LIVING THROUGH A PANDEMIC: EXPERIENCES OF LOW-INCOME FAMILIES IN RENFREWSHIRE AND INVERCLYDE

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ABOUT THE POVERTY ALLIANCE

The Poverty Alliance is Scotland’s anti-poverty network. Together with our members, we influence policy and practice, support communities to challenge poverty, provide evidence through research and build public support for the solutions to tackle poverty. Our members include grassroots community groups, academics, large national NGOs, voluntary organisations, statutory organisations, trade unions, and faith groups.

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ABOUT GET HEARD SCOTLAND

Get Heard Scotland (GHS) is a programme coordinated by the Poverty Alliance and funded by the Scottish Government as part of Every Child Every Chance, the Scottish Government’s Tackling Child Poverty Delivery Plan. GHS is designed to help people on low incomes have their voices heard on the policies and decisions that most impact their lives and their communities. We are grateful to the Scottish Government for funding to support this work and publication.

The views in this report are those of the researchers and opinions expressed in this report do not necessarily reflect the views of the Poverty Alliance or the Scottish Government.


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Thank you to all the community and voluntary organisations, and local authority representatives who supported our work and helped to engage participants for the research process across both Renfrewshire and Inverclyde at an exceptionally busy time. We are indebted for your support and hope this research will assist your thinking and practice as we emerge from the pandemic.

On behalf of the research team at The Poverty Alliance, we would finally like to extend immense gratitude to all those who shared their time and experiences in order to better the lives of families living on a low-income in Scotland. We dedicate this report to you.
EXECUTIVE SUMMARY

Between November 2020 and March 2021, we spoke with 32 families with direct experience of poverty as part of Get Heard Scotland (GHS). The key aim of this research was to understand what works, what does not work, and what should be changed in relation to tackling poverty in Scotland.

In the 2020/21 GHS programme, there was a focus particularly on experiences in relation to mental health, employment and employability, digital access and support in the community. We used a qualitative approach to explore the experiences of families in Scotland. The research the local authorities areas Inverclyde and Renfrewshire. Interviewees were recruited through community organisations, the third sector and local council contacts. We spoke with 32 families who had direct, personal experience of living on a low-income. We had six people take part in a 1-2-1 co-analysis session which builds the outline of the report as well as underpinning our recommendations process.

This report highlights intensified challenges for low-income families because of COVID-19. The findings of this research contain important messages to consider if Scotland is going to meet the 2030 target of reducing child poverty to less than 10% of children living in relative poverty and to 5% of children living in absolute or persistent poverty.

**Key Findings:**

The pandemic and the resulting social distancing measures brought new challenges and the intensification of poverty for low-income families. Changes were experienced across all aspects of daily life including employment, education, health care and support structures.

**Mental health**

Mental health emerging a core theme amongst research participants. Parents and caregivers discussed impacts on both them and their children. Household experiences were impacted by multiple factors including size of family and pre-existing health conditions. Key triggers for increased mental ill-health was the loss of support networks, changes in daily routines including loss of childcare and schooling as well as incurring higher rates of daily costs such as gas electricity, food and so on. Stigma around mental health and poverty compounded the pressures household faced.

**Incomes**

Income adequacy was a key theme for families throughout this research. Rising prices combined with new and existing needs making budgeting increasingly difficult for families. Many households required crisis support, much of which was provided through informal networks of support that emerged in communities during this time.

Income precariousness and the experience of being on Universal Credit was highlighted. Participants spoke of the problems related to the design of services, the importance of the £20 increase to UC and the overall complexity of the system.

Participants highlighted the importance of new entitlements, such as the Scottish Child...
Payment, and the importance of widespread promotion of entitlements. A clear message on the importance of advice and support for navigating entitlements was critical for families in this study.

**Employment and employability**

Insecure employment during the pandemic was a key concern highlighted in this study. Alongside this, employability support in the recovery period from the pandemic was seen as critical to help people access sustained secure jobs. Criticisms were made of current schemes often not focusing on sustained hours and jobs with clear routes of progression.

Personalization and targeting of support were seen as vital. Alongside this was a need to directly tackle the structural discrimination in employment that many households including migrant households, Black and minority ethnic households as well as households where there was a disability present reported in this study.

**Community and Place**

The importance of space and community was heightened by the pandemic. Access to good community spaces and infrastructure alongside green space was emphasized throughout this research.

Many buildings and facilities had remained closed or fallen into states of disrepair over the pandemic and there had been a loss of opportunities for communities to come together due to social distancing measures or being put on hold. All of this contributed to loss of opportunity for children and young people to engage in play and group activities.

There was a clear desire to consider the reconfiguration of public space and think creatively about the use of spaces in communities and involving communities in the co design of this process.

**Digital Exclusion**

Digital access and digital skills were discussed frequently across this study. Home schooling, shopping, leisure use all resulted in a mixed experience for families in relation to digital connection. When families were able to engage digital aces was seen a vital for keeping in touch with friend and families and reducing isolation. In the future there is the need for more creative solutions to digital support and access to digital connectivity for local communities.

**Conclusions and Recommendations**

The recommendations below draw upon the co-analysis sessions conducted with research participants and our wider analysis conducted across the interviews.

**Mental Health:**

- **Additional resources and services** will be required to address the impact of the pandemic on mental health. An emphasis on accessible community-based provision, that considers the differential impact of the pandemic on people living on low incomes is needed. Services must also address the different needs of women and men.

- **Addressing stigma** through targeted local activity will help ensure that mental health services are accessible to those who need them.

- **Trauma informed approaches** are required across all services. Such an approach will have a disproportionate impact on low-income households.
Employment

- **Incomes security is critical to family wellbeing.** Secure and well-paid employment is vital to allow families to move out of poverty. More should be done to ensure that the real Living Wage is paid to all workers.

- **Insecure employment should be targeted alongside low wages.** Employers need to do more to ensure staff have clear contracts with guaranteed minimum hours. Local authorities should consider approaches that will help to encourage a move away from precarious employment through local economic development initiatives.

- **Employability programmes must do more to address inequality.** Employability services need to be person centered and recognise the additional needs and barriers that some individuals may face due to age, gender, race and other characteristics.

- **Investment in local labour markets:** there must be greater consideration of investment to create jobs where people and communities need them. Ensuring that individuals and communities affected by poverty are at the heart of economic regeneration efforts, for example through Community Wealth Building, should be central to recovery after the pandemic.

Social Security

- **Income adequacy should be central to social security.** Future developments in social security in Scotland need to address the issue of adequacy. All benefits should be set with a view towards contributing to an adequate minimum income.

- **Awareness and knowledge of entitlements is crucial.** More needs to be done to ensure that individuals know about the support that is available and how to claim it. This requires not only greater investment in public awareness campaigns but also in expert welfare rights advice services. Promotion of awareness through other routes – schools, GPs, recreational facilities,
community organisations – must be used to increase take-up. Improved awareness around Scottish Child Payment should be a priority.

- **The pandemic has shown that crisis support is vital.** Resourcing of dignified cash-based support is critical. As we emerge from the pandemic, there is a continued need to increase investment in the budget and capacity of the crisis support such as the Scottish Welfare Fund.

- **Reform of UK social security.** Get Heard Scotland is focused on what can be done locally and nationally in Scotland to address child poverty. However, problems with UK social security remain central to many of the difficulties experienced by people on low incomes in Scotland. Whether talking about the level of support in Universal Credit and the 5-week waiting period, the impact of the benefit cap or the two-child limit, there are significant changes needed to social security at the UK level.

