



Citizens Advice
Shropshire

Health and Poverty

Citizens Advice Shropshire



October 2012

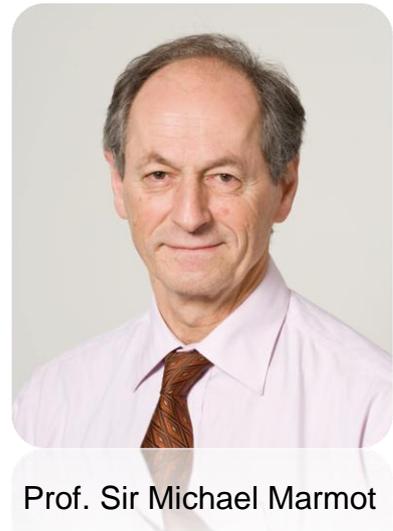
What Citizens Advice Bureaux client information tells us about the needs of residents living in Shropshire

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Foreword

Inequalities in health arise because of inequalities in society, in the conditions in which people are born, grow, live, work, and age. In England inequalities in mortality and morbidity are substantial, people living in the poorest areas will, on average, die seven years earlier and have 17 years fewer of disability-free life expectancy compared with people living in the richest areas. Individuals living in poorer areas not only die sooner, but they will also spend more of their shorter lives with a disability.



Prof. Sir Michael Marmot

These serious health inequalities are caused by social and economic inequalities in society. For example, inequalities in education, employment and working conditions, housing and neighbourhood conditions, standards of living, and, more generally, the freedom to participate equally in the benefits of society. If these inequalities are to be addressed then action is required across all these social determinants of health.

Advice and information services are a way in which local government working with voluntary sector providers can take practical action to help tackle the social inequalities in society that lead to the health inequalities we all experience. Advice and information services can lead to improvements in housing conditions, or employment and working conditions as individuals are able to enforce their statutory rights. Advice services, including financial and debt relief services, housing advice and benefits advice are cost-effective ways to increase incomes in low-income households which can lead to increased standards of living. Of course, given the effect of the economic downturn and the changes to the welfare system there is also a key role for advice agencies to ensure that affected households are fully informed about the changes, so people know how they will be affected, and are helped to understand their best options.

As advice and information services are accessible and used by so many individuals, they have a wealth of data about the social determinants of health that can be used when planning services. Data from advice and information providers may not come badged in the headings policy makers and service planners would like. However, as this reports shows, with a little knowledge and interpretation, it can act as a valid indicator about the determinants of health that people in communities and neighbourhoods across England are facing.

A handwritten signature in black ink that reads "Michael Marmot". The signature is written in a cursive, flowing style.

Professor Sir Michael Marmot

Who does Citizens Advice Shropshire reach?

Citizens Advice Shropshire helps local residents resolve complex problems that relate to the wider determinants of health. In addition, the type of problems residents bring to us can be used to help indicate needs across communities.

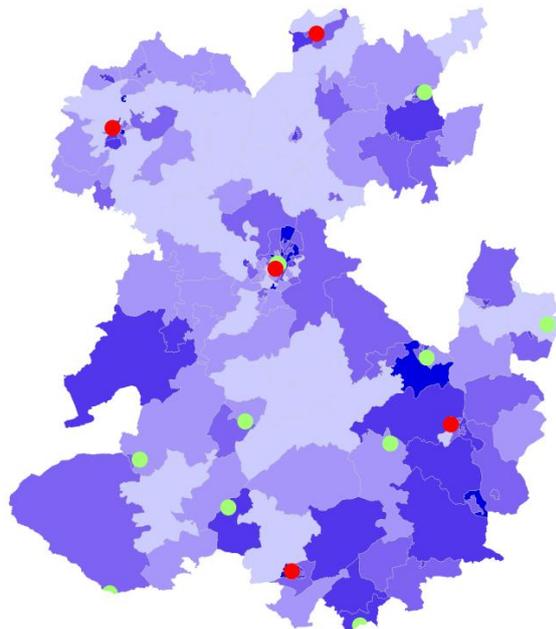
- In 2011/12 a total of 9,009 residents of Shropshire received help from the CAB service.¹

Significant numbers of residents of Shropshire using advice services are living on low incomes and suffer from other forms of deprivation.

