Building a Social Support Network for Informal Caregivers of Older Adults: A Case Study of Carer Cafés in Hong Kong

Introduction

This paper is about how organizational context shapes the development of social networks and the social capital embedded in the network. Scholars define social capital in different ways. Bourdieu (1985), Coleman (1988), and Putnam (2000) argue that social capital is embedded within social ties. Bourdieu (1985) and Coleman (1988) suggest that strong ties and solidarity enable us to access social capital, while Putnam (2000) classifies social capital into three types: bonding, bridging, and linking social capital, corresponding to the social ties. Portes (1998) and Lin (2002) concentrate on resources and the individual. They both define social capital as resources emebedded in social ties that can aid us in achieving our goals (Lin 2002; Portes 1998).

Social capital is vital to everyone, but especially informal caregivers (Aldrich, 2017; Alvarez et al., 2017; Bian, 1997; Coleman, 1988; Granovetter, 1973; Lin, 2002; Moore & Carpiano, 2020; Pedulla & Pager, 2019; Völker, 2023; Wu, 2021; Zangger, 2023). Informal caregivers who can rely on family members, friends, or neighbors who help the care recipients without pay and are not affiliated with any institutions (Roth et al., 2015), fare much better. To support informal caregivers, an increasing number of community novel initiatives, such as caregiver cafés, have been implemented in various societies in order to engage more community members in caring (Greenwood et al., 2017; Takechi et al., 2022; Teahan et al., 2022; Thijssen et al., 2022). For example, in 2023, the Hong Kong government was going to address the needs of the 330,164 persons aged 60 or over with long-term care needs living in domestic households (Hong Kong Census and Statistics Department, 2023; Hong Kong Legislative Council, 2023), 80% of whom live with primary caregivers, mainly their child or son-/daughter-in-law (46.8%) and spouse (23.2%) (Hong Kong Census and Statistics Department, 2023). A government-commissioned caregiver policy research report emphasized that community development is one of the policy development gaps that must be addressed (The Hong Kong Polytechnic University Consulting Team, 2022).

Studies on different social and healthcare contexts for older adults, such as end-of-

life care, intensive care units, and dementia services, document how social capital from family members, neighbors, or friends contributes to informal caregivers' well-being. For instance, supportive friends and neighbors can help informal caregivers manage their stress (Guo et al., 2021; Roth, 2020). Information on caregiving among different community members can help build a supportive community where resources are used to formulate an extensive network assisting families in the community (Rosenberg et al., 2015). Material resources not only meet informal caregivers' instrumental needs but also signpost them to services (Rosenberg et al., 2015). Social companionship also gives informal caregivers a sense of being cared for and listened to, which helps to reduce feelings of loneliness (Robinson-Lane et al., 2024).

Because of the importance of social capital, an increasing number of community café initiatives have been implemented to support informal caregivers in various regions around the world, such as the UK, Japan, Taiwan, Hong Kong, and others (Caritas Hong Kong, 2023; Evangelical Lutheran Church Social Service—Hong Kong, 2023; Greenwood et al., 2017; Takechi et al., 2022; Taiwan Association of Family Caregivers 2024;). These initiatives commonly aim to connect informal caregivers with community members, peers, volunteers, social workers, and other professionals. Studies have found that the community cafés provide a safe and comfortable venue for participants to develop social relationships with each other and access social capital (Greenwood et al., 2017; Takechi et al., 2022; Teahan et al., 2020; Thijssen et al., 2022).

However, researchers have not yet fully explored how the network is built in the organizational context of the community café initiatives (Eyal-Lubling & Benjamin 2022; Oliver & Faul, 2018). Without a systematic understanding about the mechanisms of network-building, policy makers, service providers, and researchers cannot create a better framework to transfer the practice knowledge and achieve service innovation in Caregivers Cafés (Oliver & Faul, 2018). Regarding organizational embeddedness as having a vital role in relationship building and the distribution of resources (Baker & Bakopoulou, 2023; Custer & Engbersen, 2022), this paper aims to understand the network-building process and mechanisms within the organizational context.

