Scottish Leaders Forum
Action Group on Child Poverty

Learning from Local Responses to Child Poverty During the COVID Crisis

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Executive Summary

Project Aims and Method

- The COVID pandemic has had an unprecedented impact upon the income and well-being of millions of households across Scotland. The pandemic reduced the earnings of many families with children and prevented local authorities and their strategic partners from delivering all their plans to tackle child poverty.

- However, COVID also provides an unique opportunity to make significant changes to local leadership, partnership working and policy-making. In the words of one local authority official, 'I hope we have learned some lessons from COVID... I think if a pandemic doesn't change our processes or change our thinking then we've kind of lost the plot a bit!'

- The Scottish Poverty & Inequality Research Unit (SPIRU) at Glasgow Caledonian University was commissioned by the Scottish Leaders Forum to gather the views of leaders from a range of local authority areas on the challenges which COVID posed for their child poverty work and their responses to these. The project sought to identify potential lessons from the rapid shifts in policy and practice taken in response to COVID which could inform future local leadership and partnership working.

- To gather participants' views on these issues, SPIRU conducted 31 semi-structured interviews with key informants from six local authority areas across Scotland in October – November 2020. This purposive sample presents a broad range of experiences and opinions.

- A rapid review of key documents was also undertaken to identify the principal child poverty issues which faced local stakeholders before the COVID pandemic (i.e. up to March 2020).

Context Before COVID

- All those interviewed affirmed that child poverty was a priority concern for their organisation and local area before the COVID pandemic

- Participants welcomed the statutory reporting requirement introduced by the Child Poverty Act; one local authority official saying, it 'has given a focus, it's made people think about what they're doing around child poverty'.

- Several interviewees reported that many families in their area were struggling financially and could not afford sufficient food even before the COVID crisis.

- Participants identified the most significant causes of child poverty before the COVID pandemic as low paid employment and the lack of childcare to cover irregular working (e.g. evenings and weekends).

Priority Actions

- The immediate measures taken by local leaders in the initial stages of the pandemic lockdown were organising and co-ordinating support activities, providing food to vulnerable households, and supplying IT equipment to schoolchildren.
- Interviewees regarded digital inclusion to enable online education and distance learning as an imperative. Digital inclusion was also felt to be essential so that households could access other essential services, such as health care and welfare benefits. However, it was recognised that digital solutions were not straightforward fixes, and required more than providing equipment. Beyond access to technology, some households require more support to improve their digital capabilities and general literacy.
- Other than providing food, emergency support included delivering medical prescriptions, extending free school meals provision, and providing income top-ups and vouchers to low income families.
- Many local authority staff volunteered to deliver services. They joined the many voluntary and community sector organisations (VCS) helping vulnerable households.
- Some participants believed that the experience of volunteering may have alerted more people to the scale of poverty and financial difficulties many families faced.

Decision-making Processes

- The speed of events and scale of the challenge compelled organisations to streamline and accelerate decision-making. The need for urgent action meant that impediments (such as restricted data sharing) were rapidly removed. This dynamism energised many: 'We have moved quickly during COVID and we've done that because we've put risk aside and collaborated, and I think that's a really important lesson' [third sector representative].
- Improved collaboration increased service uptake among vulnerable households. One third sector representative suggested 'I hope there's a lesson to be learned: take down these barriers about preciousness of information'.
- Some of the emergency actions taken were intended to be 'good enough' rather than perfect, as 'We just had to be agile, we just had to make it work' [third sector representative].
- Front-line service providers were delegated more responsibility and discretion to take decisions. Many welcomed the opportunity to develop more rapid procedures: 'I think that sort of delegated responsibility, less bureaucracy, just cutting through, thousands of normal processes that we go through just

to make things happen: it worked. The sky didn't fall in... I'd like to hope we can learn from that' [local authority child poverty lead].

- These changes were made possible by the extraordinary conditions of the crisis, which created a clear need for urgent action. Dealing with chronic conditions in less urgent circumstances raises different challenges.

Partnership Working

- The COVID crisis improved collaboration between local partners. One local authority child poverty lead described it as 'community planning at its absolute best'. Another reported 'It was the best partnership project I've ever been in... There was no bitching and it was brilliant for the sake of the people who needed it - the end beneficiary. And that is a good thing to say. It was really, really top notch' [lived experience representative].
- This collaborative spirit was shown by the readiness to share resources and responsibilities between organisations and across sectors: 'We've seen a lot of partnerships that wouldn't have happened if it hadn't been for COVID. Organisations working with each other when normally they might have said, "Well, no, that's mine and that's yours, so let's just keep our little bits because that's what we do"' [third sector representative].
- The ability to work together effectively was enabled by trust developed over time: 'I think it is testament to the fact that we've had those relationships in place for a number of years. There's a level of trust around it and I think that makes a difference' [local authority child poverty lead].
- However, not every area reported such positive partnerships. Some relationships have developed rather more tentatively, and in one instance the relationship between sections of the VCS and local authority broke down.
- Political considerations and regulatory constraints may make public sector organisations more cautious than some third sector organisations.
- The COVID emergency required several voluntary and community groups to rapidly redesign both what they did and how: 'We saw organisations that completely pivoted. So they were doing something completely different to before' [third sector organisation]
- Several VCS organisations and their partners were concerned about the demands they faced and future viability, as COVID has reduced their grant income, donations, and earnings from trading.

Support from National Agents

- Interviewees generally welcomed the financial support and guidance provided, although some felt that they had not always been given sufficient notice of national policy changes.