- In 2011/12 we advised 438 clients from this area who lived in the twenty per cent most deprived areas² in England.

Figure 1 shows where our clients live, in relation to the incidence of multiple deprivation.

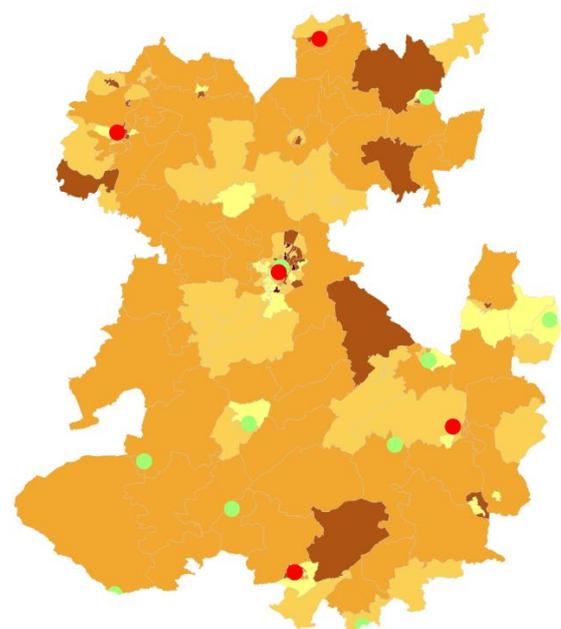
Citizens Advice Debt/Benefit Clients (2011/12) by Lower Super Output Area
Shropshire



Clients Per LSOA

1 - 13
14 - 21
22 - 31
32 - 46
47 +

Indices of Multiple Deprivation (2010) by Lower Super Output Area
Shropshire



IMD Ranking

Most Deprived
Very Deprived
Deprived
Less Deprived
Least Deprived

● Bureau
● Outreach

¹ This figure includes some residents who received help from neighbouring bureaux.

² Lower super output areas

Advice organisations are in contact with many of the most vulnerable people in communities who need advice and support. These are the same individuals who are the intended target group for many public health interventions.

Social housing tenants, single parents, and members of black and minority ethnic communities represent a significantly higher proportion of our clients than in the Shropshire population as a whole.

In addition to the advice services available in bureaux, we deliver:

- outreach advice services in ten locations across Shropshire, including advice in five GP practices
- advice by telephone for those unable to reach an advice session
- home visiting service for those unable to reach an advice session and needing face to face advice

The following sections show how Citizens Advice Shropshire helps combat key social determinants of ill-health.

Child poverty in our area

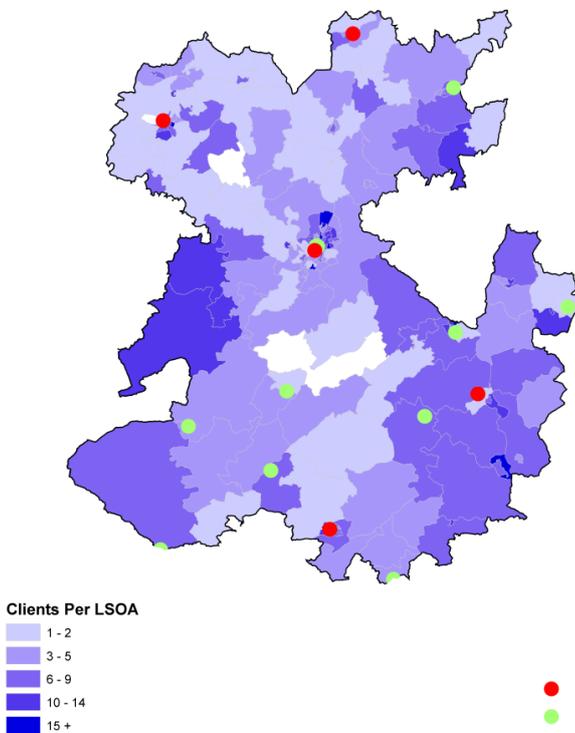
Growing up in poverty damages children's health and wellbeing, adversely affects their future health and life chances as adults. There is estimated to be £16 billion of unclaimed benefits and tax credits in Britain.³ Many groups fail to claim their entitlements in spite of need - for example, in general take-up of child tax credit is ten per cent lower among families from minority ethnic backgrounds.

