



An ethnography of low-income mothers' safeguarding efforts

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ARTICLE INFO

Available online 12 November 2008

Keywords:

Injury prevention
Child safety
Mothering
Qualitative methods
Ethnography

ABSTRACT

Problem: Children living in lower-income environments are at greater risk for unintentional injuries. However, little is known about the safety practices of mothers living in low-income situations. **Method:** This ethnographic study explored the child safeguarding experiences of low-income mothers using in-home interviews and observations. **Results:** Mothers' safeguarding efforts included cognitive and emotional work, child directed work, and work directed at the physical and social environments. Factors that influenced the women's safeguarding included the quality of the indoor space, availability of safe play space, traffic hazards, sibling interactions, child care supports, relationships with neighbors, and trust in community services. **Discussion:** These findings have implications for the conceptualization of safeguarding practices and provide insight about the experiences of mothers living on low-incomes. **Impact on Industry:** When developing safety interventions, program planners should consider the views and practices of mothers as well as contextual factors in the physical and social environments.

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1. Problem

For young children, particularly those who are poor, unintentional injuries in the home environment represent an important health issue. It is estimated that between 50% and 70% of unintentional injury deaths to children less than five years of age occur in and around the home (Glik, Greaves, Kronenfeld, & Jackson, 1993; Pollock, McGee, & Rodriguez, 1996). Poorer children have been shown to suffer greater numbers and severity of injuries (Laflamme, 1998; Pomerantz, Dowd, & Buncher, 2001; Roberts & Pless, 1995).

Parental efforts have been shown to play an important role in childhood injury prevention, particularly with respect to minimizing hazards, and providing developmentally appropriate supervision and teaching (Gielen, Wilson, Faden, Wissow, & Harvilchuck, 1995). However, less is known about the mechanisms by which parental efforts are related to injury reductions. Increased knowledge about mothers' efforts is particularly a priority since women act as primary caretakers of children in the majority of Canadian families (Ollenburger & Moore, 1992). Furthermore, since low-income women experience unique challenges related to their position in the labor market, demands of single parenthood, and access to affordable childcare (Graham, 1984; Hattery, 2001), improved under-

standing about how these factors may affect their safety efforts is needed.

The purpose of this study was to address how it is that mothers living in low-income households safeguard their young children on an everyday basis. This study aimed to describe linkages between mothers' experiences and the larger social and economic context by way of ethnographic methodology and to highlight mothers' own perspectives. The research questions guiding the study were:

1. What are the everyday experiences of mothers living in low-income households with safeguarding young children and what are major components, efforts and difficulties associated with this work?
2. What are the different ways that mothers' everyday experiences related to child safety are situated in and linked to broader social relations and circumstances?

2. Background Literature

Particular parental safety behaviors and use of environmental strategies have been associated with reduced levels of in-home childhood injury (Abboud Dal Santo, Goodman, Glik, & Jackson, 2004; Kendrick, Watson, Mulvaney, & Burton, 2005; Morrongiello, Ondejko, & Littlejohn, 2004). However, there are still major gaps in understandings of the mechanisms by which behaviors prevent injuries and how contextual factors shape these behaviors.

Although the primary focus of previous research has been on cognitive or attitudinal factors influencing parental safety behaviors,

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there have been a few studies that have examined the influence of contextual factors such as cultural factors (Mull, Agran, Winn, & Anderson, 2001), social norms (Sellstrom & Bremberg, 1996), income levels, maternal stress, social support, housing conditions, and traffic hazards (Glik et al., 1993; Glik, Kronenfeld, & Jackson, 1991; Roberts, Smith, & Bryce, 1995; Sparks, Craven, & Worth, 1994). Surprisingly, parents' own views about their safety practices and experiences have received very limited attention (Roberts, Smith et al., 1995).

Supervision is one type of parental safety behavior that has been defined and operationalized by researchers. For example, researchers have conceptualized caregiver supervision as being comprised of three dimensions: supervision continuity, caregiver attention, and proximity (Morronegiello, 2005; Saluja et al., 2004). Saluja et al. also propose a conceptual framework that includes supervision and teaching as part of active parental injury prevention strategies that occur in a broader context made up of risk perceptions as well as social and cultural factors. While Saluja et al. suggest that optimal supervision is affected by factors such as the child's developmental stage, environmental hazards, and child characteristics, others have pointed out that there is little agreement among researchers, parents, and others regarding what constitutes "adequate" supervision (Morronegiello, 2005; Morronegiello et al., 2004). There is merit, therefore, in developing a better understanding of safety practices from the point of view of parents themselves.

