



Learning from the crisis:

**Ten considerations for local leaders building
a new settlement for multiple disadvantage**

Foreword

This report is for local leaders – statutory and voluntary - who have led the response to the Covid-19 crisis. It explores the incredible efforts that have been made by local services, commissioners and policy makers over the last six months. It then considers how learning from this experience can be used to shape the next stage of the crisis response and, ultimately, to build a new long-term settlement for people facing multiple disadvantage.

Across the country, statutory and voluntary agencies in local communities have risen to the challenge of supporting the most vulnerable people in our society: those facing a combination of problems including homelessness, substance misuse, mental health, domestic and sexual violence and contact with the criminal justice system.

Research published by the Making Every Adult Matter (MEAM) coalition, *Flexible responses during the Coronavirus crisis*¹, highlights the flexibilities that these local statutory and voluntary services, commissioners and policy makers have put in place. Their swift and coordinated action has undoubtedly saved many lives and will continue to save many more. While the crisis is far from over, there is a chance now for us all to reflect on what comes next.

There is little doubt that for many people facing multiple disadvantage the indirect and long-term impact of the crisis is likely to be worse than the direct effects to date. Poverty and inequality create disadvantage, and both are likely to rise; there are significant concerns about population-level mental health; contact with the criminal justice system is likely to grow, while prisons will be slow to recover to pre-crisis regimes and support; and there is a clear risk that homelessness and substance misuse will increase as the long-term impacts of the crisis play out. The widely reported intensification of domestic abuse during lockdown is putting women at risk, and the trauma of the violence and abuse they have experienced will have a long-term impact.

Local statutory and voluntary services, which are working tirelessly to tackle the immediate impacts, must now also prepare for this new reality, and do so in an environment that will look very different. Services – and the people who commission

¹ Access the research here: <http://meam.org.uk/2020/06/11/flexible-responses-during-the-coronavirus-crisis/>.

them - will be worried about funding settlements and having to deal with constant uncertainty and ambiguity.

However, as we adapt to the continuing crisis, there is also an important opportunity to think about the future, to change the way that local areas respond to multiple disadvantage, and to shape a new settlement for the people who experience it. There is much learning from the crisis which can help shape this new settlement and to ensure that all local areas move away from a 'silo-based' or 'sector-by-sector' response to people's needs.

Cross-sector leadership

As the country reacts to the changing stages of the crisis, all local areas should ensure that cross-sector discussions are taking place about how to best respond now and in the future. These conversations must be ambitious about how local systems can best serve people facing multiple disadvantage. The next stage of the crisis response, and a new settlement, will require significant cross-sector local leadership, a well-funded and supported voluntary sector working closely with statutory partners, and clear commitment at all strategic and operational levels. It will also require direction, support and funding from national government and we continue to argue strongly for this.

The strategic support of local leaders will be a vital part of this work. Many local areas (including those in the MEAM Approach network) have forums in place that can support local leaders and enable cross-sector leadership to flourish.

In this report we present ten considerations, taken from research carried out across our networks and the expertise of local and national organisations, which are relevant for local leaders wanting to shape the next stage of the response and build a new settlement for people facing multiple disadvantage. We divide these ten points into two categories: those that relate to the system as a whole, and those that relate to the role of specific services.

We hope that these points chime with local leaders' thinking. Taken together, they can help to ensure that the next stage of the response, and the long-term settlement that should follow, are inclusive and tackle the existing inequalities laid bare by the pandemic.

We recognise the scale of the task that is to come. If our organisations can be of assistance, we would be pleased to discuss how we can support you and your local partners in the work of building a new settlement for people facing multiple disadvantage.

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A new settlement for multiple disadvantage: ten considerations for local leaders

SYSTEM-WIDE CONSIDERATIONS

The next stage of the crisis response and a new settlement for multiple disadvantage will require a series of system-wide changes, which will have an impact on the way in which all local services are commissioned and delivered.

1. Ensuring coproduction of services

What happened? During the crisis, coproduction of services with service users and those with lived experience has not been at the fore. Although people facing multiple disadvantage have been more engaged in services, they have not necessarily been more involved in shaping them. Services that have adapted and changed quickly in order to respond to the crisis have unfortunately rarely done so with the input and direct influence of people with lived experience.

What next? There is now an opportunity to increase the role that people with lived experience play in shaping the support that public services provide and to learn directly from their experiences during the crisis. This includes involvement in how services are designed, commissioned and delivered, as well as ensuring that individuals can determine the individual support they receive. Coproduced services are more effective and better at engaging a wide range of people. They are also better at pre-empting potential problems and reducing anxiety among beneficiaries.

2. Developing system-wide leadership and shared purpose

What happened? In many local areas, the Covid-19 crisis has helped to create a shared purpose among agencies almost overnight: to continue to deliver support whilst preventing people contracting the virus and keeping them safe. This shared purpose and clarity of vision has galvanised action and supported collaboration, helping services to work together and enabling buy-in at strategic and operational levels. It has also meant that services have focused on one overarching goal, rather than sets of targets created by multiple commissioners. Unfortunately, certain gaps in collaboration remain, most notably prisons, where engagement between statutory services and partners continues to be more challenging.

