

magpie

change for
good 2023

REDUCING POVERTY

About Magpie

Leaders in life changing campaigns for social good

Tackling society's biggest
challenges through
behavioural science, creativity
and collaboration.



Agenda

10.05	Supporting communities in challenging times.
10:15	Ghost Signs - Poverty and the pandemic
10:30	How Wakefield Council mapped the interconnections between local providers and engaged with stakeholders to inform strategic planning
10:50	How organisations can work with service users and learn from lived experiences. A story from Change Grow Live
11:05	Panel Q&A
11:30	Wrap up

Welcome



Use the Q&A function to
ask questions



We have a panel Q&A
at the end

“Poverty means not being able to heat your home, pay your rent, or buy the essentials for your children. It means waking up every day facing insecurity, uncertainty, and impossible decisions about money. It means facing marginalisation – and even discrimination – because of your financial circumstances.”

(JRF 2016, p4)



At least 10 million people in the UK are estimated to be living in relative poverty, including nearly three million children in low income households.

House of Commons Library. Poverty in the UK: statistics House of commons poverty statistics 2022

Ongoing psychological stresses of living in low income can cause family and relationship strain, and deprivation has been consistently associated with increased morbidity and mortality.

Join us for

Changemaker Clinic

Thursday
11 May
12pm - 1pm

An informal fortnightly drop-in for changemakers to come together to share challenges and opportunities, action learn, troubleshoot and discuss creative communication approaches to behaviour change.



Supporting local communities in challenging times



Prof Jim McManus, ADPH President

11th May 2023



LGA/ADPH Annual Report

Public health annual report 2023: Supporting communities in difficult times | Local Government Association

- **Cost of Living Hub** Cost of living hub | Local Government Association
- **(My Own Annual Report this year will be on this) www.hertshealthevidence.org**



www.adph.org.uk



LGA/ADPH Annual PH Report 2023

‘the voluntary sector is increasingly recognised as a foundational partner in delivery and strategic planning’

Partnerships are
foundational



Key Messages: LGA/ ADPH Annual Report 2023

- Absolute Life Expectancy has stalled
- Absolute poverty for some has worsened
- Relative life expectancy and poverty has worsened
- Geographical disparities have worsened
- Social gradient

“The poor are becoming poorer. Deprived communities are the most in need, whilst receiving the least support - we need urgent action to protect health.”

Michael Marmot, 9th May 2023

Key Messages: LGA/ ADPH Annual Report 2023

- Cost of living is a public health emergency
 - Short and long term impacts on physical and mental health
 - Not just ADPH/LGA Report but other evidence too
 - Barnado's report on children [A Crisis On Our Doorstep | Barnardo's \(barnardos.org.uk\)](#)
 - RSPH [RSPH | RSPH's new report shows health will be the price we will pay for the cost-of-living crisis](#)
 - Michael Marmot – [Interview: Sir Michael Marmot on the UK's persistent health inequality | The Actuary](#)
- Stop blaming the pandemic for impacts that started before and after it. People with least financial resilience are affected the most but increasing numbers of people who were previously 'just about managing' now need support.

Key Messages

- Partnerships had been strengthened during the pandemic with deepened connections with communities and a coordinated focus on a single goal. Some councils have held multi-agency cost of living 'summits' to bring partners together.
- Most areas operate partnership arrangements to oversee progress across all the organisations involved.

Key Messages

- Many different organisations are involved in delivering cost of living support. The key strands of this are consistent across all areas:
 - Information and advice – comprehensive information on websites and other media and face to face advice, such as increasing benefits take-up, in community settings.
 - Warm welcome spaces in council and community venues providing a range of services from hot food to social activities to learning opportunities.
 - Access to food – food partnerships are extending the work of food banks and other sources of low-cost food.
 - The voluntary, community and faith sector
 - Support often builds on interventions that have been established through public health in recent years – for example, making every contact count (MECC) initiatives and food partnerships.

Examples – over 120 on LGA Cost of Living Hub

- **Swindon**
 - multi agency strategy led by DPH
 - Network of agencies and places
 - Staff support and cost of living package
- **Hertfordshire**
 - Cost of living group
 - Multi agency strategy
 - Data modelling

Walsall

- ‘advice from next door’ approach recognising that some people need support closer to home.
- The Walsall Connected approach means information has moved from a central one stop shop to seven local libraries and 18 community hubs which also help people to learn how to use the internet and online services.

Newham

- proactive telephone winter welfare checks to reach vulnerable people who may not otherwise seek support.
- Newham Social Welfare Alliance which drives work on reducing poverty, has trained thousands of workers to provide brief interventions on social welfare topics such as income maximisation, debt advice and housing.

Cornwall

- Cornwall's community hubs, a partnership of over 50 voluntary sector organisations, working with the NHS and the council, are providing warm spaces, activities, access to practical information on money management, energy saving and benefits entitlement, social and practical activities including cooking skills and IT and signposting to further help.
- A new Community Gateway service has been established for support in people's homes if they are not able to access community hubs

Scientific Concerns for future

- After a promising start, with a national focus on levelling up and health inequalities, government churn and other factors meant that the year ended with a lack of a clear national policy direction.
- It is not clear when the cost of living pressures will end. Local partners are monitoring levels of need and support on an ongoing basis and will review the situation in the Spring.
- The rise in cost of living reinforces the link between health and prosperity. Local government understands that these are inextricably linked and is working on initiatives that consider these together.

