Qualitative research with clients: longer term experiences of a work-focused service

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SUMMARY

This report presents the qualitative findings of research conducted with individuals who claimed benefit through the ONE service in summer 2000. The research explores the impact of ONE on participants over an 18-month period. Specific topics covered by the research were the effect of mandatory annual trigger meetings on lone parents and the relationship of participants with health problems to the labour market. The research sought to identify the impact of the service on attitudes and behaviour towards work and claiming benefit from a longitudinal perspective.

Evaluating ONE

The overall purpose of ONE is to establish a work-focused benefit service to improve the quality and quantity of labour-market participation of people of working age. More specifically, ONE’s objectives are to:

- put more benefit recipients in touch with the labour market through the intervention of a Personal Adviser;
- increase the level of sustainable employment by getting more benefit recipients into work;
- ensure that more clients experience an effective, efficient service which is tailored to their personal needs;
- change the culture of the benefits system and the general public towards independence and work rather than payments and financial dependence.

The Department for Work and Pensions (formerly the Department of Social Security), commissioned a wide-ranging evaluation of the ONE service. The evaluation used a variety of research methodologies, including: social research with ONE participants, staff and employers; operational research; cost-benefit analyses; and a database of administrative records. The overall aims of the evaluation are to assess the feasibility of delivering ONE in different models, and the effectiveness of the three models in improving both the quality and quantity of labour-market participation.

The aims of this aspect of the policy evaluation were twofold:

- To evaluate the long-term impact of ONE on those who joined the service in August 2000.
- To examine the impact of annual trigger meetings on lone parents claiming Income Support within the ONE areas.
Qualitative research findings

The findings are considered by client group (lone parents, participants with health problems, carers and Jobseekers), with a particular emphasis on the timing, content and relevance of further contact with ONE a year after the initial claim. Participants’ attitudes to benefit and views on work are presented over an 18-month period using additional evidence collected from the short and medium-term impact of the service. The relationship between work and benefit was used as a framework for identifying participants’ position in the labour market before, and after, the original intervention.

It is important to highlight that analysis of annual lone parent trigger meetings is limited. Few individuals had experienced this intervention.

Lone parents (Chapter 3)

Background and personal circumstances

Starting a family had meant considerable periods outside the labour market for most lone parents. As a result, lack of qualifications and recent, or relevant, work experience affected their levels of confidence, motivation and communication skills. For most, the ages and numbers of their children impacted on the perceived feasibility of returning to work. Some were happy to use childcare once their youngest child had reached nursery or school age, as this gave scope to work part-time during the day. Other lone parents had worked part-time or even full-time shortly before the claim was made. Work was valued highly by all lone parents as a source of personal and financial independence for both them and their household. Initial claims for benefit were made at times of considerable domestic and financial insecurity, and payment was seen as crucial in supporting the household during this time.

Short and medium-term impact

Those who maintained some contact with ONE following the initial meeting were work-focused. Over the short- and medium-term, the service enabled these participants to move into or towards work and also helped keep them in employment. Those already in work at the time of their claim returned to ONE to discuss extending their hours and the likelihood of being ‘better off’. Participants who originally saw work as an immediate priority developed a focused job-search strategy shortly after the Personal Adviser meeting. Although for some, this movement was independent of the service, others attributed this progression to advice offered by the Personal Adviser in extending job-search activity. They revisited the service to discuss options for work with flexible hours and the in-work calculation. However, impact during this period was limited for those who saw work as a longer-term goal, if at all. Their initial meetings had focused on the claim and did not include barriers or attitudes to work. In a few instances, these participants returned to ONE, which allowed Personal Advisers to suggest training opportunities or voluntary work, yet not all participants could take advantage of these options because of responsibilities for children or a health problem.
Beyond one year, motivated participants initiated further contact to discuss job-search or in-work benefits for work recently secured. The timing of these meetings and the increased work focus were, therefore, appropriate, particularly where the same Personal Adviser offered individualised advice. Some were referred to a New Deal for Lone Parents (NDLP) adviser. Although contact with ONE then ceased, individuals appreciated the signposting to specialist support. Lone parents who had not returned to ONE in the medium-term did not see work as an option until the longer-term. They were unlikely to initiate contact in this period and those who did acted on a spontaneous decision to start thinking about work. Mandatory follow-up contact comprised annual trigger meetings or triggers for parents whose youngest child had turned 16. Although some participants were concerned that their benefit would be stopped if they did not attend, Personal Advisers were able to reassure them by explaining the purpose of the meeting. The timing was not always appropriate, particularly where circumstances had not changed, yet in these cases, lone parents felt that they had been reminded of the help and support available. Both types of trigger meeting were welcomed where barriers to work and the better-off calculation were explored within the context of individual need.

Some who were in work at the time of their claim had since increased their hours as their children were old enough to be left at home. This movement was often in part a result of initial explorations of in-work benefits with the Personal Adviser or NDLP adviser. However, others had left work a year later because of difficulties in combining work with available childcare. Some who originally saw work as an immediate priority or option in the future moved into part-time education or training. In some cases, this was because job-search revealed a need to update existing, or learn new, skills. Contact also allowed those who did not consider work to be an option to gain knowledge of how much better off they would be financially if they secured employment. Many lone parents moved closer to the labour market during the 18 months following their claim, particularly those who saw work as an immediate priority or option in the future. This distance travelled had been facilitated by further voluntary and mandatory contact with ONE as well as referrals to New Deal. However, some who were in work or saw work as a priority at their initial claim could no longer perceive this as an option due to a change in their personal circumstances such as a shift in the availability or cost of childcare.

Participants who made a claim for Incapacity Benefit (IB) had a range of physical disabilities or illness and mental health problems. Some had a combination of both. Most had work-related conditions such as a one-off injury, or an illness which had developed over time. Stress and depression were particularly evident in those with mental health problems. Participants wanted to work, but felt that they would have to return to
the occupation for which they were already qualified, even if they expected this to worsen their condition. Claims were made to renew levels of benefit payment or to support individuals and their household after ceasing work. Some received Statutory Sick Pay for up to 12 months before their claim. Benefit was viewed as crucial, and participants felt that they deserved support during recovery.

**Short to medium-term impact**

Individuals on sick pay did not return to work within six months of their claim, although some returned in the medium-term once they had recovered. Those who initially viewed work as an immediate priority, had, in some cases, learned to manage their illness and moved into temporary employment shortly after contact with ONE. Participants who felt that they had been forced to give up their job because of their condition, could not recall any mention of work at the initial Personal Adviser meeting. Therefore, those who initially felt that employment was an immediate priority did not have further contact. Over time, the prospect of work became viewed as a longer-term goal. Those who originally felt work would not be possible in the short- to medium-term, did not move any closer to the labour market, as neither Personal Adviser nor participant raised the subject of work. Some had since been taken off IB after a Personal Capability Assessment (PCA) and did not feel that a second meeting to discuss work was appropriate. Others returned to work within six months or a year, but independently of ONE. Those who did not see work as an option in most cases did not change this view as their illness and circumstances remained the same or worsened. However, a few moved to seeing work as an option in the future after advice and support offered at the initial meeting or through referral to a Disability Employment Adviser (DEA).

**Follow-up contact**

Examples of further voluntary contact were limited. Participants who saw work as a less immediate option returned to ONE on an ad hoc basis to discuss whether they could claim any additional benefits. There were no examples of Personal Advisers widening the discussion to include work. Referral to DEAs usually occurred at the initial meeting and there was continuing contact with a DEA after a year. Caseloading was rare and centred on chasing additional benefit claims. Some clients who were further away from the labour market had not returned to ONE mainly because of lack of knowledge of the help and support available. Those who needed to retrain would have welcomed further help initiated by the service. Some participants were triggered into a second Personal Adviser meeting after staying on IB after a PCA. Here, the same Personal Adviser initiated discussion on types of work, transferable skills and training that would help clients to return to the labour market. This support was welcomed. Some participants experienced further contact after making a fresh claim for JSA after ‘failing’ a PCA. In these instances, the focus on work was not appropriate as individuals did not feel that they had recovered sufficiently.
Long-term impact

Those who moved into work in the first 12 months were still working. After a year, some who saw work as an immediate or longer-term priority, had also found employment. These participants had fully recovered or learned to manage their illness. Some participants came to view work as a possibility in the longer-term where this had not been an option before. This change in attitude was the result of referral to a DEA. Individuals acknowledged the involvement of ONE in allowing them to gain access to this specialist support which they might not otherwise have been aware of. Although advice or signposting from the Personal Adviser was quite general, participants appreciated that this information was offered. The adviser acknowledged the limitations of their illness or disability, and recommended alternative types of work. Over 18 months those who had originally thought of work as an option for the future had started to look for work or had actually found employment. This was mostly due to support from ONE and DEAs. However, there were many whose conditions had not improved or stabilised who were more detached from the labour market with little further intervention from the service.

Carers (Chapter 5)

Background and personal circumstances

Carers found it difficult to see work as a priority because of the unpredictability of their caring responsibilities. They also felt that their responsibilities might increase over time as the illness of the person being cared for progressed and would not cease until the person died or got better. Some carers had health problems of their own – frequently stress and depression caused by the demands placed on them. Most carers were working prior to making a claim. Although some were still working part-time, others were forced to stop as their responsibilities increased. The care administered to a family member was seen as a full-time job, therefore, qualifying carers to be supported by benefits.

Short- to medium-term impact

Those carers in part-time work at the time of the claim were generally still in employment one year on, although some left as their caring responsibilities increased. In some instances, Personal Advisers conducted a better-off calculation to establish the household income if employment ceased. There were some examples of carers being told that they would be financially better off if they stopped work, yet were not given information on available respite care, which they felt might have helped them to sustain employment. Those who originally saw work as an immediate priority, did not change their view, but did not move into employment. The initial meeting focused on their claim. Some returned voluntarily to ONE to discuss their eligibility for additional benefits, yet the Personal Adviser did not discuss work. For those who saw work as an option for the future, their situation remained unchanged. Although some did move into part-time work, education or training after the person they were caring for died or was placed in a home. Those who did not want to work, did not find the mention of this appropriate at the initial Personal Adviser meeting and, therefore, did not return to ONE.
Initiation of further contact was limited. Carers made contact to enquire about additional claims for benefit and eligibility on starting education or training. There were no examples of contact being made after a year away from the service. Those who saw work as a longer-term goal or not an option, did not return to ONE as their circumstances had not changed. They felt that the Personal Adviser could not offer help or support in finding replacement care or medical advice. However, carers would have welcomed caseloding if this information was available. Instead, they contacted other agencies for support in these areas.

After one year, most carers had left work as their caring responsibilities had increased. Those who had intended to work had not moved closer to the labour market during this period. However, others who originally saw work as a longer-term priority had started voluntary work. Flexible hours had enabled them to fit preparation for work around their existing commitments. Some who had not thought of work as an option moved into work after their caring responsibilities ended. However, for most carers, their circumstances had either not changed or their commitments had increased, leaving them feeling more detached from the labour market than when they initially claimed. In the long-term, some carers had moved towards the labour market. Those who had seen work as an immediate priority had found employment and even some who thought work was not an option had re-focused on work as an achievable goal. This movement was partly a result of change in circumstances.

Jobseekers represented a diverse range of personal and household circumstances, and some had more active benefit histories than others. Some had inconsistent work histories comprising mostly temporary, poorly paid employment. Others had had to move away from a particular occupation after injury or illness meant that this work was no longer possible. In both cases, claimants felt that they lacked relevant qualifications, work experience or basic skills. Their confidence and motivation were also affected. These individuals were mostly ready and available for work immediately. However, others had been placed on JSA after failing a PCA, but did not feel well enough for work or physically capable of it.

In the short-term, participants moved into part-time work as a step towards full-time work for the same employer or in a similar trade/profession. For those who were in part-time work at the time of the claim, the Personal Adviser did not attempt to discuss how to increase their hours. Jobseekers regarded ONE as mainly concerned with processing their claim. Some moved into full-time work in the short-term independently of ONE. Others felt that they were given valuable job-search advice during review meetings at the Jobcentre after initial contact. Views of the type of job-search support available differed according to whether Personal Advisers offered advice on refining or extending searches. In
the short- or medium-term, a few participants felt that they were not ready to move into work immediately because of temporary problems such as illness.

**Follow-up contact**

Mandatory further contact featured heavily in the form of 13 or 26-week reviews and repeat claims. In both cases, participants saw a different Personal Adviser, who focused on ensuring that job-search strategies were both appropriate and achievable. Many Jobseekers restricted their contact with ONE to review meetings, as additional help was available through the Jobcentre.

**Long-term impact**

After one year, participants were generally still in work even if they had changed employer, although some had left and moved onto benefits because of a worsening health problem or caring responsibilities. Some who had seen work as an immediate priority had also since found work that reflected their previous experience and skills and occasionally had found a vacancy through a ONE adviser. Those who had viewed work as a longer-term option moved to seeing it as an immediate priority, or had started employment because of a change in circumstances. Those who felt that they were on inaccurate benefit, because of a health problem, did not change their relationship to the labour market and maintained that work was not an option at all. Overall, individuals who had been actively looking for work had indeed found employment. Consistent contact with ONE had enabled more refined job-search activity and encouraged participants to be more confident in thinking about work as a priority.

**Conclusions**

Overall, ONE has had a positive impact on some participants in the longer-term, particularly where voluntary and mandatory further contact has taken place. The offer of help and support over time has allowed individuals from all client groups to consider the prospect of work as a reality. Referral to specialist advice on New Deal for lone parents has enabled movement towards the labour market. Although mandatory trigger meetings have not always been appropriate in timing or content, participants appreciated the initiation of contact in most instances.

However, for those with no further contact or limited contact with the service, movement has been less evident. Lack of awareness of the wide range of support available and the option of returning, has affected the likelihood of individuals associating ONE with help relevant to their personal and household circumstances.

Movement has not always represented linear progression. In some cases, participants moved further away from the labour market only to then move further forwards than the point they were at when they made the initial claim. It is important to note that such movement was also caused by a change in circumstances, independent of any impact the service may have made.
The ONE service was introduced between June and November 1999 in 12 pilot areas in Great Britain. It aimed to offer a work-focused benefit service to all individuals of working age making a new or repeat claim for benefit, tailored to meet individuals’ needs. Three different models for delivering ONE were piloted: a Basic model; a Call Centre model; and a Private and Voluntary Sector (PVS) model. Prior to April 2000, ONE was voluntary for all benefit claimants other than those claiming Jobseeker’s Allowance (JSA), for which ONE was mandatory. From April 2000, ‘full participation’ was introduced whereby all new and repeat claimants in the pilot areas were required to participate in the ONE service.

This report presents the qualitative findings of research conducted with individuals claiming benefit through the ONE pilots – the ONE ‘participants’. It is based on three stages of fieldwork completed over one and a half years to provide a longitudinal perspective of the pilots’ impact on participants’ attitudes and behaviour towards work and claiming benefit. More specifically, it assesses whether ONE helped to improve and increase participants’ engagement with the labour market and how this occurred.

1.1 Aims and objectives of ONE

The overall aim of ONE was to establish a work-focused benefit service to improve the quality and quantity of labour-market participation by people of working age. The service’s objectives were to:

• put more benefit recipients in touch with the labour market (through the intervention of the Personal Adviser (PA));
• increase the sustainable level of employment by getting more benefit recipients into work;
• ensure that more clients experience an effective and efficient service tailored to their personal needs;
• change the culture of the benefits system and the general public towards independence and work rather than payments and dependence.

1.2 Delivery of ONE

Three different models of delivery were implemented across the 12 pilot areas to test new ways of providing services to benefit claimants:

• Basic model

In the Basic model, the Benefits Agency (BA), the Employment Service (ES) and local authorities delivered ONE through local Jobcentres and benefit offices. The Basic model was the first to start operating, beginning in June 1999. It was tested in four areas: Clyde Coast and Renfrewshire; South East Essex; Lea Roding (North East London and West Essex); and Warwickshire.
• **Call Centre model**

In this model, call centres and call-centre technology were used for participants’ first contact with ONE to collect individuals’ details and background information to their claim. Subsequent work-focused meetings with a Personal Adviser were held in local Jobcentres and benefit offices. Call-centre variants of the Basic model started in four of the 12 pilot areas in November 1999: Buckinghamshire; Calderdale and Kirklees; Somerset; and South East Gwent.

• **Private and Voluntary Sector model**

The PVS model was delivered by private and voluntary organisations instead of traditional government front-line agencies, but worked in a similar way to the Basic model. This variant began operating in November 1999 and was tested in the four remaining pilot areas: Leeds; North Cheshire; North Nottinghamshire; and Suffolk.

The process by which participants interacted with the service, was broadly similar across all three models. The ONE service had three separate stages. The first was a Start-up meeting with a start-up adviser. This took place when an individual first made contact with the ONE service to make a claim for benefit. The Start-up meeting was followed by a work-focused meeting with a Personal Adviser, which was arranged for a time within three days of the Start-up meeting. This was subsequently changed to allow four days in-between meetings.

The third stage was a follow-up meeting, also with a Personal Adviser. This meeting was either voluntary or mandatory. Voluntary follow-up meetings were initiated by the client on an ad hoc basis; mandatory meetings were triggered by the elapsing of a specified period of time, the occurrence of a particular event, or a change in circumstances. Advisers could also request a follow-up meeting with a participant.

The following description of how ONE worked is primarily focused on the latter stages of the process, in line with the objectives of this round of research in investigating the service’s long-term impact. As such, the Start-up meeting is not covered in depth here. The description is based on the original design of the ONE service and reflects how it was intended to operate. It does not necessarily reflect the way in which the service was actually working at the time of the research.

1.2.1 *The initial Personal Adviser meeting*

Individuals attended an initial meeting with a named Personal Adviser within three days of their Start-up meeting. This meeting was conducted on a face-to-face basis and was intended to last up to one hour. During this meeting the Personal Adviser was expected to:

- explain the Personal Adviser’s role and what the ONE service offered;
- check the participant’s personal details to establish that the person attending was the intended benefit recipient;
• explore the participant’s circumstances and barriers to work, establish job goals and refer to suitable vacancies;
• identify if the participant qualified for New Deal;
• identify training or specialist support needs;
• discuss with the participant, where appropriate, the benefits of making an application to the Child Support Agency;
• consider the need for an in-work benefit calculation;
• agree and complete a Jobseeker’s Agreement for Jobseekers or a ONE action plan for other participants.

From March 2000 onwards, all participants were required to attend a meeting with a Personal Adviser as a condition of receipt of benefit.

1.2.2 Follow-up meetings The process design for ONE anticipated that most participants would have further contact with the Personal Adviser or a specialist adviser, such as a disability employment adviser (DEA), after their initial Personal Adviser meeting. These follow-up meetings were designed to offer cumulative support to benefit claimants in order to assist their entry or re-entry into the labour market. Follow-up meetings consisted of two main types: mandatory and voluntary.

1.2.3 Mandatory meetings All Jobseekers were required to attend two key review meetings after their initial Personal Adviser meeting: one after 13 weeks of unemployment and another after 26 weeks of unemployment. Trigger meetings for non-JSA clients were a central part of the ONE process in helping individuals to improve their job prospects and preventing them from being lost in the benefits system. These triggers were designed to prompt further intervention from ONE at defined points in time for those on benefits.

Trigger points included:
• following a Personal Capability Assessment (PCA) for those in receipt of Incapacity Benefit (IB);
• when entitlement to Invalid Care Allowance (ICA) ceased, while other ONE benefits remained in payment;
• when the carer premium in Income Support (IS), Housing Benefit (HB) and Council Tax Benefit (CTB) ceased;
• when part-time began or ended;
• when the participant reached the age of 17 or 18 (for 16 and 17 year olds claiming through ONE);
• annual triggers for lone parents;
• trigger meetings for lone parents whose youngest child reached the age of 16.
The design of these meetings was based on an anticipated change in clients’ attitudes, behaviour or personal circumstances during the interim period. During the meetings, the Personal Adviser discussed ways in which clients might improve their employability, including exploring on-going barriers to employment and identifying childcare issues, and for those in part-time work, discussing how the intensity of work might be increased. The Personal Adviser also discussed how clients may be better off in work, including running an in-work benefit calculation and explaining the nature of benefits that clients might be eligible for, such as Working Families’ Tax Credit (WFTC).

1.2.4 Voluntary meetings

For client groups other than Jobseekers, it was assumed that half of all clients would have ad hoc follow-up contact with a Personal Adviser, depending on their circumstances. This would allow on-going contact to be established between participant and adviser to review progress, provide support and examine suitable work opportunities. The number of instances and duration of this ad hoc follow-up contact would be agreed between Personal Adviser and participant, according to each participant’s individual circumstances. It was not mandatory, however, for non-JSA clients to participate in this type of further contact.

1.2.5 Caseload meetings

In some instances, Personal Advisers would initiate voluntary caseload meetings where they felt that participants would benefit from additional contact. A meeting would then be arranged with the consent of the participant. This allowed on-going contact between participant and adviser to review progress, provide support and examine suitable work.

This report is primarily concerned with the impact of participants’ interaction with their Personal Adviser, particularly through follow-up meetings, and, therefore, does not cover Start-up in great detail. Further information on the impact of Start-up and how it operates can be found in Green et al (2000) First effects of ONE: findings from survey and qualitative research with clients, Department of Social Security (DSS) Research Report No. 126, Leeds, CDS; and in Osgood et al (2001) Delivering a work-focused service: Views and experiences of clients, DSS Research Report No. 167, Leeds CDS.

1.3 The ONE evaluation

The Department for Work and Pensions (DWP) (formerly the Department of Social Security) commissioned a wide-ranging evaluation of the ONE service in 1999.1 The overall aims of the evaluation were to assess:

- the feasibility of delivering ONE using different models of delivery;
- the effectiveness of the service in improving the quality and quantity of people’s labour-market participation.

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1 Responsibility for the evaluation which was transferred to the Department for Work and Pensions (DWP) in June 2001.
Given the different focus of these two aims, the evaluation was divided into two ‘strands’: a delivery evaluation and a policy evaluation. There was also a cost benefit analysis and database in addition to the delivery and policy research. This report forms part of the policy evaluation and does not detail how ONE was being delivered at the time of the research. Further information on the delivery of the ONE service can be found in Osgood et al, ‘Delivering a work-focused service; Final findings from the ONE case studies and Staff Research’ DWP Research Report No. 166, Leeds, CDS; and in Kelleher et al, ONE in action: interim findings from the case studies and staff research (2001), DWP in-house Research Report No. 84, Leeds, CDS.

1.4 Introduction of Jobcentre Plus

At the time of its introduction, ONE marked a definitive break with the old way of delivering benefits. It brought together the combined responsibilities and expertise of the Employment Service, the Benefits Agency and local authorities, and offered clients an integrated, work-focused service with a Personal Adviser (based on the experience of the New Deals). New and repeat benefit claimants were allocated a Personal Adviser to deal with their claim and discuss options for work at the start of the claim. Through this new approach to the delivery of a work focus and benefits, ONE represented a key step in the transformation of provision ‘from a passive system to an active service’.2

In March 2000, the Prime Minister announced plans to introduce a new agency to provide work-focused services and benefits to everyone of working age: Jobcentre Plus. Some 54 Jobcentre Plus Pathfinder offices were established in 17 clusters across the UK from October 2001, and national roll-out will continue over the next few years. Jobcentre Plus seeks to build on the experience and lessons from the ONE pilots, with an overall aim to deliver ‘an integrated and efficient labour market and benefit service to people of working age’.3 More specifically, the Jobcentre Plus vision seeks to achieve:

- a work focus to the benefits system for everyone of working age;
- a dedicated service to enable employers to fill their vacancies quickly and successfully;
- swift, secure and professional access to benefits for those entitled to them;
- a much better service for everyone who needs help;
- active help from Personal Advisers to assist people to get and keep work;

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• a better working environment for staff, which is safe and professional;
• greatly improved information technology (IT), accommodation and support services to deliver an efficient and effective service.