What next? As local areas look to the future, commissioners and strategic leaders should work with local services and voluntary sector organisations to take a system-

wide leadership approach, developing a clear sense of shared purpose across local services and a culture of learning. Working in this way will improve communication, develop an increased sense of community, encourage staff to work beyond traditional remits and reduce the negative impact that target-based cultures can have on overall outcomes for people and places. Systems rather than services help create outcomes for people and a system-wide approach will ultimately mean that those experiencing multiple disadvantage are better supported.

3. Taking a new approach to risk

What happened? The Covid-19 crisis has brought about a shift in the balance of risk: service and policy changes that otherwise would have taken months to implement happened quickly because of the high risk that the virus posed to vulnerable groups. For example, housing individuals previously viewed as ‘too high-risk’ and reducing supervised consumption restrictions for certain groups receiving Opioid Substitution Treatment such as Methadone. This is noticeably different to the past, where non-personalised approaches to risk management have prevented services from trying new things, adopting different approaches or offering personalised support.

What next? Local leaders, particularly service managers and commissioners, should consider reviewing, re-balancing and sharing risk management, to ensure innovation and avoid a return to the status quo. The default position should be personalised risk management with individuals and their specific circumstances at the centre of decisions.

4. Promoting staff autonomy

What happened? During the crisis, frontline staff across various services, for example substance misuse and housing/homelessness services, have been given greater autonomy and control over how they work with and support individuals, enabling people to continue accessing the help they need during the crisis. This has occurred in both statutory and voluntary services.

What next? Allowing staff to respond flexibly and quickly to individuals’ personal circumstances and focus on improving their overall wellbeing should be a priority for local systems and services. This will require change in how services are commissioned and delivered.

5. Taking a trauma and gender informed response

What happened? Over recent months, taking a trauma-informed approach has protected the wellbeing of clients and the staff supporting them during the crisis. For example, appreciating the uncertainty and anxiety that Covid-19 has caused to vulnerable groups has led staff in temporary accommodation in certain areas to respond in a more trauma-informed manner to challenging behaviour, knowing that a strict enforcement of rules could escalate issues. A trauma-informed approach has given staff the tools they need to recognise why people are acting in certain ways and adapt their approach accordingly. In some areas, services recognised the critical importance of taking both a gender and trauma-informed approach, helping them reach and support women facing the greatest vulnerabilities during this time. These ways of working have also helped staff to think about vicarious trauma, manage their own health and avoid burnout.

What next? As the crisis continues and opportunities to think about the future emerge, a trauma and gender informed approach will remain critical. We can expect a long period of uncertainty and anxiety in the coming months and individuals will continue to adopt different coping mechanisms, which may be seen by some as counterproductive or risky. The more staff are trained in trauma informed care, the better response local systems will have to the needs and the coping behaviours of those experiencing multiple disadvantage, and the wellbeing of staff supporting them.

6. Addressing equality of access and NRPF

What happened? During the crisis, many staff across statutory and voluntary services have gone above and beyond, adapting to continue providing support for their clients. Unfortunately, we also know that certain groups of people experiencing multiple disadvantage have fared worse during this period than others. We know for example that the virus has had a disproportionate impact on Black, Asian and Minority Ethnic (BAME) communities, which has intersected with the barriers that already exist for these individuals in accessing appropriate services, the discrimination they face and their over-representation in criminal justice services. Women have also been significantly impacted, forced to stay in inappropriate accommodation during the lockdown period, and to use mainstream services that have a default focus on men. Migrant women, and women who speak little or no English, who were fleeing abuse during lockdown were reported to have often been turned away from refuges due to limited capacity and lack of specialist expertise. People facing No Recourse to Public Funds (NRPF) who were accommodated and

supported during lockdown under the 'Everyone In' policy now face an uncertain future, with many already struggling to access basic necessities, including food and shelter.

What next? As local areas look to the future, they should seek to significantly improve access to services for all groups and demographics. A new settlement for multiple disadvantage needs to have a particular focus on race, ethnicity and gender based on a clear local understanding of the challenges and barriers in how people access, experience and engage with services. Specialist BAME and migrant voluntary sector organisations who understand the needs of different communities need to be involved and funded and supported to engage as equal partners. A new settlement will also require a much closer linkage between the women's sector and other services, to ensure that women facing multiple disadvantage do not fall between gaps in service provision. This will require a strong understanding of issues affecting these communities, and steps taken to address data gaps in evidence about the disproportionate impact of the crisis. Finally, with strong leadership from national government, a bold long-term shift in approach is needed between services, local and national government to support people who currently face NRPF, so many of whom face destitution and fall through the cracks of the system.