This study employs Small and Gose's (2020) organizational brokerage model as our analytical framework. It analyzes the influence of an organization's institutional routine

practices on social network development. The organization can (strategically) create an interaction occasion and determine who meets whom on the occasion by its setting, environment, norms, and regulation of the activities to facilitate engagement with others. For example, the school fundraising event expects parents to interact with other parents. Parents must work with each other to plan the event. Thus, parents have developed friendships and access to resources from this parent's network (Small, 2009). Similarly, McRoberts (2005) argues that churches also facilitate people connecting with others within and between churches and describes churches as "not just places where people meet to worship, but also as interactive social spaces and as architects of vertical and horizontal networks" (Small & Gose, 2020, p. 117).

Building upon the organizational brokerage model, this paper highlights how routine organizational practices, or norms, shape the social interaction in Caregiver Cafés. It focuses on four aspects of social interaction: frequency (repeated interaction), duration (how long social interaction lasts), outward orientation (the reciprocal activities), and collaboration (the involvement of joint tasks for specific functions) (Small & Gose, 2020).

Data and Methods

This project used a case study method. The case is Caregiver Café, operated by the Hong Kong Federation of Women's Centres (HKFWC). HKFWC collaborate with different parties, such as other Non-Governmental Organizations (NGOs) and Hong Kong Social Welfare Department (HKSWD) to operate 12 Caregiver Cafés. These cafés operated once every other week, imposing no service charge or registration fee. Following the recommendation from the project staff to meet more informal caregivers of older adults, this study focuses on cafés in five Hong Kong districts: Sheung Shui, Fanling, Tai Wo, Tai Po, and Aberdeen, which are frequently visited by informal caregivers of older adults.

[Insert Table 1 here]

To draw a comprehensive picture of the Café's operation, the research team used individual in-depth interviews, focus groups, and participant observations to gather data. These different approaches also help to triangulate the data. We interviewed 26

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informants in Cantonese with formal consent after obtaining ethical approval (see Table 1 for respondent backgrounds) between 2021 and 2022. The data collection was interrupted due to the COVID-19 pandemic. Among these, six were female informal caregivers who were service users of the Caregiver Cafés. Eleven respondents were staff and the rest were project volunteers who were former service users. Most of the caregivers had taken care of their spouses for over ten years. Four caregivers (Wilma, Ava, Charlotte, and Sophia) and one staff member (Venus) were interviewed individually. We also conducted five focus groups (two for staff, two for volunteers, and one for current caregivers). Six staff members joined the first staff focus group. Two other staff members (Fanny, and Dorothy) participated in the second staff focus group. The duration of these two focus groups was about one hour. The first volunteer focus group (online) included four volunteers (Mary, Kelly, Amy, and Walter) and five volunteers participated in the second volunteer focus group (in-person) at the HKFWC Fanling Centre. These two focus groups were roughly 90 minutes each. The ages of respondents ranged between fifty and sixty years old, and they were from lower socio-economic strata. Being overwhelmed by their caregiving duties, all of them had left the labor market. Two caregivers (Elizabeth and Olivia) attended the current caregivers' focus group, which lasted around one and a half hours. With the consent from informants, all interviews were audio recorded and transcribed verbatim by the first author and a student helper. The first and second authors translated the Cantonese excerpts into English for this article.

The first author visited the Cafés in person in five communities for 18 hours in 2021, observing interactions among users, volunteers, and staff. Both authors conducted informal interviews during observations on topics such as mingling, whom they choose to interact with, and the reasons for their solitude. Besides collecting data from participants, the research team also reviewed the documents regarding the background, values, missions, visions, and operation of the HKFWC's Caregiver Café initiative.