**Community Connections and Place**

- **Improvements to physical spaces are needed:** The pandemic has highlighted the vital importance of the communities we live in. Having access to green space, and useful public spaces should be seen as part of our efforts to address child poverty. Investment in the community spaces and green space is required, alongside greater involvement of communities in the design and utilisation of those spaces.

- **Investment in community infrastructure:** There is a need to link the repurposing of derelict and rundown buildings to local actions to address child poverty. More support for community ownership of resources is needed, and to link these resources to employment and training opportunities.

- **Support for community organisations:** Grassroots community groups and local anchor organisations played a key role during the pandemic in supporting and helping people in need. Consistent and reliable support for organisations to develop and make connections will underpinning efforts to address child poverty.

**Digital exclusion**

- **Continued investment in digital:** The importance of digital connection will only continue to grow. More support will be required to help families navigate an increasingly digitised world. Support needs to be tailored and recognise the impact of issues such as cost, literacy, employment patterns.

- **Investment in infrastructure:** Further funding and integration locally to end digital exclusion, including creative solutions to providing either free or low-cost high-quality broadband to low-income households.

- **Non digital alternatives:** This research has shown the potential and opportunity to connect people and address poverty through the increased use of digital. It has also reinforced that many services must remain face to face, and that options for those who connect to services in this way must be preserved. Those funding services must continue to invest in in-person formats to ensure that everyone can access the help they need.
1. INTRODUCTION

Get Heard Scotland aims to ensure that efforts to meet Scotland’s child poverty targets are shaped by the participation and voices of families experiencing poverty. This report explores the challenges faced by low-income families during the pandemic from two of the most deprived local authorities in Scotland: Inverclyde and Renfrewshire. The rich insights of the daily realities of low-income family life are shared, with recommendations for local authorities, Scottish Government and the UK Government made with parents living in poverty.

Child poverty in Scotland

There has been a great deal of work undertaken by the Scottish Government, local authorities, health boards, voluntary organisations, and others, to tackle poverty. Despite these efforts, there are 240,000 children living in poverty: 24% of all children in Scotland. Three main drivers of child poverty in Scotland have been identified: income from social security and the benefits system; income from employment; and the cost of living.

In relation to social security, there have been important changes in policy by the UK Government in the past decade which have had significant impacts on entitlements to support. In particular, the welfare reforms enacted in 2012, and through 2015, fundamentally changed the forms of support, and amounts, available to individuals and families. The effects of welfare reform have been well document by a number of leading anti-poverty organisations. The consequences of welfare reform have been significant for families already living on a low income, and particularly in Scotland, where the average family has lost £64 per week – around £3,320 per year – in housing benefit. Secondly, where income from employment is concerned, the dual impact of underemployment (i.e., part-time and zero hours contracts) and stagnating wages have pushed low income individuals and families further into poverty. As for the final point, on how individuals and families pay for their living costs, there is ample evidence to show that in real terms, the rise in inflation from 2016 has reduced the value of working-age benefits – and therefore increased the cost of living.

Against this backdrop, the Scottish Government has committed to reducing child poverty, and passed the Child Poverty (Scotland) Act in 2017 to help focus action. The Act has enshrined in law a duty to reduce relative child poverty to 18% by 2023 and to 10%, or less, by 2030. The Act also requires the Scottish Government to produce child poverty delivery plans, and annual reports measuring progress. Additionally, local authorities and health boards are required to work together annually to report on what they are doing to tackle child poverty. The first child poverty delivery plan, Every child, every chance, had a particular focus on ‘priority families’ at high risk of poverty: lone parents; families which include a disabled adult or child; larger families; minority ethnic families; families with a child under one; and families where the mother is under 25 years of age.
A range of policies have been introduced to tackle child poverty in Scotland; most notably the introduction of the Scottish Child Payment from February 2021 (a £10 weekly payment to eligible families for each child under the age of six to be rolled out to children under the age of 16 by 2022). The Scottish Child Payment was intended to achieve a minimum reduction in child poverty of 3 percentage points once fully rolled out. However, modelling by the Fraser of Allander Institute and the Joseph Rowntree Foundation has shown that the Scottish Child Payment has shown that more will need to be done through the Scottish Child Payment if child poverty targets are to be reached.

**Get Heard Scotland**

Get Heard Scotland is a programme of work coordinated by the Poverty Alliance and funded by the Scottish Government. The programme, which began in 2018, aims to engage with communities at the local level – and those with personal experience of living on a low income, or in poverty – in order amplify their voices, and affect local and national policy making. In the most recent phase of the programme, between August and December 2019, a number of local discussions have taken place in Midlothian, the Highlands, North Ayrshire, Edinburgh and Glasgow. Participants in these discussions were invited to share their experiences on local community action and the gaps in provision and services. Additionally, participants reflected on how best local communities could support people living on low incomes, thereby reducing the instances of relative and absolute poverty. The findings from this phase have been summarised in an annual report: ‘Our Lives, Our Solutions’.

In this new phase of Get Heard Scotland, we have engaged with families in the council areas of Renfrewshire and Inverclyde on their experiences of living in poverty. Understanding the experience of families living in poverty is crucially important, both in terms of giving a voice to marginalised and ‘unheard’ populations and exploring of interventions and services.

**Impacts of Covid-19 on poverty**

COVID-19 has exacerbated existing patterns of income inequality and poverty in Scotland. A wide body of evidence leaves little doubt that the impacts of the pandemic have been
felt most acutely by groups at greater risk of living in poverty. Research has shown that poorer communities have been more vulnerable to experience COVID-19 because of high existing health inequalities and people in precarious, low-paid jobs in the caring, retail and service sectors. Research from the Scottish Government has laid bare how COVID-19 has impacted on families many of whom have experienced changes in their employment status, a reduction in their income, or a loss of protection from the welfare system.

The global pandemic presents a number of challenges for families in Scotland and across the UK more broadly. As outlined above, the upward trajectory of child poverty and income inequality in Scotland is stark, with years of government austerity and changes to social welfare exacerbating already difficult circumstances. Despite the challenges of the 2020/21 pandemic in facilitating research projects with low-income households, several research projects have been undertaken to explore the impacts of COVID-19 on social and economic inequalities. Of relevance to this research is the work of the COVID Realities project, a research partnership between the Universities of York and Birmingham and the Child Poverty Action Group, which has investigated the experiences of parents and carers living on a low income across the UK and Northern Ireland during the pandemic.

The testimonies of parents and carers revealed high levels of financial insecurity, with social security provision proving inadequate:

The income received from social security, frequently insufficient to cover living costs before Covid-19, was inadequate to meet these new and rising costs. Increased food bills, due to feeding children who would normally be at school or resulting from reduced availability of cheaper products in supermarkets, placed additional pressure on household budgets, a pressure which was not offset by support through social security provision.

In Scotland, research conducted by the University of Glasgow explored the impacts of lockdowns on marginalised groups. The final report – Left Out and Locked Down – provides detailed insight into the precarious lives of groups: disabled people or those with a long-term health condition; people involved in criminal justice; refugees and people seeking asylum who may be facing destitution; and survivors of domestic abuse or sexual violence. Experiences of isolation, neglect and worsening life circumstances ran through participants’ experiences. Families were significantly impacted presented by challenges including a lack of respite and support for single parents and a lack of access to outdoor spaces and other resources. Unequal access to digital technology was also a key finding.

Food insecurity has also increased during the pandemic. Prior to the pandemic, in their State of Hunger report, the Trussell Trust reported they had seen a 73% increase in the number of food parcels provided to people in crisis in the UK in the 5-years leading up to 2019. In Scotland, during the pandemic, the number of people accessing food banks increased by 47% with the number of children being fed by food banks increasing by 62%. Research by Children’s Neighbourhoods Scotland has provided further insight into the issues faced by at-risk groups, particularly in Glasgow – where instances of COVID-19 have consistently been very high. Their report, published in September 2020,
details the impacts of the pandemic on areas of Glasgow where poverty remains persistently high. In these areas, where issues of income insecurity, poor access to services, and weak local labour markets converge, the COVID-19 pandemic has worsened already poor conditions.

