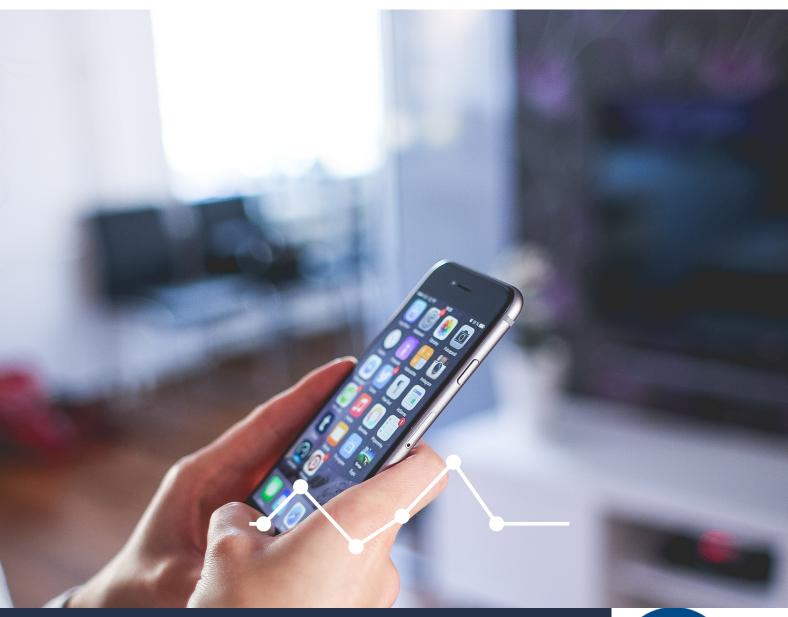
Citizens Advice York Digital Exclusion Report



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Digital Exclusion Report analysing Citizens Advice York data during the lockdown period in 2020 compared to the same time period in 2019

Introduction

The aim of this report is to highlight the changes in Citizens Advice York (CAY) client data during the lockdown period and compare these to the same time period in 2019. Upon analysis of the changes in the data it is the aim of this report to propose likely causes of these changes and the best ways to solve them moving forward into the future of CAY during the pandemic and beyond. It is also to ensure that those who are not receiving the advice that they need are addressed and accommodated so that those who need and want advice from CAY can receive it regardless of their situation.

Focus

The focus of this report is on digital exclusion because since March 23rd, CAY has been unable to have any face-to-face contact with clients and has started using webchat alongside its other advice channels. To allow a week to acclimatise to the new measures and introduction of webchat, the data selected starts at April 1st.

As York has been affected by the pandemic along with the rest of the nation, it is safe to assume people need more advice and have had more issues to deal with during this crisis. [1] For this reason, changes or reductions in client demographics to CAY are expected to be as a result of access instead of demand, however, demand for services will still be taken into consideration where the data is available. With more clients helped in the lockdown period this year compared to 2019, it falls on accessibility to CAY services and the change in advice channels to shed light on the inability of some clients to access advice and explain the changes in certain demographics seen by CAY.

As all Casebook figures show what has been recorded, it's important to bear in mind that reductions in category data could be down to lack of recording these in Casebook although all advisers are working in the same capacity as previously but remotely. All graphs and client numbers stated, unless otherwise stated, are Casebook recorded figures and relating to the period of 1st April - 20th August.

Channel

With the complete closure of West Offices and cessation of all face-to-face drop-ins, the use of channels for client interaction have changed in popularity greatly from 2019 compared to 2020 and indicates new client preferences.

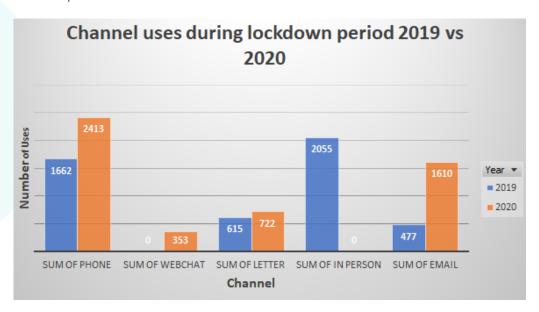


Figure 1: Column chart displaying the channel uses of activities with clients 1st April - 20th August for both 2019 and 2020 using Citizens Advice Casebook data

Despite Citizens Advice having access to the webchat service to help users since its pilot in 2015 [2], CAY started training volunteers in using webchat when the lockdown first began. The data demonstrates this with webchat not being used at all in 2019 and rising to 353 cases in the 2020 lockdown period making up 6% of total channel cases this year. This demonstrates webchat's immediate popularity as another form of communication with CAY clients. This could be because it is much faster than email and better for those more visually-inclined or in a loud setting similar to mobile users' preference to text or message rather than call especially for younger people [3].