Advice and information from the CAB lifts children out of poverty by increasing income and helping families to manage unaffordable debts. Our outreach projects include working in community centres to reach families in poverty.

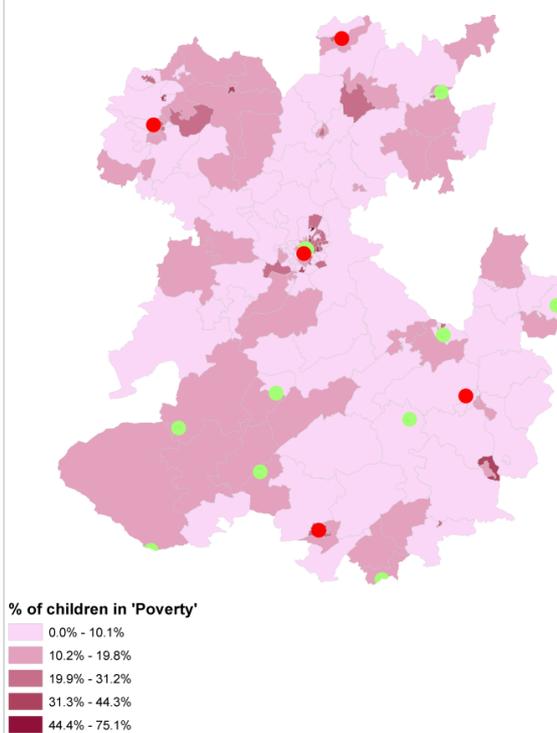
- In 2011/12 the Citizens Advice service advised a total of 5,171 clients resident in Shropshire about debt and/or benefits to maximise their incomes of whom 1,143 were recorded as having dependent children.
- We estimate a **total of 1,938 clients in fact had dependent children** (taking into account a proportion of clients with unknown household type⁴).

Figure 2 shows the extent of our work concerning debt and income maximisation with clients recorded as having dependent children, according to where they live (left hand map), and in relation to the incidence of child poverty in the local authority area (right hand map).

Citizens Advice Debt/Benefit Clients With Dependent Children (2011/12) by Lower Super Output Area - **Shropshire**



Children in 'Poverty' (2009) by Lower Super Output Area **Shropshire**



³ Citizens Advice press release 03/02/10: Half of all working households entitled to housing benefit do not claim it – up to half a million households. Council tax benefit and pension credit also show significant under-claiming. 1.2 million low-paid households without children miss out on tax credits. (Source: DWP and HMRC)

⁴ The percentage of clients with dependent children is calculated as a percentage of clients where the household type was recorded – and the estimated total then calculated by applying this percentage to all clients advised on debt/benefits.