Questions asked in the interviews and focus groups pertained to the role of the organization in the network-building process, types of social capital embedded in the café network and its impacts on informal caregivers, and interactions among individuals in the café. The project staff and social workers primarily focused on the values of the Caregiver Cafés. They also explored methods to connect different parties and facilitate

the café's operation as well as strategies to encourage the participants' interaction, and observations on the interactions and the resources they obtained from the café network. We asked the volunteers about their reasons for volunteering, the resources they obtained from the café network, the methods they used to interact with the participants, and their observations and experiences serving the participants in the cafés. The informal caregivers were asked about their reasons for visiting the cafés. We also asked about their experiences of social interaction, the types of resources obtained, and the effects of these resources.

Based on Small and Gose's (2020) organizational brokerage model, the research team reviewed all data and developed themes about the brokerage process, the influence of café norms, visions, and missions on social interactions and dynamics within this brokerage process, as well as their role in mobilizing social capital. The data analysis process involved multiple stages. First, the research team familiarized themselves with the data by continually reviewing all materials. Second, we performed initial coding to generate themes and categories with the supporting data (Braun & Clarke, 2022). The researchers worked out the themes based on organizational norms and embeddedness (Gose & Small, 2020). The research team redefined and ultimately named the preliminary concepts and themes after reviewing and discussing them with the project staff (Braun & Clarke, 2012; 2022). For example, the project staff bridged the gap between the concepts of informalization, engagement, and informal social support networks through their frontline understanding. The research team used NVivo, a qualitative analysis software, to manage the analysis process of memo writing, line-by-line coding, and theoretical coding. The research team developed an audit trail to ensure the development of themes could be followed. By regularly communicating transparent analysis procedures and preliminary findings with the project staff, the research ensured its credibility, transferability, and dependability .

Findings

This section presents how organizational norms created by project staff influence organizational embeddedness, the forms of social interaction, and the obtainment of social capital. Based on the organizational brokerage model, we first identify the

organization norms. The HKFWC created three norms in their café's operation: informalization, engaging women caregivers from a gendered perspective, and building up an informal social support network. Next, we discovered how these organizational norms shaped four forms of social interactions in the cafés, in terms of frequency, duration, outward focus, and collaboration (Gose & Small, 2020). Finally, the team categorized the types of social capital embedded in this café network, such as emotional support, information, services and material goods, generalized exchange, a shared identity, and access to other organizations (Small & Gose, 2020). The social capital, thus, effectively reduced the caregivers' burdens and challenges.

Norms in the Brokerage Process of Caregiver Cafés

Informalization

The first norm observed in the Caregiver Cafés was informalization.. For example, the cafés had a simple registration procedure, there was no attendance requirement, and participation was free of charge. These informalization practices made the participants feel that it was convenient to participate. Understanding that the informal caregivers often got overwhelmed by their round-the-clock care routines, the project staff strategically made the cafés and the activities informal and flexible, requiring no commitment from the caregivers that might serve as a barrier to participation.

The project staff at the cafés were not required to follow the protocols of traditional case intake in social services, including revealing personal information and stories for social welfare needs assessment. The café's setup helped the caregivers to feel relaxed, respected, and autonomous, serving to bridge caregivers with social care services.

Engaging women caregivers from a gendered perspective

The second norm of Caregiver Cafés was engaging female caregivers (nearly all the participants were female) from a gendered perspective. The service in charge of the Caregiver Cafés explained that there were no services specifically designed for female informal caregivers until the late 2010s. Social service providers prioritized primary clients (the care recipients) and only allocated the remaining resources to the informal caregivers. As a result, the caregivers could rarely get support from the mainstream service. Most of them even got used to being refused support from the community

because others think that it is family members' responsibilities to look after family members. . The service in charge further explained that under the traditional Chinese family ethics of filial piety, the caregivers often treat taking care of their loved ones to be their primary family duty. If they could not perform it properly, they reported they would feel ashamed and criticism could even arise from their family members if they asked for help. For example, their family members may deem them lazy and unwilling to help the family. In their caregiving journey, female informal caregivers "could feel lost and suffer from burnout easily" (Staff Venus). To address this gap, the Caregiver Cafés attempted to provide a gender-friendly space for them to take a break—a service where they could truly relax physically and psychologically. Also, they attempted to help the female informal caregivers gain control over their time, space, and body from the overwhelming care work.