Despite the introduction of webchat, it is the lowest used channel during the 2020 period being used less than half as much as letter and a lot less than phone and email. As clients get in contact through Adviceline and now through a callback request or webchat, these figures show how CAY gets in touch with clients but not how clients first get in touch with CAY as such (as the first interaction is the client's choice but continuing communication is usually through phone or email when contact has been established).

This data shows that webchat has promise yet it's possible that the lack of being able to speak to someone directly or the requirement for technology, reading text and remaining on the application could be less desirable aspects of webchat for clients.

An internet/video call could be a step in the right direction for those with the technology for all the benefits of the phone and many of the same as the face-to-face sessions but with no need for transport or leaving one's house.

[2] (Citizens Advice Oxfordshire :: CAB launches web chat service for clients to discuss problems online, 2015)[3] (Ofcom)

CHANNEL PROPORTIONS 2019

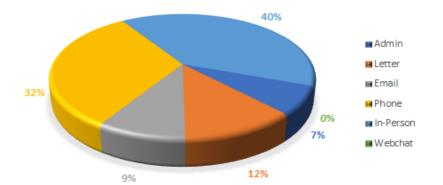
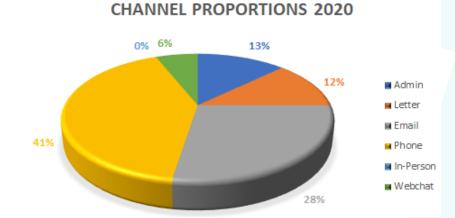


Figure 2: Pie chart displaying the CAY channel casebook data each as a proportion of the total channel data between 1st April - 20th August 2019

Figure 3: Pie chart displaying the CAY channel casebook data each as a proportion of the total channel data between 1st April - 20th August 2020



From the pie charts, we can see that the absence of face-to-face has been taken up largely by phone followed by email and then webchat with email staying the same proportionally.

As well as clients, it has been made very clear that the volunteers also have had to adapt to virtual and non-face-to-face means. Evidence for this has come from the general consensus of the volunteers, staff and bulletin. This could impact on the use of webchat if phone or email are the volunteers' preferred use of communication with clients as well as that of the clients themselves due to it being new.

Ward

With each ward of York having its own facilities, deprivation levels and difference in demographics etc, it has been useful to see how some client numbers when mapped by ward can indicate reasons for these reduced numbers when there is a distinction between wards. With some containing a number of outreaches, the CYC West Offices themselves and where they sit geographically, the characteristics of wards have been very useful in determining possible reasons for the data trends. All client maps contain the number of clients with an issue (e.g housing, employment etc) meaning clients who contact CAY without an issue are not recorded.

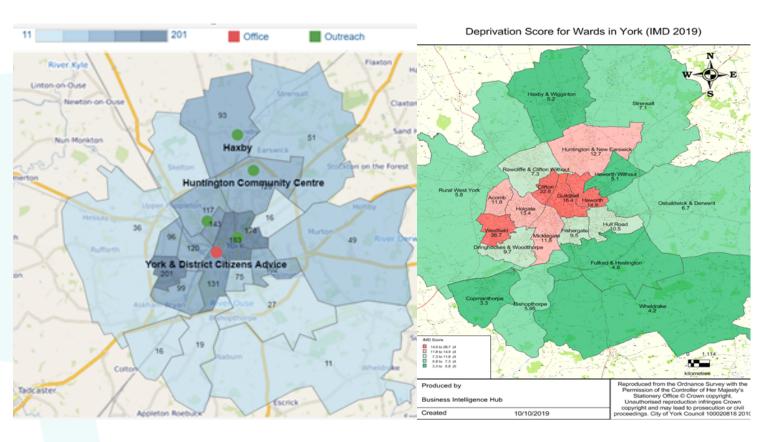


Figure 4: Maps depicting the City of York and number of Clients with an issue in the 2019 period. Left - Map divided by ward and highlighted by number of clients. Right - Map from City of York Council of York divided by ward and highlighted by Index of Multiple Deprivation. [4]

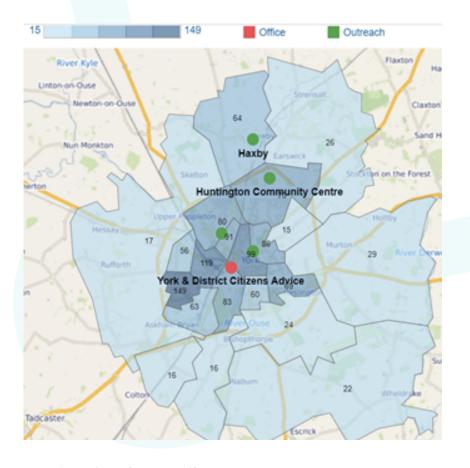


Figure 5: Map depicting the City of York and number of clients with an issue in the 2020 period displayed by ward

