

Annex C: The role of communities and connections in social welfare legal advice: Additional data informing the findings of the report

*Principal Investigator: Dr Sarah Nason (Bangor University);
Research Team: Dr Peter Butcher (Bangor University); Lindsey Poole and Faith Osifo (UK Advice Services Alliance); Dr Lorien Jasny and Susanne Hughes (University of Exeter); Dr Susanne Martikke (Greater Manchester Centre for Voluntary Organisation); Dr Sara Closs-Davies (University of Manchester)*



Acknowledgments

This project has been funded by the British Academy and Nuffield Foundation collaboration on Understanding Communities.

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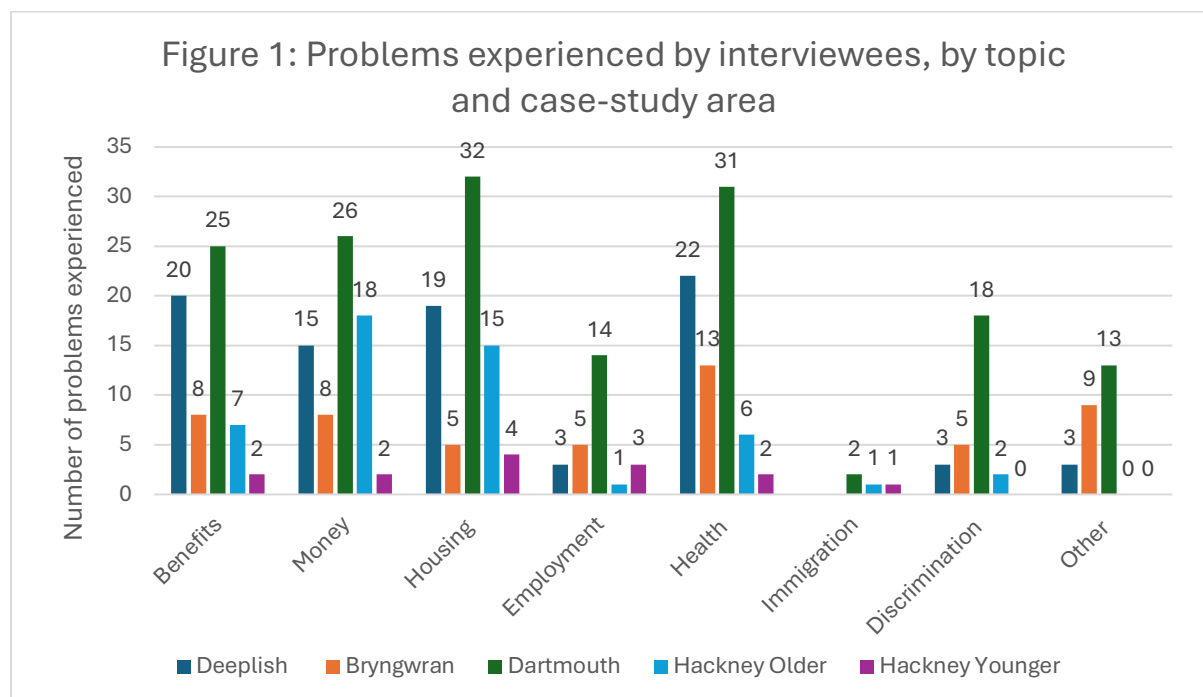
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1. Problems experienced by interviewees

Figure 1 shows the total number of problems experienced by interviewees, by topic and case-study area. It should be noted that most interviewees experiencing problems experienced more than one problem.



2. Social networks comparisons

2.1 Comparing the composition of social networks

2.1.1 Family

Figure 2.1.1 Comparative Percentage of Social Ties that are Family

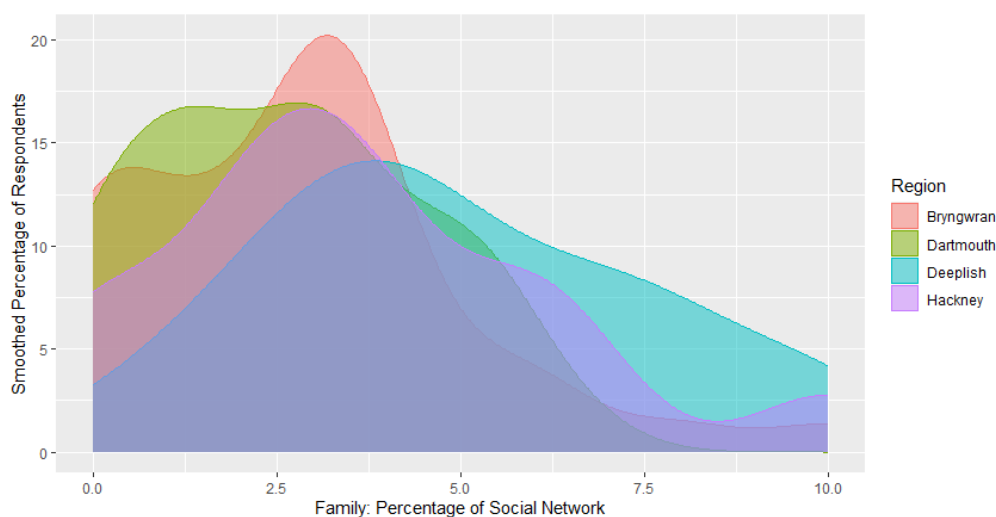


Figure 2.1.1, above, shows, on the X axis, the percentage of social alters (people) in a network that were family members, with the Y axis (density) showing the proportion of all the networks that had this percentage of social alters who were family members. This is a density plot comparing the social networks across the case-study areas, and shows a smoothed version of the distribution displaying its overall ‘shape’. Deeplish interviewees had the highest percentage of alters who were family members within their social networks, as the larger shaded area is more towards the right of the graph (higher percentage of alters being family members) followed by Bryngwran, Hackney and then Dartmouth (where a larger proportion of the shaded area is to the left of the graph).

