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Welfare at a (Social) Distance is a major national research project investigating the benefits system during the COVID-19 pandemic, funded by the Economic and Social Research Council as part of UK Research and Innovation’s rapid response to COVID-19. For more information about the project or to contact the team, please visit www.diwstantwelfare.co.uk
EXECUTIVE SUMMARY

An expanding range of external actors and organisations have come to mediate the relationship between benefit claimants and the Department for Work and Pensions (DWP). Reflecting on the important role benefits, crisis and employment support play in the lives of claimants, this report looks at two dimensions of navigating social security in the UK today. The first section of this report draws on a large representative survey of working-age benefit claimants (i.e. aged 18–64) to establish the extent to which people access support when making a claim for benefits and how this differs according to key claimant characteristics. The second section of this report explores how COVID-19 has affected the coverage and quality of support that many benefit claimants rely on through case studies of four local areas (Leeds, Newham, Salford and Thanet). Here, we draw on qualitative interviews with 32 local support organisations and meetings with 13 national informants representing key stakeholder groups and service delivery organisations.

The extent and nature of support accessed

Our research suggests that the amount of help received by benefit claimants is considerable. Overall, a third of claimants receive some kind of help. This principally involves support in making a claim, understanding eligibility, providing reassurance and obtaining evidence to complete applications. Claimants who are younger, from Black, Asian and Minority Ethnic (BAME) backgrounds, and those with a limiting health condition or disability all exhibit distinctive support needs and preferences. In our survey, the most common sources of support were partners, friends and family but a range of local and national support organisations also proved important in helping claimants. Of those accessing support, 44% of claimants (95% CI 42%-46%) received help from those working within local authorities and council welfare rights services, ‘Help to Claim’, housing associations, or libraries as well as from those working as social workers, GPs or other health professionals. A notable minority of claimants who did not access benefits support said they: couldn’t or didn’t want to receive help by phone or over the internet; they didn’t know how to access help during the first national COVID-19 lockdown; or they didn’t know who to get help from. This rose further for claimants experiencing a limiting health condition or disability.

A rising need for support

Accompanying a significant increase in the numbers claiming working-age benefits during the first phase of COVID-19, was a corresponding surge in demand for support from benefit claimants and those financially struggling. Policy adaptations introduced by local authorities and the DWP led to some positive impacts for certain claimants and low-income communities but the increasingly complex, often uncertain, situation led to individuals experiencing elevated levels of anxiety and acute distress amidst income and job losses. Almost all support organisations expressed concern about the extreme financial hardship and poverty they saw amongst service users, which was
also affecting new groups for the first time. Students, the self-employed and those with \textit{No Recourse to Public Funds}\textsuperscript{1} were identified as three of the worst affected and in most urgent need of assistance.

\textbf{Meeting the changing needs of service users}
Organisations experienced a change in the profile of people accessing their service from their ‘usual’ or ‘traditional’ client base towards a more diverse, ‘broader’ cohort. This included people claiming benefits and/or financially struggling who were relatively new to the benefits system and with little experience of social security more generally. Crisis social security measures improving, inter alia, access to the benefits system led to a reduction in requests for specific types of support. However, this was tempered by trepidation about the return of such policies and the prospect of support services being overwhelmed. Services had also seen an increase in enquiries related to employment rights, where employers had used the pandemic ‘as an excuse to get rid of people’ or were breaching health and safety guidelines in workplaces.

\textbf{Slipping through the cracks and ‘hidden’ demand}
For the majority of our participants, a significant increase in demand from new clients was also accompanied by a lack of contact with pre-existing service users. There was widespread concern that those with additional or complex needs were ‘slipping through the cracks’ and struggling to access remote support and adequate financial assistance. There was a strong sense from participants that an unseen, often out of reach, crisis was being experienced by certain groups of claimants and those financially struggling. Despite efforts to adapt working practices and provide remote support, many recognised that those exposed to the worst effects of COVID-19 were not receiving the support they needed either locally or nationally.

\textbf{Changes to organisational capacity}
While the majority of support organisations maintained a working presence throughout the pandemic, a number experienced considerable disruption to, or reduction in, their service. Organisational capacity was least impacted in workplaces where there had previously been ‘blended’ working models. Occasionally, participants experienced a boost to their capacity as a result of the pandemic, linked to perceived improvements in efficiency associated with the transition from a walk-in service to remote appointments. However, some organisations felt they were unable to meet the high levels of demand for their services on an ongoing basis not merely related to an increase in referrals but also due to the changing needs of claimants.
New ways of working
All of the support organisations we interviewed had transformed their operations, processes and activities to adapt to social distancing requirements. The biggest transformation was the move to remote support and home working. From the perspective of service managers, remote support was viewed as beneficial for staff, offering flexibility to accommodate caring and other commitments. For some, remote support was viewed as opening up new ways to better connect with certain client groups. However, for others it had emphasised the important role that office-based work played in informal relationship-building with clients and in assisting those with complex needs. To varying degrees, many participants expected adaptations made to their service to continue beyond COVID-19.

Quality of support
The majority of participants felt that the overall quality of advice and support work had diminished in the transition from in-person to remote support. Subtle aspects of work that are often unseen and time-intensive, such as assessing needs through in-person interactions, were made difficult during remote delivery. This had repercussions for workers’ capacity to build trust and rapport with clients and to read non-verbal cues. Some teams took additional steps to overcome the limitations of remote working. Inevitably, the benefits of these adaptations were limited to clients with digital access. While plans to retain significant elements of remote delivery were common, most participants also stressed the need for accessible face-to-face provision in the future.

Coordination within and between organisations
Communication between organisations and within partnership networks was initially disrupted in the transition to remote delivery but generally improved over time. Local crisis responses often reflected the strength of existing local networks and relationships and, where coordination practices were less developed, the crisis stimulated new connections. The most frequently discussed partner relationships were those with DWP although experiences were mixed. In some instances, the regularity and reach of contact was enhanced; for others, the quality of communication was inevitably compromised, requiring considerable work on the part of front-line staff and management, highlighting some of the longer-term challenges ahead.

Employment support
Organisations offering employment support encountered a number of distinct barriers to their operations and capacity to work with clients, the most critical being a lack of vacancies in the immediate context. Remote delivery of employment support posed similar challenges to other forms of support in terms of consent, rapport and the quality of interactions. On the whole however client engagement had improved with remote delivery due to the absence of geographical constraints or clients being more comfortable with online sessions. Blended models of delivery were under consideration for the future. As with other organisations, reductions in requests
for specific types of support were directly linked to policy changes, particularly the suspension/changed nature of conditionality. Nevertheless, organisations expressed concerns about the nature of increased future demand in a post-pandemic labour market.

**Looking ahead to an uncertain future**

Since the start of the pandemic, local ecosystems of support available to benefit claimants have been under considerable pressure to adapt. During the first phase of COVID-19, local authorities and large third sector actors stepped up to centralise and triage a significant increase in enquiries arising from lockdown, job losses and financial difficulties. Since then, many local services and organisations have adapted their referral process to more effectively appraise and respond to local needs through remote methods. However, many local organisations are still struggling to support specific groups of claimants and those financially struggling in the absence of face-to-face interactions. The ongoing closure of public infrastructure, buildings, and community spaces has forced referral pathways to adapt, but organisations are still experiencing limitations in terms of their ability to conduct needs assessments, or signpost prospective service users.

The implications of a longer-term transition towards remote or hybrid systems of benefits, employment and crisis support are significant and wide-ranging. Changing organisational capabilities, pressures on services, and socially distanced support were all highlighted as concerns in terms of an uncertain future for both clients and the local ecosystems of support that they access. Medium and longer-term issues related to three main areas: depleted organisational finances; diminished staff resilience; and the considerable cliff edges to come from caseload spikes, a changing policy landscape and the economic fallout of the pandemic. The withdrawal of crisis social security measures was regarded as a particularly serious risk and source of concern for the financial security and well-being of claimants and service users more generally.
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1. INTRODUCTION

In recent years, the process of claiming social security has become increasingly complex, with an expanding range of actors and organisations mediating the relationship between claimants and the Department for Work and Pensions (DWP). This trend has been driven by a series of reforms to the system that have externalised some of the responsibilities for successfully claiming benefits, as well as the costs associated with unsuccessful claims and disallowances. While many of these responsibilities are borne by claimants themselves, a diverse range of actors (informal and formal) have come to play an increasingly important role in the administration of social security.

These intermediaries provide information, advice and support that is often instrumental to helping individuals and households initiate and sustain a benefit claim. This support includes benefits advice, digital access, crisis support, emergency food provision, housing and welfare rights, income maximisation (such as advice on accessing correct benefit entitlements), employment support, money management and debt advice, community support, and local government assistance.

These actors play a particularly important role when the application process goes wrong, with applicants unsuccessful in their claim often relying on ‘unreported income or support from local authorities, charities or friends’.2 A recent paper by Hill et al (2020: 22) also highlights the crucial role of informal support networks for low-income families that often ‘protect against or mitigate the impact of employment or benefit changes’.3 Crisis social security measures introduced in response to COVID-19 temporarily made benefit processes easier to navigate and fulfill for many claimants.4 At the same time however, increased demand and reduced organisational capacity presented an important ‘stress test’ for the actors currently mediating social security provision. Their experiences highlight a number of lessons about the local ecosystems of support that so often prove crucial to bridging the social security claim.

At present though, our knowledge about the support that people receive when claiming benefits is relatively limited - both in 'normal times', and during COVID-19. In this report, we present extensive new evidence on this support from a major research project - Welfare at a (Social) Distance, funded by the Economic and Social Research Council as part of UK Research and Innovation’s rapid response to COVID-19. The report is divided into two parts.
METHODS AND REPORT STRUCTURE

Part 1: Survey evidence on the extent of support: The first section of this report draws upon a large representative survey of over 7,000 working-age benefit claimants (i.e. aged 18–64) to briefly outline the extent to which people access support when making a claim for benefits (excluding any help received from the DWP or the Jobcentre). We highlight key demographic differences in terms of the nature and sources of support used by claimants as well as differences between ‘new’ claimants, claiming since the COVID-19 pandemic started in the UK (in practice, since 1st March 2020), and ‘existing’ claimants (who were already claiming before this).

