Cultures of Volunteering in Cornwall

A Working Paper

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Executive Summary

This working paper details how the voluntary sector can improve their delivery of projects through a better understanding of the geographies of volunteering. We have termed this concept 'cultures of volunteering' and it can be defined as 'the sum total of knowledge, skills and social networks which influence volunteering behaviours'. Crucial to emphasise is that 'cultures of volunteering' do not refer to volunteering numbers (quantity) per se but rather to volunteering capacity (quality) within a particular population. This concept was developed[1] following a discourse analysis of interviews with professionals in the voluntary sector. We have identified how the Living Well healthcare project has evolved differentially across Cornwall with varying degrees of success. This paper argues that different local cultures of volunteering in Cornwall result in variance in the project delivery. The cultures of volunteering are the products of the physical, social and cultural geographies of areas. In the spirit of coproduction this 'working' paper is not the end point, but rather the beginning of an action research agenda which hopes to better understand, map, and enable the voluntary sector to effectively respond to the differentiated geographies of volunteering in Cornwall.

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[1] To clarify, this paper sets forth the 'cultures of volunteering' concept in relation to the practical delivery of Living Well in different areas of Cornwall and not the delivery of Living Well principles. Further, the discourses drawn from on in this paper centre derive from professionals at the managerial level of the voluntary sector; rather than from the volunteer's perspective.

1.0: Introduction

This paper examines the discourses[2] amongst the Living Well partners. In doing so it explains Cornwall's sub-regional differences in volunteering cultures. This review has been conducted in response to recommendations made by the Volunteers in Communities (VIC) team, University of Exeter (UoE), following their evaluation[3] of the Living Well (LW) programme. Fundamental to the delivery of LW is active and self-mobilised communities of volunteers. One barrier to delivery identified by LW partners is the differing cultures of volunteering within Cornwall. Indeed, the VIC research showed how professionals in the healthcare and volunteering sector attribute different cultures of volunteering in the sub-regions of Cornwall to the varying uptake and successes of the LW programme in those areas. This observation, and a conjoined recommendation, was included in the NESTA (2015) report:

> **Observation:** There is a differentiated geography of volunteering and community group engagement across Cornwall. The particular configuration of these relationships is place-specific, dependent on both geography and existing social networks.
>
> **Recommendation:** Further research is needed to identify the key drivers for different geographies and cultures of volunteering in Cornwall. This would enable VIC to make recommendations for best practice to how future Living Well initiatives should be delivered elsewhere.

Enabled by an Economic and Social Research Council (ESRC) Impact Acceleration Award (IAA) the VIC team earned the opportunity to evaluate the observed discourses around a differentiated culture of volunteering in relation to geographic literature. This analysis is underpinned by qualitative data collected from LW partners

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[2] A discourse is a set of ideas that inform the dominant or common sense understandings of people, places and things and the relations between them (Waitt, 2010). Discourses emerge as people ascribe meaning, talk and debate over a certain subject (Jørgensen and Phillips, 2002).
[3] In 2015 the VIC team evaluated how Living Well (LW) had been operationalised in Cornwall. The VIC analysis from this work is set out in 'How does change happen? A qualitative process evaluation' (NESTA, 2015).

through 2014-2015 and focused follow up interviews in the 2015-2016. The follow up interviews were conducted with the Directors of Age UK and Volunteer Cornwall, LW Team Leaders, community engagement officers from Volunteer Cornwall and Age UK Cornwall, and independent consultant partners (Brookward Consulting and Juliet Ferris Consulting).

2.0: Discourses of Difference

This comparative paper focuses on the volunteering cultures connected to the Living Well initiative in the West and East Cornwall (see Figure 1). These two areas have been selected because the VIC research showed how they exhibit two starkly different volunteering cultures which impact how LW is operationalised. The difference between the two areas centres on the local capacity and energy of the volunteering communities. The Director of Volunteer Cornwall explained "in the East you have a culture of self-reliance; they organise themselves and go on after any funding pot has run out. In fact the East has had less money than the West but they have done more on their own" whereas in the West there is "a culture of external dependence where we are having to do a lot more, but achieved less; they have had more money over the last decade but when the money stops they stop" (IJ, 2015). The big question for LW partners is how to enable a culture of self-reliance and self-mobilisation. To understand how to do that it is necessary to examine the underlying drivers for volunteering cultures and the way communities are mobilised in the first instance.