As seen above, there is a strong link between the number of clients from a ward and the Index of Multiple Deprivation with there being greater numbers of clients from wards with higher Indices of Multiple Deprivation. With Haxby & Wigginton being the exception, all areas valued at IMD 7.3 to 26.7 (or lightest green to red) have client numbers 51 to 149 (and are the darkest shaded). This gives evidence that more of those requiring advice are those from most deprived wards and are then getting the most advice. The exception of Haxby & Wigginton could be due to the presence of the Haxby Outreach. This could highlight that the outer wards (at least in 2019) are lower in number as a result of a low IMD but also combined with the absence of a local CAY outreach and large distance from the main office.

From the maps, we can see that client numbers for 19 of the 21 wards have decreased in 2020 compared with 2019. This is likely to be as a result of lack of access both digitally and physically with no face-to-face drop ins. Numerically, the most deprived and most visited wards in 2019, with the exception of Holgate, saw the greatest reductions in clients in 2020 compared to 2019. As a proportion of 2019 clients, the greatest reduction in clients is splayed across the wards. With the greatest numerical reductions in the largest attended clients wards but seemingly random percentage decreases, it looks as though the reductions are across the city and could be down to access or need of York residents as a whole.

Age

Age was expected to be significant in reduction of client access due to a lack of digital access and confidence. With 2018 ONS data showing that 29% of 65+ year olds say they have 'never used the internet,' it brings into question how they will stay connected and find contact details including for CAY without being able to visit face-to-face. [4]

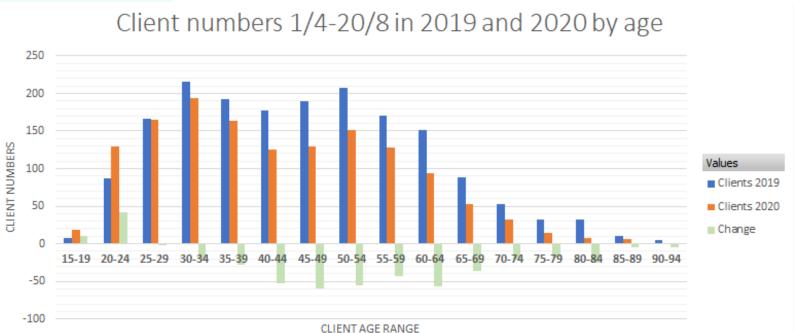


Figure 6: Column chart displaying the CAY age casebook data between 1st April - 20th August for 2019 and 2020 along with the difference between them.

From the age data of those clients whose age was recorded, it's clear to see that only the age ranges of 15-19 and 20-24 year olds increased comparing 2020 to 2019 with 45-49 and 60-64 year olds having the highest numerical decreases. This could be attributed to the increased problems young people face during the pandemic and also the ease of access using phone, email and webchat means to get into contact.

As there was an overall decrease in client numbers for all age ranges collectively of 21%, the increase of 15-24 year olds is a stark difference to the rest of the data.

Additionally, we are yet to have a 90-94 year old client in this lockdown period compared with last year's count of 5. The decline in clients from age 50 onwards in both 2019 and 2020 could highlight an access issue that has been further exacerbated as from 50-54 year olds to 55-59 year olds all the way up to 90-94 year olds, the numbers decline greatly in 2019 and these have fallen further in 2020. These reductions in 2019 could be due to the increase in geographical isolation - as it is harder for older people to leave their homes and transport to the office/outreach especially to make use of a bus when clients line up for face-to-face sessions out of the door by 8:30 am. The then further decreases in 2020 compared to 2019 could be due to digital isolation as older people are more likely to be without the confidence, skills or motivation to be connected digitally.

[5] Prescott

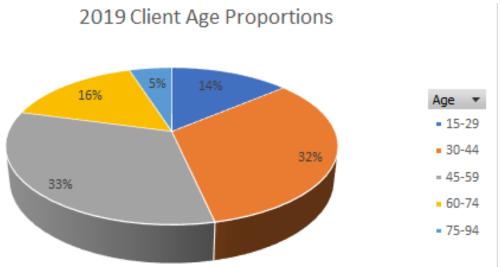
With 53% of the UK's over 75s not being recent internet users (using it within 3 months of the survey), it's clear this is a contributing factor to these low numbers. [4]

The average age of this data has fallen from 46.5 years of age in 2019 to 42.7 years of age in 2020 showing a shift to the younger age. This, along with the 0 count in 90-94s and larger percentage decreases in the older age brackets provides evidence of reduced access to older people.

