Children
& Society | ncb | WILEY

Shrinking social spaces: The role of nurseries as social infrastructure and brokers of support in times of crisis

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Abstract

COVID-19 produced temporary closures and changes to organisational practices in nurseries, which shrank social spaces and presented challenges in providing and accessing parental support. Limited attention has been paid in early childhood literature to the role of nurseries. We explored how one nursery mediated the impact of the pandemic on mothers. Our London case study showed that mothers valued it as *social infrastructure* and as a *broker* of support networks. Our findings contribute to conceptual understandings and have important implications for the recognition of the role of nurseries in providing supportive spaces in times of economic and public health crises.

KEYWORDS

early childhood, mothers, social infrastructure, support

INTRODUCTION

In England, the role of early childhood settings in providing integrated early childhood education and childcare as well as services and support for parents was documented in the 1970s, with the development of a small number of 'combined nursery centres' (Ferri et al. 1981; Locke 2016). This vision was expanded and implemented under New Labour governments from 1997 onwards through initiatives such as Early Excellence Centres (Bertram et al., 2002), Sure Start local programmes (Belsky et al., 2007) and the development of over 3500 children's centres (Allen, 2011; Cameron & Moss, 2020; Department for Education, 2020; Eisenstadt, 2017). Aligned with this policy direction,

some not-for-profit and private-sector nurseries developed their services and support for parents and carers during this time. Nurseries are one part of the wider early childhood education and care (ECEC) sector, which 'includes all arrangements providing care and education for children under compulsory school age, regardless of setting, funding, opening hours, or programme content' (OECD, 2000, 7). Supportive spaces in ECEC settings constitute 'social infrastructure' (Klinenberg, 2018). However, since so-called austerity policies were introduced following a change in the UK government in 2010, over 1300 children's centres have closed in England (Lepper, 2022), depriving families of the benefits of this form of social infrastructure (Smith et al., 2018).

In 2020–21, the importance of ECEC was highlighted by the COVID-19 pandemic and its associated restrictions, which led to national lockdowns, the implementation of physical distancing measures, and the closures (temporary and permanent) of many nurseries (NDNA, 2021). We argue that the restrictions on and demise of ECEC provision during this time shrank social infrastructure and created new challenges in providing and accessing supportive spaces for parents.

The first national lockdown (March to June 2020) introduced requirements to 'stay at home'; restrictions on meeting with individuals from other households; the closure of nurseries and schools (other than to vulnerable children and critical workers' children); and the closure of indoor play centres and playgrounds. These measures shrank spaces for socialising, play and access to support networks, and particularly affected economically deprived households in urban areas (Duncan et al., 2020). Subsequent lockdowns (November 2020 and January to March 2021) and public health measures continued to restrict access to sociable spaces (Brown & Kirk-Wade, 2021). Parents' concerns about the impact on their children and the lack of access to support networks increased parental stress levels (Cameron et al., 2022; Whitaker et al., 2021). Women and mothers were particularly affected by increased care and domestic responsibilities, and many had to juggle these with paid work (Clark et al., 2021; Pascal et al., 2020). Mothers faced new challenges in supporting their young children's learning and development without access to nursery; those with limited resources faced some of the biggest challenges (Smith & Barron, 2020). Racially minoritised mothers were more likely to suffer from negative health effects and less likely to access support (Morgan et al., 2021). Mothers who were socially isolated, had pre-existing physical or mental health needs, or were on low incomes were also likely to be in greater need of support (McIvor et al., 2022).

Drawing on our case study of a not-for-profit nursery in London, we first consider the importance of the nursery space prior to the pandemic in shaping how practitioners built relationships with parents, brokered friendships amongst parents, and facilitated access to material support for the most disadvantaged families. Second, we illustrate how mothers and practitioners navigated the spatial constraints produced by COVID-19 and the first lockdown, to find ways of providing and accessing care and support. Third, we show how, post-lockdown, practitioners sought to re-establish the nursery's role as social infrastructure by overcoming COVID-19-related barriers to communication and renegotiating their role in brokering friendships amongst parents. We conclude by reflecting on the implications for providing and accessing support in times of crisis.

