

Locked Out: Barriers to Remote Services

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Foreword

In March 2020, as the UK entered an unprecedented national lockdown, CASNS took the equally unprecedented step of closing our in-person, drop-in service for the first time in 80 years.

This was one of the many huge changes the Covid-19 pandemic and resulting lockdown brought to how we live our lives. Some of these changes were completely new and unique to the situation, but others were simply the acceleration of existing trends. Increased digitalisation was one such trend that was given an enormous boost by the lack of in-person contact.

Online shopping, banking, accessing information, learning and communicating had all been available for many years but the numbers of people using them, often for the first time, increased significantly during the lockdown.

Many service providers switched the bulk of their provision to remote services, online and by phone, as in-person contact was limited or forbidden. Video conferencing and one to one video interactions became a larger part of everyday life, as we learnt a whole new meeting etiquette, especially when to and not to mute.

But many people, especially those who lacked skills, knowledge, confidence, hardware or connectivity, were excluded from this brave new world and digital exclusion joined the family of inequalities, most of which arise from poverty.

This phenomenon was not just limited to the analogue generation but, especially where hardware and connectivity were concerned, included young people, whose families were unable to afford a laptop or internet connection and thus who found themselves excluded from online learning.

This project, funded by our national association, Citizens Advice, allowed us to take a more detailed look at how our clients and, in particular many of those who had made greatest use of our in-person services, coped with an increasingly digital world.

The results confirm many of our suspicions but have also highlighted some unexpected developments and factors. This will provide us with extremely valuable data to use when planning our future services to ensure that they are accessible to all and I hope others find them equally useful.



Simon Harris Chief Executive Citizens Advice Staffordshire North and Stoke-on-Trent October 2021.

Executive Summary

The aims of the project:

During the first COVID lockdown in March 2020 CASNS identified that the number of clients from Black and People of Colour communities using our service had dropped by 50% - almost twice the decline for our client group as a whole. We also observed a 75% reduction in clients using our Asylum and Refugee Advice Service – these clients being some of the most marginalised using CASNS advice service and who, prior to lockdown, had almost solely accessed our services through the faceto-face drop in.

Even before 'Locked Out' began frontline staff were aware of some barriers these clients were facing, including lack of English, limited internet access and inadequate equipment. We noted that very few were using the CASNS Asylum Advice Line, set up in March 2020 to provide access to advice during the lockdown. We also knew that all the local partner agencies had closed their doors. 'Locked Out' was an attempt to discover the full extent of the barriers to accessing remote services for the most marginalised of CASNS Black and People of Colour client groups. In the first phase Locked Out focussed on the three client groups whose contact with CASNS had dropped the most significantly:

- Asylum Seekers (including failed Asylum Seekers);
- Refugees;
- Migrants with No Recourse to Public Funds.

Our methodology was to ask clients from those communities:

- What barriers they were experiencing?
- How these barriers might be overcome?
- Whether any barriers were insurmountable?

The second stage of the project was to test the effectiveness of some of the solutions identified from these conversations with clients, and to talk to a wider group of Black and People of Colour clients to identify what barriers they were experiencing and how these might be overcome.

What Locked Out has achieved

In the initial phase CASNS surveyed 39 clients – asylum seekers, refugees and migrants with NRPF. In summary they told us that:

- In the past they have accessed CASNS in person
- They had very limited access to the internet / IT equipment
- Very few had access to an email account / used email before
- Most Knew of and had used WhatsApp but almost none knew of / had access to / used any other virtual platform.
- Their preferred "remote access" method was the telephone, followed by WhatsApp
- Almost all of them required interpretation services to access services all the more so with remote access services

In the second phase we piloted using WhatsApp to receive photographs of documents. Usage of this method increasing each month, and is proving popular:

- With clients who no longer have to entrust important documents to the post / come into the city centre to hand deliver them.
- With advisers who can get sight of crucial documents more quickly and continue to advise clients remotely more effectively.

We also surveyed a second group of Black and People of Colour clients from other teams in the LCA. This survey group had mostly lived in the UK for longer than the first group, and had greater digital access and literacy – but still one-third were unable to send documents via email.

Similarly, this group did have greater familiarity with different virtual platforms, but this was still very limited for many. Once again, WhatsApp was the most widely known and used platform.

We also discovered a significantly lower confidence in reading and writing in English than in speaking English amongst this client group – impacting on their ability to receive and act upon advice. Although telephone advice was (marginally) the preferred access option for this group, it was closely followed by "in person". No other remote options were favoured.

Some of this survey group told us that their difficulties in accessing services began even earlier than we had considered. Case Study 2 taught us that if we close our door to clients who cannot read/write in English, they may not even know how to discover where we are (or who we are) and what alternative access routes we have created.

CASNS Asylum and Refugee Advice Team piloted aspects of a 'hybrid' service model during phase 2 of Locked Out. The hybrid service includes: pro-active, early action telephone calls to clients, a WhatsApp facility for clients to send in documents, a telephone advice line, and a reduced face-to-face drop in service. This model has resulted in the service being accessed by almost the same numbers of clients as prior to the pandemic closure.

Headline conclusions:

- Digital poverty and digital literacy are different issues.
- Some clients will continue to require a face-to-face service option.
- Literacy / English language proficiency is a significant barrier to remote access for some client groups.
- Complete reliance on remote services will exclude some clients.
- A hybrid service will provide a good service model to meet the needs of some client groups.
- Client consultation is crucial to ensure access to remote services and provides understanding of the range of barriers and the potential for those barriers being overcome.
- Identifying the characteristics and geographical locations of high concentrations of clients with access issues is useful in finding tailored solutions

Headline Recommendations

- An accessible face-to-face service will be necessary for some clients;
- LCAs (and other organisations) need to develop flexible, hybrid service delivery models;
- Exclusion from remote access services is a campaigning issue for LCAs;
- Marginalised client groups will have difficulties in accessing remote services;
- LCAs need to look for local partners who can assist them to access clients;
- LCAs need to engage with their local partners to develop effective referral routes;

CASNS Next Steps

- Continue listening to and learning from our clients;
- Continue piloting options emerging from our conversations with clients;
- Repeating the leaflet drop in other neighbourhoods;
- Rolling out providing a WhatsApp facility in other teams;
- Continuing to influence Citizens Advice thinking about service delivery methods;
- Contributing to local initiatives thinking about digital exclusion;
- Influencing services that are designed to assist marginalised communities.