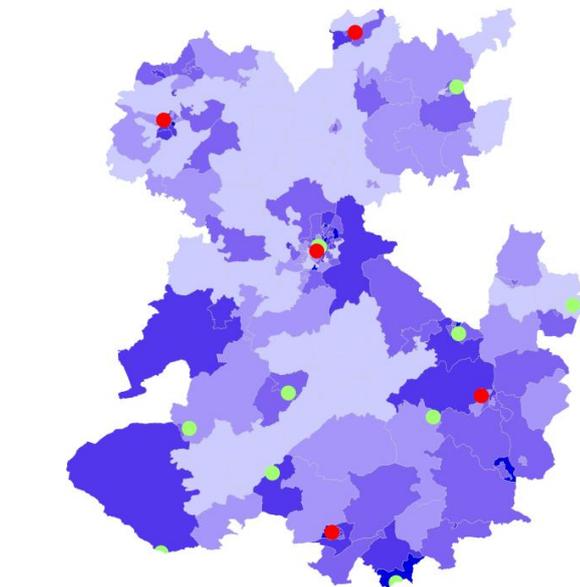
Fuel poverty in our area

Low income, poorly insulated housing, and expensive, inadequate heating systems contribute to fuel poverty, which in turn contributes to excess winter mortality and morbidity amongst older and disabled people. Our advice and information lifts people out of fuel poverty by:

- increasing their disposable income,
 - helping them to manage unaffordable debts,
 - helping them get the best value energy deals and make best use of their income.
- In 2011/12 the Citizens Advice service advised a total of 5,171 clients living in Shropshire about money-related matters concerning debt and/or benefits, of whom 1,924 were recorded as disabled and/or aged sixty or over.
 - That means 37 per cent of clients advised on debt or benefits were aged 60 or over and/or disabled.

Figure 3 shows the extent of all our work on income maximisation and debt according to where clients live (left hand map), in relation to the incidence of deprivation across Shropshire (right hand map).

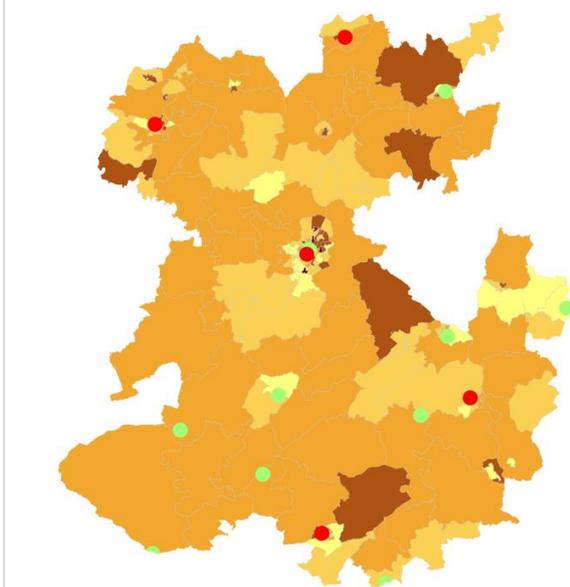
Citizens Advice Clients (2011/12) by Lower Super Output Area
Shropshire



Clients Per LSOA

1 - 26
27 - 40
41 - 56
57 - 80
81 +

Indices of Multiple Deprivation (2010) by Lower Super Output Area
Shropshire



IMD Ranking

Most Deprived
Very Deprived
Deprived
Less Deprived
Least Deprived

● Bureau
● Outreach

In addition to advising about benefit claims and debt problems, the bureau offers financial capability advice and information to clients – such as budgeting, how to get the best energy deal, and how to avoid costly credit.

Disability and long term health problems

The cost of working age ill health in the UK is £100 billion per year. There were 9.8 million working days lost in 2009/2010 due to work-related stress, depression or anxiety. Work is generally good for physical and mental health and wellbeing, taking into account the nature and quality of work and its social context. Worklessness on the other hand is associated with poorer physical and mental health. Residents in Shropshire with disability and long term health problems have particular advice needs which indicate the problems they may face staying in accommodation or employment.