As a result of workplaces closing, being on furlough and having to give up work due to childcare responsibilities, parents were suffering a loss of or a significant reduction in income. Families could no longer cope with costs that they were previously (only just) able to manage. Increased food and fuel costs as a result of children being home, and the loss of free school meals, coupled with a reduced income were considered by interviewees to be catastrophic for families who were barely managing before the crisis.\(^{23}\)

Despite the challenges, evidence from the research above indicates that local organisations and services have been creative in their responses to the pandemic. Volunteering and community mobilisation has, according to the research, been vital in providing some stability to families at risk of falling further into poverty. Evidence from the wider Get Heard project illustrated community responses in the areas of Renfrewshire and Inverclyde in terms of local infrastructure coming together and emergency responses being coordinated to help adapt to the needs within the community. This built on pre-existing networks and partnership working prior to the pandemic.

The Carnegie UK Trust has produced research detailing some examples of responses to the COVID-19 pandemic. Their research, produced in September 2020, focuses on a number of case studies, where community hubs have responded to the emergency of the pandemic. Renfrewshire is one of the case studies mentioned in the report: “during the COVID-19 pandemic, Renfrewshire Council had seven neighbourhood hubs spread over three locations, from March 2020 until at least August”.\(^{24}\) The report details the impact of the community hubs, which responded to a number of requests from local citizens. Although the pandemic has worsened pre-existing issues of poverty and deprivation for many, there is evidence that volunteers and civil society organisations have led the way in response to COVID-19.\(^{25}\)

The pandemic has exposed inequalities across Scotland, as well as underscoring pre-existing issues of entrenched poverty and deprivation. For the most at-risk groups, as identified by the Scottish Government, COVID-19 has placed significant pressures on the finances of those that have historically been underemployed, on low incomes, or, chronically under-supported by the social security system. In terms of child poverty, the research outlined above makes clear that families will be making hard decisions, where food poverty, fuel poverty and digital inequalities persist and worsen. There are indications, however, that civil society, including the third sector, have provided a crucial support at a critical time.
2. METHODOLOGY

This research was conducted with parents and carers living in Inverclyde and Renfrewshire between November 2020 and March 2021. The pandemic presented several practical challenges, not least the implications of conducting research at a distance – either by telephone or online – with participants, but also about the appetite of people to participate in research during this difficult time.

Despite the challenges, this final stage of Get Heard Scotland engaged with 32 parents and carers. Sixteen families lived in Inverclyde and 16 lived in Renfrewshire. Of the parents/carers who took part in the research, most identified as female (n = 21) and the remaining identified as male (n = 11). The age of parents/carers varied: 2 (aged 18-25), 6 (aged 26-35), 13 (aged 36-45), 5 (aged 46-55), 4 (aged 56-65) and 1 (aged 66-75). Most of the parents/carers we spoke to described themselves as White Scottish or British, but the sample also included parents/carers who identified as Black African (n = 2), White Polish (n = 2), White Irish (n = 1), White Spanish (n = 1) and White American (n = 1). In terms of family size, 11 families had one child, 11 families had two children, and 10 families had three or more children. The majority of parents/carers said they were single (n = 25).

Interviews were conducted by telephone, the use of online videoconferencing services such as Zoom, and through digital diaries. Most participants opted for telephone interviews.

Participants were invited to reflect upon a series of questions, in a structured interview format, with conversations ranging in length from 30 minutes to two hours. Several participants who expressed a desire to further engage were invited to take part in a co-analysis session, which structured the report priorities and recommendations.

Reflections were made after each interview concluded with any key points to remember and notes to follow-up if needed. This enabled a depth of richness that could have otherwise been lost operating distant and digitally.

Upon completion, participants were sent a voucher as a thank you for their participation. The research team also sent a follow-up e-mail to check in, and to highlight further opportunities to engage with Poverty Alliance as well as contact details for future inquiries. Methods of ‘leaving the field’ are rarely discussed within the context of a research report. However, many participants shared feelings of apathy towards the capacity of research like this to transform their day-to-day. Considering this, a channel of communication between our organisation and those who shared their experiences is vital, not only ethically but also in bringing policy closer to those who feel its effects most acutely and in demystifying notions of consultation and research.

Recruitment

To facilitate a clear, consistent message across platforms that shared Get Heard Scotland’s recruitment request, we devised a social media pack containing written content, logos, graphics, QR codes and suggested hashtags. This helped ensure clarity of the project, and a greater uptake of circulating our research because of the ease of re-sharing pre-existing content. This cross-sector strategy meant we
reached diverse participants and fostered relationships with key partners in combatting poverty. We also made printed leaflets, bookmarks, and posters available to address the prevalent digital and data exclusion many people living with poverty face.

The Poverty Alliance reached out to various third sector organisations, council representatives and cultural hubs to assist in disseminating the request for participants. Outreach through these channels helped to provide a level of safeguarding as we were able to establish a clear point of engagement via which a participant became involved in the research. The duration of the research highlighted the increased vulnerabilities of people living with poverty during the pandemic, where mental health, food insecurity and coping mechanisms were pushed to the extreme. For example, foodbanks in both locales were a key point of contact in recruiting for this project.

Supporting involvement

The very nature of Get Heard Scotland is to provide a channel between those living in poverty and those in government. As such, the voices of those with experience have directed the research content, analysis, and recommendations of this report.

The remit of Get Heard Scotland in prioritising lived experience lent the process to engage in the more therapeutic capacities of research itself. Conversational, though structured, interviews involved participants talking through their individual experiences. Participants shared how they felt a weight lifted having had an opportunity to be listened to and their experiences valued. Conducting research during a pandemic, we had to be sensitive to the disclosures, traumas, challenges and intensified emotions of living in poverty. The research process thus sought to develop rapport through a variety of ways: text, email and telephone conversations prior to the interview, a seven-part video with the Poverty Alliance’s community researcher to embody who was asking questions, and a chat pack. The chat pack was a way of providing support, comfort and access to our participants. It contained a personalised support document listing national and local freephone lines and contact details of charities and funds, as well as teabags, pens and a customised notebook. In addition to the remunerative voucher issued, these additional rapport-building mechanisms sought to demystify the research project, process and researcher.

Critically, the nature of poverty and constraints of a pandemic meant we were only able to engage those who had some form of, albeit for many only sporadic, contact with a telephone or other digital device. The representation thus is only partial, but in some voices not being heard makes a point in itself.

Thematic analysis and co-analysis

The data was thematically analysed using a qualitative software analysis programme Dedoose. The data underwent an initial round of coding and followed by subsequent readings to draw out key themes, which then laid the framework for the co-analysis sessions with several participants. Thematic analysis was the most appropriate approach, in line with qualitative principles of depth and richness and in bringing to the fore the voices of those with lived experiences. Co-analysis sessions consisted of six 1-2-1 conversations to review emerging themes. Participants were asked to reflect upon these themes, share their recommendations including the most pressing change they would like to see. These conversations were subsequently thematically coded and embedded into the wider qualitative dataset.
3. RESEARCH FINDINGS

Living through the pandemic in Scotland

Emergency public health measures in the form of lockdown restrictions and social distancing radically altered the lives of families living in poverty in Scotland. Restrictions constrained everyday activities such as shopping for groceries and connecting with family, friends and the wider community. Children and young people moved to home learning and families had to meet the rising costs of food and fuel during this time. Alongside this, many public and voluntary organisations, delivering support to families, were forced to scale back delivery to emergency support or develop new delivery models. All of this brought new pressures and challenges to family life and exacerbated the pressures that many families had been experiencing pre-pandemic particularly around mental health, financial hardship and digital exclusion.

