

Healthy

Legal Advice

Findings from
an opinion poll of GPs

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LAG
the access to
justice charity

About LAG

The Legal Action Group (LAG) promotes access to justice as a fundamental democratic right. We are a national charity that is independent of the providers and funders of legal services. We seek to represent the interests of the public, particularly the vulnerable and socially excluded, in improving legal services, the law and the administration of justice.

LAG also undertakes policy research on access to justice issues, particularly the public funding, quality and availability of legal services to the public. Through our publications and training courses for lawyers and advisors, LAG seeks to increase the quality and availability of legal advice. We are self-financing: our publishing and educational activities provide most of our income.

LAG would like to thank

- The Law Society of England and Wales for their financial support for this research.
- ComRes for undertaking the opinion polling.

The report was written by Steve Hynes, Director of LAG with additional research by James Sandbach, Campaigns and Research Manager, Low Commission.

The Low Commission, jointly with the Advice Services Alliance, is undertaking further research on the links between Health and Advice.

Healthy Legal Advice

In this report 'SWL' refers to the law relating to benefits, debt/financial problems, employment, housing, community care and immigration.

This research represents a first step in exploring the impact of recent reductions in social welfare law provision for health services on patient care. Feedback from GPs via opinion polling provides the baseline evidence for this report, clearly indicating GPs' belief that over the last year more of their patients are in need of social welfare law (SWL) advice, and that, indeed, without it their health will suffer

In late 2012 Legal Action Group established the Low Commission¹ in response to widespread concerns about the impact of spending reductions on SWL advice and legal support services.

The main catalyst for the founding of the Low Commission was the government's decision to significantly reduce spending on legal aid services for SWL – part of wider austerity cuts, which for the health sector meant targeting costs largely arising at the stage of early advice in cases. Since April 2013 the civil legal budget for SWL services has been cut by some £89 million. Advice on benefits and employment law has been completely removed from the scope of legal aid, and support for advice on housing, debt/finances and immigration severely curtailed. Public funding for Community Care law remains intact.

In its report published in January 2014 the Low Commission estimated that at least a further £40 million will be cut from SWL services funded by local government. Both the Low Commission and LAG fear these cuts will have a knock-on damaging impact to other public services.

We believe that being denied the opportunity to obtain early advice on common, everyday legal problems is likely to cost the government – and ultimately the taxpayer – *more*, not less, because of the inevitable consequences in terms of picking up the pieces, and will mean an increase in the number of lives being blighted by injustice.

LAG has received financial support from the Law Society to conduct opinion polling and policy research on access to justice as part of its remit to research the impact of the Legal Aid Sentencing and Punishment of Offenders Act 2012 (LASPO), which introduced the relevant cuts to SWL. This report and opinion poll research forms part of this body of continuing work.

¹ 'Tackling the advice deficit', LAG 2014, www.lowcommission.org.uk/dyn/1400070415045/Low-Commission-Report-FINAL-VERSION.pdf

The links between health and social welfare law

We have evidence to suggest that timely legal or other specialist advice can lead to better health outcomes, with references to known possible links between primary healthcare and social welfare advice needs and services published across several decades of *British Medical Journals*.²

The English and Welsh Civil and Social Justice Survey, spanning 2006–2009, represents an extensive research project looking at people’s experience of civil justice problems. Over 10,000 adults responded to the survey. It found that over half (50.3%) of respondents who had experienced a legal problem suffered an adverse consequence, including physical health and stress-related illness. Of those people suffering from the health-related consequence of a legal problem, over 80% visited their GP or other health service as a result. These findings were consistent with those of an earlier survey undertaken in 2004.³

Citizens Advice, the national charity for Citizens Advice Bureaux (CABx), has led the argument for a linkage between ability to obtain advice on civil legal matters and better health outcomes. A longitudinal study undertaken by Bangor University in association with Citizens Advice Cymru showed, five years ago, significant improvements taking place at that time in health outcomes for bureau clients.⁴ In a tangible demonstration of the linkage between health and advice, local bureaux operated 640 advice surgeries at GP surgeries in 2010.⁵ Citizens Advice cites evidence to indicate that a large percentage of medical professionals believe that advice from CABx leads to better health outcomes,⁶ a link also recognised by other charities working in the health sector. MacMillan Cancer Care, for example, provides dedicated resources for welfare rights and benefits advice for cancer patients.⁷

A significant social indicator for which the greatest amount of empirical evidence has been collected to date is the relationship between indebtedness and poor mental health.⁸

This reinforces the importance of health professionals and primary care providers being able to work with debt and welfare benefit advisers to help address patients’ financial situations.

Mental ill health is the largest single cause of disability in the UK, contributing almost 23% of the overall burden of disease (compared for example to about 16% each for cancer and cardiovascular disease). The economic and social costs of mental health problems in England are estimated at around £105 billion each year.⁹

2 e.g. Jarman, B., ‘Giving advice about welfare benefits in general practice’, *British Medical Journal*, Clinical Research (1985), 290(6467): 522–4, Feb 16. Veitch, T. and Terry, A., ‘Citizens’ advice in general practice. Patients benefit from advice’, *British Medical Journal* (1993),

3 *Civil Justice in England and Wales 2009*, Legal Services Commission (2010), 37.

4 *Outcomes of a Longitudinal Study of Citizens Advice Service Clients in Wales* Karen Jones, School of Social Sciences (March 2009), Bangor University.

5 *Citizens Advice proposals for the Department of Health*, (August 2010).

6 *An overview of possible links between advice and health* (March 2012), CAB.

7 www.macmillan.org.uk/HowWeCanHelp/FinancialSupport/BenefitsAdvisers/MacBenefitsAdvisers.aspx.