Part 2: Case studies on local ecosystems of support: During COVID-19, support organisations have had to adapt and respond to multiple challenges including those presented by social distancing. The second section of this report explores how this has affected the coverage and quality of support that many benefit claimants rely on. To explore this, we have: interviewed 32 individuals engaged in the provision of local benefits, crisis and employment support and observed multiple practitioner and policy steering groups across four local areas: Leeds, Newham, Salford and Thanet. Qualitative interviews with our 32 participants were conducted between June and October 2020. We have also held meetings with 13 national informants representing key stakeholder groups and service provider organisations. The four local areas were selected to capture a diversity of experiences and contexts in which ecosystems of support operate: they differ in their local governance structures, funding models, demographics and exposure to the effects of COVID-19. As such, they represent a range of different types and configurations of support available to claimants and provide an opportunity to consider how local factors impact upon benefit claimant experiences across local ecosystems of support.

Across each of these areas we sought to capture the experiences of managerial and front-line staff and interviewed the following strategic actors across all four areas:

- Head of welfare rights/administration in the local authority
- Managers in community support hubs (or equivalent) in the local authority or third sector
- Heads of Citizens Advice or Help to Claim
- Help to Claim advisors
- Crisis service workers, including foodbank volunteers
- Third sector support providers offering welfare rights advice/form-filling support
- Housing (Association) benefits and income maximisation support workers
- Managers or advisers engaged in employment support

Research into the operation and effects of social security tends to focus on the perspectives of benefit claimants themselves, or (less frequently) those of front-line Job Centre staff. However, much less attention is given to the actors, organisations and networks that help claimants navigate the benefits system. Such a focus offers alternative perspectives on the benefits system, deeper insight into its mediated nature, and the implications of this for access and universality in the social security system.
2. HOW MUCH SUPPORT DO BENEFIT CLAIMANTS RECEIVE?

Many individuals need and receive support in order to initiate or sustain a claim for benefits. For example, in a recent report by the DWP, only 54% were able submit a claim online unassisted and 43% said they needed more support registering their claim.\(^6\) Our survey enables us to look at this in much greater detail. We asked a representative sample of over 7,000 claimants whether they had received any help in making their application for benefits (excluding assistance from Jobcentre Plus or DWP).\(^7\) Overall, the amount of help received was considerable with 33.6% (95% confidence interval [CI] 32.5%-34.7%) of claimants in our survey receiving some kind of help. A quarter of new claimants (25.4%, 95% CI 23.9%-26.9%) received support, compared to 39.5% (95% CI 38.1%-40.9%) of those who made their claim prior to the pandemic.

There were also considerable differences across claimant groups: those claiming Employment Support Allowance (ESA) were most likely to have received help with their claim (46.5% of new claimants and 56.9% of existing claimants) with those claiming Jobseeker’s Allowance (JSA) least likely (16.9% of new claimants and 17.5% of existing claimants). A quarter (25.3%) of new Universal Credit (UC) claimants received help, compared to almost a third of existing UC claimants (32.2%).

**Figure 1.** Whether received any support making a benefit application (by claimant group)

Source: YouGov survey of benefit claimants, new (n=3,167) and existing (n=4,434) claimants. The sample size was 2,643 for new UC claimants; 157 for new ESA claimants; 367 for new JSA claimants; 1,429 for existing UC claimants; 1,660 for existing ESA claimants; 246 for existing JSA claimants and 1,099 for Tax Credit claimants.
There are a number of noteworthy demographic differences in who received help. Younger claimants were more likely to have received support: over a third (34.4%, 95% CI 28.4%-40.3%) of 18–24-year-olds who have made an application since COVID-19 had received help, compared to just 20.7% (95% CI 17.4%-23.9%) of those aged 55-64. Amongst existing claimants this difference was particularly pronounced, with 58.9% (95% CI 50.3%-67.4%) of 18–24-year-olds having received support compared to 40.4% (95% CI 37.6%-43.1%) of those aged 55-64. Those with a limiting health condition or disability were also much more likely to have received help with their application (42.6%), compared to those without (21.9%). As we might expect, those with more complex or acute needs were more likely to access benefits support: more than two fifths (43.7%, 95% CI 41.0%-46.3%) of those experiencing food insecurity (been hungry but could not afford to eat) had accessed support, compared to 31.1% (95% CI 29.9%-32.3%) who had not. This is perhaps to be expected given that claimants experiencing food insecurity are more likely to have relied on charitable food aid and/or auxiliary crisis support services in the past.

Figure 2. Received some help making an application by demographic characteristics

Claimants drew on a range of support when navigating the benefits system. The most common sources of support were partners, friends and family, local charities and groups (e.g. CPAG, Citizens Advice), and GPs or other health professionals. Of those who received support, over half (53.7%) of new claimants drew on the help of their partner compared to a third (34.2%) of existing claimants. This underlines the importance of familial, household and friendship networks in supporting claimants, which matters because the quality and nature of support received can affect whether a successful application is made.

Aside from this, there were a range of organisations that supported individuals in making their claim such as those working within local authorities and council welfare
rights services, ‘Help to Claim’, housing associations, libraries as well as those working as social workers, GPs or other health professionals. These actors contribute toward local ecosystems of support that help ‘bridge the claim’ for some individuals seeking financial assistance from the DWP. Overall, 15.6% (95% CI 14.8%-16.5%) of all claimants received help from one or more of these support organisations and services in our survey. This was much lower amongst new claimants (5.3%, 95% CI 4.1%-6.4%), compared to existing claimants (18.5%, 95% CI 14.8%-16.5%). Of those that did receive some form of help, 44.3% (95% CI 42.4%-46.2%) of claimants received this from these local ecosystems of support. Again, existing claimants who received help were much more likely (48.4%, 95% CI 42.4%-46.2%) to access support from these organisations and services compared to new claimants (21.4%, 95% CI, 17.2%-25.5%). For example, existing claimants were much more likely to access help from someone at a local charity or group (19.2%) compared to new claimants (7.0%) as well as receiving help from a GP or other health professional (15.7% and 2.1% respectively). The latter is perhaps unsurprising given that existing claimants are more likely to experience health conditions or disabilities and to be claiming ESA.

Figure 3. Source of support (among those receiving some support)

The majority of those who received help relied on just one source of support (84.3% of new claimants and 72.7% of existing claimants receiving support). Correspondingly, over a quarter (27.3%) of existing claimants who received support received this from multiple sources with 10.3% receiving help from three or more sources, compared to just 4.2% of new claimants. Greater reliance on multiple sources of support suggests a more complex and acute need profile amongst existing claimants who are more likely to experience food insecurity, debt accumulation and depleted financial reserves. For example, food banks were used by 10% of existing claimants compared to 5% of new claimants. Similarly, emergency help from the council or a charity was used by 5% of existing claimants and 2% of new claimants.
There are a number of demographic differences in terms of the amount of support claimants receive. Claimants who are younger, from Black, Asian and Minority Ethnic (BAME) backgrounds, men, and those with a limiting health condition or disability are all more likely to have received help from three or more sources. In particular, BAME claimants tended to access more help, with 17.1% (95% CI 6.1%-28.1%) of those who received support receiving this from 3+ sources compared to 8.4% (95% CI 5.9%-10.9%) of white claimants. In addition, 11.1% (95% CI 8.0%-14.2%) of those experiencing a health condition or disability who received support received this from 3+ sources, compared to 3.7% (95% CI 0.3%-7.1%) of those not experiencing this.

Of those who received help, the most common way to receive support was in person, followed by over the phone. There were marked differences in how claimants accessed benefits support depending on whether they made their claim before or after COVID-19 began. As anticipated, existing claimants were more likely to have received support in person (68.5%), compared to new claimants (26.5%) who began navigating the benefits system after social distancing measures and the first national lockdown began. Around a quarter of new claimants who received help, accessed benefits support online, either by speaking to someone via chat or email (25.7%) or reading webpages (25.2%). We know from Citizens Advice that benefits enquiries have been the top issue since lockdown and so this is perhaps to be expected.\textsuperscript{12}
Based on our previous work, we know that the new cohort of COVID-19 claimants were initially younger, more likely to be BAME and less likely to be experiencing a health condition or disability. Given the switch to remote methods of benefits, crisis and employment support, it is worth exploring how these claimant groups tend to access support.

- **Younger claimants (18-24)** accessing benefits support were more likely to do so online and via social media compared to older claimants (55-64): 17.8% (95% CI 12.4%-23.7%) of younger claimants receiving support made use of online (chat or email) and 13.4% (95% CI 8.5%-18.3%) made use of social media compared to just 5.5% (95% CI 3.2%-7.7%) and 2.3% (95% CI 0.8%-3.8%) of older claimants. By contrast, older claimants were more likely to access benefits support in person with 72.9% (95% CI 68.4%-77.3) doing this (compared to 59.5% (95% CI 52.7%-66.7%) of younger claimants). Although the change to remote methods of support, particularly online, may be more accessible to younger claimants it is still much less popular overall than in-person help.

- **BAME claimants who received help** were much more likely to access remote forms of benefit support: 25.9% (95% CI 18.8%-32.9%) of BAME claimants who received support accessed help online (speaking to someone via chat or email), compared to 11.9% (95% CI 10.4%-13.5%) of white claimants; 38.8% (95% CI 30.9%-46.6%) accessed help over the phone compared to 24% (95% CI 22.0%-26.0%) of white claimants; 68.1% (95% CI 65.9%-70.3%) of white claimants receiving support accessed this in person compared to 46.3% (38.3%-54.4%) of BAME claimants.
Those with a limiting health condition or disability were also much more likely to have received support in person (69.7%, 95% CI 67.4%-72.0%) compared to those with no health condition or disability (48.1%, 95% CI 42.5%-53.7%).