THEORETICAL FRAMEWORK

Social infrastructure and the role of ECEC settings as brokers of support networks

Klinenberg defines social infrastructure as 'the physical places [...] that shape our capacity to interact with each other' (Bennett Institute, 2021). The concept foregrounds the role of physical

community spaces in bringing people together, facilitating social connections and enabling the development of relationships over time (Klinenberg, 2018). It builds on wider understanding of social capital (Bourdieu, 1986; Granovetter, 1973), support networks (Berkman et al., 2000) and well-being. As Klinenberg (2018) has argued, social infrastructure can play a key role in reducing isolation and attenuating loneliness and personal troubles or worries by enabling access to and sharing of support and resources. Early childhood settings may function as social infrastructure not only for children but also for their parents and carers (Klinenberg, 2018; Knight et al., 2020; Small, 2009)—a principle underpinning the development of 'combined nursery centres' and, later, children's centres in the UK, as outlined above. The design and organisation of early childhood settings—including private, public and not-for-profit nurseries—shape adults' interactions and 'can foster or inhibit trust [and] solidarity' (Klinenberg, 2018: 40). Well-designed settings with spacious communal areas can encourage parents to congregate informally, which facilitates connections amongst parents and between parents and practitioners. With most children attending at regular times up to 5 days a week, nurseries 'provide space for recurring interaction' for children and parents who share some common characteristics (e.g., living in the neighbourhood), which may 'encourage more durable relationships' (Klinenberg, 2018: 17, 18; Small, 2009). Flexible multipurpose spaces in settings (Luminen et al., 2018) can be used to host meetings and workshops for parents, providing further opportunities for sociable interactions. Daily interactions over many months can facilitate trust and the development of enduring relationships, which in turn provide access to support.

Scholarship on social networks and social capital suggests that acquaintances (Morgan, 2009), or 'weak ties' (Granovetter, 1973), can constitute an important component of individuals' support networks. Whilst 'close ties' (relationships with close family or friends) are highly valued, seeking help from them can be problematic because of fears of being judged or confidentiality being jeopardised (Small, 2017). Instead, support may be beneficial from 'weak ties', notably people connected with a trusted organisation, whereby expectations of support are based on their perceived connection to the organisation and/or their professional position within it (Morgan, 2009; Small, 2017). Thus parents and carers may seek support from other parents and carers at their child's early childhood setting, or from practitioners who work there. Regular encounters with others are likely to engender apparently 'incidental and spontaneous decisions' to confide or seek help, especially when they are perceived as likely to be understanding and supportive (Small, 2017: 126). Nurseries present plentiful opportunities for regular interactions with other parents and with practitioners.

Moreover, nurseries may in fact act as *brokers* of friendships and wider personal connections for mothers (Small, 2009). Staff may offer 'inducements' for engagement with others through norms of interaction, such as expectations that parents will participate in activities and events (Small, 2009: 69), including, for example, curriculum workshops, parent consultations or end-of-term celebrations. Nursery practitioners can introduce parents and carers to each other and provide sociable spaces where they can make connections, and facilitate access to support via developing friendships—for example, informational, material, practical and emotional support, as well as opportunities for intimacy and attachment (Berkman et al., 2000). Support may also be provided directly by practitioners, or by signposting or making referrals to specialist provision (e.g., speech and language therapy).

This paper argues that the disruption to relational practices by COVID-19 lockdowns and physical distancing measures impeded sharing of practical and other forms of support within networks based around nurseries, and required a re-imagining and re-making of social infrastructure, often online and at a distance. This has had implications for individual well-being.

Space, well-being and COVID-19

Physical space and its constraints are intimately linked to well-being (Ucci, 2020). In ECEC settings such as nurseries, space is a critical element in affording opportunities to support parents as well as to facilitate children's learning. Inadequate housing impacts on parent–child relationships and children's and parents' well-being (Barnes, 2007; Coley et al., 2013) while indoor environmental quality, layout and space affect children's physical and mental health, social and emotional development, and educational attainment (Ucci, 2020). Living in overcrowded or poor-quality housing can increase parental stress, reducing opportunities for positive parent–child interactions (HM Government/National Literacy Trust, 2018). Flexible and welcoming ECEC spaces are potentially critical as sociable spaces which support not only children's learning and development (CABE, 2008; Dudek, 2015; Luminen et al., 2018) but also families' well-being. The development of Sure Start local programmes and children's centres expanded such forms of social infrastructure in the 1990s and early 2000s, although from 2010 provision was cut significantly as a result of government austerity policies (Lepper, 2022), reducing families' access to supportive spaces (Smith et al., 2018).