Building up informal social support networks

The third organizational norm found in the Caregiver Café initiative was cultivating informal social support networks for female informal caregivers. The rationale for creating the Caregiver Cafés was to help the women in the community develop their support networks and accumulate social capital. This was a predominant aim in the implementation. Since staff members' practical experiences in the community informed them that Caregiver Cafés must nurture the female informal caregivers to get connected and give each other mutual support, they believed that this was the most effective way to sustain community caregiver support.

Forms of Social Interaction under Organizational Brokerage

In the social network formation process, organizational norms shape the forms of social interaction in Caregiver Cafés (Burt, 2021; Small, 2009; Small & Gose, 2020). Building on the organizational brokerage model, we will discuss four aspects: frequency (i.e., how often does interaction occur), duration (i.e., how long it is), outward focus (i.e., whether the participants focus or join in the interactions), and collaboration (i.e., how important are joint tasks in the interaction) (Small, 2009; Small & Gose, 2020).

Table 2: Norms and Dimensions of Social Interaction

Norms	Dimensions of Social Interaction	Social Capital embedded in the organizational networks
Informalization	Frequency	• Emotional support • Information • Social companionship • Instrumental support
Engaging women caregivers from a gendered perspective	Duration	
Building up informal social support networks	Outward Focus	
	Joint Tasks	

Table 2 summarizes how organizational norms influence different dimensions of social interaction. We found that the norm of informalization encouraged informal caregivers to visit the cafés frequently. The norm of engaging women helped informal caregivers feel that the café was a safe and comfortable place. As a result, they would stay there longer (i.e., duration). The norm about building up informal support networks motivated informal caregivers to interact with others (i.e., outward focus and joint tasks). In the following, we will explain in detail how these norms shaped these four dimensions.

Frequency

Frequency refers to whether or not the interactants have repeated interactions with others, which forms the foundation of friendship building (Small, 2009; Small & Gose, 2020). The organizational norms of the cafés encourage repeated interactions among participants. The informal caregivers shared how Caregiver Café's informal arrangement encouraged them to attend regularly:

There's no attendance requirement. Just give them a call to tell them you will visit the café. Even if you don't come, it's not a big deal. You don't need to notify them if you're not coming. This design is good. (Caregiver Ava and Caregiver Charlotte

A respondent continued to elaborate her opinion on why the café's convenience and

casualness matter for the participants' repeated participation. "It's convenient because you can't control your schedule. I don't have confidence that I could fulfill a strict attendance requirement" (Caregiver Ava).

The service team carefully designed the informal setup in the cafés. The features of casual décor, free-of-charge participation, simple registration procedures, no attendance requirement, flexible participation procedures, and respect for participants' autonomy combined to remove any potential stress about participation. They successfully encouraged the participants to visit the cafés regularly. A staff member explained the importance of informality to participation:

> One of the most significant aspects is the décor. We put a lot of thought into how to decorate the café to create a unique atmosphere from the outset. Our café is flower-themed, with tablecloths, floral arrangements, and various paintings for decoration. It's not like attending a community center where they simply prepare a table for participants. We consider the decoration and design... Seasonal decorations give them a sense of festive seasons, like Christmas, approaching. We aim to create a space where they can rest. Our volunteers encourage them to come by emphasizing the restful nature of the café. Some caregivers become curious and visit the café to see what form this rest might take. Once they're in the café, they discover there is no rundown. They are free to engage in whatever activities they choose. They welcome simply sitting quietly. Thanks to this informal design and the opportunity for relaxation, they often recommend the café to other caregivers (Staff Yanny.

The above shows that informal arrangements encouraged more frequent visits. This created opportunities for informal caregivers to interact repeatedly. Through these interactions, informal caregivers could observe the similarities and differences among each other, which helped them decide with whom they wanted to form friendships.

Duration

Longer duration is crucial for social interactions in Caregiver Cafés (Small & Gose, 2020). When the informal caregivers stayed longer in the café, they would be more likely to encounter acquaintances and make friends (Small, 2009; Small & Gose, 2020).

