

HARC Client Survey 2023



HARC

**Hastings Advice and
Representation Centre**

RELIEVING POVERTY
ADDRESSING INEQUALITY
IMPROVING WELLBEING
FIGHTING INJUSTICE

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Chief Executive's Foreword

In the 38 years I have been at HARC, I have never known our clients and staff to be under more pressure than they are right now.

When more than half of people can no longer stretch their income across the month or afford to feed themselves and their families a balanced diet, when nearly two thirds of people are struggling to pay their fuel bills, we must acknowledge that the safety net that the welfare system is supposed to be for people has huge holes in it and is in urgent need of repair. The benefits system was designed originally to catch people when they most need it yet has become unbearable to navigate for people already in crisis.

That the levels of mental stress being reported by our clients are higher than they were during Covid is not surprising to us. We can see how the inability of very unwell people to make their finances stretch to even the basics, is pushing people to breaking point. We are horrified that again, the number of people who report our service as saving their life has risen. When around one in ten of the people walking into our service feel suicidal, we need to not just read this report and sweep it under the carpet with the other bad news, we need to raise our voices again, at every opportunity presented to say, enough is enough, this cannot go on. We acknowledge the government plan to remove the work capability assessment for Employment and Support Allowance and Universal Credit after the next election and before that change some of the descriptors, but there is no guarantee the changes will improve the lives of our clients, for many it will make things worse.

They say that the definition of insanity is to keep doing the same thing and expect a different result. Regrettably, the last three surveys have reported ongoing problems with the way health assessments are conducted.

Furthermore, this is the third survey that has shown consistent reporting of the clear flaws in the current welfare system. Rising levels of appeals, rising success rates of those appeals, parliamentary committee reports and independent research from many other organisations all also point out the repeated failings in how the health assessments are conducted.

I wish that I could stop saying the same things, survey after survey, that there were areas of improvement I could genuinely point to in terms of how things are changing. As I cannot, I will once again ask those who read our survey and who understand the issues we are raising, whether from the people they support, or through personal experience, to raise their voices and use their platforms to advocate for change.

I would like to thank everyone at HARC for remaining positive, focused and brilliant, in a time when our work has never been more challenging. I would like to acknowledge that many of our clients are still here because of the team and the incredible support they provide. HARC is only ever as good as our team, and the survey results show again, that we have no weak links, and we are incredibly lucky to have the team we do.

Jacky Everard CEO

Executive Summary

Hastings Advice and Representation Centre (HARC) is a Specialist Quality Mark (SQM) accredited charity with 40 years' experience providing free and confidential end to end Welfare Benefit specialist advice and representation to First Tier Tribunal.

HARC commissioned us (The Fundraisers) as an independent consultancy team to carry out a survey of their clients. The survey aims to establish information and trends about the service clients received, the impact the service had on the socio-economic factors affecting clients' lives and their experiences of navigating the benefit system.

Our report is based on 100 of HARC's clients. Our findings include:

- Clients scored the service they received highly with 93% describing it as excellent and the remainder as good to very good.
- 84% of clients told us HARC could not improve its service, some made specific suggestions for improvement such as more face-to-face attendance at court hearings.
- 62% of people did not think they would have received the correct benefits without HARC's intervention.
- 75% of people thought the benefit system impacted negatively on their mental health and wellbeing.
- Without HARC's help 35% told us their mental health would have deteriorated with 9% believing they would have ended their lives.
- People told us other ways their lives would have become more difficult such as debts mounting up, not being able to afford food or fuel and being unable to provide for their children.
- 53% of people said they could not eat healthily and 62% struggled with fuel bills.
- Nearly half the people we spoke to said they would not be able to make or manage an online benefit claim without HARC's help.

In our report, we have included some of the comments made by clients where it does not breach their right to remain anonymous and they said we could quote them.

We made 6 recommendations in our report, but the service HARC provides to its clients is exemplary and should be applauded.

Survey Methodology

100 people who had used HARC's specialist benefits casework service were interviewed by telephone in the first half of 2023. Most of these calls were conducted between January and April 2023.

Callers were told that this was a survey being conducted by a team of independent consultants on behalf of HARC, and that their comments would be anonymised unless they asked us specifically to pass something back to the team.