In early 2020, when the COVID-19 public health emergency led to the closure of settings, access to nurseries and other forms of social infrastructure for families of young children shrank dramatically, with implications for families' well-being (Cameron et al., 2022). Reduced access to other types of sociable spaces during the pandemic-related restrictions also negatively affected families' well-being (Koch, 2022; Pascal et al., 2020). Parents—particularly mothers—grappled with multiple care and work roles, especially difficult whilst confined to overcrowded or inadequate domestic spaces (Rosenthal et al., 2020; Twamley et al., 2023). Social isolation increased parents' feelings of loneliness (Clark et al., 2021; Marmot et al., 2020), particularly for those on low incomes (Whitaker et al., 2021). In these times of increased need, public health measures shrank social infrastructure and blocked channels of in-person support.

METHODOLOGY

Our international research project, undertaken in 2021, posed two questions in relation to the impact of COVID-19 and public health measures: (i) how has the physical environment of ECEC settings changed; and (ii) how have these changes affected the well-being of practitioners, children and their parents? We aimed to understand participants' day-to-day experiences, but this was at a time when in-person fieldwork was not possible in many countries. Study countries included England, Aotearoa New Zealand, Senegal and Italy. In each country, one setting (four in Senegal, to meet local needs) was selected with the following characteristics: urban location with high levels of child poverty; run by a public or not-for-profit organisation; included provision for 3-year-olds; recognised as a high-quality setting. Building on earlier research carried out in 2020, we brought together an expert group drawn from child health, early childhood education, and architecture and the built environment, to provide informed insight and critically reflect on findings at regular intervals throughout the project. Following ethical approval from UCL IOE (and local approval where required), the fieldwork was carried out between April and June 2021. All participants provided their informed consent. This article, based on the England case study, focuses on how lockdowns and physical distancing measures, the closure of the setting, and the changes to organisational practices upon

re-opening, affected access to social infrastructure by young children and their mothers/carers, and the implications of this.

Common 'core' methods were used across all case studies. First, we gathered relevant policy and guidance data on national and local contexts. Second, we carried out a focus group with practitioners, semi-structured interviews with setting managers and practitioners, and semi-structured interviews with parents and carers. 'Core' and prompt questions were supplemented with country-specific topics for further exploration. This approach helped to guide and standardise the data collection, as well as allowing for some methodological flexibility that enabled responsiveness to the local contexts.

For our England case study, unable to conduct fieldwork in person, we undertook one focus group with five practitioners via video call, interviews with the manager and five practitioners also via video calls, and phone interviews with six mothers and one grandmother. In addition, reflective diaries were undertaken by practitioners as a prompt for the interviews, and one member of staff took photographs of the setting and discussed these with children; these methods helped practitioners to reflect on the children's experiences. Participants were asked about working life pre-pandemic, during the first national lockdown/closure of the setting and since re-opening. The research team provided refreshments for practitioners, a donation to the setting's food bank, and supermarket vouchers for other participants as a gesture of thanks.

The focus group and each interview lasted approximately 45 min. The researcher's position as a mother and previous role in the early years sector helped her to build rapport with participants. Nevertheless, conducting the focus group and interviews remotely posed practical and ethical challenges. For example, undertaking the focus group via video call meant the researcher was unable to see all participants simultaneously, which made it difficult to 'read the room' and to respond to body language; participants may have felt less comfortable taking part in the focus group this way than they would have if it had been in person. One-to-one interviews with practitioners were organised by the manager and it was difficult to ensure these were carried out in private spaces, potentially compromising confidentiality; this may have shaped their responses. Conversely, interviews with parents were undertaken at a time of their choosing; these interviews tended to last longer and needed less prompting, and participants were more open about their feelings and experiences. Participants were all female and were from diverse ethnic groups, including Eastern European, African, Black Caribbean and white British.