Background and Brief

During the 2020 Covid-19 lockdown migrants with multiple disadvantage have almost disappeared from CASNS' client group and the number of clients from BAME backgrounds has greatly reduced.

Initial data was gathered from reports generated by the CASNS Monitoring Officer, data from a series of Monthly Activities reports (taken 20/08/20). The reports showed clients resident in the Stoke-on-Trent (SOT) area,- including those advised by national services who lived in the SOT area, not just those assisted by CASNS.

- Stoke-on-Trent residents advised by Citizens Advice in 2019-20: an average of **1,539** each month. 2020-21 this reduced by **27%** to an average of **1,118** clients per month
- An average of **278** clients each month who were Stoke-on-Trent residents of Known Non-UK Nationality were advised by Citizens Advice in 2019-20: In 2020-2021 this reduced by **50%** to an average of **139** clients per month.

The decline for this group of clients is almost twice the decline for the whole client group.

Numbers of clients of Known Non-UK Nationality, fell from an average of approximately 18% of the whole Client group in 2019-20 FY to 12% in 2020-21. All else being equal, we would expect a stable percentage of engagement from non UK national clients. This reduction demonstrates a significant adverse impact on this group's ability to access advice, **with around 60 clients missing each month**.

A second report compared Q1 2019-2020 and Q1 2020-2021 of advice given by CASNS only:

2019-20 Q1: average of 164 clients per month where English was not their first language.
2020-21 Q1: reduced by 65% to average 57 clients per month. The decline is first noted in March
2020, when measures to combat Covid-19 began.

The reports also examined the channels used by this client group to contact Citizens Advice. The most frequent channel in 2019-20 was "In Person". These contacts were not replaced at significant levels by other channels during the Covid-19 lockdown period for these clients. Consequently numbers in this client group dropped significantly from March 2020.

CASNS provides an advice service to refugees and asylum seekers - new members of our local Black and People of Colour communities. They have accessed CASNS Asylum Advice Service since it opened in 1999. In normal years the team advises over 600 clients every year. The team also advise a small number of migrants who have No Recourse to Public Funds. Q1 of 2020/21 saw a 75% reduction in usage of CASNS Asylum and Refugee Advice Service.

2019/20 Q1 figures: 134 clients accessed the service; 2020/21 Q1 figures: 34 clients accessed the service.

CASNS was aware, before 'Locked Out' began that the 3 client groups supported by this team are some of the CASNS most marginalised clients but that they have different levels of IT and English language skills. 'Locked Out' was established to explore different remote solutions in order to minimize barriers to accessing advice – in the knowledge that developing accessible options for the most vulnerable client groups will also deliver workable solutions for other CASNS clients.

Crucially, the project focussed on solutions that work for the end user, our clients, not just what works for the organisation. The ultimate impact goal is to see a return of the 'missing' clientsidentified by the initial data gathering - and to develop a service that provides effective access for a range of vulnerable clients. We were aware that other LCAs and external organisations were already using a range of video calling options as well as telephone and webchat. CASNS has evidenced that our 'missing' clients had not been using other channels/services/options once face-to-face services closed.

Design Questions:

- What are the barriers to accessing services during Covid19 for vulnerable clients who are refugees, asylum seekers and migrants with NRPF?
- How can we overcome these barriers?

What were some of the known constraints that clients are facing?

CASNS had evidence of the numbers of 'missing' clients. Staff and volunteers with lived experience told us that the missing engagement was due to lack of access to options provided in place of face-to-face services, with missing clients not "picked up" by other channels like telephone, web chat or email.

We were able to summarise the situation at that point:

- Clients don't always have Wi-Fi access.
- Clients have language barriers.
- CASNS can't run face to face drop-ins during lockdowns
- Most local partner agencies are closed.
- These client groups had not, so far, used the remote services developed as alternatives to face-to-face.

First phase work: research, client surveys, initial pilots and learning from partners and other innovations teams

Wider research

In the first four months of the project, we undertook some wider research regarding internet skills and usage in the population. The Lloyds Bank Consumer Digital Index 2020 Summary provided very useful and up to date information. Their survey is conducted annually and presents the general comfort level of the UK population with online interactions. Findings suggested many people are still not computer literate and struggle to connect to the internet despite the change to online services and the greater impetus provided by Covid-19. Key points included:

An estimated 9 million (16%) of the UK population are unable to use the internet and their device on their own

In the last 12 months* 1.2 million more people had developed their foundational digital skills i.e. using the internet and their devices on their own (*at the time of their survey). However, it was estimated that 11.7 million (22%) of people in the UK lacked the skills needed for everyday admin and interactions via the internet.

- Age remains the biggest indicator of whether or not someone is online, however 44% of those offline are under the age of 60;
- People with impairments are 25% less likely to have the skills to access devices and get online themselves;
- People with annual household incomes £50k or more are 40% more likely to have foundational digital skills;
- 4 in 10 of benefit claimants have very low digital engagement;
- 7% of the UK 3.6 million people have next to no internet access or use at all.

Part of the Lloyds Bank survey also collects attitudes to being offline. These include:

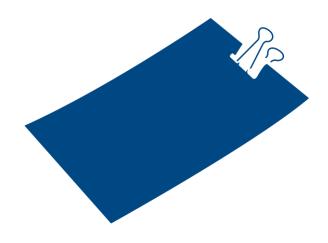
- Getting online is too expensive;
- It is too complicated;
- People don't know where to get help to learn new skills;
- Poor connectivity in their area for either broadband or mobile phone signal.

This is an important set of information and useful to highlight with agencies such as SERCO and other Home Office contracted accommodation providers about the need to ensure internet options are available in asylum seekers' homes.

Client Surveys

'Locked Out' developed survey questions, to collect information about clients' language proficiency, which software they have used or heard of, whether they have access to Wi-Fi and what technology they use (e.g. smartphones or tablets / laptops / public computers etc.) as well as their preferences in terms of contacting CASNS services.