As illustrated later in this report, BAME individuals and those experiencing a health condition or disability were two key client groups that local organisations were concerned about during the first phase of the pandemic. According to our participants, both client groups were believed to be accessing support services less with a number flagging concerns around accessibility, trust and collapsed referrals. This is particularly concerning given the greater reliance on in-person support for claimants with a health condition or disability.

Thinking about exactly what kinds of support claimants were helped with, the most common support was with making an application (50.4%, 95% CI 48.5%-52.3%), followed by making sense of their eligibility for specific benefits (38.2%, 95% CI 36.3%-40.1%), and then reducing associated anxieties / providing reassurance (37.4%, 95% CI 35.5%-39.3%). Compared to new claimants, existing claimants tended to access different types of support. For example, 56.5% of the existing claimants accessing help received support making their application, compared to 37.0% of new claimants. Similarly, 42.4% of existing claimants received support to reduce their anxiety compared to 26.5% of new claimants. Existing claimants were also more likely to receive support in obtaining the evidence needed to complete their application; 38.7% required help with necessary medical evidence compared to 10.7% of new claimants. This is perhaps best explained by the changed profile of COVID-19 benefit claimants who are less likely to be experiencing a health condition or disability. In addition, 29.5% of existing claimants required other evidence to complete an application compared to 20.9% of new claimants. Finally, 15.5% of existing claimants received help in challenging a decision made by Jobcentre Plus and DWP compared to just 3.9% of new claimants. This likely reflects the altered policy landscape that new claimants found themselves in with extended reassessment periods, the temporary suspension of work-related conditionality, and so on at the time this survey was conducted.
Looking across different demographic groups, there are a number of differences in terms of access and support needs. In light of the differences above, we focus here on BAME claimants and those experiencing a health condition or disability.

BAME claimants were more likely to receive support on the initial stages of an application compared to white claimants. For example, 38.0% (95% CI 29.7%-46.4%) of BAME claimants received help with making them aware of the benefit and 46.4% (95% CI 37.8%-54.9%) receiving help on understanding if they were eligible, compared to 30.7% (95% CI 28.6%-32.7%) and 37.4% (95% CI 35.3%-39.5%) of white claimants respectively. BAME claimants were also more likely to receive help with accessing a computer (15.2%, 95% CI 9.0%-21.4%) compared to white claimants (5.9%, 95% CI 4.8%-6.9%). Here, access to and dissemination of high-quality up-to-date information on benefit eligibility appears particularly important in the current COVID-19 context, as does adequate access to digital technology to ensure remote support is available to BAME claimants. Our recent report on claimant experiences highlights the need to ensure people can access information and suitably qualified staff to provide that information.34

Claimants experiencing a health condition or disability were more likely to access help across a range of domains including support making their claim, getting medical to complete an application, and making them less anxious. As demonstrated by others, these differences signal to particular support needs and adaptions that claimants experiencing health conditions or disabilities would benefit from both during and beyond the pandemic.
Finally, it is important to look at why people did not receive support. When claimants were asked why they did not access support, the overwhelming majority (76.9%, 95% CI 75.7%-78.1%) said that this was because they didn’t need any help. However, there was also a notable minority of claimants who did not access benefits support for other reasons: because they couldn’t or didn’t want to receive help by phone/over the internet (2.8%, 95% CI 2.3%-3.3%), didn’t know how to access help during the first national COVID-19 lockdown (5.0%, 95% CI 4.1%-5.9%), or didn’t know who to get help from (11.6%, 95% CI 10.7%-12.5%). This rose further for claimants experiencing a limiting health condition or disability: where 3.9% (95% CI 3.1%-4.7%) said they couldn’t or didn’t want to receive help by phone/over the internet, 6.0% (95% CI 3.7%-8.4%) said they didn’t know how to access help during the first national COVID-19 lockdown, and 17.7% (95% CI 16.1%-19.2%) said they didn’t know who to get help from.

As discussed in the following section of this report, these reasons for not accessing support appear particularly significant for certain client groups who have been less likely to access support remotely as a result of digital exclusion, mistrust, uncertainty and a lack of access to appropriate technology. At a time when the support provided to benefit claimants has to adapt to remote working and minimal face-to-face interaction, further attention is needed on those claimants who are struggling to identify and access appropriate support when liaising with DWP, Jobcentre Plus, and other local organisations and networks. It is also worth noting that the survey data drawn on here only refers to claimants who have successfully made a claim for social security. It does not include non-claimants who may have lacked the support they needed to realise they were eligible or to successfully navigate the system.
Figure 8. Why claimants didn’t receive any help with their claim by claimant group

Source: YouGov survey of benefit claimants, new (n=2,314) and existing (n=2,446) claimants.

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3. HOW HAVE BENEFITS, EMPLOYMENT AND CRISIS SUPPORT BEEN AFFECTED BY COVID-19?

In the previous section of this report, we looked at the extent and nature of support that people receive when making a claim for benefits. The results demonstrate a considerable degree of support received by those navigating the benefits system with over a third of claimants receiving some kind of help. Whilst familial, kinship and support networks were an important source of support, a range of (local) organisations and services also proved important for many claimants. Of those receiving support, 44.3% (95% CI 42.4%-46.2%) of claimants received help from those working within local authorities and council welfare rights services, ‘Help to Claim’, housing associations, libraries as well as those working as social workers, GPs or other health professionals. These actors and organisations contribute towards important networks of support that help ‘bridge the claim’ for many individuals.

In this section of the report, we consider how these local networks of support have been affected by COVID-19 and how organisations have adapted to the challenges presented by social distancing requirements. As the first national lockdown commenced in March 2020, a range of funding mechanisms and grants were rolled out to finance local responses to COVID-19. The March budget announced a £5 billion Covid-19 Response Fund to alleviate pressures on the NHS and other public services as well as to ‘support local authorities to manage pressures on social care and support vulnerable people’. An additional £500 million Hardship Fund was also announced to support economically vulnerable people locally (primarily through council tax relief).

Over the course of 2020, additional funds were announced to support national and local responses to COVID-19. This included £750 million for front-line charities and within this £15 million extra funding for Citizens Advice and Citizens Advice Scotland to support their operations. However, local responses primarily drew upon funds from central government, which were paid to local authorities in four tranches (March, April, July and October 2020). Initial allocations were made according to the adult social care needs formula, but following criticism of that approach, subsequent tranches were distributed using a ‘COVID-19 Relative Needs Formula’ that factored in a broader range of local considerations.

The impact of this funding has varied considerably, depending on the funding allocations made and whether existing infrastructure or strong partnerships (between local authorities and the voluntary and third sector) were already in place prior to COVID-19. This section of the report draws on interviews with organisations across our four case study areas (Leeds, Newham, Salford and Thanet) where different funding allocations and approaches were observed in their emergency community response to the pandemic. A brief outline of the local response for each area is provided below:

Of our four case study areas, Leeds received the largest share of local COVID-response funding. The response from Leeds City Council (LCC) drew upon learning from the 2015 floods. In early March 2020, LCC established weekly Bronze Group
meetings including internal council services and external partners (such as the DWP) on financial inclusion and separately on emergency food. The aim of both meetings was to ensure key services and organisations were kept up to date on how services were being delivered and to develop collaborative approaches to addressing issues. The Council also worked to reallocate workforce capacity to support emergency COVID-19 services, for example Customer Service Operators moving to the COVID-19 helpline and emergency food provision. A COVID-19 Helpline was established alongside the existing Local Welfare Support Service. Support was delivered by the council and in conjunction with the third sector and volunteers through 27 Community Care Hubs, located to support residents across all 33 Leeds wards. In addition to food parcels, the service offered other support with shopping, prescriptions, fuel, hygiene products, baby products, dog walking, and welfare/befriending telephone calls. A traffic light system was used to prioritise support to the groups in most urgent need.22

The London Borough of Newham received the second largest funding allocation out of our four case study areas for its local COVID-19 response. Newham was particularly exposed to the impacts of COVID-19, experiencing both the highest COVID-19 mortality rates in England and disproportionate socio-economic impacts. The #HelpNewham response was shaped by these unique local challenges. The council directly supported the most vulnerable residents (with delivery of food, prescriptions and other supplies, as well as befriending). Additional resources went to the voluntary and community sector to support the wider community. An evaluation noted that the council distributed over 80,000 food parcels, 15,000 prescriptions, called over 30,000 residents, and the voluntary and community sector was estimated to have distributed an additional 108,000 food parcels and 60,000 hot meals.23

In Salford, the local emergency response took the form of a helpline and clearing house for referrals. Incoming requests either via telephone or an online form were triaged based on the urgency of need and individuals were signposted on to services.24 This was made possible through the Spirit of Salford Network: a partnership of local organisations including Salford City Council, Salford CVS and NHS Salford CCG. Those seeking assistance could self-refer identifying the type of help they needed and the service that best met their needs. This included referral to established services within the council to get help with applying for benefits as well as third sector groups such as Citizens Advice Salford to get help with a broader range of consumer, employment and housing rights. As a result, service users were able to access emergency food, benefits advice, ‘digital buddies’, mental health and social isolation support, employment advice, debt advice, and so on. An outbound call facility was also set up to target 13,000 people who were perceived to be particularly vulnerable (though there was relatively low take up on this as many people were able to access their existing networks of support).

Of our case study areas, Thanet received the smallest allocation of COVID-19 response funding reflecting its smaller size and thus demand for support. During the first wave of the pandemic, the local response was largely delivered through an
existing network of support organisations. Initial efforts to coordinate the pandemic response focussed on ensuring that local organisations were adequately resourced in terms of volunteers but additional efforts were also made to improve upon this for anticipated future spikes of the virus. Similar to other areas, highly informalised sources of support developed across key domains including mental health, emergency food and employment advice. These initiatives were often advertised via social media or communicated through established networks and organisations already working with potential beneficiaries. The Kent Resilience Forum and Kent County Council played an important role in shaping Thanet’s community response efforts. Kent Resilience Forum’s ‘cell’ on vulnerable people and communities was principally responsible for supporting the delivery of goods and essential household items to ‘vulnerable residents’, as well as managing the logistics of delivering support to ‘vulnerable people’ and communities.