The interviews and the focus group were recorded and transcribed with the consent of the participants. Transcripts were coded using Nvivo. Codes were grouped together into categories and themes by the authors of this paper. Initial thematic analysis was discussed with members of the international research team. Data were then further analysed and conceptualised in relation to brokerage and social support, building on our original interest in the pandemic's impact on early years spaces and wellbeing.

CONTEXT

The setting which constituted our England case study is in a highly deprived area of London, characterised by high levels of child poverty, unemployment, health, crime, homelessness and overcrowding, and poor indoor and outdoor living environments (local authority Joint Strategic Needs Assessment 2019–20). It is also situated close to areas of immense wealth.

Located near a large park, the setting consists of one large room and a garden and provides education and care for children aged 2–4 years old. Rated 'outstanding' by Ofsted, the national inspection agency, it is run by a large not-for-profit organisation. The nursery runs a food bank to help meet the needs of some of the families. The nursery closed for the duration of the first national lockdown; during this time, the manager and deputy continued to work, supporting families from a distance; other practitioners were furloughed. When the nursery re-opened, some children returned or started nursery for the first time. At this point, major changes were made to the nursery environment and pedagogy, from the removal of some of the toys and equipment to frequent handwashing routines and cleaning of resources, and parents were no longer allowed to enter the building. The nursery remained open during subsequent lockdowns.

FINDINGS

Pre-pandemic: The ECEC setting as social infrastructure

Practitioners' and mothers' respective recollections of their experiences of the nursery (or in certain cases of other settings) *prior* to the pandemic illustrated its centrality as social infrastructure. It was valued as a space where mothers could build relationships with practitioners, meet and get to know other parents, and access material, informational and emotional support. In all three aspects, the setting constituted a crucial form of social infrastructure and a broker of mothers' support networks before the arrival of COVID-19-related lockdowns, as evidenced by parents' accounts of specific organisational practices.

Building parent-practitioner relationships and brokering friendships amongst parents

Before COVID-19, parents were welcomed into the building along with their children. This was seen as central to the process of children, parents and staff getting to know each other, as well as helping children settle in. Practitioners would give parents a tour of the setting before their child started nursery, which helped to engage their interest in the learning environment and the curriculum. On or before a child's first day, a member of the team would sit down with the parent and 'go through all the policies and procedures with them', as one practitioner explained. In some cases, such as literacy or language barriers, the practitioner would help them fill in the necessary forms. This face-to-face interaction was a valued opportunity to find out about the child's interests and individual needs, such as how to comfort them if they were upset. The practice of coming into the building facilitated the sharing of information about children's progress through regular, often spontaneous, conversations. One practitioner reflected on the importance of maintaining daily conversations:

> I just think it's a nice way of us to be able to communicate with the [parents] as well, because [...] we could have like a discussion about an activity, and it kind of like jogs our memory, so we could be like, "oh, they enjoyed doing this, this is something they really liked", or "we're doing this at the moment so you could probably do it at home".

Through regular interactions in the building, mothers got to know their child's key person and could raise potential concerns with them. Parents would 'get to see all the activities that have been set up'; key persons would have 'a discussion ... about what the child's been up to'. On occasion, parents would take the opportunity to talk with the manager.

Prior to the pandemic, mothers waiting to collect their children would congregate in the reception area, which provided a natural space to engage in spontaneous conversation. One mother recalled: 'Me and a couple of mums would get there a bit early, chat, just normal chit chat.' Having moved to the area shortly before the pandemic, she explained that when her preschoolers—not yet talking—had started at the nursery, 'this other child would come and speak for them, tell me everything they'd been doing and how they were getting on, which was lovely'; this had led to the beginnings of a friendship with the other mother. The sociable space of the setting enabled conversations and emerging friendships between children, and facilitated invitations to playdates and birthday parties, all of which were catalysts for new connections between mothers (Small, 2009).

Nursery staff would also broker relationships with and amongst parents by organising events which they were encouraged to attend. These included coffee mornings, stay and play activities, workshops about how to support children's learning at home, and cultural events. The manager reflected on the events they organised during Black History Month: 'parents would come dressed up in their traditional clothes, drink, food - that's the time all the parents get together, they make friends among themselves and their children'. On other occasions they would invite parents to 'come in and read to their children in different languages'. As well as supporting children's learning, these events were ways of facilitating the building of parental support networks. By establishing such 'norms of engagement' (Small, 2009) around participation in events, the setting and its staff played a key role as social infrastructure by facilitating interactions, brokering friendships and promoting peer support networks.