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- Local authorities and third sector representatives would like to be more involved in the allocation of funds for local initiatives to improve co-ordination and reduce duplication.
- Some interviewees felt pressured to spend money more quickly than they would have liked or thought was suitable for local conditions.

Future Priorities and Lessons

- Many felt that the pandemic reaffirmed what they already knew about child poverty. Others believed that COVID had revealed the difficulties communities faced. However, all agreed that it had worsened conditions for lower income households and made addressing child poverty more difficult.
- Beyond food provision, the main future concern was worsening on job prospects, especially for younger people. Several interviewees expressed concern about worsening mental health and reduced some support services.
- Some proposed removing barriers to and taking a more streamlined approach to providing delivering accessible welfare benefits and services. Among the suggestions offered were standardising eligibility criteria and a single application process across all local authority benefits, and accepting trusted partners to verify applicants' entitlements rather than require authentication which delays processing and might deter applications.
- Interviewees believed that the crisis offered some positive lessons: 'I think we should take a lot of learning from the fact that we can do things when we're really motivated… we can turn them around quickly and it's evidenced' [third sector representative].
- Effective partnerships involve relying on others, which requires trust. This can take time to develop. However, some participants urged local partnerships to rethink the actual risks involved in, for example, sharing information between agencies or devolving decisions to front-line providers, and consider how such concerns inhibit positive innovation.
- Child poverty is a 'wicked' and complex problems which cannot be 'solved', however conditions can be altered through collaboration.
- The response to COVID demonstrated the devotion to service and commitment to the common good within the public, voluntary and community sectors across Scotland. This is an invaluable resource upon which to build more effective anti-poverty strategies.

Contents

Chapter 1: Introduction

The need to respond urgently to the COVID crisis seriously disrupted many of the actions local authorities and community planning partnerships had planned to address child poverty, as resources were diverted to respond to urgent health needs and emergency support was channeled to vulnerable households and communities. However, the COVID emergency also prompted some rapid innovations in local policy and practice, some of which challenged established procedures and processes. It is important to harness this experience and see what might be learned from it to maintain momentum and take the step change necessary to eradicate child poverty in Scotland.

The purpose of this project was to identify potential lessons from the rapid shifts in policy and practice taken in response to COVID which could improve local leadership and partnership working. This analysis will inform the recommendations of the Scottish Leaders Forum (SLF) Child Poverty Action group

1.2. Project Aims and Objectives

The Scottish Poverty & Inequality Research Unit (SPIRU) at Glasgow Caledonian University was commissioned by the Scottish Government, on behalf of the SLF, to gather the views of strategic leaders from a range of local authority areas on the challenges posed by the COVID epidemic for local child poverty work, and their responses to these. Although it is important to document the challenges which local leaders faced, there is a particular value in identifying positive experiences

from the COVID crisis and identify what might be learned from these. The project therefore has an appreciative element, in that it seeks to identify innovative practice and what participants believe have been effective measures.

The aims of this project were to:

- describe how Scotland's local authorities, Health Boards and key community partners responded to the impact which the COVID crisis had upon children experiencing poverty
- explore local decision-making processes regarding actions to tackle child poverty during the first few months of the pandemic
- identify interesting or promising practices taken to address child poverty during the crisis
- reflect upon what might be learned from this experience to inform future practice.

1.3. Research Design and Methods

These aims were met by undertaking two concurrent research activities

- a rapid review of documentary sources and stakeholders' collective intelligence to outline the key policy and practice issues facing local partnerships in relation to child poverty before the COVID pandemic.
- semi-structured interviews with key informants from a sample of local authority areas to gather their experiences of and views on the effectiveness of emergency measures in relation to child poverty.

1.3.1. Review of Existing Information

To help establish a baseline of the situation before lockdown a quick review and synthesis of existing information was undertaken to highlight the key challenges faced by local authorities and stakeholders in relation to child poverty before the COVID crisis. The main findings from this review are outlined in Chapter 2.

1.3.2. Interviews with Strategic Practitioner

The project sought to identify the experiences of strategic practitioners dealing with child poverty in the first months of the COVID pandemic by interviewing a range of key informants from six local authority areas from across Scotland. Strategic practitioners are 'those who do the work of making, shaping and executing strategies' in a particular area (Whittington, 2006: 619). Participants were selected to represent a variety of regions, circumstances and types of local authority, including

- areas with a range of population sizes, densities and socio-demographic characteristics (including the prevalence of poverty)
- large, small and medium sized authorities
- authorities representing Scotland's geographical variation using the Scottish Government's classification of and urban and rural settlements (Kleinart, et al 2018).

SPIRU interviewed a range of leaders in each local area, including:

- local authority Chief Executive
- local authority Head of Service
- local authority official with principal responsibility for child poverty
- Director of Public Health or NHS official with principal responsibility for child poverty
- head of local third sector organisation
- senior representative of a local anti-poverty or community organisation

31 online and telephone interviews were conducted between October – November 2020. Purposive sampling of this nature is not intended to be a statistically representative but present a broad range of experiences and opinions within the population of interest.

Due to time and travel restrictions we are unable to conduct interviews with those with direct experience of poverty, but interviewed instead community organisations with extensive experience of working with such households. In some cases, these representatives consulted their members and communities to inform their response, as one such participant explained

> I sent out the questions to some of our member organisations that I know work with front line, with children and families and particularly young people in this area, just to say, "these are the questions that I'm going to be asked, do you have a particular steer on it?" So they've come back and said, "Here's our input". So I've got that as well.

