“How do I make something out of nothing?”: Universal Credit, precarity & mental health

A Covid Realities Rapid-Response Report, May 2021

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Headline Findings

Analysis of statistical data on Universal Credit claims by Local Authorities in England between 2013 and 2020 shows a rise in antidepressant prescribing in areas where more people are claiming Universal Credit. Whilst Universal Credit itself is likely not the only reason behind this, it potentially indicates the increased levels of psychological distress experienced amongst claimants.

In a separate analysis of Covid Realities diary entries, low-income parents and carers reported experiences of stress, anxiety and low mood associated with claiming Universal Credit, which are connected to financial insecurity and the overall inadequacy of payments. Significantly, many of the parents in Covid Realities are having to manage the general insecurity that the pandemic creates for us all, but also additional layers of insecurity caused by their poverty and social security receipt, with perhaps inevitable negative impacts on mental health.

Taken together, this evidence points to a need for concerted action to improve the support that people receive through the social security system, including the adequacy, consistency, and security of benefit payments. This needs to be part of a wider ambition to ensure policies and practices promote good mental health and do not exacerbate psychological distress.

Introduction

Prior to Covid-19, widespread concern already existed about the rising number of people in the UK population who reported experiencing mental health problems. Unsurprisingly, the pandemic has increased this number further (Royal College of Psychiatrists, 2021; NatCen 2021). In the UK, around a quarter of people experience a mental health problem each year, but not everyone is equally at risk (Mind, 2020; Rogers and Pilgrim, 2010). Children and adults living in the most deprived fifth of households are two to three times more likely to develop mental health problems than those with the highest incomes (Mental Health Foundation, 2021; Marmot et al., 2010).

The available evidence shows clear links between reducing or limiting social security payments and worsening mental health, directly feeding into an increase in mental health inequalities at the population level, particularly for vulnerable groups (Simpson et al., 2021). Recent reforms to the UK social security system have been implicated in negative mental health outcomes through mechanisms such as increased conditionality, stigmatising narratives about claimants and changes to assessment processes (see for example, Barr et al., 2015; Dwyer et al, 2018; Pybus et al., 2021), all of which may increase the precarity and stress associated with being in receipt of social security payments. Universal Credit, in particular, has been associated with indicators of hardship such as food insecurity (Trussell Trust, 2019; Power et al., 2021) and with psychological distress (Wickham et al., 2020).

In the context of Covid-19, with a rising number of people requiring access to the social security system, there is a clear and pressing need to understand how experiences of claiming Universal Credit impact on mental health. A recent report by NatCen (2021) found that during the strictest lockdowns in the UK mental ill health increased, and that the largest increases were observed among individuals with the weakest financial position at the onset of the pandemic, who then needed higher levels of financial support as lockdown and the pandemic continued.

Against this background, this Covid Realities rapid response report focuses on Universal Credit, mental health, and the implications for families living on a low income during the pandemic. It merges qualitative evidence from the Covid Realities research programme with new statistical analysis of the relationship between antidepressant use and the rollout of Universal Credit.

About the research

Covid Realities is a major research collaboration between the Universities of York and Birmingham, working in partnership with Child Poverty Action Group. The programme is funded by the Nuffield Foundation, as part of their rapid-response to Covid-19. Since May 2020, the Covid Realities research team has been working in partnership with parents and carers to document the experiences of families living on a low income during the pandemic.

Covid Realities is designed so that parents and carers can share their experiences in a number of ways including online diaries, discussion groups, a 'Big Question of the week', posed by participants and the research team, and by using arts-based methods. Over the past year, we have been working with over 100 parents and carers from across the UK in this way, with the fieldwork stage currently due to run until July 2021. You can find out more about the research here. This participatory work is one element of the broader research programme, which also encompasses research synthesis activities, economic modelling, and a tracking of the social security response to the pandemic.

To explore links between Universal Credit and mental health, we set out key themes highlighted by parents and carers contributing to Covid Realities and contextualise these findings with data on the relationship between Universal Credit and antidepressant use, as one indicator of psychological distress. You can read more about our analytical approach in the Methodological Note at the end of this briefing.

