A study examining child care services in rural and remote areas conducted focus group interviews and distributed questionnaires to parents living in 15 towns in the Mallee region of Western Victoria (Australia). Barriers to accessing child care in rural areas included limited availability of formal services, costs, stereotypes associated with life in rural areas, and government cutbacks of funding for child care. Interviews also addressed the associated loss of social power for rural families, especially women, resulting from lack of child care services. Results dispelled several myths, including the notion that all rural individuals have access to networks of family and friends, and established that rural parents want child care for the same reasons as their urban counterparts: peer/social interaction and educational opportunities for their children, time out for themselves, and availability of emergency or occasional care when needed. Recommendations for enhancing rural child care services focus on increased government funding, petrol subsidies, a relaxation of some current health and safety regulations, incentives for mobile programs, expanding parents' awareness of services, the development of parent networks, and the enhancement of existing support systems. (Contains 16 references.) (TD)
Reconceptualising Child Care in Rural Areas

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ABSTRACT

Research has found that government funding has decreased, in real terms, in the areas of health, welfare and education as a way of rationalising expenditure in rural areas of Australia. These funding cuts have a number of repercussions, which include changes in the quality of life, and subsequently the culture of rural areas. These funding cuts have also led to severe difficulties in accessing a range of services including child care. Barriers that families face include: the limited availability of formal services, restricted flexibility and increased cost both in terms of time and money in trying to access what limited services may be available. In addition, it is apparent that current child care service models which have been developed in urban areas often fail to take into account the needs, values and expectations of families living in rural and remote areas. These needs and expectations must be clearly assessed as there are a number of myths associated with the provision of child care in isolated areas, such as a decreased need for formal services due to the 'myth' of easy accessibility to an extended network of relatives. The present study investigated current child care options in the Mallee Region of Western Victoria. The results clearly dispelled the prevalent myths of rural and remote child care needs such as the need for child care only on a seasonal basis. Suggestions as to how best meet the child care needs of families in rural and remote areas are discussed, Suggestions for future research are also made.

THE STUDY

The present study was funded under the Field Staff Resource Pool, Commonwealth Department of Health and Family Services. The aim of the study was to examine child care services in rural and remote areas of Victoria. The specific objectives of the report were to:

- Validate the level of demand for "below school age" and "school age" care for families in remote areas of the Mallee region
- Identify and develop options for flexible and viable service provision which best suit the needs of the communities including farming families, Koori families and families with special needs in the Mallee region
- Ensure these options complement existing service provision and promote a service network in the Mallee region.
Information was gathered through Australian Bureau of Statistics (ABS) 1996 resources, focus group interviews and distribution of a Child Care Needs Questionnaire to parents living within 15 designated towns of the Mallee region, an area of approximately 30,000 square kilometres in the North Western region of Victoria. Six focus group interviews were conducted which were approximately 1 1/2 - 2 hours long. The average attendance at these meetings was 15 parents. Focus group meetings were advertised in the local newspapers. At these meetings, parents either brought in their completed questionnaires, completed them while discussing their child with the consultants or took them away to complete. Over 250 questionnaires were distributed to parents by the consultants with the assistance of representatives from each of the designated towns. Of the questionnaires that were distributed only 51 useable surveys were completed and returned to the consultants. A return rate of approximately 16%.

BARRIERS TO ACCESSING CHILD CARE IN RURAL AREAS

There are a number of stereotypes associated with life in rural and remote areas. Stereotypes or myths may centre on a romanticised view of living in isolated areas or they may involve a picture of severe culture and social deprivation (Finlay, 1989). These myths are commonly combined into a pervading image of life in the bush as one of being tough but also full of such compensations as the ‘laid back’ rural lifestyle and a strong sense of community and mateship (Clyde, Kapsalakis and Morda, 1999). In addition to the stereotypes of rural life and culture, there are a number of stereotypical views about the need for services such as health, education and child care in rural and remote areas. It has been found (McKenzie, 1986; Tasker and Siemon, 1998 and Townsend, Mohoney and Hallebone, 1999) that government funding in real terms, has been actively declining in the areas of rural health, education and welfare service provision. These funding cutbacks have serious implications for the long term viability of many rural towns. In addition, they are likely to severely impact on the quality of life and in turn the culture of many rural areas. Coorey (1990a) argued that the means by which these funding cuts affect the quality of life of rural families, especially women, is not just financial but also in terms of decreasing their social power. Social power is reliant on individuals’ ability to access employment and educational opportunities, health and welfare services. Affordable and accessible child care is necessary in order for parents to make full use of educational and employment opportunities. However, it could be argued that recent government initiatives, such as the removal of operational subsidies to centres and the need for centres to be accredited for parents to be eligible for fee relief (Broadside, 1990a, 1990b, 1992, 1996, 1998) have affected many families ability to afford formal child care, particularly in rural areas.

Affordability of child care is a major issue to rural families. Costs in providing child care services increase substantially in areas where populations are small in number and highly dispersed (Mc Gowan, 1994). There are increased costs in setting up child care services and there are decreased opportunities for employer sponsorship to help offset some of these costs (Bailey and Warford, 1995). Families also face increased costs both in terms of money and time spent travelling long distances to available child care services (Coorey, 1990b; Mc Gowan, 1994). Availability of formal child care services may be one of the most important barriers faced by rural families. Research undertaken by Bailey and Warford (1995) and Dale (1994) found that there were problems in recruiting and retaining qualified child care staff in rural areas. In addition, Beach (1997) identified that there was a shortage of formal child care services such as centre based care and family day care and that rural families were forced to rely upon unregistered carers such as baby sitters and family and friends.
Other barriers faced by families living in rural and remote areas is the accessibility of services at times that are needed (Coorey, 1990b). Farming families work long hours and there are said to be increased time pressures in terms of peak farming periods (Bailey and Warford, 1995) when the need for child care intensifies. Therefore, there is a need for flexibility in terms of the hours of operation of rural child care services. An additional problem in terms of the accessibility of services is the lack of accurate information about available services (Coorey, 1990b). Families may be misinformed about the purpose of services such as Family Day Care (FDC) and believe that it is only for working mothers (Mc Gowan, 1994).