Facilitating access to material support

Before the pandemic, the staff team had established a food bank for parents. Starting as a 'food swap station' where parents were invited to exchange items, the nursery managers had raised funds to develop the service into a food bank when the extent of need became apparent. The availability of food items, discreetly placed near the children's coats area, served as a safety net for families who were struggling financially. The food bank was accessible during the course of parents' daily drop-offs and pick-ups. As one practitioner described, 'they would just kind of take [food] as and when they wanted it'.

In addition, material support was provided to families in high need through free breakfasts for all children and (through fundraising) termly food parcels for every family. Staff had also brokered support from beyond their own setting by liaising with parents from an affiliated nursery located in a more affluent area who were keen to donate clothes. It was apparent from study participants that this material and practical support was highly valued. The setting's role as social infrastructure was thus significant not only in enabling sociable interactions but also in facilitating access to crucial resources for families with high levels of need. The nursery was recognised by mothers as a space of solidarity; trust had been established with practitioners over time, enabling mothers to seek help when needed, without fear of judgement (Klinenberg, 2018; Small, 2017).

Shrinking social spaces: Navigating the challenges of the first national lockdown and closure of the setting

The closure of the case study setting during the first lockdown significantly affected families' everyday lives and their access to different forms of support. It also constrained the ways in which practitioners were able to provide support and facilitate connections with and amongst parents.

Mothers coping with shrinking social spaces

Most of the mothers/carers who took part in the study had no garden or private outside space, and under lockdown rules, local playgrounds were cordoned off. As a result, families were often confined to small domestic spaces, and government rules restricted face-to-face interactions with non-household members. Mothers found themselves caring for their children at home whilst managing other roles, without access to social infrastructure; this increased stress and reduced well-being, driving up support needs.

One mother, living with her family in a small flat, reflected on the detrimental impact on her children of not being able to go outside and interact with peers. Despite her efforts to facilitate 'all sorts of activities' such as painting and indoor exercise, she found it 'really difficult to keep them focused at the end of the day'. Another mother who lived in a high-rise block of flats stopped taking her children out on their bikes because of the risk of exposure to the virus from neighbours attempting to share the lift. A third mother took her preschoolers out for a walk every morning, but was frustrated by the closure of local playgrounds:

> They all had tape round them. It was horrible in that sense. [Our walks] wouldn't burn out energy. We'd come back and… it became just a walk. After a while they didn't want to go because they knew where they were going. There was nowhere to sort of… switch it up.

Mothers struggled to manage multiple roles and meet their children's diverse needs within their domestic spaces, such as helping children learn through play whilst facilitating schooling at home for older children. One mother highlighted that 'we weren't just parents, we were the head teacher, the teacher, the dinner lady, we were the PE teacher', which was 'a lot to deal with', especially for those who had to manage paid work on top of these roles. She described her own experiences under lockdowns without access to social infrastructure:

> We struggled a lot […] simply because the children are not used to being at home all the time. And when you have more than one child, although they can play together, you still have to find ways to entertain all three of them, and they all have their different interests and very different characters, […] it was hard to split myself three ways. […] trying to keep them all entertained, trying to make sure each child was able to get through the school day.

She also worried about her children 'missing out on so much learning'. Similarly, another mother found it 'very stressful, very challenging' juggling multiple roles and worrying about meeting her children's different needs within the confines of home:

> When we were at home, I'd think "I'm running out of ideas, I'm running out of movies to watch". That was another thing, the struggle as a parent. I worry, "am I letting them have too much TV time, letting them have too much sleep time? Is my son far too small to be on the iPad? But if he's not on the iPad, I can't cook..." Dealing with all of that as a parent. If I didn't do enough painting with them, I was going to feel guilty about it. Even though it impacted the children greatly, I think as a parent, it was even worse, because you guilt trip yourself – "did I do enough today?"