After the 100% decrease in 90-94 year olds mentioned above, the greatest percentage decreases are 80-84 year olds with a decrease of 78%, followed by 75-79 year olds with a 56% decrease, 85-89 year olds with a reduction of 45% and both with 65-69 and 70-74 year olds with a decrease of 40%. With the 1st to 6th greatest percentage decreases in the highest age ranges it's clear older people have been negatively affected by this pandemic in terms of accessing advice from CAY.

Below are charts to show the proportion sizes of these age groups to demonstrate their change over time.





2020 Client Age Proportions

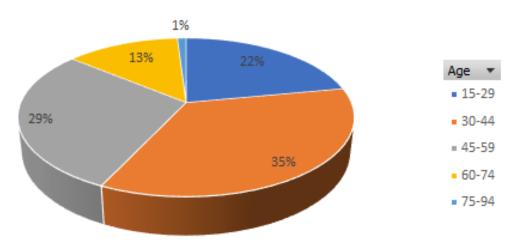


Figure 8: Pie chart displaying the client ages as proportions between 1st April - 20th August 2020

To shed more light on the over 60s that could be making use of bus travel, we can see geographically how these client numbers have changed. These are maps of clients with an issue in the periods in 2019 and 2020

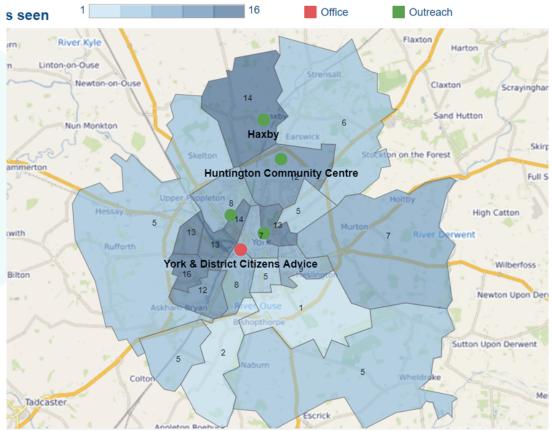


Figure 9: Map depicting the City of York and number of clients over 60 with an issue by ward in the 2019 period.

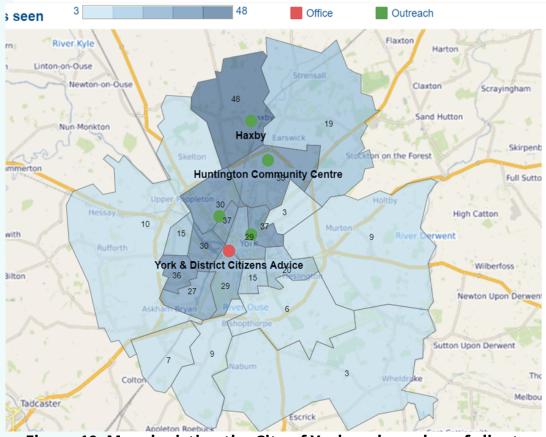


Figure 10: Map depicting the City of York and number of clients over 60 with an issue by ward in the 2020 period.

From the mapped data, every ward excluding 2 out of the 21 have had decreases in clients over 60 years of age from these areas with Wheldrake and Heworth Without seeing an increase by 2. It looks as though the outer wards have been less affected than those wards in the centre with some such as Heworth, Clifton and Guildhall having comparably larger numerical decreases. Surprisingly, Haxby & Wigginton has had the largest numerical decrease despite being one of the outer wards.

It looks like those wards centred around the main office and those around the main outreaches receive the most clients over 60 years old and have therefore had the greatest reductions due to the lack of face-to-face.

With national and local calls for evidence regarding medical notes, identity and wait times all with regards to PIP and ESA and repeat prescriptions which have remained since last year, it's clear those with disabilities, long-term health conditions and the elderly all required noticeable help with varying issues last year. With all of the uncertainty this would be expected to remain or increase so the decrease in these client numbers in general and across wards shows a need for increased access.

Disability

Disabilities affecting mobility and travel affected negatively on access to the office's face-to-face drop-in sessions. These drop-in sessions accounted for 39% of the interactions with clients in the 2019 'lockdown' period making the quality of interactions for those who need both visual and auditory contact for issues such as filling out forms etc in 2020 lower. There were possibly some who couldn't get physical access to the sessions which decreased the quality of advice they could get through email or telephone if requiring extra support. The COVID pandemic has certainly exacerbated these problems with no option for face-to-face drop-in sessions especially for those requiring extra support.