MYTHS AND REALITIES OF RURAL CHILD CARE

There are a number of myths associated with the provision of child care in isolated areas. As Coorey (1990a) suggested a common myth is that child care is not really necessary in rural and remote areas and that women should care for their own children at home. This myth is coupled with another stereotypical view that all families have access to a large extended network of relatives who live nearby and can be called upon to provide child care when necessary. Furthermore, another belief is that rural families have a preference for family and friends over formal care. However, McGowan (1994) found that rural families opinions regarding the need and desirability of child care varies quite markedly. Some families show a preference for family and friends over formal care, which is undertaken by people that they may not know so well. Other families show a preference for formal care in terms of the educational benefits for the child. These results parallel those of urban families and support the findings of Cheers (1986, cited in Coorey, 1990b), who stated that individuals residing in remote areas have become increasingly urban-oriented in terms of their values and expectations of services. Another myth regarding rural life is that work is seasonal and that everyone in rural areas works on farms.

Overall, the results of the current study dispelled many of the traditional myths regarding life in rural and remote areas and are similar to those of Atkinson (1994) who undertook a review of American rural families' child care needs. It was revealed through analysis of the present study’s results, that of the types of formal care available in the Mallee region, Family Day Care (FDC) dominated. However, the number of FDC providers was limited and their availability was further restricted by the fact that they could only have four children under their care at any one time. Consistent with previous research (McGowan, 1994 and Cheers, 1986 cited in Coorey, 1990b) families had mixed feelings regarding the use of FDC which was predominantly the type of formal service available. Some parents commented that they were happy with FDC whilst others said that they would not use FDC. The reasons given by the latter group included that there was a lack of accountability as FDC took place ‘behind closed doors” or the carers “hadn’t had formal training”. Another reason commonly cited was directly related to living in rural and remote areas, that is that “everyone knows everyone”. This worked against some family day care providers as parents commented that “ I know her well, and I don’t like her”.

Another myth associated with rural life is the notion that all individuals have access to networks of readily available family and friends. This myth was also dispelled. As the current study indicated, many of the participants did not have any family living anywhere near them, particularly some of the women who had moved from urban areas. These women made comments such as “everyone thinks everyone is one big happy family, but I haven’t got any family here”. Even those respondents who did have family and friends nearby voiced their hesitation to use them as carers on an ongoing basis. For example, some respondents stated that “it’s embarrassing having to always ask your friends to look
after your kids' or 'I’m sick of always begging my family and friends to look after the kids when something comes up'.

Cheers (1986 cited in Coorey, 1990b) suggested families in rural and remote areas have similar child care expectations and needs as their urban counterparts. The myth that their needs and expectations are different has been dispelled. The present study indicated that families in rural and remote areas need and want child care for their children for similar reasons as urban families do. That is, peer/social interaction for their children, time out for themselves and need to be assured that emergency/occasional care is available when needed.

Rural working parents need child care just as much as urban working parents do. Not all adults that live in rural areas are farmers and those that are also require year round child care. There are no longer “seasonal peaks”, in spite of documented change in farming practice this is still a myth currently held. All of the farming participants in the present study stated that they had diversified so that in effect they were farming all year around. Furthermore, many parents living in rural settings are in similar occupations to those in urban settings such as teachers, administrators with the same child care needs. Just like urban residents, rural residents are also employed as shiftworkers in, for example, hospital settings or canning factories, with their own particular child care needs.

For a long time, myths surrounding life in rural and remote areas have influenced the decisions regarding child care services. As the current study shows many of these myths have been dispelled and replaced by a (different) reality. This reality has to be taken into account when decisions are made regarding child care in rural settings. The expectations of rural families are in many respects similar to those of urban families, the only difference is that the service model used to fulfill these expectations must be flexible enough to adapt to the unique demands of rural rather than urban life.

CONCLUSION

While it must be acknowledged that cultural values have a great influence on, and largely determine, our attitudes, values, gender roles and sense of self in such areas as family patterns, lifestyle, child rearing and pastimes, it is no longer possible to argue that many people living in rural areas, particularly those more remote from large towns, currently experience the same cultural milieu as their grandparents or even their parents. This is understandable in that culture changes over time and cultural experiences are peculiar to groups rather than individuals. The social, economic and political changes alluded to earlier in this paper have ensured that rural communities will never return to their independent “she’ll be right” approach to work, family patterns and child rearing. It follows that any attempt to impose a series of urban oriented 'solutions' to rural child care problems will fail.

Some initiatives which could be considered to enhance rural child care services could involve the following:

- increased government subsidies to rural programs with less than ten children, petrol subsidies for parents and others transporting children to and from programs,
- a relaxation of some health and safety regulations currently in place when programs are offered in community halls once or twice a week,
- incentives for qualified child care workers to operate mobile programs often servicing eight different towns or villages in a week; such incentives could include generous living away from home allowances,
• parent education programs to expand parents’ awareness of, and benefits of, these services; these could be offered in existing government and community buildings including health centres and church halls, and
• the development of parent networks for newly arrived parents and interested persons to enhance networks and support systems; this is a system which has traditionally been the lifeline of rural communities and would help to retain that aspect of outback culture.

REFERENCES


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