This research has identified four drivers for volunteering cultures in Cornwall: 1) Deprivation and Social Capital; 2) Funding and Resources; 3) Topography and Cultural Catchments; 4) Leadership and Expertise. These are illustrated in Figure 2. This paper now explores and explains the points of difference between West and East, which has produced a differentiated geography of volunteering culture in Cornwall.
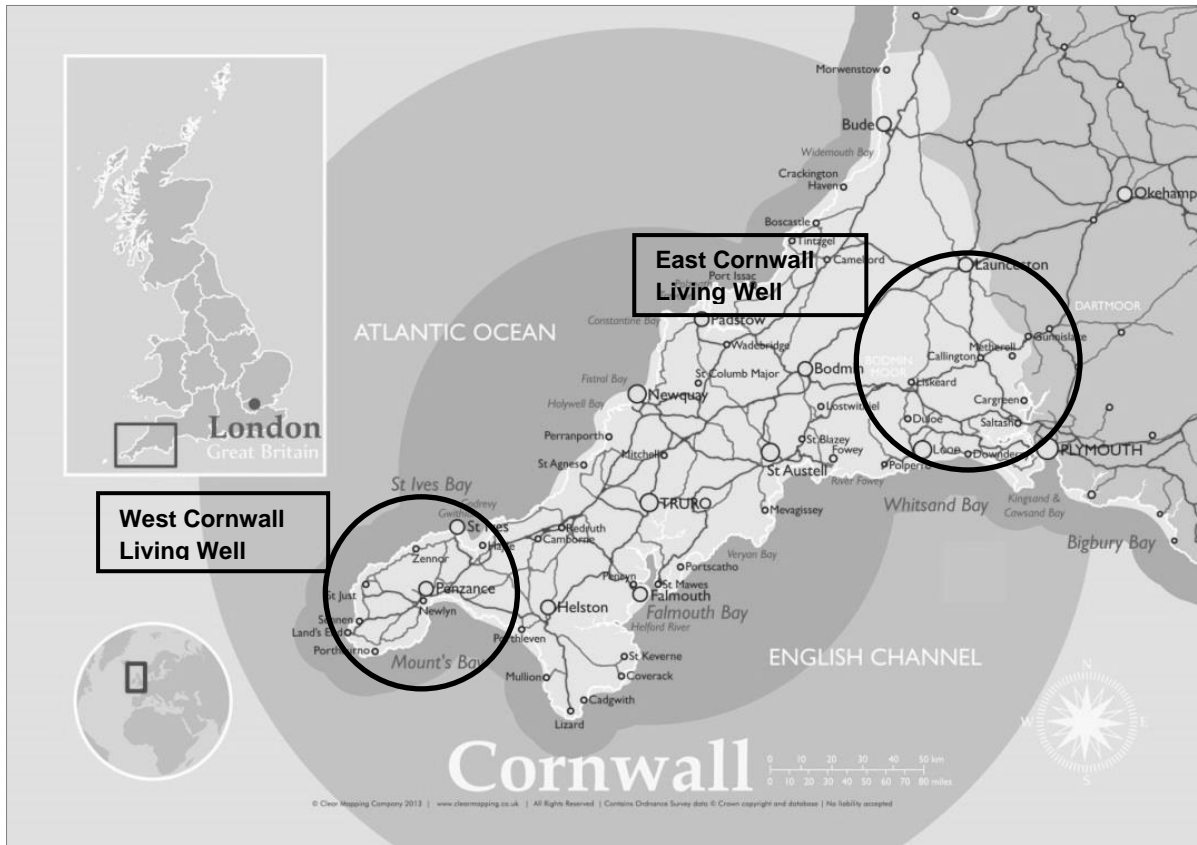
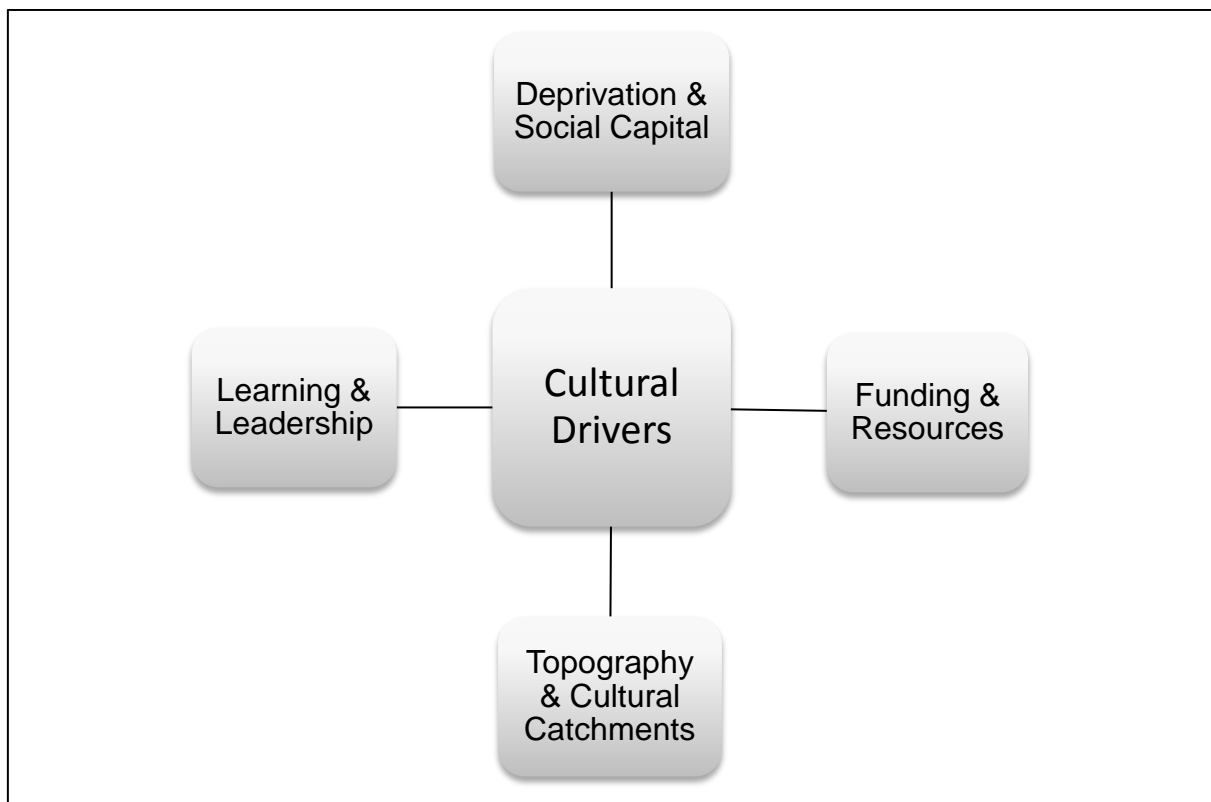**Figure 1: Map showing areas covered by East and West Living Well Team Leaders**