Our initial survey group were refugees, asylum seekers, and migrants with NRPF. These groups can be found in various interactions: The 'Into Schools' Project; The No Recourse to Public Funds Project; the Asylum Advice Line, and refugees referred to Concrete (our partner in delivering refugee integration). (See appendix for survey and data). 39 responses were recorded.



WhatsApp for documents pilot

One recommendation emerging from this first survey was to trial the use of a **WhatsApp** account to enable clients to send CASNS Asylum and Immigration teams photos of documents. This technology was already known to clients, so no training was needed to show clients how to use it. It is also encrypted and therefore secure. A WhatsApp facility was initiated in the last week of Jan 2021. This was made available and has been successfully piloted, both clients and advisers are finding it helpful.

Drawing on the learning from discussions with Liverpool Citizens Advice the WhatsApp account was set up with a single user – a member of the Admin Team- who uses it via the desktop feature and forwards documents to the relevant adviser.

The pilot has proved very successful, enabling a speedy and cheap method for clients to submit documents. However, it became the new "carrier bag" of documents, as clients often send images of all their documents. This is because they are not always confident, or clear which documents are relevant. In our face-to-face service clients often arrive with a large pile of documents, and advisers select the relevant documents. Effectively, using WhatsApp, clients are sending us all their documents and asking advisers to decide what is useful.

Month 2021	WhatsApp facility used
January (1 week only)	2
February	8
March	13
April	15
Мау	18
June	19
Total (as of 6.7.21)	79

Staff feedback that the system is useful and removes the need for clients to bring paperwork to the office or entrust it to the post – both of which can result in delays for urgent casework and can be costly for the client. Comments from staff include:

"Very good, [it] helped a lot. It is easy to use, fast, most our clients have it and [are] happy to use it."

"It's been really useful, especially if we need to see a BRP or Home Office letter quickly. Clients often say they are more confident using WhatsApp than email. They can send things whilst they are still on the phone or straight after so I can then look at them quickly and we can advise or use it for an application faster. Lots of the longer-term clients have said it is easier for them to send paperwork to us quickly and they are more confident knowing that we have received them."

"I think that many immigration clients use WhatsApp all the time to speak with family members etc. [They prefer WhatsApp] over emails so are more confident sending papers this way- they know what they are doing. Those who don't know how to use WA in this way, have all had a family member who knows what to do quickly, rather than via email where it can take a while for them to work out what to do or they send it as an attachment that we can't open which wastes time."

Learning from others in the first phase

Drawing on learning from the national Migrants Exchange Respond and Adapt Programme (RAP) and the local Refugee Action Asylum Crisis Project we decided to pilot proactively contacting new clients on their dispersal to the city.

Asylum Crisis West Midlands (Refugee Action) work across the West Midlands to support asylum seekers whose asylum claims have failed and who face destitution. Having closed their doors due to Covid-19, they changed their service model to making regular phone calls to existing clients. They created new working policies and conducted regular welfare checks – ensuring that clients had access to food, credit for their phones - so that clients could call services for advice.

As part of CASNS Covid-19 Respond and Adapt Programme grant from Migrant Exchange we attended a number of forums with organisations working with asylum seekers who were exploring the question: how do newly dispersed asylum seekers even find out about local services during the pandemic when drop-in services are closed? Two of those organisations had established Early Action models of service delivery, pro-actively initiating contact with new arrivals to assess their needs and introduce services to them.

From November 2020, CASNS Asylum and Refugee Advice Team piloted an Early Action service modelled on those examples, developing a referral system with the NHS Asylum and Refugee Health Team. The NHS team are notified of all new asylum seekers dispersed to the City, and agreed to seek permission to refer these clients to CASNS service. Referrals are communicated every Friday, and advisers telephone each new client. An initial assessment is conducted covering the basic criteria needed to advise and assist clients.

CASNS started to receive health referrals from late November 2020 and recorded how many people were proactively contacted.

13th Nov 2020 – 26th Feb 2021 27 referrals 3rd March 2021 – 6th July 2021 79 referrals

The CASNS Asylum team have attempted to proactively contact a total of **106** newly dispersed clients. When phone calls fail to get a response a standard letter is sent to the client with details of the services and giving the Team's contact details.

Second phase: second client survey and further pilots

In the next 8 months of the project, we continued to implement the initial pilots and surveyed a different set of clients whilst trying out new solutions.

The Second Survey

Whereas the first survey focussed on refugees, asylum seekers or migrants without Recourse to Public Funds, the second looked at wider groups of clients who were Black and People of Colour. The majority surveyed had immigration advice issues, some were reporting Hate Crime, and others had benefits or housing issues. The second survey was developed based on the questions asked in the first survey but taking account that the second survey groups had different life circumstances (See appendix for survey). Data gathering started 15th December 2020 with the final interviews on 30th March 2021 and was undertaken by telephone interviews. During data gathering some longer qualitative interviews were undertaken where clients wanted to talk for longer and share their experiences. These interviews were developed into case studies (see below). One of which also inspired a pilot (see Walking around Shelton below). Data gathering for the second survey was slower due to the impact of the 2021 national lockdown and changes to workloads. 33 responses were gathered in this second round of surveys.

In the course of our second survey, we developed two case studies that emerged from speaking to clients who wanted to go into details beyond the survey questions.

Case study 1:

The interview took place in October 2020. Mr A arrived in the UK in January 2015 and was granted asylum within 12 months. His family joined him in March 2019.

Mr A is Eritrean and speaks Tigrinya. He is in his late 30s, married with 3 children, (ages 3 months, 6 and 8). His wife was pregnant during the 2020 pandemic, and this further increased their vulnerability and isolation as a family. Mr A told us that two other children live with them, his 10-year-old niece, and his 16-year-old brother. This meant that there were 4 school aged children trying to be schooled under pandemic conditions.

The family could not afford home Wi-Fi as Mr A was unable to work due to the pandemic. He needed to re-sit his practical driving test and the DVLA were not booking any practical tests. This left him unable to work at his previous job and meant that he was receiving some universal credit instead. He had tried to call the DVLA helpline but was on hold for 3 hours before being cut off. With no further way to resolve this issue at the time, the family finances were strained. In the meantime, his school age children had been lent one laptop from their school to allow the children to do distance learning. The client's 16-year-old brother was denied access to the laptop scheme at school.