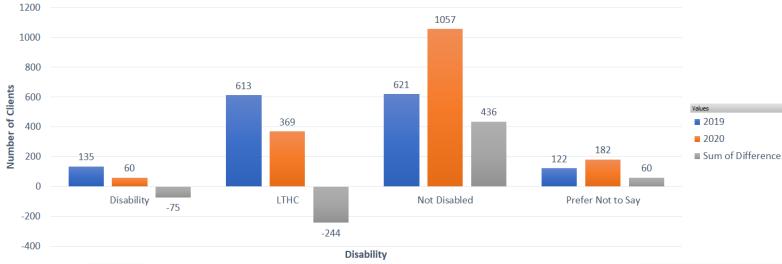


Figure 11: Column chart displaying client numbers recorded in each disability category in the lockdown period in 2019 and 2020

From the data, it's apparent that there have been significant decreases in groups identified as having a disability and those with a long-term health condition including mental health.

The Disability numbers diminished by over half (-56%) with those labelled as having a 'long-term health condition' falling by 40%. This stark difference with those characterised as 'not disabled' rose considerably by 70%. This complete difference in change numerically and proportionally shows these changes are significant to those with disabilities and health conditions.

Looking purely at virtual/not face-to-face client interaction, disabilities of many varieties can impact and restrict one's ability to access this especially on the phone. Mental health conditions such as anxiety, physical both sensory and non-sensory disabilities make picking up the phone all that more challenging and with telephone picking up the slack for activities from face-to-face visits, people with these challenges have a greater limit on how they can seek advice.

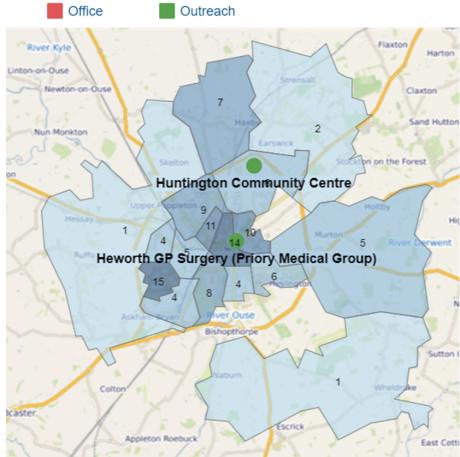
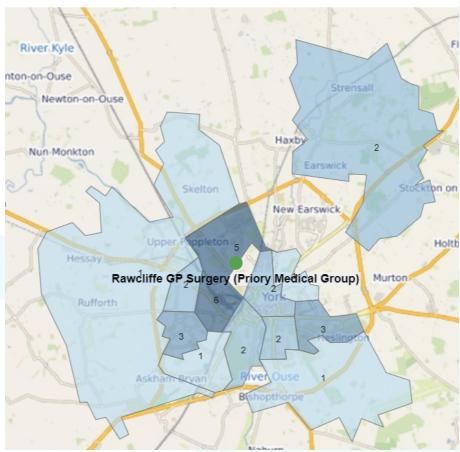


Figure 12: Map depicting the City of York and number of clients recorded as disabiled with an issue by ward in the 2019 period.

Office



Outreach

Figure 13: Map depicting the City of York and number of clients recorded as disabiled with an issue by ward in the 2020 period.

These maps show that overall there have been many reductions in clients with disability receiving advice from most wards. Those in the centre have seen decrease of 40-100% with some of the ward with higher numbers in 2019 such as Clifton and Haxby & Wigginton going from 11 and 7 respectively down to 0. This provides further evidence that areas in the centre and around outreaches and indeed certain demographics aren't able to access the advice they need with West Offices and outreaches closed.

We can see that Holgate gained an extra client from 5 to 6 being one of two wards to see an increase in clients (along with Fulford & Heslington increasing from 0 to 1). Looking at the gaps is also enlightening with 4 wards recording 0 disabled clients between 1st April and 20th August 2019 doubling to 8 in 2020 meaning no clients from over 38% of the wards in 2020 were disabled.

Looking more specifically at Long-Term Health Conditions such as Mental Health and other health conditions not categorised as disabilities from the map below, it looks as though clients with these conditions have decreased at similar rates shown by the shading of the maps being comparably similar. All the outer wards show the fewest clients similarly to all the maps examined previously in the report. This gives strong evidence that in all demographics and therefore overall, there are fewer clients from York's outer wards due to geography and the decreased use and lack of knowledge of Citizen's Advice leads them to use the service less even through telephone and webchat.

On the other hand, it could also be as a result of lower Indices of Multiple Deprivation as seen in Figure 4 but this is hard to tell without further and more personal research with the residents.

Another explanation could be regarding knowledge and previous use of CAY. Many if not most clients are seen with more than one issue they would like advice for leading many to return. This could explain the similar comparative levels in clients by ward as although all are reduced, the more clients that used CAY in 2019 could mean the more that think of CAY when they need advice and so leads to more comparable engagement in 2020. This could lead to question CAY's reach to the outer wards and whether there is enough knowledge and exposure to the outer wards for those residents to know about and use the service when they need it.