2.1.2 Friends

Figure 2.1.2: Comparative Percentage of Social Ties that are Friends

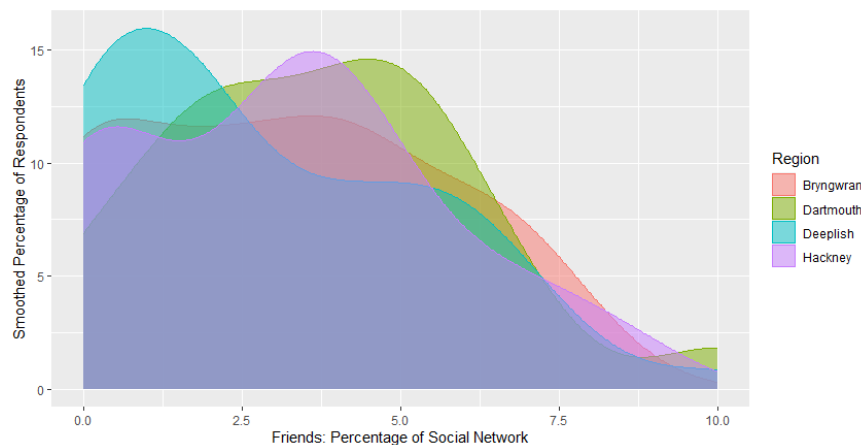


Figure 2.1.2, above, shows the percentage of social ties (people) in the networks that were friends of the ego (interviewee). Dartmouth and Bryngwran interviewees generally had the highest percentage of alters who are friends in their social networks, closely followed by Hackney, and then Deeplish with the lowest percentage of network alters classed as friends (as we see much of the shaded area for Deeplish to the left).

2.1.3 Other types of social alters in the networks

Although other types of people made up only small percentages of most people’s networks, it is worth mentioning that service providers formed a higher percentage of the alters in people’s social networks in Dartmouth as compared to the other case-study areas. Service providers were the third most common type of alter in Deeplish (after family and friends). Neighbours formed the third most common type of alter in Hackney (after family and friends) and the fourth most common type of alter in Deeplish and Bryngwran (after family, friends and service providers), whereas people in Dartmouth were more likely than those in any other area to refer to having acquaintances in their networks. People of faith were more commonly included in the social networks of people in Deeplish and Hackney, and local councillors were notably more commonly mentioned in Dartmouth especially, but also in Bryngwran, as compared to other areas.

2.2 Social networks and wellbeing

Figure 2.2.1: Network Size and Life Satisfaction

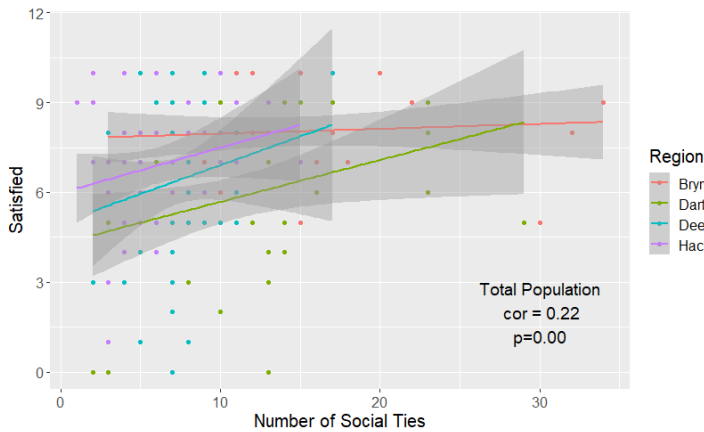


Figure 2.2.2: Network Connectedness and Life Satisfaction



We asked interviewees several questions about their wellbeing, including current life satisfaction and the extent to which they feel things they do in their lives are worthwhile (on a scale of 1 to 10). People in Bryngwran had the highest average scores (7.9 satisfaction and 8.6 worthwhile), followed by older Hackney interviewees (7.0 satisfaction and 6.9 worthwhile). Dartmouth saw the largest gap between life satisfaction (at 5.9) and perceptions of a worthwhile life (at 7.3). Younger Hackney interviewees had a satisfaction average of 6.2 and worthwhile average of 6.9, with Deeplish interviewees at 6.4 for both satisfaction and a worthwhile life. Figure 2.2.1, above, shows that, generally, those with both larger networks (more social ties) reported having higher levels of life satisfaction, which aligns with existing social networks research. In Figure 2.2.2 the X axis, social network connectedness, represents the connectedness of social networks, determined by looking at total number of connections (known as ‘social ties’) the interviewee reports amongst the people in their social network normalised by the size of their social network (referred to as the ‘average degree of alters’ or the ‘density’ of the networks). This is effectively a measure of social connectedness based on how many people in the network both know the interviewee and know each other. Figure 2.2.2 shows that people with more connected networks generally reported higher levels of life satisfaction. It is only Deeplish that doesn’t seem to follow this pattern when comparing the connectedness of networks to reported levels of life satisfaction. Deeplish interviewees had larger households than average across our case-study areas and were, on average, middle-aged (an age group which commonly reports lower levels of life satisfaction), and, in our qualitative interviews, several of those reporting comparatively low life satisfaction reflected on the challenges they faced in the context of large and more close-knit families. These features may be relevant here, though of course there could be several other factors at play. The same trends are shown in Figure 2.2.3 and 2.2.4, below, relating to worthwhile life. Again, only in Deeplish are more connected social networks associated with negative trends in wellbeing.