Emergency community responses across our four case study areas triaged enquiries and local needs according to both demand and capacity. Local services and support made available tended to target support towards those worst affected by the pandemic, including towards those with pre-existing health conditions and those who were shielding. Whilst support services did not focus exclusively on benefit claimants or those that were financially struggling, these groups were often included and indirectly prioritised in the provision and referral of assistance. New or additional sources of support often ran alongside a range of established services and networks that adapted to or contributed to such efforts.

To explore how benefits, crisis and employment support have been affected against this backdrop, we now consider the experiences of strategic actors across our four case study areas. This includes participants involved in benefits advice and income maximisation; digital access; crisis and emergency food provision, housing, welfare rights, employment support, money management and debt advice, community support and local government assistance.

Drawing on the expertise of these actors, we first consider the impact of the pandemic on benefit claimants. Here, we reflect on a rising need for support, the changing needs of service users and the risk of certain groups ‘slipping through the cracks’ as organisations adapt to delivering their support at a social distance (sections 3.1-3.3). We then turn to consider what bearing COVID-19 has had on the operations of support organisations themselves. We focus on organisational capacity, changed ways of working, the quality of support possible within the present context, coordination and communication and how employment support is adapting given the rapidly changing policy and public health landscape (sections 3.4-3.8).

3.1 A RISING NEED FOR SUPPORT
Alongside a significant increase in the number of households claiming working-age benefits there has been a corresponding surge in demand for support from benefit claimants and those financially struggling. Participants noted increased demand for a diverse range of services despite substantial disruption to the referral process un-
derpinning local ecosystems of support, as well as considerable adjustments to the benefits systems intended to improve access and income adequacy. The majority of our participants noted an increase in the number of clients seeking help as well as changes in the type of enquiries received depending on the particular phase of the pandemic. Enquiries for support associated with emergency food provision, benefits and unemployment grew considerably at the beginning of the pandemic and have remained high since. Overwhelmingly, job and income loss were the primary issues facing claimants who were adjusting to a radically changed labour market and financial situation.

“...we’re noticing at the moment that the biggest issue right now, is job losses, and people working reduced hours. Obviously, the need for people that have possibly never, ever claimed benefits before, now having to rely on the welfare state for support during the crisis.” Third sector Support Provider, Salford

Participants detailed how a constantly changing policy and public health landscape has complicated the lives of many existing and new benefit claimants. In a variety of profound ways, COVID-19 has disrupted household, childcare, income and employment security across the board. According to our participants, these cumulative changes have pushed those financially struggling to crisis point with many trying to adapt with little resource or capacity to deal with additional pressures and strains. The increasingly complex, often uncertain situation facing benefit claimants has made it harder to: a) offer adequate support that alleviates financial or logistical concerns, and b) help in a timely and efficient manner. As a result, support services and organisations are witnessing elevated levels of anxiety and acute instances of distress amongst those seeking help. There are also concerns about the increased social isolation and loneliness that comes from social distancing requirements and the lack of face-to-face interaction.

“Yes, I mean, naturally there was an increase in anxiety, mental health, depression, things like that, especially people who didn’t have any sort of either family unit or they were isolated.” Employment Support Provider, Leeds

Almost all of our participants expressed concern about the financial hardship and poverty being experienced by their local service users. This was seen as the primary impact of the pandemic on people’s lives and the biggest challenge facing local communities in the wake of COVID-19. Participants described how poverty was touching new people and groups for the first time, many of whom were dealing with significant income shocks and ongoing financial liabilities. One participant highlighted their awareness-raising role with respect to measures such as Discretionary Housing Payments, which clients were frequently unaware of. Concerns were also raised about general levels of awareness of the benefits system:
“There are some people who’ve never claimed, at all, and until someone actually directs them to say, ‘Can you try the Help to Claim line?’ they would struggle on whatever limited income they’ve got. With the furlough system, some people have really dropped down. Their income has really dropped, but they don’t understand the benefit system and don’t even know that they’re eligible for any help.” Advice Provider, Newham

For both their operations and service users, participants routinely discussed the uncertainties arising from changes to the benefits system and local authority assistance. One participant noted ‘massive’ issues with service users not understanding how eligibility for legacy benefits is affected when making a new claim for UC. Others discussed client anxieties surrounding the suspension and subsequent reintroduction of conditionality.

“… throughout that whole period, a lot of people have raised the concern to me of, well when is the Jobcentre open? Are they going to inform me when I’ve got to do it? Am I suddenly just going to get a letter saying what work have you been looking for? How much notice am I going to get to say right, I need to start looking?” Benefits Advice Provider, Newham

Others described increasingly acute levels of financial strain amongst low-income communities who were already struggling prior to the pandemic. Many of the coping strategies that low-income service users engaged in were no longer possible due to social distancing requirements and local lockdowns. Participants described how those seeking support were often struggling to bridge the growing gap between their household income and the most basic costs of living associated with health, housing and food.29 Such is the extent and severity of need that some organisations adapted their services and protocols to try and support claimants with the household fundamentals (e.g. food for children). This was particularly the case for those who were waiting for their benefit application to be processed or for their first benefit payment. Students, the self-employed and those with No Recourse to Public Funds were three of the groups that were consistently discussed as some of the worst affected by the pandemic and in most urgent need of assistance.

“So, you’ve already got people living in poverty, even before lockdown. It’s just got worse through lockdown.” Third Sector Support Provider, Thanet

“Lots of students, lots of people that have been quite happily self-employed and running their own businesses, and then cannot have access to anything...” Welfare Rights Provider, Newham

Beyond the significant and negative impacts of COVID-19 on people’s livelihoods, adaptations introduced by local authorities and the DWP have resulted in a number of positive impacts for certain benefit claimants and low-income communities. A number of participants discussed the benefits of policies such as raising, albeit temporarily, the basic element of Universal Credit and Working Tax Credit by £20 per
week suggesting that ‘these sorts of things will have benefited our traditional service users and the ones that have been really struggling over the last few years’. Easing of conditionality and stream-lining identity verification by the DWP were both viewed as positively impacting on benefit claimants, particularly those furthest from the labour market with more complex needs. Due to a policy of forbearance and increase in local housing allowance at the beginning of the pandemic, participants were also witnessing fewer evictions and repossessions amongst service users. That said, support organisations were concerned about the problem of debt accumulation experienced by many claimants who were trying to bridge the gap between income and outgoings. As detailed later on, these strategies to meet housing costs and service ongoing financial liabilities were felt to be storing up problems for the future in terms of housing security.

“What I have got to be conscious about though, and we are speaking with other teams, is that when the three-month holiday, if you like, is lifted and landlords then start moving forward to evictions then we are going to see an increase in numbers coming through.” Local Authority Support Provider, Salford

In another report recently published from Welfare at a (Social) Distance, we have detailed the situation of benefit claimants and the negative effects of the pandemic on their housing, income and employment security. Here, our participants across the four case study areas also expressed concerns about the negative impacts of the pandemic on service users but also highlighted further risks associated with social distancing requirements that make it difficult to access effective and adequate support remotely. This is especially true for those claimants and service users with more complex needs (mental health issues) who, in this instance, are least able to access the support they need.

3.2 MEETING THE CHANGING NEEDS OF SERVICE USERS

As we describe above, social distancing requirements instigated a significance increase in the number of claims for social security, particularly UC. There was a corresponding surge in demand for support services locally. Some organisations felt they were unable to meet the high levels of demand for their services (even after the initial wave of enquiries in Spring 2020 receded). However, this was not automatically experienced as a simple increase in enquiries or referrals; there were a number of factors influencing the extent and type of demand for support services.

A range of organisations described a change in the profile of people accessing their service, as well as those interacting with public institutions and third sector support groups more generally. Many participants noted a departure from what they described as their ‘usual’ or ‘traditional’ client base suggesting a more diverse, ‘broader’ cohort of people claiming benefits and financially struggling. As outlined in the first section of this report, a quarter of new claimants accessed support when making their application for benefits and we can see this reflected in the experience of support organisations. Such service users were described as being relatively new to
the benefits system with little experience of social security, which is perhaps to be expected given that the new cohort of COVID-19 benefit claimants differ when it comes to their demographic characteristics, as well as their educational and labour market background. New claimants were felt to have higher expectations of the benefits system but poor understanding of eligibility and what was required of them. The changed profile of those accessing support highlights the scale and reach of the coronavirus crisis. Increased enquiries from the self-employed, particularly those working in the gig economy, was a recurring issue mentioned by participants.

“I would say there are more people coming into contact with the council who have never been in touch with the council before. Who, ordinarily, their interactions with the council have been about rubbish collection and paying their Council Tax, and that’s been it. So people who do need more help and they’re not quite sure where to go.” Local Authority Support Provider, Newham

“…we were incredibly busy, but there was a replacement with our usual client base. Suddenly, the non-English speaking people were just not there. Everyone we were dealing with was suddenly white, British, self-employed; that was just overwhelmingly every single person, practically.” Benefit Support Provider, Leeds

Multiple participants expressed concerns about people not making applications for benefits or other forms of support that they were entitled to, either due to low levels of knowledge about the system or because of stigma linked to the process.

Alongside a changed client base, organisations experienced a reduction in requests for specific types of support which they directly linked to changes such as the £20 per week UC ‘uplift’, the suspension of some deductions from benefit payments, the suspension of conditionality, the moratorium on evictions, and the extension of health re-assessment periods (which some felt explained a reduction in enquiries from disabled service users). This was also a common issue for employment support services where demand was initially reduced because of the suspension of conditionality and DWP’s focus on processing new applications. That said, it was also common for participants to express a sense of trepidation about the return of such policies and their services being overwhelmed in turn.