Interviews were semi-structured and designed to gather participants' views on the challenges raised by and response to the COVID emergency and their implications for child poverty. Participants were notified in advance of the questions that would be asked, which covered a range of issues:

- the political and policy importance accorded child poverty before the COVID crisis, and the issues facing low income households in the area
- the most urgent local priorities in supporting households with children during the crisis and the main actions taken to address child poverty
- any changes which were made to organisational policy and decision-making process as a result of the crisis
- the extent and nature of collaboration with local stakeholders in responding to the crisis
- participant's views on the resources and other support provided by national agencies to assist local partners respond to the crisis and assist households with children
- any examples of positive and/or innovative actions to address child poverty developed in response to the crisis
- whether and how the COVID crisis has effected priorities for tackling child poverty in their area
- reflections on what lessons may be drawn from this experiences, and any features that they felt should be preserved, developed or promoted

Interviews varied in length from 30 to over 80 minutes.

All responses have been anonymised, and no information is included in this report which might allow any participant, organisation or locality to be identified. The project was approved by the Research Ethics Committee of the Glasgow School *for* Business and Society at Glasgow Caledonian University, and conducted in accordance with the ethical principles of the Social Research Association (2003).

1.3.3. Data Analysis

A thematic analysis of the interview data was undertaken (Braun and Clarke, 2006). Thematic analysis is a technique used to analyse qualitative research data which systematically identifies recurrent most themes and issues in the data (Sundberg, 2017: 112). The purpose is to examine the perspectives of research participants, highlighting significant and systematic similarities and differences among responses which provide insight into the issue (Nowell et al. 2017). These patterns form the basis for hypotheses which are tested by iteratively re-checking the data for confirming and contradictory examples; a process known as deviant case analysis. Analysis stops when saturation is reached, i.e. no new examples emerge from the data which either require new thematic categories to be created, or which modify or challenge existing themes.

The analysis provided in Chapter 3 quotes extensively from participants' testimony, as these eloquently express their experiences, and convey their

perceptions of the leadership and policy lessons which they feel should be drawn from these.

1.4. Considerations and Caveats

The aim of this project was to identify and reflect upon potential lessons from the local actions taken in response to the COVID emergency. However, some caution is required about what can be inferred from the data presented here. While it is possible to identify interesting and potentially promising actions, it is not possible at this stage, nor using the methods applied in this project, to assess their relative effectiveness for three reasons.

Firstly, even if it were possible to independently evaluate the impact of some of the measures reported, responding to an emergency is not the same as systemic action addressing a complex problem such as child poverty. The responses of local partnerships were taken to address urgent and manifest needs. A sudden pivot towards a clear exigency is a different challenge to taking sustained strategic action to address wicked conditions[1]. For example, complicated though it may be, it is a more straightforward task to organise emergency food deliveries to low income or vulnerable households than it is to address chronic insecure and low paid employment or educational inequalities. It is also important to note that emergency actions are not intended to be long-term nor preventative, and this should inform any interpretation of what lessons may be drawn from them.

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[1] As Townsend (1976) noted, social issues are more likely to be addressed if they are not complex, discrete, technical, apolitical and uncontroversial.

Secondly, it is a principle of policy evaluation that even the most effective proven interventions cannot be transferred from their original context and reproduced. As Grint (2008: 11) observes, 'we never undertake "any kind of change" we only ever undertake "a particular kind of change"... the universal solution fails precisely because no organizational change is the same as any other – there are always slight but significant variations that bedevil such approaches.' Seeking to identify 'what works' requires considering for whom, in what conditions and why (Pawson and Tilley, 1997). Local areas entered lockdown from different starting points and with varied conditions in relation to poverty, and authorities were building upon different infrastructures and policy legacies. Therefore, investigating how public authorities and communities dealt with COVID will not provide replicable examples of viable solutions. Applying the lessons of what might be learned is not straightforward:

> transferring innovation-based knowledge to another organization is remarkably challenging. There are two main reasons why it's so difficult. First, this kind of knowledge is more contextually bound than people typically assume. Indeed, most organizations struggle when they try to replicate their own innovations in a different context. And second, such knowledge is deeply embedded in the structure and culture of an organization, and other organizations that have different characteristics are often unable to absorb that knowledge (Seelos and Mair, 2016)

This type of inquiry can at best try to identify conditions which facilitate actions, and infer what might be learned about and from the respective cultures, relationships and systems which have generated different responses. It is also possible to document the common and distinctive experiences (both positive and negative) of different stakeholders. In this sense, the focus of the study is on policy processes and the contingencies of action rather than their outcomes.

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Finally, while local authorities and communities generally welcome advice and guidance, some are more reluctant to receive instructions or directions from central authorities. The experience of the first Local Child Poverty Action Reports (LCPARs) required by the Child Poverty (Scotland) Act suggests that, while local partnerships are interested in learning about what has been tried in other areas, they feel that they know what is best for their areas, and what to take from the experience of others.

In summary, while this project can provide a picture of the landscape of local actions, it cannot prescribe how to build upon it. This requires judgements which go beyond the data.

