Local Insight Report

Morecambe Bay Foodbank and North Lancashire Citizens Advice

Tackling Destitution Together

April 2025 - March 2026



Background

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This local insight report details lessons learned from the Tackling Destitution Together pilot projects. These projects are part of a collaboration between Trussell, Citizens Advice and Local Citizens Advice offices and food banks in the Trussell community, in an attempt to work across partners to test 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 hardship people are facing is deepening, with an increase in the proportion of households reporting 'very low' food security.

The Early Years project in North Lancashire was designed to support pregnant women and families with children aged 0-4 who were experiencing financial hardship and navigating complex systems. At its core, the project recognised that families with very young children often face overlapping challenges—income instability, debt, housing insecurity, and difficulties accessing the benefits system—and therefore require holistic, joined-up support rather than single-issue interventions.

We understand that it is through collaborative partnership and collective action at local, regional and national levels that we can influence change across the systems and services supporting people and communities. The core hypothesis was that trusted frontline organisations, if equipped with the right tools, confidence and referral routes, could identify risk earlier, resolve some issues themselves, and connect people to advice before crisis escalates. Importantly, while the focus has been on reaching vulnerable populations 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 Citizens Advice North Lancashire and Morecambe Bay Foodbank have attempted to tackle destitution together in their community. It provides a summary of key outcomes, learnings, challenges and recommendations.

Background

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-factored, and not down to 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, and isolation or digital exclusion. The following high-risk groups were identified to be at most risk of destitution during discovery research (JRF, 2023):

- People with disabilities and long-term health conditions;
- People from black and Asian communities;
- People from lone parent households;
- People with complex needs, for example experiencing addiction or homelessness;
- Migrants;
- Single adults

Early years as additional risk

The Early Years project in North Lancashire decided to focus on early intervention during a life stage where the consequences of hardship could have significant impacts on both parents and children. It also identified specific challenges faced by pregnant women and families with young children within the local area.

Through the partnership with Morecambe Bay Foodbank and local communities, the team recognised that families in the early years of parenting were especially vulnerable to financial hardship, debt and income shocks.

Many clients of Citizens Advice North Lancashire were lone parents; living with a disability or long-term health condition; caring for disabled children, or experiencing domestic abuse, poor mental health or financial abuse. Advisers repeatedly encountered families struggling with benefit transitions, disability-related entitlements, childcare costs, insecure housing and relationship breakdown, often at the same time as managing the practical and emotional demands of pregnancy or caring for very young children. This was later explored in more detail through the project's lived experience research.

This combination of family responsibilities and financial insecurity meant that relatively small changes in income, delays in benefit payments, or incorrect decisions could rapidly push families into crisis.

Advice is reactive, not preventative

Advice is shown to be highly effective when people access it (Trussell, 2024). 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.

At-risk groups, including pregnant women and young families, are especially impacted by the consequences of failing systems in which advice often comes far too late or is not reached at all.

Summary

235

Clients supported

14

Training sessions held

134

Frontline staff trained

Over

100

People with lived experience engaged

68

Organisations trained

17

New partnerships established

Over

£811,729

In financial gains*

Over

£402,535

In debt managed

The Early Years project in North Lancashire delivered holistic social welfare advice to pregnant women and households with children aged 0–4, aiming to address the complex and interconnected challenges faced by families with very young children. The project tested a multi-layered intervention model that combined immediate support for families with efforts to strengthen the wider local system.

To meet people where they are, advice delivery was offered through a mix of channels including office-based appointments in North Lancaster and outreach in community settings. More than half of the 235 clients presented with debt issues (54%) and half with benefits-related issues (50%), demonstrating the value of holistic advice rather than narrowly focused interventions. The project generated substantial financial gains and debt relief for these families. Across the project, advisers helped secure more than £800,000 in income gains and over £400,000 in debt managed, alongside repayment rescheduling and access to grants and support funds.

Alongside direct support, the project introduced an Advice First Aid training programme to build the capability of local organisations—such as health services, community groups, and faith organisations—to better identify advice needs and make appropriate referrals. This was complemented by a redesign of third-party referral mechanisms to improve the quality and timeliness of referrals into Citizens Advice. The project also undertook research to better understand the drivers of hardship for the target group and to inform both service development and wider advocacy efforts.