“…they took measures to remove the conditionality in Universal Credit, so people didn’t have to have that conversation with a work coach about what jobs they were looking for, so they removed the risk of any sanctions … so to a certain extent some of it may be our traditional core base of customers, suddenly found it a lot easier to manage. Their benefits were just paid, without the normal hurdles, but the people coming into the system, they’re the people who probably we would have liked to advise and make sure everything was correct and they got appropriate advice.” Advice Provider, Leeds
Participants tended to highlight the considerable increase in demand on their service and the risks this presented to being overwhelmed by enquiries. For example, one participant said that their service, six months into the pandemic, was doing its best to upscale phone capacity as they were still only able to answer about 20% of incoming calls. There were a number of different groups that were identified as contributing towards this increased demand. The most frequently mentioned groups were people: with poor knowledge or understanding of the benefits system; experiencing extreme financial hardship; struggling with IT-related barriers (in terms of knowledge, literacy and access); and those with No Recourse to Public Funds. A number of people also observed that local demographics and context exposed certain groups to the fallout from COVID-19 more than others. Newham for example, experienced a surge in demand for certain types of support, particularly from young people, migrant workers and the self-employed. Participants explained that a high student population, precarious employment practices and the need to travel elsewhere in London for work, increased the COVID-19 transmission risk and the level of need.

“Generally, you’re looking at a 100-200% increase in demand for the service... increase in demand on need.” Advice Provider, Newham

“...we saw an increase in demand for a lot of our services... when the pandemic first hit, then you had a new wave of people who were unemployed and needed to access support for benefits. We saw a surge in demand, which mirrored what you saw in terms of a surge in applications for Universal Credit.” Advice Provider, National

In addition to the increasing number of people contacting services, it was also common for people to experience a qualitative change in the demands on their service. A number of participants commented on their perceptions of increasing complexity in the cases and enquiries they received.

“Demand increased, supply [capacity] decreased, and the demand was more time-consuming because problems were more complex” Advice Provider, Leeds

Multiple participants also mentioned that their services had seen an increase in enquiries relating to employment rights, where employers had been circumventing employee rights and using the pandemic ‘as an excuse to get rid of people’, or breaching health and safety guidelines in physical workplaces. Increased demand for services was also associated with new approaches to working such as proactive outreach models to support clients who were shielding or contributing towards local crisis-response arrangements. A small number of participants noted that the pandemic had exposed ‘hidden demand’ that was already there.

“...we managed to transfer all that online very, very quickly. However, what we uncovered, I think it’s what we suspected all of the time, but what we
have really had to face up to is the issue of the extent of digital exclusion in the borough.” Employment Support Provider, Newham

Many organisations were also concerned about an increase in demand for mental health, domestic abuse, and child welfare services. It was noted that certain types of support work were especially difficult to deliver in the context of lockdown; for example, many organisations raised concerns about how support could be provided to people at risk of domestic abuse. Increases in specific types of demand in combination with access issues was often associated with fears of hidden demands and people falling through gaps in provision.

3.3 SLIPPING THROUGH THE CRACKS AND ‘HIDDEN’ DEMAND

For the majority of our participants, the significant increase in demand from new clients was also accompanied by a lack of contact with existing clients. There was widespread concern that those with additional or complex needs were often ‘slipping through the cracks’ as they were struggling to access remote support as well as adequate financial assistance. Overall, three key groups were identified as particularly vulnerable by our participants: people with digital literacy or digital access issues; people for whom English was not their first language; and people with No Recourse to Public Funds.

Firstly, participants were concerned about client groups with poor digital skills, limited access to technology or who lack confidence communicating over the phone. Some organisations with defined customer bases (e.g. Social Landlords) could make educated guesses about the scale of the problem. For others it represented an unknown quantity given the suspension or reduction of face-to-face delivery.

“This eighty per cent of my clients don’t have access to the internet.” Third Sector Support Provider, Thanet

“What it is very, very hard to assess really accurately is what we don’t know. You don’t always know what you don’t know. What about those people who were trying to get to us, who couldn’t find a way to us without being able to come through the door?” Employment Support Provider, Newham

Secondly, a reliance on remote contact presented problems for service users whose first language isn’t English. It was felt this was a group of ‘walk-in’ service users that were best served face-to-face. Such service users were flagged as a key group that had ‘dropped off the radar’. While not all of the areas shared the same levels of diversity in terms of population ethnicity and nationality, they shared an understanding that BAME and migrant communities were among the hardest hit by the COVID crisis - but also those with whom they were often lacking contact. The majority of participants described the language barriers preventing people accessing services and outreach efforts. Again, many feared there were communities slipping through the cracks.
“...in that first noticeable four-week period of the crisis we noticed our English-as-a-second-language clients, our asylum seeker clients, our homelessness, our street homelessness, our dependency clients, all those sorts of client groups noticeably reduced in volume compared to the previous profiling. So, I think that’s to do with face-to-face and the withdrawal of face-to-face services.” Benefit Support Provider, Salford

Third, people with No Recourse to Public Funds were widely acknowledged as a particularly vulnerable group. This is also a group that is unevenly distributed across the country. Of the case study areas, Newham faced exceptionally difficult circumstances in contending with disproportionately high levels of residents with No Recourse to Public Funds within the borough. During lockdown, many of those worst affected were supported by emergency food provision which generally expanded during the early phases of the pandemic.

“...we have had quite a few enquiries from residents with no recourse and trying to find support for them has been challenging, because ultimately the financial support isn’t there from the welfare perspective. They’ve got children, yes, social services may be able to provide some financial support towards the children. There’s local voluntary sectors that can provide advice around immigration status, but what people really want is ‘who’s going to pay my rent’ and unfortunately, yes, there’s no easy answer for that, so that’s certainly a challenge.” Advice Provider, Newham

Alongside these three specific client groups, a number of others were repeatedly mentioned by participants. For example, contact with other ‘typical walk-in’ service users such as prison leavers and homeless people had fallen. Older claimants and people experiencing poor mental health were widely acknowledged to be particularly at risk from increased social isolation and support processes sometimes adapted in an attempt to address this. A number of participants were concerned about the lack of contact from migrant populations and Roma communities who, it was felt, were ‘very reluctant to engage with any shape of bureaucracy’ and/or did not trust public institutions. It was also significant that a number of participants raised concerns about a decline in ‘end of life’ referrals for people who had cancer or who were terminally ill.

“I think the difficulty was obviously that the people that we were aware of were the people who had either engaged with their mosque or their church, or gone to a food bank, or talked to somebody about it. Whereas there are likely to have been a huge number of other people who didn’t talk to anyone, who were just really struggling, who we didn’t reach, and they’re probably the ones that needed the help the most.” Local Authority Support Provider, Newham

“So I think there is something about access to the technology to apply for things online is a big issue. So that has to be the way forward. It was always
going to be the way forward, but we’re leaving people behind who are most vulnerable if we’re not careful.” Third Sector Support Provider, Leeds

Overall, there was a strong sense from participants that an unseen, often out of reach, crisis was being experienced by certain groups of claimants and those financially struggling. Despite efforts to adapt working practices and provide remote support, many recognised that those exposed to the worst effects of COVID-19 were not receiving the support they needed either locally or nationally.

3.4 CHANGES TO ORGANISATIONAL CAPACITY

The pandemic and social-distancing requirements have affected the capacity of many local organisations and actors. While the majority of organisations we interviewed maintained a working presence throughout the pandemic, a number experienced a considerable disruption to or reduction of their service during the earlier phases of the pandemic. There were a few situations where staff had been furloughed (for between a few weeks to six months). More generally though, adaptations to the pandemic were constrained to a significant extent by staffing factors and the presence of an enabling infrastructure. Sometimes the shielding requirements of staff limited capacity, and in one instance a small organisation’s capacity dropped by 75% as they went through the process of sourcing appropriate IT equipment for their work. The cost of equipment also presented a barrier to the utilisation of existing staff and volunteers (especially when large numbers of volunteers and/or data protection issues were involved).

“Access to IT, so that’s mobile phones and laptops for volunteers and for staff working remotely, that’s very expensive. A security-enabled laptop costs £850, a security-enabled mobile costs £350 plus a monthly charge of £13 thereafter. So these are expenses which we wouldn’t have had in the office because people would have used the PCs on desks.” Third Sector Support Provider, Newham

Organisational capacity was least impacted in workplaces where there had been pre-existing ‘blended work’ models, with staff either working from home or at other remote locations for part of their working week. In such instances, the infrastructure and equipment were already present to allow for a ‘seamless’ transition, although rapid preparations had also sometimes been made in the run up to ‘lockdown’. For example, one service performed a trial run in early March to test their remote system and equipment.

“...the council have been pushing home working for quite a while... so in that sense there wasn’t that culture of this is totally alien being from home. People have smartphones, and people have all got laptops. So, we had the basic physical tools to do it.” Welfare Rights Provider, Salford

Capacity was often associated with the extent to which a support service relied upon volunteers. For example, one participant noted that the organisational capacity
of their local foodbank had been reduced because the age profile of their volunteer base meant that the majority had to shield. A number of organisations explained that new volunteers often came forward as existing volunteers shielded; however, this was also not without its problems. For example, the management of a large bank of, often untrained, volunteers was sometimes experienced as prohibitively challenging in terms of practicalities, coordination and logistics. One participant was optimistic about their efforts to develop online training capacity given the importance of volunteers to their service and the ongoing nature of the pandemic.

“The volunteers that have disappeared at the moment are those ones that perhaps used to be users of organisations, and moving in (so moving from a user to a volunteer), but generally they tend to be the people that are more vulnerable, for lots of reasons.” Third Sector Provider, Leeds

Occasionally, our participants experienced a boost to their capacity as a result of the pandemic. This was generally linked to perceived improvements in efficiency resulting from the transition to remote (online/telephone) appointments. For example, one participant explained that staff were able to get through more appointments in a shorter amount of time as new remote working arrangements made it easier for staff to structure their day and discuss documentation with clients.

