Local Insight Report

Hammersmith & Fulham Foodbank and Citizens Advice

Tackling Destitution Together

April 2025 - March 2026



Summary

Contents

Background	3
Summary	4
A Closer Look	5
Overcoming Challenges	7
Case study	8
Bigger picture	9
Supporting high risk groups	10
Next steps	11

This local insight report details lessons learned from the Tackling Destitution Together project. This project is part of a collaboration between Trussell, Citizens Advice, and Local Citizens Advice offices and food banks in the Trussell community, working across partners to test early intervention and preventative models of advice delivery that identify and support people at risk of destitution before they experience crisis over the course of 12 months.

Specifically, the aims of this project were to:
1. Prevent destitution
2. Help people exit it quickly
3. Support people stuck in long-term destitution

In doing so, this project responds to a growing concern that the level of hunger and hardship people are facing is deepening, with an increase in the proportion of households reporting 'very low' food security.

We have seen that people needing foodbank and charitable support are often experiencing multiple, overlapping forms of disadvantage rather than isolated financial crises. This suggests that preventative approaches that focus on addressing the interconnected challenges of income, welfare, debt and health are needed rather than addressing hunger alone.

We understand that it is through collaborative partnership and collective action at both local, regional and national levels that we can influence change in the advice sector. The core hypothesis was that trusted frontline organisations, supported by effective partnerships, infrastructure and referral pathways across the wider system, could identify risk earlier, resolve some issues themselves, and connect people to advice before crisis escalates.

Importantly, while the focus has been on reaching populations disproportionally affected by hunger earlier with the right level of support, a key aspect of this project has been testing new ways of working and developing collaborations across national and community organisations.

This report looks at unique ways in which Hammersmith & Fulham Foodbank and advisors from Citizens Advice have attempted to tackle destitution together in their community. It provides a summary of key outcomes, learnings, challenges and recommendations.

Background

The first phase of this project involved discovery research conducted by Citizens Advice and Trussell that explored who experiences destitution locally, why it happens, where current support succeeds or fails and how advice and interventions could prevent or reduce it earlier.

What is destitution?

Destitution is defined as being unable to afford the basic material necessities needed to stay warm, dry, clean and fed and affects ~13.8 million people in the UK (JRF, 2023). Research also found 14.1 million people were food insecure in 2024 (Trussell, 2025). The income threshold for single adults to avoid destitution (excluding housing) is £120 a week for a single adult and £205 for a couple. Universal Credit (UC) is below this threshold (Joseph Rowntree Foundation and Trussell, 2023).

Importantly, destitution is systemic and multi-factor, not individual failure. It's often the result of a combination of social security failures, physical or mental health complications or disabilities and low or unstable income (i.e. as a result of Universal Credit or insecure jobs). Other factors are life shocks or debt, (bereavement, abuse, homelessness, job loss or illness) and isolation or digital exclusion.

Who experiences destitution?

Key high-risk groups identified to be at most risk of destitution during discovery research were:

- People with insecure immigration status
- People from minoritised backgrounds
- Disabled people and people with long term health conditions
- People with complex support needs
- Single adults and one-parent households

Advice is reactive, not preventative

Advice is shown to be highly effective when people access it (as evident in impact reports from Maps and Citizens Advice). However, almost half of the people reaching food banks have no meaningful advice beforehand (Trussell, 2025). Discovery research by Citizens Advice identified a number of factors:

- Local support services are not always holistic or well connected.
- Needs are complex and compounded by the time people reach crisis point.
- Pressures on the advice sector can lead to a focus on efficiency over effectiveness.
- Demand for advice services continues to increase.

The core problem

- Destitution is driven by structural system failures, especially social security
- People often fall into crisis before they access help

The key gap

- Advice often comes far too late
- Many of the most vulnerable groups are not reached at all

The opportunity

- Shift from crisis response to early intervention
- Target high-risk groups earlier with tailored interventions and advice
- Strengthening and aligning local (fragmented, crisis-driven) systems

Summary

28

Clients supported through advice delivery

11

Organisations completed e-learning modules

22

Frontline staff trained

14

Lived experience participants engaged

74

Organisations engaged

13

Formal partnerships established

Hammersmith & Fulham's Tackling Destitution Together pilot focused on preventing destitution before crisis point by strengthening early intervention across the local system. The project focused particularly on people with disabilities and long-term health conditions, recognising that this group is disproportionately represented among people experiencing poverty, food insecurity and financial hardship locally.

To address these challenges, the project developed a structured partnership model. Organisations were invited to become formal delivery partners, gaining access to online training, resources and ongoing support. In return, partners committed to embedding earlier identification of hardship within their services and could refer people at risk of destitution to the project's new Client Support Worker role for additional support.