Unfortunately, even the one laptop issued to the children left problems. Firstly, the children were different ages and sharing one laptop for school work was far from ideal. Secondly, the lack of home internet meant that the only option was to tether to Mr A's mobile phone data package. This data package was limited and if Mr A had to go out, there was no internet at all at home. It also aggravated his wife's feelings of isolation during her pregnancy. Mr A felt unable to resolve these issues and felt the main way into a better situation was to take his

practical driving test so that he could resume employment and improve the family's financial situation so that they could afford home internet.

Case Study 2

Ms B had been advised on a benefits issue. When we interviewed her for the second survey, she said that she cannot write in English and so, although she knew of the services offered by Citizens Advice and where our physical office in Hanley was, she did not know how to Google us to find contact numbers. She could not remember our name but could remember the logo and recognised this on the leaflet she found at her sister's house. When she found a leaflet with the Citizens Advice logo, she copied the name into Google and found a telephone number. Ms B contacted that number and, eventually, spoke to a specialist benefits adviser who was able to help her with her problem. She was very grateful for the help from J, who had been 'fantastic'.

Ms B told us that she does not use video calling and does not really understand how to emailalthough a family member has created an email address for her. With services being closed during the pandemic, the best way for Ms B to be in contact with services is by telephone, but until she could find the numbers she was really stuck. She has lived in Stoke for 10 years and can speak English, but sometimes struggles to understand other English speakers. What she really cannot do is read and write very well in English, so trying to find information online was a huge barrier.

She also has only just bought a smart phone - because of Covid-19. Her family had said that she needed to change to a smart phone to give her access to more things, however, she does not really know how to use the smart phone's features and is not confident with it at all, and so mostly just uses it like her old non-smart phone. She has no other IT equipment like laptops or tablets. The only software on the survey she was familiar with was WhatsApp, on which she can send photos but, again, she does not feel confident video calling.

This second case study identified a barrier we had not previously been aware of, and offered a potential for increasing clients' ability to access remote services on offer. It led to the following pilot.

Walking round Shelton: The leaflet pilot

We had initially assumed that the premise of the funding stream – exploring how to overcome barriers to remote access - implied that solutions would be technological. However, through our shared learning with LCAs doing other Innovation Projects, we learned that others were piloting a combination of methods to regain engagement. This shared learning gave us 'permission' to go 'low tech' in some of our approaches.

Learning that other groups were using leaflets, bus advertising and radio appearances alongside discovering the barriers identified in case study 2 (above) encouraged the team to pilot a similarly low tech, 'analogue' approach.

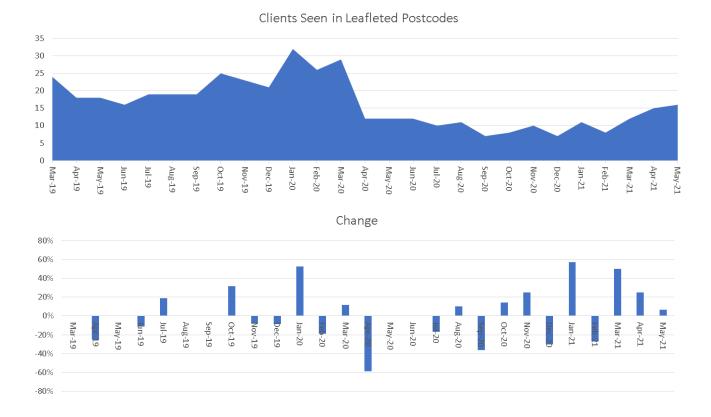
Following on from discovering who our 'missing' clients were, we compiled a list of postcodes in Shelton (a local neighbourhood with a high proportion of Black and People of Colour residents from many different communities) and compared usage of our service from residents of each post code before and during Covid-19 – discovering a very significant reduction. Would such leafletting increase the traffic from residents of those postcode areas?

We designed and distributed a very simple leaflet (below) – providing 3 telephone numbers and an email address along with the CA logo and information that we could provide an interpreter for clients who called us.

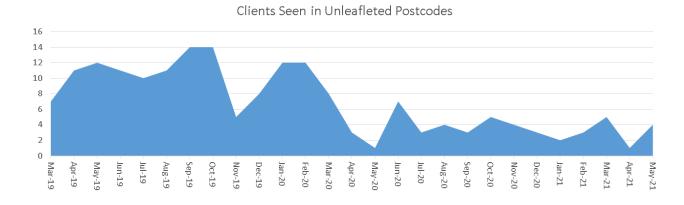
The leaflet was designed in consultation with other teams to agree the most useful numbers. The 3 chosen were: the number for support to make a Universal Credit claim (Help to Claim), the Debt Advice phone number, and the Asylum Advice line. We also discussed designs to minimise language barriers and maximise the accessibility and recognition of our 'brand'. The leaflet was designed, and 1,000 copies printed and distributed. We then monitored postcodes in Shelton to see whether there was any increase in client numbers.

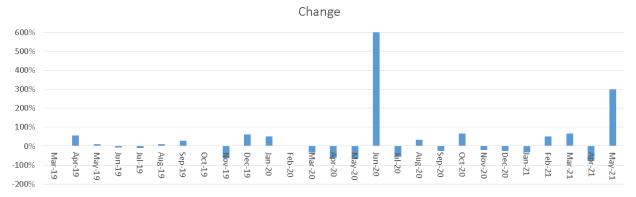


Leafleting took place on 30th & 31st March, 6th & 9th April 2021. The comparison of client numbers was undertaken at the end of May to see whether changes in client numbers from the post codes leafletted had occurred. We also studied whether changes in client numbers had occurred in the Shelton postcodes that had not been leafleted.



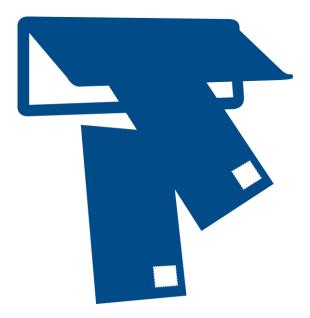
These graphs show a significant decrease in clients during the first lockdown period (April 2020-July 2020), some small recoveries in the following months, but still much lower than pre-covid-19 client numbers. There are small but steady increases March-May 2021 – after leafletting had been undertaken.