"Enjoying me time" was one of the greatest attractions of Caregiver Cafés that made the participants stay longer than other social services. Project staff, like Kitty, William, Carson, and Peggy, noted that women are responsible for looking after family members in the traditional family obligations and that others might judge them irresponsible if they request a rest because of tiredness or stress. Understanding this cultural challenge that female caregivers face, the project staff created the cafés to be a safe and comfortable place for female informal caregivers to enjoy their time and take a rest.

Participants could enjoy their "me time" in cafés. The project staff prepared excellent welcome drinks and food to show their sincere respect and welcome to the informal caregivers. In the activities held at the cafés, they could enjoy "me time" of self-care and make-up. For example, a participant said she liked the eye masks:

> One of the best methods there is to use an eye mask. You can go to a room, turn off all the lights, and apply the mask for about 5 minutes—I'm not exactly sure of the duration. It's also a way to relieve stress. I think the service is excellent. (Caregiver Charlotte)

Having a sense of control over their time and (physical and social) space was also a way to take a rest and encourage them to enjoy "me time." The café allowed participants to decide what they wanted to do, encouraging a sense of control over their time and space. They could choose either to do nothing or to join activities with others. A volunteer shared her experience in using and rendering services:

> Sometimes, it's hard to open up and express your inner thoughts, let alone getting them out in words. Yet, I hope to just sit down, maybe listen to some music or have a cup of coffee. That's the feeling I get because it is a café (Volunteer Mary).

This informal and caregiver-centered space made the participants treasure the experience and visit again. In the cafés, the safe and comfortable atmosphere enabled the participants to freely talk about their emotions and experiences if they wished to do so.

Outward Focus

The norm of building up informal social support networks influences the network-building process through outward focus. Outward focus refers to the orientation of people's activities toward others (Small, 2009; Small & Gose, 2020). This helps people identify commonalities with fellow participants, seen as essential to building up trust among network interactants (Small, 2017). In the findings, purposeful group activities usually promoted outward focus in social network development.

The Caregiver Cafés had various designs to facilitate the participants' interaction with each other. A volunteer, Kelly, explained her experience of opening conversation with other participants in the café's activity:

> When talking to other caregivers, I notice they are quite unhappy. They are unsure how to take care of their family members, like their parents or grandparents. It's a tough job, and often no one understands just how difficult and unhappy it makes caregivers feel, leaving them with no one to share their burdens with. So, when they come up to talk with us, it helps them relax and feel much happier.

Another volunteer, Amy, also told her experience of her first visit to the café. She remembered that the physical exercise activity could let her chat with other caregivers:

> There were many young people serving coffee and preparing snacks, which made me feel rather at ease and comfortable. I was curious about the environment there; it was nice. That day, they taught us some light exercises, which were great. I also could chat with some of the other visitors.

Walter noted how the accepting and casual sharing of caregiving experiences made her feel comfortable talking about her own experiences. She felt connected with other caregivers.

> It's easy to strike up a conversation on the first visit, as everyone is just looking for a place to chat and relax. When it's everyone's first time, there's naturally something to talk about. Questions like "Why did you come up here to talk?" are asked, and it's usually about wanting to unwind because there's no need to care for someone else that day. It solves the issue of relaxing and shifting away from unhappy thoughts. Chatting makes it easier to relax.

Joint Task

Joint tasks fostered deeper social relationships among participants in the Caregiver Cafés. Collaboration among acquaintances could build trust and encourage the formation of social ties. For instance, the project staff collaborated with volunteers and participants to create a safe and supportive environment in the Caregiver Cafés. The volunteers were well-trained to observe the participants' needs during casual conversations. Understanding what it is like for women to be caregivers, the project staff and volunteers jointly promoted the norms of support and acceptance and encouraged the participants to share their feelings and emotions. For example, they motivated the participants to use active listening and non-judgmental perspectives to understand others' experiences. Sometimes, they freely shared their practical wisdom in caring work. A volunteer, Emily, said that showing support was a kind of collaboration in the café:

> Going to the café to share and chat with them, most of the time, we are like-minded, also taking care of older adults or their mothers just like me. I take care of my mother. So they share their experiences and explain things to me, sometimes they talk about their own experiences and teach me how to take care of my mother, like when her foot hurts, what to do, or how to apply cold packs. They answer my questions. I am very happy to chat with them in the coffee house.