Figure 2.2.3: Network Size and Worthwhile Life

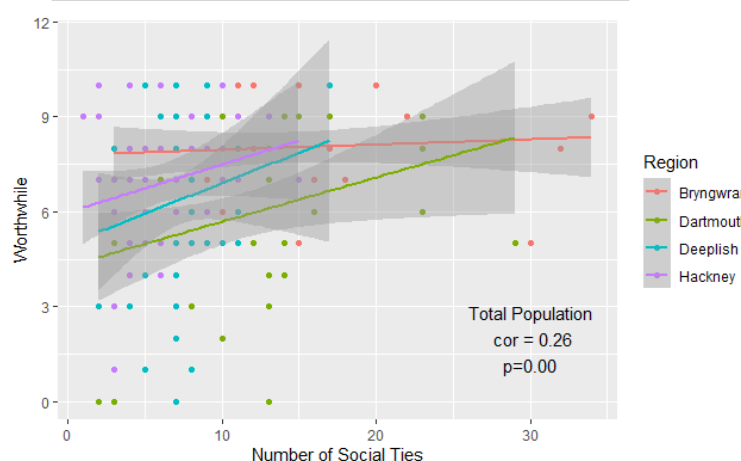
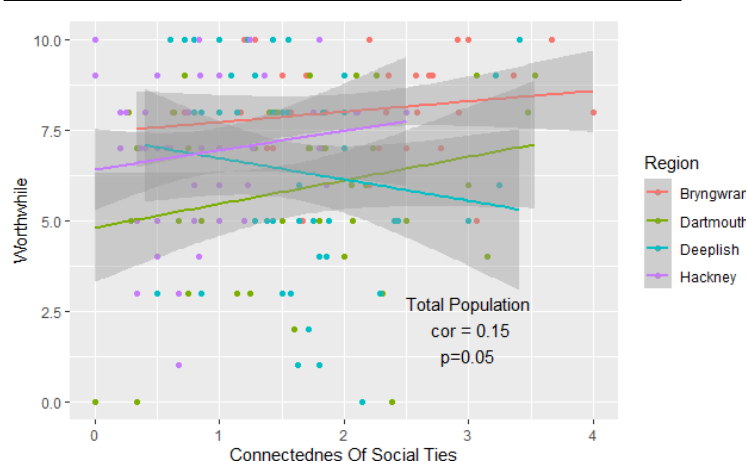


Figure 2.2.4: Network Connectedness and Worthwhile Life



2.3 Social networks and interviewee characteristics

The following images examine the relationship between interviewees' characteristics across the whole dataset, and the size and connectedness (here referred to as 'density') of their social networks. Some of the images are Box-and-whisker plots which show the relationship between a categorical attribute (e.g., gender, disability status, employment status and ethnicity) and a continuous variable (e.g., size of the social networks (number of social ties) and connectedness of social networks (here referred to as 'density')). The categorical attribute is shown across the X axis with the labels at the bottom. The continuous variable is on the y-axis. The mean average of the Y variable is shown as the dark black line in the centre of the box. The height of the box shows the range of the middle 50% of the distribution – so the bottom of the box shows where the bottom 25% of the responses start and the top shows where the top 75% starts. The whiskers (the little lines coming out from the top and bottom) show where the full distribution would lie if it was a normal distribution (in other words, what the minimum and maximum would be). The black dots then show if there are any outliers from the empirical data outside this distribution.

In our Annex A Methodology we provide the full list of questions we asked interviewees. In terms of employment, there were eight possible answers, including working full-time, part-time etc., as well as an 'other' and 'prefer not to say' option. Figures 2.3.1 and 2.3.6 below represent the most common answers, which were: working full-time; working part-time; retired; and not working due to a health condition or disability. In Figures 2.3.2 and 2.3.7 below, 'true' means that the interviewee had a long-term health condition, impairment or disability that restricts them in their everyday activities and has lasted, or is likely to last, for 12 months or more, while 'false' means they did not have such a condition. The images show that these individual characteristics were not, generally, statistically significant in relation to the size and connectedness (density) of social networks. There are some possible relationships with age, for example, Figure 2.3.4 shows that, whereas in Dartmouth age appears to correlate to larger social networks, in Hackney age appears to correlate to smaller social networks. Figure 2.3.5 appears to show that higher levels of formal education correlate to larger social networks in Dartmouth, and possibly in Hackney, but that this is not the case for Bryngwran or Deeplish.