Policy Action

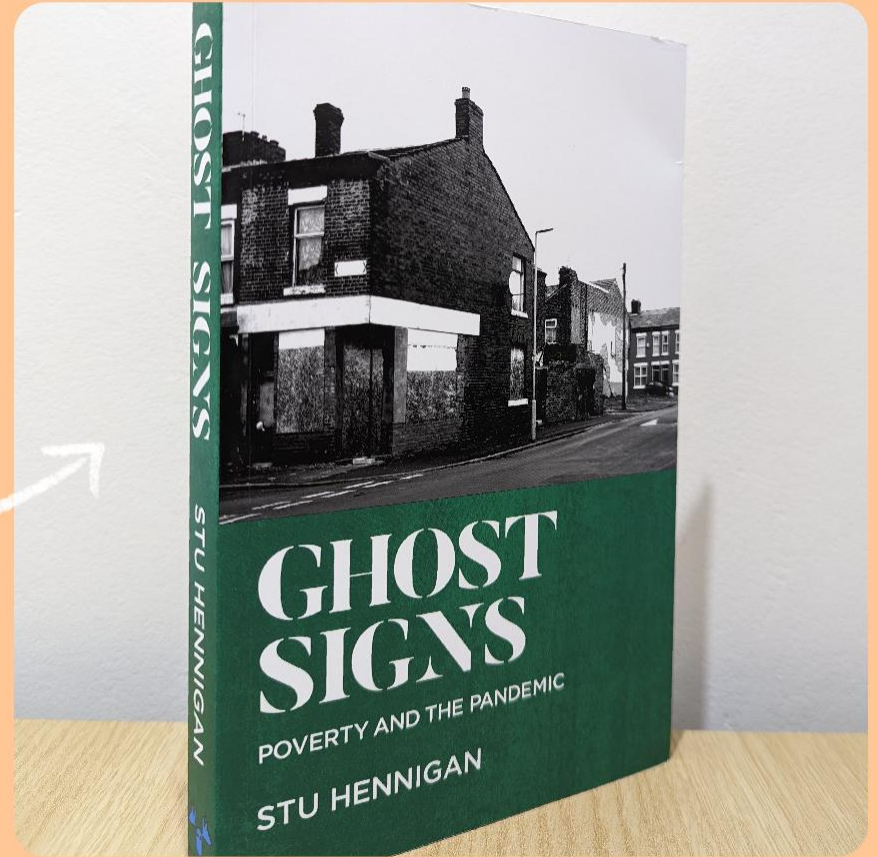
- **9th May consensus event**
 - FPH/RSM/ADPH/RSPH
 - Policy focus
 - Evidence summary of impact
 - Principles for Action

6 Waymarkers

1. Channel our passion into action where we can make a difference
2. PH should use our skills – need, evidence, intervention, impact, communicate impactfully, build partnerships
3. Build coalitions of hope and action
4. Multiple layers and timescales –
 1. it's not national or local only. **It's both and.** And both short and longer term
5. Worldviews – everyone has them. They sometimes lead us to mis-state the evidence (eg tax burden) But restating the moral value of public service and the values of public health crucial here
6. Be clear on what **your** contribution is and where it is best made

Ghost Signs: Poverty and the Pandemic

In conversation with **Stu Hennigan**
and Digital Journalist, **Safeia El-Jack**





Stu Hennigan and Ghost Signs

When lockdown came in 2020, Leeds librarian Stu Hennigan volunteered as a food-parcel delivery driver.

His trips through the eerily-deserted streets took him to some of the poorest communities in the city. Literally a lifeline for people who had been living on an economic knife-edge for years, Ghost Signs is his first-hand account of the poverty he encountered.

Mapping the interconnections between local poverty support providers.

A white hand-drawn underline is positioned beneath the word 'providers.' in the title. A white hand-drawn arrow starts to the right of the title and points back towards the word 'providers.'

Kerry Murphy, Public Health Manager (Health Inequalities and Poverty)

Wakefield Council & **Dr Kate Questa**, Magpie Associate

Background and context

“Poverty and the rising cost of living is significant and increasing.

It adversely affects the lives of many Wakefield residents, and impacts on every aspect of their lives.

In our district, there are many services and organisations which support our residents, who aim to prevent people entering poverty, to provide help and support in times of crisis and to help people to move out of poverty and allow them and their families to thrive.”