Another volunteer, Francis, elaborated on how the collaboration between participants and volunteers in the café brought about a basis for developing informal social support network:

> We learn how to cope with difficulties and absorb how to navigate the process by discussing experiences and sharing strategies for resolution. When facing grievances, it's important to deconstruct those feelings, too. We are all facing the same challenges, but you may not be familiar with my background and the people who are there for me. Sharing stories with each other can be very reassuring, and speaking out about our experiences can be incredibly relieving. Spending time together to chat and discuss our issues can truly make us feel much better. You never know the distress someone is enduring behind closed doors; sometimes they act on

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impulse and do things they shouldn't, not to mention harming themselves. This could be because they can't find a way or a place to vent. Giving them a place to relax and unwind can prevent them from harming themselves.

Thus, the findings showed that designing cafés to be accepting and supportive places for caregivers was a joint task among project staff and volunteers. The caregivers, therefore, could exercise their freedom to control their time, space, and activities, which is rare in their caregiving routines.

Social Capital embedded in the Care Café's Networks

With the purposive design of Caregiver Cafés by the project staff, social capital is a predominant outcome of the organization-brokered social network process (Burt, 2021; Small, 2009; Small & Gose, 2020). We discovered that the organizational norms in the Caregiver Café initiative led to several types of social capital, including emotional support, information, social companionship, and instrumental support. This social capital reduced the caregivers' burdens and challenges.

Emotional Support

The participants could seek acceptance and support from fellow caregivers in the cafés. After the participants got accustomed to the cafés, most of them started mingling with each other. They usually shared their "tears and hardship" in their caregiving experience. Since the norm of the café was accepting and understanding of caregivers' situations, the participants felt they were being listened to, understood, accepted, and supported. Caregiver, told how she got emotional support from the social interactions in the café: "I may have originally thought it's only my mom who's like that, or perhaps just older adults. It turns out, people of different ages can also experience similar things."

Originally, she thought that it was her own problem. But she found out that caregivers in the café also faced similar frustration. To a certain extent, this made her feel better. More importantly, when the volunteers talked about the hardships, difficulties, frustrations faced in the caring journey and their strategies to deal with these, sometimes the

participants shared something, as Wilma did: "Sometimes, after sitting down and talking, you realize, "Oh, it's like that." I said, "I haven't tried that before, I'll give it a try when I go back next time. Haha, like that" (.

As a result of this emotional support, the participants successfully developed a sense of belonging. Although the cafés were temporary and informal, they still acknowledged that the cafés were "their space and time," because they felt very familiar, safe, and comfortable with the space. The participants could get refreshed through their participation. Sophia shared her feelings about her participation at Caregiver Café:

> During the time in the café, you can take it easy. You can forget all the unhappy things. There isn't any pain to bother you, and even if there is, you hardly remember it because you're too caught up in the joy of being together. Chatting, eating, and just enjoying each other's company. Plus, you'll find that there's a place where you can truly recharge. It's not about having a lavish meal; even the little things, I find, are deeply satisfying (.

One volunteer, Mary, also talked about the sense of belonging and the feeling of safety in the Caregiver Café: "Yes, I won't tell anyone else; at least they don't know my friends, so it won't become public. Yes, I think that's the best way to handle it."

Information

In the organizational network developed by the Caregiver Cafés, the participants had more opportunities to share their experiences; they usually shared "practice wisdom" about caring work. That practical information could help resolve challenges in the caring routine of others. Mary shared what she learned from other participants about how to resolve a challenge in the caring routine. "You can gather different methods of problem-solving, like sharing strategies and tips—as if collecting a set of secret recipes. Indeed, it's like having a collection of secret strategies; not every method mentioned by others may suit your situation, but you can brainstorm and see which approach fits you best and then apply it as needed."