7. Building inclusive economies

What happened? The virus has presented significant economic challenges for the country, communities and in particular local councils. The enormous drop in economic activity poses a huge risk to social and economic equality. Already the most vulnerable individuals experiencing the highest levels of disadvantage are being most affected by the economic downturn and we know that poverty and inequality create future disadvantage.

What next? As the crisis continues local authorities will need to play a significant role in tackling recession and enabling new growth and productivity in their communities. Action must be taken to ensure that economic opportunities are inclusive and that any future opportunities offered by local economic recovery plans are equally accessible to the most disadvantaged in communities, to support local inclusion and reduce inequality and poverty.

SERVICE-SPECIFIC CONSIDERATIONS

As well as these system-level issues, there are some service-specific (or silo specific) considerations for building a new settlement for multiple disadvantage, which we outline below. These are important, although over time we would also expect a new settlement for multiple disadvantage to focus less on describing and commissioning services in silos (e.g. homelessness, substance misuse, mental health, criminal justice, domestic and sexual violence) and more on ensuring that the personalised and effective support that people in a local area need is available.

8. The role of health and public health services

What happened? Health and public health services have been central to the crisis response. The crisis has shown that multiple disadvantage needs to be a health and public health priority and there has been significantly enhanced input from health partners locally and nationally. Mental health services have developed flexibilities for people facing multiple disadvantage during the crisis, such as providing in-reach support to the new temporary accommodation locations, but they have been less regular and less wide-reaching than other sectors.

What next? As we move forward, health and public health must continue to ensure a strong focus on multiple disadvantage, balancing this with the population-wide focus that can often be their traditional default. Public health, with their focus on reducing health inequalities, must be an integral part in local systems supporting individuals facing multiple disadvantage. Mental health has traditionally struggled to provide services which meet the needs of people facing multiple disadvantage. Likewise, local services working with individuals facing multiple disadvantage have struggled to understand mental health, and the gender-specific differences between women's and men's experiences of mental illness and mental health services. The next stage of the response, and a new settlement, need to turn this on its head, creating a firm involvement from mental health services in tackling disadvantage and ensuring mental health services are fundamental to local partnerships.

9. The role of criminal justice

What happened? During the crisis, we have seen some increased partnership working and flexibilities developed for people facing multiple disadvantage from community-based criminal justice services, in particular the police, who adopted a more responsive and health-led approach to local vulnerable individuals and their issues than they may have done in the past. There were also examples of good

engagement from probation services. However, the situation in prisons has been far less positive. People have been confined to their cells for long periods, meaning there is little access to education, rehabilitative interventions, reduced contact with family and friends and other support services that can help address multiple disadvantage. The need to isolate prisoners moving between prisons for 14 days on arrival created difficulties in tackling an already overcrowded prison system. Probation and voluntary sector services that provide support to individuals on release are not operating as usual. The impact on people in prison facing prolonged periods of lockdown will only increase as the crisis continues and the criminal justice system looks to slowly and cautiously recover.

What next? A new settlement for multiple disadvantage must acknowledge that what happens in criminal justice services has a profound impact on the experiences and outcomes for people facing multiple disadvantage. Representatives from agencies such as police, probation and courts, as well as prisons and the secure estate and voluntary sector organisations need to be key partners in shaping local response to multiple disadvantage. The expertise of the voluntary sector working in criminal justice in offering holistic, flexible and joined-up services in partnership with others must be built upon in local areas. Women’s community services, which offer holistic support to women to prevent and reduce offending are important to providing appropriate support to women.

Regional Probation Directors and Police and Crime Commissioners in the new landscape created by the future probation model from 2021 have an opportunity to shape strategic and multi-agency structures to respond to multiple disadvantage. There must be engagement with local magistrates and judiciary to highlight effective community alternatives to meet the needs of people facing multiple disadvantage and reduce the use of ineffective short term prison sentences, alongside increased use of liaison and diversion programmes.

10. The role of homelessness and substance misuse services

What happened? During the crisis, we have witnessed the implementation of rapid changes and improved collaboration across many homelessness and substance misuse services to meet the needs of individuals and protect their health and safety. Housing and homelessness services offered all rough sleepers temporary accommodation regardless of priority need or immigration status. Substance misuse services allowed for rapid assessments, relaxed prescribing regimes for some essential medicines and have moved delivery of many interventions online.

What next? Commissioners and service providers should take the opportunity to consider whether the pre-virus status quo is something they wish to return to, or if bold new changes are possible. For homelessness commissioners and services this means a reflection on the 'congregational' and 'large-scale' model around which homelessness services have historically been developed. A more dispersed, more personalised and less 'linear/stepped' model of accommodation and support provision may be more effective and link people more closely to their communities. Substance misuse providers will need to determine how they can incorporate changes made during the crisis, such as those made to assessments, prescribing and digital support, into longer term bespoke packages of support. Addressing the particular vulnerabilities of women experiencing and at risk of homelessness, often as a result of abuse, should be key to developing effective future support.