Stress levels were exacerbated by the lack of access to social support under lockdowns. Not only were mothers unable to meet with friends or wider family members, but the closure, albeit temporary, of ECEC settings, playgroups, parent–child activities and playgrounds prevented the development of new friendships. Sports activities and clubs had been suspended; museums and soft play centres were closed; playdates were no longer possible; and even meeting up in parks was not allowed. One mother found that mothering her preschooler under lockdown was an isolating experience 'because I didn't make any mummy friends'—this was in stark contrast to the extensive support network she had developed as a first-time mother some years before COVID-19. She reflected that support networks are 'so important when you're a parent'. The disappearance of the activities and shrinking of the social spaces which had formed the texture of families' everyday lives left children and parents feeling bereft.

Our study findings show that the shrinking of social spaces caused by pandemic-related restrictions, and in particular by the first lockdown, constrained mothers' access to support networks, not only by preventing interactions with existing networks but also through lost opportunities to initiate and develop new friendships in spaces which had formerly constituted important forms of social infrastructure. The closure of the ECEC setting prevented mothers from accessing support and contributed to social isolation, potentially reducing well-being.

ECEC setting providing support at a distance

The challenge for the nursery during its temporary closure in 2020 was to maintain its role not only in supporting children's learning and development but also as social infrastructure, providing much-needed support to parents. The only two staff members not to have been furloughed kept in touch with children and parents; they encouraged them to take part in their online group activities, used regular phone calls to 'check in', sent weekly emails and communicated regularly through the 'parent app'. They proposed play and learning activities to try at home—such as junk modelling, mark making and going on a nature walk—and they asked parents to send photos 'so that we can kind of see how they got on'. These efforts were appreciated: one mother was eager to put into practice the 'loads of little ideas' on the app, 'cos sometimes you can feel so stuck'. Another mother was grateful for the weekly emails, which included 'ideas about how you can engage [your] child in learning through play at home – things that you wouldn't have normally thought of', such as 'learning how to make playdough at home, pasta play, suggestions for cooking'.

One practitioner highlighted the importance of the weekly phone calls:

> to find out how the parents are doing as well because obviously it was a big adjustment for them, not just for the children. [...] we kind of wanted to find out how their mental wellbeing is as well.

Where parents shared their concerns with practitioners during weekly calls, they were generally coping, but struggling with feeling 'cooped up in the house' without the option of playing in a garden or accessing other outside spaces, as discussed above. One mother reflected that 'the nursery was good [...] cos they know I suffer with mental health': their regular calls 'to see how we all are, if we needed any help,' were appreciated, 'and then they let me know as soon as the nursery re-opened.'

Whilst these forms of support were valued, they were necessarily 'at a distance' and not in a shared physical space, limiting the setting's role as social infrastructure. The only opportunity for in-person interactions during the setting's closure was the food bank, to which the two furloughed members of staff maintained access in order to support families facing food insecurity. Our research highlighted the importance of the role of ECEC settings in addressing the needs of the most vulnerable families during times of crisis by facilitating access to essential material resources in addition to providing emotional support and reducing loneliness (Klinenberg, 2018; O'Connell et al., 2019).

Post-lockdown: Re-establishing role of setting as social infrastructure

When the setting re-opened in June 2020 following the first national lockdown, new protocols were put in place to comply with national and organisational guidance. Parents were no longer allowed inside the building, instead having to wear masks and form a queue outside, maintaining the legally mandated two-metre distance from each other, to hand over and collect their children. Staff also had to wear masks at these times. These changes meant that parents whose children were starting nursery for the first time were not able to support them to settle in in the usual way. Mothers were discouraged from congregating, and workshops and events for parents were suspended. Whilst the staff team sought to maintain a version of their role as brokers of support networks to mitigate the adverse impacts of the closure, these new practices shrank opportunities for mothers to build relationships with practitioners and to make connections with other mothers, which constrained the setting's role as social infrastructure.