- **2,167 Shropshire-resident clients were recorded as disabled or with long term health problems. We estimate that the actual number could be 2,743 (with a proportion of those whose disability/health status was not recorded.)**
- **30 per cent of our clients living in Shropshire for whom their health/disability status was recorded, were disabled or had a long-term health problem.**
- **Where the type of problem was recorded:**
 - **61 % had a long-term health condition**
 - **10% had mental health problems**
 - **24% had physical or sensory impairment**
 - **2% had learning difficulty or cognitive impairment**
 - **3% had multiple impairments**

CASE STUDY: Edward's problems at work

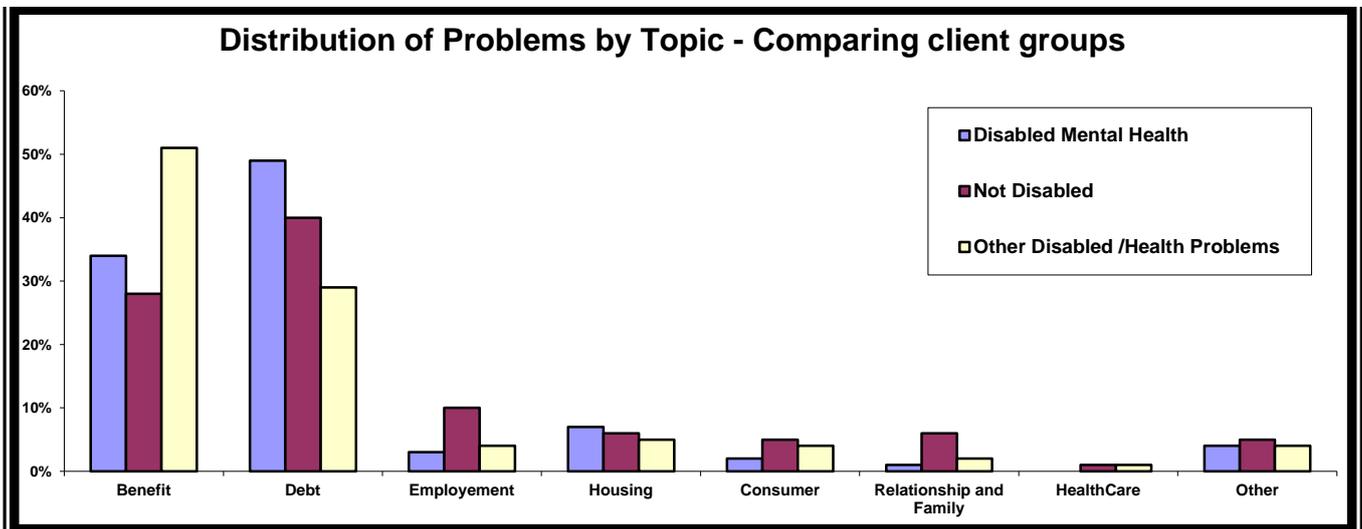
were directly linked to his Asperger's. One of the ways it manifests itself in Edward's case is an inability to write things down.

A task at work was to check stock and decide what needed to be ordered. Details were entered into a notebook. Certain duty managers embarrassed Edward by sharing his comments in the notebook with others. He became the subject of taunts and ridicule. Enjoying his job Edward sought a solution. After discussion with management, a simplified system was devised. A daily tick box sheet eliminated the need for Edward to put things into writing and had the added benefit of saving time for all employees. With this simple reasonable adjustment, Edward was able to continue working and supporting himself despite his disability.



Disabled clients are less likely to be employed and so more often require help with benefits. In particular, the recent changes in disability-related benefits are causing problems to these vulnerable groups – particularly the introduction of employment & support allowance (ESA) to replace incapacity benefit. We have helped a record number of clients with their appeals against unfair work capability assessments for ESA – this issue has been taken up nationally.⁵ The replacement of Disabled Living Allowance in April 2013 by a lower-funded substitute (PIP) is expected to cause an even larger number of disabled people to require advice on the process and assistance with appeals.

⁵ http://www.citizensadvice.org.uk/index/policy/policy_publications/right_first_time.htm
http://www.citizensadvice.org.uk/index/policy/policy_publications/er_benefitsandtaxcredits/cr_benefitsandtaxcredits/wca.htm



Nationally, clients with mental health problems have a similar level of debt problems to clients without a disability, whilst clients with other kinds of disability or long term health problems are less likely to have debt problems.

Clients with long term illnesses such as cancer frequently require help with benefits.