By integrating direct advice, workforce development, research, and policy engagement, the project helped alleviate financial hardship for individuals as well as improved how the local system identifies and responds to the needs of vulnerable families with young children at large.

*Note these gains come from people receiving support they are already entitled to and that are unlocked as a result of receiving advice (not from an increase in public spending).

A closer look

...at what has been achieved over time

Direct support to people at risk of destitution

At its core, the project recognised that families with very young children often face overlapping challenges that required holistic, joined-up support rather than single-issue interventions. For example, advisers repeatedly encountered clients who had been wrongly denied benefits, failed to receive correct disability-related entitlements, or struggled to challenge incorrect decisions.

In practice, the project used a layered advice model to make the best use of available resources and to create a smoother journey for families. A community adviser provided initial engagement, outreach and triage, with warm handovers to a generalist adviser or specialist debt adviser depending on the client's needs. This enabled families to receive the right level of support while maintaining continuity throughout their journey, with advisers often working together on different aspects of the same case. The project also paid close attention to how parents of young children accessed and experienced support, carefully designing delivery around their needs. Support was delivered through a mix of office appointments, outreach sessions in community settings such as children's centres, home visits, and remote channels such as phone and email. Family-friendly interview rooms, baby-changing facilities and flexible appointment methods were introduced to make engagement easier for parents who were often balancing childcare responsibilities alongside financial crises.

What made the project work well in practice was the intensity and continuity of support provided to clients. Advisers did not simply give one-off advice but worked alongside clients through complex processes, such as challenging benefit decisions, preparing appeals, or navigating debt solutions. The graph on page 6 provides an overview of the support provided.

This hands-on approach was particularly important because many of the issues faced by clients stemmed from system complexity and administrative errors, rather than lack of entitlement

Raising awareness and building advice capacity across the local system

Advisers identified recurring problems through casework—such as incorrect benefit decisions, gaps during transitions between benefits, and structural issues like the two-child limit or the way childcare costs are reimbursed—and fed these into evidence-gathering and campaigns activity. These insights were then shared with stakeholders, including local partners and policymakers, contributing to wider discussions about how the system could be improved.

A key mechanism for extending impact beyond direct delivery was the Advice First Aid training programme. In practice, this involved training frontline workers—such as health professionals, council staff, and voluntary sector workers—to better identify advice needs and make appropriate referrals. Over time, this led to measurable improvements in referral quality, with more clients being referred at the right time and with clearer information about their needs.

The training component emerged as a major success factor by project end, because it enabled frontline workers (health, voluntary, faith sectors) to reach into vulnerable populations more effectively, identify advice needs earlier and make more appropriate referrals that were also better in quality (enabling a more effective response).

The project also made structural changes to how referrals were received, which ensured that incoming referrals were more consistent and useful, and acted upon more effectively.