This survey is an adaptation of previous years' surveys (HARC have been running these surveys every 1-3 years since 2010) and for long-term trend analysis includes many questions that were included in previous surveys. That said, we have reviewed the questions in the light of the current cost-of-living crisis and asked some explicit questions to understand how that is impacting HARC's clients, with a focus here on food and energy.

In order to keep the survey at a manageable length for HARC's clients who are typically living with multiple health conditions; some questions asked previously were omitted or combined.

The results of the surveys conducted in 2018 and 2021 showed things were going seriously wrong in the welfare system. Most notably, clients told us that the **health assessments** they were compelled to undertake for sickness and disability related benefits were not working well, or fairly. Indeed, many clients accused the staff undertaking them of either explicit dishonesty in the reports produced or of omitting crucial evidence that they and their medical team provided. Given the consistency of reporting of this across HARC's client base, we started asking questions about this in the 2018 survey; and have continued to do so in subsequent surveys to see if any of the briefings HARC have given on this to ministers and civil servants, or any of the advocacy undertaken for people with long-term health conditions, has resulted in change.

We have included a series of tables throughout this document. The totals in the tables will usually sum to 100, but some tables will sum to more than 100. This is because some questions allowed people to provide multiple answers, for example in table 2 where people told us what they thought HARC did well.

How clients rated HARC's overall service.

1. Please rate your overall experience of HARC's service	2023	2021
Excellent	93	94
Good	2	1
Very Good	5	5
Total	100	100

HARC continue to score exceptionally highly with clients for their overall experience, with most clients scoring their service as excellent. This is typical of previous years, (over 90% of clients have rated their service as excellent in every survey conducted since 2010).

As in previous years, no client rated the service as poor or very poor.

Whilst this is typical of HARC's service, it is worth noting that this satisfaction score is significantly above what would be usual for a service primarily reliant on statutory funding, or indeed, those achieved by generalist advice services. In years in which HARC's data was comparable with other advice providers in East Sussex, HARC consistently scored the highest on client satisfaction and quality indicators and it is remarkable that over the 13 years these surveys have been run, this rating has never dipped below 90% of clients rating the service as excellent. Typically, 100% of clients rated the service as good or better in every survey and in the exceptional years, this never dipped below 98%.

As an independent consultancy team who work with hundreds of charities and not for profits across the UK, we know how rare it is to find a charity that consistently scores this highly, time and time again, on client satisfaction. It is even rarer to find this amongst charities who are reliant on the statutory sector for the majority of their funding, as HARC are (58% of funding within last published accounts).

We know it takes exceptional leadership, a high performing team, and real care and attention to detail around every aspect of the charity's service to achieve such outstanding satisfaction scores.

We would like to commend and congratulate the leadership, and whole team at HARC for managing to achieve and to sustain such exceptional rates of client satisfaction, year on year. We would also recommend that statutory partners investigate what they can learn from HARC's service to drive up the performance of other services whether delivered directly or on their behalf, to vulnerable people.

What clients considered HARC did well or could do better.

2. What did HARC do well?	2023	2021
Professional / Knowledgeable	47	46
Filled in / supported me to fill in forms	66	17
Helped me understand the paperwork / process / prepare	60	16
Everything	68	32
Supported me / compassionate / understanding	56	36
Kept me informed / updated	56	6
Appeal papers / representation	37	6
Listened / I felt understood	48	11
Home visits	15	1
Gave me confidence to appeal	29	2
Total	482	173

Some examples of client's comments

'Without HARC's support I would have been unable to appeal.'

'HARC helped me fill out the forms which meant I could get the benefits I was entitled to.'

'Due to my autism, I find the language in the forms very difficult to understand. I would have struggled without them.'

'I would not have been able to do it on my own.'

'I had real trouble with the forms. HARC supported me so much in getting these done and understanding the process.'

3. What could HARC do better?	2023	2021
Nothing	84	78
Quicker appointments (although many acknowledged that there was a lot of demand on caseworkers)	6	7
Accompany clients to tribunal	1	1
Keep in touch in between/follow up/see paperwork before sending	3	2
Have them support first PIP application, rather than wait for a rejection to get help	2	
Total	96	88

As in previous years, the survey team pushed clients to try and think of things here so HARC has feedback against which to improve. Even with this encouragement, as in previous years the majority of people could not think of ways they could have been better.