Chapter 2: Child Poverty and Local Partnership Issues Before Lockdown

To understand the context of participants' experiences and reflections on local responses to the COVID pandemic, a rapid review of key documents was undertaken. This highlights the principal issues relating to child poverty which faced local authorities and other stakeholders before the COVID pandemic. The account which follows is not intended to provide a systematic nor exhaustive review of this literature, but to inform interpretation of the interviews reported in the next Chapter. This account draws upon a range of published and unpublished sources, some of which are confidential, e.g. discussions between members of the Local Child Poverty Co-ordination Group (the 'national partners'[2]). Any publicly available sources are referenced. The issues reported here are only included if they have been referred to by a range of sources or considered sufficiently significant to merit consideration.

There are other accounts of local responses to the challenges raised by the pandemic. For example, the Improvement Service produced a *COVID 19 Good Council Practice* webpage (2020). This provides 'a collection of case studies showing how councils have rapidly redesigned services, created innovative solutions to new problems, and collaborated with communities and other organisations throughout the crisis'. The activities it lists include a range of activities beyond child poverty:

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[2] The national partner organisations are the Scottish Government, COSLA, the Improvement Service, Borders Public Health Scotland, the Child Poverty Action Group, the Poverty Alliance and SPIRU.

- Supporting vulnerable residents - 23 examples
- Digital solutions - 11 examples
- Health and social care - 4 examples
- Children and young people - 19 examples
- Community and wellbeing - 8 examples
- Culture and leisure - 4 examples
- Personal Protective Equipment - 3 examples
- Finance and economy - 7 examples
- Housing and homelessness - 2 examples
- Other - 14 examples

It is not clear what criteria were used to establish that the selected examples are 'good practice' nor what evaluation has been undertaken to assess them. Nevertheless, this resource indicates that local authorities and their community planning partners responded rapidly and, in some cases imaginatively, to the crisis.
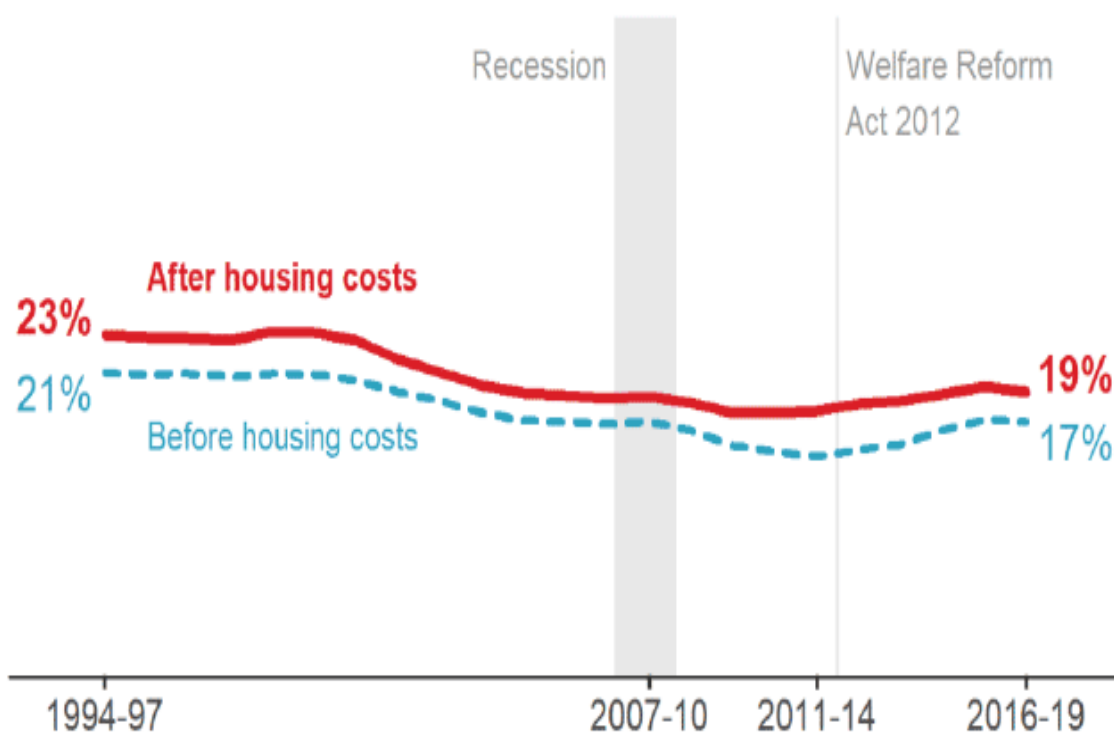
2.1. Poverty in Scotland Before COVID

Many households in Scotland already faced a challenging financial situation before the first lockdown in March 2020. Before COVID struck, over 1 million people in Scotland were estimated to be in poverty. This comprised an estimated 230,000 children, 640,000 working-age adults and 150,000 pensioners (Joseph Rowntree Foundation 2020: 1-2). Almost one in four children in Scotland was living in relative poverty (after housing costs) before the outbreak (Poverty & Inequality Commission, 2020a: 6)[3]. The pandemic therefore worsened conditions for many households which were already struggling financially. Reflecting this, the Independent Food Aid Network reported a 246% increase in food parcels distributed

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[3] A child is regarded as experiencing relative poverty if living in a household where total income is less than 60% of the UK median income in the most recent year. See https://www.gov.scot/binaries/content/documents/govscot/publications/statistics/2020/01/poverty-methodology/documents/summary-on-how-sg-measures-poverty/summary-on-how-sg-measures-poverty/govscot%3Adocument/Summary%2Binformation%2Bon%2Bhow%2Bthe%2BScottish%2BGovernment%2Bmeasures%2Bpoverty.pdf

by foodbanks in April 2020 compared to 2019 (Poverty & Inequality Commission, 2020b) and the Aberlour Trust reported a 1400% rise in applications for financial help between March – August 2020[4]. In June 2020 Save the Children reported that 70% of UK households were forced to cut back on food and other essentials because of the pandemic.