Figure 2: Key Drivers for Volunteering Cultures

2.1: Deprivation & Social Capital

Deprivation refers to a community's unmet need caused by a lack of resources. The Department for Communities and Local Government calculate deprivation[4] using the Indices of Multiple Deprivation[5] (IMD). Overall Cornwall is not deprived but there are neighbourhoods with consistently high levels of deprivation (CC, 2015). As Figure 3 shows, a large number of those neighbourhoods cluster in West Cornwall. Indeed, compared to the East, the West has larger neighbourhoods which are ranked between 0 – 30% of the most deprived neighbourhoods in England.
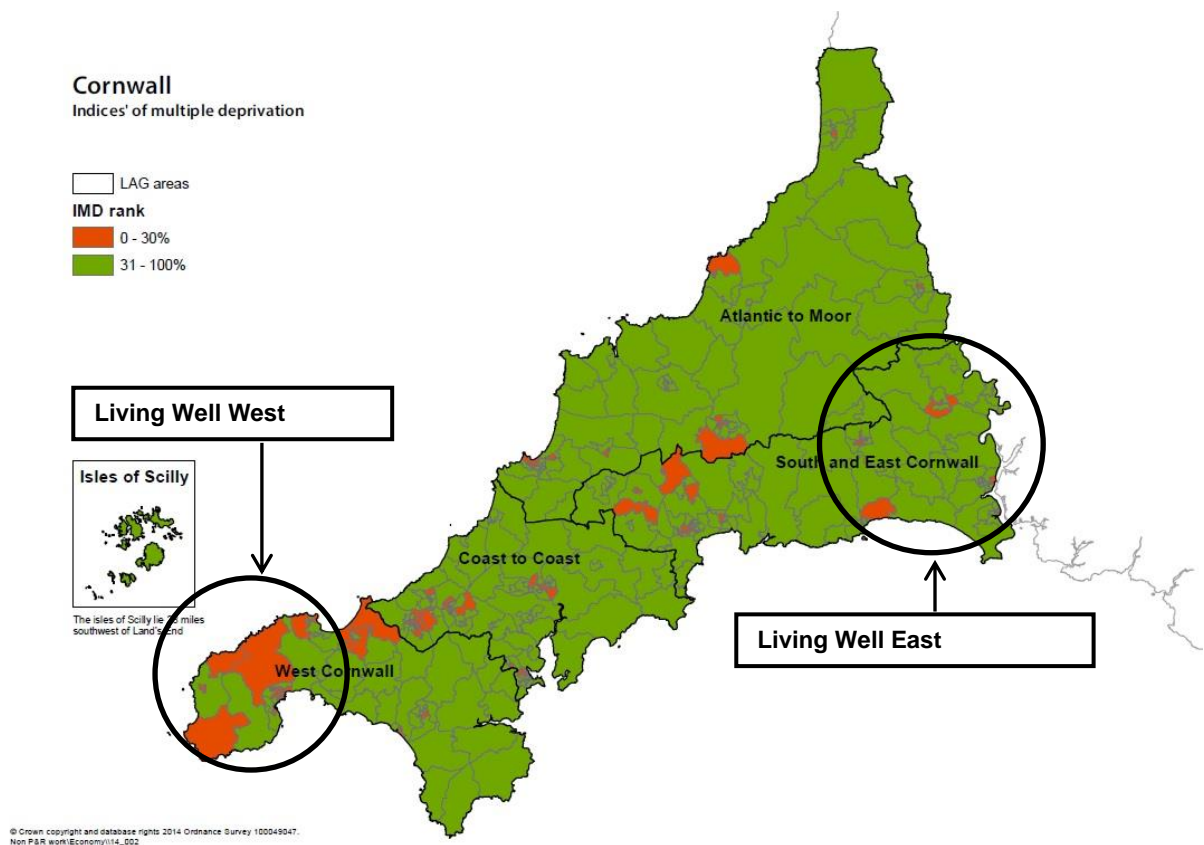

Figure 3: IMD for Cornwall Map (CC, 2015)

Before the data is discussed in detail below, a short literature review of social capital is provided. Social capital is derived from the features of communities such as networks, norms and social trust which facilitate co-ordination and co-operation for

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[4] Deprivation is calculated based on: 1) Income; 2) Employment; 3) Health deprivation and Disability; 4) Education Skills and Training; 5) Barriers to Housing and Services; 6) Crime; 7) Living Environment.
[5] The IMD ranks every neighbourhood in England from 1 (most deprived area) to 32,844 (least deprived area). The IMD is a relative measure of deprivation and as such it is common to describe how relatively deprived an area is by saying whether it falls among the most deprived 10% or 20% of areas in England.

mutual benefit (Putnam, 1993). Whereas human capital is considered the attribute of individuals, social capital refers to the connections among individuals and the social networks and the norms of reciprocity that arise from them (Putnam, 2000; ONS, 2001). There are three different types of social capital: 1) bonding; 2) bridging; 3) linking. The location and characteristics of each type of social capital are set out in Table 1. All types of social capital can be built by and in turn sustained by volunteering (Putnam, 2000; Paik and Navarre-Jackson, 2011) but it is the presence of bridging and linking social capital which enables groups to leverage information and resources to achieve their goals (Fukuyama, 1995).