These graphs show a similar picture to the leafleted postcodes throughout the pandemic period, but a smaller increase in numbers in April and May 2021.

The figures evidence that distributing the leaflets may have had some positive effect. We cannot conclusively say that the increase in client numbers was solely due to leafleting but there was enough of a change (and, in comparison to the other post codes) to justify considering repeating the experiment. The design sprint cost less than £50 in leaflets and staff time to deliver. We believe leafleting of this kind is helpful and want to do it on a larger scale to test it further.



Learning from others in phase 2

Through attending events such as the Citizens Advice Innovation Lab's 'Unconference' and the regular Show and Tell sessions also organised by the Citizen Advice Innovation Lab Team we have developed our understanding of the issues under examination.

Some of the Key shared learning has been:

- (i) Digital advice is a struggle for many clients. Clients want to tell a story around the problems they face and to work with someone to reach a solution. Clients who have done a bit of research but still have not found answers often need a more holistic approach. They may be receiving 'transactional' advice from Local Citizens Advice (LCAs), but may need much more than this. Clients often do not know how to present problems broadly when using digital channels. Giving advice via digital platforms provides very little space for emotional connection. Those who have access to broadband and computers are not necessarily the people who need as much emotional support or confidence building when they reach us. It may be that those people calling from a cafe to use their bad internet connection to reach a service who need the emotional support along with advice, but they are not in a position to ask for or receive it.
- (ii) Collaborative bids working with key local partners can support the most vulnerable clients. It is valuable to map out potential collaborators and local stakeholders and create a shared opportunities.
- (iii) LCAs need to address the question of how to increase clients' trust in the service when their only link is a remote one. Advice quality, data protection, confidentiality are all issues that need to be in the mix for consideration. It is crucial to emphasize impartiality and how we use data etc. It is vital that we highlight confidentiality, our public position on issues, our brand, and using the right language.
- (iv) To ensure digital inclusivity for people from ethnic minorities and more vulnerable and disabled members of the community LCAs need to be responsive, flexible and ask clients how involved they want to be. Digital inclusion can require upskilling clients to enable digital access. We need to balance the needs of staff and volunteers with clients when thinking about digital inclusion. We cannot assume that clients have the digital skills.

Conclusions, Recommendations and Next Steps

Conclusions

- Remote access is remote; but for a lot of people it is not access.
- Digital poverty and digital literacy are different issues. Even though many clients from Black and People of Colour communities experience both issues together, to conflate them is to fail to recognise their different causes and impacts and the different solutions required. Tackling digital literacy will take a great deal of time and resources and may not be a role for LCAs. It cannot be assumed that simply providing data or access to Wi-Fi is sufficient to enable clients to use video calling or other software to access services.
- Some clients will continue to require an in-person service option. This is the case with the most vulnerable clients especially clients with certain protected characteristics or clients who lack digital literacy, or those who experience data poverty, or those who have poor literacy/English language skills.
- English language proficiency and literacy is a significant barrier to remote access for some client groups.
- **Complete reliance on remote services will exclude some clients**. This is the case with clients from certain Black and People of Colour communities and for some clients with other protected characteristics.
- A hybrid service will provide a good service model to meet the needs of some client groups. The specific hybrid model CASNS Asylum and Refugee Advice Team have adopted is designed to meet the specific needs identified for this client group, and includes:
 - Referral of newly dispersed asylum seekers into the Asylum Advice team by the local Health Team, followed by an adviser's assessment telephone call to the client within a week;
 - The Asylum Advice Telephone Helpline;
 - A half day, face to face, Drop In service at our city centre office;
 - A WhatsApp facility for clients to send in photographs of documents.
 - o All client contacts are supported by a telephone interpretation service.

By the end of Quarter1 of 2021 the numbers of clients accessing this hybrid service was nearly back to pre-Covid-19 levels.

- Client consultation is crucial to ensure access to remote services and provides understanding of the range of barriers and the potential for those barriers being overcome. Alongside consultation with partners and frontline staff, client consultation will ensure that decisions on technology are taken with clients' needs, abilities, and capabilities in mind – rather than the agency's preferences.
- Identifying the characteristics and geographical locations of high concentrations of clients with access issues is useful in finding tailored solutions

Recommendations

- An accessible in-person service will be needed by some clients. LCAs (and other publicfacing organisations) must continue to offer an accessible in-person service option to ensure they do not exclude the most marginalised client groups. Arguably, the groups who have most need of the Citizens Advice Service.
- LCAs (and other organisations) need to develop flexible, hybrid service delivery models responsive to the access needs of their clients. Hybrid services should be developed through consultation with clients, frontline staff and partners the people who actually know what is needed. This will require an open-minded approach, co-operation with partners and pro-active discussions with clients as well as a willingness to experiment (and maybe fail), innovate and change
- LCAs need to look for local partners who can assist them to access clients and who can assist clients to access LCAs in ways that are different from the old and more passive referral models used in the past.
- Exclusion from remote access services is a campaigning issue for LCAs and Citizens Advice: We need to influence organisations who are crucial to meeting our clients' needs – making use of the data we collect to persuade them of the case for not retaining (or establishing) solely remote access routes into their services.
- Marginalised client groups will have difficulties in accessing remote services similar to those in our survey groups. Many of our findings also hold true for people with other protected characteristics, e.g. people with learning disabilities, people with mental health problems or people who, for whatever reason struggle with digital literacy / digital poverty.
- LCAs need to engage with their local partners to develop effective referral routes that widen access to advice. Local partner agencies may be able to assist in making referrals of clients so that a pro-active assessment and advice system (as in CASNS hybrid system) could be developed. For some marginalised clients, this may be crucial to ensure they are introduced to our service and assisted through early action and preventative measures.

Next Steps

• **Continue Listening to and Learning from our clients**: Locked Out has given us the opportunity to listen to some of our most marginalised clients and find out why they couldn't use our services when we closed our doors in March 2020. In the past these client groups were often labelled 'hard to reach', but it turns out that - unless we make take the initiative and go out to talk with and listen to them - then it is us, the service providers, who are hard to reach.