“But actually some of the support that we’re providing, which is by telephone and email, to be honest with you, we’re finding it’s better to do it in this way. It’s more successful, we can actually reach more people quicker, whereas if you’re booking two-hour appointments in throughout the day, you might only see three or four people.” Advice Provider, Newham

“That, to a degree, may give us more flexibility in the future, to have more people on the phone at a moment’s notice... Even if you’re meeting them at a One Stop centre, them having to arrange a precise time and them having to get there if they’re running late or if they’re early, there’s a lot of hanging round or waiting from one side or the other.” Welfare Rights Provider, Leeds

Other changes to support content were associated with lost opportunities for additional wrap-around interventions. For example, one food bank quickly switched to an outreach model, delivering food parcels to service users in most urgent need of assistance. Prior to the pandemic, staff within the foodbank would spend more time in their community building providing holistic support and trouble-shooting the wider financial, housing and employment issues affecting service users. However, COVID-19 and reduced staffing meant there was neither the physical space nor time to provide this support to those experiencing food insecurity. Certain projects became effectively unworkable (for example because volunteers were shielding or could not be supported) and so were no longer able to operate.
3.5 NEW WAYS OF WORKING

In response to the pandemic, all of the organisations we interviewed had transformed their operations, processes and activities to adapt to lockdown and social distancing requirements. To varying degrees, many participants expected certain adaptations made to their service to continue beyond COVID-19. The biggest transformation was the move to remote support and home working. A number of departments within local authorities and larger support groups had already been moving in this direction and had much of the infrastructure in place. Many others had been in discussions about it before it became a necessity. From the perspective of service managers, remote support was seen as beneficial for staff, offering flexibility to fit work into their schedule and accommodate caring and other commitments. It was also seen as an opportunity for staff to acquire new skills and capacities.

“... the transition from the rest of the staff to home working was relatively straightforward, so we didn’t have any downtime where we were scrambling to set up IT equipment; we were already set up. Every officer was working from Chromebooks. We’d done quite a lot of preplanning about home working over the last six months anyway, largely because of Brexit.” Welfare Rights Provider, Thanet

“We were having a debate about home working just before the crisis... I think that debate is resolved now by it having been such a success for us. I think we will be building some homeworking going forward on a permanent basis.” Benefit Support Provider, Salford

For a minority of participants, remote support was viewed as opening up new ways to better connect with certain client groups. Some participants saw the capacity of online/telephone connection positively: as a way to expand access to services in future, decentring the locations where people could obtain help. It was hoped that this could help make networks and meetings more inclusive.

“We’re also looking at whether we can have video booths in libraries so they don’t have to travel to one office, they can go to one of the ten libraries, log in at an agreed time, and the officer could be sat anywhere and do the interview with them, and you can do screenshots and things like that.” Welfare Rights Provider, Newham

There was broad agreement, however, that remote working could never fully or effectively replace working ‘on location’. For several participants, COVID-19 had revealed how important office working was, particularly in the kinds of informal relationship-building and updating that sharing space allowed, as well as an improved ability to support colleagues in helping clients with complex needs, confronting difficult situations, maintaining staff morale and confirming advice was correct and up to date.
“So, they were battling with trying to keep up with the legislation, not in an office together, floating things past each other, quite isolated at home, again, dealing with people on the phone and via email, and not having that sense-check of things.” Welfare Rights Provider, Salford

In managing these challenges, a number of participants described efforts to re-evaluate the most pressing needs of their client base and transform their provision to support this. As the first lockdown approached, one third sector group realised the extent to which their clients relied upon food that was available in their group sessions. Guided by an ethos of co-production with service-users, the charity re-configured their support throughout this period, moving into the space of food distribution for the first time. Alongside this they provided regular ‘check-in’ support over the phone, and some virtual group sessions, occasionally also providing people with devices to facilitate access to this. It was also common to see organisations such as housing associations and employment support providers moving into the sphere of well-being and mental health. However, others were reluctant to enter into additional areas of work for fear of getting stuck without the requisite resources, skills or expertise.

“So some housing associations have gone down the route of very heavily investing in mental health service... from what I’ve heard, they’ve been drawn into a space that maybe they’re not the most comfortable in, in that, once you start delivering a certain type of service you kind of can’t let go, and if there’s a lack of local services then it’s hard for you to let go, and do you have the expertise to be in that space?” Housing Support Provider, Thanet

Overall, participants were having to adapt to a rapidly changing policy and public health landscape. This engendered new approaches to their working practices and operations. Whilst there were aspects of innovation and some positives to emerge surrounding client reach and staffing flexibility, there were broad, shared concerns about those negatively affected by the shifts to remote working and the quality of support available as a result.

### 3.6 QUALITY OF SUPPORT

The majority of participants felt that the overall quality of advice and support work had diminished in the transition from in-person to remote support. There were a wide range of practical reasons for this which, in combination, often gave rise to more challenging and time-consuming cases. For many, remote-working practices presented a direct challenge to the foundations of effective work with service users. Subtle aspects of support work, that are often unseen and time intensive, such as assessing needs through in-person interactions were hindered in virtual meetings and absent from telephone conversations. This had repercussions for workers’ capacity to build trust and rapport with service users and the capacity to pick up on non-verbal cues. The latter limitation was often regarded as especially challenging in supporting people whose first language isn’t English and those experiencing limiting health conditions...
or disabilities. In-person interactions were widely viewed as providing more scope for holistic assessment, especially for older people and those with additional or more complex needs. A number of participants noted that there were practical difficulties in attempting to remotely emulate the practice of physically sitting alongside someone in front of a letter, form or computer to resolve queries or complete applications, even when technology wasn’t a barrier.

“That’s been quite difficult getting documents from people, trying to explain to people over the phone really quite complex information when they can’t see you, and all of that stuff around eye contact and trust.”

Welfare Rights Advice Provider, Salford

“...sometimes the quality of the interactions from an advisor’s point of view, may be diminished because we haven’t got that face-to-face contact. We can’t actually see what they’re like and we just have to take their own word and as I say, particularly amongst the elderly, a lot of people do have that view, where ‘I can manage’ and they’ll tell you they can cope and it’s only when you see them, you have doubts about whether what they’re telling you is correct. You can actually just put that to them, just mentioning that you’ve observed them struggling across the room, are they not worried about tripping up or are they worried about falling? They’re things you can mention. It’s easier in that one-to-one, face-to-face environment.”

Welfare Rights Provider, Leeds

Obtaining the necessary consent for staff to carry out advocacy work on behalf of clients was seen as a particular challenge, as was the process of getting clients to sign and return forms. However, it was also noted, that where permissions were required and digital access was not a barrier, an advantage of UC was that clients could log in and give their consent online.

“It’s that sort of careers advice and guidance that we’re providing and although that has always leant itself to lots of telephone discussion, it always starts with a face-to-face, building that trust and rapport and at the moment we don’t have that. So, we do find that with existing customers who we’ve worked with in the past, we are able to pick up those relationships well, it’s a lot harder and slower...”

Housing Support Provider, Newham

Remote work also impacted upon the quality of support through reduced interactions between staff and volunteers. A number of participants believed that advice workers were under additional pressure to become self-reliant as they were no longer in the same physical space as “the person they could just ask”. This was in turn paralleled by the observation that service users themselves needed to do more in these remote interactions. Some participants reflected that specific aspects of their regular work seemed to have fallen away. For example, one worker believed that ‘Help to Claim’ was being delivered in a way that was prioritising aspects of work expected con-
tractually and deprioritising other (more holistic) forms of support that normally run alongside this service.

Supporting applications for specific benefits was sometimes regarded as difficult. Persistent use of paper rather than digital forms delayed applications for Personal Independence Payments (though deadline extensions were welcomed). Elsewhere, participants approved of new phone-based form-filling assistance, and form distribution via Sharepoint. Concerns also arose about assessment quality with some service users lacking representation because of outdated phone-conferencing technology and subsequently receiving a ‘poor’ decision e.g. an unsuccessful application for benefits or being deemed fit for work in a Work Capability Assessment. Inconsistencies led some of our participants to advocate for face-to-face appeals. However, this in itself was problematic as appellants were frequently left ‘in limbo’, awaiting a date for a physical hearing.

Some teams took additional steps to overcome the limitations of remote working. One invested in remote rapport-building training for staff and delivered service user training via Zoom (believing this to be more accessible). Others used, or were considering using, messenger apps (such as Whatsapp) for defined tasks such as introductions or providing examples of wordings needed to articulate consent. However, data protection issues were acknowledged as barriers to their wider adoption. Inevitably, the gains made from these adaptations were limited to service users with digital access. While plans to retain significant elements of remote delivery were common, most participants also stressed the need for accessible face-to-face provision. Its re-establishment was regarded as indispensable in many interviews and so a significant practical challenge within the context of social distancing.

“…we will want to reconstruct and reintroduce our face-to-face work as quickly as possible, but we’re obviously at the mercy of the virus itself, the regulations about safe working, and the fact that much of our working in face-to-face terms is done in other people’s buildings. So that we have partners to negotiate with” Benefit Support Provider, Salford

“…we simply can’t stop running face-to-face services, and neither do we want to because we believe that you build a deep value relationship with the people you’re working with. So this isn’t something you do to people; you work with people to resolve their problems.” Third Sector Umbrella Body Organisation, Newham

3.7 COORDINATION WITHIN AND BETWEEN ORGANISATIONS

Work between organisations and partnership networks was disrupted in the transition to remote delivery, but this generally improved over time, and variation in experiences seemed to reflect processes of adaptation. The loss of place-based interactions presented issues for work within and between organisational teams, and the risk of siloed behaviours was widely acknowledged. Strategies for countering this varied. A number of participants noted an increased regularity of online meetings, while another ex-
plained how a partial return to the (physical) office was helping to promote interaction and boost morale within the team. Sometimes this worked the other way around, with virtual platforms enhancing coordination and communication between different teams and organisations that had been physically separated prior to COVID. It was sometimes also believed that collective knowledge of rules and provision had improved, with “the people you could just ask” replaced by questions posted onto MS Teams.