1.5 Report structure

This chapter provides background information on how ONE was delivered, the pilot areas covered by this qualitative research and a brief profile of the individuals interviewed.

Subsequent chapters explore the impact of ONE on different groups of participants:

Chapter 2 – lone parents
Chapter 3 – participants with mental and physical health problems
Chapter 4 – carers
Chapter 5 – Jobseekers

Finally, Chapter 6 draws conclusions from the main findings, identifying those aspects of the service that did or did not work for the participants interviewed in this research.
Lone parents have been a particular focus of this stage of the qualitative research. Previous stages of the evaluation highlighted the diversity of the client group. This chapter examines the impact of ONE over 18 months on different groups of lone parents, defined according to their relationship to the labour market at the time they entered the service. Figure 2.1 below illustrates the distance travelled by participants in these different groups, highlighting the direction and scale of movements made a year and six months later.

**Figure 2.1  Distance travelled in relation to the labour market**

The figure identifies four groups of lone parents, and demonstrates different patterns of movement towards, and away from, the labour market for each group. ONE played a contributory role in some, but not all, of these movements, as evident from the analysis below.

### 2.1 Lone parents in work

Lone parents who were in work when they made their initial claim for benefit were generally either engaged in part-time work and wanted to extend their hours, or were planning to leave full-time work because of a change in their personal circumstances.

These lone parents exhibited two types of progression. Some moved from part-time to full-time work, usually following changes to their personal circumstances. ONE was able to support them by explaining their benefits entitlement. Others progressed within the same job, securing a better wage or position. These participants very rarely sought further advice from ONE. However, some lone parents moved out of work entirely, or reduced their working hours. Their contact with ONE was limited to making new or repeat claims for benefit.
There were two broad groups of lone parents for whom work was an immediate priority. The first was those who viewed claiming IS as a short-term or temporary measure following a change in their circumstances (for example, the breakdown of their relationship or the loss of a job). The second comprised lone parents who were motivated to move into work because they viewed it as financially beneficial, but had fragmented work histories. Some of these lone parents moved into work, usually part-time, which they combined with their caring responsibilities, and sometimes also with training and education. ONE was able to support these participants by offering targeted advice, as well as information on in-work benefits and better-off calculations.

This group included lone parents who, although not focused on work at the time of their initial Personal Adviser meeting, wanted to work in the future (defined as being within the next two years). They felt overwhelmed by emotional and/or financial insecurity and were prioritising their children. Many of these lone parents entered part-time education and training, sometimes as a result of advice given by a Personal Adviser. Others became more focused on work as a shorter-term priority as a result of changes in their personal circumstances.

In a few cases, lone parents did not consider work to be an option in the foreseeable future, if at all. These participants planned or expected to claim benefit(s) for a considerable period of time, for example because of their commitment to caring for their children for the long-term, or because of substantial physical health problems, including back problems and arthritis. In a few cases, lone parents had made their claim for IS following the rejection or termination of their claim for Incapacity Benefit. In a few cases, participants became refocused on work as an option for the future as a result of a Personal Advisers exploration of their personal circumstances, use of the better-off calculation, and promotion of different routes into work.

This chapter uses the findings from this and previous stages of qualitative research with lone parents to examine the changes in attitude and behaviour towards the labour market, and the role of ONE in this. The first sections of this chapter demonstrate the variation within this client group by describing the personal circumstances, attitudes to work and benefit and barriers to work faced by the sample of lone parents participating in this stage of the research. These are significant factors influencing the impact of ONE over time.

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The remainder of the chapter is concerned with the impact of ONE over an 18 month period, focusing on the period 12-18 months after initial contact. A summary of the main short (6 months) and medium-term (12 months) impacts of ONE (covered in detail in previous reports) is given as background to the consideration of longer-term impacts. Subsequent sections examine the degree and impact of further voluntary and mandatory contact with ONE, including the timing and relevance of mandatory contact. Participants’ attitudes to mandatory follow-up contact and, in particular, the effectiveness of lone parent trigger meetings are also considered.

2.5 Overview of the client group

This section provides insights into lone parents as a client group and demonstrates the diversity of the group, based on those participants included in the sample. The lone parents interviewed were predominantly, but not exclusively, women, and their ages on entry into the ONE service ranged from late teens to pre-retirement. Their personal and household circumstances varied widely, which in turn influenced their views of the benefits system and work. For example, the level of their caring responsibilities related to the number, ages and any special needs of their children. The extent to which they could draw on support from informal networks including friends and family was also important. Lone parents’ skills, qualifications, and work experience also influenced their attitude to move back into work. The impact of these personal and household circumstances on attitudes to benefits and work are explored in further detail below (Section 3.2).

Lone parents generally made a new claim for benefits following the breakdown of their relationship with their partner, or when a period of employment ended. Although some lone parents had jobs or had worked recently, the work histories of individuals varied greatly. At the time of their claim, many lone parents found themselves in a period of considerable financial uncertainty, and their feelings towards work were primarily influenced by concerns related to the care of their children. They viewed their claim as an essential source of income while they were unable to work, or to supplement the income they received from working. The timescales on which they saw themselves as being able to return to work varied, depending on a number of different factors including childcare, health problems, support available from informal networks.

Many lone parents attributed a high value to work because of the sense of personal and financial independence it offered them and their families. Some had jobs, which were generally part-time, and others had worked until recently. Many lone parents said that they wanted to move into work on a part-time basis, but were concerned about the range and choice of part-time work to fit in with their family commitments. In some cases, lone parents identified the possibility of progression in their employment as being an important consideration for them.
2.6 Barriers to work

This section highlights the principal barriers impacting on lone parents’ ability to move into work. The effectiveness with which Personal Advisers identified and addressed these barriers was important in determining Personal Advisers’ impact on advising and supporting participants in their movement into work.

2.6.1 Hard and soft barriers

‘Hard’ barriers include the more familiar, tangible barriers including qualifications, basic skills and work experience. ‘Soft’ barriers refer to attributes that are more difficult to identify or measure, such as problem solving, communication, team working, confidence, self-esteem or motivation.

Some lone parents faced a number of ‘hard’ barriers to work. Such barriers stemmed from a combination of lack of education or training and associated qualifications and skills, little work experience and (often) a lengthy absence from the labour market. Associated with this, lone parents also experienced ‘soft’ barriers to work, including lack of confidence, motivation and communication skills. Lone parents facing one or several of these barriers felt that their work options were limited and that they might have difficulty in finding work.

Participants indicated that these barriers – particularly absence from the labour market and lack of work experience – became more significant over time. Older lone parents also often felt that as time went on it would become increasingly difficult to address these barriers to work. This was either because they felt less comfortable than younger participants about the idea of moving into training, or because they felt that new employers would not be willing to take on someone of their age (especially where they had limited work experience).

‘… the fact that I don’t have any experience. When I write an application what can I say? I haven’t worked, I have spent my life bringing up kids and that was my choice. I did voluntary work, I helped in their schools, I was on the PTA, I did all those sorts of things … but what have I done? Nothing, well not valuable to an employer I think anyway. I know there are skills that are transferable, but if you have no experience of working life they’re just not going to take you on and I have to come to terms with that.’

(Female lone parent aged 48, youngest child aged 16)

2.6.2 Circumstantial barriers

Although childcare was the foremost circumstantial barrier for most lone parents (see Section 3.2.3), other barriers were also evident. Health problems, both mental and physical, were significant.

Childcare

Childcare is a key issue for lone parents, reflecting attitudes to childcare itself, beliefs about the particular needs of their children, and the perceived availability of affordable and convenient childcare facilities.
All the lone parents interviewed, identified childcare as a barrier, regardless of their relationship to the labour market. In a few cases, parents had had to leave their jobs because of problems in securing appropriate childcare. Lone parents had diverse attitudes to childcare. Some felt that it was their sole responsibility to care for their children for the foreseeable future. They were not comfortable with the idea of leaving their children with another person.

‘I think what a mother should do is stay home, that’s my opinion anyway, stay at home and look after your children until they’re older.’

(Female lone parent aged 31, two children aged eight and six)

Others would consider using childcare, but still wanted to spend a substantial amount of time caring for their own children, and to balance this with their work commitments. Where such was the case, lone parents said that they would only be able to move into work if they found a job that fitted in with their commitments:

‘[I want to] just reach a balance that we’re all happy with … that I’m not away from them too much and I see them enough, but that I still have a bit of extra money to do things with them that they want to do.’

(Female lone parent aged 29, two children, one aged 13 and one aged 10 months)

‘I started nursery nursing but I had to give it up because of the pressure of working part-time and doing that as well I couldn’t fit it all in and looking after the children.’

(Female lone parent aged 31, three children aged eight, six and three)

Some lone parents indicated that using childcare would become an option for them when their children reached certain ages. Many lone parents indicated that they intended to move into work when their children went to nursery or primary school, aged between three and five.

‘I have always planned to go back to work, especially when he’s at school. He starts school half days and then I want to go back part-time, but not until he’s at school. That’s why I’m doing the college course now … It will be in a year. I’ve got this year at college and then next year and then I’ll go back because he’ll be starting school the following September.’

(Female lone parent aged 32. Youngest child aged 3)

Lone parents usually felt that part-time work would fit in well with the hours during which their children were at school. Some, however, had concerns about the availability of work during school hours. Others intended to progress into full-time work when their children reached secondary school age, and were better able to look after themselves.
Sometimes, in addition to age, children’s individual or special needs or personality influenced lone parents’ attitudes to childcare.

‘I think it’s 13 before you’re able to leave them by themselves. It’s just that they've had so much going on in their life, they’re very shy, well the little one is but the elder she’s very funny when she goes to see people. I’ve got all that and I know I’ve made it myself because I’ve been staying at home with them so they’ve only been used to me, but that’s what I wanted at the time, I wanted to be at home.’

(Female lone parent aged 31, two children aged eight and six)

‘Cos Phoebe’s really awkward, she’ll only go to me mum, she won’t go to me sister, she won’t go to anybody, she’ll scream the place down, so I’ve got to work around that … and until she goes in nursery I really can’t do anything … I’ve tried it and it don’t work.’

(Female lone parent aged 22, one child aged a year and two months)

In other cases, lone parents’ perceptions of the availability of appropriate and affordable childcare were important in influencing their decision about when they could return to work.

‘I'm basically looking for another two years without actually working until I can get my child into a council run nursery which is a hell of a lot cheaper than a private, because it’s what like £.. a week, so no … two years then, it's not looking bright, just struggling on.’

(Female lone parent aged 38, two children. Pregnant at the time of interview)

In some cases, lone parents were comfortable with using childcare as long as it was provided by someone they knew, for example a family member. However, they felt that where such childcare was unpaid, they could only leave their children for a limited amount of time.

‘If it came to it that it was only during school hours, or the holidays and stuff then there’s always family to look after them, but if you go further out and the hours are longer then it’s too much to be putting on somebody.’

(Female lone parent aged 26, son aged two and a half)

A number of lone parents indicated that they were disappointed that the support they could receive from the Benefits Agency was only available for registered childminding.

In a few cases, the number of children that a lone parent had, impacted on the perceived manageability of combining work and caring
responsibilities.

‘I hadn’t got any plans to start work then. She was only ten months old, so I weren’t ready to go back to work anyway, ’cas I suffered post-natal depression, but I was planning to go to work when she starts school, because it’s difficult when you’ve got two and you’ve got to find somewhere for them to go and then go to work an’ come back and pick ’em both up when you’re on your own.’

(Female lone parent aged 24, two children aged six and two and a half)

**Lone parents with health problems**

Some lone parents experienced mental or physical health problems which they felt impacted on their ability to undertake certain types of work- or in some cases, to work at all. Some lone parents had short-term physical health problems (for example related to difficult childbirth), others had longer-term conditions (such as arthritis or back problems) which made it difficult for them to work at all. In a few such cases these participants had also made claims for benefits including incapacity benefit (IB), or made a claim for income support having been on IB previously,

‘I went …for my sickness benefit, I went to, like, my own Doctor and he told me… he felt that I wasn’t fit enough to go back and do the job because of walking about and that. he just told me he didn’t think I was fit enough to go back to work.’

(Female lone parent aged 38. Youngest child aged 16)

Other lone parents had mental health problems. Depression was the most common mental illness identified,

‘I was always sort of crying, I was low, I didn’t want to go out, I couldn’t mix with anybody, you know, I didn’t even brush my hair, things like that, you know. I lost my self confidence badly’… ‘I couldn’t have gone out to work in the state I was in, you know. I just used to drop the children off at school, come home, and that was worse really, because I stayed in like until I had to get them from school.’

(Female lone parent aged 30. Three children, aged 12, 8 and 3)

Some lone parents interviewed also suffered from anxiety, panic attacks and agoraphobia. A few of those with mental health problems felt that their health was declining rather than improving over time, and was, therefore, becoming more significant as a barrier.

2.7 Short and medium-term impact of ONE

Key findings from two previous rounds of qualitative research with participants are presented here, with additional evidence drawn from interviews undertaken with lone parents who were visited for the first time in this round of the research. Participants’ relationship to the labour market upon their entry into the ONE service is used here as the basis for the analytical framework.
Movement by participants occurred over both the short-term, and over the medium-term. Movement in the short-term was often made by already highly motivated participants, or those whose attitudes and behaviour had changed as a result of a positive experience of the ONE service. In the medium-term, movement usually occurred as a result of changes to participants’ personal circumstances, or in part as a result of further contact with the ONE service.

2.7.1 Lone parents in work

Lone parents in this group had a clear idea of their plans in relation to the labour market. Their initial Personal Adviser meetings were focused on their benefits entitlement, in particular in-work benefits. Work was only discussed in the context of the immediate claim. Personal Advisers did not explore participants’ work options in any depth during these meetings, so there was no change in attitudes or behaviour of those already in work, three months after meeting their ONE adviser.

Few lone parents who already had jobs returned to the ONE service in the medium-term. Those who went back usually did so because a change in their circumstances meant that they wanted to reduce or extend the hours they worked and/or make a revised claim. A few lone parents needed to change job in order to increase their hours, and in these cases, Personal Advisers offered advice and guidance on job-search methods. Some lone parents were reunited with their partner/spouse and needed to change their claim for benefit. In these instances, discussions were limited to the reasons for the claim. In a few instances where lone parents had come in with a query about benefits, Personal Advisers widened the discussions to include work. This tended to occur where lone parents had developed a positive relationship with their Personal Adviser since the first meeting.

Some lone parents – especially those with younger, pre-nursery school-aged children – moved into part-time education or training alongside part-time work. They had usually already identified an area of study that would fit in around looking after their child(ren). However, some lone parents had a Personal Adviser meeting prior to finding their course, and their Personal Adviser was able to offer information on courses available locally as well as advice on financial support. Lone parents who had already enrolled in education and training felt that their Personal Adviser supported them through reassurance about benefit entitlement.

2.7.2 Lone parents for whom work was an immediate priority

Highly work-focused lone parents wanted to find work as soon as possible, and usually had a fairly well-directed job-search strategy, based on their previous experience of working. Some moved into work or started vocational training to improve their skills or qualifications shortly after their initial Personal Adviser meeting. This was aided by Personal Advisers offering specific advice on where to look for jobs, and computer job-searches. Advice was most effective when Personal Advisers were familiar with clients’ circumstances or work goals, through either previous experience or personal knowledge.
Some lone parents had ad hoc job-search strategies, relying on Jobcentre advertisements and local newspapers. In some instances, Personal Advisers explored different job options and offered advice on the availability of different types of work, which helped to focus participants’ job-search.

Lone parents who were provided with better-off calculations and information on in-work benefits felt more confident about moving towards the labour market.

Some lone parents returned to ONE following their initial Personal Adviser meeting, often for help with job-search or to talk about job options. They discussed job-search activities, looked for vacancies on a computer, and some were referred to local support agencies. Personal Advisers were seen as ‘an extra set of hands’ for job-search. Some Personal Advisers were particularly active and telephoned clients when vacancies were posted. Lone parents appreciated this support, and often indicated that they felt that their confidence and motivation had improved as a result.

Other contact concerned education and training. Personal Advisers offered advice on training options or provided referrals to courses. This support was appreciated by lone parents, who either then felt that they were on the right track, or appreciated the Personal Advisers having made new suggestions.

The immediate impact of ONE on the attitudes and behaviour of this group of lone parents was limited because Personal Advisers often concentrated on benefits and did not discuss work in any depth. Many of these lone parents felt unable to refocus on work as a priority because of their immediate personal circumstances. Personal Advisers generally offered lone parents the space and sympathy to adjust to their circumstances, but also made them aware that help in relation to finding work was available to them when they were ready. Many lone parents intended to return to ONE when work was more of a priority.

Some lone parents were in part-time education or training on their entry into ONE as part of their long-term strategy to return to work. Personal Advisers offered advice, support and encouragement in relation to their courses. The focus of the meetings was generally on benefits. Lone parents appreciated this advice and assistance and the resultant financial security offered by their benefits while they completed their education and training.

In the medium-term, some lone parents indicated that work had become an immediate priority. In a few cases, participants had then returned to see their ONE Personal Adviser to get help with their job-search activity.
2.7.4 Lone parents for whom work was not an option

Other lone parents felt strongly that work was not an option for them, and reacted badly when work was raised as an issue at the initial Personal Adviser meeting. Personal Advisers were able to change some of these lone parents’ attitudes to work and claiming benefit by challenging their attitudes or exploring the different options available. In the medium-term, there was little change in attitudes and behaviour towards benefits and the labour market. There was little follow-up contact with Personal Advisers, so the opportunity to discuss the possibility of work did not arise. A few lone parents re-established their relationship with their partner or spouse and so were able to move off benefits, and sometimes back into full-time or part-time employment.

2.8 Follow-up contact with ONE after a year

This section focuses on contact between lone parents and ONE in the six months prior to this round of research being undertaken. It distinguishes between voluntary and mandatory contact.

2.8.1 Mandatory follow-up contact

The different types of possible mandatory follow-up contact are outlined in Chapter 2. Mandatory contact with lone parents generally included annual trigger meetings, and triggers for those whose youngest children had reached the age of 16. Those lone parents who had experienced such meetings indicated that they were contacted by a letter explaining that they were being asked to return to the ONE service to have another meeting with their Personal Adviser.

Lone parent annual trigger meetings

Lone parents had mixed reactions to being contacted for a trigger interview. In some cases they viewed the letter inviting them to interview as ‘part of the system’,

‘I got a very scary letter … [it] said that I had to go for a meeting at the Jobcentre at a certain time, and it said on the bottom in big bold type ‘if you do not turn up to this interview your benefits will be stopped until you get in touch with us’, and I thought ‘oh my God’.’

(Female lone parent aged 17, child aged one and a half)

Participants had mixed expectations of the meeting, often depending on their previous experience of the ONE service, or of the benefits system. In some cases participants indicated that they thought that the trigger meeting was intended to ‘check up on them’, but were pleasantly surprised.

‘I just thought it would be, sit down, and they say are you still claiming, yes, are your circumstances still the same, yes, okay then, bye, but it weren’t all.’

(ibid.)

Some indicated that prior to their Personal Adviser meeting they were concerned that they would be ‘pressured’ into moving into work. However, when Personal Advisers explored the possibility of work within the context of parents’ personal circumstances they were reassured.
‘They just sort of asked me how I was getting on … had anything changed. I said to them, since the last meeting … Then they said to us would you be willing to go back to work, would you like to go back to work? Because there is help out there and we can help you and they sort of brought it up like, so we talked about it.’

(Female lone parent aged 29)

The way in which the interview was presented by the ONE service was important in influencing lone parents’ expectations of the meeting. Following receipt of a letter, lone parents often contacted the ONE service for clarification of when they had to attend and the purpose of the interview. In some cases, Personal Advisers tried to underplay the mandatory aspect of the meeting.

‘They were pretty nice about it, they didn’t make it sound like something I had to do. You know they left it as if it were an option … it wasn’t a problem for me.’

(Female lone parent aged 32, children aged five and two)

Personal Advisers explained that a meeting was intended to occur a year after a participant’s first contact with the service, and that it did not relate to details of a lone parent’s claim. Participants indicated that their Personal Advisers had opened their discussions by asking participants about their personal circumstances, and whether they had changed in any way since the time of their initial claim.

‘[I felt] a bit funny like … and then they said it was just routine … and I was like yes that’s fine, I’ll talk to them. It took me by surprise at first, because I don’t think I was expecting to hear from them, do you know what I mean, because it didn’t seem a year, it seemed shorter than a year, and it seemed to me like it’s not been long, and I’m sort of taken aback about it.’

(Female lone parent aged 26, three children, one aged four and two aged two)

Participants were more likely to find the trigger meeting relevant if they felt that the advice given was tailored to their needs and personal circumstances. Annual trigger meetings often had an explicit focus on returning to work, and included discussions about those barriers which participants identified as impacting directly on their ability to move into work. In no cases did participants indicate that Personal Advisers had initiated discussions about any other barriers to work.

Many lone parents indicated that childcare, and financial issues, were the key barriers to work that they faced. Participants indicated that Personal Advisers responded to these issues by providing supporting information and better-off calculations covering in-work benefits and housing and council tax benefits as well as entitlement for support for childcare. Thus, Personal Advisers showed participants the financial value of work and
helped to focus lone parents on the balance between work and their other responsibilities. The impact was augmented when an available job was used as a basis for the exercise.

‘She did like an example, they put in a job, that was on the [job] board, and then showed me how they’d work it out and showed me how much better off you were and she said you could claim higher Child Benefit as well.’

(Female lone parent aged 24, two children aged six and two and a half)

Changes in attitude were often linked with discussions about the results of a better-off calculation.

‘… and then she told me everything I could claim for and sort of told me how much better off I would be if I had a job and how would I feel then, and I thought, well, it’s got to be better than being on Income Support.’

(Female lone parent aged 36, daughter aged 10)

However, identified financial reward was not the only factor that focused lone parents on work. The value ascribed to work was also important. In a few cases, lone parents indicated that even if they were only marginally better off – or even slightly worse off – they might consider taking a poorly paid job, part-time job, or one not related to their previous experience, as a route into work and further progression in the labour market.

Trigger meetings were also used to discuss job-search and job options. Personal Advisers took the opportunity to explore different types of work, or routes into work. Personal Advisers suggested voluntary work as a means of gaining experience in a certain field,

‘So I mean it was from her really that I went out and tried to find some voluntary work. I didn’t know at the time, apart from walking into the organisations or contacting them myself, you know I didn’t know what my next plan was going to be at all, and it gave me at least something to try and aim for, to try and, you know, try and achieve, it gave me an idea of what was my next step really.’

(Female lone parent aged 27, daughter aged six)

In other cases, participants indicated that Personal Advisers had suggested voluntary work as a means of gaining confidence in relation to holding down a job.
Example

Mary, aged 32 has two children aged 14 and six. She starting claiming Income Support after her marriage broke down under distressing circumstances. She had never been in work, and was in considerable debt. Her older child needs a lot of attention as he has mental health problems, and also has a lot of difficulty with school work. It is very hard to predict his behaviour from day to day. At her first meeting with her ONE Personal Adviser, Mary explained her personal circumstances and asked about what benefits she was entitled to. Her Personal Adviser suggested that she might be entitled to claim Invalid Care Allowance on behalf of her son. She also suggested that Mary think about opening a budget account.