When Locked Out began, we already thought we knew a lot about our clients – but there was so much more to learn – and listening to them has given us the evidence we needed to redesign services so that they can become accessible again.

• **Continue piloting options emerging from our conversations with clients:** Very quickly we discovered so much about the barriers clients experience preventing them from accessing remote services. The next step was to pilot ideas that might be solutions, and evaluating

their success. The pilots have been small scale, easy and quick to undertake – with minimal cost implications.

- Repeating the leaflet drop in other neighbourhoods: this was a cheap and easy measure, and is easily duplicated in neighbourhoods where we have also seen particularly significant reductions in clients. We know that literacy/digital literacy/digital access are issues for many in our communities, and simple, easily understood publicity information is a step to overcoming some barriers.
- Rolling out providing a WhatsApp facility in other teams: the success of this pilot in the Asylum and Refugee and Immigration Teams can now be duplicated in other teams across the LCA. It is a useful measure to support remote working ensuring that advisers can have sight of key documents without clients needing to entrust them to the post or having to deliver them by hand. This is a particularly useful facility for clients who do not know how to use email to upload documents and who struggle to read documents over the phone to advisers.
- Continuing to influence Citizens Advice thinking about service delivery methods emphasising the need for inclusive practice: Discussions within the service about the 'success' of remote access to services needs to be influenced by the findings in Locked Out. This is not just an issue in North Staffordshire – nor just for clients with limited English language skills. If LCAs are to offer advice to the most marginalised individuals and communities – arguably those most in need of our service – then consideration must be given to the issues raised in Locked Out.
- **Contributing to local initiatives:** such as the Stoke-on-Trent Collaborative Partnership's¹ work on digital exclusion. The findings made in Locked Out can make a useful contribution to those discussions both by identifying some of the barriers experienced by local people, but also looking at some of the solutions that might be deployed. The thinking about the need to distinguish between digital literacy and digital poverty and finding solutions to both is a particularly interesting topic for further exploration.
- Influencing services that are designed to assist marginalised communities like those involved in Locked Out: Even before the pandemic many services commissioned or developed to meet the needs of some of the client groups included in our survey group were only accessible by telephone and/or online. We acknowledge that it is quicker, easier and cheaper to close your doors and provide services remotely but Locked Out provides real evidence that this is likely to exclude the most vulnerable of client groups. Certainly services designed to serve asylum seekers and similarly digitally excluded groups need to include an easily accessible, local, face to face element in their service model.

¹ A partnership of voluntary and statutory organisations working across Stoke-on-Trent

Appendix 1 – Data, Methodology, Results

Survey 1: Digital Access Survey Data Collection, first phase of work survey and results.

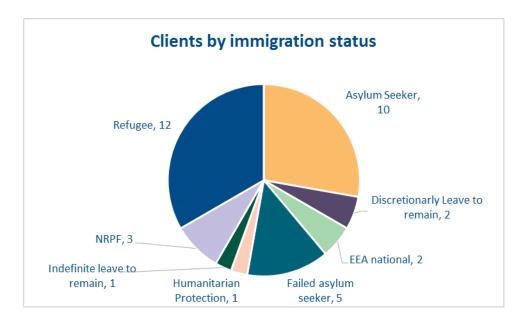
Data Gathering: Our September 2020 Team meeting discussed and refined the survey questions and decided how to administer the survey with clients attending the pilot return to face-to-face work (Tuesday morning Drop-In for Refugee and Asylum clients). We began surveying what worked for clients who were accessing advice via the Drop-In and the Asylum Advice Helpline as well as contacting some existing clients. Survey data was collected from 8th September - 3rd November 2020. Surveys were conducted by five different members of the Refugee and Asylum team in Hanley and, due to the CASNS partnership with Concrete, J - the Refugee, Asylum, Migration Support Lead at Concrete.

39 respondents were surveyed in this phase.

The data respondents represent:

- 40% of the responses come from Tuesday drop-in clinics
- 13 % from J at Concrete
- 47% from proactively calling existing clients.

Data gathering was slower than expected as there were far fewer clients using the service than before Covid-19. Initial themes were quickly identified, such as lack of access to reliable Wi-Fi, cost of data or no home Wi-Fi being major barriers. Most respondents use smartphones to access the internet. The survey identified which software options would be worth trialling.



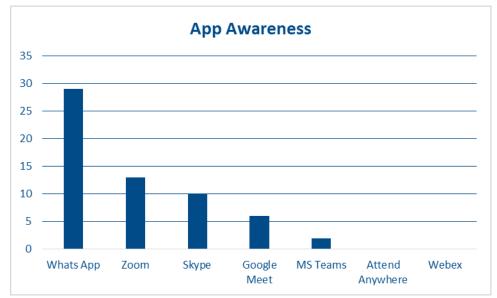
The survey form is below.

Please check that the client answered this survey before	has not			Dat	e				
					N	1M	DD		YY
Type of Refugee / Asylum / NR Client	ΡF								
Have you used any of our services b	efore?	Yes		No		Speci	ify		
Which of the following ways have to contact Citizens Advice in the pas		Advice line Email In person Letter Other Telephone Web chat Dedicated	·		ine 🗆				
Do you need an interpreter?		Yes 🗆	Yes No No Which language?						
account?	ave you currently got access to an email Yes I No I Do you have access to relive account? Yes I No I WIFI? No, have you ever used an email account? Yes I No I					reliable			
If yes, where do you access WIFI from	n normally?)							
e.g. home / café / friend's house/ pu	ıblic free W	IFI							
How do you access the internet?									
Smart Phone 🛛	Laptop				Tablet [
Desktop PC	Public Co	Computer Other Other							
Which of the following have y before?	ou used	Softwar	e	Yes	I	No		Never h of it	eard
		WhatsAp	р		[[
		Google N	leets		1		[
		MS Team	IS		[[
		WebEx			[[

		Attend Anywhere Zoom Skype Other			
		(specify)			
How long have you lived in the U.K.		How long have y Trent	ou lived in Sta	ffordshire/ Stok	e-on-
Are there any barriers you fa contacting us by phone? e.g. lack credit / bad signal / no privacy					
We're trying to find a way of maki to our services without you having t person to our offices. What meth suit you best?	o travel in				
Advisors Name:					
Client Casebook Reference Number:					

Software options:

This questions were asked to establish a base point of which platforms respondents have used or heard of.