Fig 2.3.1: Size of networks & employment status

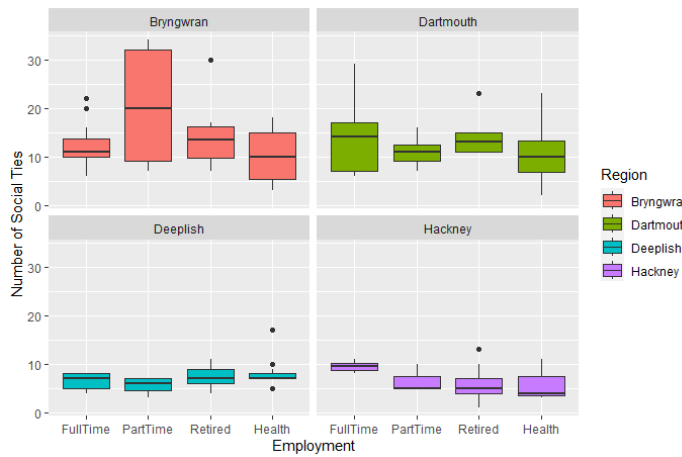


Fig 2.3.2: Size of networks & illness/disability

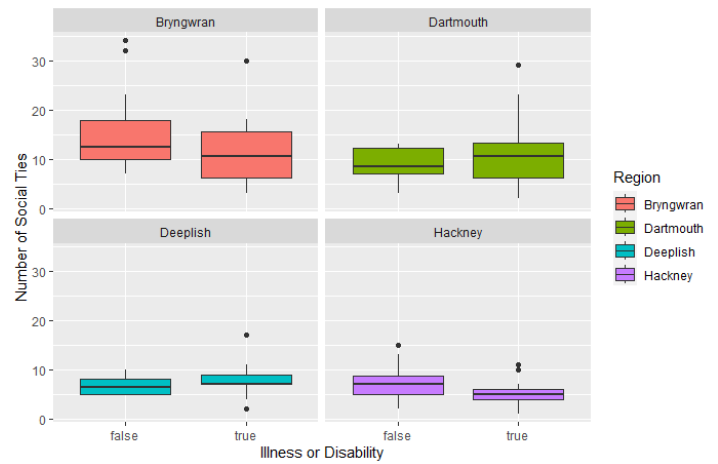


Fig 2.3.3: Size of networks & gender

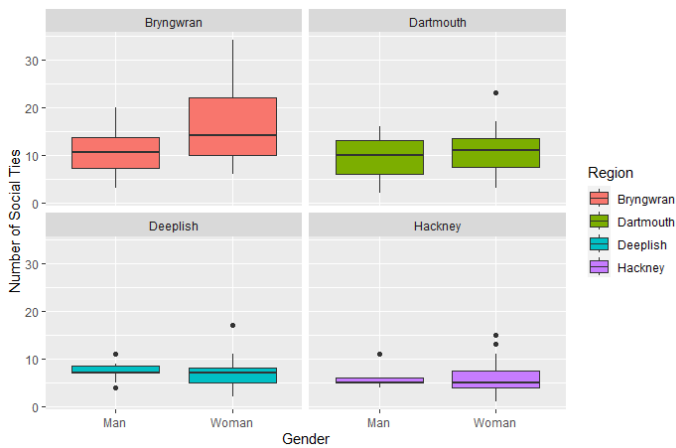


Fig 2.3.4: Size of networks & age

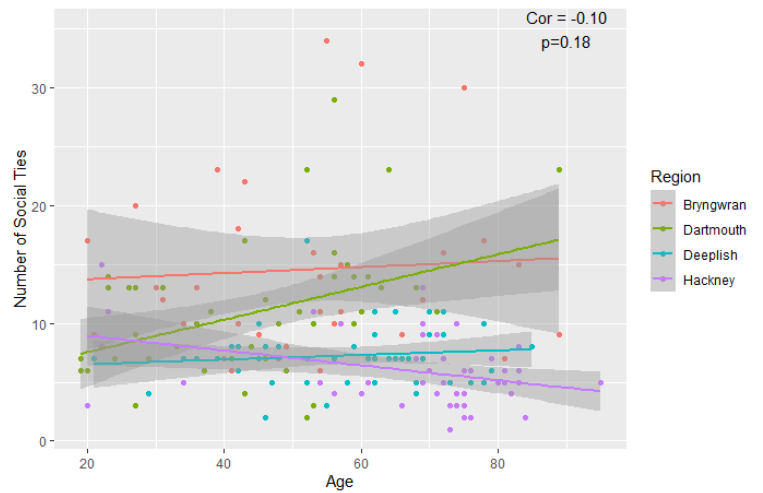
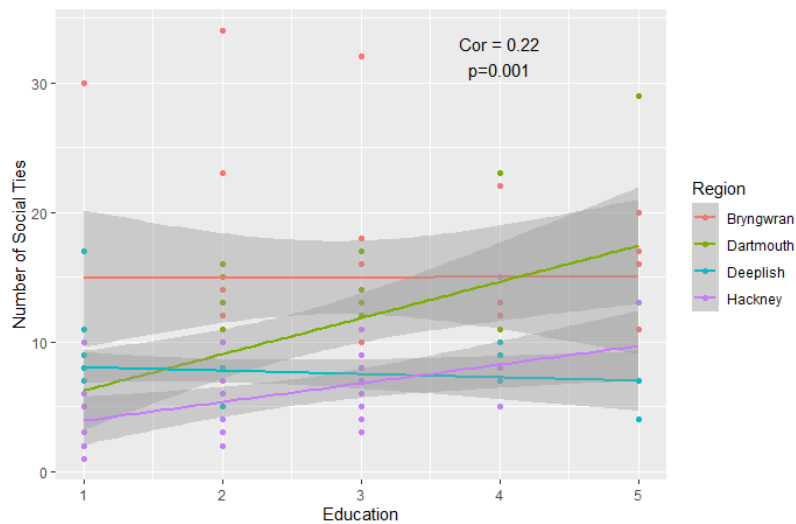


Fig 2.3.5: Size of networks & education



In Fig 2.3.5

**1 = no formal educational qualifications
2 = GCSE or equivalent
3 = A level or equivalent
4 = Undergraduate degree
5 = Postgraduate degree**