Councillor Maureen Cummings, Wakefield District Council

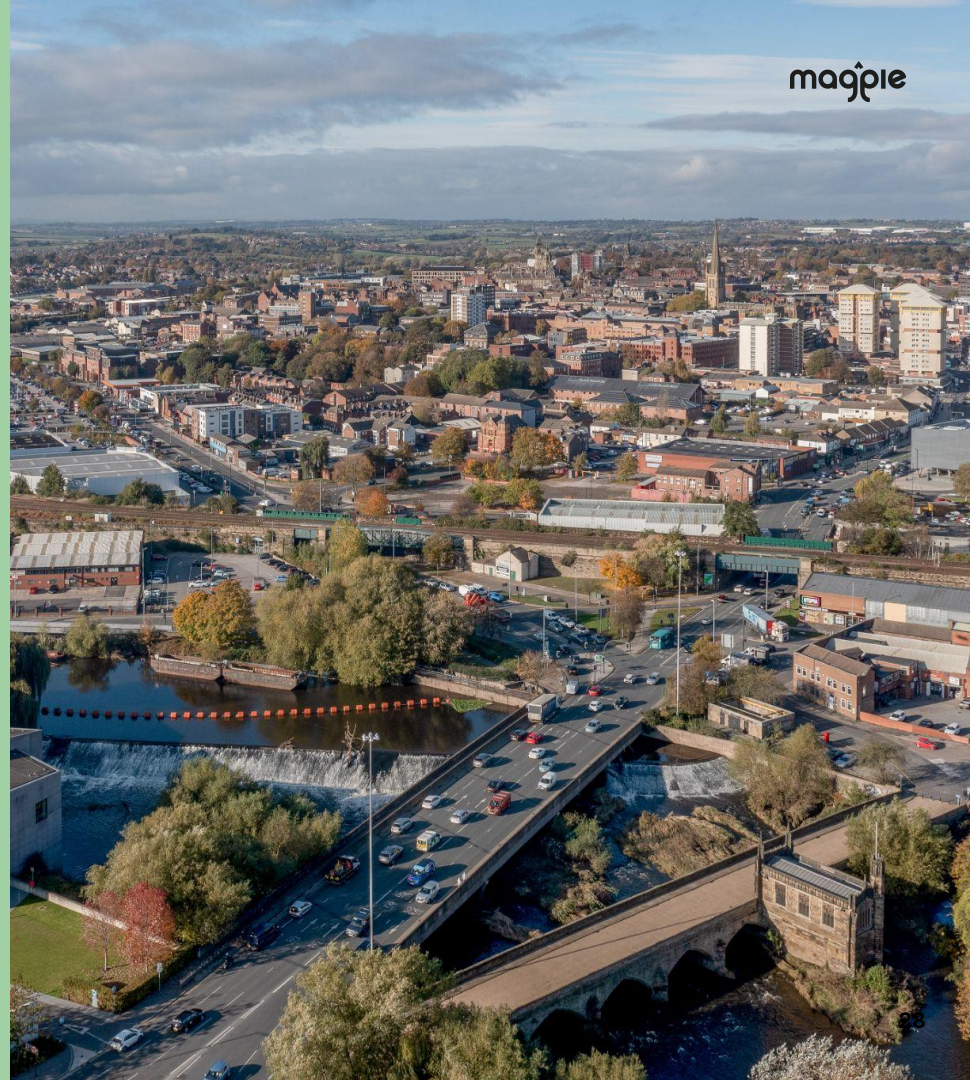
Wakefield District

Wakefield District is **home to 353,802 people**, living in urban centres, towns, villages and rural communities



Overall measures of area level deprivation have slightly worsened in recent years, with the **District being ranked the 54th most deprived in England**, (compared to being 65th most deprived in 2015).

The increase in deprivation is thought to have occurred in **those areas which were already worse off**.





Data suggests there are **54,200 people living in neighbourhoods amongst the top 10% most deprived in England** (15.7% of the District's population), including 14,669 children in low income families.



Rates of relative **child poverty** are estimated at 22% overall, ranging from **39% and 36% in Wakefield** East and North respectively, to 12% in Stanley and Outwood East.

Similarly, **fuel poverty** rates vary across the District, **averaging at 17%**, and increasing to **38% in some areas.**



Poverty support service mapping objectives

- To better understand current breadth and models of local anti-poverty service provision
- Identify unmet need both now, and emerging, either at the population or service level.
- Identify best practice, shared learning and opportunities for the sector
- Generate insights into current challenges, requirements and sustainable solutions which can inform strategic planning
- Creating a resource / report with everyone in the system had the opportunity to contribute to and access

Using a mixed methods approach

Aims and materials were co-produced with working group. Data was collected through three aspects (gathered Oct-Nov 2022)

Online survey (n=40)

- Targeted at providers of poverty support services in Wakefield District
- Disseminated via public health networks and wider partners
- Mainly capturing descriptive service level information
- Some anonymised findings re demand, funding and organisational impact

Methods

In depth one to one interviews (n=11) with key stakeholders to generate themes

Stakeholder workshops (n=43) (face to face and online) to refine discussion themes and build mapping.

Areas of enquiry for discussions

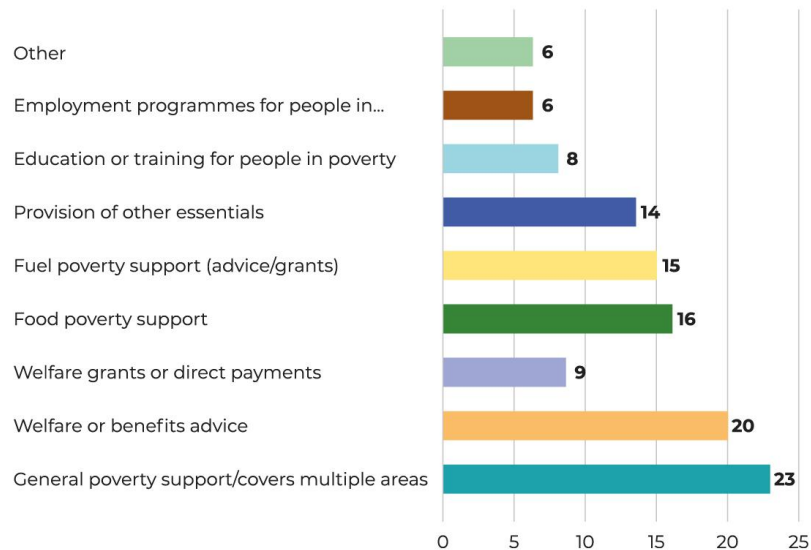
- Current strengths and challenges in poverty provision
- Unmet need, both now and emerging
- Solutions to unmet need, and local system response to growing demand
- Sustainability, opportunities
- Partnership working



Key mapping results - range of poverty support services

Nearly all survey respondents described **more than one type of poverty support provided by their service or programme** - in some cases, all categories of poverty support were provided by single organisations.

Graph 4: What is the nature of poverty support that your organisation provides (select all that apply) (n=35)