Figure 1 - Proportion of people in relative poverty, Scotland

Source: Scottish Government, *Poverty and Income Inequality in Scotland 2016-19*

2.2. Key Issues Before COVID

Several recurring issues are evident from the various reports and commentaries on local partnership working relating to child poverty in the period leading up to the COVID pandemic, and in the initial stages of the lockdown.

- Issues relating to strategic planning, monitoring and evaluation
- The scope of (and limits to) the actions taken by local authorities and partners to address child poverty
- Local leadership and commitment to the poverty agenda
- Issues relating to partnership working
- The role of local child poverty leads and other officials in crucial positions
- Understanding of poverty within organisations
- The initial disruption caused by COVID

2.2.1. Strategic Local Planning

Commentary on the first set of Local Child Poverty Action Reports (submitted in June 2019) noted several common strengths and recurring weaknesses. Among the positive features were that many LCPARs demonstrated an informed understanding of local conditions. However, some reports were less impressive in terms of the scope and ambition of the actions they described or proposed. In several cases, the measures proposed were rather general and did not explain how they would address child poverty. A number of reports also did not include clear targets nor appropriate performance monitoring and evaluation systems to assess the impact of their actions.

2.2.2. Scope of Actions

It should be acknowledged that some LCPARs do not report on every action taken by local authorities and health boards to reduce child poverty. This is itself a limitation to those reports. However, even allowing for this, it was evident from the first round of LCPARs that the potential contribution to tackling child poverty

of several areas of activity was not considered. In particular, local authority powers and responsibilities in such areas as procurement, housing, economic development and transport were rarely applied in ways that could increase income from employment, reduce household costs or increase social security income. Most examples of activity reported what are now familiar forms of income maximization (e.g. embedding welfare and money advice services in education and health service settings), or measures to reduce household expenditure, such as reducing the cost of the school day[5].

2.2.3. Local Leadership and Understanding of Poverty

Analysis of LCPARs and feedback from lead local officials confirmed the importance of the leadership provided by and the commitment of senior figures to developing an effective anti-poverty strategy (Poverty and Inequality Commission, 2019). This commitment was reported as being essential to ensure buy-in to the child poverty agenda and encourage effective collaboration between different departments within an authority and with external partners. Even where there were examples of co-operation among stakeholders, in several of the 2019 LCPARs this involved sharing information rather than resources or innovative joint action. In some cases, the limited scope and scale of action reflected the relative seniority of those responsible for child poverty strategy and their limited authority to act independently.

Informal and confidential exchanges with several local authorities indicate that the commitment of some senior leaders to prioritizing tackling poverty was

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[5] https://cpag.org.uk/cost-of-the-school-day

questionable. Local officials have reported that some elected members were not well informed about the causes or consequences of child poverty. There was also a lack of awareness and understanding reported among some staff unused to considering child poverty. This was noted in particular among sections of the NHS, where it has been suggested that further training on the causes and consequences of child poverty and on poverty-sensitive practice may be beneficial.

However, some initial reports on the response to COVID indicated that the pandemic had increased awareness of the scale and nature of child poverty among some stakeholders. COVID has highlighted the vulnerability of many households to even small changes to their finances. This included households not counted as living in poverty but 'just about managing'[6] before the lockdown tipped them into deprivation. The pandemic has therefore clarified for some local stakeholders just how central child and family poverty is to the responsibilities of local authorities and their strategic partners.

Some local stakeholders have expressed concern that the additional attention given to poverty as a result of COVID may be pushed off the agenda in any recovery. Others have expressed the hope that the prominence given to the issue (e.g. the media and public attention generated by Marcus Rashford's campaign on free school meals) will persist after the most acute phase of the crisis passes.

2.2.4. Partnership Working

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[6] https://www.bbc.co.uk/news/uk-politics-38049245

The Scottish Government (2020: 51) reported that 'Partnership working was fundamental to the success of our coronavirus response, underpinned by the public sector, third sector and community organisations working together to support those most in need'. However, there was some variation in the effectiveness of joint working in the development of local child poverty strategies before the pandemic. The Poverty and Inequality Commission (2019: 4) questioned the extent to which there was an equal and joint commitment between the local authority and health board evident in some LCPARs, and noted that some reports made only a passing reference to partnership working. While acknowledging the difficulty of proving in a report that collaboration has taken place, nevertheless the Commission observed that 'the great majority of reports only included the name of the partner organisation. There was no information provided on the role played by each organisation in the delivery of the actions, or the challenges and successes of working in partnership' (op cit: 5).

Feedback from and engagement with several stakeholders provides some substantiation to this observation. Based on this intelligence, it is questionable how far some of the first set of LCPARs should be regarded as produced equally by local authorities and health boards. Several sources suggest that a number of health boards had taken a parallel rather than a partnership approach to the first LCPARs – in some cases producing their own report as an appendix to those of their various local authority partners. In addition, some local officials remarked on the difficulties involved in securing sign-off for LCPARs from two organisations with separate governance systems. Several authorities reported that they had only indirect contact with NHS colleagues through the local Health and Social Care

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Partnership (HSCP) or through Community Planning Partnerships (CPP). This is perhaps an understandable reflection of the fact that health boards have multiple local authority partners and are, in some cases, considering child poverty systematically for the first time. However, the LCPARs which result from such an approach cannot be regarded as truly joint strategy.