Fig 2.3.6: Connectedness of networks & employment

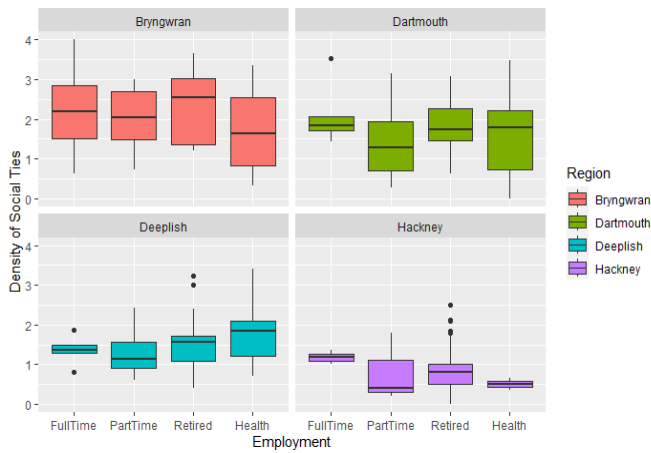


Fig 2.3.7: Connectedness of networks & illness/disability

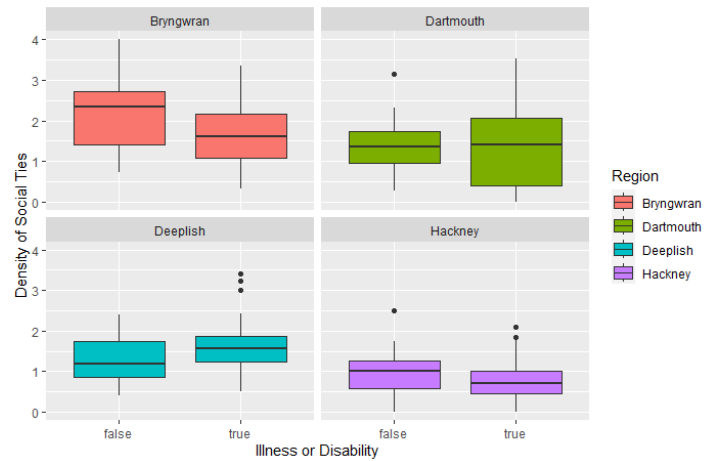


Fig 2.3.8: Connectedness of networks & gender

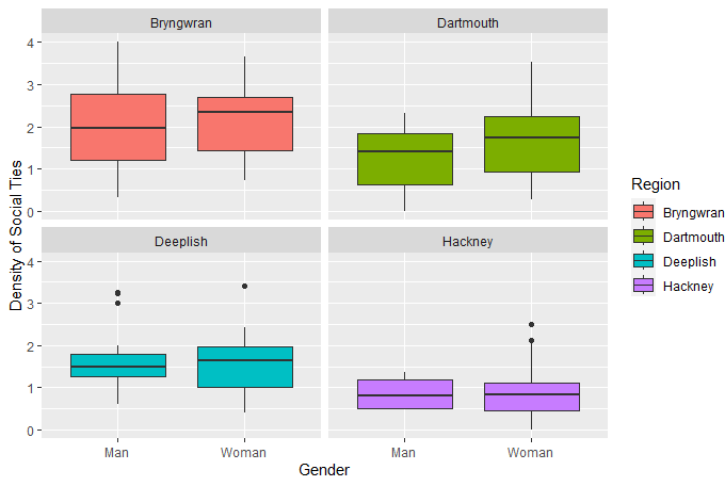


Fig 2.3.9: Connectedness of networks & age

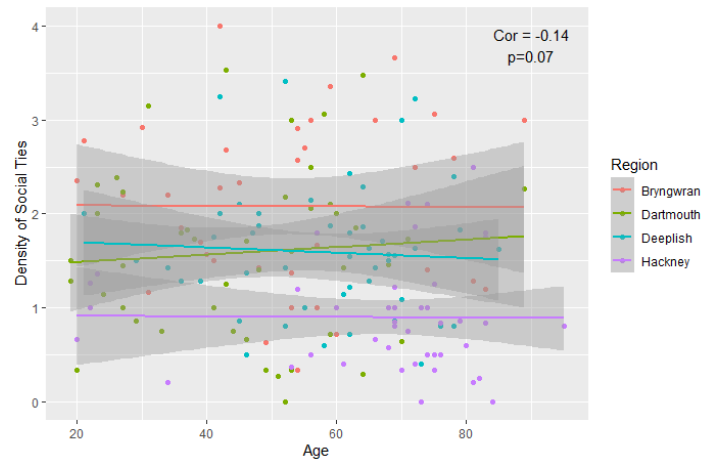
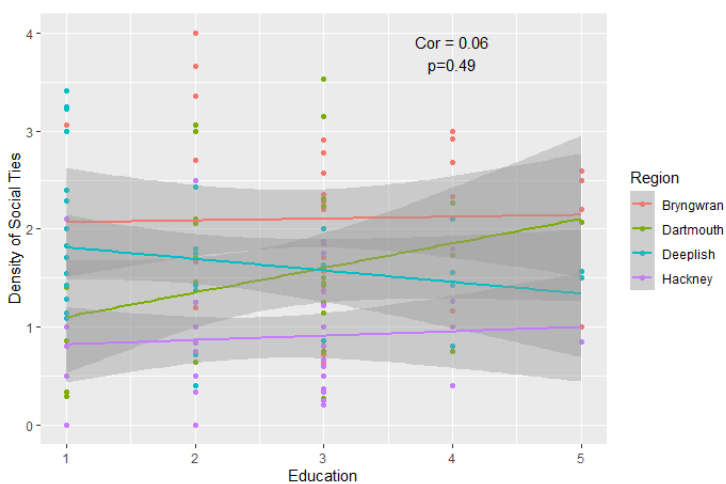


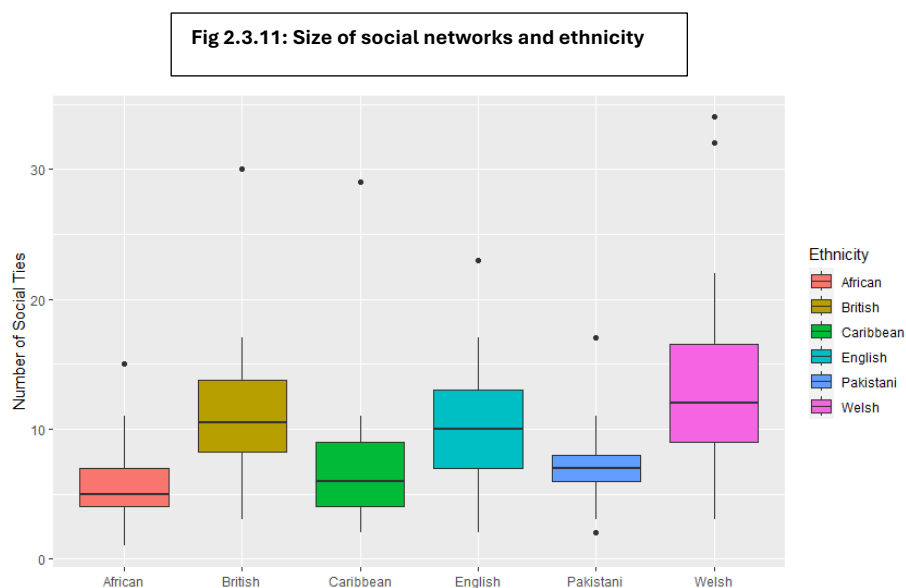
Fig 2.3.10: Connectedness of networks & education



In Fig 2.3.10

- 1 = no formal educational qualifications**
- 2 = GCSE or equivalent**
- 3 = A level or equivalent**
- 4 = Undergraduate degree**
- 5 = Postgraduate degree**

Figure 2.3.11, below, shows that there is a correlation between the size of social networks and ethnicity, with people describing themselves as African generally having the smallest networks and people identifying as Pakistani also having comparatively small networks. There is also only a small difference between the largest and smallest social networks of Pakistani people in the study. People identifying as Welsh notably had the largest social networks. Our interview questions (which can be seen in Annex A Methodology) included a much longer list of ethnicities, with the option for people to select multiple ethnicities. The data presented here is for the most common ethnicities reported and for those interviewees who selected just one of these ethnicities. Only a very small number of interviewees selected multiple ethnicities.