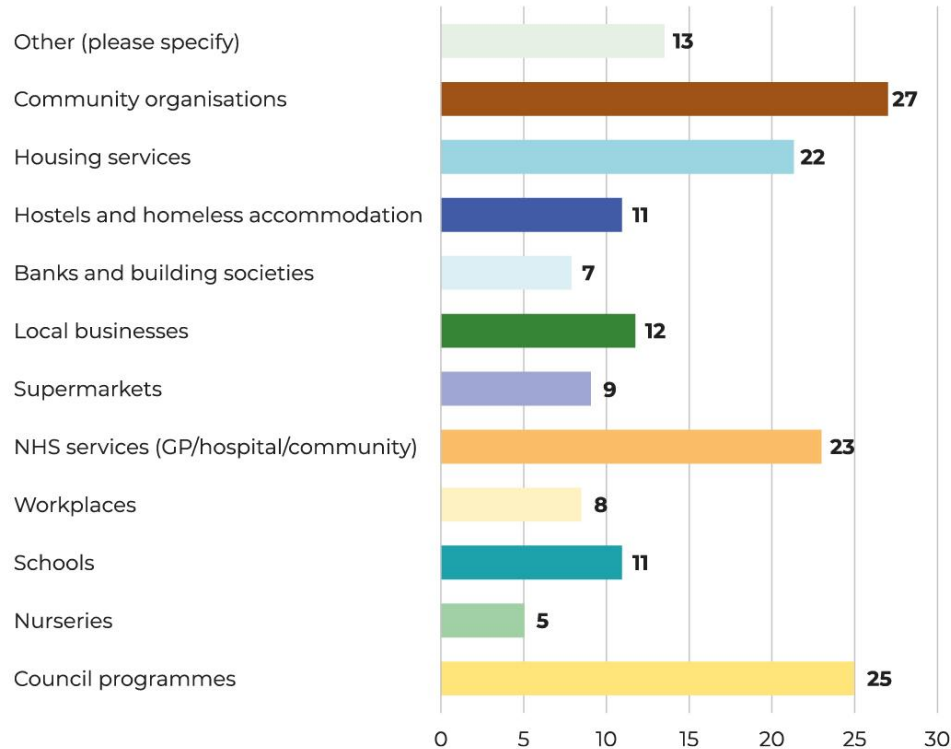


Key mapping results - eligibility, referral routes and partners

- A range of different referral routes and eligibility criteria
- Self-referral into services was reported in 89% of cases
- Eligibility criteria range from none (quite commonly) to specific restrictions based on the age of the population, their circumstances and in some cases means tested - particularly in application to fuel poverty grants and benefits
- Referral into services from the Local Authority, schools, NHS services and other community organisations was frequently reported, suggesting good connectivity
- 'Other' delivery partners were stated to include food banks, baby banks, churches, the DWP, utility companies, debt advice charities, the Credit Union, landlords, social housing providers, and the wider VCSE

Graph 7 shows the range of partners that organisations work with in the delivery of poverty support.

Graph 7: Who do you work with in order to deliver your poverty support service? (Select all that apply) (n=35)





Strengths

Successful partnerships enabling **referrals and rapid mobilisation**

Increasing access for different communities through **community based outreach** services (e.g. welfare advice)

Supportive and **holistic** nature of services - reducing stigma

Targeted support, prevention focussed - working with at risk groups in ways to reduce future impact of poverty

Initiatives to deliver funds, grants and benefits - individual and organisational



Challenges

Complexity, challenge in coordination, lack of overall poverty strategy

Increased need & growing demand on poverty support services

Reductions in resources - funding cuts, reduced public donations, decreased staffing

Rising energy costs for organisations themselves

Unsustainability of crisis support
- greater need for prevention focus

Food banks and food pantry model - balancing overall supply and demand

Current unmet need



New emerging need

Some uncertainty, lacking data

Insights suggest **possible gaps in poverty support** for these groups;

- Asylum seekers and ethnic minority populations
- Socially excluded
- Digitally excluded
- Prison leavers, people with addiction problems or in recovery
- People with temporary housing needs
- Isolated groups; carers, bereaved
- Young families
- Elderly groups
- People experiencing domestic violence
- Veterans

Service level - **unmet need in access to mental health support** at an early stage

Working poor

On the cusp / just about managing

Families that have never needed help before

Older workers (50+)

Specific issues

- Increasing homelessness
- Building / hidden levels of debt
- Housing maintenance needs
- Energy supplies cut, with knock on impact on health and housing condition

Conclusions

- A lot of work excellent work is already taking place across Wakefield District to support people experiencing poverty, in a range of ways
- There are generally good connections between services, providers and referral partners; further engagement with employers and the private business sector has been suggested
- Networks for poverty support providers are valued and could be expanded to ensure wider representation of groups and services, particularly those representing groups which may currently be missing out on poverty support
- A focus on the prevention of poverty, including long term actions to address the wider determinants of health is ultimately needed to alleviate pressure on immediate mitigation services
- Factors that enable individuals and families to exit poverty could be further explored

How is the mapping being used?

- Poverty is everyone's business, and this is system-wide work
- The report is a tool being presented to and used by all partners, alongside other information and intelligence
- Important part of the evidence base for the Wakefield Economic Wellbeing Strategy
- Report shared with Senior Leadership Teams across the Council
- Report shared with relevant strategic partners (VCSE, Health, Council)

Lessons for conducting this type of work

- Be really clear about what is in scope and what is not in scope, and why. Be explicit if needed. Think about impact on participants
- Have good representation on the steering/working group and ensure buy-in
- Used mixed methods to collect information – something to allow a wide range of partners to engage
- Allow time and permission for wide ranging discussion – this is a complex area
- Be clear about 'what next' and manage expectations



Thank you

For more information please contact
Tom@WeAreMagpie.com

Download the full report and methodology from
www.nova-wd.org.uk/news/key-finds-from-poverty-support-services-mapping

Change Grow Live

How organisations can work
with service users and learn
from lived experiences.



Chris Barnes, National Service User Involvement Lead for Change Grow Live
& **Tom Salmon**, Magpie

Change Grow Live

- **Change Grow Live exists to meet the needs of people using drug and/or alcohol.** Whilst the statement sounds simple, the needs of the people using drugs and/or alcohol are extremely complex, diverse, and dynamic
- **The cost of living has triggered a public health crisis,** thus increasing health disparities nationally
- Change Grow Live services are disproportionately **found in areas of economic and social deprivation;** 38% being of the top third most deprived areas



- Most of the people we support are more **affected by the cost-of-living crisis** as compared to the general population
- Specific groups of people using drugs and/or alcohol are affected more than others. Research from the past recession showed that the impacts of the 2008 economic crisis continued for four years after the recession officially finished. This indicates that the effects of the current cost of living crisis will have lasting, wide-reaching impacts for many years and are likely to exacerbate health inequalities for those using drugs/alcohol

There has never been a greater need to address stigma, increase health equity, and deliver services in response to the needs of individuals and communities. The Drug Strategy has created a range of opportunities and challenges: investment, accountability, scrutiny, and integration to name a few.

What is service user involvement?

'Service User Involvement' (SUI) means working closely with, listening carefully to, and learning from the people who are impacted by our work. Every voice, every idea, and every piece of feedback enables us to better recognise and meet the needs of the people we work with.