Parental safety efforts have been defined in a variety of ways including *routine practices used by parents* (Sparks et al., 1994), *mothers' responses to hazards* (Mull et al., 2001), *safe keeping activities of parents* (Roberts, Smith et al., 1995), and *caregiver decisions about injury prevention strategies* (Saluja et al., 2004). In addition, the concept of *safeguarding* has been used to describe how mothers keep themselves and their children safe from family and community violence (Mohr, Fantuzzo, & Abdul-Kabir, 2001). In research specific to unintentional injury prevention, a UK study utilized the concept of *safekeeping* to explore mothers' road safety concerns for their school-aged children (Dixey, 1999). Another study used this same term to examine how parents managed child safety as part of their daily family routines (Roberts, 1991). For this study, *safeguarding* was chosen as a central concept for several reasons: it provided a broad frame of reference to examine the child safety-related behaviors and concerns of mothers; it framed mothers' safety behaviors in a positive way, and reflected North American phrasing more so than the term *safekeeping*.

3. Methods

3.1. Study Design

This study utilized ethnographic methods, a qualitative approach to research that aims to provide an in-depth description of everyday life experiences. The ethnographic approach used in this study was informed by institutional ethnography (Smith, 1987) that is based on a critical, feminist, sociological perspective, and the notion that *social relations* organize the ways in which peoples' daily activities are coordinated and linked with outside events. Guided by Smith's (1987) approach, attention was focused on mothers' daily experiences related to their child safety efforts and how these efforts were related to forces in the larger social and economic context.

3.2. Setting and Participant Recruitment

This study was conducted in a community of approximately 70,000 residents in the Fraser Valley of British Columbia, Canada. This community is situated near large urban centers, is comprised of urban, suburban, and rural neighborhoods, and has an economic base supported by agriculture and the service industry.

Low-income women were recruited from this community. Participant eligibility criteria included: (a) being a mother and a primary

caregiver of a child between the ages of one and five years; and (b) living in a low-income household as defined by Statistics Canada Low-Income Cut-Off (LICO) lines. LICO's represent a relative measure of poverty and are defined as levels of income "at which families spend 20% more of their pre-tax income on basic needs than the average proportion spent by Canadian families" (Williamson & Reutter, 1999, p. 358). Before-tax LICO values for 2003 were used for this study (Statistics Canada, 2004).

Participants were recruited using solicited sampling (Agar, 1980) and purposeful sampling (Morse, 1994). For the pilot phase, letters of introduction were sent to 18 parents who had been enrolled in an ongoing study. Follow-up telephone calls were used to assess interest, and screen for eligibility. Six interested women met the study criteria and agreed to participate. The remaining 11 participants were recruited by placing posters at the local health unit and contacting local parenting groups.

The 17 mothers who participated in the study ranged in age from 19 to 37 years of age (mean age=27 years), and their income ranged from less than \$10,000 per year to between \$20,000 and \$40,000 per year. There were 21 children (aged 1 to 5 years and living in the home), including 13 boys and 8 girls. The number of children (of all ages) living in the home ranged from one to seven. Seven women in the study identified themselves as Canadian, while the remaining were divided between First Nations (n=4), British/European (n=2), and other (n=4). Eleven mothers were married or living common law and four were currently employed. Mothers lived in a variety of housing types including single family homes, mobile homes, townhouses, and apartment buildings and nearly all were renting their homes (n=15). The condition of the homes ranged from well-maintained homes to those needing major repairs.

Approval for the study was obtained from the UBC Behavioural Research and Ethics Board and the health authority ethics committee. All participants provided signed consent. Mothers were informed that if during data collection, information arose that led the researcher to suspect that a child in the family was being abused; the researcher was legally obligated to report this to child welfare authorities.

3.3. Data Collection

Data collection methods included in-home interviews lasting approximately 60 minutes and in-home observation visits lasting approximately 2 hours. In all, 28 home visits were made with 6 participants visited once and 11 visited twice. Semi-structured interviews addressed mothers' safety concerns and strategies, child injury experiences, care by others, use of safety information and resources, as well as issues that mothers thought affected their safety efforts. Using Smith's (1999) approach, interview questions were framed to gather data about women's everyday practices and experiences and to explore their perspectives about contextual factors influencing these experiences. The interview questions were refined as the analysis progressed and the final four interviews were used to validate emerging themes. Interview audiotapes were transcribed verbatim and transcripts were checked against the audiotapes for accuracy.

Home observations visits included completion of a 22-item safety checklist by the researcher addressing major injury causes for young children. Items were selected from two existing home safety assessment guides (Bablouzian, Freedman, Wolski, & Fried, 1997; Watson, Kendrick, & Coupland, 2003). During observation visits, mothers, their children, and other family members when present were asked to carry on with their everyday activities. Observations were made of: the interior and exterior environment of each home, mother-child interactions, and any child-safety related events taking place in the home. Copies of checklists were left with mothers and observations of unsafe conditions were noted and shared. Jottings were made during home interviews and observation visits and full field notes were written as soon as possible following visits.

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