That said, the speed of appointments remains the top priority cited by clients with 50% of clients who would change anything, mentioning this.

Given the financial pressure many individuals and families are currently facing, it is perhaps unsurprising that benefit advice services are struggling to meet the demand.

Since the survey, HARC has advised us that appointment waiting times have increased again and are currently at 8 weeks. Furthermore, they are finding that there are no alternative services to refer to, and at present they are picking up clients in areas that others are contracted to serve, due to the fact other providers are unable to accept referrals.

Given that inflation remains persistently high and rents and mortgages are increasing at unprecedented rates, that UK savings are also being depleted currently at the fastest rate on record, and that we are not yet at the end of interest rate rises, it is likely that demand for financial advice will continue to rocket.

We would urge all statutory commissioners and funders to consider what they can do to support HARC and partner agencies to reduce these waiting times and ensure that East Sussex residents can access benefit advice quickly, at times of crisis.

It also strikes us, as independent observers, that if the experience reported by PIP claimants disappointed not to get help on initial application is typical, that this is a waste of resource as we would anticipate that to mount an appeal takes much longer than to support someone to submit a well evidenced application does. Given that a percentage of claims will be successful preventing people from having to appeal because they just didn't know what evidence to collect and cite in the forms, seems counterintuitive.

Given the increasing focus on prevention rather than cure, we would recommend that HARC and commissioners discuss whether the balance here is sensible, and HARC advocate for there to be funding for initial support, in the next statutory contract which we understand is to be tendered shortly.

The difference HARC's service made to people's lives and what HARC achieved for them.

4. What difference did the service make to your life?	2023	2021
Huge difference /big difference / enormous difference	66	48
Reduced stress / anxiety / improved mental health/ took pressure off	54	26
Improved finances	61	10
Made life easier	62	4
Got benefits I was entitled to / helped me claim or appeal	69	30
Gave me my life back / improved quality of life / turned life around	10	1
Gave me the confidence to challenge a wrong decision	17	3
Gave me space to concentrate on my health	24	3
Can buy mobility aids / other equipment we need now	14	2
Meant I could get out and about	7	1
Meant I could eat properly	3	1
Total	387	129

5. What would have happened if you hadn't received help from HARC?	2023	2021
Wouldn't have got my benefits / would have messed up forms / appeal.	62	42
Would be suffering / problems / health would have got worse	31	4
My mental health would have suffered / downward spiral / stressed	35	4
I don't know / I really don't know where I would be / I can't think about that	24	15
Nothing / not much / I would have managed		4
I would be in debt / struggling financially	50	6
I think I would be dead / I doubt I would be here / I would have killed myself	9	5
Life would be more difficult		3
I would have given up on the process	19	6
I would have had to appeal or apply independently/ I would have got there in the end, but it would take years or be more difficult	1	6
I would have had a breakdown / ended up in hospital	2	3
I wouldn't have been able to cope	25	1
I would have gone elsewhere for help	1	2
I would have ended up homeless or in a shelter	5	4
I would have returned to my country of origin	0	1
Total	264	106

Some examples of client comments

'I couldn't have done it without HARC's support.'

'Working with HARC has given me the strength and confidence to move forward.'

'Support from HARC enabled me to get my medical diagnosis and took the pressure off doing the appeal process so I could concentrate on my health.'

'Without their support I would have had to sell my flat it would have been major.'

'I would have given up if it hadn't been for HARC.'

In common with answers to other questions, mental health appears to be a bigger issue for HARC's clients in 2023 than it was in 2021; despite the fact that the last survey took place during a period with Covid lockdowns.

35 people cited HARC as helping their mental health, compared to just 4 in 2021. 25 people said that they wouldn't be able to cope without HARC, compared to just 1 in 2021.

Whilst it may seem remarkable that people with multiple long-term health conditions could be more anxious now than during the height of Covid; it may be that financial stress is more challenging for the mental health of people with a range of health conditions than even the pandemic was. During Covid those on the lowest incomes saw their income increase, whereas now the cost-of-living crisis, and the removal of the additional £20 per week benefit have combined to heighten financial stress in HARC's clients.