Similar reflections were observed with regard to partnerships, with local crisis responses often regarded as reflecting the strength of existing local networks and relationships. Given the speed and scale of local responses, a number of participants raised concerns about effective communication and coordination between the various stakeholders involved in contributing towards local efforts. It was recognised that healthy relationships between the council, community and third sector organisations were key to ensure ‘that food and other key services were being provided to vulnerable people quickly’. For example, in Leeds the referrals recorded by the COVID-19 council helplines resulted in an estimated 64,000 food bags (equivalent of 34,000 food parcels) being distributed from the food warehouse over the course of 24 weeks between March and September 2020. However, the extraordinary work undertaken was recognised as unsustainable in the longer-term.

“...there was an awful lot of food flying around everywhere, and now it’s a case of just trying to say, look, we’ve got to get back to some kind of new normal.” Crisis Support Provider, Leeds

Where coordination practices were less developed, the crisis stimulated connections within local ecosystems of support, which some believed would be a key legacy of the crisis.

“...It has enabled and supported the building of relationships with the voluntary sector...there are lots of disparate relationships in different parts of the system, so the use of technology enabled a wider range of people to be part of conversations when we were trying to think about the future solution...” Local Authority Support Provider, Newham

The most frequently discussed partner relationships were those with DWP. Experiences were mixed. Variation could, in part, be attributed to service improvements and adaptations rolled out through the course of our fieldwork period. However, it also seemed some variation was linked to specific local practices and relationships. One participant remarked that their relationship with DWP had improved recently but attributed this to connections with specific people, including a particularly ‘accessible’ external partnerships manager at DWP. Other participants mentioned improved relationships with DWP in terms of strategic involvement or participation in ‘holistic’ approaches to client support.

“... I know the managers of the local Jobcentre, so I can just pick up the phone and say, ‘Look, can you have a look at this for me, please.’ Rather than having to go through the whole, of having to wait for 30 minutes
to speak to somebody only to be told that you need to go through to another department and that’s another 30-minute wait and then, ‘Oh sorry, our computers are down, can you call back tomorrow?’” Third Sector Support Provider, [location removed to protect anonymity]

“we have these monthly calls anyway, we used to have quarterly calls, so we’ve now been having monthly calls, so they’re more frequent ... I am more than happy with how they’ve dealt with things.” Local Authority Support Provide, [location removed to protect anonymity]

Certain practical adaptations were also regarded as substantial improvements which contributed to better coordination between services and client outcomes. Other issues were aggravated by remote working. For example, the absence of an email address to send Mandatory Reconsideration requests presented a problem when workers lacked printing facilities at home. One participant acknowledged that the DWP were under considerable pressure but still remarked that its service would be improved if they would ‘answer the phones’. DWP’s work coach recruitment campaign was widely recognised as seeking to address this capacity issue. However, a considerable number of participants also suggested that this, and the redeployment of DWP staff had contributed towards coordination problems, where new or redeployed staff were unfamiliar with existing partnership arrangements, rules of eligibility and administrative process.

There were mixed experiences concerning information availability and the communication of changes to policy and support. Difficulties obtaining good quality up-to-date information were common during the early weeks of lockdown, and many shared that keeping up with regular changes to guidance had been demanding. More than one participant described periodic bouts of ‘information overload’. Some organisations tackled this by collating their own regular updates and circulating these (with government guidance, Citizens Advice, Shelter, CPAG and Rightsnet all mentioned as valuable sources of up-to-date information). One participant explained that the time saved on supporting appeals had instead been consumed by the need to track policy changes.

“It was more about us getting to grips with everything else that was happening in terms of all these things, all these changes, like suspensions of deductions, suspended reviews and medical assessments, what do we need to do? It was about us finding out all that. There was an overload of information being sent to us that we had to navigate and understand... my work was more about finding out everything that I needed to get to grips with.” Advice Provider, Leeds

The capacity to effectively share information and liaise with stakeholders is paramount during periods of crisis and uncertainty. For the vast majority of our participants, the usual mechanisms of communication and coordination dissolved away during the first national lockdown. To varying degrees, this was replaced with remote channels of
communication. In some instances, the regularity and reach of contact was enhanced. For others, the quality of communication was inevitably compromised and concerted efforts were made to address this. This demanded considerable work on the part of front-line staff and management, highlighting some of the longer-term challenges of sustaining effective modes of communication between staff and service users.

3.8 EMPLOYMENT SUPPORT

Across our four case study areas, we interviewed a limited number of organisations that focused exclusively on providing employment support. However, we also interviewed a range of other organisations that offered aspects of employment support alongside their other services. We take a particular focus on employment support here in light of the rapidly changing policy and public health landscape that has presented particular challenges for service users and their labour market prospects. Those organisations offering employment support encountered a number of distinct barriers to their operations and capacity to work with service users. Participants cited a lack of vacancies as the primary challenge facing their role in the immediate context. One shared that their approach had changed from employer engagement at a sector-based level to specific (warehouse, cleaning, care and driving) roles. Problems were also associated with the types of vacancies available in the medium to longer term.

“The main issue I think goes without saying is the lack of jobs.” Employment Support Provider, Thanet

“... what we are possibly talking about is major, systemic economic change and just there not being jobs for lots of people. There will be people for whom, yes, you can just change, flex, go into something different. I think our concern is the large amount of people lower down the employment market for whom their jobs will just disappear...” Employment Support Provider, Newham

With a collapse in particular sectors of the labour market, and widespread reservations about using public transport, the prospects for widespread success were viewed as limited. Many participants highlighted changes in the nature of the employment support they were offering. Although some referred to a temporary shift into client well-being, others highlighted changes that were considered less positive. For example, one participant explained that a prior reluctance to recommend precarious delivery jobs to people had been replaced by conversations about whether these could work as stop-gap solutions. Another team had offered training about making difficult decisions (e.g. about trade-offs between job opportunities and health risks). It was also evident that some providers were preparing for a (post-furlough) surge in demand.

“...it was a good opportunity for us to kind of just stop, look at what we’re doing as an employability project and obviously continue promoting employability and talk about employability, but develop relationships with
Remote delivery of employment support posed similar challenges to other forms of support in terms of consent, rapport and the quality of interactions. While most provision initially moved to (digital) remote delivery, in-person contact was sometimes used strategically after the first national lockdown eased. One organisation used short socially-distanced face-to-face meetings for introductions, paperwork, and programme exits. Another was offering limited face-to-face appointments with clients for motivational purposes. One participant observed changing adviser-client dynamics as staff working remotely in low-risk environments encouraged clients to apply for jobs with (greater) exposure to COVID-19. Despite this, it was also a common observation amongst participants that client engagement had improved with remote delivery either due to the absence of geographical constraints or clients being more comfortable with online training sessions. Hybrid models of delivery were therefore often under consideration for the future.

A few participants mentioned that additional support had been introduced to support clients with COVID-specific challenges, such as support for ‘re-entry anxiety’ (after prolonged social isolation), and strategies for managing children at home. Some used training to explicitly foster an online sense of community and combat loneliness, but there was an employability agenda linked to this too. One participant suggested that regular sessions promoted confidence, presentation skills and the maintenance of a routine. Practical support around interview preparation was also changing to respond to the pandemic context.

“So, this is the future, and it’s preparing people for that and this comes with crazy things like, do you still have to wear a suit if you’re going to an interview if you’re actually in your house? There’s lots of changing of what were very traditional employment things where you’d say to someone, map your route to where you’re going to get to, make sure you get there five minutes early. Now it’s about saying, make sure your laptop’s charged...” Housing Support Provider, Newham

In the first national lockdown, there had initially been a generally ‘hands-off’ approach with existing clients: it was widely accepted that client priorities shifted alongside new caring responsibilities and health concerns. It was however also reported that engagement typically rose again as lockdown eased. Many mentioned that referrals from Jobcentre Plus had initially stopped as conditionality was suspended and DWP focussed on processing new claims. Towards the end of Summer 2020 however, most were receiving referrals again or anticipated them imminently. One participant said that the profile of customers was yet to change, but they expected it to do so soon. Others noticed clear differences: new clients presented as younger, ‘more desperate to get back into work’, struggling financially, higher-skilled, and wanting to change job sector. Even when clients had jobs ‘on the table’, these were often associated with uncertainty. One team approached this by encouraging their furloughed clients to think about alternative roles and sectors in the event of redundancy. In-
secure job offers and an uncertain labour market also posed problems for effective employment support.

“...[this] again is disruptive because they no longer want to continue looking for work but they’re still in limbo because they haven’t been given a secure start date. We’ve had a number of people who’ve been offered work but then to have that offer withdrawn... So, it really is a very difficult place for job seekers at the moment because the work that is there, it’s not particularly secure.” Housing Support Provider, Newham
4. LOOKING AHEAD TO AN UNCERTAIN FUTURE

Local ecosystems of support available to benefit claimants have been under considerable pressure to adapt since the start of the pandemic. During the first phase of COVID-19, local authorities and large third sector actors stepped in to centralise and triage a significant expansion of enquiries arising from lockdown, job losses and financial difficulties. Since then, many local services and organisations have adapted their referral process to more effectively appraise and respond to local needs through remote methods. However, there are still many local organisations that struggle to support specific groups of claimants and those financially struggling in the absence of face-to-face interactions. The ongoing closure of public infrastructure, buildings, and community spaces has forced referral pathways to adapt, but support providers still experience limitations in terms of their ability to conduct needs assessments, or signpost prospective service users. For claimants with complex needs (e.g. language support, mental health issues), who might otherwise have been able to access support through these avenues and public sites, this is particularly concerning. As illustrated throughout this report, the implications of a longer-term transition towards remote or even hybrid systems of benefits, employment and crisis support are significant and wide-ranging.

In drawing the report to a close, we would like to highlight the expectations of our participants engaged in benefits, crisis and employment support in terms of what they think lies ahead in a post-pandemic context. Across our interviews, changing organisational capabilities, pressures on services, and socially distanced support all highlighted concerns about an uncertain future for both clients and the local ecosystems of support that they often rely upon. Medium and longer-term issues related to three main areas: organisational finances; staff resilience; and cliff edges to come due to caseload spikes, a changing policy landscape and the economic fallout of the pandemic.