‘She actually suggested why don’t I have a budget account, set it all down … and pay so much … and it’s great … so I know what I’ve got … benefits each week and that covers like my house insurance, the TV, everything that was difficult … and then I know what I’ve got … so she really helped me.’

At the initial meeting, Mary explained to her Personal Adviser that she did not feel ready to go to work, ‘at the time I just wanted to get on my feet’. The Personal Adviser told Mary that she should return to the ONE service when she was ready to go back to work. She found this meeting encouraging, but did not return to seek further help because she still felt unable to think about work. Mary indicated that in the interim period she was ‘getting fed up, really depressed’, but that she did not have any reason to contact the ONE service. A year after her first contact she received a letter from her Personal Adviser to arrange another meeting. During this meeting they discussed work.

‘She just told me I would be better off working … [but] I couldn’t face the world… She says well why don’t you do voluntary work, and do the hours what will suit you to work around, then you’re not actually tied to a job, and see how you get on with it.’

Shortly after this meeting Mary applied for part-time voluntary work at a nearby charity shop:

‘I thought I’d give it a go, because you don’t know. I’ve never been in work before … I had David when I was 18 so I never actually worked’. The job fitted in with her caring commitments for her children. Mary has learnt how to use a cash register, and has enjoyed meeting new people. She also feels that the job has increased her confidence, ‘I feel very happy … I know it’s not a giant job but I feel brilliant about it …’
Since then, Mary has been applying for part-time work, and has recently
been offered weekend work at a local shop. She called up her Personal
Adviser to tell her that she had been offered the job. The Personal
Adviser asked Mary to come in to discuss her benefits and to work out
what she would be entitled to once she moved into work. Mary
said that her mother would be able to care for her children while she
was at her paid job, and that she also hopes to continue working some
hours at the charity shop.

Where work was not an option, the trigger meeting presented a useful
opportunity to remind lone parents of the type of help and support
available through the ONE service.

‘They said if I changed my mind, if I wanted even like a part-time job even
a couple of days a week, then they would help me. If I wanted time out
they were there to help and they explained all this to me and I was very
grateful … they’d left me to feel comfortable with what I was doing which
was nice.’

(Female lone parent aged 27, one child aged four)

Trigger meetings were most relevant for those lone parents who had
either begun to think about work, or who viewed work as a possibility
in the short- to medium-term future. However, the meetings also
provided an opportunity to re-focus on work for participants who felt
that it was not possible to combine a job with their caring responsibilities.
This was achieved by discussing the availability of different work option.

‘They explained that there’s jobs out there that do understand people have
got children and term times, and allows them to be at home with the kids at
term times and things like that.’

(Female lone parent aged 24, two children aged six and two and a
half)

Annual trigger meetings often occurred after a long period where no
contact had been made with the ONE service. Lone parents’ perceptions
about whether the timing of annual trigger meetings was appropriate
depended on their personal circumstances and attitudes to work. In
some cases, the recognition that it was a year since they had entered the
ONE service – and since their personal circumstances had initially changed
– prompted participants to think about their on-going circumstances,
and whether these might change in the future.

‘It was and it wasn’t [appropriate timing], because at the time it had been
a year, things were flooding back about what happened, it had been a whole
year … but in a way I think it was good timing because … I had already
started thinking about what happened the year before so it didn’t make no
odds when they brought it up, but I think if they had timed it differently
and I weren’t thinking about that at the time it might have made it hard
because it would have started the thoughts up again…’

(Female lone parent aged 24, two children aged six and two and a
half)
In a few cases, the timing of the trigger meeting coincided with participants’ decision to contact ONE again.

‘Yes, I do. I go to the Jobcentre probably three times, four times a week, um just to see what’s on the latest vacancies board and the [care] work board, and I noticed a job about two weeks ago and made an appointment to see the ONE adviser, but the Family Credit person and the ONE adviser centre, she said I was very lucky ’cause she were just about to send me a letter out to say it’s been a year and I needed an appointment.’

(Female lone parent aged 29, two children aged 11 and one)

The effect of annual lone parent meetings was mixed. Most lone parents indicated that they had appreciated the opportunity to discuss their personal circumstances. In some cases there was attitudinal change that was directly attributable to ONE. However, circumstantial barriers remained significant, so whilst some viewed work as a more immediate priority following their meeting, others still saw work as a longer-term priority and referred to timescales related to the ages, and needs of their children.

**Triggers for lone parents whose youngest child had reached the age of 16**

These meetings were presented in the context of lone parents’ necessary transition from Income Support to Jobseeker’s allowance. These triggers shared the annual trigger meeting’s focus on work, and included the same components, including a better-off calculation. Where discussions were undertaken in the context of the participant’s personal circumstances, they generally indicated that they appreciated the opportunity to think about their options. The exceptions were those who felt that they had other personal circumstances, especially health-related which meant that they were entitled to a different benefit. Some older lone parents, in particular also indicated that some concerns that they had related to work experience, their age and the length of time that they had been out of the labour market, were not sufficiently addressed. These participants felt that the timing of the meetings was very sudden, and in a few cases, indicated that they may have benefited from an earlier meeting in the run up to their change of entitlement.

2.8.2 Voluntary contact and caseloding

As indicated in Section 2.3 (on ONE’s short and medium-term impact), some lone parents had made further contact with ONE after their initial Personal Adviser meeting. This sub-section considers the extent and impact of further voluntary contact made by this group.

Voluntary contact took place for a number of different reasons. Sometimes lone parents had pre-arranged meetings to discuss work and their personal circumstances; sometimes they had ad hoc enquiries, generally concerning the processing of their claim or their benefit entitlement. Some lone parents attended additional Personal Adviser meetings to make a new claim for the same benefit or a claim for a different benefit after a change in their personal circumstances.
Further contact was mostly initiated by highly motivated and work-focused lone parents. Meetings took place either prior to their finding work or once they had found a job, and concentrated on in-work benefits and benefit entitlements. Lone parents who were moving into part-time work or reducing their hours (to below 16 hours per week) sometimes went back to ONE to inform their Personal Adviser about the change to their personal circumstances and to ensure a smooth transition to new benefits (i.e. WFTC or IS). Some lone parents for whom work was a longer-term option went back to ONE to explore different job options, or their options in relation to part-time education and training.

The majority of contact was initiated by lone parents when they had a particular enquiry. Some made contact by telephone and others walked into the ONE office. In some cases, lone parents were able to have a meeting with their Personal Adviser on that same day. This was especially helpful as lone parents were able to explore their options or obtain information while their questions were fresh in their mind.

Personal Advisers generally responded to the needs and concerns of participants. These concerns usually focused on in-work benefit entitlement, and whether lone parents would be better off if they moved into work.

Lone parents who saw the same Personal Adviser as in previous meeting(s) welcomed this continuity, as the advice and support they received built on the previous discussions. Others were not able to see the same Personal Adviser, and their experience varied depending on the knowledge, and approach of their new Personal Adviser.

Completion of a better-off calculation offered lone parents additional confidence about their financial security were they to move into work, and resulted in increased job-search activity. This was particularly the case where Personal Adviser’s had undertaken their better-off calculation on the basis of a relevant, obtainable job.

Some lone parents had had no further contact with the ONE service during the year following their initial Personal Adviser meeting. This was usually the case where their personal circumstances continued to present a barrier to their movement into work. Alternatively, the initial meeting had been limited to discussing their claim and the participants did not think that ONE could offer them wider support in relation to work or their personal circumstances. However, these lone parents sometimes made new, voluntary contact with the ONE service in the six-month period covered by the current research, although the extent to which this occurred was somewhat limited.
Lone parents usually made contact following a change to their personal circumstances, following which they felt that they needed to consult their Personal Adviser about their benefit entitlement. In some cases, lone parents’ queries were limited to discussing the possibility of making a new or repeat claim. In others, their circumstances had changed in such a way that work had become a possibility and they wanted to discuss job options. In other cases, lone parents returned to see their Personal Adviser because they wanted to move out of work.

Where lone parents returned to the ONE service following an injury or the development of an illness, they felt that they might be entitled to Incapacity Benefit. Discussions with Personal Advisers tended to be limited to the reasons for their claim.

‘I just told her about I’d broken my other ankle, what do I do about it, an’ she told me what to do.’

(Female lone parent aged 38, one child aged 16)

In other cases, lone parents had become reconciled with their partner, which impacted on their benefit entitlement as well as their perceived ability to work. These lone parents returned to ONE to enquire about their entitlement, and subsequently moved from IS onto JSA. Personal Advisers were sometimes able to support these participants by explaining what they would be entitled to, exploring their options, and undertaking job-searches with them.

‘… then I didn’t have to sit back and think God, would I be able to live? I could work and would I be able to pay the rent and everything else and would I have enough to live on? So yeah, it did help me.’

(Female lone parent aged 31, youngest child aged two)

In other cases, lone parents had moved into work since their entry into the ONE service, but this responsibility had become untenable in the long-term. They had returned to the ONE service in order to make a new claim for Income Support. In these cases, discussions were usually limited to the claim.

2.9 Barriers to further contact

Some lone parents who had not had any further contact with the ONE service over the six month period prior to this round of the research indicated that their personal circumstances had not changed in such a way that work had become an option. Others said that they did not think they could contact the ONE service with work-related queries.

Lone parents often indicated that they would have appreciated further contact with the ONE service to discuss their options in relation to work. Most often they said that they wanted to know whether they would be better off if they moved into work, and what support with childcare would be available.
Some participants had had referrals to New Deal for Lone Parents (NDLP), and had been in regular contact with lone parent Personal Advisers within this system. Once they moved onto NDLP, their contact with ONE generally ceased as they were offered clearly identified Personal Advisers within NDLP. Other lone parents had contacted the Child Support Agency following referrals from their ONE Personal Adviser, to enquire about the process by which they should claim child support.

A few lone parents indicated that they had been referred to the local authority regarding enquiries about the cost, location and availability of childcare facilities in the area. However, they were not always able to get the information they needed from local authorities, and often indicated that they felt that ONE should be able to provide it.

Many lone parents had contacted colleges with enquiries about specific courses, or about funding that was available to support them, on the recommendation of their Personal Advisers. Some of these lone parents had proceeded to enrol on a relevant, or a related course. In a few cases participants indicated that it was possible for them to undertake this training because of the financial support for childcare, or childcare facilities within the college.

On their entry into ONE, some lone parents were in part-time work. Other highly motivated, and work focused lone parents, moved into part-time work in the short- to medium-term. In the longer-term these lone parents with part-time jobs increased their working hours, either because their situation settled down, or because their circumstances changed. Some had moved into full-time work, usually either because their children reached a certain age, or their partner returned. ONE supported them by explaining how the transition from benefits would work, including council tax run-on.

In other cases, lone parents in work in the short- or medium-term had found it difficult to combine working with their sole caring responsibilities for their children, or had decided that they were not better off in part-time work (or only marginally so). Those who decided to leave their jobs (or one of them, where they had several) returned to the ONE service to make a new or repeat claim and find out about their entitlement. They intended to prioritise caring for their children, although some also wanted to look for work to fit in with this, or to move into part-time education and training. ONE was sometimes able to support participants’ plans to enter part-time education and training, with a view to improving skills for re-entry into the labour market. Lone parents in this situation had a good understanding of their benefits entitlement – including in-work benefits – and there were no examples of ONE being able to provide information or support which changed their views about whether or not they could remain in work.
Some lone parents had moved into part-time education in the longer-term. This was either because they felt that this would fit in better with their childcare commitments, or because initial job-searches had highlighted their need to update or upgrade their skills. These participants were committed to using the skills and qualifications acquired to move into work, and hopefully to progress. Their motivation was to ‘build a better future’ for themselves and their children, as well as reinforcing their sense of self-worth and identity.

This group included participants recently separated from their partner; those suffering from ill health; those in independent part-time education or training. In a few cases these participants had been reconciled with their partner, and were able to share their caring responsibilities with them. As a consequence they were able to move back into work. In a few cases, the condition of those with health problems (mental health especially) had improved sufficiently for these participants to regard work as an immediate priority. However, in other cases, participants’ health had deteriorated, or they had developed new conditions that meant that they felt that work was only an option in the future, pending their recovery. Those who had been in education and training had in some cases completed their courses, and had begun looking for work as an immediate priority. Others had planned to progress further in their education and training.

‘I think he did a sheet out that had got everything on it that he worked out and everything and on a basis of how much I would like an hour and worked out everything, and if I’d get any help and Family’s Tax and all that lot and everything towards it. I did tell him I weren’t interested, but he did say he’d work it out anyway … it’s not that I’m better off at home it’s just that I don’t want to go to work just yet so … he did work it out for me. I could work and would be able to pay the rent and everything else and I would have enough to live on, so yeah, it did help me.’

(Female lone parent aged 22, one daughter aged a year and two months)

Some lone parents were experiencing on-going barriers to work, including childcare and health difficulties, and they therefore felt that work was still not an option for them.

In a few cases, participants who had indicated that work was not an option for them at the time of their entry into ONE felt differently just over a year later. They now viewed work as an option because of information about in-work benefit entitlement, and personal support offered through ONE or NDLP. An exploration of their interests or hobbies sometimes encouraged these lone parents to consider the desirable aspects of moving into work. In most cases, participants were encouraged to explore different routes into employment, including education or training, part-time work or voluntary work, as a means of progression into longer-term employment.
Many lone parents moved towards, or into, the labour market during the 18 months following initial contact with ONE. There were a number of ways in which ONE supported these movements. In all almost all instances, the tailoring of information, advice and support to lone parents personal circumstances was important. The completion of a better-off calculation, and the provision of information on in work benefits, was a key factor in convincing lone parents about the financial value of work. It often resulted in increased job-search activity, or attitudinal change so that lone parents viewed work as a shorter-term priority. Personal Advisers were also able to help those further away from the labour market by suggesting alternative routes into work, for example voluntary work. However, there were other factors, not related to ONE, which influenced the behaviour and attitude of lone parents. These mainly resulted from changes to lone parents’ personal circumstances, for example their children growing older, or their completion of education and training.

Other lone parents moved away from the labour market, or maintained the same relationship to the labour market, as a result of their personal circumstances. There were few cases in which ONE was able to refocus these lone parents on the possibility of work.
In addition to its particular interest in lone parents, the research was also designed to provide in-depth information on ONE’s impact on participants with physical health problems and/or mental illness. This chapter starts by examining the impact of ONE over the full 18 months covered by this longitudinal research, on different groups of participants with mental and physical health problems, defined according to their relationship to the labour market at the time they entered the service. Figure 3.1 below illustrates the distance travelled by participants in these different groups, highlighting the direction and scale of movements made a year and six months later.

**Figure 3.1 Distance travelled in relation to the labour market**

The figure identifies four groups of participants with mental and physical health problems, and demonstrates different patterns of movement towards, and away from, the labour market for each group. ONE played a contributory role in some, but not all, of these movements, as evident from the analysis below.

### 3.1 Those on sick pay

Some participants moved into work in the short- medium- or longer-term – mostly in the medium-term. For the majority of participants, their condition and their related attitudes to work remained unchanged. A few of those who went back to work were forced to cease work for a second time because of continued ill health. Participants in this situation now felt that work was an option in the longer-term. Although there was some forward movement, some participants felt less positive about moving back into work.
The few who moved into work in the short- or medium-term managed to sustain employment. However, many participants did not find employment because their condition neither stabilised nor improved. They now felt less confident about the possibility of work in the future and, as a result, some have started to think about work as being a longer-term option.

Some participants now saw work as an immediate priority because of advice and support provided by DEAs. However, many did not change their views about work over the 18-month period since their first contact with ONE. This was because their health problems were persisting. Some moved onto JSA as a result of ‘failing’ the PCA, yet felt that the second Personal Adviser meeting reinforced their view that they would be unable to retrain or find work that they could manage. They now ruled out work as a future option. However, some who moved into work in the short- or medium-term managed to sustain work after full or partial recovery from an illness.

The relationship between individuals in this group and the labour market remained largely unchanged. The prospect of employment was still seen as an option in the longer-term or simply not a possibility. In the 18 months since initial contact with the ONE service, participants’ illness or disability had not stabilised or was progressing. Some individuals were still waiting for major heart or back surgery. Even if they felt well enough to work in the intervening period, these individuals could not see the benefit of entering work if they would then need to take more time off to recuperate. In some cases, Personal Advisers reinforced these views by confirming the seriousness of their condition and avoiding the subject of work.

This chapter uses the finding from this, and previous stages of qualitative research with participants with mental and physical health problems to examine the changes in attitude and behaviour towards the labour market, and the role of ONE in this. The first sections of this chapter demonstrate characteristics of the diverse client group interviewed for this research, including their reasons for claiming, barriers to work, and attitudes to work and benefit are then outlined. The remainder of the chapter is concerned with the impact of ONE over an 18 month period, focusing on impact between 12 and 16 months. The chapter reviews the impact of ONE in the short-term (6 months) and medium-term (12 months), to provide context and background to the analysis. Within the chapter, the role of voluntary and mandatory contact with ONE, and the impact of the Personal Capability Assessment (PCA) and referral to specialists such as Disability Employment Advisers (DEAs) is also considered.
3.5 Overview of the client group

This client group included individuals with a range of conditions affecting their physical and/or mental health. Accordingly, their personal and household circumstances were diverse, as were their attitudes to working and claiming benefit. Participants had varying expectations of the help and support on offer through ONE.

Participants had a range of health problems, and some had multiple conditions. Mental illness, especially stress and depression, often developed in those with a disability or illness that affected their health. It was brought on by the prospect of not being able to work, the unpredictability of an illness, and financial strain. Some participants had conditions that directly affected both their physical and mental state, such as myalgic encephalopathy (ME), which hinders mobility, energy and concentration levels.

Common health problems were arthritis and angina or other heart problems requiring major surgery. Some physical injuries and illnesses were work related, and had generally developed over time among those with manual jobs. Mental illness tended to be long-term (three to 20 years), especially among older participants. Some participants with poor mental health also had limited caring responsibilities for a family member, and this exacerbated their condition, for example leading to panic attacks or nervous breakdown.

‘I've all these psychological problems with being on pills for so many years … I think the last time I worked was about 1980 … I looked after my mum with cancer, I looked after my dad for two years with heart trouble, so I didn't work, I had enough to do.’

(Woman aged 59, suffering from panic attacks)

Reasons for making a claim were diverse. Some claims were made to renew levels of benefit payment, or to provide financial support for clients and their household when ceasing work. Some of those stopping work had done so suddenly, whereas others had gradually reduced their working hours as their illness progressed. Some claimants had been off work and receiving statutory sick pay from their existing employer over the previous six to 12 months, and were now making a claim as they were not fit to return to work. Others had tried to return to work, but found that they were unable to maintain a job because of their ill health.

‘I was out of work for a year then I went back for three months. I wanted to go back but I shouldn’t have done it. I thought I'd be able to work it out but it was too painful.’

(Man aged 52, suffering from spongalosis in the spine)

Most individuals wanted to work, in order to improve their financial security and interact socially in a working environment. When they made their claim, their health problem(s) dictated whether they were able to work and, if so, the type of work they were able to do.
Participants’ views on benefit typically reflected the length of time that they had been out of work and therefore reliant on state support. Many of those with a long history of claiming felt worthy of a regular income via benefits to help them survive financially. This was because they did not have control over their illness and its effect on their ability to work. There was a consensus among both long-term and new claimants that the standard of living on benefit was poor and that employment would provide a more rewarding lifestyle. Some mentioned the need to earn a certain level of income to be ‘better off’ financially. Those with recent work experience were more confident about the prospect of finding employment which was well paid.

Some saw benefit as a ‘stop gap’ to support recovery in the short- or medium-term. This was particularly the case among those who had been receiving sick pay before their claim, and who were officially still employed.

Participants with physical and/or mental health problems demonstrated varying degrees of attachment to the labour market. Some participants were still technically employed, having been off work for six to 12 months on Statutory Sick Pay. Others had ceased working suddenly because of injury or illness. They had recent experience of the labour market and expected to recover quickly and return to work. However, those participants with a recently developed illness or injury had acknowledged that returning to work would be a slow process, pending their recovery. At the time of the initial claim, other participants were still awaiting confirmation as to the severity of their illness and prospects for recovery. Those who knew that surgery and rehabilitation would take years did not see work as an option, especially if they were older. Those with a fluctuating physical or mental health problem of unknown prognosis were also uncertain about work as an option.

Advancing age and illness sometimes also precluded work being an option. Older participants with a long history of physical or mental illness, or both, felt that the barriers to returning to work would be too large for this to be a realistic option. Others had been forced to give up work, having previously reduced their hours because of their worsening condition, or having tried to return to work following a period of sick leave.
Example

Arthur had been working as a full-time carpet salesman when he collapsed with a stomach complaint which eventually warranted six major operations. Six months after the initial operation, he started working 20 hours a week for a different employer. Arthur stayed in this job for 15 months until he was in constant pain and general discomfort. A claim was made for Incapacity Benefit once the statutory sick pay from his employer expired. Officially, Arthur was still employed.

‘I was there for 15 months from the time I started to the time it became impossible to work. The last job I had full-time was unloading a lorry of 250 rolls of underlay which are 120lbs each, so that’s how my life has changed. I can’t unload one roll of underlay at 120lbs.’

(Man aged 54, with stomach problems)

3.6 Barriers to work

Health problems were the most significant barrier for this client group. Awareness of additional barriers was limited, and many, particularly those who had not been out of the labour market for long, thought that they would have a direct route back to employment once they were recovered.

The way in which physical and mental health problems acted as a barrier to work varied. Generally, it was the nature of a physical injury or illness that hindered participants’ ability to work again, either in their previous job or in a different job. The condition had constrained their capacity to conduct physical tasks to the previous standards. Illness had in some cases prevented the individual from being fully mobile or having sufficient levels of health to be able to sustain regular work. Additionally, many individuals did not know when they would return to ‘normal’ health, so could not plan for a return to work. For those with mental health problems, the prospect of working with others was the main issue,

‘I couldn’t work, I felt like everyone was watching me and I had to get out of the room. It was very scary, my heart was beating fast 16 hours a day.’

(Man aged 22, suffering from anxiety and depression)

Many of those with physical and mental health problems were concerned about their poor levels of concentration, and that this would be a major problem at work. Reduced concentration was a common side effect of medication prescribed to help make their illnesses more manageable. Participants felt that this would make potential employers see them as a liability.

Lack of awareness of the transferability of skills among occupations, and a general fear of retraining meant that participants were not able to consider their options fully. Indeed, some participants aimed to return to similar
types of manual work to their previous employment even though they had been told that this was not in the interests of their health.

Older participants were concerned that their age was a barrier. Some felt that their age was such that it was ‘not worth’ retraining. Others were concerned about age discrimination by potential employers.

‘My age goes against me. The older you get they don’t want to know. I know if I go for a job and there’s a young bloke there’s more chance that he’s going to get it.’

(Man aged 55, suffering from angina)

Mobility was a particular concern among those with physical health problems. Many did not have a car, and did not feel that they could comfortably travel on public transport. They seemed unaware of help available.

3.7 Short- and medium-term impact of ONE

This section summarises the attitudes and behaviour of those with a health problem in the year after their initial contact with the service.

