentment towards others who do ask for, and receive help:

"All my life ... I've never needed help. That's true; even when I lost my young daughter, I didn't have any professional help ... I feel like shaking people sometimes, people moan too much when they don't really have any problems to speak of ..."

In addition, asking for or receiving help can draw attention to people's often difficult life circumstances. People may be experiencing isolation or loneliness or they may have a disability or limiting health condition. If these are difficult for individuals to deal with and they don't have a lot of support in their lives, asking for help can exacerbate feelings of vulnerability and shame:

> "I don't like to say the words 'cos then I feel them."

> "It's more about me, that I'm embarrassed. I don't like being reminded that my age is catching up with me."

> "I'm not as mobile as I used to be and people try to help. Someone gave me an elbow up some steps the other day which was a bit of a shock; it makes you feel vulnerable and aware of the passage of time."

Concerns about showing vulnerability could be especially acute for people who had some public status or local profile in the community. People expressed the need to show a 'good front' lest it compromise one's standing in the community.

There is also an important gendered character to the emotional difficulties involved in asking for and receiving help from others. Men could feel particularly exposed by revealing feelings of need and vulnerability:

> "I can remember as a young person being picked on by drunks and a police officer helping me. I felt that it was an insult to my masculinity, I suppose it's being perceived as weakness."

Overall there was a strong sense that many people were reluctant to ask for help because of the strong feelings of shame, vulnerability and loss of face that such a request involved. The desire not to be seen as weak, needy, demanding or 'undeserving' ran in parallel with a strong sense that giving was a good and moral thing to do. These are tensions that seem to lie at the heart of people's responses to giving and receiving and these will be explored further in the next phases of the research.

5. Initial conclusions

Our early findings contribute to the existing knowledge base about informal support by adding some empirical research to the two evidence reviews specifically commissioned by JRF (Lindley *et al.,* 2012; Dalley *et al.*, 2012).

In particular, our early findings support the assertion that we need to take more account of the role of social conflict and emotions in the 'decision-making ecology' around informal support relationships. In addition, it lends support to the idea that whilst the norms of reciprocity are important underpinning principles (Bulmer and Abrams, 1986), there are limitations to these principles under certain circumstances (Dalley *et al.*, 2012). In particular, decisions about giving and receiving support are often made on the basis of affective, rather than deliberative or rational processes (Dalley *et al.*, 2012; Lindley *et al.*, 2012) and it isn't clear how these interact with norms of reciprocity. Perhaps the 'norms of reciprocity' are culturally sanctioned ways of society managing our human interdependencies (our needs for others).

Our early findings suggest that positive emotions are important, especially in relation to *giving* support, and lends some support to research in the 'positive psychology' tradition, which suggests that engaging in helping others boosts positive well-being. However, it is important to bear in mind that difficult and conflicting emotions may actually be more influential in decision-making in this area. For example, our early findings suggest that difficult emotions and concerns may prevent people *asking for, accepting and receiving* support. This may relate to research which suggests that people are more affected by 'bad' or threatening experiences, than neutral or 'good' experiences (Rozin and Royzman, 2001). Moreover, these responses are formed within the context of early personal, social and cultural influences.

In other words, helping happens in a context, and this context is often one of personal and social tension and conflict. This finding supports the warning that not all informal support and care is experienced as unproblematic (Lindley *et al.,* 2012). As a result, people often veer between dogged independence and self-reliance on the one hand, and fears about feeling dependent on others and associated feelings of shame and humiliation, on the other.

At the same time, whilst most people expressed a desire to feel and to be seen as 'independent' and 'self-reliant', there were lots of different ways of expressing this position. For example, we noted what we might refer to as:

- defensive self-reliance ('I don't need anyone else'/denial of dependency);

- caring self-reliance ('I don't want to be a burden to others');

- reluctant interdependency ('I know it's necessary but I still feel uncomfortable with it');

- circumstantial dependency ('if and only if I have to'): limited dependency may be demonstrated relating to 'honourable exceptions' of usual standards of self-reliance (Engster, 2007, p. 57);

- measured dependency ('I don't want to be beholden to others; only if I can give it back').

Notwithstanding this, the position of being 'self-reliant' is often precarious because when support *is* required it can create conflict and discomfort. Indeed it appears that giving and receiving support cannot simply be left just to 'happen' spontaneously. We constantly have to negotiate our interdependency with others and this happens within a complex (and often contradictory) 'moral economy' of familial, local and societal expectation and values. The prevailing norms of reciprocity are only the tip of an iceberg. Therefore, it may be that informal support exists as a delicate ecosystem which requires cultivation, adaptation and nurturing. In particular, it requires some kind of personal regulation and compromise because it can evoke personal hurts and disappointments.