They also shared information about self-healthcare services. Wilma shared her

experience of circulating information about colorectal cancer among the caregivers at the café:

> So, there are some things I don't know about, and then a caregiver tells me. This caregiver explained what kinds of checks are available, like from what age one can start getting them. The Chinese University offers some free screenings for colorectal cancer and lung scans. Normally, I wouldn't know which network to search on – with so many extensive networks, it's hard to know where to find the information you want.

Social Companionship

The rationale of the Caregiver Café initiative is to engage with community caregivers and form a social companionship beyond formal social service. The Caregiver Cafés attempted to extend the organizational network for caregivers after they leave the cafés. The staff and volunteers underwent training to provide professional support and service to caregivers with specific needs. They helped the caregivers to navigate the social care system in Hong Kong and facilitated the development of an informal social support network among them. This network is important as it can fill the service gaps in the formal system. Staff Fanny shared an experience of how Caregiver Café facilitated the building of an informal social support network and the importance of this network:

> Staff at the Social Welfare Department might not necessarily have the time to share heart-to-heart conversations with the young lady when you're applying for things. However, our volunteers will definitely talk to her about personal matters. For example…after becoming friends and exchanging phone numbers with the volunteers and other sisters, they eventually started a WhatsApp group. The volunteers regularly update us on what they've done with the sister, as these sisters have become good friends. They often go out for tea together, look after each other's young children, and help each other out when one of them has an issue.

Another staff Wendy also had similar observations that social companionship could be obtained through the café network. Wendy explained that when the café was not in the operation hour, volunteers and caregivers could still contact others online via

instant message apps.

Instrumental Supports

The Caregiver Cafés produced a lot of instrumental supports to address tangible needs. Firstly, generalized exchange is a form of social capital found in the Caregiver Cafés. Generalized exchange refers to the network members other than the receivers reciprocating goods and resources (Blau, 1964/2017; Malinowski, 1922/2013; Molm et al., 2000). In Caregiver Cafés, the staff often organized the participants and volunteers to help each other under the norm of building up an informal social support network. Staff Fanny told an experience of helping a caregiver by mobilizing other caregivers' support.

> I remember a story where a young mother from Caritas needed to go for a medical check-up, and her baby was only two years old. It was hard for the social worker to make arrangements with the mother because she lived in a very remote village in Fanling. It was difficult to find community support, and they were always struggling to find a nanny who was willing to go to the hospital with them, to look after the child while the social worker went in to see the doctor with the mother. We then talked to the ambassadors at the caregiver café. They are often on the move, and our volunteers are on a shift system; they are caregivers themselves. Several said, ''I can help.'' They got to know the mother and understood what the social worker wanted to do for her. So they offered to help, and last time, one of them went to Prince of Wales Hospital to look after her child. Suddenly, there was someone who could help, and the mother trusted this person because she's from the centre, so she (the mother) let her help.

Secondly, the participants found it easier to gain access to services in other organizations because Hong Kong Federation of Women's Centres had built up a solid referral pathway with their collaborators. The five Caregiver Cafés in this study partnered with mainstream family and older adult services in the community. Once the staff and volunteers identified participants whose needs aligned with mainstream services, they referred them to the appropriate community service units This was a unique brokerage position and action of Caregiver Cafés in the organizational network.

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Discussion and Conclusions

Our findings revealed that the Caregiver Café's organizational norms influenced four dimensions of the network-building process among the caregivers of older adults. The establishment of the network allows caregivers to mobilize social capital from social institutions, neighbors, and peers (Burt, 2021; Lin, 2002; Small & Gose, 2020). Social capital not only provides emotional support, information, social companionship, and instrumental assistance to ease the burden of caregiving routines (Small & Gose, 2020), but it also fosters a relational foundation for community collaboration that supports caregivers of older adults (Small, 2021).. This paper enhances our understanding of organizational brokerage by highlighting the importance of an organization's agency in the network-building process (Burt 2021; Small & Gose, 2020). Existing studies have explored various mechanisms of brokerage processes, with differences primarily based on network member types and their roles (Lubbers et al., 2020; Small & Gose, 2020). This paper extends these theoretical insights by illustrating how organizations can facilitate the brokerage process by shaping norms and values (i.e., informality, engaging women caregivers from a gender perspective, and building up informal social support networks) to meet the needs of network members, in this case, informal female caregivers.