This data shows us the number of clients who had heard of each application. Most clients have heard of WhatsApp, Zoom and Skype and no one had heard of Attend Anywhere or WebEx.

What would our clients prefer?

We asked these questions: We're trying to find a way of making access to our services without you having to travel in person to our offices. What method would suit you best?

The total number of respondents was 39 and most people gave more than one option as a response. This is how often each was mentioned as an option:

Preferred Contact Method Type	Number of Times mentioned in Survey Answers
WhatsApp	15
In Person	6
Via the Phone	30
Zoom	1
Email	5
Letter	1
Facetime	1
Messenger	1
No answer provided	2

What are the main barriers that clients experience?

We asked the following question: *Are there any barriers you face when contacting us by phone? e.g. lack of phone credit / bad signal / no privacy?*

Most chose not to provide an answer to this question, however 1 in 10 responded that having no credit was a barrier; 1 in 10 told us that poor phone signal impacted them; 1 in 20 told us they had no WIFI at home; 1 respondent did not own a phone at all.

Phase 2 survey and results

This survey exercise began some 2 or 3 months further into the pandemic than the first survey. The survey group were either UK citizens or had been living in the UK for a long time. This sample was selected to gauge if there was a difference in attitude between new arrivals and longer established members of BAME communities.

The survey received 33 responses. The survey questions are shown below:

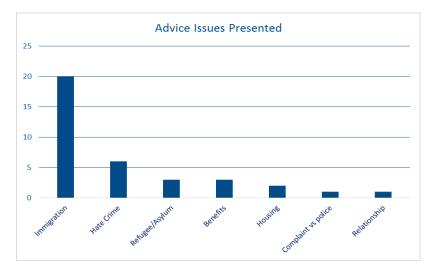
	check that the client has not	Date				
answer	ed this survey before		MM	DD	YY	
Type of Issue						
	Advisor Name:					

Which of the following ways haused to contact Citizens Advice past?	•		il phone o chat			Letter In person	
Have you currently got access to an email account? Do you know how to send documents		Yes Yes			Do yo WIFI Yes [s to reliable
via email?							
If yes, where do you access WIF e.g. home / café / friend's hous	-	-					
How do you access the internet	t?						
Smart Phone 🗆	Lapto	-			Tabl		
Desktop PC 🛛	Public	Comp	outer 🗆		Othe	er 🗆	
Which of the following have yo before?	u used	S	oftware	Ye	5	No	Never heard of it
		W	natsApp				
			ogle eets				
		MS	5 Teams				
		We	ebEx				
			уре				
			tend				
			ywhere om				
		20	UIII				
How long have you lived in Staffordshire / Stoke-on- Trent						Yes 🗆) No 🗆	
(If English is not your first language, how would you	Speakir	ng	Excellent /	⊐ Goo	d 🗆	Average 🗆	Poor <i>D</i>
rate your knowledge)	Reading	g	Excellent 4	⊐ Goo	d 🗆	Average 🗆	Poor 🗆
	Writing	5	Excellent /	⊐ Goo	d 🗆	Average 🗆	Poor 🗆
Are there any barriers you face contacting us by phone? Tick all that apply.	when	 Lack of Phone Credit □ Bad Signal □ No Wifi □ No Privacy □ Worried about needing translator □ Disability impacting phone use □ Other (explain) : 					
We're trying to find a way of m access to our services without y having to travel in person to ou offices. What method would su	find a way of making rvices without you in person to our						

best?	
Client Casebook Reference Number:	

Survey Results

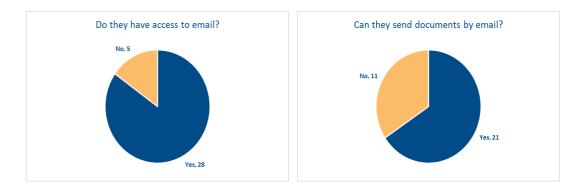
Clients surveyed had presented with the following advice issues:



The most common issue was immigration.

Ways to access the internet: Clients were able to select more than one option or respond with an 'other' response:

Ways to access the internet - Smartphone, laptop, tablet, desktop PC, Public Computer, Other	Number of Times mentioned
Smart Phone	31
Laptop	13
Tablet	7
Desktop PC	1
Public Computer	0
I only have a basic phone	1
Children Help me	1
No way to Access	1

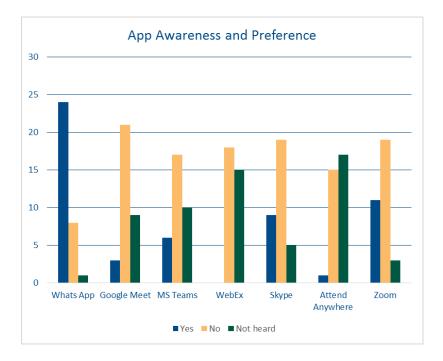


We added a question to assess the confidence and ability of clients using email to send documents. Two thirds of this client set were confident about their ability to send documents via email, however one third of the group were **unable** to do so.

Software Options:

The client set were asked about known software, to investigate whether they had heard of/used commonly available video software options.

The greater familiarity (than the first survey group) with the different software is not unexpected. However, this group were still unfamiliar with most of the platforms, and the best-known software is WhatsApp (72% had used it, and only 4% had not heard of WhatsApp at all) - as with the first survey group. It is a 'low tech' option, but clients do not have to be taught to use it, and this familiarity makes it their preferred technology. The chart below summarises the responses to the question: had they heard of/used each application?



The responses show that **clients'** knowledge of software is critical. To ignore clients' knowledge is to lock out clients from accessing advice.

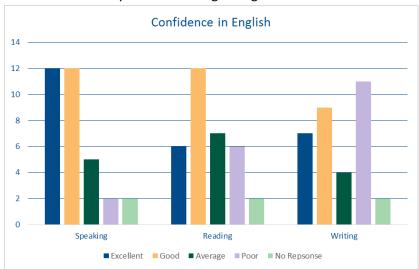
With these results in mind, our learning from the WhatsApp pilot, and learning from our discussions with Liverpool LCA (who are also using WhatsApp), we will continue to offer WhatsApp as a document transfer technology, making it available from all CASNS teams. We do not envisage using WhatsApp to offer advice.