It is notable that again, we are seeing an increase in people who said that they would have been dead without support from HARC, which was not something that came up more than once in any of the annual surveys from 2010 - 2013. Now, when nearly one in ten of HARC's clients say that they would have ended their life without support in navigating the benefits system, we need to acknowledge that the benefits system is very broken. When one in four say they would not have been able to cope without the support of a benefits advice service, we need to be asking serious questions of the DWP.

Benefits advice services are meant to be a routine service, not an emergency, lifesaving service, and whilst it is amazing that HARC consistently save lives with their work, year on year, we need to acknowledge that this is a terrible burden to place on the shoulders of HARC's team, and very wrong that advice workers are expected to do this.

We also need to understand the impact that this has on the mental health of the advice team and pay tribute to their brilliance and resilience in going to work and saving lives, and helping people on the edge, cope, week in and week out.

6. Thinking about what you wanted when you approached HARC, was this achieved?	2023	2021
Achieved	46	88
Achieved more than expected	48	8
Can't Recall	3	1
Partially Achieved	1	1
Results not Known	2	1
Total	100	99

94% of clients achieved what they expected to achieve, or more, as a result of support from HARC. Only one person did not fully achieve what they expected.

6A. Would you recommend HARC to others?	2023	2021
No answer given	2	1
Yes	98	89
I already have		10
Total	100	100

As in previous years, everyone who answered this question said that they would recommend HARC.

Number of HARC clients with children

7. Are there children in your household?	2023	2021
Yes	22	29
No	77	69
No Answer Given	1	2
Total	100	100

Benefits in payment to all clients

8. Which benefits are your household in receipt of?	2023	2021
Attendance Allowance	14	7
Carers Allowance	7	14
Child Tax Credit	7	26
Council Tax Reduction	2	4
Disability Living Allowance	16	12
Employment Support Allowance	5	24
Income Support	7	3
Housing Benefit	18	14
Child Benefit	13	9
Jobseeker's Allowance	0	1
Pension Credit	9	2
Personal Independence Payment	74	69
State Pension	19	9
Private Pension	2	2
Universal Credit	44	36
Working Tax Credit	2	11
Couldn't Remember all	9	2
Other	1	8
Total	249	253

Increase in Pension Credit claims is likely to be due to the cost-of-living crisis pushing an increasing number of older people who were previously just coping without claiming benefits they may have been entitled to; coming forward to claim as a result of the stress on their household budgets.

Making and maintaining online benefit claims

9. If benefits could only be claimed online. Could you do this?	2023	2021
No	47	47
Yes, with assistance	16	3
Unsure / No answer given	7	1
Yes	30	49
Total	100	100
Reasons given why people could not claim online	2023	
Technology	30	
No Broadband internet	3	
Due to age	2	
Due to health condition	8	
Need help from family member	3	
Unable to read/dyslexic	3	
Unable to use internet	4	
language barrier	1	
Lack of confidence	1	
Total	55	

In 2021 nearly half of people said that they could claim benefit online, which has fallen to 30% in 2023. As the table shows, this is likely to be as a result of financial pressure forcing people to cut back on spending on internet services or accessing technology.

The second part of this question was only introduced in 2023. It is notable that less than half (22 / 47) people who said they cannot get online cited a reason other than not having the technology / connectivity to do so.

As in 2021, 47% of people said that they cannot access online services.

Whilst most of the general population can access online services, the majority of people living with multiple health conditions on low incomes, are still experiencing digital exclusion.

We would encourage service providers working with vulnerable clients, or those on very low incomes, to consider whether the support they provide to help people navigate digital services is adequate, given the high numbers of people (63% of people surveyed) that have stated they need this.

Client's experiences of DWP healthcare assessments.

10. If you had a healthcare assessment, what was your experience of this? Do you think it was fair?	2023	2021
Unfair	24	50
Fair	15	22
Not Sure	25	25
Not Applicable	36	2
Total	100	99

¹Please note that figures for 2021 do not add up to 100 as two people had multiple assessments and mixed results.

Figures are broadly comparable to 2021 in that in 2021, 69% of people who expressed a clear opinion said that they felt the assessment was unfair. This compares with 62% in 2023.