Key findings

Universal Credit and Antidepressant Prescriptions

With one-in-four people already experiencing mental health problems (Mind, 2020), the UK arguably entered the pandemic in poor mental health. But - as already emphasised - vulnerability to mental (ill) health can depend on income, with poverty and changes to social security causally linked to poor mental health for both children and adults (Cooper and Stewart, 2015; 2017). For this report, new analysis has been conducted, which shows that between 2013 and 2020 there has been a rise in antidepressant prescribing linked with more people claiming Universal Credit. That is for every 1% increase in people claiming Universal Credit there is a 5.6% (95%CI 4.78, 6.52) increase in antidepressant prescriptions across Local Authorities in England, after accounting for each areas Index of Multiple Deprivation 2015 score, ranked between 1, least deprived and 5 most deprived.[1]

Whilst this analysis cannot suggest that Universal Credit alone is the cause of increased antidepressant prescriptions, it shows that antidepressant use has gone up in places where more people have moved on to Universal Credit between 2013 and 2020, after accounting for other indicators of deprivation that are associated with poorer mental health. This suggests that people in receipt of Universal Credit may be vulnerable to experiencing psychological distress, for which some people may be prescribed antidepressants.

Further analysis highlights that rates of claims for Universal Credit are higher in more deprived Local Authority areas. Figure 1 (see below and Appendix 1) shows the claimant rates between the least deprived and most deprived 20% of local authorities in England. Even before the pandemic there were more people moving on to Universal Credit in more deprived Local Authorities compared to least deprived Local Authorities. Further analysis is needed to understand the drivers of this difference which could reflect for example, higher unemployment, lower earnings, or the rollout of Universal Credit both in terms of areas and factors associated with natural migration from legacy benefits through changes in personal and living circumstances. Figure 1 shows the sharp rise in people on Universal Credit in 2020 as a result of the pandemic and lockdown, however this rise is much flatter in the least deprived local authorities. By the last quarter of 2020 there was an average of 8 percent of people on Universal Credit (ranging between 6.55 and 11.30%) in the least deprived local authorities, and 18% in the most deprived (ranging between 12.64 and 25.66%).

This leaves open the possibility that mental health and support services in these areas may experience higher levels of need linked with Universal Credit. This is of particular concern as in recent years these areas have already witnessed higher levels of service use than less deprived areas, as well as being affected by increased budget cuts that

[1] The Index of Multiple Deprivation is recorded for each Local Authority and includes measures of employment, income, health deprivation and disability, education and skills training, crime, barriers to housing and services and living environment (Ministry of Housing, Communities and Local Government, 2015).

have disproportionately impacted them in comparison to more affluent areas (Barr, Taylor-Robinson and Whitehead, 2019). Given that the number of Universal Credit claims has more or less doubled over the past year (Department for Work and Pensions, 2021), this may suggest urgent action is required by policymakers.