Type	Description	Relations	Enables	Examples
Bonding	Sociological superglue	Strong ties between homogenous groups	Holds groups together	Relations between family and close friends
Bridging	Sociological WD40	Horizontal ties connecting heterogeneous groups	Positive diffusion of information and trust	Relations between distant friends, associates and colleagues
Linking	Sociological spring board	Vertical ties between heterogeneous groups	Capacity to leverage resources and information from beyond the community	Relations between individuals and groups in different social strata

Table 1: Types of Social Capital[6]

Deprivation is associated with particular types of social capital. In deprived areas, there tend to be high levels of bonding capital but low levels of bridging and linking social capital (Putnam, 2000; ONS, 2001). It is the lower levels of bridging and linking social capital in West Cornwall, and higher levels of bridging and linking social capital in the East, which could be one factor determining their different volunteering cultures. Thus the culture of volunteering in the East is characterised by well-developed and robust community groups which benefit from strong bridging and linking capital which sustains them despite low levels of funding and support from the

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[6] Table developed based on the work of Putnam (2000), Cotes and Healy (2001), Woolcock (2001) and Sabatini (2009).

third sector. Conversely, there are equivalent numbers of community groups in the West but they are more reliant on third sector funding and support.

When the IMD map for Cornwall is considered alongside the literature on social capital, the West can be anticipated to have strong bonding capital and indeed Age UK's Care Services Manager characterised the West as having "close social connections" (JA, 2015). The LW Team leader for the West confirmed, "there are some really close knit communities out there, some people won't even answer the phone if it has a Penzance [dialling] code on [their phone screen]" (CT, 2015). One widely discussed outcome of the dominance bonding capital was a culture of "reliance" (IJ, 2015) and a sense that they "look to others to do" (SB, 2015) rather than drawing on their own bridging or linking capital to instigate community action. For example, a record of active community groups helps LW Team Leaders to connect the elderly to social networks but "in the West we [Age UK] had to do the community mapping exercise ourselves" (CT, 2015). In contrast the East was described as "a better off part of Cornwall [with] a more activated volunteering force because of their professional background" (JA, 2015). The LW Team Leader for the East explained that "we definitely have a lot of get up and go here. There are so many community groups which run without support from anyone. In Callington alone there are four groups which do regular lectures and five lunch club groups!" (DN, 2016). This culture of self-sustaining community action was put down to the presence of bridging and linking social capital: "it's the social links they have and collective responsibility that keeps things going" (DN, 2016). In fact "the problem we have for Living Well is that many volunteers in the East have three volunteering roles with different organisations so they are too busy for us [i.e. Living Well]; but this makes it great for community group engagement" (DN, 2016).

The key point to draw from these discourses is that the East, compared to the West, is characterised as having a more "self-reliant culture of volunteering and community action" (JA, 2015). This observation concurs with the social capital literature which explains that a group's capacity to leverage resources, ideas, and information for action is dependent on its bridging and linking social capital (Woolcock, 2001; ONS, 2001; Paik and Navarre-Jackson, 2011). There are two caveats to put on this point.

Firstly, the claim is not that there are higher levels of volunteering[7] in the East compared to the West, but rather that the two areas have different capacity for unassisted community action. Secondly, that the geography of deprivation is not homogenous in the East or the West. As the LW Team Leader in the West wished to emphasise "this argument [about deprivation and social capital] might work at the macro scale but not all local areas. For example, in Carbis Bay there are some very well off and very well connected volunteers" (CT, 2015). Similarly, as the IMD for Cornwall Map (see Figure 3) shows, there are some "significant pockets of deprivation in the East, but they are hidden" (SB, 2015). One example is Looe (0-30% IMD rank), which was described by the Team Leader in the East as "particularly complex and challenging for Living Well and not least because they are very cliquey. One lady in East Looe said 'I'm not going over there to that knit and natter group', because it was in West Looe! [which are separated by a river]" (DN, 2016). It can be drawn from this that, firstly, tight bonding social capital (i.e. "cliquey") can be a barrier to elderly clients engaging with community groups and, secondly, that the geographies of deprivation and social capital are locally dependent.