3.7.1 Participants on sick pay

There were no examples of participants returning to work shortly after the ONE intervention because individuals were in periods of recovery or awaiting medical decisions on the possibility of being able to work again. However, in a few instances individuals returned to their existing employer to resume part-time or even full-time work in the following months. Some returned to work having made a full recovery, but others were risking their health to return to work because of concerns over financial strain on the household. In these latter instances, participants felt the Personal Adviser had not processed the original claim effectively as initial payment had been delayed. There had been little discussion of the support available to help clients to think about more appropriate work in the future.

Example

Simon had been employed in the funeral business until he was forced to give up work after injuring his arm through repeated heavy lifting. The Personal Adviser advised him to make a claim for Income Support. In the meantime, Simon asked where he could make a crisis loan. The Personal Adviser did not tell him where this could be done. Simon’s claim forms were then lost and he had to make a repeat claim by attending a meeting with a second Personal Adviser. The income earned by his wife through part-time work was not sufficient to support the family, and Simon returned to work against the advice of his doctor.

‘Money was so tight, I had to claim for a crisis loan. I went back a lot quicker than I think I should have … there’s no such thing as light duties, I pick up a few big people on stretchers, right, and the pain you see in my eyes, and I think oh no what if this goes completely.’

(Man aged 42, suffering from nerve damage in the arm)
3.7.2 Participants for whom work was an immediate priority

Shortly after the intervention of ONE, some returned to previous employment where others found alternative part-time (and usually temporary) employment. This group mainly comprised those with recent work histories who were able to manage their illness and symptoms before the intervention. Therefore, movement was independent of contact with the Personal Adviser. Although some remained employed over the coming months, there was some movement between jobs. Again, some returned for a short period before realising they were not capable of work.

‘I started back at work to occupy my mind. But things got worse, I couldn’t do anything and I just couldn’t cope. So I went back down again.’

(Man, aged 46, suffering from depression)

Others were still not well enough to work, and had not necessarily been fully aware of the time needed to reach recovery. For these individuals, work had now become an option for the future rather than an immediate priority. Some who had been on sick pay beforehand, had aimed to continue their contract by working from home, or to establish their own business in the medium-term. However, they had not been able to access all the information and support they needed to achieve their goal, even when they were partly recovered and felt able to work again. The initial Personal Adviser meeting had not provided discussion around work or training, and there were few instances of further contact with ONE. Participants felt detached from the labour market, with little confidence in thinking about possible types of work. Some had begun to see work as a longer-term option.

3.7.3 Participants for whom work was an option in the future

For most, this type of relationship with the labour market remained unchanged one year after the intervention. Individuals were still waiting for their condition to stabilise or improve, and some were waiting for further surgery.

‘I was still waiting for my operation at the time so there was no point in me going back.’

(Man aged 51, waiting for a heart bypass)

Few of these participants returned to ONE to discuss work, because neither Personal Adviser nor participant raised the subject of work during the initial meeting (as clients did not know that help was available). Some returned to ONE because they had ‘failed’ the PCA and had to make a fresh claim for Jobseeker’s Allowance. This was a distinct and separate meeting and treated as a new claim. As a result, they met a different Personal Adviser in order to discuss work.

Some participants were angry about having to claim JSA and attend a work-focused meeting, because they did not feel well enough to work. Despite this, some did move into part-time or full-time work in the medium-term. In these instances, there had been some recovery from
illness. Individuals returned to their existing employer independently of ONE, or work was found after advice from the Personal Adviser on what alternative types of employment might be appropriate.

3.7.4 Participants for whom work was not an option

Perceptions of work generally remained the same among these participants because their individual circumstances had not changed. However, some had moved closer to the labour market, usually when advice and support provided by the Personal Adviser had led to referral to a Disability Employment Adviser (DEA). Occasionally, work had become an option for the future. During the year since participants’ initial contact, intervention appears to have focused on providing help with considering training and other support, alongside referrals to DEAs.

There were larger groups of individuals who were less aware of the help available, and who had little or no experience of a work-focused discussion. The meeting with the Personal Adviser concentrated on processing the benefit claim and the discussion was not widened to consider work. They included those on sick pay, and those for whom work was an immediate or longer-term priority were unsure about the timescale needed for full recovery and the changes required to secure work again in the future. Also included were participants who could not see work as an option because of the unpredictability of their illness.

It is worth noting that participants did not raise their barriers to work such as lack of awareness of transferability of skills, age and mobility directly with the adviser. Reasons for this relate to not knowing what advice and support was available through ONE.

3.8 Follow-up contact with ONE after a year

This section considers voluntary and mandatory contact between the ONE service and participants in the six months prior to the current research. Contact was mostly initiated by the service in the form of a referral to a DEA, a trigger meeting or caseloading. Changes in a benefit claim also warranted a second Personal Adviser meeting. Voluntary contact by participants was ad hoc and usually stemmed from an inquiry regarding benefit.

3.8.1 Further voluntary contact

Some participants had already made voluntary contact with ONE since their initial Personal Adviser meeting, and continued to make further contact with the service.

Ad hoc contact

An enquiry about benefit, particularly eligibility for additional benefits, was the usual reason why participants returned to their Personal Adviser. Most individuals with benefit queries felt that work was a longer-term option, if at all. Consequently, none of those initiating further contact with ONE wanted to discuss work, education, training or any other support which might be available in relation to supporting moves into
work. Personal Advisers did not use the opportunity given by this additional contact to discuss work. Although the focus on benefit was appropriate for participants because of their views on work, these attitudes were not challenged by the ONE intervention.

'It was when I took the form in for ICA, I had to take the form in to see if I had filled it in right. Although the woman at the advice centre helped me fill it in. They sent the form off for me.'

(Woman aged 58, suffering from spongalosis in the spine)

Caseloading

Participants who were advised by their Personal Adviser to claim additional benefits such as Disability Living Allowance (DLA) were asked to return for a further meeting once a decision had been made on their eligibility. Discussions focused around the claim, and there was no further contact after this point.

Where caseloading occurred, work was a secondary focus to benefit and examples of referral were limited. In some cases, Personal Advisers checked to see if there were any additional benefits that individuals could claim, leaving little time to discuss work.

'She’s always said I could come and see if I could get claims from anywhere else, which I would do, but she said I wish you all the luck when she found out how bad I was from the medical reports.'

(Man aged 52, suffering from spongalosis of the spine)

Referrals to Disability Employment Advisers (DEAs)

Specialist advice from a DEA in suggesting alternative types of work and in-work support allowed individuals to move closer to the labour market. In most instances, referrals were made at the initial Personal Adviser meeting, when individuals were seeking advice about alternative job options. The timing of these referrals was appropriate, as it followed an expressed interest in working in the future. Discussions with the DEA focused on what types of work might be possible given the type of illness suffered by the customer, and what in-work support might be available, such as adaptations to equipment and work trials. Some clients saw a DEA more than once, enabling frequent discussion on support into work.
After working for ten years as a bus driver, Andrew had to stop work because of blocked arteries. His heart problem made it difficult for him to lift heavy objects or walk long distances. Six months after his operation, Andrew was made redundant from his existing employer, who had been providing sick pay. Andrew was very aware that he would need qualifications to work in an office and had no idea as to what work might be possible. The Personal Adviser referred him to a DEA, and Andrew has now seen the DEA four times. The DEA has actively helped him to identify vacancies where the pay would be sufficient to enable him to be financially better off.

‘When you go for a job now, it’s about what qualifications you got, what can you do and I’m not qualified because I haven’t been doing office work.’

‘The only person who told me to get a CV was the disability girl. I have seen her four times in the last six or seven months.’

(Man aged 46, suffering from angina)

A few referrals to DEAs had not been taken up yet because the individuals concerned were waiting for their condition to stabilise.

‘I was going to meet another person for disabled working and things like that when I had the operation, but obviously that has not occurred because I am still waiting for the operation.’

(Man aged 51, waiting for a heart bypass)

There were no examples of participants having initiated new, voluntary contact with the ONE service in the six-month period covered by this research.

3.8.2 Making new, voluntary contact

3.8.3 Mandatory contact

Triggers

There were few examples of triggers. Some individuals remained on Incapacity Benefit after undertaking a PCA and were sent a letter requesting them to make an appointment to return to ONE. Compared with the initial Personal Adviser meeting there was greater discussion of work, including the types of work individuals would be able to conduct within the restrictions of their illness or disability. The follow-up meeting also provided a useful opportunity to focus discussion around transferable skills and appropriate training, with the same Personal Adviser.

However, participants felt that Personal Advisers did not always have the specialist knowledge to be able to advise on adaptations to the workplace, outline working rights or suggest next steps for those with specific professional careers. In some instances, Personal Advisers signposted participants to short courses on business start-up, which the individuals were not eligible for because of their age or benefit status. However, this offer of advice was appreciated.
Example

Michael had been forced to take Statutory Sick Pay from his employer while he recovered from an operation on his back. He had a solid work history as a lawyer. The illness had progressed from a prolapsed disc a few years before to degenerative spinal disease which will warrant at least two more operations. Michael is unable to sit down for longer than 15 minutes. The initial Personal Adviser meeting focused on his claim as he was intending to work at home for his existing employer or start his own business.

One year later he was asked to undertake a PCA and received a letter asking him to return to ONE. Michael saw the same Personal Adviser, who asked his views about returning to work and which hours would be appropriate. After mentioning that he wanted to set up his own business, the Personal Adviser provided him with a pack describing a business start-up course. Michael later discovered that he was ineligible for the free course as he was over 30. The Personal Adviser also suggested a computer course as he had stated a need to learn more computing skills. However, this course was not feasible, as it would have involved sitting down for long periods of time. The advice was not wholly appropriate and the individual felt the Personal Adviser had lacked specialist knowledge.

‘He tried to be helpful, he did ask me what work I wanted to do and if I needed any training. I think he did as much as he was equipped to do. I can’t be the only person who said they would like to start their own business. I’d have thought if somebody had raised that they’d be actively encouraged. They’ve probably got so many people to deal with, a vast proportion fit into a certain block. They have to cater for the mass majority. I see myself as a round peg trying to get into a square hole.’

(Man aged 36, suffering from degenerative spinal disease)

Change in benefit claim

Most mandatory further contact comprised the initiation of a fresh claim. In a few instances, participants had been taken off Incapacity Benefit after undertaking a PCA. The shift in eligibility to JSA meant that individuals had to make a fresh claim and therefore attended a further Personal Adviser meeting which was focused on work. This contact was with a different adviser.

Many individuals felt that they were still in a period of recovery or that their illness or disability was too unpredictable for them to be able to successfully enter sustained employment. As a result, these participants were not prepared to discuss the subject of work and did not consider the timing of this discussion to be appropriate. In addition, they did not
feel that subsequent contact with ONE or the Jobcentre had given them advice on what types of work might be suitable and what training would be required.

‘Time and time again I tell them I’ve got two jobs I can do, gardening and warehouse work, but they keep saying to me have you looked in the paper for a different job to gardening. I don’t know if they realise that I’ve only been taught those kinds of jobs.’

(Man aged 58, with arthritis in the back and a history of epilepsy)

In some instances, follow-up contact was offered to inform participants of vacancies, but this offer was not always fulfilled.

‘I just think that they couldn’t be bothered. If they really want people to go out to work and they take people’s number, I think they should take the time if a job comes up, to contact you.’

(Female aged 30, recovered from swelling in the knees)

3.9 Barriers to further contact

Many participants had made no further voluntary contact with ONE since their initial Personal Adviser meeting. Participants did not realise that they could obtain advice and support relating to work. Experience of a benefit-focused initial meeting without explanation of the remit of ONE contributed to this perception. In some instances, individuals had mentioned at the initial meeting that they did not know what alternative types of work would be possible but had not directly raised this with the adviser.

Many participants could not recall being advised that further contact with their Personal Adviser was available. Participants who were already work-focused as an immediate or longer-term priority and who were aware that they would need to retrain would have welcomed advice from the Personal Adviser.

There was a particular lack of awareness among participants about what alternative types of work would be possible and what existing skills could be transferable. Following on from this, participants were not confident in thinking about how they could gain relevant work experience or where they could look for vacancies. There were also cases where further contact was offered but never transpired.

‘When I spoke to them they did say that they would help me find some sort of job. I think they said that there would be a phone call at a particular time or in a particular month, but I never got a phone call. I would want to talk to them about that because I can’t see where they’re going to be able to find a job that I could cope with.’

(Woman aged 26, with ME)

A few participants suggested that it would be useful if Personal Advisers contacted them every three or six months to remind/inform them of what help is available in signposting to retraining and making job-search
activity more effective. Those who would welcome this regular contact were already thinking about work as an immediate priority or in the longer-term. Caseloading was also perceived as a way to gain financial advice through exploration of in-work benefits and the better-off calculation. Participants also wanted access to specialist advice where this was not available through the Personal Adviser. They did not necessarily know that a DEA would be available.

‘I know you make your new claims there, but I think they should help you more, as well as the Jobcentre. They could have you for an interview every six months or every four months, something like that, to look on the computer screen to see if there are any new jobs going.’

(Female aged 30, recovered from swelling in the knees)

3.10 Contact with other agencies

Contact with other agencies for support and advice was limited and was initiated by participants. Where such contact occurred, participants were mostly seeking advice on their benefit claim and any related appeals, and on physical adaptations to the home for those with a disability. The Citizens Advice Bureau and GPs’ surgeries provided a source of support in this respect. Other voluntary organisations providing support and advice were approached for similar reasons. Those participants with a close involvement in particular support groups were already aware of the disability employment advice available from the Jobcentre.

3.11 Long-term impact of ONE

This section examines the effect of the ONE service on participants with mental and physical health problems between 12 and 18 months after their initial contact with the ONE service.

3.11.1 Participants in work

Participants in part-time work on their entry into ONE were in most cases still in work over the longer-term.

3.11.2 Participants for whom work was an immediate priority or for whom work was an option in the future

Many participants found it difficult to identify the timescale under which they would be able to return to work, because those who had moved into part-time work in the short- or medium-term were still working.

A small number of those for whom work had previously been an immediate or longer-term priority had also since moved into employment. They had either recovered or their illness or disability had become more manageable. This movement in their work situation had occurred in most cases because of help and support offered by a DEA after referral from the Personal Adviser or self-referral by participants.
Example

Susan had suffered a back injury after a serious car accident. This injury had exacerbated an existing back problem caused by a previous accident. She had been working for ten years in part-time and then full-time employment as a hardware auditor. The accident caused extensive tissue damage in her back, which meant that she was unable to sit upright in a chair, bend down or walk long distances. The doctor recommended a period of recovery of one year. Susan was conscious that she only had relevant training and experience in IT. The Jobcentre made a referral to a DEA, who arranged a work trial with an IT company.

‘I went down to the Jobcentre and they introduced me to the disability employment people, I knew someone who would give me a job and they supported me. When I told the employer I could get a lot of support of course that made life a lot easier and made their investment in me a lot more viable as well.’

(Woman aged 59, suffering from a long-term back injury)

Susan is now working for an IT company part-time and is mainly based at home.

3.11.3 Participants for whom work was not an option

A few individuals had become more focused on work as an option for the longer-term when in the short- or medium-term this had not appeared possible. It is in these cases where ONE has impacted on attitudes and behaviour. In most instances, participants had been referred to a DEA who had then helped them to consider the options of training and work trials which might be open to them to assist in developing their skills and confidence to return to work. Individuals acknowledged the involvement of ONE in allowing them to gain access to these opportunities, which they might not otherwise have been aware of.

Although advice or signposting from Personal Advisers was quite general, participants appreciated that this information had been offered. Support comprised an acknowledgement of the limitations of participants’ illness or disability, and recommendations on alternative types of work.

‘The adviser referred me to go and see the disability person. All the jobs I have applied for have been on the phone through the disability people. She’s [DEA] not bad, she phones around trying to get interviews and things.’

(Man aged 46, suffering from angina)
Some participants with mental and physical health moved into and toward the labour market in the 18-month period following their initial contact with ONE. These participants were generally highly motivated, and viewed work as an immediate priority. ONE was sometimes able to support them in their movement towards the labour market through personal support and the provision of necessary information. The impact of ONE on those for whom work was only a medium- or longer-term goal was limited because work was rarely discussed at their initial Personal Adviser meeting. Some participants were refocused on work as a short-term option through the personal support, and advice job options offered as a result of a referral to a DEA, or in some cases, at their initial Personal Adviser meetings. The impact that the ONE service had on participants with mental and physical health problems in the longer-term was limited because few returned to the service to seek further information or advice. Follow-up contact was generally limited to enquiries about benefits, and discussions were rarely widened to include work. In a few cases participants who had had no further contact moved to work independently of ONE, as a result of their health having improved, or because they believed that they would be financially better off. In other cases, participants’ relationship to the labour market did not change, and they indicated that it would only do so if an improvement to their health allowed it. Some participants moved away from the labour market as their health deteriorated. A few of these indicated that they would have appreciated help and support from the ONE service, in relationship to work options, as well as benefits entitlement, and access to external support services.
This chapter explores the impact of ONE over time on participants with caring responsibilities. This chapter starts by examining the impact of ONE over the full 18 months covered by this longitudinal research, on different groups of carers, defined according to their relationship to the labour market at the time they entered the service. Figure 4.1 below illustrates the distance travelled by participants in these different groups, highlighting the direction and scale of movements made a year and six months later. The diagram uses participants’ position on entry to ONE, and not after their initial PA meeting, as the baseline position. It charts the direction and scale of movements made a year and six months later.

**Figure 4.1  Distance travelled in relation to the labour market**

4.1 Carers in work

Some carers had to leave work as their caring responsibilities increased. Others remained in part-time work, but often experienced increasing difficulty in balancing their work and caring commitments. These carers’ experience of ONE was usually limited to their initial meeting, which was usually benefits focused. No carers received help that allowed them to remain in work.

4.2 Carers for whom work was an immediate priority

These carers had usually identified alternative sources of care for their partner or relative. In a few cases they moved into work, and received help from the ONE service with job-search.

4.3 Carers for whom work was an option in the future

These carers’ initial Personal Adviser meetings often focused on the benefit claimed, and there was limited discussion of participants’ personal circumstances. As a result, there was limited attitudinal change within this group. Some went into education and training to help to prepare them for their movement back into work. In some cases, carers were able to move back into employment when their caring responsibilities
ceased. In other cases, participants’ caring responsibilities increased and they moved further away from the labour market. Personal Advisers were able to support them by explaining new benefits entitlement and undertaking better-off calculations.

4.4 Carers for whom work was not an option

Personal Advisers did not generally challenge the assertion on the part of these participants that work was not an option. As a result, there was little attitudinal and behavioural change within this group.

This remainder of this chapter outlines carers’ attitudes to claiming benefits and work against the background of their work histories and personal circumstances. Barriers to work commonly experienced by the carers interviewed for this research, and the extent to which they impacted on participants’ ability to move into work, are also examined. The impact of the ONE service in the short-term (6 months) and medium-term (12 months) is outlined to provide a background for the longer-term findings. The extent of voluntary and mandatory contact with the ONE service, and impact of the ONE service between 12 and 18 months is a key interest.

4.5 Overview of the client group

Carers were predominantly, but by no means exclusively, women and were of varying ages. Caring responsibilities usually related to a partner or child(ren), but could also be for another family member. In a few cases, carers had concurrent multiple caring responsibilities – for example for a partner and an elderly parent. Sometimes participants had cared for a different individual prior to their most recent caring responsibilities.

Carers entered ONE by making a new or repeat claim for benefit following a change in their personal circumstances. Sometimes their caring responsibilities had become more intensive and they had had to leave work or reduce their hours. In other cases, carers made a claim for Invalid Care Allowance after having been told that they would be eligible to claim this benefit by a friend, or often a local GP. Many had already been undertaking full-time caring responsibilities for long periods.

Carers generally viewed their claim for Invalid Care Allowance (ICA) as an important source of income while they were caring for their partner or relative. They viewed their benefits entitlement as a positive recognition of the caring role they were fulfilling. In a few exceptions, carers did not feel comfortable making their claim for ICA because they saw caring as ‘something [they] would do anyway’.

Many carers anticipated a need to claim benefit over the medium- or long-term. Even those carers who had a very strong attachment to the labour market felt that work would be very difficult to sustain alongside their caring responsibilities. In most instances, work was not their first or immediate concern. Instead, securing a source of income to support themselves and/or their dependants was the primary consideration. In a
few cases, however, carers indicated that they also wanted to try to balance work (either their existing job or a new one) with their caring responsibilities.

A few carers had part-time work when they entered the ONE service, which they had reconciled with their caring commitments up until the time of their entry into the ONE service. Some felt that work was an immediate priority. They were mainly looking for part-time work to fit in with their caring commitments. However, some carers felt that work was an option for the future. This was particularly the case for older carers with substantial work histories in a particular area, and a strong attachment to work. These carers indicated that they wanted to return to work once their caring responsibilities ceased. Many carers were not prepared, or willing, to work when they first entered ONE. Most had a strong commitment to providing care for their partner or relative. They felt that it was not possible to combine work with their caring responsibilities, and questioned the availability of 'good' alternative sources of care.

Participants’ caring responsibilities were the foremost barrier to work. They had a strong sense of commitment to caring for their partner or family member. This was in part because of a strong sense of duty, but also because they often felt that the person they cared for would only be comfortable under their care.

Replacement care was an additional barrier. Some carers felt that they had to take full responsibility for caring in the absence of an alternative source of affordable, reliable care.

Caring responsibilities were likely to increase over time, as the health of the person needing care deteriorated. Only an extreme change in circumstances, namely the death of the person being cared for or a permanent move into a care home or hospital, would bring an end to this responsibility.

Many carers suffered from mental health problems related to the emotional and practical demands of their caring responsibilities. These problems included depression and/or anxiety. Such conditions had often become more serious over time because of an exaggerated sense of social isolation and loss of independence.

‘Well it does get to me, especially [since] I have been working most of my life, this is just a change in lifestyle for me.’

(Male carer, aged 44)

Some participants had been out of the labour market for a long time as a result of their caring responsibilities, and identified additional barriers to work as a result. These included work experience and low or outdated
skills. Many felt that if they were to try to move back into work these barriers, and in some cases their age, would make it difficult to find employment.

Carers often indicated that because they felt that they experienced one, or several of the barriers outlined here, that they were less motivated to consider the possibility of working alongside their caring commitments, or thought that it would be difficult to find work when their caring responsibilities ended.

Many of these carers were intending to leave their job because their caring commitments were becoming more intensive. Their primary concern was to find out what they would be entitled to when they gave up work. Initial Personal Adviser meetings focused on the events leading up to the claim, and carers' benefits entitlement. There were no examples of Personal Advisers encouraging participants to remain in their job.

A few participants wanted to try to reconcile work with their caring commitments. They discussed the number of hours they would be able to work while still claiming ICA. There were few cases where Personal Advisers introduce the possibility of part-time work as a way of reconciling work and caring commitments. Where better-off calculations were undertaken, Personal Advisers told these carers when they were likely to be financially better off if they left work. Some carers were concerned that if they left the labour market they would have difficulty re-entering it at a later date, in particular when their caring responsibilities ended.

### Example

Justin, aged 59, cares for his elderly mother. She has limited mobility because of severe arthritis, and also suffers from dementia. Her condition is gradually getting worse as time goes on.