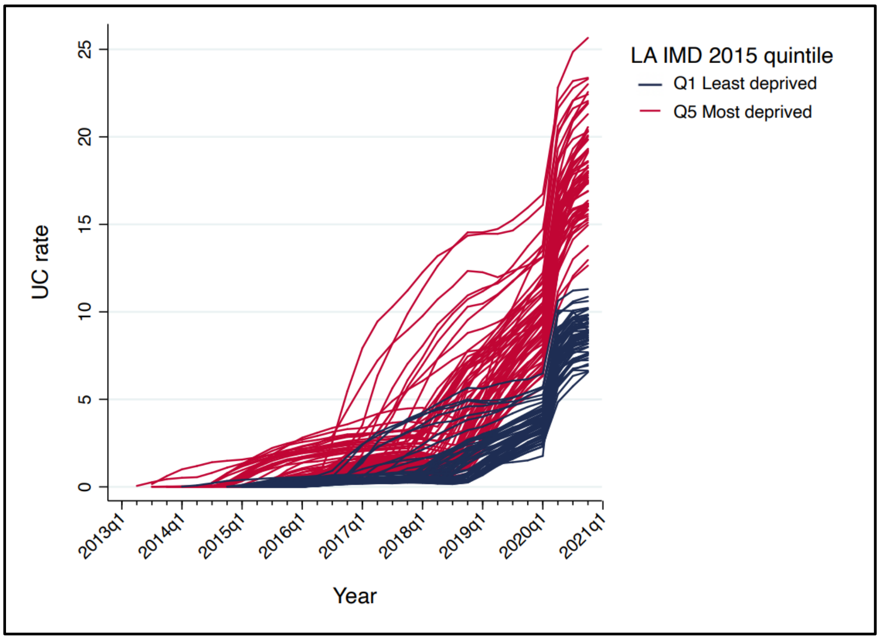

Figure 1. UC rate (universal credit rate, measured as people on UC, as a proportion of the working age population (people aged 16-64) for each Local Authority (UC data obtained by DWP Stat-Xplore) by the top 20% least deprived local authorities and the bottom 20% deprived local authorities over time. This has been presented for each quarter between 2013 and 2020.

What this new evidence shows is that there is a clear association between Universal Credit implementation and mental ill health. This corroborates and extends previous findings from other research (NatCen 2021, Wickham 2020). This association was recorded at the start of the pandemic and creates a strong case for further exploration of experiences of claiming Universal Credit and mental (ill) health. Through the Covid realities research programme we have been able to do just this, with a wealth of data generated regarding experiences of claiming Universal Credit and how these experiences impacted on mental health. Findings from this data are shared in the following sections, which further explore the mental health implications for families as we move beyond the immediate pandemic.

First, though, it is important to briefly set out the changes to Universal Credit made in response to the pandemic and against a context in which the number of claimants was rapidly escalating.

Universal Credit in Covid Times: uplifts and temporary changes

The economic shock caused by the pandemic led to a sharp and dramatic rise in the number of Universal Credit claimants, with case numbers almost doubling between April and June 2020 (see DWP, 2020). The Department for Work & Pensions infrastructure held up impressively well to this massive volume of claims, which were processed speedily, and in tandem with the civil service having to pivot to home working.

The most significant change made to Universal Credit in response to the pandemic was the decision to introduce a £20 temporary uplift to the benefit. This was due to expire in April 2021. However, after sustained campaigning (see for example, JRF 2020), it has been extended, but only until September 2021 (HM Government, 2021), leaving a potential financial cliff edge on the horizon for the six million Universal Credit claimants (Patrick et al, 2021).

Other notable policy changes that it is important to flag were the decision to (again temporarily) suspend the minimum income floor for Universal Credit, an increase in Local Housing Allowance rates, and a temporary suspension in conditionality and sanctions (Harris et al, 2020).

The recovery of debt deductions for historical debt was also temporarily suspended, but it is notable that this - at no - stage included the recovery of advance payments, which are regularly taken out during the five-week wait for a first Universal Credit payment (Harris et al, 2020). It is further notable that the five-week wait has endured across the pandemic, and there has been little obvious appetite for wider structural reforms to Universal Credit at this time.

Precarious and inadequate payments

Parents and carers participating in Covid Realities reported feeling worried and anxious as a result of trying to get by on the income provided by Universal Credit. Before Covid-19, payments were not adequate for covering basic living costs, with particular issues identified around the wait for a first payment (Joseph Rowntree Foundation, 2020a; Child Poverty Action Group, 2021). Advance Payments are available during this period but come in the form of debt - resulting in deductions that diminish Universal Credit payments once the five-week wait is over. During the pandemic, costs increased for some families as a result of being at home more of the time, having to entertain children, and struggling to access informal forms of support.

Tied to this, parents reported rising heating, food and schooling expenses (Brewer and Patrick, 2021), leading to further precarity. In this context, the temporary £20 uplift to Universal Credit announced in April 2020 often did not do enough to absorb any extra costs that came along as part of daily life (Power et al., 2020) and this impacted further on mental health. The costs of school uniforms hit family budgets hard (Page, Power and Patrick 2021), for example, and winter was a source of dread as it brought with it the prospect of additional heating bills and costly time indoors. Christmas - and going without the 'normal' family experiences shared by so many - was a real source of worry for parents, who wanted their children to have a share in the celebrations as Lexie G describes:

> *Feeling anxious and worried that Christmas is going to be a whitewash this year. The kids don't have a lot, I've not got any "Christmas" food/treats in and to be honest my mental*

health is suffering. How do I make something out of nothing? **(Lexie G, married mother of four children, Wales)**

Charlotte P described similar difficulties, all the more acute because she could contrast her struggles on Universal Credit with previous experiences of managing Christmas on legacy benefits:

> *It's that time of year again when I worry sick about providing a decent Christmas for my children on Universal Credit. While toys are not an essential thing, children do not know that. I used to be able to survive better and budget better on income support* **(Charlotte P, lone mother of two, Northern Ireland)**

With Universal Credit providing barely enough to survive on, even without additional costs, the wait for the next payment could induce stress and fear:

> *In my head I'm counting down 18 days til I get paid again. Waiting for Universal Credit is scary.* **(Holly W, lone mother of two, North East England)**

Alongside stress and anxiety caused by trying to get by on the payments provided by Universal Credit, parents and carers described the impact of the whole process on their mood and self-esteem:

> *Feeling very low. This whole Universal Credit thing I felt I was forced into has got me rock bottom. Having had a heart attack in January this year the anxiety and sometimes chest pains are really on my mind, is this situation going to push me to the edge?* **(Callen R, lone father of two, North East England)**

For Aurora, Universal Credit represented a persistent struggle to survive. A widow, she associated debt deductions with the time during which her husband had been dying; the income they now received was both capped, and consumed almost entirely by her rent, leaving her unable to survive financially without help from friends and family:

> *We are capped on UC. I'm a widowed parent of two primary aged children. Our rent alone is over 95 percent of our total benefits. I have not been able to find work which fits around the children's school times. On top of it all, this month the government has taken money to pay for previous benefit overpayments (made when my late husband was dying). Our situation is precarious, we struggle enormously and have done for many reasons. I feel like an utter failure.* **(Aurora T, widowed mother of two, London)**

Looking for work

As the pandemic took hold across the UK in March 2020 and a national lockdown was implemented, requirements to look for work and other forms of conditionality such as sanctions were paused, providing welcome temporary relief for claimants. The UK Government promised the reintroduction of conditionality in July 2020 would be 'light touch', and broader evidence from welfare rights advisors suggests this may be the case (CPAG, 2020). This approach was the right one given the pressures families were already under, the continuation of stay-at-home restrictions for some parts of the UK, and the broader economic effects of Covid-19 on the job market.

Evidence from Covid Realities suggests however that for those parents and carers subject to work search requirements, the presence of conditionality led to added precarity. When coupled with the need to home-school and care for children, single parents with young children were particularly affected. For Andrea N, a difficult situation was compounded by telephone contact that she found both hostile, and unhelpful:

I was shocked to receive a phone call from Medical Assessors from Universal Credit on Friday. The man who called me was very curt and very aggressive in his demeanour. He basically threatened that my money was going to be stopped if I didn't show signs of getting a job. I asked him quite nicely about what the government was implementing to help single parents to homeschool but also look for jobs and child care. He basically told me he was the messenger and that another call would come next week and then they would make decisions about my Universal Credit. I'm terrified. **(Andrea N, lone mother of two, Northern Ireland)**

For Holly, the difficulties were exacerbated by her situation at home - without internet and with two young children to look after, she was expected to meet requirements for job searching that were not feasible under the circumstances. The penalty for failing to meet these could be the loss of all income:

I am currently being forced to look for work and to show evidence of looking 'online' for work for over 20 hours a week. With no wifi and having to pay for data I am unsure of how that is physically possible. I am also expected to homeschool my 6 year old 3 days every week and my daughter 2 weeks in every month. I cannot see how a job will work. The pressure is immense and there's the threat of UC stopping payments. It's a shambles and children already are becoming poverty stricken at present and this stress just adds to this. **(Holly W, lone mother of two, North East England)**

Moving to Universal Credit and the Five Week Wait

The initial assessment period is a continued source of fear and anxiety for Universal Credit claimants, driven predominantly by financial insecurity and despite calls from campaigners, has continued throughout the pandemic - pushing some households into debt and hardship (Turn2Us, 2020; Trussell Trust, 2020). Parents often did not have the resources in reserve to manage this period without any financial support, as Minnie describes:

Feeling stressed…Main worry right now is money. Moved from tax credits to Universal Credit on 30/06/20. I didn't have any savings, so the current waiting time to be processed is scary with no money. **(Minnie T, single mother of two, South East England)**

Families were left with the prospect of trying to cope with what little they had until Universal Credit payments arrived, or by taking on more debt. Either way, this period was highly stressful. Lexie G, a disabled mother of four, was determined to avoid taking on an advance payment that would see even more deducted from her payments once they arrived; but trying to survive on nothing but Child Benefit created even more financial difficulty:

For the last few weeks we have lived on £68 child benefit a week. Due to this we are now in lots of debt, rent, council tax, even HMRC have sent a letter saying we have been overpaid so we owe them money. We were told that we could apply for a UC loan but that would just be another debt. It's been horrific from one day to the next worrying if we will make it!! **(Lexie G, married mother of four, Wales)**

Georgie found herself thrown into poverty and bartering with utility companies to manage the assessment period. As she describes, she found this really difficult, and an additional blow to her mental health at an already-difficult time:

When I moved onto Universal Credit and I had no money for four plus weeks. I had to cut all my bills and outgoings ASAP. I had to call around and tell every company why I had to do this and how much I will pay back once I get my money through. As you can imagine all the companies wanted me to pay more than I could afford so I had to put my foot down and say *they will only get what I can afford each month. This was not only embarrassing but I was forced to be very confrontational which in turn affects your state of mind when it is already in a bad place.* **(Georgie O, lone mother of two North East England)**

Notably, even the anticipation of the initial assessment period was a source of anxiety for parents and carers who expected to transition to Universal Credit in the future. Nicole T, for example, wrote of her anxiety:

I am not on Universal Credit yet. I am nervous about changing over onto it as I hear that there is a 5 week wait and somehow people are financially worse off… It's difficult as it is as benefits all come in at different times of the month. My worst fear is owing rent and being threatened with homelessness again. **(Nicole T, lone mother of one, Scotland)**

The 'choice' between subsisting on already limited reserves or taking on more debt via advance payments whilst waiting for the first UC payment to arrive was, understandably, anxiety-inducing.

The £20 uplift: adequacy and uncertainty

Rather than providing any surplus income, the £20 uplift received by households claiming Universal Credit or Working Tax Credits in April 2020 has simply helped families to cover some pre-existing costs and made a small contribution to meeting additional expenses many families experienced (Power et al., 2020). From Covid Realities diarists, there was little sense that the uplift brought payments up to a level adequate to cover the costs of daily living. Additional expenses remained unmanageable, and so anxiety rooted in precariousness persisted, as Winter O reports:

The proposed change [removing £20 uplift] is the difference between paying our bills and not being able to pay some of them. And if one off expenses crop up (like new shoes for kids etc) then you can't cover it. Any changes to benefits are very stressful. **(Winter O, partnered mother of two, South East)**

At time of writing, the £20 uplift will be removed in September 2021; whether or not there are plans to extend beyond this date remains unclear. The uncertainty of whether these much-needed payments will be extended remains a source of continued stress:

I am struggling to cope with all the issues I'm facing involving the money that will be taken away. If they chose to take the £20 a week away, I already get less money than I was getting on legacy benefits and it's very tough already. I don't think I'll manage very well if the money is reduced **(Enzo J, lone mother of one, South England)**

The temporary extension of the uplift suspends Universal Credit claimants in a permanent sense of insecurity, which leaves them unclear and uncertain about how they will manage when (or indeed if) it comes to an end.

Recommendations for change

Britain entered the pandemic with a quarter of adults already experiencing mental health problems (Mind, 2020). We also entered the pandemic with a social security system in poor shape (Garnham, 2020); ill-equipped to provide adequate security at any time, and so inevitably ill equipped to support families during the extraordinary times of the pandemic.

What the evidence documented here illustrates is the need to act to improve the mental health of families living in poverty, but also - and equally ambitiously - to look at the protective role social security could and should play in preventing hardship; and so, improving the nation's mental health.