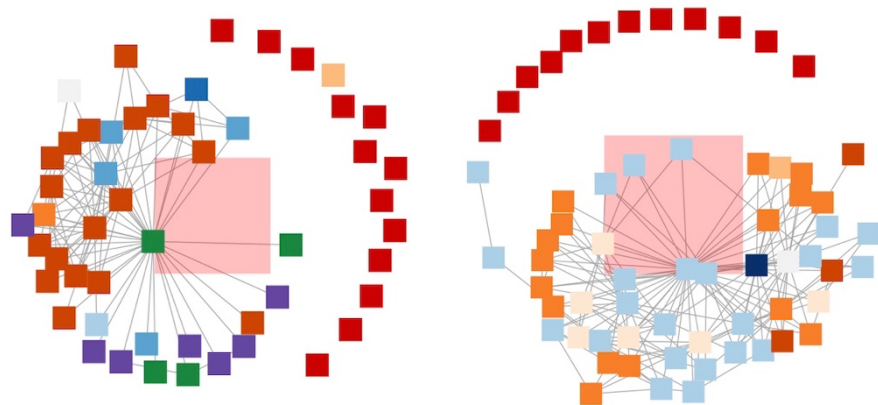
3 Key Community Connectors

In all the case study areas we identified people that we refer to here as “key community connectors”. These were individuals who appeared in many social networks and were well connected in the community. They tended variously to be one or more of the following: staff or volunteers of community centres, local councillors, and those with a specific job role as a community connector (a service provider in our typology). Both individual interviewees and advice and community sector participants noted the importance of such key community connectors, and viewed them as being at the heart of the community. The challenges this can cause were also noted, especially around sustainability, particularly where such people were volunteers, and the risk that they can be seen as gatekeepers to information or services, which sometimes has negative consequences. We interviewed some key community connectors to map out their social networks, Figure 3 shows some typical examples of community connector networks (these have been constructed from averages and don’t show any individual person’s network). The number and density of connections are evident, as is the make-up of the networks which includes, generally, a much larger number of people the individual provides a service to (Service Provided) and/or work colleagues and/or people living locally (who aren’t otherwise categorised as friends or family) than average across all the social networks in the dataset.

Figure 3: Typical Key Community Connector Networks

Legend

- Organization
- Family
- Friend
- Neighbour
- Faith
- Acquaintance
- Work
- Councillor
- Service Provider
- Service Provided
- Local
- Other
- Uncategorised



4 Interviewee characteristics and knowledge of organisations/services

The following Figures compare interviewees' characteristics to the number of organisations/services they were aware of that help people with problems in the community. The Figures show that gender does not appear to have any correlation to the number of organisations/services a person is aware of that help people with SWL problems. Similarly, neither having a disability or health condition, or employment status, appear to correlate with awareness of organisations/services in any particular way. On the other hand, in Dartmouth and Hackney, higher formal educational qualifications do correlate with awareness of more organisations/services that help people with SWL problems (but this is not the case in Bryngwran and Deeplish). In this regard it is interesting to note that educational qualifications in Bryngwran were the highest on average (when Hackney interviewees are taken as a whole rather than separating older and younger Hackney cohorts) and educational qualifications in Deeplish were the lowest on average. This perhaps suggests that somewhat higher levels of formal educational qualifications correlate to greater awareness of organisations/services. Age only correlated to awareness, and specifically older age to lower awareness, in Hackney. The average age of older Hackney interviewees was 72, and we interviewed a larger number of significantly older people there than in the other hyperlocal areas, which might explain why age seems significant only in Hackney, but a combination of other factors could also be at play such as social network size and connectedness, education, and ethnicity.