Justin left his job at an accountancy firm 11 years after his caring responsibilities started, at which point his doctor recommended that he make a claim for ICA. Having left work, Justin initially planned to work part-time, but found that he was very tired during the day because his mother needed a lot of care during the night. He registered as self-employed six months later, after an old colleague suggested that he could get freelance accountancy work from a work contact, but then went to the ONE service to find out what support he was entitled to. On making his claim for ICA, the Personal Adviser told Justin that he might be better off not working.

‘When I got there she told me that it was dependent on how much I’d be earning a week. She advised me that it might be better if I looked after Mum full-time, which I said I’d think about.’
Justin appreciated the information he was given about his entitlement, but did not feel that he wanted to stop working altogether.

“She said I think her mother was the same, and she said that I might consider that it would be better to claim this ICA. I said that on balance I prefer to keep up the self-employment. I might live another ten years, and I don’t want to live off the state … it’s keeping those [work] contacts. If that happened [his caring responsibilities ended] I could really go for it and do a tidy amount. I feel I could make a reasonable living … I’ve turned down work in the past.’

He now works 16 hours or fewer a week completing accountancy work for a personal contact: ‘they appreciate my position … so if there is work they give it to me’. Justin completes as much work as possible, working at home in the afternoons and evenings, which fits in with his current caring commitments.

Carers still in their job were sometimes disappointed when the Personal Adviser neglected to explore their options in relation to work following a better-off calculation. In particular, carers often said that they would have appreciated advice in relation to home help and relief care. Some carers indicated that they were upset about the prospect of not being able to work for the foreseeable future.

### 4.7.2 Carers for whom work was an immediate priority

A few carers either wanted part-time work to fit in with their caring commitments or had found replacement care and wanted to move into full-time employment. Personal Advisers offered support with job-search to both of these groups.

Some participants entered the ONE service because their claim for Invalid Care Allowance had been rejected and they were now on JSA. Although they were appealing against this decision, they had to seek work as part of their Jobseeker’s Agreement. They wanted to prove that they had a case for claiming carers’ benefits, but were prepared to undertake the mandatory aspects of JSA. Sometimes they returned to ONE to discuss their entitlement, but initial meetings focused on eligibility and discussion about work options was limited. Thereafter, they were obliged to sign on and attend review meetings in the normal way.

### 4.7.3 Carers for whom work was an option in the future

Many carers felt that they would only be ready to move into work when the person they were caring for died. This was a sensitive issue, and possibly for this reason Personal Advisers did not explore their options in any depth. In a few cases, participants’ caring responsibilities ceased subsequent to their initial contact with ONE. Carers took varying periods of time to readjust to their new situation. Some returned to work on a full-time or part-time basis. Other moved into education and training to...
help them prepare for moving back into work. Personal Advisers supported participants by explaining their new benefits entitlement and undertaking better-off calculations. They also made referrals, for example to the careers service for help in producing a CV.

### 4.7.4 Carers for whom work was not an option

Participants who discounted the idea of employment often reacted negatively when Personal Advisers raised the subject of work. Generally, Personal Advisers did not challenge these assertions and proceeded to go through the claim forms. As a result, participants’ attitudes towards work and claiming benefit were unchanged.

‘The situation were impossible to go back to work … they [the Personal Advisers] were most pushy for work … If you say you’re not working, they’re not interested. They want you in work … If I went to work, who’s going to take David to the toilet during night? And get him back to bed?’

(Female carer aged 53)

### 4.8 Follow-up contact with ONE after a year

This section considers further contact with the ONE service by participants between 12 and 16 months after their initial contact with the ONE service.

#### 4.8.1 Further voluntary/caseloading contact

Some carers maintained contact with ONE after their initial meeting. Contact was mainly made by carers who had specific enquiries about the processing of their benefits or questions about whether they were entitled to other benefits. A few clients went directly to their ONE centre, and were happy to go and meet with a Personal Adviser if the query needed further exploration. Generally, however, carers telephoned ONE in the first instance, to find out if their query could be dealt with over the phone.

‘I rung them up to see if we’ve got any help towards the electric and my gas and my water…’

(Female carer aged 53)

In a few cases, carers wanted to undertake an education or training course, and they wanted to ensure that they would not incur any penalties if they did so.

‘… so I rang the ONE office up to make sure that I wasn’t breaking any rules, because sometimes when you go on courses you lose your benefit, and she said no you’re allowed to do, I think she said 16 hours a week or something like that.’

(Male carer aged 49)

#### 4.8.2 Making new, voluntary contact

Many carers did not maintain contact with ONE in the year following their initial meeting, and none initiated contact with ONE in the following six months. The reasons why participants did not make further contact are explored below.
4.8.3 Mandatory follow-up contact

Mandatory follow-up contact occurred when a change to participants’ circumstances meant that they were no longer entitled to their claim for ICA, but other ONE benefits remained in payment. In these cases, carers experienced a mandatory trigger meeting. The research did not encounter any examples of participants having experienced this type of trigger meeting.

4.9 Barriers to seeking further contact

Many carers did not feel the need to return to ONE because they were caring full-time and there was no change in their circumstances. However, they were aware that they could go back to ONE because their PA had told them that they could come back if they needed to. Sometimes carers felt that ONE would not be able to help them with their areas of concern.

‘No, the next move, if there is one is to get the doctor in.’
(Male carer aged 59)

‘I have had no further contact since the initial meeting, I felt that this was just a check to get benefits – not a support meeting [or] counselling.’
(Female carer aged 36)

Those who felt that work was not an option were reluctant to go back to see their Personal Adviser because they thought that work would be discussed.

Sometimes participants were reluctant to go back to ONE because their Personal Adviser had shown little knowledge or understanding of carers’ experiences and needs.

‘The Personal Adviser had no experience of Invalid Care Allowance … I would say if there had been a specialist in disabilities that might have been useful. To let us know if there is anything else out there that will help us or that we might choose to take a look at.’
(Female carer aged 38)

Although many carers had not contacted ONE again, some said that they would have appreciated further contact from their Personal Advisers. Carers expressing this wish felt that it would have been helpful to know that they were being followed up to check that they were all right, or to see if they would like any help with their situation. A number of carers indicated that they would appreciate a Personal Adviser contacting them and volunteering information about benefits and services that they may be entitled to as a carer, or helping them in their transition back to work.

‘Well they could have phoned up, and maybe put me onto something. Sent me the forms to fill out if I’m entitled to anything, I don’t know. I mean I’m only making say £100 a week [for the] hours that I’m doing, and if they give me the forms to say well you can get your subsidies, government subsidies to build up your wages, I’ve not even bothered.’
(Male carer aged 46 who returned to part-time work)
Some carers who had not been back to ONE since their initial Personal Adviser meeting said that they might go back under certain circumstances, but none had immediate plans to do so while their personal circumstances remained the same.

‘I might [go back] if I wanted to go and work and I couldn’t find anything myself.’

(Female carer aged 38)

‘If she [mother-in-law] went into hospital, or if she had to go into care, or if she’d died.’

(Female carer aged 39)

Some carers had sought the assistance of other agencies. These included the Citizens’ Advice Bureaux, careers services and local voluntary organisations for carers and people with disabilities. Carers had generally approached these organisations themselves as the agencies offered specialist help which carers felt would not have been available through ONE (for example, specific advice and information about their relative’s illness or condition). Some carers used local voluntary-sector organisations as a source of help in meeting other carers, and to find out about provision for their relatives and themselves. Carers used these voluntary services as a way to get help with respite care and to obtain advice from organisations specialising in providing support to carers.

This section examines the effect of the ONE service on carers between 12 and 18 months after their initial contact with the ONE service.

Few carers remained in work. They had left their jobs when their caring responsibilities increased and they were no longer able to balance them with either part-time or full-time work. None were able to return to work during this period.

Those carers who moved into work in the short- or medium-term had remained in those jobs in the longer-term. Other carers who had progressed in training were coming to end of their courses and beginning to think about work.

A few carers for whom work was a longer-term option had started to undertake voluntary work to give them a ‘break’ from caring and to keep themselves mentally active. Carers considered voluntary work to be a good option because it allowed flexible hours and their caring responsibilities would still be the main priority.
Example

James, aged 51, has been receiving benefits for ten years since suffering a nervous breakdown. He is now caring for his wife who has Reynolds’ disease and Crohn’s disease. James has undertaken several business courses in the past ten years, and has also been a client of New Deal 50+ while waiting to see if he could claim ICA.

James had three job interviews while on New Deal, but was not successful in any of them. He felt that this was because the jobs he was submitted for were too ambitious for him. He would have liked the chance to undertake work experience with an employer to help him get back into work.

Since his claim for ICA was approved, James has been doing voluntary work for his local branch of a national voluntary organisation that raises money for charities.

He uses the skills he has gained from the business courses.

‘I have been the secretary for the [organisation], which involves [paperwork]. [My responsibilities involve] book-keeping, keeping the accounts, keeping a record of all the [tenancies], liaising with all my lodgers, er … liaising with the [grand lodge], keeping an inventory of all goods that are in stock, reordering when necessary, all aspects … I enjoy it.’

4.11.4 Carers for whom work was not an option

In many cases, carers’ responsibilities meant that they had not been able to move into or towards the labour market. However, a few carers had moved back into work and achieved sustainable employment. A significant change in their caring responsibilities (including the death of the person they cared for, or their movement into residential care) had allowed them to take up work.

Some carers had moved further away from the labour market as they could see no end to their caring responsibilities. In a number of cases, the demands of their responsibilities had begun to demoralise them and make them feel less confident in returning to work. Carers described several reasons for this, including being unable to give their full commitment to an employer as they felt that their caring responsibilities would continue to take priority even if they were working.

‘… sometimes I’d like to go back to work and she’ll [my mother] carry on, ‘no I need you, I need to be able to get hold of you’. I said if I was in a job and she needed some help I couldn’t go off. Once I’ve said I’ll do something I couldn’t let that person down either. I’d be torn between the two of them. My mum would probably be all right but she’d be ringing up, she did when I was at work before but I knew she was all right. She won’t let go somehow, give me this independence, I know she tries but I can feel this she clings to me really.’

(Female carer aged 58)
Carers also spoke of how they would be reluctant to go through the process of applying for carers' benefits again if the job did not work out or if the person requiring care needed more help once they returned to work.

'I haven’t fought all that, you know, whatever it was, to get the benefits to do with my wife … I wouldn’t want to go through that process again. You see if I go and get work she’s going to lose it all, and then if it’s only a temporary job we’re going to have to start all that process again.’

(Male carer aged 51)

Carers who had been in receipt of benefits for a long time also found it difficult to see how they would be better off if they were in work.

Carers who were strongly orientated to work when their caring responsibilities started were more likely to have sought and achieved employment. This was true of clients who were still continuing to care for their relative and for those whose caring responsibilities had ceased.

ONE had a limited impact on carers. For the majority, work was only a longer-term option or not an option at all, because they viewed their caring commitments as continuing for the foreseeable future. Many carers indicated that they would like to work, but did not feel that this was possible because of the level of their commitments. Carers' initial meetings with their Personal Advisers focused on their claim, and were in few cases widened to include any discussion of work. Carers rarely returned to the ONE service in the medium to long-term, as they did not feel that their Personal Advisers could offer help or support in relation their needs, including finding replacement care or medical advice. Participants' caring commitments also often increased over time.
This chapter explores the effect of the ONE service on Jobseekers over time. This chapter starts by examining the impact of ONE over the full 18 months covered by this longitudinal research, on different Jobseekers, defined according to their relationship to the labour market at the time they entered the service. Figure 5.1 illustrates the distance travelled by participants in the 18-month period covered by the research. The diagram uses participants’ position on entry to ONE, and not after their initial Personal Adviser meeting, as the baseline position. It charts the direction and scale of movements made a year and six months later.

**Figure 5.1 Distance travelled in relation to the labour market**

5.1 Jobseekers in work  Many of those Jobseekers in part-time work had moved into full-time work. There were no examples of Jobseekers having received in-work support. In a few cases, changes in Jobseekers’ personal circumstances meant that work was a longer-term option or not at all. In these cases they usually made a new or repeat claim for a benefit other than Jobseekers allowance.

5.2 Jobseekers for whom work was an immediate priority  Many Jobseekers for whom work was an immediate priority moved into work, although they sometimes moved out of work again over this period. They received limited support through the ONE service. In a few cases, work became a longer-term option, or not at all, for these participants, due to changes in their personal circumstances.
These Jobseekers often had personal circumstances that meant that work was only a longer-term priority on their entry into ONE. These Jobseekers often started looking for work, or moved into work when their circumstances changed. Personal Advisers sometimes supported them by undertaking job-searches with them, although usually with limited effect.

There were no examples of Jobseekers who did not see work as an option being refocused on work as a possibility. These Jobseekers all still believed that they should be entitled to a different benefit, for example Incapacity Benefit.

The remainder of this chapter aims to present the diverse attitudes to claiming benefits and work, against a set of equally diverse work histories and personal circumstances. Barriers to work commonly experienced by the Jobseekers interviewed for this research are presented, with some discussion of the extent to which they impacted on Jobseekers ability to move into work.

Jobseekers represented a diverse range of personal and household circumstances. Some participants had moved onto JSA from a different benefit after a change to their personal circumstances, while others had claimed the benefit before – sometimes for several periods. For other participants, their claim for JSA was the first benefit claim they had ever made. At the time of their entry into ONE, the majority of participants were immediately available for work.

Most Jobseekers indicated that they wanted to find work and were looking for work immediately, as required by their Jobseeker’s Agreement. In a few cases, Jobseekers did not believe that they should be on JSA because of health problems or caring responsibilities. These participants had often made an earlier claim for a different benefit.

‘You go for a medical every 12 months and they say you’re fit to work and things like that, but as I said, when I went last time they passed me fit for work, but I explained to the doctor and said well the doctor’s not signing me off on anxiety because I’m looking after my mother but couldn’t get through to them so I went back on the dole again.’

(Male Jobseeker aged 41)

Participants expressed varying degrees of commitment to moving into the labour market. Their behaviour in relation to job-search and the range and level of jobs sought was also variable. Jobseekers’ commitment to finding work was found to be related to their previous work histories. Those with consistent work histories and substantial experience in a particular sector or job wanted to move into an appropriate job – usually related to their previous experience – as quickly as possible. These Jobseekers included those who had acquired health problems during regular work and were frustrated by their inactivity.
‘I just decided to come off [IB] because I sat round and done nothing for six months … and I could try and get out and do something.’

(Male Jobseeker aged 34)

Those Jobseekers were in part-time work generally wanted to extend their hours. For the majority of Jobseekers not in work, moving into work was an immediate priority, as required by the Jobseekers agreement. These Jobseekers were usually willing to move into work as long as they would be better off than on Jobseeker’s Allowance, and this work was related to any work experience that they might have. Work was only a longer-term option for Jobseekers who had experienced short-term changes to their personal circumstances that meant that they did not feel able to actively seek, and undertake work. These Jobseekers felt that they were entitled to claim a different benefit because of their personal circumstances, for example health problems or caring responsibilities.

5.6 Barriers to work

5.6.1 Hard barriers

Jobseekers involved in this research sometimes lacked qualifications, basic skills or work experience, or combinations of the three. As a consequence, the type of work available to them was limited, poorly paid and often temporary or casual.

‘I’ve worked all my days since I left school, I’ve never had a permanent job since I left school it’s always been contract work … apart from … a two-year apprenticeship … hire and fire, that’s the way it’s been for the whole of my working life to tell you the truth.’

(Male Jobseeker aged 49)

In some cases, Jobseekers had patchy or inconsistent work histories, and recognised that this was likely to present a problem in looking for work. Others had substantial work experience, but it was limited to a certain job or sector in which they were not confident of finding work. Sometimes this was because they had sustained an injury or developed a condition which meant that it would no longer be possible to move into the particular type of work in which they were experienced. In other cases, employment in a certain sector – traditional manufacturing industries in particular – was becoming increasingly difficult to obtain.

‘There are very few jobs around [because] the steel works have finished … they’re all shutting down I think.’

(Male Jobseeker aged 49)

In other cases, Jobseekers had skills related to certain areas of work, but did not have the necessary formal qualifications.

‘I’m rubbish at reading, well I’m not rubbish … I’m average at reading but I’m absolutely rubbish at writing and spelling, that’s why I went on this SIBS [Short Intensive Basic Skills] course.’

(Male Jobseeker aged 38)
However, recognition of their lack of skills led to a lowering of individuals’ confidence in their ability to find work. The embarrassment of admitting basic skills deficiencies prevented them from actively seeking assistance with these difficulties. These Jobseekers found it much easier to accept help than to ask for it.

‘I could have done with help and support on my reading and writing, but I didn’t tell them [ONE adviser] that, and if you don’t tell them they don’t know do they? … You feel a bit stupid don’t you? You know. But as soon as Lynn [New Deal adviser] offered me something I thought well, oh aye, you know it don’t sound so bad, it sounds a lot better they’re offering it than me asking it, don’t it?’

(Ibid)

5.6.2 Soft barriers

Many Jobseekers experienced soft barriers to participation in the labour market, including lack of confidence and motivation. These participants tended to have spent a long time on benefits with little or no economic activity. They gave importance to factors such as age, to explain periods of inactivity.

‘I think if you’re over 35 it’s very difficult [to find work] unless you’re a mechanic or things like this where you’re a trade … if you’re over 25 it’s really hard because all these firms want somebody at £4.10 an hour, they’re not going to pay £6.’

(Male Jobseeker aged 41)

However, others attached relative importance to other factors such as their ethnicity, gender, or being over-qualified.

‘I have a basic skills certificate I did get, I’ve also got a City & Guilds and NVQs, Part I and II in, when I was in wholesaling, that’s a handicap … a massive handicap in getting a job, because everywhere I’ve gone … they believe you can do the job better than him, so … I’m over-qualified, and that’s a massive handicap in getting a job, I was told I would have a better chance of getting a job not having qualifications, but having said that I’ve got qualifications so, you know you just live with that.’

(Male Jobseeker aged 38)

Subsequently, these Jobseekers lost confidence in their ability to find work. They felt that the barriers they were facing were externally imposed and there was little they could do about them.
Example

Ahmed, 53, worked as a bank clerk for 12 years before being made redundant as a result of management’s efforts to cut costs. After a brief period of claiming JSA, he found work as a shop manager. This lasted for several months until the shop was closed down in another effort to cut costs. Since then, Ahmed has been claiming JSA, and because of unsuccessful efforts to find work in similar occupations, he has expanded his job-search to include driving and security through employment agencies.

Initially, Ahmed felt confident of finding work, but as time has elapsed this confidence has been eroded along with his motivation. Ahmed now feels that it will be difficult for him to find work, because his work experience is limited to banking, and because of his age. He also indicated that he feels that he is sometimes discriminated against because of his ethnicity.

5.6.3 Circumstantial barriers

Some Jobseekers felt that their job-search options were limited because they had caring responsibilities which limited the types or hours of work they were able to do.

‘She’s a very sick child, all the time, I have to take her to the doctors … she was vomiting all the time, like taking up all my time … I wanted to work, yes, but my mum said she can’t look after her, so then I have to, I can’t work at the moment.’

(Female Jobseeker aged 23)

Health problems also limited the types of work available to some Jobseekers. These participants did not feel that they would be able to fulfil a commitment to work, because of the unpredictability of their illness.

‘I try to keep it to a minimum but I mean you can’t sometimes, some days there’s just days where you just can’t get out of bed, you are just so tired and lethargic.’

(Male Jobseeker aged 24)

Some Jobseekers indicated that their health problems had a reciprocal effect on the confidence they had in their ability to find work.

‘I don’t want tranquillisers or anything like that, so there’s no intricate work … if I go for a job or I go for an interview, I’m really trembling, I don’t know why, it just happens.’

(Male Jobseeker aged 49, with motor neurone disease)
These Jobseekers were unhappy relying on benefits, and attached a high value to the status and independence afforded by work. They felt that their commitments to their families meant that a prolonged period claiming benefits would not be sustainable, and that they ‘had to work come what may’ (Male Jobseeker aged 44).

Those with less substantial work experience, but who had worked consistently over their working lives, were also concerned with moving back into a job as soon as possible.

Jobseekers largely viewed claiming benefit as a short-term source of income in the absence of financially rewarding work.

‘I didn’t know, I was shocked you know … I went there just purely to have a … National Insurance stamp credited, and lo and behold I had this Jobseekers Allowance.’

(Female Jobseeker aged 59)

Other Jobseekers, who were in transitional periods such as coming out of school or leaving a college or training course, saw claiming benefit as a means to fill the interim period before their movement into work, or into further education and training.

There was little evidence to suggest that any Jobseekers saw claiming JSA as a sustained means of support, even if they had been claiming benefits for prolonged periods. Most participants recognised that they were under some obligation to work, and wanted to do so. Those who did see it as a sustained means of support felt that they had other responsibilities or circumstances which made them eligible for other benefits (for example caring responsibilities or ill health).

5.7 Short- and medium-term effects of ONE

5.7.1 Jobseekers in work

Some Jobseekers were in part-time work. They perceived part-time work as being ‘a rung in the ladder’, and a good opportunity to gain work experience in the absence of a full-time job. Their claim for benefit represented an additional income to supplement that gained from paid employment. In these cases, the initial Personal Adviser meeting was primarily concerned with processing the claim. There was limited exploration of participants’ options for moving into full-time work. Consequently, these Jobseekers’ Personal Adviser meeting had no impact on their attitude and behaviour. They regarded ONE as being concerned with claiming benefit – especially in contrast to their experience of signing on – and only intended to return in the future if they had to make new or repeat claims for benefit.

Other Jobseekers moved into full-time education in the short- and medium-term. They indicated that the ONE adviser made no impact on their decision to take up education.
‘I went to, well I did A-levels at ... a grammar school, and I was the only one that got A in psychology and I was the best in my class, and my teacher told me I should take it up at degree level. After two years I decided I might just take it up, and I’ve got a lot of information on the Open University, leaflets and stuff, [so] I enrolled on the course.’

(Female Jobseeker aged 23)

Work was an immediate priority for the majority of Jobseekers, and most felt themselves to be ‘work ready’. However, some felt that their job options were limited because of barriers to work, including lack of skills or qualifications, or personal circumstances such as caring responsibilities.

These Jobseekers often had a clear idea of the type of work they were seeking, because of previous experience in a certain kind of work. They often used private employment agencies or informal contacts to look for work in their trade or profession. In some cases, participants felt that Personal Adviser’s understanding of their skills or sector was limited, and that the job-searches carried out on their behalf were not therefore relevant to their situation.

Example

Jack, aged 50, has been unable to find permanent work in the industrial plumbing industry in which he specialises. The nature of the work in which he has expertise means that he primarily works on short-term contracts and spends regular periods claiming JSA.

The particular type of work he was looking for did not exist in the Jobcentre’s databases, and he felt that his Personal Adviser would be unable to help him to look for work in his particular sector.

‘I’ve always looked for my own work. I’ve never had work from the [Jobcentre], I’ve never had any help from them either … It’s kind of taboo to get a job with the Jobcentre isn’t it? I mean if you’re really desperate.’

However, he felt that he would be able to transfer his skills to occupations with more sustained working patterns, by acquiring certain qualifications. Obtaining a UK safety passport would ‘open up a whole new world for me.’ But his meeting with a Personal Adviser did not highlight any possibilities for him to retrain.

‘I would have liked to have known any programmes or any … safety things I could go onto … to upgrade myself and maybe more of the house plumbing, maybe go through a … Corgi test for gas fitting, I’d love to do that. Any courses … I like to do English, I like maths, but there’s nothing like that … they don’t bring it up, it’s something that you have to bring up yourself.’