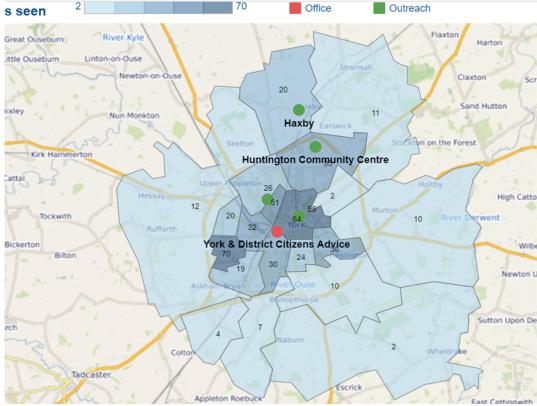


Figure 14: Map depicting the City of York and number of clients recorded as having a Long-Term Health Condition with an issue by ward in the 2019 period.

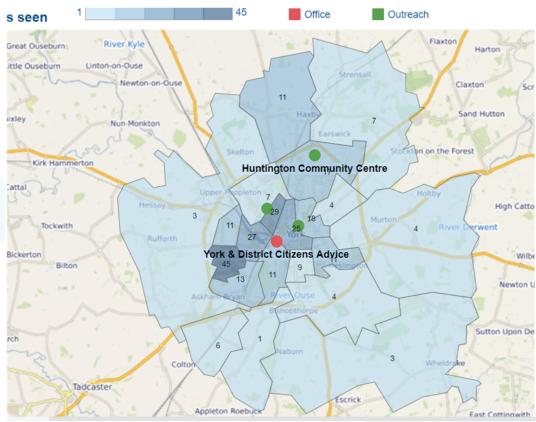


Figure 15: Map depicting the City of York and number of clients recorded as having a Long-Term Health Condition with an issue by ward in the 2020 period.

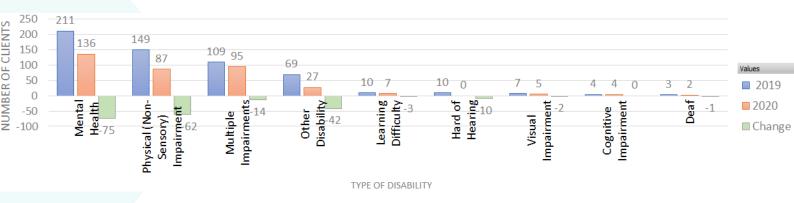


Figure 16: Column chart showing client numbers recorded with each type of disability in the lockdown period in 2019 and 2020

From the data, we can see that numerically, mental health and physical, non-sensory disabilities have had the greatest decrease but clearly compared to all of the 2019 data, clients of all disability types have decreased except for cognitive impairment which has remained equal. This is worrying as the number of clients recorded as non-disabled has increased. This means that there hasn't been a decrease in all clients but the reduction applies specifically to those with Long-term Health Conditions and Disabilities. There is therefore significance to this decrease of advice given to those with disabilities.

Although it is true that PIP, ESA and UC reviews and reassessments were extended for 3 months and this may lead to reduced client issues, those with disabilities are just as likely, if not more, to require advice for other matters. This decrease could be as a result of restricted access to advice. Moreover, due to the calls for evidence regarding PIP and ESA both nationally and locally, these remains an issue regarding these. This could indicate that people are still needing advice for these initiatives nationally and so the reduction is not due to lack of need. Either way this is just summation.

Percentage wise, no clients considered to be hard of hearing have been seen during this lockdown period compared to 10 last year. This could indicate auditory access issues for these people. The next greatest percentage decreases were those with Type Not Given/ Other Disabilities (61%), Physical, Nonsensory Disability (-42%) and Mental Health (-36%). These are quite a mix of categories ranging from physical, mental, sensory and other ao it is unclear whether these decreases are linked by a common factor other than disability.

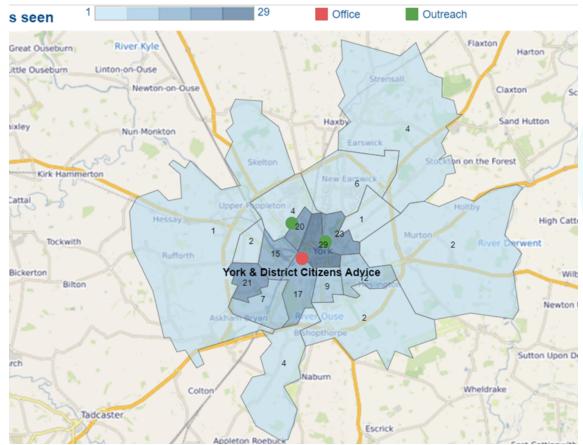


Figure 17: Map depicting the City of York and number of clients with an issue recorded as having Mental Health issues by ward in the 2019 period