8 Fitch, C., S. Hamilton, P. Bassett, R. Davey, ‘The relationship between personal debt and mental health: a systematic review’, *Mental Health Review Journal* (2011),

9 M. Knapp, McDaid, D. and Parsonage, M. (2011), *Mental health promotion and mental illness prevention: the economic case*, Department of Health, London, UK.

GP opinion poll

Just short of 11,000 GP surgeries serve local communities in the UK. At the frontline of the NHS and primary care provision, the local surgeries can offer invaluable insight into the medical and related problems their patients face.

As part of our research to quantify the impact of LASPO and other cuts in SWL services, we ran a poll of GPs, seeking their views on whether the incidence of patients who needed advice was increasing; and whether not being able to obtain advice would negatively impact their health.

To achieve this LAG commissioned the polling and research company ComRes, who assisted us in formulating two questions to put to GPs –

Q1. Over the past year, do you think that the number of your patients who would have benefited from legal or specialist advice on each of the following social welfare issues listed has increased, stayed the same or decreased?

Q2. To what extent, if at all, do you think that a patient not having access to legal or specialist advice on social welfare issues can have a negative effect on their health (e.g. causing stress, anxiety, hospitalisation or other medical intervention)?

For a week in October 2014 ComRes interviewed a sample of 1,001 GPs representing the UK regions. The data is published at Comres.co.uk.

The results



Q1. Over the past year, do you think that the number of your patients who would have benefited from legal or specialist advice on each of the following social welfare issues listed has increased, stayed the same or decreased?

Option	Increased	Stayed the same	Decreased	Don't know
Benefits (e.g. unemployment benefits, disability benefits, child benefits, housing benefits)	67%	24%	4%	5%
Debts and financial problems	65%	25%	3%	7%
Issues at work	65%	27%	3%	5%
Accessing community care	55%	34%	4%	6%
Housing problems (e.g. disputes with landlords, issues with tenants, mortgage difficulties)	54%	36%	3%	7%



Q2. To what extent, if at all, do you think that a patient not having access to legal or specialist advice on social welfare issues can have a negative effect on their health (e.g. causing stress, anxiety, hospitalisation or other medical intervention)?

To a great extent	To some extent	To a small extent	To no extent	Don't know
48%	40%	7%	2%	4%

Base: all GPs (n=1,001)

The findings show that most GPs are aware of problems their patients are facing in the area of social benefits. The GP responses reflect a feeling that patient enquiries had increased across most areas; in particular, 67% of GPs believed the number of their patients that would have benefited from legal or specialist advice about benefits had increased in the last year. This was followed closely by worries about debts/financial problems and issues at work (65% of GPs believed there had been an increase in patients who would have benefited from legal advice in this area since last year). 54% of GPs reported the numbers of patients who would have benefited from legal advice on housing problems had increased and a 55% said the same regarding community care. The area of least concern among GPs appears to be immigration law (with 30% of GPs reporting the number of patients who would have benefited from advice in this area had increased).

A total of 88% of the GPs questioned believed that patients not being able to access legal or specialist advice about their problems would have a negative impact on their health either to a great extent (48%) or to some extent (40%).

Higher numbers of GPs in urban areas reported that the number of their patients who would benefit from legal or specialist advice on the following issues has increased over the past year:

- benefits (73% versus an overall of 67%);
- immigration (41% versus 30%);
- debt and financial problems (71% versus 65%); and
- housing problems (61% versus 54%).

Healthy legal advice – some conclusions

LAG is surprised how conclusive the results of the opinion poll are.

We initiated the research because we had some limited anecdotal evidence that GPs had noticed an increase in patients who might benefit from legal or specialist advice on SWL problems. We had no idea before obtaining the results of the fieldwork just how extensively this opinion was held. GPs also clearly believe that not obtaining advice on social welfare law problems can have a negative effect on a person's health, with 48% believing that this is true to a great extent.

LAG argues that the reductions in public funding for SWL services has contributed to the increase in the number of people GPs are seeing who would benefit from legal or other specialist SWL advice. As no questions were put to the GPs on the impact of LASPO we are not saying that GPs necessarily attributed the increase in numbers of patients needing advice directly to the new law. However, it is worth noting that the government's impact assessments undertaken before LASPO entered into effect did conclude that sick and disabled people would be more adversely affected by the cuts compared with the general population.

The pre-legislative impact assessment prepared by the Ministry of Justice estimated that 54% of the client group hit by the cut to benefits advice would be ill and/or disabled.¹⁰ It is estimated that 24% of the client group needing advice on housing law would fall into this category. (Of the general population, 19% are defined as sick/disabled). It would therefore seem **reasonable to conclude that the findings of the opinion poll are a reflection of the government's own prediction of the disproportionate impact the cuts to civil legal aid SWL advice would have on sick and disabled people.**

One of the key findings of a National Audit Office report (published 20/11/14) on the reforms to civil legal aid is a need for the government to consider their impact on the wider public sector if people's SWL problems are going unresolved due to the unavailability of civil legal aid. The report also warns of adverse consequences to the health and wellbeing for people unable to obtain assistance with SWL problems.¹¹

We believe **the results of this opinion poll research adds weight to the argument that the government should re-open the issues and reinstate funding support for SWL**, either by restoring civil legal aid in relevant cases, or by implementing one of the key recommendations of the Low Commission, which is to establish a National Advice and Legal Support Fund to develop the provision of SWL in local communities.

¹⁰ *Reform of Legal Aid—Equalities Impact Assessment*, Ministry of Justice (21 June 2011), 127.

¹¹ *Implementing reforms to civil legal aid*, NAO (20 November 2014), 6.