Fig 4.1: Awareness of organisations & employment

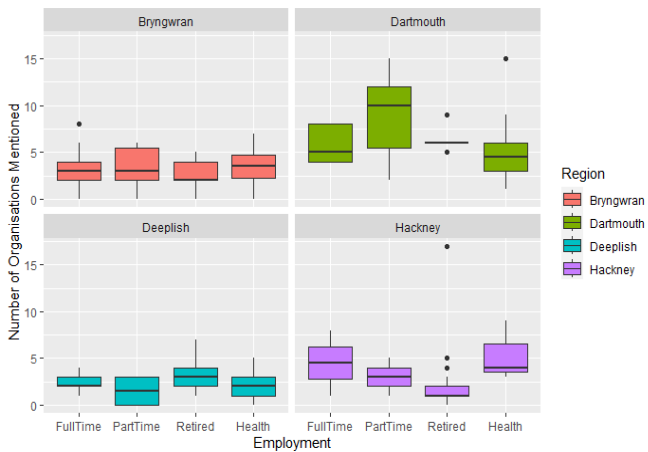


Fig 4.2: Awareness of organisations & illness/disability

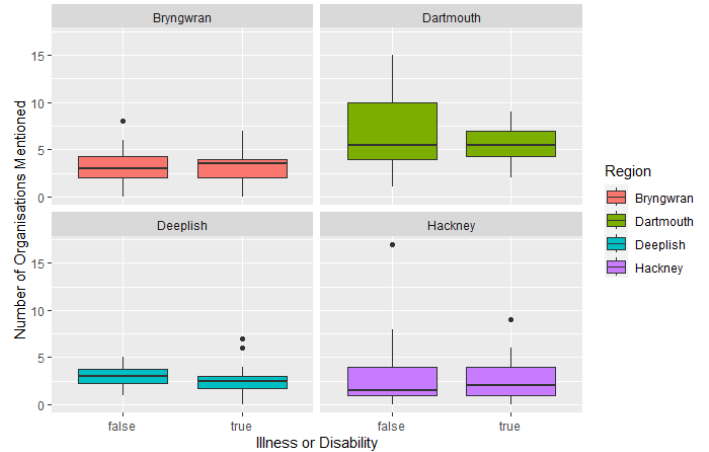


Fig 4.3: Awareness of organisations & gender

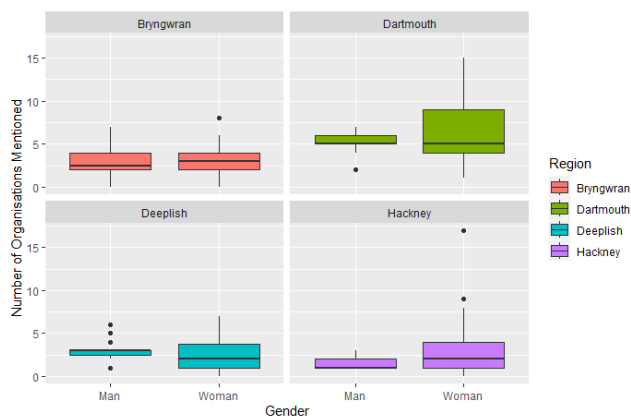


Fig 4.4: Awareness of organisations & age

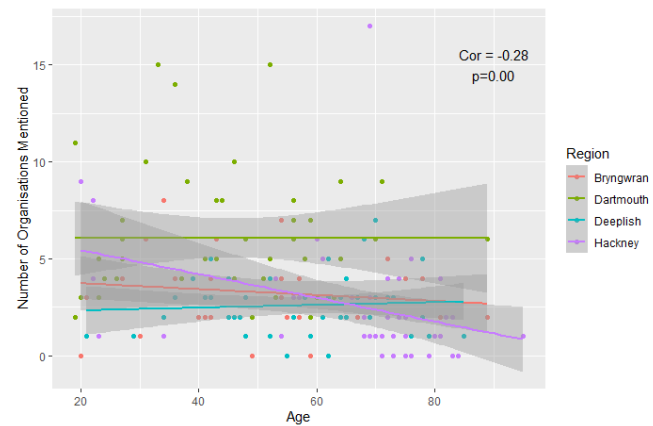
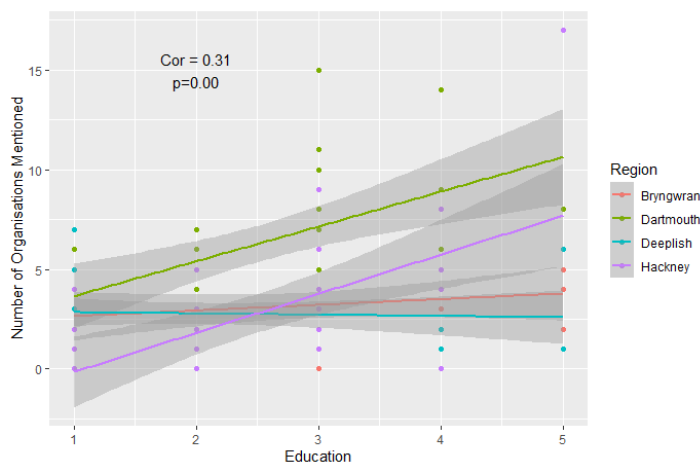


Fig 4.5: Awareness of organisations & education



In Fig 4.5

- 1 = no formal educational qualifications**
- 2 = GCSE or equivalent**
- 3 = A level or equivalent**
- 4 = Undergraduate degree**
- 5 = Postgraduate degree**

Figure 4.6: Data comparing interviewee characteristics

Variable	Average				Variance				Min				Max			
	Bryn	Dart	Deep	Hack	Bryn	Dart	Deep	Hack	Bryn	Dart	Deep	Hack	Bryn	Dart	Deep	Hack
Size of Network	14.6	11.1	7.24	5.98	68.1	31.2	6.10	9.51	3	2	2	1	34	29	17	15
Avg number of partners	2.08	1.59	1.59	0.896	0.821	0.790	0.484	0.350	0.333	0	0.4	0	4	3.53	3.41	2.5
Num Orgs Mentioned	3.23	6.07	2.6	2.57	3.92	10.9	2.33	9.37	0	1	0	0	8	15	7	17
Family	3.77	3.13	3.46	1.93	9.71	7.94	4.34	2.58	0	0	0	0	11	13	9	7
Friends	4.54	4.13	2.16	2.07	16.7	11.2	4.06	3.65	0	0	0	0	15	14	7	7
Acquaintance	0.359	1.4	0.06	0.318	1.45	5.93	0.058	0.641	0	0	0	0	7	13	1	4
Councillor	0.359	0.556	0.04	0.023	0.341	0.434	0.039	0.023	0	0	0	0	2	3	1	1
Faith	0.026	0.267	0.06	0.227	0.026	0.382	0.058	0.237	0	0	0	0	1	2	1	2
Neighbour	0.692	0.667	0.46	0.523	4.96	2.32	0.988	0.674	0	0	0	0	11	8	4	3
Service Provider	0.821	1.31	0.7	0.545	2.57	1.72	1.48	0.719	0	0	0	0	8	5	4	3

Figure 4.6, above, presents some of the data on which the images in this Annex are based, showing the characteristics of the interviewees and their social networks by case-study area, with the minimum and maximum numbers in the dataset, alongside the averages and variance between the maximum and minimum numbers. ‘Avg number of partners’ is equivalent to ‘Connectedness of social alters’ (i.e., indicating the connectedness or density of the social networks).

5 Interviewee characteristics, social networks and problem resolution

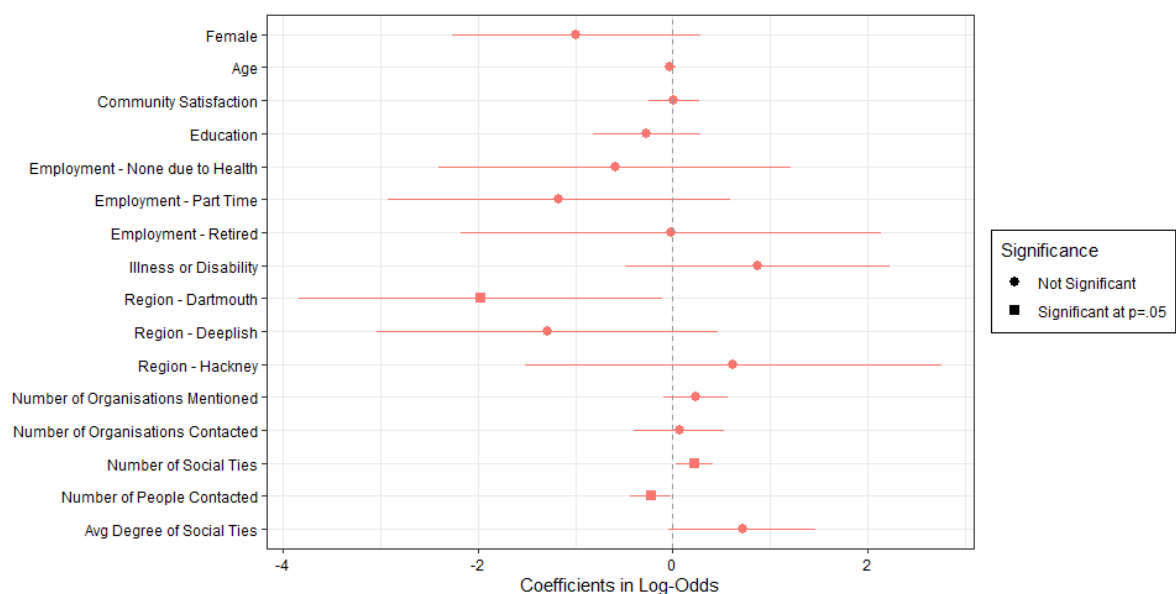
Figure 5.1: Data comparing interviewee characteristics for people with problems