Mental health

Across the research interviews, the negative impacts of the pandemic on mental health was a key theme. Parents described feeling isolated, anxious and struggling to feel motivated. The effects on children’s wellbeing was also a recurring concern across the interviews.

The intensification of financial inequalities as a result of the COVID-19 pandemic has been highlighted in longitudinal research led by the Mental Health Foundation.26 For parents interviewed as part of Get Heard Scotland, being at home resulted in increased costs: energy and food costs were frequently mentioned. The period of lockdown removed parents from their normal day to day approach to budgeting and created new pressures which contributed to feelings of powerlessness.

“Making sure I have everything in it was really worrying at first as I couldn’t get baby milk but managed to finally after my carer getting it before it ran out…… It affects my mental health being inside all the time it’s just been awful and still is!”

Single mother with three children, aged 26-35, Renfrewshire

A key challenge for families was also the loss of childcare and family support by relatives. Lone parents in particular described feeling isolated. Parents also worried about the impacts of a lack of socialisation on their children.

“It has been quite hard. I usually see my mum every single day and my kids usually see them, see every single day and see the fact that you can’t just go up and have a cuppa tea or a coffee, it’s quite hard. And then you’re trying tae stay away from people so your kids know it’s not a hundred percent safe tae go an’ see people”.

Partnered mother with three children, aged 26-35, Inverclyde

For families with prior experiences of trauma, the pandemic, and the measures related to it, has increased the likelihood of experiencing significant difficulties.27 In our research, concerns were expressed on the anticipated increases in risks of suicide
within communities. A particular concern was the impact of the pandemic on children and young people’s mental health due to the disruption of schooling and other activities. Many households spoke of changes they witnessed in children and young people.

“But my oldest daughter, see when we were allowed tae meet people outside and inside, she was really taken back by it and, I don’t know, she’s changed a lot. I feel like she’s... I don’t know. It’s impacted her a lot. She doesn’t want tae go near my mum or my dad helps us a lot with childcare so my husband can pick me up an’ stuff from work, he’ll sit with the kids. An’ she doesn’t go near him. The only people she’ll come near is me an’ my husband. An’ then my two-year-old, aye well, my three-year-old now, he was really outgoing. Now it’s hard tae get him to speak to other people”.

Partnered mother with three children, aged 26-35, Inverclyde

Gendered mental health

Gender inequality has been exacerbated during the pandemic, not only through the increase double-shift women face of household work and employment, rising domestic abuse, and women being disproportionately affected by precarious work, women also tend to be the primary caregiver to children and older parents.

The gendered nature of mental ill-health was a prominent theme in participants narratives. In general, men appeared to feel a greater sense of shame and depression and talked of not sharing mental health problems until a point of crisis. Women reported more feelings around anxiety and low self-esteem.

Of interest was the reporting by both men and women that the other was able to access additional mental health support more easily. This was highlighted more by men interviewed, who suggested that women found accessing support easier and can access a greater number of services. A single father said:

“You hear aboot it all the time, women, mental health, help here, help there, help there. There’s nothing on the telly aboot the guys”.

Single father with two children, aged 26-35, Inverclyde
Several women interviewed said that historic or ongoing domestic abuse contributed significantly to their mental ill-health. Despite this strong association, research shows that domestic abuse often goes undetected by mental health services and domestic abuse services are not always equipped to support mental health problems. Poverty is associated with domestic abuse as it can increase women’s vulnerability to domestic violence and be a consequence of fleeing from a violent relationship. The consequences of domestic abuse on precarious financial dependence for women and their children was apparent in several interviews.

“But at the end of the day, the poverty that happened to me is circumstantial because of the financial implications that he’s allowed to do, and the way that the government treat women and children”.

Single mother with three children, aged 46-55, Renfrewshire

Shame and stigma around vocalizing mental health issues was a challenge for many. There were numerous examples of those feelings of shame and stigma, and concern of being discriminated, preventing parents from accessing services, including mental health services, and accessing social security. Participants called for a response that focuses on help first.

“I think people feel ashamed when they’ve got mental health problems because there’s been a stigma attached tae it for so many years. That it’s hard to make that first move and then even, because you cannae access GPs properly, everything’s over the phone as well, so you’re no’ getting... Like they can’t see how bad it’s affecting ( ) what it is over the phone”.

Single mother with three children, aged 36-45, Inverclyde

### Accessing mental health support during the pandemic

Across this study, the interviews conducted revealed three key issues around accessing mental health support in Inverclyde and Renfrewshire: (i) a lack of awareness of how and where to access support as well as a lack of availability; (ii) issues with the process of accessing mental health services including referrals and lengthy waiting times; and (iii) a lack of personalised support and continuity of care. A lack of awareness of where to access adult mental health support was a prevalent theme; this highlighted a stark divide between people ‘in the know’ and possibly already in contact with support services, and those who were not, or perhaps reluctant, to reach out until crisis. The importance of early intervention was discussed by several households in the study where there was previously experience of mental ill health.

Across both local authorities, many voluntary and statutory organisations had tried to adapt their methods of engagement with communities as part of crisis/emergency responses. Participants discussed schemes such as emergency food aid provision and other forms of provision of support for families such as online activities for families as a way of services offering support and connection. Although this was seen as valuable this was not a fully comprehensive support to helping families tackle the daily pressures faced by families during the pandemic.

Despite adapted lockdown measures and an often-reduced level of provision, there were key challenges presented in the services pivoting in how they offer support. Several key factors determined families’ experience of uptake and ongoing experience of engagement with mental health support and services more generally that provided support for families.
1. The experience of home: The size of accommodation was seen as critical to being able to engage in support but also underpinned households experience of lockdown. Larger families and families with inadequate housing for their needs had experienced higher rates of stress and anxiety. This was a particular concern for those who were lacking sufficient outdoor space. Lockdown had contributed to families feeling restricted and experiencing their home space in a negative way over a prolonged period. Poor quality or overcrowded housing also impacted on the day-to-day wellbeing families experienced. The suitability of home space also contributed to families having the time and freedom to talk confidentially about sensitive issues. Many families described how it was difficult to have a private conversation during the period of lockdown where there was a lack of available space within the household, and this was a key barrier to accessing support.

2. Time pressures, employment, childcare, and homeschooling: Lockdown posed some context specific challenges when considering engaging with support services. Households across this study faced a unique number of challenges dependent on their individual circumstances. As a result of early years and school closures, parents and caregivers spent significant proportions of their time supporting children and young people as well as trying to alleviate stress across the household.

“...and the first lockdown, I remember writing... writing the phone number out, and going, right, I’m gonna ring them because I am feeling overwhelmed, and I just wanted somebody to talk to, just go “god I’m feeling so overwhelmed, I’m feeling so much pressure at work to do all this overtime,” and begging them for a few days off, and they’re going “we can’t give you any leave,” and I’m like, ‘what... I have it. I have it to take it, and I need it ‘cause I feel like I’m going crazy, so give me a day off, just give me a day off so I can breathe.’ That’s... you know? And somebody to talk to, that’s... sometimes that’s all you need, you know?”

Single mother with four children, aged 46-55, Inverclyde

Loss of formalised support for those whose children had additional needs resulted in many knock-on effects in terms of stress and anxiety for parents and caregivers as well as for the children themselves.