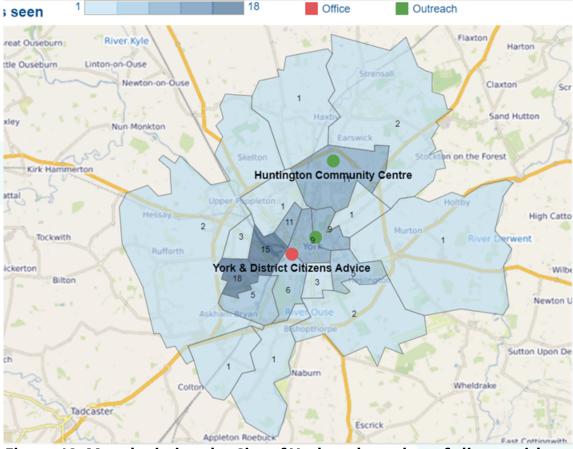


Figure 18: Map depicting the City of York and number of clients with an issue recorded as having Mental Health issues by ward in the 2020 period

In Figures 17 and 18, we can see that they tell a similar story to the maps of Long-Term Health Condition (LTHC). As Mental Health is included in the LTHC category this is certainly something to take into consideration seeing as Mental Health was a component of those numbers. We can see, however, that the outer wards have such few numbers of clients with mental health with all between 0 and 4 in 2019 and between 0 and 2 in 2020. It looks again like only those in the centre wards with more CAY offices/outreaches and higher IMD have the largest numbers reaching double digits in both years. Like many other maps, it looks like there is a lot lower engagement from the outer wards than the inner ones near to the West Offices and that these inner wards also have great decreases from 2019 to 2020. As well as the reasons mentioned before, this could be a case of availability because face-to-face sessions were most popular and those in outer wards would have to travel longer (and queue) in order to be seen and that's if they have time to visit West Offices with other commitments.

Gender

Gender, contrary to the 2 demographics above has observed no proportional changes. Those identified as female decreased by 23% and those identifying as male fell by 20% with the gender ratio remaining as 61% female and 39% male in both 2019 and 2020.

2019 GENDER

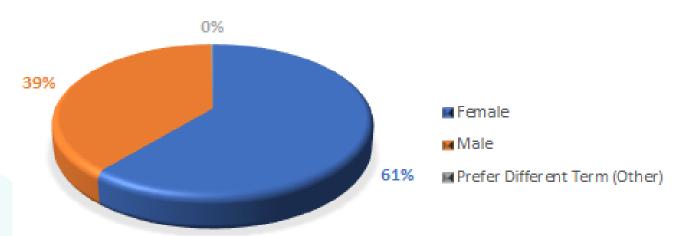


Figure 19: Pie charts showing the proportions of recorded gender of clients in the 2019 period

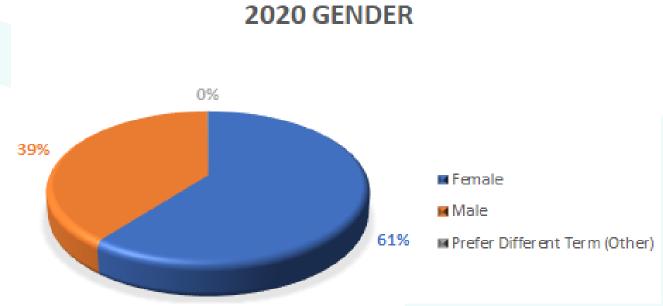


Figure 20: Pie charts showing the proportions of recorded gender of clients in the 2020 period

Conclusion

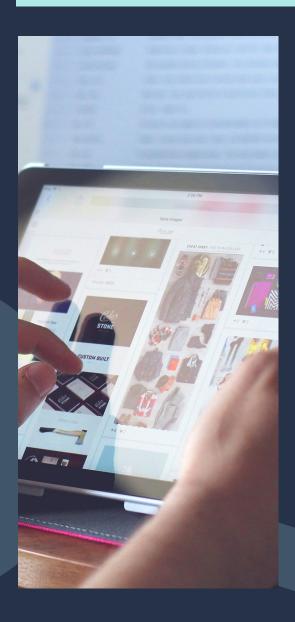
Overall, it's clear to see how much of a negative impact the pandemic has had on people's lives and how this has led to the increase in the need for advice. Unfortunately due to the closure of West Offices and face-to-face drop-ins which account for such a high number of client interactions, advice has been harder to access for certain demographics.

Advice as a whole has been compromised as without the ability to both see and hear an adviser, communication is less clear and the advice is harder to understand when solely read in text or heard over the phone. Clients facing other barriers such as communication issues over the phone due to mental health, lack of internet access and not knowing how to contact CAY or disabilities restricting access/ability to communicate etc has meant they are negatively affected further when accessing advice.