Literacy and understanding of English:

We recognised, when initiating "Locked Out", that facility with English would be key to respondents' ability to access remote services. We expected the second survey group to have English as one of their languages as these were clients who have mostly been in the U.K. for much longer than the first survey group. We asked if English was their first language. 2 left this blank; 5 said yes; the rest (26) said no:



We asked clients to rate their literacy and understanding in English. Clients could choose from 4 options. They were asked:



How confident are you with speaking English? *Excellent* – *Good* – *Average* – *Poor*. How confident are you with writing in English? *Excellent* – *Good* – *Average* – *Poor*. How confident are you with reading in English? *Excellent* – *Good* – *Average* – *Poor*.

It is important to note that overall literacy and educational achievement rates in Stoke-on-Trent are low. So this is not necessarily just an issue that results from clients being from ethnic minority backgrounds, although clearly there are likely to be lower levels of confidence where English is not the respondent's first language.

Data from the 2011 'Skills for Life' survey indicates that more than 20% of working age adults in the city had literacy levels at Entry Level 2 or below $(7-9-\text{year-olds})^2$. Twice as bad as the national rate. The Annual Population Survey³ (Jan-Dec 2020) indicated that for adults in the city (16 - 64-year-olds) the numbers with no qualifications was 12.4% - nearly double the national average of 6.4%. Whereas the numbers in the city with the top level of qualifications - NVQ4 and above - are a third lower than the national average.

Client Preferences:

We asked survey group 2 how they would prefer to interact with CASNS service. This part of the survey allowed for 'free text' answers.

We asked: We are trying to find a way of making access to our services without you having to travel in person to our offices. What method would suit you best?

Response	Number of
	times
Phone	13
In Person	10
Blank / no response	4
Prefer face to face but phone as second option	3
Email	2
"Given that we cannot meet face to face, something like face time or live chat would be really good"	1
"Am not bothered am happy for any way to do this, face to face or over the phone or even the internet"	1
Google meet / Skype	1

Clearly telephone and face-to-face, in person access are the preferred choices of our respondents.

² https://literacytrust.org.uk/parents-and-families/adult-literacy/what-do-adult-literacy-levels-mean/

³ The Annual Population Survey (Jan-Dec 2020) indicated the following qualification levels for all persons aged 16-64 (it is survey-based and potentially subject to a large sampling error)

Appendix 2 - The hybrid refugee and asylum service - developing new ways of delivering services

Overview: The pilot was developed in mid-September 2020 following on from the initial survey result, and involved opening a Covid19 secure Drop-In service on Tuesdays, alongside a dedicated Asylum Advice telephone line running 3 mornings each week, supported by the WhatsApp facility for documents. This pilot has given the team a chance to adapt its services whilst minimising the risks posed by Covid-19 to both clients and advisers.

This team offers a hybrid service and often, once clients have attended in person, they have felt comfortable to follow up via telephone.

Users and needs served

- Refugees (with and without interpretation needs)
- Asylum seekers/failed asylum seekers (with and without interpretation needs)
- Migrants with No Recourse to Public Funds
- Staff members who are part of the Refugee and Asylum Team

Contact methods used

- Telephone lines connected to the physical office or redirected to staff members' work mobiles (at home).
- Email
- Covid19-secure face-to-face service
- Software to be trialled

Recipe followed:

1. Piloting a limited Face to Face service

This decision was reached due to the significant reduction in client numbers accessing the service. The average 'missing' client numbers showed a 75% reduction in clients, the impact of Covid-19 closure on the service. A phone service had been established at the time the office closed however, this was rarely being accessed by those 'missing' clients.

2. Considerations for a Covid-19 Secure physical service

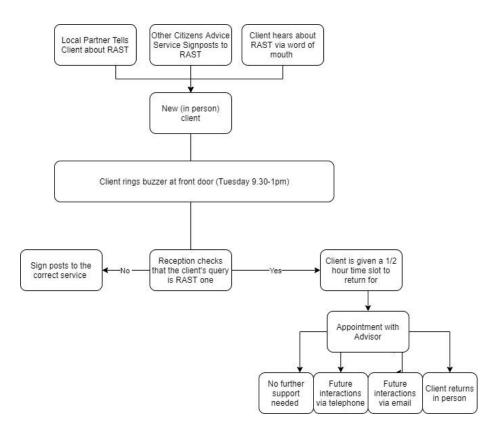
A review of the physical space was undertaken. Most interview rooms are small with no ventilation and cannot ensure sufficient distance between advisors and clients. Room 12 in Advice House is the designated Refugee and Asylum Team's room and is one of the largest available. It was decided that this room was large enough be used safely. The lack of ventilation meant that the door to Room 12 would be kept open. Under normal circumstances doors are closed (to provide confidentiality) however, with no other advice services running and minimal staff in the building, there is no risk to the privacy of the client. Clients are in the building one at a time so there is no chance of being overheard.

Other Covid19 Safety Measures

- Perspex screens in advice room separating client and advisor;
- Perspex screens around reception desk;
- Hand sanitisers next to the intercom button outside, and in between the two doors when a client first enters the building, and in the advice room;
- Clients must wear facemasks unless exempt;
- Visors and facemasks for staff;
- Cleaning materials available on the day to wipe surfaces after each interview;
- Arrows indicating route from reception to the advice room;
- No clients waiting in the waiting room, only one client admitted at a time;
- Only one adult allowed to come to a meeting for advice.
- 3. How does the client experience the hybrid service?

The team plans to minimise the number of clients attending in person and that the drop-in service will provide some clients (often new to Stoke-on-Trent and the UK) with their first interaction with the service, and encourage them to continue further interactions via telephone and email. It was also hoped that advertising the face to face drop-in service to our local partners would remind clients that the telephone service was also available.

Client's journey:



In November 2020 this hybrid was further developed by adding a referral mechanism whereby the local Asylum and Refugee Health Team provided (with consent) the contact details of newly arrived asylum seekers to the CASNS team, who then telephoned the asylum seekers to introduce the service and undertake an assessment of their needs. A proactive, early action model of working with clients, ensuring that they can be given access to advice services even during lockdowns.