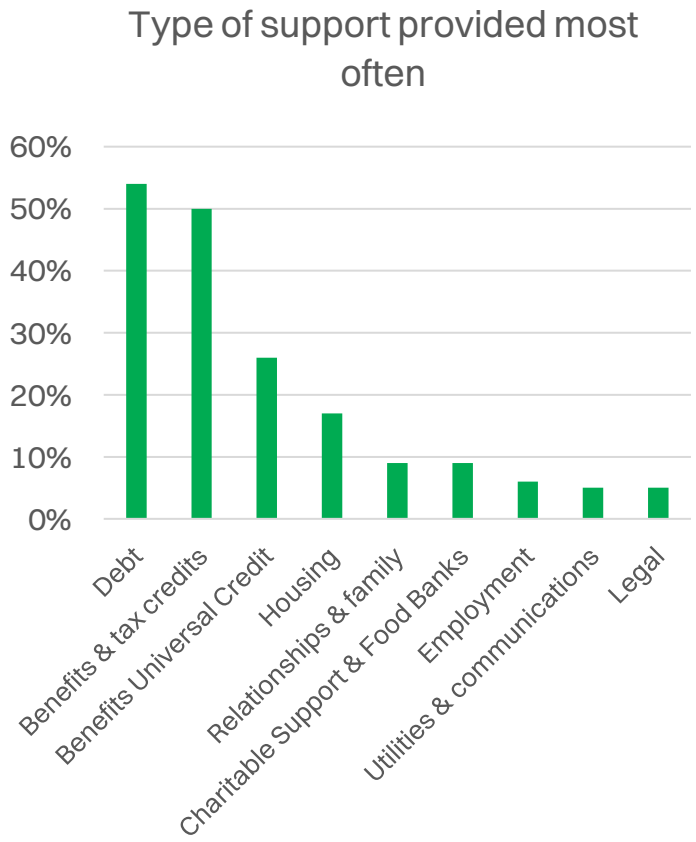


Learning from lived experience (and how it shaped delivery)

Research with people with lived experience was embedded throughout the project. This included surveys, informal conversations, engagement in community settings, and follow-up discussions with clients. In practice, this helped the team not only understand what issues people were facing, but also how those issues were experienced—adding depth to data and informing both service design and external advocacy.

In practice, this involved engaging parents and carers in multiple settings where they were already present—such as children's centres and food banks—and combining informal conversations with more structured methods like surveys and follow-up interviews. For example, conversations with parents attending early years services allowed the team to capture immediate, real-world insights into why families were in hardship, while follow-up contact with clients later in the project helped to understand their experience of the support they had received.

This approach largely confirmed existing assumptions—particularly that debt and sudden income shocks were central drivers of crisis—but added depth by illustrating how these issues played out in everyday life.



The lived experience research resulted in productive conversations with local councillors and increased awareness of the issue of child poverty in Lancaster and Morecambe.

Project staff

Overcoming challenges

As with any pilot, testing a new intervention involved a range of challenges that provided valuable learning. Some related to service delivery, while others reflected wider systemic issues that were harder to influence.

Engaging high risk groups

The project targeted pregnant women and households with children aged 0–4 at risk of destitution, particularly those referred indirectly through services such as food banks. A consistent challenge throughout the project was engagement in longer-term advice processes when clients were often in acute crisis. Even when referred, some did not follow through, reflecting a broader issue that access to advice services does not automatically translate into engagement. This was compounded by the practical realities of this group. Parents of babies and very young children often faced competing demands on their time and attention, making it difficult to attend appointments or engage consistently. Despite the project's response with flexible delivery and adaptations, these barriers remained significant.

Staff turnover impacting momentum and trust

The pilot nature of the project translated into instability in key delivery roles and limited time to mature different components of the model simultaneously. For example, the community adviser left the role halfway through delivery and was replaced with a trainee.

This meant a period of reduced outreach and relationship-building at exactly the point where sustained presence would have deepened engagement. The effectiveness of engagement depended quite heavily on trust, relatability, and continuity of relationships—both with clients and with partner organisations. When roles change or projects are perceived as temporary, that trust takes longer to build (or has to be rebuilt), which can slow down the embedding of new ways of working such as referral pathways or outreach models.

Short term funding for long term problems

The short-term funding created constraints in attempting to provide sustainable support. Staff turnover affected continuity, research capacity was limited, and there was little opportunity to embed or scale successful elements. By the end of the project, there was clear recognition that sustaining impact—particularly system-level impact—would require longer-term investment. When communities have experienced services that come and go, there can be scepticism about investing time and trust in new initiatives. This suggests similar pilots should be designed for early integration into mainstream operations and supported by funding cycles that enable proof of concept.

System complexity itself can be a driver of hardship

On a structural level, the project was operating within a wider system that frequently created the problems it was trying to solve. Issues such as benefit delays, incorrect decisions, and gaps during transitions between benefits repeatedly pushed families into crisis. While the project could resolve individual cases, these systemic problems limited the extent to which lasting change could be achieved within the project timeframe. Here, there is an important role for local and national organsiations to work together and advocate for policy-level changes based on local insights.

A case study

A 16 year old single mother to a 3 month old baby first approached our service when the client's mother came to us seeking clarification on her daughter's benefit entitlement. The client was being home educated and had recently attempted to make a Universal Credit claim. She was initially told to attend a Jobcentre appointment in respect of this, though subsequently received a message stating the claim had been closed because the client was in full-time education. As such, the client was receiving only Child Benefit and had no other income.