“That completely went away and he was home all the time. His respite went away. So we had none of that. Nothing for him to fall back on. We were supposed to start ADHD meds for him, just as lockdown hit, we couldn’t start them.... CAMHS completely shut their clinics, so we lost all the support from CAMHS. All his support just boomf, went away and we have been left from social work, from his respite, literally everything went. We’ve had no support from any of them”

Partnered mother with 2 children, aged 36-45, Inverclyde

For those in employment, there were a significant number of changes households were navigating from managing individual risks in workplaces, the risk of contracting or transmission of the virus alongside the impact of furlough and uncertainty about the labour market and employment long term.
3. Financial circumstances: Households’ financial circumstances impacted on being able to engage with support services. Families discussed challenges such as having access to electricity to charge devices, such as IT equipment or mobile phones, or being in employment where they worked irregular hours making accessing support difficult. Many parents clearly described a lack of adult mental health services available. In Inverclyde, several parents we spoke to had turned to private counselling; at £45 per hour this increased parents’ worries and anxieties.

“Unfortunately, it’s, you know, £45 an hour, so what my daughter’s willing to afford is two sessions a month. And that’s pretty good, but there are times in between when I feel like, oh, and... and even, you know, last week, I probably should’ve called the Samaritans”.

Single mother with three children, aged 46-55, Inverclyde

Findings from this research suggest that the Scottish Government’s vision to transform primary care provision so that “people ask once, get help fast” is not happening on the ground. Parents wanted someone to speak to rather than a range of sources and signposting. There was a consensus across the interviews that there should be more awareness raising and opportunity for self-referral to mental health services to combat long waiting times via GP referrals to NHS services. A lack of continuity of care via one professional was also highlighted by households in this study. Parents reported not having a direct contact with a mental health professional when seeking help, resulting in a process of re-traumatization and being ‘put off’ reaching out for help because of having to repeat the same story. Models of support such as online and telephone support presented other barriers.

“See I haven’t really seen anything like places... I know we’re in a lockdown an’ that but like even places to go to talk to someone about it, ‘cause I really hate like talking over a phone about my mental health or, ‘cause I don’t know how tae put it intae words so, like whereas face-to-face it’s easier tae talk an’ it’s all aboot facial expressions wi’ me basically”. (Partnered mother with one child, aged 26-35, Inverclyde)

In 2019, the Scottish Government detailed how a model of better mental health provision in Scotland was being rolled out focused on rights-based, person-centred care. However, many parents we spoke to felt that a medical model of health was pushed onto them in order to address their mental ill-health, as opposed to more therapeutic, personalised approach. It is critical as we move through the pandemic, we consider the relationship of socio-economic position and mental healthcare. Accessing mental health support has been a challenging issue across Scotland during the crisis. Average waiting times to speak to someone at NHS 24 mental health hub helpline rose to nearly 15 minutes by January 2021 and figures indicated a total of 25,000 calls have been abandoned by the person seeking help without being answered since 1st March 2020, making up just over a quarter of all calls to the service. The importance of supporting mental health was clearly articulated by parents and there was a clear emphasis on the need for this to be extensive and holistic in the recovery period following the pandemic.
The pandemic and family incomes – exploring experiences of social security

This section of the report details families’ experiences of both the UK and Scottish social security systems during the pandemic. Interactions with social security remained a critical experience for families living on a low income throughout the pandemic.

Income inadequacy

The inadequacy of social security payments was raised across the interviews. Parents frequently mentioned that levels of support resulted in precarious household circumstances with families not able to meet regular expenses such as food and clothing.

“You know, you feel like you’re living on edge really, like it’s... You can’t be com—you’re not comfortable. You know, I don’t know if it’s designed to be that way so that you can keep looking for a job, I don’t know. But, from my experience, it was—it’s so tight, you know?”

Partnered father with two children, aged 26-35, Renfrewshire

The pandemic upended many households’ budgeting strategies and coping mechanisms. Although average household spending in the UK decreased over the pandemic, more than half of adults in families from the lowest income quintile have borrowed more to cover every day costs since the pandemic began.36 At the beginning of the pandemic, evidence collected by the Institute of Fiscal Studies showed large spikes in spending on storable products in the four weeks preceding lockdown.37 Panic buying resulted in challenges in terms of disruption to supply in stores and brought pressures and consequences for those who had insufficient budgets and were buying food products in smaller shops as budgets allowed.

“On the beginning it was very hard but that was more problem because was not enough stock in the shops and the people being actually mental, be honest. They not doing shopping what they need, they did the shopping for the future which for us, like we can’t afford to buy it something for longer period. We can only be focused on one week. And that’s it”.

Partnered mother with five children, aged 36-45, Renfrewshire

Some households where there were health conditions or disabilities present faced challenges in accessing essential products during the pandemic due to specialist food needs as well as loss of services such as free school meals.

“When lockdown hit, we saw our food budget skyrocket and practically double. So we’ve been, you know, that was—it went up from two hundred and fifty a month to nearly five hundred a month, which is a massive jump because our children also have dietary requirements. So trying to get hold of non-dairy food and non-egg food was really hard to do that. So we were having to order food from several different places. You know, so you’ve then got delivery costs on top because we’ve had to order from specialist sites rather than being able to go down to the supermarket to get it”.

Partnered mother with two children, aged 36-45, Inverclyde
The pandemic brought about increased costs for household issues such as IT connectivity and other key costs such as food and electricity. Managing these resulted in families highlighting issues such as debt, drawing upon support networks where possible such as family and friends as well as accessing emergency support.

**Experiences of social security**

Prior to the pandemic, participants spoke of significant challenges when interacting with the social security system. Wider research\(^{38}\) discusses the negative experiences of Universal Credit (UC), particularly around welfare conditionality, for claimants with mental health conditions. In addition to conditionality, such as being required to look for work for 35-hours a week, the UC system also has designed an application process which results in claimants waiting five weeks before their first payment. Advance loans are available, but these must be paid back from future benefit payments or other income. Evidence published by the Trussell Trust, prior to the pandemic, highlighted the impacts of UC in relation to issues of destitution (inability to afford food or heating, going hungry) housing insecurity (rent arrears, risk of eviction and homelessness) and indebtedness (multiple debts, high-risk loans, suspended utility facilities).\(^ {39}\)

For families in Renfrewshire and Inverclyde, UC specifically received criticism for its limited support, especially those affected by the two-child limit and benefit cap. Households across this study reported accumulation of debt, skipping of meals, and falling behind on bills. The age-adjusted payments were also an issue for some young parents:

> “I think that should change, personally, because it’s hard to get everything... I’m obviously under twenty-five, so it’s harder for me to live on the money that I get, because it’s less than what a twenty-five-year-old would get. So trying tae still feed yourself, pay your bills, plus buying everything that you need for a child, is really hard. If I didn’t have my family, I probably wouldn’t o’ had everything that I had tae have for my child coming”.

*Single mother with one child, aged 18-25, Renfrewshire*
Financial pressures have increased during the pandemic with evidence from the Joseph Rowntree Foundation citing after a period of low inflation, the cost of living rose by 2.5% for a family with children, not including rent and childcare. Most families reported that the amount received from Universal Credit is insufficient level to meet their household needs. Families also raised concerns that some households missed out on the receiving this support due to being on legacy benefits. Indeed, even with the UC uplift, families’ incomes via Universal Credit fall well below the Minimum Income Standard. Whilst the uplift was described as a “lifesaver”, many families said it was immediately dissolved by increased bills.

“It’s been a lifesafer to just have an extra £20 come in. And it’s sad to think that £20 changes... changes your life, but it really does. It’s a wee bit more money that you didn’t have to count for before, but then you’re counting for it again, and when you get used to it. And then it goes away, it’s like, ‘what the hell do I do with that hole, £20?’ And you have to go back and try and rewrite your budgets for the month”.