The rise in not applicable is likely to be because waiting times for health assessments have increased considerably since Covid so people will be waiting longer for the outcome of their claims in 2023 than in 2021, and a reflection of the fact that the cost-of-living crisis appears to be significantly increasing applications for means tested benefits. However, the rise in Pension Credit applications could also just be a result of an increasing number of people hitting pensionable age and asking HARC for support which we can see is happening by the rise in state pension applications compared to 2021.

What clients said

'A lot of information included in the assessment was untrue such as my son plays computer games all day. He is 35 and has never played a computer game in his life.'

'The Health Assessor assassinated my character.'

The nurse called and assessed over the phone. Didn't listen to anything she said and the transcript was completely wrong. Said she could walk 200m that was untrue.'

'I got treated like trash, then mandatory reconsideration decided I was unfit for work for five years.'

'I had a medical history from the Doctor so they couldn't argue.'

'It's horrific - they ask questions but it was demeaning for my son to talk through what he can't do. It depends on the staff doing it. We were told it would take 1/2 hour but took 1 hour. They ought to know that perception of questions can be different and explain it better.'

'It was horrendous. I have never before experienced such hostility.'

'Judgements were made before she even got into the room.'

'I didn't feel any of it was fair.'

'I wasn't being listened to.'

'I had a telephone appointment that was absolutely disgusting. Lady was unfair and didn't listen. The report was nowhere what the circumstances were. It added extra stress.'

'Two out of the three I have had were unfair.'

Recommendations

As with previous surveys, we recommend that HARC continues to advocate for their clients, continues to meet with the DWP if they can, and continues to explain to policymakers the negative impact that the health assessments continue to have on very unwell people.

We appreciate that staff may feel that it is an uphill struggle when policymakers are presented with but continue to ignore the evidence that this part of the system is profoundly broken.

That said we remain optimistic that change is possible, and recommend that HARC use the opportunities provided by the planned system changes to continue to call for the health assessments to be brought back into the civil service, where regulated standards of acceptable behaviour (via the civil service code) would, we expect, raise the standard and accuracy of initial decision making; in turn reducing pressure on the benefits tribunal services.

We also call on other providers working with vulnerable people who understand the impact that the benefits system has to similarly advocate for change, and use the opportunities provided by future consultations on system reform to submit evidence that will help policymakers and parliamentarians improve the system.

Benefit appeal tribunal – hearing type preference

11. If you had a tribunal, would you prefer it to be:	2023
Any of the below	8
In person	30
On the telephone	14
Unsure / No answer given	41
Video / Email	7
Total	100

The answers to this question show that many clients have welcomed the increasing choice around ways to access the tribunal service that Covid provided. Whilst in person representation was still the preferred choice of the most people, almost as many people picked a method other than in person or said that they were happy with any method.

Recommendation

We recommend that HARC share this finding with the Tribunal Service, and advocate for them to continue to offer clients a range of ways to access their services.

Long-term medical conditions

12. Please can you tell us if you are affected by any of the following conditions?	2023	2021
Anxiety (diagnosed)	72	77
Acquired brain Injury	9	
Asthma	13	
Autism	10	11
Cancer	3	9
Chronic back pain	39	32
Chronic Kidney Disease including End Stage Kidney Disease/Renal failure	3	1
Crohn's Disease	1	1
Colitis	3	2
Chronic obstructive pulmonary disease (COPD)	17	12
Coronary Heart Disease including Heart Failure	13	10
Dementia	2	4
Depression	62	65
Diabetes	16	11
Epilepsy	2	6
Fibromyalgia	17	11
High blood pressure (Hypertension)	30	17
HIV	0	0
Hypothyroidism	8	8
Learning Disability	7	
Long Covid	12	
Long-term neurological conditions	17	15
Mobility Issues	52	62
Myalgic Encephalomyelitis (ME)	2	3
Multiple sclerosis (MS)	12	4
Osteoporosis	9	7
Rheumatoid / Osteo Arthritis	30	24
Sensory Impairment	14	
Schizophrenia	3	1
Stroke	9	
Other Physical Conditions	21	
Other psychiatric conditions	36	11
Total conditions	544	404

Clients had an average of 5.4 conditions. This continues the trend observed in previous surveys where the number of conditions / patients rose from 3.1 to just over 4 between the 2018 and 2021 surveys.