Statutory frameworks

'We want to be an advocate for change, with our regulation driven by people's needs and their experiences of health and care services, rather than how providers want to deliver them.'

Care Quality Commission's (CQC) Strategy 2021

'The involvement of people who experience care and support will help to direct improvement support to where it matters most for people and the communities they live in.'

Care Inspectorate Scotland (CIS) Improvement Strategy

'Integrating health and care has the power to transform how, and how well we deliver these services to residents. Integrated Care Systems will allow local authorities and the NHS to pool their wealth of skills and local knowledge to ensure people are receiving appropriate, timely and effective care.'

Councillor David Fothergill, Chairman of the Local Government Association's Community Wellbeing Board

'Increased funding will not improve services unless the commissioning process is strengthened [...] This process will be enhanced by co-production with people with live experience of addiction.'

Dame Carol Black's 2021 independent review for the government, set out a range of recommendations on drug treatment and recovery

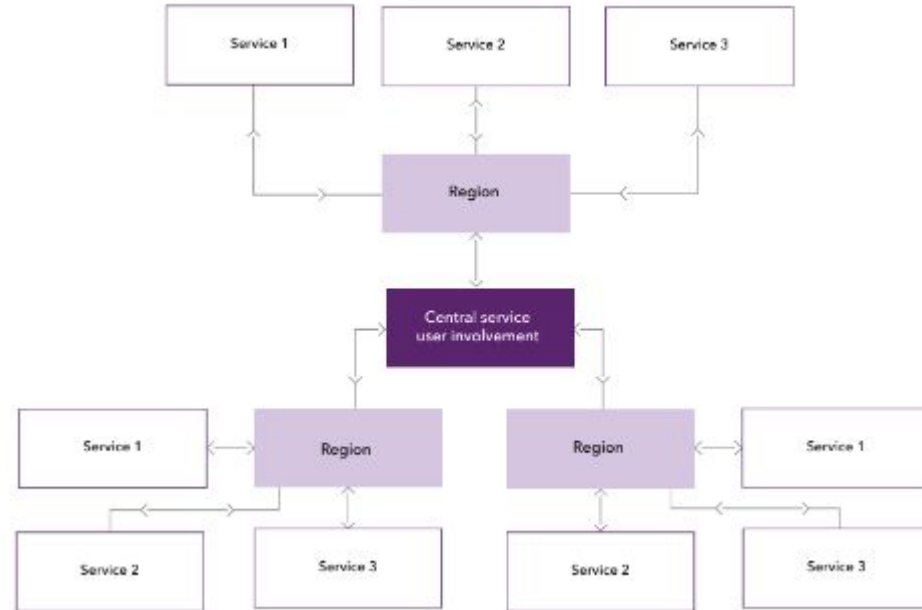
Standardising feedback

We have over 100 services, supporting 122,332 service users (increasing each day).

We know need is changing e.g. use of specific drugs increasing.

Feedback needs to be standardised to join the dots and shape national policy.

Capability building amongst our teams is vital to ensure this happens.



We have a duty to the people who access our services, and to the communities we work with, to provide the best support we can. We know that listening to the communities we work with, and responding to the voices of people accessing services:

- Improves outcomes
- Helps us accurately gauge the effectiveness of our current ways of working
- Creates better services
- Identifies and removes barriers to engagement with our services
- Ensures we meet the needs of all our staff, volunteers, and people accessing our services

Change Grow Live Commissioned Magpie to take a behavioral science approach to create a toolkit to support our teams to work with service users and to use the data to inform our regional and national decision making.