Single mother with one child, aged 18-25, Renfrewshire

Households across this study reported that navigating the UC system was a complex, emotional process. A core part of the UC system is the online journal: a digital diary for sharing information relating to UC between a claimant and their work coach. The requirements to regularly login to and update their journal and the need to have digital literacy and skills to be able to navigate the system were frequently mentioned. Journal requirements for single parents especially was difficult to manage with childcare. Participants advocated for more support for families when accessing UC.

The system design of social security in particular UC had a role to play in terms of the experience of ‘deservingness’ and how families perceived stigma in this study. All interactions with the social security system played a pivotal role in terms of how claimants made sense of and understood their relationship and rights in relation to the system. Participants’ experiences of claiming social security benefits were laden with feelings of insecurity and anxiety. Their narratives embodied Fletcher and Wright’s depiction of benefit claimants being criminalized via the post-2012 welfare reforms via strategies of surveillance, sanctions, and deterrence. Across the interviews, families discussed the design of the system of UC, had direct consequences in terms of the messaging it sent out and in turn the messages it created within claimants contributing to the feelings and experience of stigma. The stress and worry this created left claimants questioning their deservingness of support.

“Why’s there so much waiting time to get accepted? Why have I got tae wait six weeks to get a payment?”

Single father with two children, aged 26-35, Inverclyde

Wider experiences of social security were also discussed by participants, including Personal Independence Payment, Carers Allowance and other benefits. They discussed assessment processes and adequacy of income levels to meet their needs. Households reported difficulties in applying, contesting, and receiving the correct amount, as well lengthy waits.

“Well, I have been waiting for about three months now on my decision, on PIP. So I’ve not had any updates, I’ve not had anything like, ‘well, we’re looking into it...’? I dae understand there’s a pandemic going on, as does...
everybody just now, but at the same time, they’re at work, they can still review”.

Single father with two children, aged 26-35, Inverclyde

Some families compared their experiences of claiming UC to more positive interactions with Social Security Scotland. A distinction was made between the delivery and messages under Social Security Scotland compared to UK benefits delivered by the Department for Work and Pensions:

“It would look the same as Social Security Scotland are doing at the moment, with dignity and respect being two o’ the main things. Because at the moment, you don’t get anything at all through DWP. All you get is basically abuse. You go for either assessments and if you answer one question wrong, they’ll [dook] your PIP entirely. It’s – to me it’s a disgrace. And when you’ve got companies like ATOS and Centra or whatever they’re called – those are just nightmares. ‘Cause they’re actually getting paid to put people off PIP and DLA, and they’re getting extra money for everybody they can take off that list”.

Partnered father with one child, aged 56-65, Renfrewshire

The introduction of the Scottish Child Payment has been a key policy development in terms of both tackling child poverty and social security reform in Scotland. From February 2021, eligible families have received £10 a week for each child under six with the Scottish Government committing to roll-out the payment to families with children under 16 years old by the end of 2022. In interviews with parents, a few who had started receiving this payment spoke of the benefits of the extra income on their financial circumstances and welcomed its extension to children under 16.

“Obviously shopping-wise, as soon as I was receiving that money, then I was just going out and buying more shopping so that there was more stuff in for them”.

Single mother with three children, aged 36-45, Inverclyde

Critically, across both systems, participants highlighted the need for consistent, accessible advice and support to help people access their entitlements.

Benefits and money advice and support

Households in this study discussed the value of quality welfare rights advice from both statutory and voluntary organisations. Clear messages included the need for wider promotional approaches to support uptake of entitlements and suggestions included billboards, wider TV advertising as well as through social media and postal methods.

Significant confusion around what families are entitled to is often driven by a lack of personalised, consistent support. Families we spoke to in Inverclyde and Renfrewshire highlighted the role of third sector and local authority advice services in ensuring families are aware of their entitlements. A parent we spoke to described the complexity of the UC system and the vital support she received via Barnardo’s:

“It’s hard to apply for them, and know you’re getting the right amount o’ money. That’s why I’m glad I’ve got Barnardo’s working with me, ‘cause they did it all for me. Obviously, it’s still confusing, like trying to make sure you’re getting...
the right amount o’ money, and they’re not taking any money off you, stuff like that. It’s mostly the forms. It’s just... there’s so many questions in it that sometimes you don’t know the answer to. And, you’re just... you just get confused with it, as in like what do I put down here, and what do I put down there. It’s not as clear as it should be, I think”.

Single mother with child, aged 18-25, Renfrewshire

There were many examples of positive experiences of welfare advice. Families cited experiences of getting payments reinstated and in some cases backdated, all of which had impacted on their household income levels and security of income.

**Crisis Support**

In Renfrewshire and Inverclyde, the role of community-based third sector organisations in supporting people on low incomes was a key finding in research undertaken with the sector as part of Get Heard Scotland. Alongside this, parents discussed a sense of deepening connections across their community such as neighbours looking out for each other, and informal relationships being created across communities. Some households discussed how this had been one of the most important positive impacts that had emerged across communities during the pandemic. School and nurseries also provided much-needed support during the pandemic.

Many families spoke of emergency community responses such as the provision of food during lockdowns. Several had been recipients of support from organisations for items such as activity packs for children.

“The activities pack for kids. Then it was actually massive this pack, be honest, I never had so many art stuff or the hula hoops at home”.

Partnered mother with five children, aged 36-45, Renfrewshire

The shift to being provided a cash payment for children eligible for free school meals, which took place in many local authorities in Scotland during the pandemic, was greatly valued by parents. In terms of financial support, only a small number of households in this study had accessed the support of the Scottish Welfare Fund although most households were aware of this support.
Employment and employability

During the period this research was conducted, November 2020 to March 2021, participants were concerned about short and long-term insecurity of employment. Families expressed uncertainty about long-term impacts on jobs, the viability of different forms of employment and the impact of wider shifts such as the move to home working. There was concern that the move to home working would result in job losses for staff employed in certain sectors including maintenance, cleaning and catering.

Employability support was seen as critical both prior to and in recovery from the pandemic. For parents, employment support should be targeted to individual interests and skills and consider the wider circumstances of the households, recognising caring responsibilities for example. Specific concerns were raised that employability support provision should directly work with employers. Families cited previous experiences of employability services having a focus on obtaining employment with very little follow up on the quality and experiences within employment. Participants also noted that zero-hour positions provide no income stability for families.

“So like in the windows in the shops and things like that...it’s all like [jobs for] eight hours. That’s what I’ve been noticing, which is quite hard, cause then you would need another job as well to kinda top that up and you get taxed more... I think”.

Single mother with one child, aged 26-35, Inverclyde

Families emphasised personalisation of employability support and that a thriving local labour market was required. Investment was seen as critical to bring about local recovery and create sustainable work within communities and help families move out of poverty.

Families also highlighted the need to tackle wider structural inequalities and discrimination many households face. Families identified included families from a Black or minority ethnic background and migrant families as well as families with a disability within the household. Households expressed frustration about labour market experiences and the need for wider social change.

At a local authority and national level, parents said that more work needs to be done around tackling employer attitudes and have more family friendly workplaces. Participants wanted support grants for employers to access to create and promote accessible workplaces. The racialised experience of employment from participants highlighted the systematic discrimination Black and ethnic minorities face. Racial discrimination as well of structural discrimination in the lack of recognition of qualifications obtained overseas was also highlighted in this study as barrier to employment and progression in employment. A clear need emerged around a need to be examining the parity of qualifications and the recognition of existing qualifications.