2.2.5. Lead Officers & Staff in Key Positions

Several sources suggest that the local authority official with principal responsibility for overseeing strategy and composing the LCPAR is crucial to the effectiveness of action addressing child poverty. In many authorities, individuals or small numbers of staff are delegated considerable responsibility - e.g. for liaising with colleagues and partners within and beyond authorities, analysing data and producing reports - but are not always granted the power to make corresponding decisions nor allocate resources. That places some not very senior staff in a challenging situation of both responsibility and dependence upon others.

Such officials are among those who occupy significant positions for developing policy and delivering services to lower income households. Certain other officials occupy other positions of pivotal importance due to of the nature and frequency of their interactions with service users and families with children. In some cases, such staff may be unaware that they occupy crucial contact positions. However, it is possible to identify such nodal positions within organisations and consider how they could be used to improve services for low income households and help children vulnerable to poverty.

One potential risk of this concentration of expertise and positional significance is that the effectiveness and even the commitment of some local authorities to tacking child poverty is vulnerable to staff turnover and loss of intellectual capital. One implication of this is that local policy to end child should not depend upon particular staff, but be a shared commitment embedded in the work of all relevant organisations (HM Treasury, 2008).

2.2.6. Initial Disruption - and Benefits

As outlined in the next Chapter, it is no surprise that the COVID crisis seriously disrupted much of the anti-poverty work that local authorities and their partners had planned. It also displaced and delayed the preparation of the second round of LCPARs, initially scheduled for publication in June 2020, as local officials (and NHS/Public Health Scotland staff in particular) were redeployed to other duties.

However, there have been some unexpected potential benefits arising from the crisis. For example, the Poverty and Inequality Commission's review of the first LCPARs (2019: 3) expressed disappointment over the extent to which local authorities had involved those with direct experience of poverty in developing strategies. Obviously, the restrictions placed on public gatherings by COVID have put an end to almost all such efforts. Nevertheless, some local authorities have reported that the shift to online communication has actually improved their engagement with residents and service users in some respects. This may be an area where lessons can be learned about extending reach and interaction.

2.3. Reflections

Several of these issues will be considered in the next Chapter, which confirms the Scottish Government's view that here have been some positive experiences resulting from this unprecedented crisis (2020: 4). As the Chair and Chief Executive of the new Public Health Scotland agency argue, the pandemic has created opportunities for new partnerships and innovation: 'Scotland's response to COVID-19 has shown us what we can achieve when we work together across organisational and sectoral boundaries. To make a positive difference to our public health challenges we will all be challenged to do things differently' (Public Health Scotland, 2020).

The response to the crisis also takes place in a context where local authorities and their partners have shown an unprecedented commitment to tackling child poverty. In confidential feedback provided to the national partners, more than 4 out of 5 local child poverty lead officials stated that the duty to prepare LCPARs was a positive development which heightened the priority attached to child poverty among their authority and NHS partners. Child poverty is now an integral part of CPP processes, and the joint reporting duty had led to the creation of new relationships and structures, and a commitment to future deeper engagement.

The next Chapter outlines some of the local actions improvised in response to the emergency, and considers what basis these may provide for developing new initiatives to tackle child poverty.

Chapter 3: Research Findings and Analysis

This analysis of the interviews first considers the priority which local partners accorded child poverty before the COVID crisis, and participants' views on the main aspects and causes of poverty in their area (Section 3.1). This is followed in Section 3.2 by analysis of the themes which emerged in response to questions about interviewees' priority concerns and the actions relating to child poverty which they took in responding to the emergency. Section 3.3. highlights examples of interesting and innovative emergency measures interviewees referred to, and some of the lessons which they have drawn from these. Section 3.4 outlines some of the changes which local leaders made to decision-making processes in adapting to the urgent emergency demands which COVID raised. Section 3.5 examines what participants reported about how local partnerships operated to address some of the challenges which confronted them. The following section (3.6) considers in particular the role played by voluntary and community sector organisations (VCS), many of which provided support to vulnerable households. This expanded role raises several interesting questions about local leadership and community planning processes which merit consideration. Section 3.7 explores interviewees' views on the support and guidance they received from national agencies and the Scottish Government. Finally, section 3.8 documents what participants said about the impact COVID has had on their priorities and future proposals concerning child poverty, and notes some of the reflections and recommendations they offered.

3.1. Child Poverty Issues Before COVID

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3.1.1. Importance and Priority Accorded Child Poverty

A number of interesting themes emerged in response to questions about the importance attached to child poverty before the COVID crisis (taken as before March 2020). The first and most significant finding is that all those interviewed affirmed that child poverty (and poverty more generally) was a priority concern for their organisation and local area. While the varied remits and responsibilities of different organisations meant that child poverty was a more central concern for some, none of those interviewed regarded it as irrelevant or unimportant. For example, one local council official with lead responsibility for child poverty stated that 'Child poverty has been on the agenda of every elected member since forever, and it is something that is played high in their agendas'. A third sector organisation, which had no particular child poverty responsibility, also described it as 'central to the work of the organisation before COVID'.