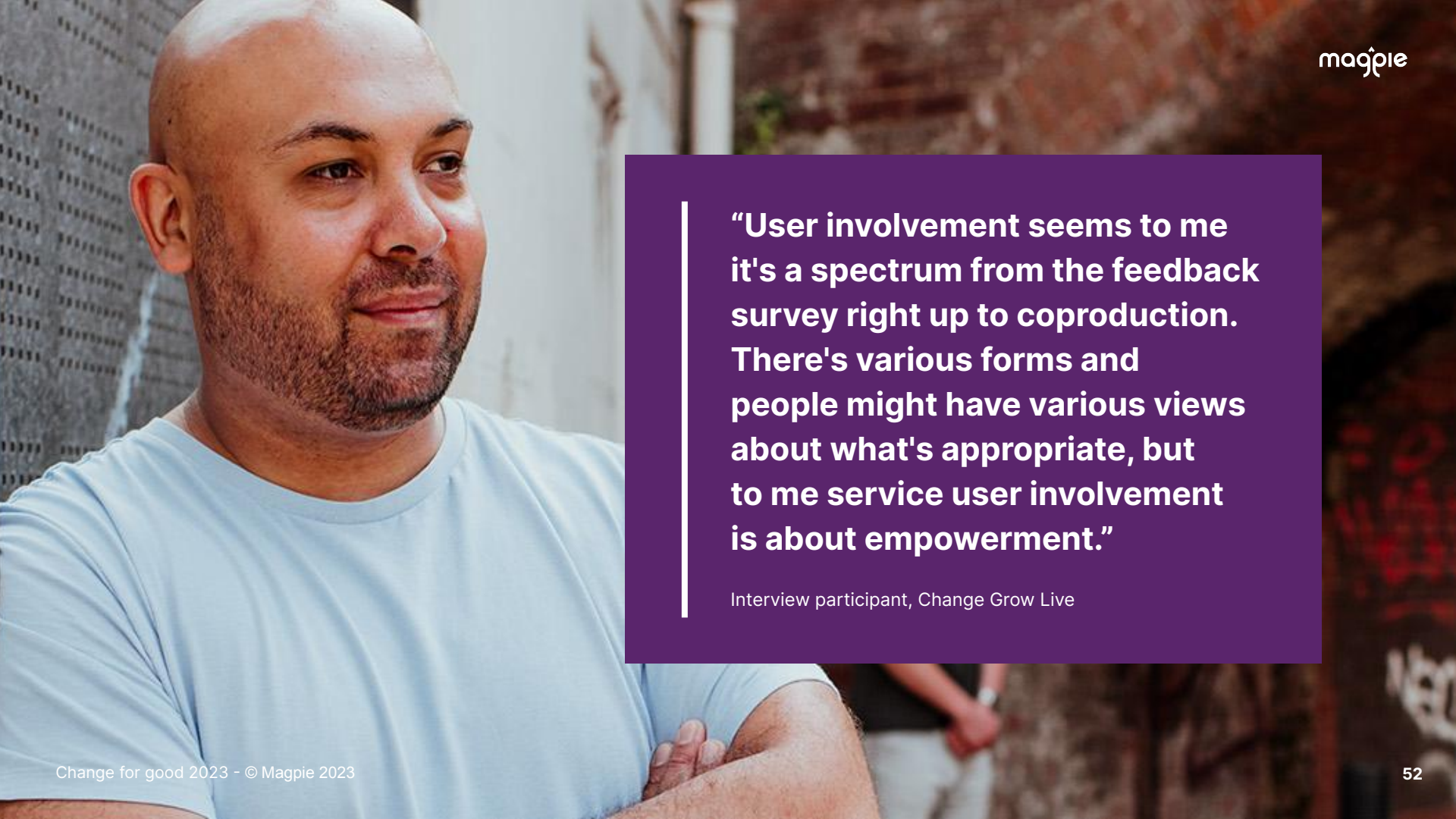
Co-producing the guide

We wanted to understand the experience, opinions towards and use of service user involvement among Change Grow Live's teams across the UK.

- Survey
- Workshops
- Focus group
- Interviews

Analysed and put into a COM-B model.





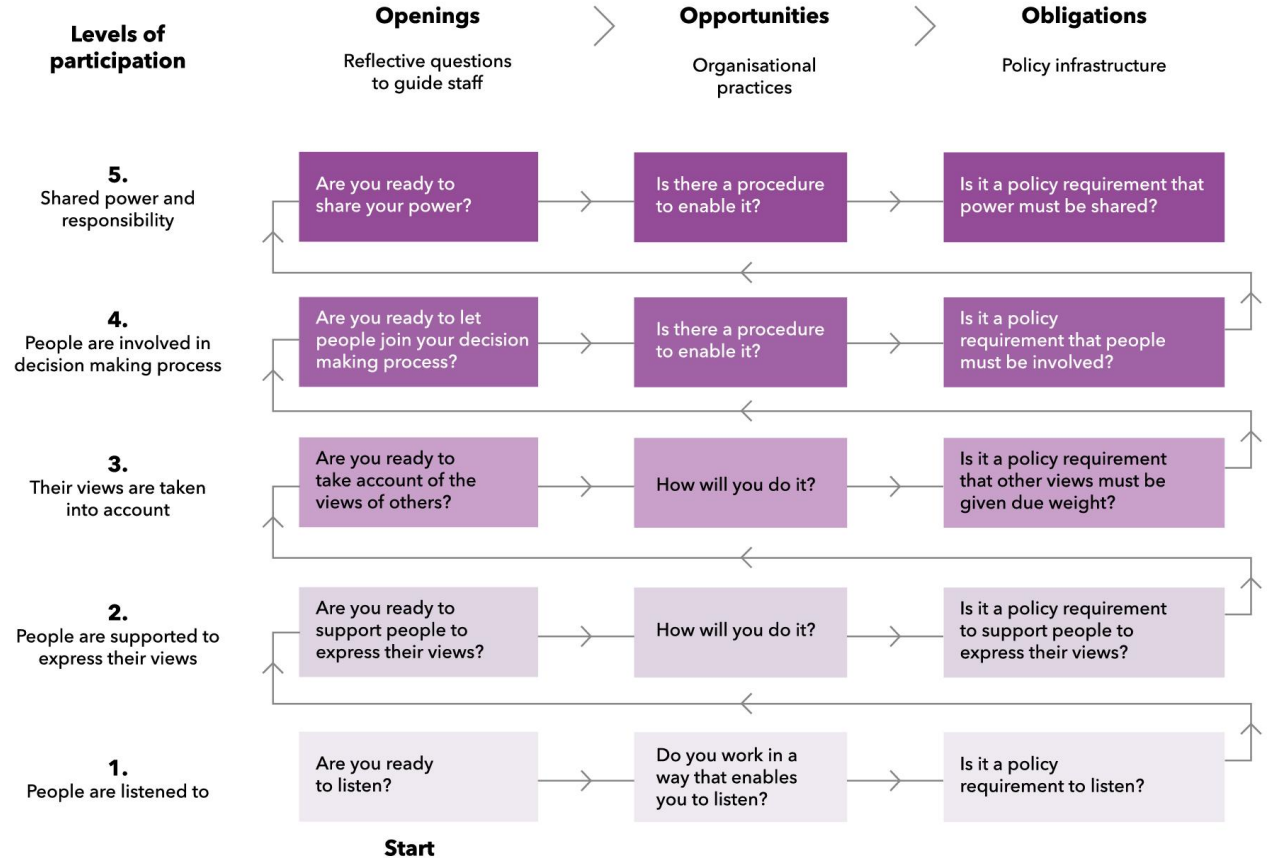
“User involvement seems to me it's a spectrum from the feedback survey right up to coproduction. There's various forms and people might have various views about what's appropriate, but to me service user involvement is about empowerment.”

Interview participant, Change Grow Live

Are we ready to listen?

Harry Shier's 'Pathways to Participation Model' illustrates different levels of participation and what is required to achieve them.

It considers an organisation's readiness and capacity to involve people using services in meaningful participation.