We supported the client to call the Universal Credit helpline, and were told that the reason for the client's disqualification from the benefit was her full-time education status. Our adviser explained that this was incorrect, as the client qualified for Universal Credit under the exemption rules as a lone parent responsible for a child. We proceeded to request a Mandatory Reconsideration over the phone and also submitted a request for a written statement of reasons for the claim closure.

At that time, the client was experiencing significant financial hardship and urgently required assistance to meet her and her baby's basic needs. To alleviate immediate pressure, we applied to the Household Support Fund on her behalf, requesting £150 in Love2Shop vouchers to purchase baby clothes and essentials, and an additional £150 Aldi voucher to cover the cost of food, formula milk, and baby care products.

In due course, and following our intervention, the client's Universal Credit claim was reinstated and backdated accordingly. With this benefit in payment, the client also became eligible to receive Healthy Start vouchers, and additional support was provided to help her apply for this.

The Early Years Project intervened by:

- supporting the family's PIP appeal;
- challenging the incorrect Universal Credit deductions;
- restoring carer-related entitlements;
- helping with a new DLA application for a younger child whose needs had increased;
- securing emergency support through the Household Support Fund for food, fuel and household essentials.

This case illustrates how families with disabled children can be pushed into crisis by administrative and assessment processes within the benefits system. It also demonstrates the value of early, specialist advice in preventing deeper hardship and helping families navigate complex systems.



Note: To protect anonymity and confidentiality, this image is of a model and is not intended to represent the individual described in the case study.

Bigger picture

What can we learn about attempting system change more broadly?

The Early Years project in North Lancashire reported substantial benefits for families, improved referral pathways, increased the capability of partner organisations, generated influential local evidence, and strengthened local networks. However, findings from the project also show that achieving deeper structural change requires longer timeframes, sustained resources and continued collaboration beyond the life of a single pilot. This section explores what we can learn from this about attempting similar projects.

Direct service delivery creates a unique evidence base for systems change

The project shows how advisers are able to spot recurring failures that may not be visible through aggregate data alone, such as benefit transition gaps, incorrect decision-making, missed entitlements, and the practical impacts of policies such as the two-child limit and childcare reimbursement arrangements. These case-level insights provided the foundation for lived experience research, campaigning, stakeholder engagement and local policy discussions. More information about this can be found here: https://www.northlancashirecab.org.uk/assets/child-poverty-in-lancaster-and-morecambe-a-report-by-ellie-curry-(1).pdf

Trust, relationships and visibility are critical mechanisms for change

Many families facing hardship were reluctant to engage initially, particularly where services were perceived to be temporary or unfamiliar. Engagement improved through sustained presence in community settings, personalised support, continuity of adviser relationships and word-of-mouth recommendations from other parents.

This suggests that systems change is not only about structures and processes; it also depends on relationships and trust. Pilots need sufficient time to build both.

Some system change interventions are easier to embed than others

The project highlights an important distinction. Practical, process-based changes—such as referral pathway improvements and staff training—were relatively easy to adopt and sustain because they fitted within existing organisational workflows. By contrast, activities that relied on ongoing relationship-building, community engagement, lived experience involvement and influencing wider policy required sustained capacity and longer timeframes. In the future, projects could benefit from distinguishing between interventions that can be institutionalised quickly and those that require longer-term investment to mature.

Lived experience is most valuable when it adds depth to existing knowledge

While the lived experience work did not uncover an entirely new set of problems (it largely confirmed what advisers were already seeing: debt, income shocks and benefit system failures were key drivers of hardship), its value was in providing richer insight into how these issues affected families' daily lives and in strengthening the evidence base for advocacy and stakeholder engagement. This suggests that lived experience should not necessarily be judged by whether it generates new findings, but by how it humanises, validates and strengthens understanding of known issues.



Lived experience validated the model – but shifted the emphasis

While the lived experience work did not lead to any radical changes to the approach, it did deepen and sharpen it. The team learned that delay in seeking advice is often emotional rather than informational; shame, fatalism, and past disappointment are major system barriers; and people do not lack advice but lack hope that advice will work.

These lessons suggest future projects should focus not only on access but on rebuilding trust in help, with messaging, tone, and mode of engagement positioned as being as important as availability. Preventative advice should feel normal, non-judgemental, and proportionate (not “only for crisis”). This includes a shift in narrative from “why don’t people come earlier?” to “what has experience taught them about whether it’s worth coming at all?”

