

Midwives', health visitors', family nurse practitioners' and women's experiences of the NHS Grampian's Financial Inclusion Pathway in practice: a qualitative investigation of early implementation and impact.

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Although only one of the authors is named in the paper, the other authors listed in the citation are known to have been involved.

Study Briefing Paper: Midwives', health visitors', family nurse practitioners' and women's experiences of the NHS Grampian's Financial Inclusion Pathway in practice: A qualitative investigation of early implementation and impact October 2022

Background

In Scotland, as an integral part of the Child Poverty Act (2017), all health boards and local authorities must produce and implement Local Child Poverty Action Plans to contribute to a multi-level effort aimed at alleviating child poverty nationwide. As an aspect of those Plans, midwives, health visitors and family nurses are asked to identify and offer a referral to agencies and local services for help to increase household incomes, to all families with children under five at risk of financial hardship. The so-called Financial Inclusion Pathway (the FI Pathway) is one of a range of strategies outlined in NHS Grampian's Child Poverty Action Plan.

Research aims and purpose

A qualitative study took place to establish how this FI Pathway intervention was operating and impacting on both the clinical practice of those health professionals concerned with delivering it and, the experiences of benefit gained from it for parents and children living in Grampian affected by financial hardship. The study was funded by an NHS Grampian Endowments grant and data collection took place between April and August 2021.

What we found

Health Professionals

- Health visitors and family nurses believed they had legitimate role within their scope of practice to talk about financial challenges with clients and signpost to services. Family nurses' role involves working with highly vulnerable young parents and those participants viewed conversations about financial challenges to be a foundational aspect of their work with their clients. Midwives were more likely to say they didn't enough time or knowledge of services or benefit entitlements to undertake this work within their practice.
- Awareness, concern, and sensitivity about the existence of poverty within caseloads was evident, as was nuanced understanding about the risks to some parents, as well as the benefits of raising financial matters during routine consultations. Health visitors and midwives reported lacking confidence they could always recognise if a parent was struggling with financial hardship, and some were inhibited from raising the issue due to anxieties about poverty stigma.
- Other concerns raised included being out of date or unaware of current benefit entitlements, and, about the location and availability of local income maximisation services to refer to. Some also lacked confidence in those services' ability to deliver the necessary help needed by families, in a timely manner.
- Participants also raised concerns about 'newly poor' parents in Grampian due to the fallout from the COVID pandemic and the current cost of living crisis. Those concerns centred on being, unaware of their entitlements, or, willing to engage with the benefits system to get the help they need.
- Health visitors and midwives reported having less time than was needed to support resource-poor clients with the challenges of navigating national and local services and gain benefits from them. Some participants expressed moral distress related to this dilemma and therefore, raising financial issues within routine clinical care for some health professionals can be challenging 'emotional labour', in the context of demanding professional caseloads.

Parent Findings

- Insufficient household income, restricted access to paid employment due to childcare costs, debt-caused-by-deductions and, anxieties around food and other resource provisioning for their children, remain significant challenges for lone parents and families on low incomes in Grampian.
- Health visitors and family nurse partnership practitioners were viewed of as good sources of help and support regarding financial challenges.
- Parents were less clear about midwives' role in terms of their experiences of midwives providing advice but thought midwives should talk about financial issues and raise awareness about benefits entitlement as early as possible in pregnancy or early childbirth.
- However, anxieties related to possible repercussions about disclosing financial difficulties to health professionals were also evident.
- Fear of flagging child protection concerns with authority figures, shame and embarrassment associated with being known to be poor and therefore ...a 'bad parent', and, exacerbating partner abuse were highlighted as barriers to disclosing financial hardship and food insecurity to health professionals.
- Establishing trust and rapport, careful and sensitive enquiry, positive framing of income maximisation (by health professionals) and carer continuity were perceived to aid discussions aimed at income maximisation.

Overall Conclusions and Recommendations

These findings are important considering Scottish Government 2022-2026 Local Child Poverty Delivery Plan and the current cost of living crisis, as they point to ongoing economic, nutritional, and social vulnerability of young parents and their children.

While parents and health professionals believed there were benefits to be gained from the FI Pathway concept, there was a mixed picture regarding referral outcomes, including the extent to which referrals were taken up by clients, and, the amount of income gained from any such referral.

A series of recommendations were co-produced by the research team and members of the research steering committee. Those recommendations focus on the **organisational support needed** by midwives and early years health professionals to deliver the FI Pathway, their **related training needs** to enable effective income maximisation conversations and advice provision that minimises associated parental risks, and **parent-focused recommendations** that can help i. de-stigmatise claiming benefits amongst parents, ii. encourage the uptake of referrals to income maximisation agencies, and iii. support parents suffering financial hardship who have no obvious means of increasing their income.

There were also a range of questions about longer term impacts and outcomes related to the FI Pathway in terms of its income maximisation aim, and concerns and questions arising about income-driven maternal and infant food security.

An executive summary and the full report can be obtained at <https://rgu-repository.worktribe.com/output/1783383> For more details about the study and its findings please email Flora Douglas at f.douglas3@rgu.ac.uk