Overcoming barriers to communication

Since re-opening, the necessary changes to organisational practices constrained opportunities for parents and practitioners to communicate and develop relationships with each other. One practitioner noted that parents whose children had recently started at nursery had 'not actually been into the setting – we've just done a show round over Zoom, so they're kind of just trusting us that good stuff is happening inside the setting'. Two mothers reported finding it stressful being unable to enter the building when their children started at nursery. A practitioner observed that when children were picked up now, 'there's a big long queue, so handovers are probably not as in detail as what they would be'. Practitioners rather than parents were now responsible for helping children put on their coats and collect their bags, which added to pressure on time. These measures made it difficult to hold sensitive or indepth conversations, as one mother described:

> I just feel that COVID has made things feel a bit impersonal .... You have to keep a
> distance when you drop off your child. You can't sit down with the key workers or

the nursery manager, for example if you wanted to have a more in-depth conversation about any concerns you have or things you would like to see happen within the nursery regarding your child. [Previously] if I had any concerns or issues, I've always spoken to them on the telephone or in person. But you never get a quiet moment where there's no-one around. It's usually done at the door.

This mother recognised the constraints of COVID-19 measures and did not blame the nursery, but was conscious of how it affected communication. She contrasted the impact of the restrictions with her experience of her older children's nursery pre-pandemic, when she was 'more involved' and 'communication was a bit easier': she 'would go and sit in the manager's office and speak to her' when she needed to, and 'was able to go into the setting and see what my son was up to'. She highlighted that as a result she had had a 'very different relationship with the nursery manager', for example helping to organise outings. The physically distanced interactions under COVID-19 restrictions prevented her from becoming 'part of the furniture', as she put it. This juxtaposition of interactional experiences of ECEC settings pre- and post-COVID-19 demonstrates the ways in which their role as social infrastructure was diminished by the requisite changes to everyday practices. (On the other hand, another mother found the new protocols, in particular the orderly queue, worked well: 'you still get the rundown, you don't get pushed out' by busy parents in a rush at pick-up time.)

Masks were an additional barrier to communication from the perspective of parents and practitioners ('a necessary restriction but it is annoying', in the words of one mother). Common complaints were that masks made it 'difficult understanding what people say', especially for people with English as an additional language, and difficult reading people's facial expressions. One mother explained how she tried to exaggerate her intonation and to smile with her eyes to convey her interest when her children's key person shared the highlights of their day.

Access to the food bank had changed. Since parents were no longer passing the coats area and could not help themselves to what they needed, a shared language quickly developed: parents asked for, or were offered, 'a bag'. In this way, the nursery facilitated access to necessary resources with sensitivity, avoiding stigmatisation (Garthwaite, 2016; Pybus et al., 2021).

The new protocols were a challenge to the setting's role as social infrastructure in the sense of it being a social space for parents to develop friendships. One mother, who had moved to the area just before the pandemic, reflected on how the queuing and physical distancing had prevented her from forming friendships with other mothers:

It's strange with the other parents because we all have to keep two metre distance [...] now you're not allowed to stand and talk, you've got to keep the line going. I don't even see the mums that I was seeing anymore, because we're all picking up at different times, and dropping off. [...] I really needed that when I first moved up, cos I was just making friends. It was quite sad. [...] You can't speak to the other mums. It does help, speaking to other mums.

Parental caution about spreading COVID-19 made 'everybody a bit wary' and 'scared': this made it 'hard to approach someone because they don't want people too close to them', as two mothers commented. A third observed that she had not got to know other parents at nursery, partly because of the new protocols ('there's not much time for me to chat with the parents') but also because of her own reluctance to develop friendships that would generate

expectations of practices which were not compatible with public health measures in place at the time, such as inviting people into her home.

Restrictions on access to the setting thus limited its capacity to act as a broker of friendships amongst parents. The lack of spaces for informal interactions made it more difficult for parents and practitioners to build trusting relationships, for parents to reach out for information, help and support, and for practitioners to identify—and therefore respond to—families' support needs. As Small has argued, people often confide in others largely 'because they were there' (Small, 2017: 109), and help-seeking often happens in ECEC settings because they provide 'opportunities and inducements' for interaction with other parents (Small, 2009: 51). However, restrictions on the use of space in the nursery made spontaneous help-seeking less likely. Mothers and carers were less likely to find themselves in sociable spaces which pre-pandemic would have facilitated regular interactions and engendered informal conversations with other parents. This reduced the likelihood of developing friendships over time.