Whilst we cannot say definitely from this evidence that Universal Credit *causes* higher rates of antidepressant prescriptions, it should highlight to policy makers and those administering the social security system that claimants may be at a time in their lives where they are vulnerable to psychological distress. Moreover, the evidence presented here does corroborate findings from other research that explicitly describes the causal relationship between Universal Credit and mental (ill) health (e.g. Wickham, 2020). The experiences of Covid Realities contributors outlined here demonstrate that some of the ways in which Universal Credit operates may be in and of itself harmful to mental health. Inadequate levels of payments and uncertainty about the continuation of the £20 uplift, coupled with the financial precarity associated with the five-week wait and conditionality, at a time when families have already experienced wider uncertainty as a result of the pandemic, each created additional stress and anxiety, as well as impacting on mood. These issues need to be addressed if we are to prevent cumulative and damaging impacts on mental health both at the individual and potentially at the population level.

Michael Marmot recently called for increases to benefits in order to try and prevent what he described as the UK's growing mental health crisis. We would support this call, which is echoed in our discussions with parents and carers living on a low-income. In a Big Ideas discussion group[2] meeting with parents and carers we explored whether we should prioritise policy recommendations from wider research on mental health support or social security specifically. Parents' response was very clear and unanimous: *'improve social security payments and processes and you'll go far to improving our mental health'.*

With this in mind and drawing on further detailed discussions with parents and carers through Covid Realities, we call for a real focus on benefit adequacy and on processes that can improve the security that is provided through benefits, such as regular payments and consistent levels of support. The £20 uplift to Universal Credit should be made permanent as a first step to a longer-term process focused on improving our social security social settlement. There is a linked need to improve the support that families living with dependent children receive, which can be actioned through support via Child Benefit or increased child allowances within UC and Tax Credits. The removal of the two-child limit and lifting of the Benefit Cap, would also immediately direct more financial support to families with dependent children.

Parents and carers in Covid Realities have also repeatedly argued that the language around people who are in receipt of social security payments needs to change. This means challenging negative stereotypes and narratives about social security claimants, making sure people are valued and, most importantly of all, ensuring that people with experience of living on a low income are part of the conversation about what needs to

[2] Big ideas groups are a regular series of virtual participatory discussion groups held with parents and carers as part of Covid Realities.

change and why. Doing so is required if we are to establish a social security system that prioritises the wellbeing of users and helps to break the harmful links between poverty and mental ill health, for both children and adults alike.

Social security, properly conceptualised and resourced, could be a key building block in improving our nation's mental health. As we emerge from the pandemic, we need to make some bold decisions on social security, as part of broader action to improve all of our mental health and wellbeing.

About this report

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Methodological Note

Qualitative Data

The nature of Covid Realities means that the findings presented here draw on parents' and carers' own words. The language they use may include terms such as 'anxiety' without meaning they have been diagnosed with, or were receiving treatment for, a clinical condition. This report consequently presents a richer, experiential picture of mental health and illness rooted in everyday life of families on a low income - some of which may also meet clinical or diagnostic criteria.

This rapid response report draws on diary entries and responses to our 'Big Question of the Week', a regular series of questions focusing on different topic areas of interest, in this case understanding the impact of Universal Credit on mental health for parents and carers living on a low-income. We explored our data to find instances where participants had either a) discussed Universal Credit explicitly or b) discussed their income or benefits where we knew the person was a Universal Credit claimant, and had also mentioned their mental health or emotional state. We looked for both positive and negative mental health outcomes in our data when drawing together this report.

Quantitative Data

Universal credit (UC) data was taken at Local Authority level from the DWP Stat-Xplore tool, coded as "people on universal credit". This is defined as an individual who has completed the Universal Credit claim process and accepted their claimant commitment, and who has not had a closure of their claim recorded for this spell, up to the 'count date' (second Thursday in each month).

Antidepressant data was obtained from the Place Based Longitudinal Data Resource[3] which measures the number of antidepressants that are prescribed on a quarterly basis by all practices in England, including GP practices. Numbers are given for the average daily quantity of antidepressants (ADQ) across areas of England.