2.2: Resources & Funding

The second driver for a differentiated culture of volunteering is the availability of resources and funding in the two areas. The key point is that the West, compared to the East, has received more funding over the years which has created a culture of dependence. As an independent consultant (Brookward Consulting) explained, "the West has benefited from area-based funding. All weighted towards the West because of deprivation; for example it's received the Neighbourhood Renewal Fund, Community Fund, Health Action Fund, SRB Funding, Sports Action Zone, Sure Start Funding" (SB, 2015). The implication for volunteering culture was that "it's created an expectation that things will be done for you and they become dependent on funding" (SB, 2015). This observation is not a new one for Cornwall. As Moir and Leyshon (2013) also found, in the context of participatory budgeting in Bodmin and Redruth, that long term top-down funding streams created a culture of dependence amongst

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[7] Although there is a consensus in the volunteering literature that higher levels of volunteering are generally associated with lower levels of deprivation (see Drever 2010; D'Souza et al, 2011; Hussein 2011; Mundle et al, 2012)

community groups. Indeed, the problem with these top-down funding streams is that "they are often short lived and unreliable" (JA, 2015) and as a result when the funding stops the action stops. Whereas, because the East has not received area-based funding and because it has lower levels of deprivation, the culture of community action is different. As discussed previously, the East has a strong culture of "get up and go" (DN, 2016) which has resulted in many self-sustaining community groups. In fact, the East was even characterised as "suffering from a lack of resource, funding and administration support; but none the less has more going on" (JA, 2015).

2.3: Topography & Cultural Catchments

The third driver for a differentiated culture of volunteering is topography and its influence on what we characterise as 'cultural catchments'. By topography we mean the physical geography and the rural character of the two areas, which have a particular impact on transport and travel time, causing volunteers to gravitate to particular towns and GP services and engage with certain social networks. This in turn creates the cultural catchment: this is less formal than, for example, a school catchment area which has fixed boundaries but nevertheless describes an area from which volunteers and Living Well clients gravitate towards a town and its services. The West – as a peninsula bounded on three sides by the sea connected to the rest of Cornwall only via narrow strip of land between Penzance and St Ives – can be seen as one large cultural catchment primarily focused on Penzance. As a consultant working on the project put it, "Penwith [AKA West] is one large naturalised community. It has an island culture because there is only a thin bit [of land] that connects Penwith to the rest of Cornwall (SB, 2015).

In the East, on the other hand, there are six very distinct cultural catchments: "well defined geographies with very localised community groups; clustering around Saltash, Tor Point, Callington, Liskeard, Looe and Launceston. Natural catchment areas you see!" (JA, 2015). In fact, the LW Team Leader explained that "it's like having six different Living Well projects in the East" (DN, 2016). These distinct catchments and their culture of community self-reliance are also the result of "tribalism between those towns in the East which drives them to try and outdo the

others" (SB, 2015). With specific regard to Living Well these catchments primarily radiate out from GP practices; "It is to do with geography. In Penzance all the practices are next to each other; with exception of their little satellites. There's a culture there that transcends everywhere in the West" (JA, 2015). Whereas in the East elderly clients and volunteers gravitate towards their closest and largest town, for example "Launceston practice has about an 11mile radius whereas Liskeard, with its two GP services, is larger and pulls in people from [Bodmin] moor" (DN, 2016). So while the West could be characterised as having one large catchment the east is described as having six "well defined catchments and communities" (JA, 2015).