It is very positive to see an increase in client numbers and activities completed for clients showing how well CAY has adapted to the pandemic and continued to advise and communicate with clients. However, the only noticeable demographic stats increasing is that of those clients recorded as being of younger age groups and identified as not disabled. This means CAY may need to adapt and change with the pandemic more to be able to cater to everyone especially those most in need and also the pandemic may have given more concrete evidence for those who were already facing challenges but these have been exacerbated by the increased restrictions.

After collating and analysing this data, talking with others involved in digital inclusion in York and doing my own research, I will list recommendations I think will improve CAY's reach and accessibility in order to advise those most in need during this COVID world and beyond it and shape CAY for the better.

Recommendations for Future Focus



Integration of video calls to the virtual service

In order to combine auditory and visual communication, utilise the sudden surge in video call platforms and make communication easier for deaf, non-English-speaking, hard of hearing and many other people. Creation of a virtual drop-in with waiting room would make advice more personal, easy to access, easier for client and adviser due to no travelling.

A Consultant Digital Services Account Manager from Attend Anywhere reached out to me on LinkedIn with this platform which fits the criteria of this recommendation and is being used by the NHS and is being rolled out by CAB Wales: https://lnkd.in/gKqiJKZ

System Streamline

Some sort of process to direct people depending on their issue(s) and individual needs to certain channels/media to streamline the advice process and alleviate pressure on the face-to-face drop-in sessions when they start up again. This could ensure the same quality for drop-in for those requiring extra accessibility and make the advice process more efficient. The website could have a filtering system to direct clients to relevant material to possibly solve their issues themselves and lead to webchat if not. This would free up face-to-face and telephone calls for urgent issues or those requiring real-time help.

Collecting data on people's digital access capabilities

Although digital access has been increasingly important year on year, this lockdown has made digital the only access for a long amount of time with banks, charities, community centres and shops operating solely online for a time. As the world and every day necessities become more digital, it's important to know which clients have digital accessibility issues whether it be searching the internet to contact CAY or online banking. With 8.9% of York adults offline there are many in York missing out due to digital exclusion. [6] To increase accessibility especially for those already isolated due to geography or travel, It may be good for CAY to ask clients when trying to highlight other issues a client has (which is policy) what extent they are digitally accessible. I suggest to help with this CAY could work alongside the digital accessibility campaigns of 100% Digital City York and others to ensure everyone in York has digital access if they want it.

Survey about Webchat

To take full use of webchat to open up an easier, virtual, availability-dependent and seamless medium, I think a survey to webchat users both client and adviser would be beneficial to learn of the reactions of both giving and receiving advice on the platform to improve it and find out whether advisers have acclimatised to its use. Although making up 6% of channel uses, I think webchat can become a larger channel of use.

Keep the opportunity for virtual volunteering

In order to ensure all advisers are happy where they are volunteering and increase flexibility, virtual volunteering should remain even when face-to-face recommences. With an increase in new clients and activities in the 2020 lockdown period, it is clear that the flexibility, lack of commute and choice of channel such as email or webchat could entice volunteers to volunteer more where they can still live their lives normally at home and not have to worry about commitments as much as when needing to go into the office.

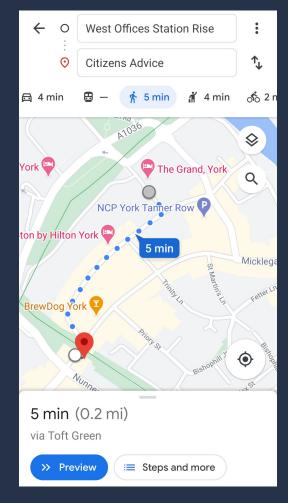
Promote Citizens Advice especially in ways to reach older and younger people, those with disabilities and mental health and people in the outer wards

Many people I talk to don't know about Citizens Advice and I've found those who do know about it hear about it anecdotally from others. I think a great many people need the help from CitA and CAY but don't know about it especially with things continuing to become more digital during the pandemic. Any form of marketing whether it be an email to the universities in York to mention or leave links to, posters in GPs or other marketing. I have seen that CAY's Facebook and Twitter are very active but don't receive much engagement. Discovering new ways to notify people about the organisation and all the good it does must go further than just word of mouth as society becomes more digital. Carrying on the pop up outreaches that have been done during COVID such as at universities, community centres, libraries etc or at York events is one possibility.

Correct location of Citizens Advice York on Google Maps

The location for Citizen's Advice York is incorrect on Google Maps which could confuse those trying to visit for a face-to-face for the first time. This can be accomplished by following the steps in this link:

https://support.google.com/business/answer/2853879?hl=en-GB



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