Training and resources were designed to increase confidence among frontline workers working in voluntary, community, health and council organisations across the borough to support people at risk of destitution.

A new relational client support model was tested aimed at supporting people identified as being at risk of destitution through trusted, practical support with engaging with services, accessing entitlements and addressing the wider issues often sitting beneath immediate financial difficulties. Rather than operating as an open referral service, the Client Support Worker formed part of a wider early intervention pathway. Referrals were accepted through partner organisations that had completed training and committed to the project's approach, creating opportunities to identify and support people before they reached crisis point.

Through the Speak Up! participation group, residents with direct experience of hardship helped shape various elements of the project and contributed directly to local discussions about poverty, financial inclusion and early intervention.

A closer look

...at what has been achieved over time

Building confidence for earlier Intervention

A core aim of the Hammersmith & Fulham pilot was to strengthen the ability of frontline organisations to identify and respond to hardship before individuals reached crisis point. The pilot recognised that many people at risk of destitution were already in regular contact with community, health and local authority services. Rather than creating a new frontline service, the project focused on strengthening these existing touchpoints and creating clearer routes into support.

Early engagement with local organisations repeatedly highlighted a common challenge: staff regularly encountered people experiencing financial difficulties, poor housing, debt and social isolation, but these issues were often treated as someone else's responsibility, resulting in missed opportunities to identify and address underlying needs.

Organisations wishing to participate were asked to become formal project partners. This involved signing a partnership agreement and engaging with the project's learning offer. Partner organisations gained access to training materials, practical resources and referral pathways into the Client Support Worker role, helping create a shared approach to identifying and responding to hardship.

Training resources were designed to improve awareness of the drivers and warning signs of destitution. The training was designed to be practical and accessible, recognising that many organisations supporting vulnerable residents were not advice specialists but were often the first to identify signs of hardship.

By the end of the pilot, 19 videos and accompanying factsheets had been produced, covering topics including disability benefits, Universal Credit, housing, debt and wellbeing.

Testing a relational support model

Alongside the training offer, the project tested a dedicated Client Support Worker model designed to help people at risk of destitution. Rather than delivering advice itself, this role focused on building relationships and helping people access appropriate support.

The intention was not to replace specialist advice services, but to bridge the gap between identifying a need and successfully accessing support . Through this work, the project learned that many people faced multiple interconnected issues. Cases often involved a combination of poor physical or mental health, housing difficulties, social isolation, benefits issues, debt, care needs and low confidence. In several instances, the presenting issue turned out to be only one part of a much wider picture.

The Client Support Worker role provided the time and flexibility needed to build trust, coordinate support and help people navigate multiple services. This personalised approach generated valuable learning about the barriers people face when trying to access support and highlighted the importance of ongoing encouragement and practical assistance alongside more traditional advice and referral pathways.

Learning from lived experience

Central to the pilot was the Speak Up! participation group, which brought together people with lived experience of hardship, poverty and social exclusion. Rather than being consulted at a single point in the project, participants actively engaged throughout the project. This helped generate a deeper understanding of how disability, poor health, social isolation and difficulties navigating services were frequently interconnected, creating barriers that prevented people from accessing support at an early stage.



The group explored a range of themes including housing, debt, energy costs, social isolation and wellbeing. Across these discussions, participants consistently highlighted the interconnected nature of the challenges they faced and the importance of being treated as whole people rather than a collection of separate problems.

Insights from the group directly informed project activity. For example, repeated discussions about loneliness, confidence and lack of social connection led to a greater focus on mental health and social isolation within training materials. Participants also contributed to the design of new training resources, including role-play scenarios demonstrating what good and poor support looks like from a service user's perspective.

Citizens Advices' training coordinator produced the first 16 videos and 15 factsheets on topics including debt, housing and benefits. The foodbank then co-produced 3 training videos and 3 factsheets on mental health, social isolation and effective signposting with the lived experience group.

As the project progressed, members went beyond sharing experiences to help shape local conversations on poverty and support services.

Influencing local systems

Beyond direct delivery, the pilot sought to influence how local systems identify and respond to hardship. Project staff worked closely with local authority teams, Community Compass (an online community, advice and guidance hub), referral agencies and strategic partnership groups to embed early intervention principles within wider borough activity.

The project contributed to discussions that helped establish early intervention as a key theme within Hammersmith & Fulham's Financial Inclusion Strategy and participated in wider conversations about strengthening local support pathways.

The project also played a role in supporting the ongoing development of Community Compass, helping improve visibility of local services and exploring future opportunities for stronger referral and navigation systems

Overcoming challenges

Like many systems-change initiatives, the Hammersmith & Fulham pilot encountered a number of challenges throughout delivery.