Citizens Advice Shropshire has found disability to be the single biggest cause of employment discrimination amongst clients – bigger than race or gender. Amongst our clients seeking help with employment problems, disabled clients are more frequently advised about discrimination than other clients.

Homelessness in our area

Homelessness is a social determinant of health and an indicator of extreme poverty. Statutorily homeless households contain some of the most vulnerable members of society. Residents of Shropshire who have housing problems and are homeless or at risk of becoming homeless use Citizens Advice Shropshire to help keep a roof over their heads.

- 486 clients living in Shropshire were advised about threatened or actual homelessness
- 54 per cent of clients advised about threatened homelessness were known to be in a vulnerable group (i.e. with children, disabled, or aged 60 or over).
- Amongst clients with housing problems, those with mental health problems have a higher incidence of homelessness than other clients.

Our outreach projects include a Court Desk so we can ensure that clients imminently threatened with homelessness get appropriate advice.

CASE STUDY: We met Mark in Court when he requested emergency help defending a Possession Order by his mortgage lender. Mid-forties, married, dependent child, he had severe depression and a work-related injury. None of his benefits were being paid correctly. In Court he was so frightened; he struggled to remember his date of birth. We secured an adjournment of the Possession Order so that we could sort out the problems associated with his benefits together with the Welfare Benefits team at Shirehall. Mark's Employment Support Allowance was reinstated and his Industrial Injuries Benefit was reassessed. He now successfully claimed Child Tax Credit and Working Tax Credit and was awarded Disability Living Allowance. Within 3 months, his income was so substantially increased that he could offer significant mortgage payments, enabling him and his family to stay in their home.

Victims of domestic abuse

Domestic abuse victims have a high level of repeat victimisation, often with the severity of incidents escalating over time. This has an extreme adverse effect on the physical and mental health of the victims and of children witnessing abuse. In the last year 42 residents of Shropshire sought advice from the CAB about domestic abuse. We work closely with other agencies to help clients resolve these problems, and we help sort out any ensuing debt and housing issues and benefit entitlements following separation.

Environmental and neighbour problems

The first aim of the Noise Policy Statement for England is to avoid significant adverse impacts on health and quality of life from environmental, neighbour and neighbourhood noise. 127 residents of Shropshire sought advice from the CAB due to issues connected to neighbourhood and environmental problems.

Our services and our clients' problems

The pattern of client problems has remained fairly constant, with benefit and debt predominating. In 2011/12 Citizens Advice Shropshire helped the following number of clients with⁶:

Benefits & tax credits -	3,458 clients
Debt -	2,688 clients
Employment -	1,332 clients
Housing -	1,259 clients

These problem areas are often inter-related - for example, being made redundant can lead to a need for advice about employment rights, benefits entitlement, and debt problems. Relationship breakdown can similarly lead to a raft of problems such as separation and custody, debt, housing, and benefit. Many of our clients have more than one problem. The CAB is unique in being able to offer advice on the whole range of a client's problems.

Citizens Advice Shropshire offers advice and support ranging from straightforward information and advice for those clients who are able to act for themselves once they understand their options, through to detailed ongoing casework and support for those with complex problems who need a professional to act on their behalf. Clients with debts are also:

- advised on claiming any benefits or tax credits to which they may be entitled to maximise their income
- offered financial capability advice to enable them to make best use of their income (e.g. budgeting, energy best deals) and to avoid debt in future (e.g. understanding and avoiding costly credit).

⁶ These figures and the figures in the sections on Outcomes include clients from without Shropshire.

Projects – work in health settings

In our GP Outreaches, there is a higher demand for benefit advice than amongst our other clients. GPs are often faced with clients suffering from stress due to debt or poverty and they are unable to resolve the underlying causes. Referral to a CAB adviser in the surgery for benefit or debt advice helps the client and saves the GP's time for their real work.

Published research shows that debt problems and financial concerns commonly lead to anxiety, stress and depression. These mental health problems are a big drain on the health service.