Approaches to listening

Quantitative approaches	Qualitative approaches	Mixed methods
<ul style="list-style-type: none"> > Numbers based - countable or measurable > Data tells us how many, how much or how often > Fixed and universal 'fact' > Gathered by counting or measuring things > Analysed by statistical analysis > Can involve more responses > Easy to analyse and draw conclusions 	<ul style="list-style-type: none"> > Words and language based - descriptive > Data tells us why or how things might be happening > Dynamic and open to interpretation > Gathered through observation or interviews > Analysed by grouping the data into categories or themes > Supports development of new ideas > Helps with understanding people's motivations, thoughts, and behaviours > Can provide detailed answers 	<ul style="list-style-type: none"> > Uses both quantitative and qualitative approaches to reach a conclusion > A mixed method approach makes the most of the advantages of the quantitative and qualitative methods, while offsetting the drawbacks of each

Creating a national toolkit and embedding support for SUI

Capability Making the complexity of SUI at CGL clear and simplified	Opportunity Galvanising support for and delivery of SUI	Motivation Increasing the value of SUI in all team members' eyes at all levels
Embed learning about SUI across CGL	Training for staff to develop confidence and clarity on their remit for SUI	Increase confidence to practice SUI amongst staff
Clarify the meaning of SUI in different contexts: Create a framework clearly showing the different activities that can be undertaken for different purposes	Time - provide realistic guidance about what can be achieved within each part of the patient journey	Reduce the stress that SUI can cause in practice
Provide processes for different services users and different SUI levels	Create buy in from front line up and top down with a particular focus on middle management	Create better service user experiences
Clearly identify the benefits of SUI Show benefits from the perspective of patients and service development via examples and case studies	Provide support and supervision for SUI to provide the space people need to think about the SUI part of their roles and how to manage it as well as where it fits with the organisational structure	Provide examples of the difference that SUI has made to service users
Map out all the ways that SUI takes place , how it is collated, how it is analysed and how it feeds into patient / person centred care and service improvement	Provide ethical guidelines to support staff to feel in control of what is right and what is not right to ask of service users in different contexts	
Provide all the resources that currently exist bearing in mind power imbalances and the need to tailor approaches for the needs of different people	Provide the required technology to make SUI work simple, practical, quick, seamless and joined up	

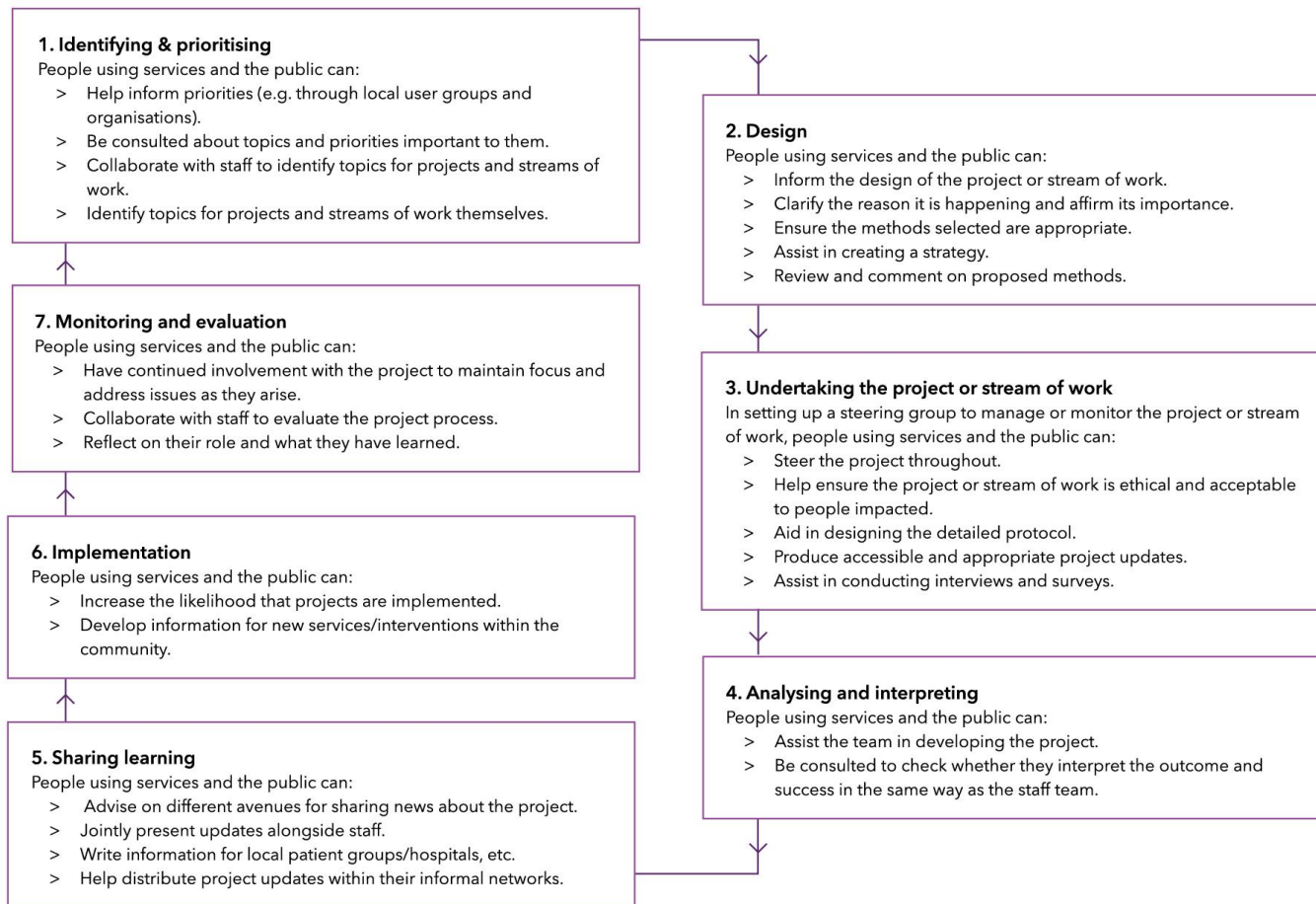
Co-production: Full involvement in listening and responding

Our ambition at Change Grow Live is to develop ways in which people using our services can have an active voice and be involved in co-producing services and activities.

The aim of co-production (sometimes referred to as Patient and Public Involvement or PPI) is to involve people using services and the public as partners.