However, he explained that he had not raised this in his Personal Adviser meeting because he perceived that the time constraints of the meeting limited his opportunities to discuss these problems with his Personal Adviser.
Other Jobseekers had not developed clear strategies for looking for work. Instead, they relied on local newspapers, and in some instances the Internet, as well as visits to their local Jobcentre. In a few cases, Personal Advisers were able to offer advice as to how these Jobseekers might modify or refine their job-search activities. In these instances, ONE had an immediate impact on Jobseekers’ attitudes and behaviour.

‘It just made me feel that I was, I had retired and I thought, oh marvellous, and then when I went back, when I went for this letter I thought well I’m still young enough to be working really, and that’s when, that’s what’s made me feel that I wish I hadn’t finished work now, I wish I hadn’t retired you know, so it made me … a bit more enthusiastic.’

(Female Jobseeker aged 59)

Many Jobseekers viewed the ONE process as being no different – and in some cases inferior – to that of signing on, and indicated that job-search was more limited within the ONE service. Consequently, these Jobseekers only returned to the ONE service for their 13 and 26-weekly review meetings. Others had a more positive experience of discussing work through ONE, where the Personal Adviser had offered specific advice or additional support, often related to their own personal knowledge or experience. These Jobseekers returned the ONE service on a more regular basis.

Some Jobseekers moved into full-time work in the short-term. These Jobseekers tended to have clear ideas of exactly which types of work they were interested in and how they would obtain that work. They tended to get this work with little support or desire for support from their adviser.

In the medium-term, participants generally returned to the ONE service for their review meetings. Review meetings involved looking for current vacancies and discussing job-search methods. In later Personal Adviser interviews a small number of Jobseekers also felt that they had been offered valuable guidance in relation to job-search methods, including where Jobseekers might look to mind work, or how they might present their work experience. Signposting towards careers advice included referrals to the Careers office, or to external employment programmes.

A few Jobseekers felt that they were not ready to move into work immediately, but did view work as an option in the future. This was the case where there had been recent and short-term changes to their personal circumstances, such as the illness of a child. As a result, these participants did not feel ready to move into work at that time. In some cases, participants then made a new or repeat claim for a benefit other than JSA.

‘It wasn’t that helpful, I just had to give them information that’s all. They just wanted some details. When I want to work, like when I want to finish with Income Support, then I’d contact them.’

(Female Jobseeker aged 23)
However, these participants usually continued to undertake some job-search activity, such as looking at the local newspapers.

5.7.4 Jobseekers for whom work was not an option

These Jobseekers did not believe that they were work ready, either because they felt that they suffered from poor health, which impacted on their ability to work, or because they had caring responsibilities. Those participants who perceived themselves to have serious health problems had ‘failed’ their PCA, and their claim for JSA had then initiated their entry into the ONE service.

‘I’ll look for work because that’s the law … but I really haven’t got the time to look for the hours that they want you to look for … because I’m looking after my mum all the while … I said wouldn’t it be simple just to give her disablement and give me that carers relief and then it’d be the Jobseekers off my back and everything but they don’t want to know do they?’

(Male Jobseeker aged 41)

One advisers sometimes offered to explore entitlement for different benefits with these participants. There were no examples of ONE being able to refocus these Jobseekers on work as a priority in the short- to medium-term.

5.8 Follow-up contact with ONE after a year

5.8.1 Voluntary follow-up contact and caselodging

There were very few examples of Jobseekers returning to the ONE service themselves to arrange meetings additional to their mandatory review meetings.

In some cases, Jobseekers also had Personal Adviser meetings where they had made a new or repeat claim for a benefit other than JSA (for example, Income Support or Incapacity Benefit). In these cases, the Personal Adviser meetings focused on the reasons for the claim and discussions about entitlement. However, some of these Jobseekers felt that the scope of their needs went beyond a discussion revolving around benefits.

In other cases, Jobseekers moved onto New Deal. Participants then usually regarded their New Deal Personal Adviser as being the first point of contact for help or advice.

5.8.2 Mandatory follow-up contact

Mandatory follow-up contact mostly occurred where Jobseekers had review meetings at 13 or 26-weekly intervals. These review meetings were similar to previous contact. Personal Advisers focused on conducting computer job-searches and, in a few cases, trying to widen discussions to talk about different job-search options.

In some cases, Jobseekers were asked to revise the categories under which they were willing to undertake a job-search.

‘He [ONE adviser] said there would be no chance of me getting a job [outside of his county], and he put too much of a restriction, and he said limit yourself to [two local towns], or to within 25 miles.’

(Male Jobseeker aged 49)
Only rarely were additional barriers to work addressed. As a consequence, these participants continued to believe that they would be unable to move into work.

5.9 Barriers to further contact

Most Jobseekers restricted their contact with the ONE service to their review meetings. They were able to undertake regular job-searches when they signed-on on a fortnightly basis, at their review meetings with their ONE Personal Adviser, or on the touch-screen computers at the Jobcentre. In these Jobseekers’ experience, ONE offered little additional advice or support, and was therefore not relevant to their needs.

‘They take your form off you, they go through your form with, they ask you … when you wanted to sign on, what time and everything like that, basically everything the same as what they do at the Jobcentre … I try to keep away from ONE. I just go to the social for what I need now.’

(Female Jobseeker aged 24)

Some Jobseekers felt that they needed specific advice in relation to moving into work, but had not received it from ONE.

‘I mean, if I did go back for advice I don’t think they would give me the advice I wanted … they could have told me where voluntary agencies were, and they could have told where I could get training, all the places where I could find job-search and things like that.’

(Female Jobseeker aged 19)

These Jobseekers felt that there were areas in which they required specific support, but were not aware that their Personal Adviser was able to assist them with these problems.

‘If she had told me about interview skills and everything, it would be helpful like after, like if I did want to work, afterwards, but she didn’t give me any information … I would like them to get them to show me job vacancies and how I could prepare myself for interviews … [or] update my CV.’

(Female Jobseeker, aged 23)

Most Jobseekers, however, felt that the ability of the ONE adviser to assist their entry into work was limited, because they felt that they already had a clearly defined job-search strategy.

‘I will always find work myself, through my friends or through ex-employers, it’s never been the Jobcentre or the Personal Adviser that puts me in touch with anything.’

(Male Jobseeker, aged 49)

Some Jobseekers felt that they needed additional advice and support related to their barriers to work in order to be able to move towards the labour market. These barriers included health problems and childcare.
Highly motivated Jobseekers often used professional employment agencies, sometimes sector-specific ones, to find work. Other Jobseekers who felt that they needed additional help or support to look for work, used local public employment schemes to get help with CVs or interview skills, for example. In a few cases, Personal Advisers referred Jobseekers to these schemes for this type of help, or so that they could take advantage of funded training opportunities.

In some cases, Personal Advisers referred Jobseekers with health problems to specialist advisers such as DEAs, who then aided their re-entry into the labour market.

‘I just [talked about] how I would go back and find a job and she just put in some details what I was looking for, part-time or administration, and it actually came up with four or five. I wrote off to them and this was the only one that, not the first one I got really.’

(Male Jobseeker aged 24)

This section examines the effect of the ONE service on Jobseekers between 12 and 18 months after their initial contact with the ONE service.

Jobseekers who had moved into the labour market over the short- or medium-term were usually still in work, either in the same job or a related one. Highly motivated participants felt that they were progressing well within their chosen job or career.

Example

Dean, aged 33, lost his job as a car salesman when the company that employed him went bankrupt. He could not find regular work in this occupation after being made redundant. His initial meeting with a Personal Adviser brought his interest in photography to the fore, which encouraged Dean to pursue a change in career direction. The Personal Adviser referred him to courses offered at the local college, where he obtained his qualifications. This provided him with a platform to set up his own business specialising in photography for the marketing industry.

‘I’m enjoying every single minute of it, I really am, I’m enjoying the challenges. I’m enjoying the people that I’m meeting now … I enjoy walking into a shop and seeing my pictures on the wall, I really get a kick out of that.’

Others had moved out of work when a temporary or short-term job that they had secured came to an end. In a few cases, participants had left work voluntarily because of a change to their personal circumstances, including the development of health problems or because they acquired caring responsibilities. They had then moved onto benefits, including IS or ICA.
5.11.2 Jobseekers for whom work was an immediate priority

In the six-month period prior to the research interviews, some Jobseekers had moved into work. This was the case where they found a job that reflected their previous experience or fitted in with their personal commitments. In a few cases, Jobseekers had found their job during job-searches with their ONE Personal Adviser, or on the basis of advice offered by the Personal Adviser. Others had made more modest progress within the jobs they had found since leaving the benefit system.

‘Yes, well I did start on checkout, but then I work on price control now, so it’s a sort of a bit of a better job, it’s not fantastic but sort of just like a bit of a better job isn’t it really.’

(Female Jobseeker aged 20)

In some cases, Jobseekers had been unable to find any work. Some, particularly those with specialist skills or a narrow job specification, indicated that this was because of the lack of availability of work in a certain sector, or indeed in their local area. Others indicated that they had had difficulty in finding employment because of their on-going barriers to work. Many of these Jobseekers had found short-term work, but were unable to sustain it and felt resigned to this working pattern.

‘It’s only short-term work anyway, so you may be three months work and a month or two not working and then you’re back to three months again, that’s the way it works. I’ve no complaints about it.’

(Male Jobseeker aged 48)

5.11.3 Jobseekers for whom work was a long-term option

In a few cases, Jobseekers who had previously only viewed work as a long-term option came to view it as an immediate option, and some had moved into work. This was usually the case where participants entered the ONE service following a change to their circumstances, for which they were not prepared. Having adjusted to their new circumstances, these participants were then able to start looking for work.

In a few cases, participants had been successful in making a new or repeat claim for a benefit other than JSA (for example IB) which they felt better reflected their personal circumstances. In these cases, participants no longer undertook any job-search activity.

5.11.4 Jobseekers for whom work was not an option

There were no examples of Personal Advisers being able to refocus these participants on work. These few participants continued to believe themselves to be unable to work, and in some cases made repeat claims for different benefits.

5.12 Summary

In a few cases Jobseekers felt that they had been offered valuable help and support in relation to job-search, and appreciated the idea that they could return to ONE for further advice in the future. Some found jobs through the ONE service. However, the most Jobseekers regarded ONE service as being little different to that which they received at their weekly signing on meetings. As a consequence they only returned to ONE for their 13 or 26 week reviews, or if they had repeat claims. In the longer-term, many moved into New Deal programmes, and received support from a New Deal Personal Adviser.
This final chapter highlights the key findings and conclusions from this tranche of the research. It outlines changes in attitude and behaviour towards working and claiming benefit, both during the 12 to 18 months after participants first entered the service, and overall. The role of ONE in bringing about these changes is of principle concern. The chapter distinguishes between those who were helped by the ONE service, and those who were not helped, over the longer-term. The nature and appropriateness of voluntary and mandatory contact with the service is explored.

Attitudes and behaviour towards working and claiming benefit reflected the personal circumstances of individuals and their barriers to work. The individual circumstances of participants were very diverse, even within client groups. Significant barriers to work resulted from individual or household situations, such as the presence of physical and mental health problems and caring responsibilities including childcare. These barriers were evident across a number of client groups. For example, physical and mental health problems affected Jobseekers and lone parents as well as those claiming sickness benefits. A range of other, often related, ‘hard’ and ‘soft’ barriers also impacted on the ability of participants to find financially rewarding work.

Hard barriers including low qualifications or lack of work experience were in some cases addressed by Personal Advisers, who referred participants to education or training courses, or, in a few cases, suggested that the participant think about different routes into work (for example, voluntary work). Participants with basic skills needs were only referred to support organisations, or education, although in a few cases this support was offered later on, through the New Deal.

Soft barriers, including confidence and motivation, were often related to hard barriers to work. Many participants lacking work experience and qualifications also faced a number of soft barriers to work. Confidence and communication skills, for example, made it more difficult for participants to find work in which they were interested, or for which they were qualified. In other cases, mental health problems presented more considerable soft barriers to work, and participants felt that work was not an option. Participants often indicated that their confidence, and motivation was improved as a result of the support and discussions offered by Personal Advisers. Soft barriers were also addressed where Personal Advisers suggested that participants try voluntary or part-time work, or facilitated their movement into this type of work. Where
Personal Advisers were able to address the hard barriers through advice and support on job-search, or different routes into work, soft barriers such as confidence and motivation, were reduced.

Barriers to work vary over time. Some barriers dissipate, whilst others seem to intensify. Circumstantial barriers often dissipated— for example, as children reached school age, and allowed their parents to move into work. Other barriers, including confidence, motivation, and mental health issues, intensified, the longer the period participants spent out of the labour market, and became increasingly socially isolated. Some circumstantial barriers were especially prone to change, and this was often recognised by participants, who could identify time scales under which they thought they could move back into the labour market. Some participants, especially lone parents, undertook training and education in the interim period. Other participants indicated that they felt that their circumstances were likely to make it difficult for them to move back into work, for the foreseeable future. Other participants could not identify a timescale under which they thought they could return to work. Circumstantial barriers were most often addressed by Personal Advisers where they could be anticipated by the benefits claimed. People with mental and physical health problems were referred to DEAs, who were sometimes able to think about different options that participants might have in relation to the labour market. Lone parents’ caring responsibilities were addressed by Personal Advisers by their inclusion of childcare costs, and subsidies, in better-off calculations. Different options in relation to childcare received limited discussion.

In those instances where barriers were not addressed by Personal Advisers, personal circumstances had not changed, or participants had not taken any actions to improve their circumstances, participants felt that their barriers to work had become more substantial. Participants felt that lack of work experience, and issues related to age, would become more substantial over time. Confidence, and depression were also often identified as becoming worse over time.

6.2 Follow-up contact

The research was particularly interested in the extent, nature and role of follow-up contact during the 12 to 18 months after the initial claim. The following forms of contact were considered: voluntary contact and caseloading agreed between the participant and Personal Adviser amongst participants who had maintained contact with ONE since their initial claim; new, voluntary contact initiated by clients who had not had contact with ONE during the previous year other than their initial PA meeting; and mandatory contact initiated by the Personal Advisers.

Most voluntary contact and caseloading was initiated by the participant. They usually made contact with the service following a change to their personal circumstances, in order to make a new or repeat claim for a
different benefit. In a few cases highly motivated lone parents or participants with mental and physical health problems, in particular, returned to the service with enquiries related to work, or education and training.

Only rarely did participants who had not previously maintained contact with ONE, then go back to the service. Any such contact was usually the result of a change to personal circumstances, and the subsequent need to make a different claim for benefit.

Mandatory contact included annual lone parent trigger meetings and PCAs. These triggers were time-bound, or resulted from a change to participants’ benefits entitlement. Mandatory meetings were presented in different ways. PCAs and trigger meetings for lone parents, whose children had reached aged 16, were presented in the context of the participants’ obligation to change from one benefit to another. Participants had varied reactions to these meetings, depending on whether or not they perceived themselves as ready to move into work. Conversely, participants indicated that Personal Advisers presented annual lone parent trigger meetings as being an opportunity to ‘see how [lone parents] were getting on’, and to explain the in-work benefits calculation. Nonetheless, participants still often felt that these meetings, tended to have a more closely defined work focus. Where attitudes to work were explored in the context of participants wider personal circumstances, lone parents appreciated the opportunity to discuss their options over time. Most mandatory contact featured the opportunity to complete a better-off calculation, and explain the in work benefits calculation in some depth. These discussions were sometimes used as a way of refocusing participants on the relationship between work and their wider personal circumstances. In those cases where participants’ personal circumstances were explored in some depth, Personal Advisers were sometimes able to make a direct impact by suggesting different job-search strategies, or routes into work. Mandatory meetings also provided a good opportunity to remind participants what was available from the service.

Some lone parents moved into voluntary or part-time work as a direct result of their trigger meeting with their Personal Advisers. This was usually lone parents who had experienced an annual trigger meeting. Lone parents whose youngest child aged 16, often faced more substantial barriers to work. Those participants who experienced PCAs felt more confident about moving into work where they had received specialist advice from DEAs, after having made a new claim for JSA.

The effectiveness of all types of meeting was related to the relationship established between adviser and participant; the availability of specialist knowledge and the tailoring of advice according to participants’ needs and personal circumstances.
Whilst ONE has promoted attitudinal and behavioural change in some participants, this effect varied widely. There was movement across all client groups, regardless of position in relation to the labour market at the start of claim, as well as considerable variation in extent of movement in relation to the labour market within client groups.

ONE provided valuable support to participants who found a job through the provision of benefits advice. Some participants returned to the ONE service having secured a job. These participants wanted to ensure that they would be better off in work by confirming how their benefit entitlement would change. Where Personal Advisers undertook a better-off calculation on the basis of their new job, participants were reassured and felt more confident about moving back into work. This was particularly the case for lone parents who felt it was important to have a reliable income to support themselves and their families.

Some participants, often lone parents and Jobseekers, were highly motivated and felt that they were ‘work ready’. ONE was able to help these participants by explaining their in-work benefit entitlement, and conducting relevant better-off calculations. In some cases an exploration of participants personal circumstances and work histories allowed Personal Advisers to offer advice and support in relation to certain job options.

ONE was also able to help some participants for whom work was a long-term option. These participants felt that work was only a longer-term priority because their personal circumstances, including caring responsibilities and health problems, meant that they did not think that they would be able to secure financially rewarding work in the near future. Where Personal Advisers initiated discussion on different types of work, transferable skills and training, participants felt more confident about finding a job in which they would be better off financially, and work then sometimes became a shorter-term priority.

ONE also assisted participants by referring them to specialist advisers, including DEAs or lone parent Personal Advisers who were able to discuss their needs with them in more depth.

ONE did not help those participants who were already in work, but were on statutory sick leave. These participants usually had no further contact after their initial Personal Adviser meeting, and there was no discussion of whether returning to their old job was the most appropriate course of action.

Those participants who had a clearly defined idea of the type of work they wanted to move into, and the most appropriate way of finding this work, were also not helped by the ONE service. Jobseekers indicated that the support and advice that they received through the ONE service was no different, and in some cases, was inferior to, the support which they received at their fortnightly signing on meetings.
There was little follow-up contact with those participants for whom work was a longer-term option, or not an option (including carers, those with mental and physical health problems and lone parents). Their initial meetings with their ONE Personal Adviser had usually been limited to a discussion of benefits entitlement, and work was rarely raised in these conversations. Consequently, this group tended to return to the ONE service only where they had additional queries about their benefits entitlement, or wanted to make a new or repeat claim. There were no examples of Personal Adviser being able to widen discussions, and raise the possibility of work.

Attitudinal and behavioural changes were attributable to a number of different factors. Whilst ONE has had an effect, changes in personal circumstances could be more readily linked with altered attitudes, and/or behaviour. The nature of change often depended on how far participants were from the labour market, and their interest in work.

Most participants appreciated the opportunity to discuss their personal circumstances, and obtain additional information on their benefits entitlement from their Personal Adviser. These discussions offered many of them (lone parents, carers and participants with mental and physical health problems in particular) the opportunity to reflect on the relationship between work, benefit entitlement, and their personal circumstances, and then, possibly, to explore ways in which to balance these. Others discussed what type of work they would have to secure, so that they would be better off than on benefits.

Some participants for whom work was an immediate (and sometimes a longer-term priority) also demonstrated attitudinal and behavioural change as a result of support received from their Personal Advisers with job-search. Most often this was achieved where Personal Advisers discussed a participants’ (usually lone parents or Jobseekers) job options with them in some depth. Personal Advisers were then able to offer targeted advice in relation to new job-search methods, often based on Personal Advisers personal knowledge or experience. In a few cases, Personal Advisers also played an advocacy role with employers on behalf of ONE participants, for example in exploring job descriptions. Participants appreciated this active support, and often gained confidence and additional momentum into and towards the labour market as a result.

ONE was also successful in refocusing participants for whom work was not an immediate priority, on the possibility of moving into work. Personal Advisers were usually able to do this firstly, by exploring participants’ personal circumstances. This discussion offered a basis for a better-informed discussion of how participants might best balance work with their other personal circumstances. This was often achieved through the use of a better-off calculations as an instrument for the exploration of
this balance. This was combined with the provision of additional information related to in-work benefits, housing and council tax benefit entitlement (and roll on), and financial support for childcare. In many cases this resulted in a clearly attributable attitudinal change.

ONE was sometimes able to refocus those for whom work was not an option, including lone parents, carers, and participants with mental and physical health problems on work. Some participants appreciated the suggestion that work might be an option for them. This effect was augmented where participants were offered advice and support from specialist advisers, including DEA and Lone Parent advisers, who were able to explore their different work options, and suggest different routes into work.

ONE effectively supported highly motivated participants movements into, and towards the labour market. However, the effect of the service across other groups was more mixed.

Those participants for whom work was an option, either in the immediate or longer-term, moved towards the labour market at an uneven speed. Their progression was often affected by events or developments impacting on their personal circumstances. Movement over the 18 month period covered by this research, did not always represent linear progression. Clients moved into and out of the labour market, mainly due to personal circumstances, or in some cases because they had been unable to find sustainable, long-term employment.

In some cases participants moved away from the labour market because of developments in their personal circumstances, or in some cases, because certain barriers to work had become more substantial over time.

Participants were positive about the principle and theory behind ONE. In particular, those who felt that they needed advice and support in relation to the labour market were supportive of the idea that they could return to see a ONE Personal Adviser. However, for many participants, their experience of ONE was different from the intended design. Many participants, including carers, lone parents, and those with mental and physical health problems, felt that their discussion at their initial Personal Adviser meeting had been limited to discussions of benefits, and they did not return to the ONE service except for queries related to their claim or entitlement. There were very few cases where Personal Advisers widened these discussions to cover work, or barriers to work. Those with complex circumstances and barriers to work often indicated that they would have appreciated this support. Those who returned to the service for follow-up also indicated that the level and quality of support received from different Personal Advisers was very mixed, and sometimes, that they felt their Personal Adviser would have benefited from having more specialised knowledge.

6.7 Overall impact over 18 months

ONE effectively supported highly motivated participants movements into, and towards the labour market. However, the effect of the service across other groups was more mixed.

6.8 The ONE experience in summary

Participants were positive about the principle and theory behind ONE. In particular, those who felt that they needed advice and support in relation to the labour market were supportive of the idea that they could return to see a ONE Personal Adviser. However, for many participants, their experience of ONE was different from the intended design. Many participants, including carers, lone parents, and those with mental and physical health problems, felt that their discussion at their initial Personal Adviser meeting had been limited to discussions of benefits, and they did not return to the ONE service except for queries related to their claim or entitlement. There were very few cases where Personal Advisers widened these discussions to cover work, or barriers to work. Those with complex circumstances and barriers to work often indicated that they would have appreciated this support. Those who returned to the service for follow-up also indicated that the level and quality of support received from different Personal Advisers was very mixed, and sometimes, that they felt their Personal Adviser would have benefited from having more specialised knowledge.
However, some participants returning to the service at different points over the longer-term, both for mandatory and voluntary contact, indicated that they had received valuable information in relation to their in-work benefits entitlement, and better-off calculations, or that their Personal Adviser had supported them by offering valuable advice on different routes into work. These participants indicated that they would return to the ONE service, see their ONE Personal Adviser, or specialist Personal Adviser, if they had queries related to work in the future.
This appendix identifies two main issues that have affected the findings of this report. Firstly, participants faced external barriers to labour-market participation (such as low demand for labour and high unemployment rates) in addition to barriers of an attitudinal, circumstantial and behavioural nature. The labour-market conditions of the six pilot areas sampled in this research are outlined in order to expand on this point.