We linked the UC data with antidepressant data based on Local Authorities and averaged UC count for each quarter of the year to match the antidepressant data. We also linked each local authority with their Index of Multiple Deprivation 2015 quintile scores, obtained from the Ministry of Housing Communities and Local Government[4]. Universal Credit rate is taken as the number of people on UC within a Local Authority (LA) as a proportion of the working age population of that LA.

[3] https://pldr.org/dataset/emyye/prescribing-indicators-antidepressants-p_1_07
[4] https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015

APPENDIX 1

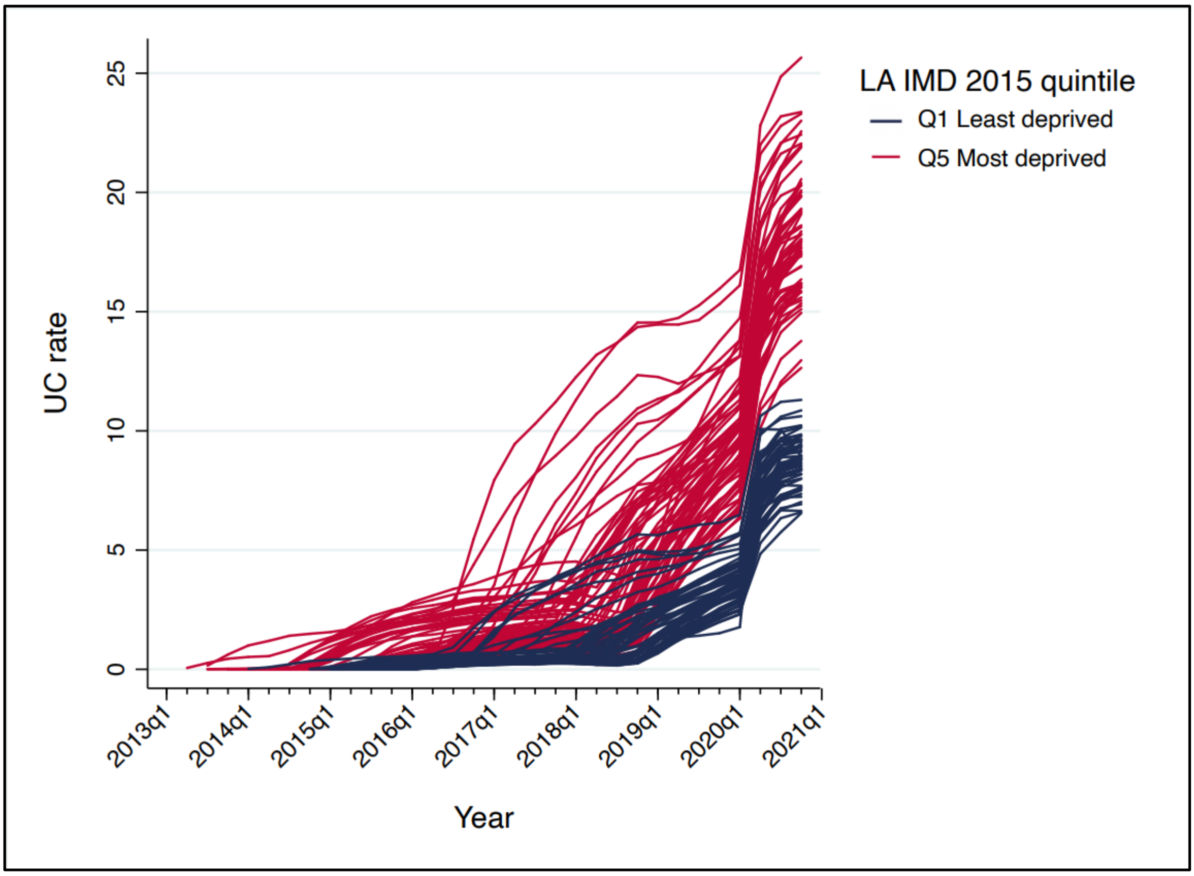

Figure 1. UC rate (universal credit rate, measured as people on UC, as a proportion of the working age population (people aged 16-64) for each Local Authority (UC data obtained by DWP Stat-Xplore) by the top 20% least deprived local authorities and the bottom 20% deprived local authorities over time. This has been presented for each quarter between 2013 and 2020.