Navigating organisational complexity

One of the most significant challenges involved engaging larger statutory organisations. While there was often considerable interest in the project's aims, formal sign-up processes, governance requirements and competing organisational priorities frequently slowed progress. Project partners reported that some organisations were supportive in principle but unable to secure approvals within the lifetime of the pilot.

Adapting when systems fall short

The project also encountered difficulties with its original digital delivery plans. Early ambitions to host training materials through Community Compass proved difficult due to platform constraints, contractual arrangements and limited capacity. Rather than delaying implementation, the team adapted by creating a lower-risk delivery model using YouTube, Google Forms and downloadable resources. This enabled delivery to continue while maintaining flexibility for future integration.

Moving from capacity to action

Another challenge involved assumptions about referral volumes. Initial plans anticipated high levels of referrals into the Client Support Worker role and significant effort was devoted to developing referral criteria and managing anticipated demand. In practice, referrals arrived more slowly than expected. Project partners concluded that many frontline workers remained hesitant to identify potential need or lacked the confidence and capacity to make referrals consistently. This learning ultimately reinforced the rationale behind the training programme itself.

Keeping lived experience at the centre

The team also identified challenges in sustaining meaningful engagement with decision-makers and strategic processes. Although the project successfully influenced a number of priorities and strategies, staff described frustrations where decisions affecting local systems were sometimes made without sufficient co-production or engagement with frontline organisations and people with lived experience. This learning further reinforced the project's emphasis on participation and lived experience.

Systems change takes time

Finally, the pilot highlighted the difficulties of achieving systems change within a relatively short delivery period. Project staff repeatedly reflected that relationship-building, organisational culture change and the embedding of early intervention approaches often take longer than one year. While substantial progress was achieved, a number of developments remain ongoing and are expected to continue beyond the funded project period.

> **We received lovely feedback from a local mental health charity worker who took part in the project. She said that its the first time that she saw one of the client's referred to the project as genuinely hopeful about the future. The organisation described the support as "best thing since sliced bread"!**
>
> **Project worker**

A case study

Jane was referred to the project by a local organisation supporting older people experiencing social isolation. The referral initially focused on concerns that Jane was not receiving pension payments and could therefore be at risk of destitution. However, as the Client Support Worker developed a relationship with Jane, it became clear that the underlying challenges were far more complex.

Following surgery, Jane had returned home unable to access parts of her property, including her kitchen and bathroom. She had no carer support in place and believed that arrangements would automatically have been made when she left hospital. In addition to worrying about her finances, she was struggling with reduced mobility, increasing isolation and uncertainty about how to access practical help.

Over a series of conversations and follow-up contacts, the Client Support Worker helped Jane access social care support, a care needs assessment, physiotherapy services, energy support and pension entitlements.

As a result of this support, Jane began receiving carers three times a day, secured her pension and pension credit, accessed additional energy support and developed stronger social connections. Follow-up wellbeing measures indicated substantial improvements in optimism, confidence, relaxation and ability to cope with challenges. Jane reported feeling significantly less isolated and more able to manage her circumstances.

*Client names and some personal details have been changed to protect confidentiality.

This case illustrates one of the central findings of the pilot: the issue initially visible to services is not always the issue driving vulnerability. By taking time to understand the wider context of a person's life, the project was able to identify and address the underlying factors placing Jane at risk of destitution.

With the help of a client support worker, Jane received the following support:

- Access to pension and Pension Credit entitlement
- Social care support, including carers visiting three times a day
- A care needs assessment and physiotherapy support
- Energy support and help staying warm at home
- Ongoing support to navigate services and access practical help

“The work you do is excellent. Without you, with the stress and depression I have been experiencing (would have been too much). Your help and support is incredible and if more people knew about you, other people who are isolated without support wouldn't suffer so much. Having someone to talk to and unpack the issues I'm going through helps me see a way out.”

Client feedback

Bigger picture

What can we learn about attempting system change more broadly?

Building relationships takes time

One of the clearest lessons from the Hammersmith & Fulham pilot was that meaningful change takes time. Throughout delivery, the project team invested in building relationships with local organisations, statutory services and strategic partners. While there was often strong interest in the project's aims, progress was frequently slowed by organisational structures, approval processes and competing priorities. Despite these challenges, sustained engagement enabled new partnerships, participation in strategic forums and opportunities for longer-term influence. The experience reinforced that systems change is built through relationships and trust.

Large organisations change slowly

The pilot highlighted the difference between generating interest and securing organisational change. Several larger organisations, including NHS and local authority services, expressed support for the project's objectives but were unable to navigate internal governance and approval processes within the pilot timeframe. Creating referral pathways alone was not enough. Organisations also needed to see identifying and responding to financial hardship as part of their role. Progress was greatest where leadership, managers and frontline staff were all engaged, suggesting that embedding early intervention requires culture change and accountability across organisations, not just additional services or training.