Variable	Average				Variance				Min				Max			
	Bryn	Dart	Deep	Hack	Bryn	Dart	Deep	Hack	Bryn	Dart	Deep	Hack	Bryn	Dart	Deep	Hack
Size of Network	10.9	11.1	7.10	5.96	24.6	31.9	6.20	7.81	3	2	2	2	23	29	17	13
Avg number of partners	1.97	1.61	1.68	0.853	0.751	0.787	0.539	0.320	0.333	0	0.4	0	3.36	3.53	3.41	2.11
People Contacted	3.95	5.05	0.487	2.19	15.3	10.8	1.26	4.93	0	0	0	0	15	13	6	9
Num Orgs Mentioned	3.4	6.07	2.74	2.78	3.94	11.1	2.46	11	0	1	0	0	8	15	7	17
Orgs Contacted	1.6	3.30	0.846	0.852	1.73	5.14	0.923	0.746	0	0	0	0	4	9	3	3
Family	3.35	3.20	3.46	1.673	7.71	7.89	4.62	1.85	0	0	0	0	8	13	9	5
Friends	3.7	3.98	2.18	2.07	14.9	10.3	4.36	3.15	0	0	0	0	14	14	7	6
Acquaintance	0.25	1.43	0.08	0.44	0.41	6.02	0.07	0.95	0	0	0	0	2	13	1	4
Councillor	0.15	0.55	0.03	0.04	0.13	0.44	0.03	0.04	0	0	0	0	1	3	1	1
Faith	0.05	0.25	0.05	0.33	0.05	0.38	0.05	0.39	0	0	0	0	1	2	1	2
Neighbour	0.5	0.68	0.336	0.52	3.21	2.36	0.544	0.798	0	0	0	0	8	8	3	3
Service Provider	0.45	1.34	0.62	0.63	0.47	1.72	1.45	0.718	0	0	0	0	2	5	4	3

Figure 5.1, above, contains largely the same data as Figure 4.6 above but only for interviewees who had experienced at least one problem. Generally, we see that there is little difference between the characteristics of all interviewees in each case-study area and those interviewees who had experienced at least one problem. Figure 5.1 has an added variable of “People Contacted”, which is the number of people in the interviewee’s social network they had contacted about a particular problem/problems experienced. This shows that people in Deeplish contacted the fewest people in their social networks about a problem experienced, with a number of less than 1 indicating that a significant number of interviewees in Deeplish did not share the problem with anyone in their social network. Interviewees in Hackney contacted more people in their social networks than Deeplish interviewees, with an average of just over 2 people contacted. Followed by Bryngwran interviewees who contacted on average just under 4 people about their problems, and interviewees in Dartmouth who contacted on average just over 5 people.

Where interviewees had experienced a problem or set of connected problems in the last two years, we asked them whether they considered that problem to have been resolved, not resolved, or some other outcome (other outcomes were usually that the problem had been partially resolved or was ongoing). The regression model at Figure 5.2 below seeks to show who is more likely to have their problems resolved based on our data. A regression model is a way of mathematically sorting which factors may have had an impact. Bryngwran is taken as the reference point for “Region” such that the data shows whether people in the other regions were more or less likely to have had their problems resolved than those in Bryngwran, hence why Bryngwran is missing from the image below.

Figure 5.2: Significance of particular factors to problem resolution



In this model significance indicates whether there is evidence of a statistical relationship to problem resolution, either positive (in favour of resolution on the right side of the dotted line) or negative (against resolution on the left side of the dotted line). If the red line does not cross the dotted central line, this is indicative of the factor having a statistically significant correlative impact. For example, whilst being female, not working due to health, working part-time, and living in Deeplish, seem to correlate somewhat with being less likely to have problems resolved, as the red lines here are mostly to the left of the dotted central line, these do not appear to be significant factors. However, living in Dartmouth does appear to be a significant factor correlating with not having one's problems resolved as the full line is to the left of the dotted central line. In contrast, living in Hackney, and having a disability or health condition, are factors that seemed to correlate with problem resolution, but not in a significant way, as most of the red line is to the right of the centre, but part of the line is still to the left. Interestingly, the number of social ties (number of alters in a person's network – so the size of their social network) seems to have a significant effect such that a larger social network correlates with having problems resolved. The connectedness of the networks (expressed in Figure 5.2. as the 'average degree of social ties') is close to being significant; it may be that more connected social networks also correlate with being more likely to have had a problem resolved (only a tiny part of the red line is to the left of the dotted central line).

There is, then, at least some indication that people in our data set with larger and/or more connected social networks were more likely to have had their problems resolved.

However, and perhaps unexpectedly, it appears (from the data on contacting people about problems, in Figures 5.1 and 5.2) that sharing problems with people in social networks is not positively correlated to problem resolution - if anything, it appears the more people a person shared their problem with, the less likely it was to be resolved. On the other hand, in Figure 5.2., the number of organisations contacted sits almost on the central dotted line, suggesting that the total number of organisations/services contacted about a problem bears little relation to its resolution. Indeed, our analysis of how people were helped and by whom, and our engagement with practitioners, both suggest that what is more important is that the right organisations/services are accessed, and at the right time.