Secondly, the focus of the research on the long-term impact of ONE has led to the perspectives of individuals in particular circumstances being emphasised in the findings of the report. The final section of this annex addresses this issue by providing a brief description of the characteristics of the participants interviewed, and illustrates how these sampling biases have affected the findings of the report.

A.1 Study areas

This qualitative research covered six of the 12 ONE pilot areas. The six areas were chosen because they exhibited different labour-market characteristics, as described in the following economic summaries. Five of these areas were initially selected to be pilots on the basis of higher unemployment rates, while North Nottinghamshire was chosen for its lower unemployment. However, recent labour-market analysis for North Nottinghamshire shows that unemployment and inactivity have risen since November 2000, while Leeds now exhibits the lowest levels of unemployment and inactivity.

Please note that the following data are based on local authority (LA) district boundaries rather than local benefit districts, and so should be used as guidance only. The majority of statistics in this section are taken from the Labour Force Survey (Nov 2001) that employs the International Labour Organisation (ILO) definition of unemployment: a person who has looked for work in the last four weeks and is ready start work in the next two weeks. Where figures are sourced from NOMIS, they refer to Claimant Count Unemployment, the count of the number of people claiming Jobseeker’s Allowance, which is generally lower than ILO unemployment as it excludes people who are looking for work but claim other benefits.

A.1.1 Basic model

Clyde Coast

Clyde Coast has an approximate population of 440,000 and covers the LA districts of Argyll and Bute, Inverclyde, East Renfrewshire and Renfrewshire. The unemployment rate is above the national average (5.2 per cent), at 6.4 per cent. However, the area also has high economic activity rates (81 per cent). Employment tends to be concentrated in
public administration, with 33 per cent of all employment in this sector. The distribution, hotels and restaurants sector accounts for a further 21 per cent of employment. The manufacturing sector has contracted in Clyde Coast over the last few years. In 1996, this sector accounted for over 20 per cent of all employment, but by 2001 this figure had fallen to just 14 per cent.

**Lea Roding**

The Lea Roding pilot area covers part of north-east London and west Essex (the boroughs of Waltham Forest, Redbridge and Epping Forest), and comprises both urban and suburban areas. The resident population is 573,000, making it the third largest sample area. Lea Roding has the highest proportion of ethnic minorities of all the sample areas, accounting for over a quarter of the total population. The banking and finance (22 per cent) and public administration (27 per cent) sectors account for a large amount of employment. A relatively high number of people are employed in the construction sector (10 per cent). There is also considerable variation within the sample area, with Waltham Forest suffering from much lower economic activity rates (75 per cent) than the more suburban areas; Epping Forest, for example, has an economic activity rate of 84 per cent. The unemployment rate for the area is 6.1 per cent.

**Calderdale and Kirklees**

Among the pilots, Calderdale and Kirklees is the largest suburban-rural mix area with a population of 589,000. The manufacturing sector accounts for a large segment of employment, with 23 per cent of the population employed in this sector. Unemployment rates are low in the area (5 per cent), and economic activity rates are quite high (78 per cent). Ethnic minorities account for a significant proportion of the population (8.7 per cent), predominantly from Indian, Pakistani or Bangladeshi backgrounds.

**South East Gwent**

South East Gwent is the smallest pilot area included in this study, with a resident population of 316,000. It also has the lowest levels of economic activity of all the areas, with an economic activity rate of just 74 per cent. The local workforce is mainly employed in the manufacturing and public administration sectors, together accounting for almost half of employment. South East Gwent has suffered acutely from the national trend of contraction in the production sector. Although no reliable ILO unemployment figures are available for South East Gwent, claimant-count unemployment rates are 3.1 per cent (NOMIS Jan 2001), broadly in line with the national average.
Leeds

Leeds is a large metropolitan city in Yorkshire. It is the largest of all the pilot areas, with a population in excess of 725,000. Local employment is concentrated in the wholesale and distribution and the banking and finance sectors. Unemployment rates are below the national average at 4.1 per cent, the lowest of all the pilot areas, and economic activity rates are high at 81 per cent.

North Nottinghamshire

The North Nottinghamshire pilot area covers five LA districts: Amber Valley, Ashfield, Bolsover, Mansfield, and Newark and Sherwood. The area is predominantly rural, with a population of approximately 504,000. Of all the pilot areas, North Nottinghamshire has the highest proportion of employment in the production sector, with high levels of employment concentrated in the manufacturing and construction industries. Unemployment is low at 4.7 per cent, but economic activity rates are also low at 76 per cent.

This qualitative research does not purport to be statistically representative of the whole ONE population. It is important to delineate the type of people who were interviewed, as the emphasis of the sampling has made the perspectives of certain groups more prominent than others in the report’s findings. The rest of this section provides some data on the interviewees’ characteristics, including age, gender and previous contact with the benefits system. This information serves two functions: firstly, it shows exactly who the research has consulted and, secondly, it outlines differences among those interviewed across the three delivery models. As this stage of the research had a focus on lone parents, data on the number of children and age of youngest child of lone parents have also been included.

Individuals selected to participate in the research were initially defined by the benefit claim that initiated their entry into the ONE service. Jobseekers were characterised by their claim for Jobseeker’s Allowance, and sick or disabled clients by their claim for Incapacity Benefit. The characteristics of each client group should not be assumed to be homogeneous, and the information presented below simply outlines the numbers of individuals interviewed in this round of research. The populations of those claiming benefits have diverse circumstances and behavioural and attitudinal patterns, which do not impact on clients’ labour-market situation in a uniform manner.

A total of 125 ONE participants were interviewed for the third stage of the qualitative research. They were drawn from five main client groups, six pilot areas and all three delivery models. Of these interviews, 58 were with individuals who had been interviewed at previous stages of
the research and 67 came from an additional sample provided by the DWP to explore new areas of interest. Table A.1 gives a breakdown of interviewees by client group.

Table A.1: Number of interviews by client group

<table>
<thead>
<tr>
<th>Jobseekers</th>
<th>Lone parents</th>
<th>Sick or disabled</th>
<th>Carers</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic model</td>
<td>9</td>
<td>16</td>
<td>11</td>
<td>5</td>
</tr>
<tr>
<td>Call Centre model</td>
<td>8</td>
<td>17</td>
<td>12</td>
<td>5</td>
</tr>
<tr>
<td>PVS model</td>
<td>9</td>
<td>17</td>
<td>10</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>26</td>
<td>50</td>
<td>33</td>
<td>16</td>
</tr>
</tbody>
</table>

A.2.1 Age profile of respondents

Figure A.1 provides a graphical representation of the age-group distribution of interviewees by delivery model. The age profile of respondents was broadly evenly distributed across the three delivery models, with similar proportions of respondents drawn from the below 25, 35-44, and 45+ age groups. However, very few individuals were drawn from the 18-24 age group in the Basic model and from the 55+ age group in the Call Centre model.

Figure A.1 Age of respondents by delivery model

A.2.2 Gender profile of respondents

Figure A.2 shows the gender profile of the research participants. The nature of the focus of this round of research, namely the impact of lone parent trigger interviews, meant that more women were interviewed than men. In addition, the majority of carers interviewed were women, further contributing to the sampling bias.

Women’s perspectives of the impact of the ONE service heavily influence the research findings for the lone parent client group, detailed later in this report. Data collected on men’s attitudes and behaviour towards claiming benefits and work are largely limited to cases from the sick or disabled and Jobseeker client groups.
A particular concern for this round of research was the impact of the annual trigger meeting for lone parents on their attitudes and behaviour towards claiming benefits and work. Figures A.3 and A.4 break down the participants within this priority group by the number of their children and age of the youngest child. The number and age of children can influence lone parents’ decisions about work and their ability to look for and secure a job. Parents often wish to care for their children full-time while they are very young, which again impacts on ability to seek employment.

Figure A.3 shows the number of children of the lone parents interviewed across the three delivery models. In most cases, they had either one or two children. Very few had three children, and none had more than three.

Figure A.4 illustrates the age of the youngest child of lone parent respondents at the time of the interview. A sizeable proportion of the youngest children were below the age of six. A significant proportion were above the age of 16, so many lone parent respondents should have attended a trigger meeting at some stage of their contact with the ONE service.
Figure A.4  Number of children of lone parent respondents, by delivery model
This report evaluates the findings from the fourth round of research for the evaluation of ONE. In order to place this round of research in context, it is necessary to briefly describe the four rounds of research that have been carried for the evaluations of ONE.

**B.1.1 Round one**
This tranche of fieldwork was undertaken when participation in ONE was voluntary. When making a new claim, clients would have been invited along to ONE and they would have been free to accept or reject the invitation. Fieldwork took place between January and March 2000 and involved semi-structured interviews with a sample of clients, the majority of whom had been claiming for 2-3 months, and who had had contact with ONE.

**B.1.2 Round two**
The second round of fieldwork took place in Autumn 2000, more than five months after full participation in ONE was introduced. A similar methodological approach to that used in the previous round was adopted, using semi-structured interviewing and covering six of the 12 pilot areas. As well as jobseekers, lone parents, and sick or disabled clients who were targeted client groups in the first round, the client groups covered by the fieldwork in round two also included widows and carers.

**B.1.3 Round three**
The aim of this round of fieldwork was to gain as detailed and robust a longitudinal view as possible, through interviewing a large number of clients who had been interviewed in the second round of research. The research approach of using semi-structured interviews used in rounds one and two was retained in this round of fieldwork, covering the same areas and client groups as the second round.

**B.1.4 Round four**
The primary aims of this fourth round of fieldwork was to examine the impact of the annual trigger meeting on lone parents attitudes and behaviour, and explore the barriers to labour market participation experienced by people with mental and physical health problems. The longitudinal dimension to the research was retained, so interviews were arranged with as many people interviewed in the last two rounds as possible. The research approach of using semi-structured interviews used throughout the research was also retained. The Widow client group were not targeted in this round of research.

**B.2 The recruitment process**
This longitudinal research aimed to follow-up as many participants as possible from the previous rounds of research, whilst fulfilling two additional aims: to recruit lone parents, and people with mental and physical health problems, according to the priority interests of the research. With lone parents it was important to recruit those who had had an
annual trigger meeting. Lone parents with mental and physical health problems were also targeted. This was in order to investigate whether re-contacting lone parents after they had spent a year with no interim contact with the ONE service for a work focused meeting realigned their attitudes in relation to work and benefits. With the Sick or Disabled client group, it was vital to find an even breakdown of those with physical health problems and those with mental health problems, while not recruiting those who had severe health problems or disabilities. The reason for excluding those with severe health problems was that findings of the prior rounds of fieldwork revealed that many of those in sick or disabled client were labelled as ‘inactive’ but nevertheless made significant steps towards labour market re-entry but faced specific barriers to achieving this. Those with severe health problems were less likely to move closer to the labour market, many of them facing insurmountable barriers to employment.

The recruitment sought to include as many respondents from previous rounds as possible and further gaps were filled by targeted recruitment. It was therefore necessary to recruit additional clients that met the desired sampling characteristics from a booster sample provided by the Department for Work and Pensions. It was anticipated that the shortfall caused by this would reduce the ratio of follow-up contact to clients recruited from a booster sample to around 40:60. In fact, clients were recruited from previous rounds and booster samples on an approximate ratio of 50:50.

In order to achieve the above aims and the numbers required, as in the second and third rounds of fieldwork, recruitment was targeted on specific client groups. In the first instance, clients were recruited on the basis of their claim that initiated entry onto ONE. In the second instance, clients were recruited on the basis of whether met the desired sampling characteristics described above. In the third instance, clients were recruited on the basis of the extent and quality of contact with the ONE service.

Clients interviewed in the round four fieldwork were selected by a recruiter using a telephone screening method. The recruiter used a standard pro forma once in contact with the client. The pro forma included an introductory section which aimed to refresh the client’s memory about their previous contact with ONE and to introduce and explain the nature of the new round of fieldwork. Separate pro forma’s were used for contacting those interviewed in previous rounds and those from the booster sample, as the information gathered in previous rounds had already established the nature of health problems affecting sick or disabled clients. The telephone discussion asked clients about their current benefit status, about the nature and extent of any further contact with ONE and about what they are doing now, and identified any change in status since the last round of interviewing. The telephone discussion also had routing for lone parent and sick or disabled clients to either establish a) whether lone parents had had an annual trigger meeting and if so, the
nature and quality of the contact and b) to establish the nature of sick or disabled clients health problems. From this discussion the recruiter made a decision about whether to recruit the client or not.

B.3 The semi-structured interview

As with previous rounds of the fieldwork, semi-structured interviewing was the primary research method used. Interviews were structured with experience of previous stages of the fieldwork in mind and incorporated lessons learnt from them. They were structured in such a way as to extract the most relevant and comprehensive information about experience of the ONE service and to make it as simple as possible to draw lessons from the responses reported in terms of the ONE experience and labour market outcomes.

The interview was structured, as far as possible, as a naturally-developing informal conversation, which would allow the respondents to express themselves freely and reduce the level of perceived cultural inequality between interviewer and interviewee. It was considered advantageous for the research to be conducted in this way, due to the nature of the clients involved, who may have had previous negative experience of ‘official’ interviewing and may thus be negatively predisposed to overly-structured questioning. At the same time it was vital to design the topic guide in such a way as to gather as much concrete detail as possible within the time limits defined by the research timetable.

It should be noted at this point that respondents were offered a small incentive payment for their participation. ECOTEC’s experience in this type of research suggests that this increases the response rate, without any significant evidence to suggest, as some researchers claim, that payment encourages a certain type of response (disproportionately positive).

Each interview was conducted by a study team of two researchers, with one conducting the interview and the other taking written notes and posing additional questions. The interview was also recorded, providing the permission of the respondent was obtained – it was stressed that this recording was made solely for the convenience of the researchers and would not be passed on to any other authority.

In addition to suggesting the lines of questioning and the order of discussion (although this was left, within reason, to the discretion of the interviewer), the topic guide also prompted the interviewer to probe for specific pieces of information required from the client. This allowed information to be collected to a necessary degree of depth in a consistent way by all members of the study team.

B.4 The client groups

The client groups approached in the fourth round of fieldwork were slightly different to those interviewed during the second and third rounds. Due to the increased focus on sick or disabled clients and lone parents, widows were not approached for interviews in this fourth round. The client groups approached during the fourth round of fieldwork were:
• Jobseekers (i.e. current JSA claimants who experienced a ONE referral or individuals who have made a new claim for JSA).
• Lone Parents (who had been referred to ONE as a result of an Income Support or other similar claim, or through New Deal).
• Sick or Disabled Clients (due to the focus those with health problems that do not fully exclude them from the labour market, only those claiming Incapacity Benefit were approached and not those claiming Severe Disabled Allowance).
• Carers (i.e. those with significant caring responsibilities for a person sole dependent upon them).

An attempt was made to approach an adequate number of clients from each client group during the third round of fieldwork, so that we could draw some valuable findings in relation to each of the identified groups. As well as contacting the above client groups, another aim of the research was to ascertain 1) with lone parents, whether they had had a trigger meeting and what quality the contact with the ONE service had been, and 2) with Sick or Disabled clients, to establish whether their primary health consideration was a physical or mental issue. This recruitment process has been described in detail above.

B.5 The study areas
The study was carried out in six of the twelve areas in which different delivery models of the ONE service are being piloted. A wider aim of the research was to see if and how different delivery models have affected clients experience of the ONE service. It was necessary to contact a broadly equal number of clients from each delivery model in order to draw sufficient evidence to inform the research in this area.

<table>
<thead>
<tr>
<th>Area</th>
<th>Delivery model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lea Roding</td>
<td>Basic delivery model</td>
</tr>
<tr>
<td>Clyde Coast</td>
<td>Basic delivery model</td>
</tr>
<tr>
<td>South East Gwent</td>
<td>Call Centre delivery model</td>
</tr>
<tr>
<td>Calderdale and Kirklees</td>
<td>Call Centre delivery model</td>
</tr>
<tr>
<td>Leeds</td>
<td>Private and voluntary sector model</td>
</tr>
<tr>
<td>North Nottinghamshire</td>
<td>Private and voluntary sector model</td>
</tr>
</tbody>
</table>

B.6 Other methodological considerations
B.6.1 Post-hoc rationalisation
There is a contentious issue in qualitative social research about how and why people explain and interpret past events differently at different points in time. There is often an issue as to whether a person’s interpretation of events can change as a result of the passage of time, new events or a possible attitudinal change. Often events can pass that realign an individuals world-view, forcing them to reinterpret past events in a way that makes sense to them. As the research team were interviewing clients about their past experiences of the ONE service at more than one point in time, this is an issue that was bound to arise. Moreover, as the same clients were approached a second or third time to interview them in-depth about their experiences of the ONE service, it was a concern that this in itself could have had an impact on the views expressed.
It is commonly accepted that data recovered from qualitative research will never present a completely unbiased or truthful description of an event or experience, ‘instead we should see such responses as displays of moral forms’. There are a number of factors that will affect an interviewee’s interpretation and opinion of a chain of events. These can include factors brought on by the interviewee such as memory recall or over-reporting and also factors introduced by the interviewer and interviewee, the physical context of the interview and the interviewer’s conduct. Furthermore, the fact that clients are describing an experience, in some cases a year after the event, is bound to have an effect on the validity of the data they provide.

In the fourth tranche of the fieldwork some clients were visited who had been interviewed in the second round to discuss among other things, their further contact with the ONE service. It was an initial concern of the research team, that this second or third visit could have produced different responses when asked about experience of past contact with the ONE service than were produced during the initial interview. In fact, when comparing topic guides from the second, third and fourth round interviews, it can be seen that post-hoc rationalisation has occurred infrequently. In all three interviews, clients tended to use similar language, tone and general expressions and there was much continuity regarding attitudes and behaviour towards work and benefits. Where different accounts of experience were given in round two, three and four interviews, it cannot always be attributed to post-hoc rationalisation. For example, problems of recall and different interviewing techniques are other determining factors which might bring some variation in describing events, and this has also been taken into account.

All in all, however, it can be safely stated that the effect of post-hoc rationalisation on our findings is negligible.

B.7 Impact of Researchers

It is possible that as a result of the first meeting with our researchers, clients may have taken action in relation to the ONE service, which they may not have done otherwise. Although the researchers tried not to influence client’s action or views directly, as a result of talking them through their experience of ONE and refreshing their memories about what ONE has to offer, they may have indirectly caused clients to seek further advice from the service or even affected their views or perceptions of the service to a small degree.

The topic guides used for the interviewing aim to allow the client to discuss fully their experiences of the ONE services, their opinions of it and how it has affected their situation. Experience with the second and third tranche of fieldwork has shown that the natural course of the

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interview has made it necessary, in some cases, for the researcher to describe a bit more about what the ONE service has to offer. As a result, clients often indicated that they had learned a bit more about the ONE service and that they may follow-up further queries they had as a result. This inevitably means that the fourth round fieldwork may throw up cases where clients have initiated contact with ONE as a direct result of their previous interview with one of our researchers. As emphasis throughout the fieldwork has been placed on the nature and experience of further contact with the ONE service, the impact of our researchers could be an issue in analysis of the data collected, particularly when we are looking at reasons for initiation of the further contact and therefore this has been taken into account in analysis of the data received.
14th November, 2001

«Title» «Surname»
«Address_Line_1»
«Address_Line_2»
«Address_Line_3»
«Address_Line_4»
«Post_Code»

Dear «Title» «Surname»

Follow-up Discussions with ECOTEC about your experiences with claiming benefit

As you may recall, in the spring you took part in a one-to-one discussion about your experience of claiming benefit with a researcher from ECOTEC. Your views and personal experience of the service provided by ONE were very valuable for the research.

Further to our letter dated November 2001 we would like to arrange another discussion with you, to see whether there have been any changes in your situation, an ECOTEC Researcher will contact you to arrange an interview. We value your contribution to the research and would like to give you £15 and would like to give you £15 in cash as a ‘thank-you’ gift for your help with this study and this will not affect your entitlement to benefits in any way.

Should your contact details have changed, please write (remembering to give your name) to Victoria Davies at ECOTEC, using the Freepost envelope provided by no later then 28th November 2001.

I do hope you will continue to help with this important study and that you will enjoy the opportunity of giving your views. If you would like to know more about this third stage of the research. Please call either Vicky Davies at ECOTEC on <Insert new number>, or Leah Harris, at the DSS Social Research Branch on 020 7962 8325. We would be pleased to answer any queries that you may have.

We hope you will be able to take part in the second stage of this research.

Kind Regards

Victoria Davies
Senior Research Manager
14th November, 2001

«Title» «Surname»  
«Address_Line_1»  
«Address_Line_2»  
«Address_Line_3»  
«Address_Line_4»  
«Post_Code»

Dear «Title» «Surname»

I am writing to ask for your help. The Department for Work and Pensions (DWP) and the Department for Education and Skills (DfES) want to improve the services provided to people claiming benefit. We have therefore asked ECOTEC, an independent research organisation, to carry out some one-to-one discussions with people claiming benefit, or who have claimed benefit recently. ECOTEC is completely independent of government departments and political parties.

Your name has been selected at random from the records of people visiting selected offices. We would like to know about your experiences of claiming benefit and what you think of the advice and assistance you have been given whilst claiming. We are interested in your contribution, whether you are claiming benefit, or whether you have now moved off benefit.

An interviewer from ECOTEC will be contacting you some time during the next few weeks, to explain more about the study. The interviewer will ask you a small number of questions over the telephone concerning your claim and may ask you to take part in a face-to-face discussion. This is a voluntary study and anything you tell the interviewer will be treated in the strictest confidence. The findings will not identify you or your family and the names of those who take part will not be passed on to the DWP, or the DfES, or anyone outside ECOTEC. If you do take part in the face-to-face discussion, you will receive £15 in cash, as a ‘thank-you’ gift for your help with this study. This will not affect your entitlements to benefit in any way.

I hope you decide to take part in this study. If, however, you do not wish an interviewer from ECOTEC to contact you, please write (remembering to give your name) to Victoria Davies at ECOTEC, using the Freepost envelope provided, by no later than November 28th. Whatever your decision, it will not affect your benefit entitlement or any dealings you may have the DWP, the Benefits Agency or job centre, either now or in the future.
I do hope you be able to help with this important study and that you will enjoy the opportunity of giving your views. If you would like to know more about the research, please call either Vicky Davies at ECOTEC on <Insert new number>, or myself, at the DWP Social Research Branch on 020 7962 8325. We would be pleased to answer any queries that you may have.

We hope you will be able to take part in this research.

Kind Regards

Leah Harris
Research Officer
Discussion Guide for Telephone Contact with Previous Respondents (Follow-up)

Interviewer’s notes:

We need to contact all those individuals interviewed during previous rounds of fieldwork to determine where they are now (primarily in relation to the labour market) and to agree a mutually convenient time for a follow-up interview.

Please ensure you read the relevant client summary sheet for each individual before contacting them by telephone. This will provide you with some background information on each person and help steer the telephone discussion.

Participant Contact Details

Name:
Address:
Tel.:

Interview Details

Date:
Time:
Interviewer: ☐ No
Interview confirmed within 24hrs of visit?