Renegotiating brokerage role

Despite the constraints presented by the necessary changes to organisational practices, the nursery continued to play a key role as a broker of material support within and beyond the organisation to help families meet their essential needs. Maintaining access to the food bank was appreciated by parents: one mother remarked 'Even now, today it still helps – on my poor weeks [when Universal Credit is not paid] I know I can go to them and get pasta and rice, toilet roll, we'll still have enough.' Given the escalation of families' needs since the onset of the pandemic, some of whom had lost their jobs or had had their working hours reduced, the manager sought to find new ways to provide access to resources. Parents from more affluent nurseries within the network of which this setting was a part raised funds to provide Christmas dinner and presents for families, donated clothes, and had started contributing to the food bank. The staff team facilitated families' access to these additional resources. Moreover, having secured grant funding, the team put together and distributed food parcels to every family ('Some of them really look forward to receiving that').

As concerns about COVID-19 gradually began to reduce, albeit with physical distancing measures still in place, there were indications that parents were feeling more able to reach out for support, as one practitioner described:

> [Communication with parents] is still happening, but ... maybe a bit less than it would have before, when they could come in, but I think now that things are getting back to normal, parents are more comfortable with having a chat if they needed to – whereas before when they first came back it would literally be drop off and pick up and it would only be conversation when there needed to be conversations. But [now] parents are more comfortable with hanging about and having a chat about concerns or issues that they may have.

By the end of fieldwork, the challenge for ECEC settings was to find a suitable balance between protective distancing measures and returning to 'normal' practices which centred children's and parents' social and emotional needs, as highlighted nationally (Ofsted, 2022a, 2022b). Adapting practices to facilitate regular face-to-face communication with and amongst parents in these safe sociable

spaces will enable ECEC settings to reclaim their vital role as social infrastructure and brokers of support networks.

CONCLUSION

This in-depth case study of an inner-city not-for-profit nursery with a remit to offer parental support has elucidated the ways in which their vital role as social infrastructure and brokers of social support was disrupted during COVID-19-associated restrictions, with adverse consequences for mothers, who already had additional burdens of provisioning (Twamley et al., 2023).

Nurseries have had to adapt to extraordinarily difficult circumstances during this time. Our study has shown how practitioners sought to facilitate access to diverse forms of material and emotional support during the closure and on re-opening, despite restrictions on access to the physical space, by mobilising organisational resources and networks within a safe and welcoming space. Nevertheless, the study also indicated that changes to organisational practices during and in the aftermath of the lockdown and closures, such as physical distancing and mask-wearing, prevented serendipitous and informal conversations between parents and practitioners, and amongst mothers, which limited access to friendship and support.

Our research has illustrated the importance of practical initiatives such as food banks, free breakfasts and clothes donations, through which nurseries can help ameliorate the impacts of poverty in times of crisis. By passporting specialist support, settings can address learning or developmental needs early; their absence creates potential developmental loss for children as well as stress for mothers. Regular, sensitive communication between parents and practitioners in safe spaces can create trusted relationships, enabling parents to raise concerns or seek help, and staff to respond. Practitioners are embedded in parents′ 'network structure' and are part of a 'steady stream of interactions': as weak ties, each practitioner is a 'potential confidant' (Small, 2017: 157).

Second, by providing social spaces where families can congregate, both informally and through organised events, nurseries often play a critical role as brokers of both 'weak' and 'close' ties amongst parents and carers. Regular encounters in convivial spaces enable the development of support networks and potentially of enduring friendships.

In the context of the decimation of children′s centres nationally, and the growing cost of living crisis, the vital role of nurseries as social infrastructure, and practitioners as brokers of support networks, must be reasserted. Recent developments in national policy, such as 'early years stronger practice hubs' (HM Government, 2022), are welcome, but largely fail to address parental support. This is a substantial gap. Families with young children and their communities might be better supported with universal, heavily subsidised or free ECEC with an explicit role in brokering social support, much as the Sure Start Children′s Centres originally did. Moreover, where of high quality, provisions within ECEC can ameliorate some of the impacts of poverty. The incidental friendship, development of support networks and reassurance benefits for parents are more than incidental – as times of crisis show.

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How to cite this article: Benchekroun, R., & Cameron, C. (2023). Shrinking social spaces: The role of nurseries as social infrastructure and brokers of support in times of crisis. *Children & Society*, *00*, 1–16. https://doi.org/10.1111/chso.12775