The social geography in the West and East has been particularly influenced by topography. An independent consultant explained that "historically it used to take 1hr to get from Penzance to Truro, and so the Penwith economy has developed to now trade in on itself. This has influenced the culture, for people in the East their aspirations are to go out the county, that's the opposite for Penzance; I can say that as a Penzance boy" (SB, 2015). This point was reiterated by the Age UK's Care Services Manager: "the culture is partly affected by physical geography but also about aspiration, but those two are linked too. In the East if you want to go up in the world you *go up* to Plymouth and beyond, whereas in West you *go down* to Penzance" (JA, 2015, emphasis in original interview). The consensus within these observations implies that the links and relations a community has with other areas influences the knowledge, skills and visions which go into making that local community. The wider point here is that the cultural, social and topographic geographies within these catchments affects how Living Well is operationalised. As the Team Leader in the East explained "it really comes down to geography. I have worked all over Cornwall and you learn, anticipate even, how the different geographies affect project delivery. The West and the East are so different, Living Well was always going to manifest differently" (DN, 2016).

2.4: Learning & Leadership

The fourth issue identified was that of learning and leadership and how this has affected the delivery of Living Well. In 2011 Living Well was initiated in Mid Cornwall (Newquay) and then it was rolled out to West Cornwall and East Cornwall in 2014. As

a result Age UK and Volunteer Cornwall were able to "reflect on best practice as the programme expanded and as such a very experienced manager was recruited in the East" (JA, 2015). Living Well as an approach to care is applied in a way that is attentive to local context, social norms, and the particular configuration of people, institutions, government organisations, and charities. However, in building bespoke delivery in place, the Living Well team should not ignore lessons learned at other sites. In particular, it is important to recognise that the character of cultural catchments in combination with a mix of personalities, skills, priorities, and management styles will produce different outcomes. As the Age UK Care Services Manager noted, "In the East we developed training from best practice i.e. more leadership and training" (JA, 2015). Training that focuses on self-awareness, reflection, and the skills to be attentive to local contexts and opportunities is vital, especially if the team as a whole are to bring fresh ideas to light. Sharing responsibility for the evolution of the team and its approach amongst the whole team is also an excellent way of securing succession planning. The Age UK Cornwall and Isles of Scilly Director pointed out that "Stimulating organically is the role of the Team Lead now in Age UK… About succession, we need that learning to be handed on" (NC, 2015).

Good leadership in Living Well should not the preserve of managers. Rather, leadership skills can exist anywhere in an organisation at any level. Team Leaders should feel able to encourage and promote not only the other team members but volunteers and older people themselves. Enabling older people to go beyond Living Well by transitioning into sustainable independent living as a happy and healthy member of society requires Team Leaders and the team as a whole to recognise when that transition is appropriate and to work with community makers and groups as necessary. Team Leaders tread a fine line between being one of the team and managing the team to best effect and training may be necessary to ensure that the role as both manager and leader is well understood. JA recognised this need: "So that's the one thing. I think what we are also looking at is how we develop the leadership so that they have that responsibility and can manage the interface between being one of the team and managing the team…" (JA, 2015).

3.0: Conclusion

This paper has explored the discourses amongst LW partners that delineate the differentiated cultures of volunteering in Cornwall. The key argument put forward is that these geographies of difference are driven by a combination of four factors; deprivation and social capital, resources and funding, topography and cultural catchments, and learning and leadership. The wider implications of the observations made in this paper are twofold. Firstly, there are local cultures of volunteering need and local cultures of volunteering provision. However, in Cornwall that need and provision do not necessarily always align. Secondly, it cannot be assumed that one project or policy will be delivered in the same way, or materialise the same, in different places. Indeed, the central argument here is that the local physical, social and cultural geographies have determined the shape and successes of the Living Well project in different areas.

4.0: Recommendations

1. Further research is required to establish rigour in the concept of 'volunteering cultures'; this research should include qualitative and quantitative data from both volunteers and professionals in the voluntary sector. The output from this research should be a methodology which can be applied by practitioners in the voluntary sector to guide any project plan delivery.

2. Prior to expanding Living Well in new areas a scoping study to determine local volunteering cultures should be conducted. The opportunities and barriers identified in this scoping study should then be combined with existing lessons learnt to guide plan of delivery.

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