Whilst people talked about the various factors they take into account when making decisions about giving support, at this stage people did not speak about being negatively affected by wider discourses of risk and regulation, as has been suggested elsewhere (O'Neill, 2002). Regulation may well be an issue for people when they consider whether to give help, but in our discussions their primary concern was the 'risk' of engagement. Their consideration of risk focused on their relationships with others and the personal costs and benefits of giving and receiving.

We were especially struck by the finding that people were often reluctant to admit needing help from others. This apparent reluctance to ask for help

will be explored further in the next stage of the research. It is especially worrying that this reluctance appears to be strong amongst people who may have higher support needs (such as older and disabled people). It resonates with other research suggesting that the individualistic 'autonomy/independence myth' promoted by successive governments and through wider cultures, may have been internalised by people in unhelpful ways. Here, dependency is demonized and independence is valorised at the expense of seeing humans as necessarily interdependent and relational beings. As a result, people may feel the need to socially distance themselves from any associations with neediness or 'dependency' (Barnes, 2012).

Expressions of vulnerability and need are likely to have particular resonance in certain social groups and cultures, especially in relation to gender. We do not have sufficient data to make any firm conclusions about the importance of gender in negotiating giving and receiving help at this stage. However, care is often seen as a gendered activity (Hollway, 2006; Watson and McKie, 2004) and we will explore this (alongside other social factors such as age, culture and social class) in the second stage of the research.

Questions for the next stage

The analysis presented here is very much a 'first take' on these issues, based on general views expressed in an informal street-based survey. Specific questions arising from interim findings include:

- How do prevailing discourses of dependency interact with prevailing norms of reciprocity in preventing people asking for help? What might be helpful in alleviating this reluctance?

- Are norms of reciprocity helped or hindered by prevailing ideological discourses of 'fairness'? In particular, does this create a wider politics of 'resentment of the other' i.e. those who may be in need of support (Hoggett *et al.,* 2013)? If so, what effect might this have on people's willingness to support one another?

- How do current notions of independence and dependency resonate in people's lives and impact on the giving and receiving of support in everyday life?

- How do people negotiate the 'mediating factors' we have identified in particular contexts and throughout their life histories?

- How do other contextual and cultural factors, such as gender, social class or sexual orientation, impact on giving and receiving support?

- How can we foster the conditions that facilitate relationships of mutuality and reciprocity?

We will explore these issues in more depth in the next stage of the research, which begins in autumn 2013.

Notes

1. Calderdale statistics taken from the Calderdale profile available at: http://www.calderdale.gov.uk/business/businesssupport/economic-information/calderdaleprofile/index.html and Calder Ward data is from the Neighbourhood Statistics website at: http://www.neighbourhood.statistics.gov.uk/dissemination/, both accessed on 08 July 2013.

2. Responses to the survey were recorded manually in field notes and participant's quotations used in this report are not verbatim.

3. All percentages are calculated as a proportion of those whose data is known.

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Appendix: How do people support each other in Hebden Bridge? – A rapid capture survey

☐ The project is funded by the Joseph Rowntree Foundation and will be carried out by researchers from the University of Central Lancashire and 'red' consultancy.

☐ We want to know where people go to find a listening ear or a bit of help. We also want to know when people feel able to ask for help or to give help.

☐ Ask them to take part in a short survey – just six questions, stress they won't be identifiable and the information will be kept securely.

☐ They don't have to answer questions if uncomfortable.

☐ Check they give verbal consent and are happy to proceed.

1. Where would you go if you needed a bit of practical help? Prompt: Bit of shopping, the bins, cup of sugar	
2. Where do you go when you want a listening ear? Prompt: A bit of a chat, get friendly advice, get some company	

3. Can you give any examples of when you've had this kind of help? Prompt: Practical or emotional – saying hello, unused parking ticket.	
4. Do you give this kind of help to anyone else? Prompt: Practical or emotional	
5. What makes you want to do this for someone else? Prompt: Practical or emotional	
6. Have there been times when you've felt uncomfortable accepting help? Prompt: Because of who, what or how much was offered?	

This paper was commissioned as part of the JRF programme on risk, trust and relationships, which aims to build understanding of the little explored territory of risk, trust and relationships in our ageing society.