Several participants referred to indications that child poverty was taken seriously by their respective organisations. In some cases this interest was attributed to the duty to produce annual Local Child Poverty Action Reports, which the Child Poverty (Scotland) Act placed on local authorities and health boards, and the prominence of the issue in the national policy agenda. As one senior local authority official put it,

> I think the *Every Child, Every Chance* document that the Scottish Government have produced is actually a really good document, and it really helped me when I picked up this responsibility. It's [poverty] what people get paid, it's what it costs people to have a family and it's what they get in benefits and those three building blocks [are crucial]'

An official from a different local authority reinforced this message:

> I don't know if we will ever achieve those targets [in the Child Poverty Act]. However it has given a focus, it's made people think about how they're reporting on what they're doing around child poverty... It has given in the work we have done in the last year a focus and it has built a partnership

Participants reported that the important attached to child poverty was demonstrated by the attention the issue received, the level of 'buy-in' to it and how some organisational governance structures had been revised to address it. Regarding the level of commitment and attention accorded, for example, one local child poverty lead official explained that senior officials and elected members were much more engaged with the details of child poverty policy than before:

> I *genuinely* sensed a shift from when we took the first Child Poverty Action Report... I felt there was a definite shift in interest. What I mean is, obviously poverty and inequality in general, has always been on the agenda. But that specific focus about, "Lets target this specifically to look at children and families". I certainly felt a shift in attitude, you know - more questions, getting a lot more involved with colleagues from education about how we support children in schools, and things like that

This engagement was reflected in such activities as a health board official organising cross-sectoral and multiagency events for Challenge Poverty Week[7] to promote awareness of poverty proofing policies. This interest in addressing child poverty extends beyond specific local authority departments or campaigning organisations, and is embraced by sections of the health service; although some health professionals may initially be sceptical about its relevance to their work,

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[7] https://www.povertyalliance.org/campaigns/challengepovertyweek/

> Within our strategy, within our work plan, within both our corporate objectives and public health objectives, child poverty is right up there. Now, we get quite a lot of flak from our colleagues on that - "What are *we* meant to do about child poverty? What is the NHS role?" So we've tried to be quite specific about what the NHS role is. And obviously, it's the working in partnership, providing the data, providing evidence. But the programmes that we have around financial inclusion, employability, work and maternity services, and with health visitors around health, welfare and children - they are some of the very specific things that we've said the NHS *can* contribute. And obviously we sign off the child poverty plans. So we're very involved in agreeing the detail [NHS official]

Some respondents explained that the commitment to address child poverty was reflected in new policy-making systems. For example, one local authority official remarked that their governance system had been revised to support the development, delivery and monitoring of the child poverty strategy:

> This was specifically focused to hold us internally to account and what were we doing. "Is it working? Is it making a difference? How do we prove it? How do we demonstrate it? How do we evidence it?" And we introduced a child poverty tracker under the three main drivers where we would have every single intervention project that was happening internally: "What driver was that linked to? How much funding was attached to that?" so that we could track the money

However, despite the widespread importance which participants claimed was attached to child poverty, it was also reported that some stakeholders did not necessarily distinguish between *child* poverty, and poverty more generally. As one local authority child poverty lead official remarked,

> I would constantly remind everybody - my job is to champion interventions just for families. Because I would be invited to things,

or find myself at different projects or getting involved in things, and I would politely say - I would use the *Dragon's Den* "I'm out!" Because this doesn't involve children and families

3.1.2. Perceived Causes of Poverty

Interviewees referred to several factors as causes of child poverty. However further analysis suggests that several of these are more appropriately regarded as dimensions or manifestations of child poverty rather than root causes (these are discussed below). Two key contributing factors may be interpreted as genuine reasons why, even before the COVID pandemic, some families with children had incomes too low to afford basic essentials. One particular cause highlighted by several interviewees was low paid employment. The view of a participant representing communities with experience of poverty expresses this:

> [there's] lots of different poverty issues, but I would say that they stem from the lack of employment within the local area. There's not a lot of employment [in the area]. People are normally in, for example, retail type jobs or social care type jobs, which are paying minimum wage, mainly... Even if they're working, they're still massively caught in the poverty trap. In fact, many of the families who we work with - actually *do* work, you know? Some of the families holding down – mums mainly – holding down nearly 2,3,4 jobs, just to try, get through

This opinion was echoed by a local authority official with lead responsibility for child poverty:

> One of the big issues when we started looking at employability – they're just not paying enough. We've got big organisations and they're paying the minimum wage. The minimum wage is not enough. It's not enough to keep a family

A second related factor contributing to poverty mentioned by participants was the lack of suitable care provision:

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> The *other* big issue is, not nursery child care, it's *after school* care. It's when the child is in primary school - depending on what school you go to it's a postcode lottery. It depends whether or not your school will offer any aftercare. It's a hit and a miss. And the *other* big issue for child care – there's no childcare on Saturdays and Sundays [local authority official]

The same participant explained that many of the lower paid jobs available to parents (particularly mothers) were in services, such as retail, hospitality and care, and 'None of these jobs are Monday to Friday nine 'til five, and all of our child care is organised around Monday to Friday nine to five'. Furthermore, weekday childcare cost were about £8 an hour in this locality, but rose to £16 an hour at weekends. Barriers to and the sheer lack of remunerative employment stood out as factors contributing to poverty among families with children before COVID

3.1.3. Dimensions and Manifestations of Poverty

One notable feature of interviewees' observations on child poverty before the pandemic was that it was perceived by some to extend beyond income, and regarded as expressing life chances or general capabilities. As one third sector representative put it 'there is something fundamental for me around the impact of poverty on people's sense of security, and how that lack of security impacts on how they feel as a citizen and how critical that is at a young age'. Although acknowledging the rationale for focusing on income targets, one local authority official demurred at these as a satisfactory representation of child poverty

> We decided quite early that we think the child poverty drivers are too narrowly drawn. I get why they're doing it the way they are, but if you look at child poverty in the round, we think that it doesn't cut the kind of life experience of the child. It talks about

the income of the household, and that's fine if you're going to mention it in relation to your targets. But if you're going to talk about the causes, short and long term, and the consequences of poverty on children, we think it's much broader than that

Some of the broader aspects of poverty which participants referred to included rent and housing costs. A lack of affordable local housing was a widespread concern, but regarded as particularly acute in rural areas, where those who relied upon seasonal and/or part-time employment could not access a mortgage and were in often out-bid by those purchasing holiday homes.