“because many people from the black and ethnic minority are, they have qualifications, they are very skilled. Number one the... the qualifications are not always recognised here in Scotland. Number two, their experience is not recognised”.

Single mother with one child, aged 46-55, Renfrewshire
For households where families were already in employment, job quality and job security and levels of pay were paramount to the daily lives of families. Only one household in this study reported being able to undertake home working, some households continuing working throughout. One household discussed furlough.

“My husband got furloughed when it all happened but he’s been back when they were allowed tae go back. So he’s been back for a coupla months which we’re quite happy ‘cause we weren’t sure what would have happened there. But my work has been opened the whole time so I’ve been at work so it’s not really impacted me as such. I’ve still been out and doing my work”.

Partnered mother with three children, aged 26-35, Inverclyde

Household experiences were dependent on the area of employment; however, all of those who had worked during the pandemic expressed concerns at the level of personal risk they faced and the potential risks to their household. Fears of job loss on household incomes was a critical concern.

“If I just text and says, ‘So does that mean that we’re not at work’ an’ they says, ‘Naw, we’re still tae go in.’ It was quite hard. ......I was terrified, I was the only one leaving the house. I was scared in case I brought it back in ‘cause it’d always be in your conscience, ‘Oh my God, I’ve took this in. Who’s gonnae get ill or who’s gonnae pass away?’ It was scary”.

Partnered mother with three children, aged 26-35, Inverclyde

The importance of employment was clear across this study, in particular the opportunities for gaining and progressing within workplaces and the pay levels of different jobs.

Another core area of employability in terms of accessing and obtaining qualifications had also been disrupted by the pandemic. This resulted in challenges for progression and moving into new areas of work. Other barriers highlighted including the inability for young people or those returning to employment that many entry-level jobs such as working in hospitality and retail were more restricted in terms of availability of opportunities because of ongoing closures and lockdown restrictions and social distancing.

Related to employment was also the risks and exposure of contracting the virus posed by working in different sectors within the pandemic. One family reported direct experience of contracting of COVID-19 and of this leading to Long Covid within their household. Further research is required to understand the impacts that contracting COVID-19 and experiencing long covid has had on low-income families.

Income precariousness was also discussed in relation to in-work poverty. Those in low paid jobs are more likely to be women, to be young, to be black or from a minority ethnic group, to be under-employed and/or to have lower qualifications. Unclear work patterns in terms of low contracted or zero-hour contracts were discussed as problematic in terms of local labour market, with fluctuations in work patterns were likely to lead to unexpected crisis in income.
Community connections and the importance of place

Evidence across this study consistently highlighted the importance of public and community space as well as restricted access to these spaces as a result of lockdown measures. Amongst families this had reinforced the importance of such spaces for daily life and community cohesion and connection for families.

“Well I’ve got a community garden, it’s just across the street fae me. And I normally walk round there quite often. And it’s just lovely, it’s like open, open flower beds, you can plant your ain wee flowers. And then beside that you’ve got allotments. You can help yourself tae vegetables and stuff. Just a wee bit o’ community, like talking to each other and asking, or ‘oh, look at that flower, look at that flower.’ Just... just a plant, I like that sort o’ stuff”.

Single father with two children, aged 26-35, Inverclyde

Restrictions resulted in families spending more time in the home space and access to public spaces, such as parks, were critical for families to get exercise and for children to play. This was particularly important for families living in more crowded housing or lacking access to outdoor spaces.

“More play parks for kids. Public play parks. I love walking round a park, and now... nowadays you can walk round a park and there’s nothing there”.

Single father with two children, aged 26-35, Inverclyde

Public spaces in the community, such as community centres, enables connection and socialization of families with relatives, friends and the wider community. The research highlighted the potential for derelict and run-down spaces within communities to be repurposed and utilized differently following the pandemic.

Reopening of community spaces was seen as central to supporting communities. Parents spoke of the impacts of the pandemic on local communities; for example, including visible signs of businesses being locked up and permanently closing to spaces getting more visible signs of disrepair. Families were also concerned about closures of core public services such as libraries, community centres and leisure centres, which were closed or operating restricted services. Families also missed community events in public spaces because of the restrictions, for example community days. The loss of play spaces and opportunities for children and young people was seen as particularly difficult aspect of the pandemic. Play is a recognised as a crucial part of children’s wellbeing, with the outdoors being a coveted point of respite during the lockdown particularly.

Discussion around spaces for families in local communities was seen as vital to bring about not only usage of public spaces but also for families to feel more positive about their communities. Opportunities for creative thinking around public space were seen as central to creating and maintaining positive legacy from the pandemic and building stronger communities. Many families discussed the opportunity for public spaces to be considered in a different way with mechanisms that would make communities safer, for example, such as traffic calming measures. These discussions also emphasized the need for good transport infrastructure to access public spaces.
Several families highlighted the increased numbers of people cycling in their local areas and the impacts of this.

“There’s so many different places that have got like art groups, that would put their ideas in and dae like a memorial sort o’ thing, something like that. Aye, like... there is people begging tae dae that sort o’ stuff. And they’re no’ getting the opportunity.”

Single father, aged 26-35, Inverclyde

Digital exclusion

The data and digital exclusion low-income households face in Scotland has been intensified over the pandemic. Lockdown and resulting social distancing measures resulted in many services moving to digital provision at a rapid pace, presenting challenges for families.

Digital delivery of support

Digital delivery models, particularly those utilised earlier in the pandemic, relied upon families having access to a device, access to the internet as well as skills to use digital devices. For many families living in poverty, lack of suitable access meant being excluded from various forms of support. The scale of the support needed to tackle digital exclusion during the pandemic has been difficult to estimate in terms of the scale of need. The majority of the families we spoke to as part of Get Heard Scotland did not have access to suitable devices or struggled to afford internet costs.

“Yes, but there’s 45 percent of disabled people, in a poll run by Glasgow Disability Alliance, 45 percent of disabled people do not have access to the internet. And within Renfrewshire and Inverclyde, I would say that number’s higher”.

Partnered father with one child, aged 56-65, Renfrewshire

“When they were talking about internet or digital exclusion, I didn’t see myself within that group. It’s only when I had to give back my laptop to my work one month and then the libraries were closed. This is when I realised, ‘By the way, girl, apart from your phone, you don’t have anything’.”

Single mother with one child, aged 46-55, Renfrewshire

Households developed strategies to cope and adjust with issues around digital exclusion. Across this study families outlined strategies such as data sharing and restricting usage being utilised during periods of lockdown and restrictions.

“I mean a woman lives opposite me and sort of befriended me and she’s very nice. And she hasn’t got any wi-fi or a smartphone at all. So she has on occasion said, “Can I come over and use your laptop?” and I said, “As long as it switches on that’s fine.” And she’s having to..., well the Jobcentre’s shut at the moment but she’s having to go and sign on, you know, and I was thinking how on earth does she cope with nothing at all?. You know, and she was saying, “Well, you know, I got sanctioned because I missed this appointment and, you know, and then” I was thinking, ‘Oh, no, it all makes me so distressed hearing about this’. So I just think well at least I’ve got a wonky old laptop”.

Single mother with two children, aged 46-55, Inverclyde
“I’ve known people personally that cannae get ontae the internet and stuff, because they cannae afford it and stuff, and it’s affecting them worse than it’s affecting me. So I’m having to – I can data-share, which means I can send people data. I’ve been daeing that a lot to help ma family and stuff”.