4.1 ORGANISATIONAL FINANCES

Organisational finances are closely linked to delivery capabilities, with implications for staffing, volunteer coordination, training and other resources. Remote delivery of support is unlikely to fully replace walk-in services because so many groups of claimants and those financially struggling rely on this form of support particularly those with more complex needs. Working from home also has repercussions for team functioning, and it is clear that potential savings on overheads such as rent would often be replaced by spending on (potentially costly) digital infrastructure. Staff and volunteer management from a distance may also sometimes be more resource intensive. In reference to these challenges, many participants linked recent rounds of pandemic spending by central government to longer-term cuts to third sector and local authority funding. Financial concerns were frequently raised when participants were asked about their medium and long-term expectations, and particularly emphasised by third sector actors who were already experiencing greater and more acute demand for support services prior to the pandemic.\(^{32}\)
“Because housing providers like us, we’ve found in the last ten years we’ve been more and more asked to fill the gaps left by cuts to local services. The threshold for getting social housing, it’s such a rare and finite resource now, the needs levels are going up and up all the time, so we’re supporting people with higher needs who have less local support available to them, and it’s very much a balancing act for us to support people but stay within the remit of what’s appropriate for us to do.” Housing Association, Thanet

These funding concerns assumed a number of different forms. Some participants felt they had missed out in terms of accessing recent financial support. For example, a smaller support organisation believed they had ‘fallen through the cracks’ in terms of receiving COVID-19 support funding because they were a ‘constituted community group’ rather than a registered charity. Many third sector groups noted that opportunities for revenue generation had been impeded by the constraints of lockdown and this presented particular challenges for their long-term viability. Financial vulnerabilities were often especially acute when the immediate priorities of the first lockdown had been tackled by tapping into organisational reserves. Speaking about this, one participant had also noticed a switch from innovation and continuous improvement funding to emergency funding, which presented an additional obstacle for organisations seeking to replenish their reserves.

“…There was a sacrificing of one fund for another rather than running the two in tandem. We noticed that in the funding structure...and it’s critical because those of us who are trying to, let’s call it ‘trade our way’ out of the crisis...we’ve put in a plan where yes, we’ve used reserves, but over the next three years, we’re going to pay back those reserves, so we’re trading our way out of our crisis rather than just saying ‘give us more money’.” Third Sector Support Provider, Newham

Some participants also mentioned Britain’s exit from the European Union (EU) as a financial challenge, either in terms of lost EU funding streams or an anticipated economic slump. It was also widely acknowledged that funders of benefits, employment and crisis support were experiencing financial difficulties themselves. This was frequently mentioned in relation to the financial position of local authorities, and linked to expectations of future retrenchment, and knock-on effects for local ecosystems of support.

4.2 STAFF RESILIENCE

As noted earlier, plans to incorporate aspects of remote delivery into future practice were often discussed by participants. Across a number of organisations, improvements in productivity were observed, with less time lost to missed appointments, and clients mostly having the relevant paperwork to hand. However, remote working also posed a number of risks to staff well-being. Issues cited included the blurring or breakdown of home/work boundaries, overwork, inadequate or unsuitable spaces to work in, the challenges of childcare and home-schooling, concerns about job secu-
The challenges of managing teams remotely was widely recognised, and strategies were adopted to try and counter social isolation or coordination problems. However, these were not without their own risks, such as ‘Zoom fatigue’ and intensified pressures on staff. In particular, some organisations risked intensifying workload pressures upon remaining paid staff who were already under considerable strain.

Although many noted an early initial dip in referrals during the first weeks of lockdown, workloads generally increased subsequently both in terms of absolute client numbers, in relative terms as volunteer capacity dropped, and qualitatively in terms of case complexity. At the same time, remote working posed unique challenges for these types of work: the opportunity for peer support after difficult or upsetting cases was diminished and such cases were sometimes regarded as more prevalent. Larger teams could sometimes replicate or even improve upon certain aspects of teamwork within platforms such as MS Teams. However, the lack of a shared physical space generally meant that frontline workers were forced to become more self-reliant both in terms of emotional resilience and policy knowledge. Staying up to date with the latest advice and policy changes was widely recognised as increasing pressures upon workers and sometimes fed anxieties about whether clients were receiving up-to-date advice or the best support.

“...at the moment our staff are working at full tilt. That system will break sooner or later. I personally can only go for so long with working the amount of hours I’m doing and the same for my team as well. They are knackered”
Third Sector Support Provider, Leeds

“...that’s a massive challenge for us in how do we provide the service that we have been doing, if numbers go up, because staff will get burnt out.”
Welfare Rights Provider, Salford

As some organisations altered their model of provision this impacted upon workload intensities, and these were often acknowledged to be unsustainable in the long run. As illustrated in the section below, numerous policy changes were regarded as having the potential to overwhelm frontline staff, and several caseload spikes were anticipated on the horizon. When considered alongside the aforementioned funding pressures it is unsurprising that some participants expressed concerns about staff resilience and the potential for burnout within the sector.

4.3 THE CLIFF EDGES TO COME

Our participants were frequently worried about medium- and long-term spikes in the demand for their services. These were partly because of the pandemic storing up problems that will eventually emerge. For example, specific groups of clients were regularly mentioned as particularly vulnerable in the context of the pandemic (as we have seen). It was often noted that many were at risk of falling through existing gaps in provision and would likely re-emerge later with additional issues and greater support needs. Furthermore, social distancing was associated with knock-on effects in
terms of supporting clients with social isolation, mental health, domestic abuse and children’s socialisation and welfare. More broadly, participants expressed concerns about losing their sense of embeddedness within the local community or contact with their volunteer base. A return to a non-distanced reality was also associated with problems such as anxiety and difficulties for agoraphobic people who had acclimatised to the routines of lockdown.

Though streamlining of benefit application processes was generally welcomed, some participants also recognised a number of potential problems further down the line. On the one hand, some participants believed such processes (without the usual checks) were giving rise to identity theft, fraud and wrongful overpayments that would later be reclaimed by DWP with damaging effects in cases of wrongful overpayment. On the other hand, there were concerns that some phone-based benefits assessments were resulting in wrongful denials of eligibility, which sometimes lead to subsequent appeals but also considerable hardship for those claimants.

“...it’s not just a case of dealing with a benefit question in March 2020. That’s going to lead onto, there’s going to be other things. People aren’t just going to get back into jobs because jobs aren’t going to be there. Businesses aren’t going to repair themselves overnight and a lot of people are at the start of a very difficult time in their lives and those problems are going to persist for a long time. As I said earlier, some of the errors made, the administration of benefits that for example are going to stretch on and we’re looking at a personal debt crisis which will be worse than 2008...”

Benefit Support Provider, Leeds

Concerns about future demand also related to the eventual transition back to a ‘normal’ benefits system. Many crisis social security measures introduced in response to the pandemic were regarded by participants as reducing pressures on frontline staff and making caseloads more manageable for support organisations. However, these same groups also suggested that the subsequent withdrawal of COVID-specific measures will be associated with considerable pressure of their services. The majority of our participants mentioned concerns about the withdrawal of the £20 ‘uplift’ to UC, the end of the Coronavirus Job Retention Scheme, and the end of the moratorium on evictions. It was anticipated that withdrawal of these measures would lead to a surge in problems of extreme poverty, debt, unemployment, repossessions, and evictions. It was also noted that existing capacity within many organisations and local ecosystems of support was already incapable of meeting a surge in demand for specific types of support such as debt advice, where there were insufficient numbers of trained specialists within the sector.33 The return of regular benefit re-assessments, overpayment retrieval, and benefit conditionality were regarded as a particularly serious risk and source of concern for the financial security and well-being of claimants and service users more generally.
ENDNOTES

1 ‘No Recourse to Public Funds’ is a condition affecting those without Indefinite Leave to Remain in the UK. Beyond some limited exceptions, this means those with a temporary immigration status are not able to access ‘public funds’ and within this social security.


5 Conducted between 21st and 15th June 2020


7 The survey question was: ‘Thinking back to when you made your claim for [X benefit], did you get help from anyone to make your claim for [X benefit]? (Exclude any help you got from the Jobcentre/DWP):’

8 Significant at the .05 level.

9 Edmiston, D; Geiger, BB; De Vries, R; Scullion, L; Summers, K; Ingold, J; Robertshaw, D; Gibbons, A; and Karagiannaki, E. (2020) Who are the new COVID-19 cohort of benefit claimants? Welfare at a (Social) Distance Rapid Report #2. The Welfare at a (Social) Distance project: https://www.distantwelfare.co.uk/publications

10 Summers, K. et al. (2021) op cit.

11 Summers, K. et al. (2021) op cit.


13 Edmiston D. et al. (2020) op cit.

14 Summers, K. et al. (2021) op cit.

15 In our future work, we will return to the support provided by partners, friend and family.


17 Gov.uk Press Release: “£22 million emergency coronavirus funding for more than 540 sexual violence and domestic abuse charities”, 26 June 2020


21 Actual funding allocations across the four tranches (March to October) were as follows: Leeds - £72,167,550; Newham - £56,832,812; Salford £26,632,927; Thanet - £2,978,202. See Gov.uk (2020) COVID-19 Funding Allocations (Financial Year 2020 to 2021), London: HMSO. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/871799/Budget_2020_Web_Accessible_Complete.pdf

17 Gov.uk Press Release: “£22 million emergency coronavirus funding for more than 540 sexual violence and domestic abuse charities”, 26 June 2020


24 See https://www.salford.gov.uk/spiritofsalford

25 See https://thanetcoronavirusassistance.com

26 For a helpful summary of all the adjustments made to the social security system in response to the pandemic see Mackley, A. et al. (2021) Coronavirus: withdrawing crisis social security measures. London: House of Commons Library. Available at: https://commonslibrary.parliament.uk/research-briefings/cbp-8973/.

NB The government has allocated an additional £37.8 million to debt advice and money support through the Money and Pensions Service, some of which has been earmarked for the recruitment and training of an additional 500 debt advisors nationally: https://moneyandpensionsservice.org.uk/2020/09/02/additional-38-million-for-debt-advice-funding-in-england-goes-into-action/