Co-production aims to create a culture that values all expertise and knowledge, particularly the expertise and knowledge of the people that are most affected by the problem and solution.





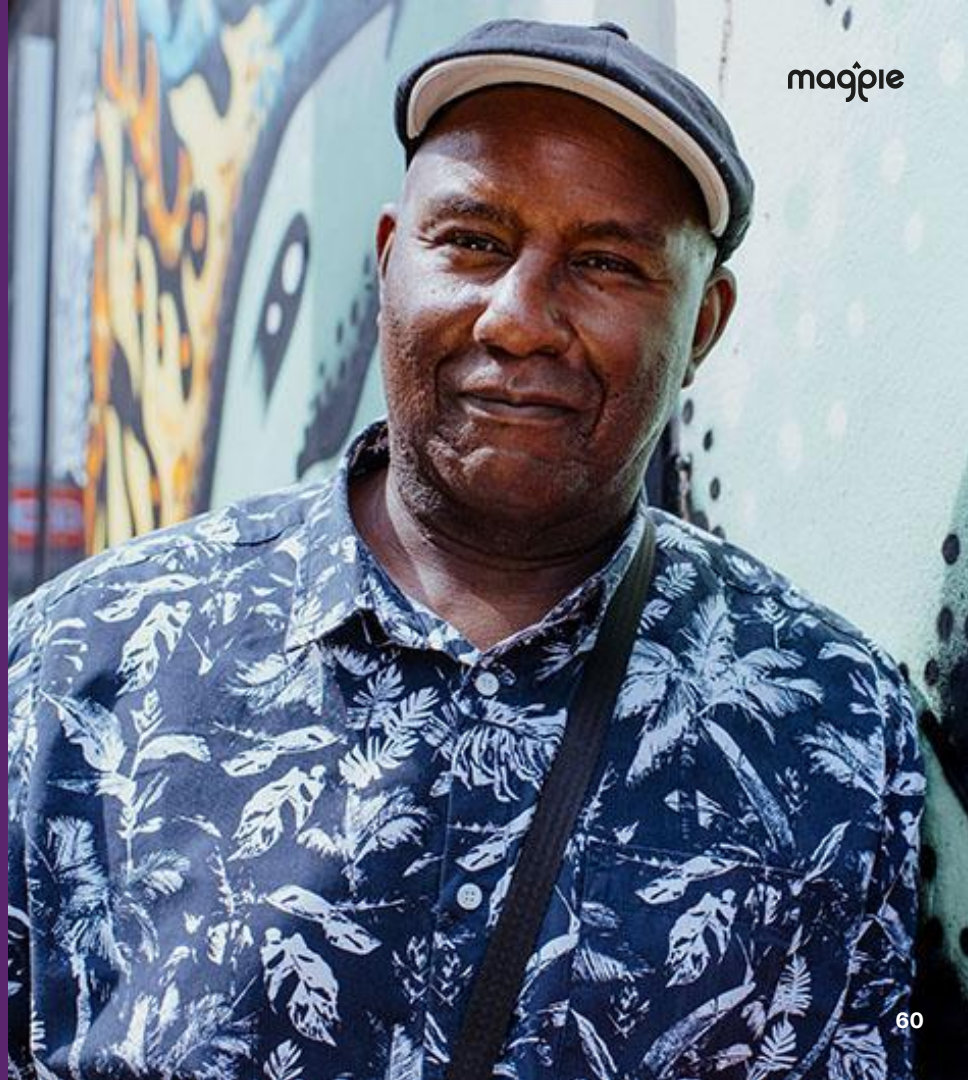


What difference has it made?

- Informing local, regional and national policy at Change Grow Live
 - Giving staff confidence in engaging service users
 - Respecting the service user voice, leading to real outcomes
 - The guide and resulting data is shared with other organisations, helping to share insight and learnings across the sector
 - Horizon scanning and proactive development
- The SUI guide was downloaded more time in the first four weeks than the previous one was in the previous two years
 - CGL received +104% feedback this quarter compared to the same quarter last year
 - We have embedded SUI within the new organisational assurance framework

Key takeaways

- The approach to SUI is helping services to influence within newly established Combating Drug Partnerships within Local Government
- Implementation is central to success: we supported this with an updated SUI policy
- Overcoming stigma by reframing substance misuse through the lens of health



Thank you

For more information please contact

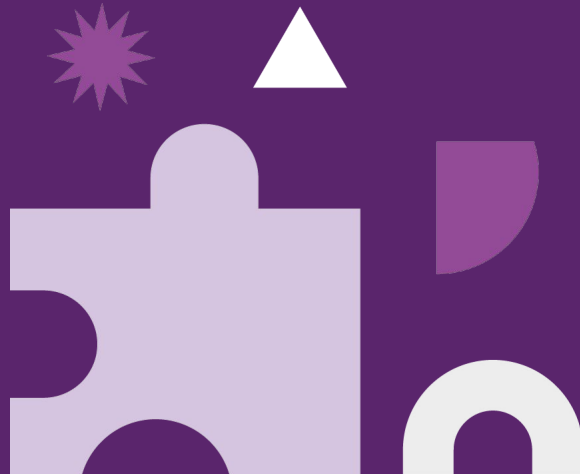
Chris.Barnes@cgl.org.uk or

Tom@WeAreMagpie.com

A link to the full Guide will be circulated to attendees.



**Change
Grow
Live**



Panel Q&A

Ged Savva, Magpie

Kerry Murphy, Wakefield Council

Stu Hennigan, Author Ghost Signs

Dr Kate Questa, Magpie

Chris Barnes, Change Grow Live

Professor Jim McManus, ADPHUK

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An informal fortnightly drop-in for changemakers to come together to share challenges and opportunities, action learn, troubleshoot and discuss creative communication approaches to behaviour change.



Thank you for attending

And thank you to our speakers. We'd love to hear what you thought about the event and what you'd like to see in future events

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change for good

Next event 15 June

Register now <https://www.eventbrite.com/o/magpie-54324527293>

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