Organisational ownership needs to cut across all levels

Frontline workers regularly encountered people experiencing hardship, but identifying and responding to wider financial difficulties was not always seen as part of the service response.

This suggests that early intervention requires organisations to recognise hardship as a shared responsibility and create systems, expectations and referral pathways that support staff to take action. The project's partnership model, training offer and referral pathways were designed to support this approach across participating organisations.

Strategic influence requires persistence

The pilot generated influence across a number of local systems, including the Financial Inclusion Strategy, Community Compass and wider cost-of-living discussions. However, these developments did not emerge through single meetings or individual interventions. Progress was achieved through repeated engagement, ongoing conversations and a willingness to work with partners over an extended period. The experience highlighted that influencing local systems often requires persistence, flexibility and the ability to identify opportunities as they emerge. While some outcomes remain in development, the pilot helped strengthen the foundations for future preventative approaches across the borough.

The value of trusted community spaces

The pilot also highlighted the importance of having a physical community space where people could access support in a familiar and trusted environment. The community hub provided a flexible, client-led setting for appointments, creating opportunities to build relationships and reduce social isolation. Many clients first accessed support through signposting from local organisations, word-of-mouth recommendations or by walking in directly, demonstrating the important role that community spaces can play in reaching people who may not otherwise engage with advice services.

Supporting high risk groups

What worked well?

Findings from the pilot suggest that supporting people with disabilities and long-term health conditions requires more than access to specialist advice alone. It also requires sufficient time, trust and flexibility to address the interconnected challenges that can increase vulnerability to hardship and destitution.

Importantly, lessons learned about what makes support more accessible and impactful for people with disabilities and long-term health conditions are likely to make support better for everyone in general:

- support that addresses multiple needs at the same time, recognising the close relationship between health, finances, housing, care needs and wellbeing
- ongoing, relationship-based support, rather than one-off signposting or referrals
- practical help navigating services and completing processes, particularly where health conditions, disabilities or confidence barriers made it difficult to engage independently
- trusted, accessible community settings, where people felt comfortable discussing concerns before they reached crisis point
- services that take time to understand the wider context of a person's life, rather than focusing solely on the presenting issue
- strong social connections and community networks, which helped reduce isolation and increase resilience

The pilot also generated more insight in the way the issue initially identified by a service is not always the issue creating the greatest risk.

Concerns about income, benefits or housing frequently revealed wider challenges relating to health, care needs, confidence, social isolation or difficulties navigating complex systems. As a result, the most effective support was often holistic, person-centred and tailored to the individual's circumstances.

What didn’t work well?

The project also highlighted a number of approaches that were less effective for people with disabilities and long-term health conditions, but that are likely to be experienced by anyone in a position to need support:

- one-off signposting without ongoing support or follow-up
- focusing only on the presenting issue rather than underlying causes
- complex systems that require individuals to coordinate support independently
- fragmented services that address problems in isolation
- frontline workers avoiding conversations about benefits, debt or hardship due to lack of confidence
- support pathways that rely heavily on people self-advocating and navigating services alone
- overlooking the impact of social isolation, confidence and wellbeing on people's ability to access help

The pilot suggests that while support services may already exist, barriers relating to confidence, accessibility, health and social isolation can prevent people from benefiting fully from them without additional support.



What's next?

Although the funded pilot has concluded, several strands of activity are expected to continue.

The training materials developed through the project provide a significant legacy. Nineteen training videos and eighteen accompanying factsheets remain available for future use and are expected to support ongoing workforce development across the borough. Discussions are continuing around how these materials can be promoted through Community Compass and integrated with wider local learning offers.

The project has also influenced wider strategic developments. Early intervention is now embedded within the borough's Financial Inclusion Strategy, creating an ongoing platform for discussions about how preventative approaches can be strengthened and embedded within frontline practice. Relationships established through the pilot are expected to support future collaborative work between partner organisations.

Community Compass represents a further area of legacy. During the pilot, work continued to expand the platform's reach, increase organisational participation and explore future use of referral functionality. Although development remains ongoing, partners view the platform as an important part of strengthening access to support across the borough.

The Speak Up! participation group is also expected to continue in some form, reflecting the value partners placed on lived experience throughout delivery. Project staff described participation as one of the most important elements of the pilot and highlighted the importance of maintaining opportunities for residents to influence local systems and services.

Looking ahead, the project's most significant legacy may be the combination of resources, partnerships, lived experience insight and strategic influence that has been created. Together, these developments have strengthened the foundations for earlier intervention and provided local organisations with new tools, knowledge and evidence to help prevent hardship from escalating into crisis.



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Trussell
Ending hunger together

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