Part One: Introduction

• Check that you are talking to the right person
• Introduce yourself, explaining that you’re from ECOTEC (refer to recent letter sent)
• Introduce/remind the respondent of the research:
  - Researcher (Name: ) visited you in (Month: ) last year to ask for your views on the ONE service
  - Check recall
    * If respondent is hesitant, provide more information.
• Explain that we’re now contacting all those people we spoke to earlier in the year to see where they are now and what plans they have
• Check the respondent understands

• Check it’s OK to ask a couple of questions over the telephone now – takes no more than 2 minutes
  * If respondent is hesitant
    o reiterate that there are only a couple of questions and they will only take a couple of minutes to answer
    o emphasise our gratitude if they are able to help
    o assure them that any information provided is treated as confidential, is for ECOTEC’s use only and will not be passed onto any third party.

When OK, continue overleaf.

Interviewer’s Notes: Check DWP database to see whether individual is recorded as having had further contact with ONE. Insert nature of subsequent contact recorded on database (tick all that apply):

☐ Caseload meeting contact ☐ Review meeting ☐ Trigger meeting ☐ Other

Part Two: Telephone Discussion

1. Can I ask you what benefits you are currently claiming?
   - Jobseekers Allowance ☐
   - Income Support ☐
   - Council Tax Benefit ☐
   - Housing Benefit ☐
   - Incapacity Benefit ☐
   - Severe Disablement Allowance ☐
   - Invalid Care Allowance ☐

   * For Lone Parents who attended an annual trigger meeting ONLY

2. Can you confirm whether you have attended a meeting with an Adviser in the last three months?
   ☐ Yes ☐ No

   a) Has this been the only contact you have had with an Adviser in the last year?
      ☐ Yes ☐ No
If no:

b) What other contact have you had with your Personal Adviser?
(Probe: Establish nature of contact, each instances’ length and focus, and the location/site, where relevant.)

If yes:
c) Could you briefly tell me what you thought about the meeting and how useful/appropriate you found it?

3. What are you doing now? Let the participant respond and tick the appropriate box below. If the participant is unsure how to answer, ascertain whether they are employed or not. If employed, determine the nature, length and/or pattern of employment. Determine what priority the individual places on work and whether they are looking for work.

<table>
<thead>
<tr>
<th>STATUS</th>
<th>Tick Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unemployed (seeking work and available):</td>
<td></td>
</tr>
<tr>
<td>Employed:</td>
<td></td>
</tr>
<tr>
<td>Full-time employed</td>
<td></td>
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<tr>
<td>Part-time employed</td>
<td></td>
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<tr>
<td>Self-employed</td>
<td></td>
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<tr>
<td>On a government training programme</td>
<td></td>
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<tr>
<td>In Education</td>
<td></td>
</tr>
<tr>
<td>Other (pls. specify)</td>
<td></td>
</tr>
<tr>
<td>I am inactive:</td>
<td></td>
</tr>
<tr>
<td>Seeking work, but not available</td>
<td></td>
</tr>
<tr>
<td>Not seeking, but would like</td>
<td></td>
</tr>
<tr>
<td>Not seeking and would not like</td>
<td></td>
</tr>
</tbody>
</table>

Part Three: Recruit

Recruit

- Explain to the participant that we would like to arrange another interview with them, similar to last time. We’re particularly interested to hear:
  - what has happened since we last met
  - how appropriate they have found the service and how effective it has been in meeting their individual needs

- for lone parents we would like to hear about their experience of the annual trigger interview where these occurred

- Check the fieldwork schedule and let them know when we will be in their area

- Agree a date and time for the interview to take place and give the name of the researcher that will be visiting

  If the participant declines the opportunity to be interviewed, ascertain a clear reason for this. Responses such as ‘not interested’ are not sufficient — ascertain exactly why the participant is not interested.

- When recruiting, emphasize the £15 cash gift for the client’s time and that researchers will be visiting the client’s home address for the interview.

Thank the participant for their time and close.

Please attach the relevant client summary sheet and completed interview from the last round of research to the back of this discussion guide.
Notes for Interviewers

The overall aim of the qualitative interviews is to consider the policy impact of ONE on the individual - in terms of their attitudes and behaviour towards the labour markets and the benefit system (welfare to work, reducing ‘dependency’ on the state). More specifically, the objectives for this forth round of qualitative policy research are:

• to examine the impact of annual trigger meetings on lone parents claiming income support within the ONE areas; and

• to evaluate the long-term impact of ONE on those who joined the service in August 2000.

Take care to tailor the interview according to the experience and position of each respondent.

Introduction to Interview

→ First of all, thank the individual for agreeing to speak to us.

→ Explain that you work for ECOTEC, an independent research organisation with no links to any government departments or political parties.

The Department for Work and Pensions and the Department for Education and Skills want to improve the services provided to people claiming benefit. They are funding ECOTEC to talk to people like yourself to find out more about your experience of the ONE service. We are particularly interested to find out whether the service you receive is tailored to your needs but also if the service made you think differently about being on benefit and looking for work (either now or in the future).

The interview should last no longer than one hour and there are a number of questions I need to ask. Before we start, it is important to emphasise that everything discussed during the interview will be treated as confidential.

Is that all clear? Do you have any questions you’d like to ask before we start?

→ Check that it is OK to record the interview – reassure the individual that the tapes will only be used by ECOTEC and will not be passed onto the DWP or any other government department.

Part One: Personal Information

Can I just check some information with you?

• Age

• Ethnic Group (where relevant)

• Current status (in work, on certain benefits, other, length of time in current status)

• Household – do you live alone or with family/friends? (Record details of other home sharers: No. living in same home, their ages especially of children, whether they are in school, status (in work, claiming benefit) whether they are dependant on the interviewer)

Part Two: summary of previous interview(s)- follow-up participants

Say that our previous interview(s) with the participant have given us a lot of important and useful information, and that we want to avoid asking the same questions again as far as possible. We would appreciate it if we could summarise our understanding of the participants’ personal circumstances, and confirm a few details. Please accurately summarise information drawn from previous topic guides around the following areas, and verify key details around:

• Work- previous to first meeting, and at time of interview;

• Benefits- what benefits, whether any change;

• Family- caring responsibilities, special needs;

• Health- their and that of their family;

• Other personal circumstances

• If individual suffers from mental/physical health problems. Probe for details:
  - ascertain the nature and length of the illness
  - ascertain the predictability of the illness i.e. is it a progressive illness, unpredictable illness…
  - What kind of treatment schedule do they have to follow? (Do they need regular treatment, medication, side effects.)
  - how does the mental/physical illness impact on the individual’s work or ability to work?
  - What kinds of job are they able to do, intensity of work, number of hours

→ Go to Part Six.

Part Three: Recent Work, Training & Benefit History

Interviewer Notes: These questions allow you to explore the recent history of the individual being interviewed. These serve three purposes: to ease the individual into the interview by talking about themselves, to understand the individual’s personal circumstances, and to provide you with a picture of their attachment to the labour market/dependency on benefits. For interviews with previous research respondents, use this section to summarise and verify the information collected in the previous interview. For booster, or new, research respondents, please ensure all the following information is collected.

Can you tell me what you’ve done in the two years prior to your recent benefit claim?

(Collect a comprehensive record of any employment, training or other benefit claims. Ascertain the level of priority the individual attributes to work, given their personal circumstances.)

• Employment History. Collect details of jobs held, concentrating on the two most recent prior to ONE. Probe:
  - Number of hours worked (part-time or full-time)
  - Main roles and responsibilities
  - How did they find the job
- How did they feel about it
- Duration of each job held
- Reason for leaving

• Education or Training History. Distinguish between in-work and independent learning. Probe:
  - motivation for undertaking training/education
  - how did they find the course and enrol
  - subject areas studied, vocational or academic
  - did they complete the course
  - did they receive a qualification

• Benefit History. Concentrate only on benefits claimed or received prior to entry into ONE. Probe:
  - reasons for claiming
  - details of different benefits claimed
  - length of receipt of these benefits
  - reasons for changing or ceasing different claims

• If individual suffers from mental/physical health problems. Probe for details:
  - ascertain the nature and length of the illness
  - ascertain the predictability of the illness i.e. is it a progressive illness, unpredictable illness…
  - What kind of treatment schedule do they have to follow? (Do they need regular treatment, medication, side effects.)
  - how does the mental/physical illness impact on the individual’s work or ability to work?
  - What kinds of job are they able to do, intensity of work, number of hours

• Other Responsibilities, including caring for child or other close family relative. Probe:
  - ascertain the nature and level of caring responsibilities,
  - caring for children, elderly relatives, or another type of caring - specify
  - identify the need for caring responsibilities
  - how extensive are these responsibilities, level of support available from others
  - number of hours involved per week
  - what level of priority was attributed to working, given caring responsibilities

Part Four: Claim that initiated entry into ONE

Reason for recent claim: Can you explain for me the events which led up to your recent claim (which initiated ONE contact)? Be very specific about which benefit you are referring to. (Probe: made redundant, widowed, began caring responsibilities, relationship broke up, fell ill or became disabled - please state clearly on the interview guide the nature of the disability or illness, indicating the level of severity, other.)

Was this a new claim or a repeat claim? (Confirm whether this was an entirely new claim or if the participant was changing from one benefit onto another.)

What benefits are you currently claiming? (Use show card of ONE benefits and check what is determining respondent’s eligibility for that benefit. Clarify discrepancies with benefit information drawn from sampling data - use this as an opportunity to explore whether the client started a claim for a different benefit when they entered ONE and what changes have been made since. Probe: reasons for change, who initiated it and whether the client felt this was appropriate.)

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Original ONE Claim</th>
<th>Current Benefit</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jobseekers Allowance</td>
<td></td>
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<tr>
<td>Income Support</td>
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<td>Council Tax Benefit</td>
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<td>Housing Benefit</td>
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<td>Incapacity Benefit</td>
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<tr>
<td>Severe Disablement Allowance</td>
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<tr>
<td>Invalid Care Allowance</td>
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<tr>
<td>Widows and Bereavement Benefits</td>
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</tbody>
</table>

Further comments on any changes to benefits and whether this was appropriate:

If the client is currently in work: Are you currently receiving any of the following:
- Housing Benefit
- Council Tax Benefit
- Working Families Tax Credit
- Disabled Person’s Tax Credit
What were your immediate plans at the time of making this claim?

- to stay at home
  (Probe: is this due to personal circumstances, illness, caring responsibilities, or attitude towards the benefit system/ work?)

- to look for work
  (Probe: motivation, type of work, occupation, nature of activities, part-time or full-time, permanent or temporary, why this choice, what job-search methods were used, how intense were these efforts and how likely does the individual feel they would be in finding work in this area – why they would be likely, and why not (barriers to work)).

- to start some training or education
  (Probe: motivation, subject of training/education, part-time or full-time, intended length of course.)

- Other (e.g. Voluntary work)
  (Probe: what and why? Explore motivation for these activities and their relation to the labour market.)

If work was not an immediate plan:

Was work an option for you at the time of your claim?
(Explore the reasons for responses given, such as other responsibilities or personal circumstances. If work was an option, probe level of priority/activity/focus given to work, job-search methods used.)

If work was not an option:

Do you feel that work may be an option for you in the longer-term?
(Explore the reasons for responses given, try to ascertain when work may become an option - if at all – and the type of jobs the individual would be interested in.)

Part Five: Experience of initial Personal Adviser meeting

- Participants with mental or physical health problems

Did you have a personal capability assessment? How did this make you feel?

- All participants

What did you think the function of the ONE service was? (Prompt: to deliver benefits; to help with finding work) Probe: Why did you expect this to be the case? (Prompt: because of previous experience with BA/Job centre/ New Deals?)

When you first went to your Personal Adviser meeting what kind of help did you think you needed (if any)? (Prompt: help with sorting out benefits, finding work)

What did you discuss in your Personal Adviser meeting? (Prompt: see below. Collect evidence in detail)

- Benefits
  - advice on entitlement
  - discussion
  - better-off calculation
  - in-work benefits

- Employment
  - what kind of job? (type of work, sector)
  - previous experience
  - roles and responsibilities, skills level
  - pay and conditions?
  - location
  - hours

- Job-search help or advice
  - CV’s
  - help with interviews
  - advice on what is available

- Advice on other barriers to work (housing, mental or physical health issues, basic skills, confidence and self esteem, substance misuse, access to transport, finance/debt issues, childcare, other skill needs)

- Personal support (including support and encouragement, the opportunity to discuss their personal circumstances/ need)

- Other (Collect details)

How do you feel about the way in which your needs were discussed? (Prompt: enough detail, breadth)

Do you think that your Personal Adviser understood your personal circumstances? (Evidence?)

Participants with mental and physical health problems- did the Personal Adviser understand impacted on the participants’ ability to work?

Were any actions or decisions taken as a result of your meeting with your Personal Adviser? (Prompt: action plan, referral? Probe: what actions/ decisions, who initiated them- the participant or the Personal Adviser ?)

What impact, if any, did these discussions have on your situation? (Probe: did they make you think differently about benefits or work?)
How did you feel about your situation/personal circumstances at the time? (Prompt: in relation to your personal commitments, work, your financial situation. Was there anything you would have liked to change about them?)

Thinking back to this period, do you think there was anything other help or support that would have helped you? (Prompt: How would it have helped you? Explore any relationship to work.)

Are there any reasons that you did not ask your Personal Adviser for this further assistance? (Prompt: did not think it was their job, time constraints)

Were you offered any further help with another agency or member of staff? (i.e.: Disability Employment Adviser, Lone Parent Adviser, other training organisation. Probe: Reason for help being offered, who offered this help, was it appropriate for the client.)

Did you think about going back to see your Personal Adviser for more help or advice? (Probe: why? What help or support might you have liked?)

Have you had any contact with your Personal Adviser since your first meeting? (Probe: Type/nature of contact, how many times, who initiated the contact, timing of meeting in relation to first contact.)

**Part Six: Activity Since Recent/Current Claim or since last interview (all participants)**

Interviewer’s Notes: Please probe clients for details about their activity since their claim. This should focus on the level and nature of labour market related activity.

Can you explain what you have been doing since your claim? Please complete all sections below that are relevant to the participant’s recent activity.

- **If in Work:**
  - collect details of the job
  - determine whether this is the only job they have had during this period
  - if they have had other jobs, ask them what they were doing, and why they left this job
  - number of hours worked, main roles and responsibilities, pay
  - how did they find the job
  - how do they feel about it, how long do they intend to stay in the job
  - how does it compare to any jobs the respondent has had prior to ONE
  - if intend to leave, why and what are the client’s plans and how will they achieve this
  - have they had any in-work support

- **If in Education or Training:**
  - collect details about the course
  - number of hours per week, subject area
  - how did they find the course and get enrolled
  - do they enjoy it
  - how long does the course last
  - how will the knowledge gained be used (in relation to work)
  - qualifications gained

- **If Caring:**
  - ascertain the nature and level of their caring responsibilities
  - caring for children, elderly relatives or another type of caring - specify
  - how extensive are these caring responsibilities, number of hours per week
  - what priority do they attribute to work, given their personal circumstances?

- **If Looking for Work/Unemployed:**
  - have they been looking for work
  - collect detailed evidence of the nature and level of job-search activities - newspaper searches, CV writing, attending interviews, writing speculative letters
  - how much time is spent looking for work per week
  - what is preventing the individual from finding or securing work, has anything been done to counteract this?

- **Other Responses:**
  - Probe: what and why?
  - how do they relate to work? If at all
  - what are the client’s long-term goals and when would the client seek to achieve these
  - what priority is attributed to work?

**Part Seven: Lone Parent Annual Trigger Meetings**

Note to interviewer: briefly summarise your understanding of the key details of the lone parent’s personal circumstances just prior to the trigger meeting. Confirm the age of the children, and whether they have special needs. Ensure attitudes to childcare are explored at an appropriate point.
Say that you are aware that the participant will have had a recent meeting with the ONE service. Ascertain how they refer to it, and use term in the following questions.

**How did you find out about your trigger meeting?** *(Prompt: by letter, phone call, when did you receive it?)*

**Did you know that the meeting was mandatory (that you were required to go)?** *(Probe: Who told you that this was the case? How did you feel about this?)*

**What were your expectations of the trigger meeting?** *(Prompt: what subjects did you think would be covered as part of the trigger meeting?)*

**Was the timing of the meeting appropriate?** *(Probe: did you have any (new) questions that you wanted to ask your Personal Adviser, is there anything you needed at the time- benefits advice, other help or support)*

**Do you think the meeting could have happened at a better time?** *(Prompt: When? Under what circumstances?)*

**Can you remember what you discussed during the meeting?** *(Probe: the focus of the discussions and whether this was appropriate for the individual. If necessary probe under the following prompts)*

- **Benefits**
  - advice on entitlement
  - discussion
  - better-off calculation
  - in-work benefits

- **Employment**
  - what kind of job? (type of work, sector)
  - previous experience
  - roles and responsibilities, skills level
  - pay and conditions?
  - location
  - hours

- **Job-search help or advice**
  - CV’s
  - help with interviews
  - advice on what is available

- **Advice on other barriers to work** (housing, mental or physical health issues, basic skills, confidence and self esteem, substance misuse, access to transport, finance/debt issues, childcare, other skill needs)

- **Personal support** (including support and encouragement, the opportunity to discuss their personal circumstances/need)

- **Other** (Collect details)

**How do you feel about the way in which your needs were discussed?** *(Prompt: enough detail, breadth, sensitivity)*

**Were any actions or decisions taken as a result of your meeting with your Personal Adviser?** *(Probe: what actions/decisions, who initiated them?)*

**What impact, if any, did these discussions have on your situation?** *(Probe: did they make you think differently about benefits or work?)*

**How did you feel about your situation/personal circumstances at the time?** *(Prompt: in relation to your personal commitments, work, your financial situation. Was there anything you would have liked to change about them?)*

**Thinking back to this period, do you think there was anything other help or support that would have helped you?** *(Probe: How would it have helped you? Explore any relationship to work.)*

**Are there any reasons that you did not ask your Personal Adviser for this further assistance?** *(Prompt: did not think it was their job; time constraints)*

**Were you offered any further help with another agency or member of staff?** *(i.e.: Disability Employment Adviser, Lone Parent Adviser, other training organisation. Probe: Reason for help being offered, who offered this help, was it appropriate for the client.)*

**How did this meeting compare with your first Personal Adviser meeting?** *(Probe: were different things discussed, relationship with the Personal Adviser)*

**Do you think you might go back to see your Personal Adviser in the future?** *(Probe: why/why not? under what circumstances, what would you want to get out of any future meeting?)*

**Have your personal circumstances changed in any way since your trigger meeting with your Personal Adviser?** *(Probe: responsibilities, work- how are you spending you time, reasons for any change)*

**Has your trigger meeting had an impact on your situation in any way?** *(Probe: identify specific actions, support or assistance that have helped or hindered the client. Collect evidence to support claims- identify instances where the service has made a clear impact. Has there been a change in attitude to benefit/work?)

- **If trigger meeting was deferred**

  **Why was your meeting deferred until a later date?**

  **When do you think a better time to have this meeting might be?** *(Prompt: when, or under what circumstances?)*
Part Eight: Further Contact with ONE - Further Contact Participants Only

Interviewer’s Notes: Collect details for all instances of contact (follow-up clients for all instances of further contact since last interview). Take care to clarify whether this contact was with ONE Personal Adviser or other adviser (New Deal, DEA.)

Can you explain what further contact you have had with the ONE service since your first meeting with a Personal Adviser? (Probe: reason for further contact, how many times, who initiated the contact, what was the nature of the contact - telephone, written correspondence or face-to-face meeting, length of contact, was the timing appropriate or not, and why, if timing was not appropriate then when would have been better?)

Can you remember what you discussed during the meeting(s)? (Probe: the focus of discussions, why this focus and whether this was appropriate for the individual at this later time. Collect evidence to support claims of appropriate focus or not. Please probe under the following prompts if necessary.)

- **Benefits**
  - advice on entitlement
  - discussion
  - better-off calculation

- **Employment**
  - what kind of job? (type of work, sector)
  - previous experience
  - roles and responsibilities, skills level
  - pay and conditions?
  - location
  - hours

- **Job-search help or advice**
  - CVs
  - help with interviews
  - advice on what is available

- **Advice on other barriers to work** (housing, mental or physical health issues, basic skills, confidence and self esteem, substance misuse, access to transport, finance/credit issues, childcare, other skill needs)

- **Personal support** (including support and encouragement, the opportunity to discuss their personal circumstances/need)

- **Other** (Collect details)

How did you feel about the way your needs were discussed? (Prompt: were your concerns discussed in enough detail)

What impact, if any, did these discussions have on your situation? (Probe: did they make you think differently about benefits or work?)

How did you feel about your situation/personal circumstances at the time? (Prompt: in relation to your personal commitments, work, your financial situation. Was there anything you would have liked to change about them?)

Was there anything else that you wanted at the time? (Prompt: anything that would have helped you?)

Are there any reasons that you did not ask your Personal Adviser for this further assistance? (Prompt: did not think it was their job; time constraints)

Were you offered any further help with another agency or member of staff? (i.e.: Disability Employment Adviser, Lone Parent Adviser, other training organisation. Prompt: Reason for help being offered, who offered this help, was it appropriate for the client.)

How did this meeting compare with your first Personal Adviser meeting? (Prompt: things discussed, relationship with Personal Adviser)

Would you like to go back to see your Personal Adviser in the future? (Prompt: why/why not? under what circumstances, what would you want to get out of any future meeting?)

Have you been in contact with any other agencies/organisations about work or your benefits e.g. the Citizens’ Advice Bureau? (Prompt: why was this? Could your Personal Adviser have helped you with this? What did you feel that the other organisation could offer you?)

- **If in work:**

  Have you had any problems/difficulties at work? (Prompt: what were they? How did you deal with them, including any contact with PA)

  Do you think that any help or advice would have been useful in dealing with this problem/difficulty? (Prompt: what type of help or advice? where would you have tried to get this support from?)

Part Nine: Sustainability of Employment Outcomes - For those who have in been in work since first contact with ONE

Interviewer’s Notes: The following questions should only be addressed to those participants who are currently in work or who have been in work for any length of time since their initial ONE interview. For those who we are following up, details should only be collected on any change since the last interview.

Summarise and verify the information already collected earlier in the interview about the participant’s job to check you have correct information.

- business activity of employer
- nature of participants’ roles and responsibilities
- skills required, how and when these were acquired
- hours of work
- duration of employment
- pay (in comparison to previous employment)

Why did you decide to take this job? (Prompt: interest, pay, relation to previous experience)

What do you enjoy about working/your job? (Probe: specify whether responses are specific to the current job or working in general)

What aspects of working/your job do you dislike? (Probe: specify whether responses are specific to the current job or working in general)

What are your longer-term work plans?

What support, if any, do you feel you have received from your Personal Adviser or from the ONE service that has helped you to stay in work? (Prompt: collect concrete evidence on specific actions taken by the Personal Adviser that has helped the participant stay in work, or move into another job.)

- If the participant is considering leaving current job in the near future

Can you explain why you want to leave this job? (Probe: is it the job itself, the pay, personal circumstance?)

What would you do next? (Probe: claim benefit, look for another job, where would the participant look, would they seek any advice or support looking for work or claiming benefit, where would they go.)

Part Eleven: Plans & Close of Interview

Can you explain what your immediate plans are? (Prompt: Have you any personal goals, in particular in relation to work? How will you go about doing this?)

What are your plans for the six months or a year after that? (Probe: what might prevent you from achieving these aims?)

Overall, what impact do you feel your Personal Adviser has made on your personal situation or circumstances? (Did they make it easier to start thinking about work/stay in work?)

Is there anything else about the ONE service you would like to add?

Thank you very much for your time and help.

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