Successful systems change is not the same as sustaining a project

The North Lancashire pilot highlights the importance of distinguishing between sustaining an intervention and sustaining its impact. Many of the improvements in referral quality, partner capability, community relationships and lived experience work were still developing when funding ended. Additional time and resources would undoubtedly have enabled the project to build further on these foundations.

However, several of the project's most successful elements have been successfully been absorbed into wider organisational practice, including improved referral systems, strengthened partnerships, the Advice First Aid training programme, and increased use of lived experience to inform service design.

Rather than viewing the short nature of pilot projects solely as a sustainability challenge, these lessons teach us that pilots can create lasting change when successful approaches, tools and ways of working become embedded within existing systems.

Supporting young families

What can we learn about how best to support pregnant women and young families?

What worked well?

Perhaps the clearest lesson from the Early Years project is that young families experiencing poverty are not simply "hard to reach"; they are often hard to engage because the daily realities of pregnancy, childcare, disability, debt, housing insecurity and financial crisis leave little capacity for navigating complex support systems. What appears to have worked best was not outreach alone, but a combination of:

- trusted relationships
- flexible access
- practical adaptations for children
- intensive specialist casework
- holistic support addressing multiple problems at once
- and support delivered through organisations families already knew and trusted.

Flexible, relationship-based support was particularly important

The project found that families were missing substantial entitlements, struggling with benefit transitions, or receiving incorrect decisions. Many clients were also dealing with multiple overlapping pressures simultaneously. Young families benefited from intensive one-to-one support, continuity with the same adviser, and advice tailored to their individual circumstances over time. The growing number of repeat clients suggests families trusted the service and returned when new issues arose. Advisers' ability to adapt communication and work at the client's pace was a significant strength.

Multiple access routes reduced barriers

Parents of babies and very young children often cannot engage with services in conventional ways. The project's use of telephone, email, home visits, office appointments and community outreach gave families different ways to seek support. Project staff noted that clients valued the service being easy to access, and referrals increasingly came through trusted local networks and word of mouth from other parents

Creating a family-friendly environment mattered

One of the clearest practical lessons relates to the realities of caring for young children. The project recognised that babies and toddlers can make appointments difficult and responded by creating a child-friendly interview room with toys and installing baby changing facilities. This was specifically intended to make engagement easier for parents and remove practical barriers to participation

Holistic advice matched the reality of family lives

Families rarely presented with a single issue. Debt, benefits, housing, food insecurity, family relationships and disability-related issues were often interconnected.
The project's holistic model worked well because it addressed these issues together.



What did not work well?

The demands of caring for young children frequently disrupted engagement

Looking after babies and young children often made it difficult for parents to engage consistently with advice services. Appointments, paperwork, follow-up actions and ongoing casework could be difficult to prioritise when families were already stretched. This suggests that traditional service models expecting clients to drive the process themselves may be less effective for parents with very young children.

The lived experience work also found it difficult to secure engagement through nurseries and some other childcare settings. This suggests that services cannot assume parents of young children have the time, capacity or motivation to participate in research or engagement activities without significant relationship-building.

Certain parents may have been more responsive to relatable staff

The male community adviser on the project felt some of the largely female target group may have found him less relatable as a young man without children. When he left, he was replaced by a female adviser with children. While it is unclear how this change may have impacted interest, it raises an important consideration: for parents of young children, perceived shared experience and relatability may influence engagement.

What next?

Although the dedicated Early Years pilot ended at the conclusion of the funding period, Citizens Advice North Lancashire has embedded several elements into its wider practice, most notably the revised referral process, strengthened community partnerships, and the highly successful Advice First Aid training programme.
The organisation also intends to build on the pilot's lived experience and policy work, while recognising that the loss of dedicated funding and specialist capacity limits the extent to which the full model can be sustained.

The partnership between Citizens Advice North Lancashire and Morecambe Bay Foodbank has also created a lasting legacy through stronger referral pathways, ongoing links between advice and food bank services, and a shared commitment to understanding and addressing the underlying causes of hardship through lived experience and early intervention



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