Single father with two children, aged 26-35, Inverclyde

Learning digital skills was challenging during lockdown. Families discussed that for those developing skills in using computers and the internet more generally, face to face support was more effective than learning remotely. Community hubs and spaces where people could obtain help in an informal and relaxed manner were integral to helping people obtain confidence using and developing IT skills. Providing access to devices and infrastructure more generally was discussed. Some parents suggested creating community suppliers of low-cost reconditioned tablets and equipment in communities as a way of making digital access more equitable. One parent discussed including digital access within local council provision, for example, with costs built in to rent to cover digital access.

Where families were able to engage, the benefits of digital and data access for social connection and wellbeing were useful. Families spoke of the value of being able to engage in online activities and groups particularly for reducing social isolation during the pandemic. For children and young people this allowed them to stay connected to families and friends and this was seen as an important buffering factor to pressures on mental health. For families without digital access, concerns were raised about the impacts on mental health and isolation.

“The libraries cannae obviously open because o’ this, but having somewhere where people can go and set up a wee camera and talk to their family and stuff, that would be good”.

Single father with two children, aged 26-35, Inverclyde

More generally households reported needing increased digital access to engage with systems of social security such as online journals and the increasing importance and recognition of digital skills following the pandemic.
Home schooling

Families had mixed experiences of home schooling. Digital needs were dependent on age and number of children within the household, format and volume of home-schooling and support from schools and other services in terms of both equipment and data access. A key finding from our research was that some families were unable to access adequate digital provision, supporting findings from a report published earlier this year by the Child Poverty Action Group on the Costs of Learning in Lockdown\textsuperscript{47}. Early analysis by Inspiring Scotland of the £9 million fund to purchase 25,000 laptops or tablets for school children experiencing inequality raised concerns that the scheme would not reach all children who needed it.\textsuperscript{48}

Educating children online at home posed challenges. Families reported differing levels of child engagement. Online delivery was received differently by children and young people and for some online learning had been detrimental to their educational experience.

“They were sort of like trying to send out wee education packs and I was in a lot of talks, I did keep in touch with his teacher through a variety of different means. So the phone calls and she’d pop up and drop off like little education packs with things that he’d be interested in to try and keep him going and she’d ring up and see how we were doing. And his teacher’s lovely, she’s really nice. So she did try and sort of like keep in touch and try and... try and keep us in the loop as to what was going on as much as she knew. But it was all uncertain for them as well. And they kept putting little challenges on like the... online education forum that they had. But, again, getting him to access that was just a no go. He’d do it every now and then. But, yeah, because he was out of routine and all his support and everything had gone away, we saw his progression go backwards”.

Partnered mother with two children, aged 36-45, Inverclyde

“We’ve got at home two laptops but that what I say all three children have to use it, the laptops as well to doing homework which is very tricky...They still have to doing work but sometimes not enough devices actually to support everyone but we have to work out how to do that”.

Partnered mother with five children, aged 36-45, Renfrewshire
CONCLUSIONS AND RECOMMENDATIONS

In the Get Heard Scotland research, families reported that their experiences of poverty had intensified during the pandemic. It is clear the pandemic has altered the context for households living on low-incomes in significant ways, with new pressures on families of all kinds. The nature of lockdown and other public health measures removed families from daily routines and in person support of schooling and childcare. Alongside this, families were faced with changes in employment, additional caring responsibilities as well as changes to delivery of a range of voluntary and statutory support services.

In both Renfrewshire and Inverclyde, a clear finding from this research is the depth of challenges households faced during the pandemic and the need for targeted measures to mitigate the impacts as well as address underlying poverty.

The pandemic has demonstrated that we can redesign systems and support when the situation demands it. The need to redesign systems to address poverty is as urgent now as before the pandemic. As part of this redesign process, we need to incorporate voices of people living on low incomes to genuinely create systems that work for all.

The recommendations below draw upon the co-analysis sessions conducted directly with research participants and our wider analysis conducted across the interviews.

Mental Health:

- **Additional resources and services** will be required to address the impact of the pandemic on mental health. An emphasis on accessible community-based provision, that considers the differential impact of the pandemic on people living on low incomes is needed. Services must also address the different needs of women and men.
- **Addressing stigma** through targeted local activity will help ensure that mental health services are accessible to those who need them.
- **Trauma informed approaches** are required across all services. Such an approach will have a disproportionate impact on low-income households.

Employment

- **Incomes security is critical to family wellbeing.** Secure and well-paid employment is vital to allow families to move out of poverty. More should be done to ensure that the real Living Wage is paid to all workers.
- **Insecure employment should be targeted alongside low wages.** Employers need to do more to ensure staff have clear contracts with guaranteed minimum hours. Local authorities should consider approaches that will help to encourage a move away from precarious employment through local economic development initiatives.
• **Employability programmes must do more to address inequality.**
  Employability services need to be person centered and recognise the additional needs and barriers that some individuals may face due to age, gender, race and other characteristics.

• **Investment in local labour markets:**
  there must be greater consideration of investment to create jobs where people and communities need them. Ensuring that individuals and communities affected by poverty are at the heart of economic regeneration efforts, for example through Community Wealth Building, should be central to recovery after the pandemic.

• **Homeworking and remote working may exacerbate some inequalities,**
  with some people potentially excluded due to skills or physical infrastructure. Further work is required to understand the implication for local labour markets affected by poverty.

### Social Security

• **Income adequacy should be central to social security.**
  Future developments in social security in Scotland need to address the issue of adequacy. All benefits should be set with a view towards contributing to an adequate minimum income.

• **Awareness and knowledge of entitlements is crucial.**
  More needs to be done to ensure that individuals know about the support that is available and how to claim it. This requires not only greater investment in public awareness campaigns but also in expert welfare rights advice services. Promotion of awareness through other routes – schools, GPs, recreational facilities, community organisations – must be used to increase take-up. Improved awareness around Scottish Child Payment should be a priority.

• **The pandemic has shown that crisis support is vital.**
  Resourcing of dignified cash-based support is critical. As we emerge from the pandemic, there is a continued need to increase investment in the budget and capacity of the crisis support such as the Scottish Welfare Fund.

• **Reform of UK social security.**
  Get Heard Scotland is focused on what can be done locally and nationally in Scotland to address child poverty. However, problems with UK social security remain central to many of the difficulties experience by people on low incomes in Scotland. Whether talking about the level of support in Universal Credit and the 5-week waiting period, the impact of the benefit cap or the two-child limit, there are significant changes needed to social security at the UK level.

### Community Connections and Place

• **Improvements to physical spaces are needed:**
  The pandemic has highlighted the vital importance of the communities we live in. Having access to green space, and useful public spaces should be seen as part of our efforts to address child poverty. Investment in the community spaces and green space is required, alongside greater involvement of communities in the design and utilisation of those spaces.

• **Investment in community infrastructure:**
  There is a need to link the repurposing of derelict and rundown buildings to local actions to address child poverty. More support for community ownership of resources is needed, and to link these resources to employment and training opportunities.
• **Support for community organisations:** Grassroots community groups and local anchor organisations played a key role during the pandemic in supporting and helping people in need. Consistent and reliable support for organisations to develop and make connections will underpinning efforts to address child poverty.

**Digital exclusion**

• **Continued investment in digital:** The importance of digital connection will only continue to grow. More support will be required to help families navigate an increasingly digitised world. Support needs to be tailored and recognise the impact of issues such as cost, literacy, employment patterns.

• **Investment in infrastructure:** Further funding and integration locally to end digital exclusion, including creative solutions to providing either free or low cost and high-quality broadband to low-income households.

• **Service pivots to digital approaches need to be supported with alternative models for those who benefit from face-to-face approaches.** Mapping is required to understand the scale of digital provision across communities and the reach and engagement and barriers across different family types and circumstances.
Endnotes


16 Covid Realities, 2020. Covid Realities. Available at: https://covidrealities.org/about