The findings revealed a distinctive organizationally-embedded support network, originating within the Caregiver Cafés, yet extending far beyond its physical confines. This network was not limited by geographical boundaries; it flourished outside the cafés through both in-person interactions at alternative locations and through the utilization of information and communication technology. In contrast to typical individual social support networks, participant networks were intricately woven into the framework of the organization. This structure enabled a dynamic flow of support; when network members, including volunteers and caregivers, encountered needs they could not fulfill alone, they could readily connect with Caregiver Café's staff, leveraging pre-established relationships. As a result, the organizations' embedded networks acted as a conduit, channeling support into the community in ways that conventional case services rarely achieved.

Knowing the process of social network and social capital development provides

the social care service practitioners a clear path to engaging with caregivers in the community. The findings demonstrated the importance of norms and rationales in creating support for caregivers. For instance, for the norm of informality, the practitioners might consider how to create a comfortable and casual physical environment (Ye & Liu, 2018) in terms of décor and registration procedures. It echoes the empirical studies showing longer duration of stay facilitates the development of social ties (Colistra et al., 2017; Duneier, 1992). It also aligned with the argument that the physical environment enhances the frequency of social interaction (Small & Gose, 2020). This study also shows the importance of organizational networks in the provision of support (Colistra et al., 2017).

The informal activities in the cafés helped participants regain a sense of control and autonomy from their overwhelming caring routines. This made the caregivers come to the cafés more often and stay longer. The significant effects of emphasizing women's perspectives guided the cafés to acceptance and understanding of the gendered power dynamics of informal caregivers (Wong, 2009). The norm of building an informal social support network reminded the practitioners to organize the activities with an outward focus and implement joint tasks. The activities facilitated homophily and cognitive empathy, which is the ability to understand someone else's predicament from their perspective (McPherson et al., 2001; Monge & Contractor, 2003; Small, 2017).

Regarding implications, this study has shown a way to create a support network for informal caregivers. The findings have demonstrated the important relationship between organizational norms, physical environment, and social network development in community caregiver support. It encourages the service practitioners to pay attention to the importance of organizational norms as they can influence the patterns of social interaction among participants and result in a supportive network (or not). Like the comfortable resting places, inclusive social interactions and personalized supports in the Caregiver Cafés facilitate the development of support networks. This gives a new perspective to launching caregiver support projects in Hong Kong (Jockey Club Caregiver Space Project, 2024) and developing sustainable caregiver support (Keating, McGregor, & Yeandle, 2021).

Regarding limitations, this study is based on the Caregiver Cafés operated by the

HKFWC. The research team used over a year of data to familiarize themselves with the staff of five Caregiver Cafés. The values, norms, and mechanisms shaping the development of social networks may be different in other organizations operating similar Caregiver Cafés in Hong Kong. The influence of the pandemic in Hong Kong during the research project also significantly increased the challenges in data collection. For example, some cafés needed to close because of the social distancing restrictions. In future theorization, we will be keen to explore more examples of the influence of different organizational norms on the network-building process. Researchers may need to conduct longitudinal studies to capture the long-term impacts of the café network and the social capital embedded within this network on family caregivers.

In sum, this paper provides a strategic approach in the design and operation of caregiving support environments by highlighting the importance of organizational norms, and physical environment. This approach not only reduces the challenges faced by caregivers but also facilitates the building of community support networks, paving the way for more resilient and inclusive social systems. As such, the implications of this study are vital for policymakers, practitioners, and community leaders working hard on creating more caregiver support through innovative and contextually situated strategies.

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