Outcomes for clients

Providing access to free, independent advice has very tangible results for clients - for example:

Benefit advice outcomes:

In a sample of 251 clients, a total amount of £559,653 benefit gain was recorded. The real total is considerably greater as the outcome was not known for many clients. Applying the principle that 1/3 of benefits clients achieve an outcome would mean the total is estimated at £5,091,648.

In the sample 69 clients had a recorded ongoing confirmed annual benefit gain on average this was 4,416 per client.

Debt advice outcomes:

Managing debts:

In 2011-12 we recorded £11,969,229 of managed debt of which £2,225,750 was classed as priority debt (including rent and fuel arrears).

Debt written off:

In the sample of 251 clients, 40 clients had one or more debts written off - through bankruptcy, debt relief order, or otherwise. The average value of debt written off for these clients was £20,844, totalling £833,771.

Homelessness prevented

For at least 150 clients homelessness was prevented or averted.

Clients also report positive impacts on their health and wellbeing:

- In Leeds 41 per cent of debt advice clients reported an improvement in their health following advice, and 63 per cent of debt advice clients reported a reduction in their stress levels.⁷

We have now included questions on health and wellbeing in our own client satisfaction survey. A client comment from the initial results is very telling: 'When I first contacted the CAB I was very distraught, confused and depressed. Your help at the time has made me calm and focus(ed)...'

⁷ *Economic impact & regeneration in city economies: the case of Leeds, Leeds City Council, 2009*

Emerging needs

In order to maximise the number of clients we can help, we have recruited and trained more volunteers, developed our working practices to improve efficiency, and over the past three years have secured additional funding to extend opening hours.

In 2012 and beyond we anticipate that the demand for many of our services – particularly benefit, debt and housing advice - will continue to grow in response to:

- Continuing changes to benefits and tax credits that will impact severely on our client groups, including disabled people⁸, people with mental health problems, and large families on low incomes.
- Increasing levels of poverty as these changes take effect, along with other cuts to public services and continuing high levels of unemployment.
- Continuing high levels of debt problems with a significant increase in fuel poverty anticipated as fuel prices increase.
- Increasing housing problems as changes to Housing Benefit take effect (high rent urban areas such as Shrewsbury will be most affected by these changes) which may impact on homelessness.
- The roll-out of Universal Credit leading to transitional problems as changes are implemented with in essence 3 systems in operation at the same time until 2017.

⁸ http://www.citizensadvice.org.uk/index/policy/policy_publications/er_benefitsandtaxcredits/holes_safety_net.htm

Appendix 1: Client Profile

The tables below compare the client profile of Citizens Advice Shropshire to the population profile of the local authority area. In each case the data is taken from client data for 2011/12 and the Shropshire Census 2001 respectively, unless stated otherwise.

Table 1: Super Output Areas

Super Output Areas (SOA)	Clients %	LA area %
20% most deprived	5	2
Outside 20% most deprived SOAs	95	98
Total	100	100

Local Authority information from 2007 (based on 2005 figures).

Table 2: Gender

Gender	Clients %	LA area %
Male	44	49.4
Female	55	50.6
Total	99	100

Local Authority information from 2009 (based on 2007 figures).

Table 3: Age

Age	Clients %	LA area %
0-15	0	17.9
16-29	20	14.6
30-44	29	19.5
45-61	34	24.6
62-74	13	14.0
75+	4	9.4
Total	100	100

Local Authority information from 2007 (based on 2004 figures).

Table 4: Ethnicity

<i>Ethnic group</i>	<i>Clients %</i>	<i>LA area %</i>
White	97.5	98.8
Black or Black British	0.5	0.1
Asian or Asian British	0.7	0.3
Mixed	0.5	0.4
Chinese or Other ethnic group	0.8	0.4
Total	100	100

Table 5: Disability - excluding those with long-term health problems

<i>Disability</i>	<i>Clients %</i>	<i>LA area %</i>
Disabled/Long term health	22	17.9
Not disabled	78	82.1
Total	100	100