This is likely to be due to a combination of factors including:

1. The aging population in East Sussex, and high concentration of older people across most boroughs and districts, most notably Rother and Wealden, which when coupled with increased life expectancy mean more people are living for longer, with an increasingly complex range of conditions.
2. More people are receiving diagnoses currently due to pent-up demand and delays caused by Covid.
3. Some people who are very ill are being forced back to work by the cost-of-living crisis and the fact that the benefits system no longer covers even a basic decent standard of living for most people who rely on it.
4. This consistent increase in the number of conditions each person has on average from survey to survey may suggest that as demand increases, the threshold to access HARC's casework service is also increasing.
5. **We recommend** that HARC and statutory commissioners look at the people who are currently being turned away from benefits advice casework services, to understand whether in fact, there are many people who do need it, currently unable to access it. It may be that the statutory restrictions on who can access which service are leaving many vulnerable people without access to the support and advice they desperately need.

These results show an increase in those reporting mental health issues. There has been a threefold increase in the number of people reporting schizophrenia (albeit only from 1 to 3) and a more than threefold increase in the number of people reporting other psychiatric conditions from 11 to 36. This would suggest that overall, the cost-of-living crisis is impacting even more heavily on HARC clients than the height of the Covid pandemic did.

Long Covid has appeared as a condition for the first time in this survey and it is notable that it impacted 12% of the people surveyed.

Impact of the benefits system on mental health and wellbeing.

13. Do you think the benefits system has impacted your mental health and wellbeing?	2023	2021
Did not affect mental health	5	5
Extremely stressful/ severely affected mental health	73	60
Not applicable/no answer given	12	15
Quite stressful	10	20
Total	100	100

Again, our survey shows that the system designed to support people when they are too unwell, old, or otherwise unable to work; is making them sicker.

It is highly likely that the benefits system itself is hugely increasing costs to mental health services, and the revolving door of services that people with severe mental ill health need to access (and often need help to access).

Commissioners locally will be seeing the impact of an increasingly mentally unwell cohort of economically disadvantaged people, as will the emergency services, hospital services, ambulance services, social services, the voluntary sector and primary care. Schools will be dealing with the impact of young people in caring roles, of children's mental health under pressure due to parental mental health pressure.

The cost savings that DWP make by turning down people eligible for support, are loaded as costs onto other service providers, and over the long-term, adding significant pressure to already under pressure public services.

We are shocked that almost $\frac{3}{4}$ people who use HARC's service say that the system itself is impacting severely on their mental health, and that only 17% of people surveyed did not feel that the system impacted negatively on their mental health.

Whilst the recent policy announcements around reform to the benefit system give rise to as many concerns as they alleviate for benefits advisers, we hope everyone who works with vulnerable people in East Sussex and has experience of how the benefits system is creating unbearable pressure on people will use their voice and bring that evidence forward under this, and if necessary, subsequent consultations; until the 'UK has a benefits system that responds to the health needs of those it serves, rather than exacerbates them'.

Impact of the cost-of-living crisis

14. Thinking about the last 6 months and the cost-of-living crisis, can you tell me whether the following statements are true or false for yourself?	2023			2021		
	True	False	No answer	True	False	No answer
I am in debt	33	62	4	32	64	4
I regularly borrow money to pay for basics (food, fuel, housing)	28	66	4	15	81	4
I have had no gas / electricity due to an inability to pay for fuel	9	86	5	9	87	4
I have been unable to afford essential transport	9	81	10	16	80	4
I commonly run out of money before the end of the month	52	44	4	34	61	3
I have been unable to afford to give myself or my family a balanced diet	30	66	4	20	78	2
I have been unable to afford to give myself or my family, 3 meals a day	23	47	30	19	79	2
I have been unable to afford a winter coat, shoes, or other basic items for myself or my family	28	68	4	17	78	5
I am unable to afford broadband	11	83	6	9	88	3
I am unable to afford a phone	1	93	6	4	93	3
I have been unable to afford the costs associated with my children's education	16	29	72	4	20	76
Total	240	725	320	537	898	110

This question is designed to see how much financial stress HARC's clients are under.

Under almost every measure, it is obvious that clients are facing tougher challenges financially in 2023 than in the 2021 survey.

Almost a third (28%) of people are regularly borrowing money to pay for basics and for the first time since this question was introduced in 2015, the majority of people surveyed

(52%) are unable to make their money last the month. This is a significant increase on the 2021 figure of 34%.

We are also seeing the impact financial stress is having around diet, with 30% of people unable to afford a balanced diet, and 23% of people unable to afford to feed themselves and if applicable, their families, 3 meals a day. In a later question we learn that over half of people are struggling to afford the food they need.

Clients are reporting a lower level of resilience to financial shocks or pressure with almost a third of those surveyed (28%) unable to afford, predictable basic items such as coats and shoes for themselves and their family.

The decline in people struggling to afford costs associated with education is understandable given that in 2021 people needed to find money for computers, software, internet and other associated home learning costs during Covid which will have been a financial shock for our clients, half of whom we know do not usually have access to the internet.

Fuel (numbers struggling, fuel vouchers, payment methods)

15. Are you struggling to pay your fuel bills?	2023	2021
A little bit	2	n/a
Government paying for it	1	n/a
It has been a problem but not any longer since receiving support through HARC	1	n/a
No	33	n/a
Pre-payment meter broken, won't be fixed and can't top up	1	n/a
Yes	62	n/a
Total	100	

This is a new question introduced to see the impact of recent rises in fuel costs on clients. Almost two thirds of clients are struggling to meet their fuel costs currently.

16A. Have you received a fuel voucher in the last six months?	2023	2021
Yes	52	27
No	48	73
Total	100	100

16B. Apart from a fuel voucher have you received any other help or advice about how to keep warm in the last six months?	2023	2021
Yes (use of warm space 4, other fuel scheme 4)	8	N/A
No	92	N/A
Total	100	

Use of fuel vouchers has almost doubled from 27% to 52% between 2021 and 2023.

17. Are you on a prepayment meter?	2023
No	78
not sure	5
Yes - all fitted more than 12 months ago	17
Total	100

Almost 1 in 5 households surveyed (17%) are fitted with a prepayment meter.

18. Are you on the priority services register with fuel provider?	2023
No	14
Not sure	37
Yes	49
Total	100

Half of the people who answered this question (49%) are registered as vulnerable with their fuel supplier. This would suggest that awareness around the importance of this is relatively high, most likely due to a combination of good advice around this from HARC advisors, and media coverage on issues around energy.

Healthy eating and foodbank use

19. Are you struggling to afford enough/healthy food?	2023
No	45
No answer given	2
Yes	53
Total	100

Over half of people surveyed said that they did not have enough money for food.

20. In the last six months have you used any of the following?	2023
Community Fridge	4
Foodbank	24
Other community food project	1
Not used any of the above	73
Total	102

Will not sum to 100 because some people used more than one of those listed.

This question revealed that the majority of people that used food services use the food bank but given that this was less than half the number of people struggling to afford food, the answer suggests that there are still significant issues around stigma and/or access to emergency food services for many experiencing food poverty.

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Recommendations

1. We would urge all statutory commissioners and funders to consider what they can do to support HARC and partner agencies to reduce waiting times and ensure that East Sussex residents can access benefit advice quickly, at times of crisis.
2. We recommend that statutory commissioners also consider whether there is a need for earlier advice, to support people (e.g., applicants for PIP) at application stage, therefore reducing the numbers of appeals.
3. As with previous surveys, we recommend that HARC continues to advocate for their clients, continues to meet with DWP if they can, continues to explain to people that make policy, the frequently negative impact that the health assessments continue to have on very unwell people and the seemingly systemic problems in obtaining accurate assessments that HARC clients consistently report.
4. We recommend that HARC and statutory commissioners look at the people who are currently being turned away from benefits advice casework services, to understand whether in fact, there are many people who do need it, currently unable to access it. It may be that the statutory restrictions on who can access which service are leaving many vulnerable people without access to the support and advice they desperately need.
5. We recommend that HARC share the findings of how people prefer to access the Tribunal Service, with the local tribunal user group, and advocate for this continued variety of access.
6. Whilst the recent policy announcements around reform to the benefit system give rise to as many concerns as they alleviate for benefits advisors, we hope everyone who works with vulnerable people in East Sussex and has experience of how the benefits system is creating unbearable pressure on people will use their voice and bring that evidence forward under this, and if necessary, subsequent consultations; until the `UK has a benefits system that responds to the health needs of those it serves, rather than exacerbates them`.