Fuel Poverty is also a common concern in Scotland's more rural and remote communities, but was also mentioned by participants from more urban areas, such as this representative of households with experience of poverty:

some families will not have enough money to top up their [fuel] meter. A lot of the families, a good majority of families, we work with, have cards or fobs to top up meters. These people are, have been charged extra... so their budget is reduced further.

Another problem contributing to poverty reported in both rural and urban areas was a lack of suitable and affordable transport. This has serious consequences for access to employment and essential services:

Because the bus links are so poor, the local people from local

neighbourhoods, they go to their local corner shop. And what they

will normally do is, they'll use their weekly funds to buy ready-

made meals out the freezer, which will cost them about three or

four pounds probably for one main meal. Or they'll go to the local

chippy or kebab shop and, if they can afford it, the Chinese.

Whereas, if the local transport links were better, then their weekly budget, in my opinion would go far, far wider. And not only that, it would be far healthier than some of the stuff that the local people that we work with, eat. So yeah, food poverty is massive and that then has an impact on other poverty issues [direct experience representative]

A final specific factor contributing to poverty before COVID mentioned by several participants was the problem which some people faced accessing benefits and public services. One respondents from the third sector outlined some of these issues:

What was reported to me by a number of children and young people's organisations in the third sector was [concern] particularly about the lack of information on what was available for people... long before COVID. It was the inability to find out freely, information that was available for families on low income and what they could apply for. I'm not talking about Universal Credit, I'm talking about things like Educational Maintenance Allowance.

As another public sector official pointed out, these obstacles to access were particularly acute for those whose first language was not English, some of whom missed out on free school meals and school clothing grant, despite the measures taken by some local authorities to automate provision of such benefits.

3.2. Child Poverty Priorities During COVID

A general feature of participants' responses was that the importance of tackling poverty was not lost in the challenge of responding to what was primarily a public

health crisis. As one representative from the third sector put it in describing the initial urgent response to the COVID crisis

> While we didn't specifically prioritise child poverty at the top of the agenda, what we did very clearly identify quite early on was that there were particular cohorts of people in society that we thought were particularly at risk, and families on low incomes were high on that

Similar priorities and measures were evident across different authorities and sectors in both the processes they initiated and their substantive actions. The most frequently mentioned priorities were to organise and co-ordinate activities, deliver food to vulnerable households, and provide IT equipment to schoolchildren and families. Other priority concerns mentioned were the implications of lockdowns for household incomes in the longer-term, and the effect upon mental health (discussed in Section 3.8).

Strategic practitioners noted that one urgent task they faced in the initial stages of the pandemic was, as one community representative put it, 'to get a strategy together. Most importantly, to bring partners together, because we realised we couldn't do it on our own as there was so many areas [that needed food]'. Several interviewees mentioned that they were aware that many families faced difficulties accessing food *before* the COVID crisis. As one third sector representative observed, 'we know that even pre-COVID there were challenges with food insecurity as well and high use of the food banks. And probably a lot of it will be linked as well to the levels of unemployment in the area.' Local public officials recognised that many families with children ordinarily relied upon free school

meals and that, 'when lockdown came, our first issue was feeding the children'
[local authority service head].

A variety of methods were used to deliver food to households with and without
children. These have changed over the course of the pandemic as local
organisations learned from practice, embedded systems and adapted to changing
circumstances. Some areas initially used community hubs to provide food on site
and to enable people to collect food parcels –

> The first thing we did was, we made sandwiches and we made them
> in community halls. The reason for the community halls is we don't
> want anybody to be disadvantage by not getting a bus, not having
> transport and actually, some go to the wrong places; for people to
> be able to access meal, quickly. So we did community hubs and we
> asked anybody, *anybody* entitled for free school meal could go
> there, but *also* anybody from primary one to four who relied on
> free school meals, even if they weren't entitled for free school
> meals, could also go there [local authority child poverty lead]

Other areas provided vouchers redeemable at particular shops, which was initially
regarded as 'trying to make it as admin and bureaucratic light as we possibly
could, to get resources out there as quickly as possible', in the words of one local
authority Chief Executive.

However, more interviewees described delivering food directly to households as
the main form of initial food provision:

> As soon as we starting hearing about services going into lockdown
> and schools closing, the automatic reaction was to get food to
> families. It was an absolute industry. Before we even knew about
> getting food fund from the Scottish Government, money was made
> available to purchase food. And to stock it we had volunteers who
> worked for the council - across the board from chief executives to

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caretakers and janitors and cleaners out on mobile busses, vans, anything we could get our hands on. Delivering food bags over the Easter period [local authority child poverty lead]

The extent to which such initiatives were led by the public or voluntary and community sector varied and also changed over time, reflecting changing capacity in response to demand. In most cases, participants reported that this division of responsibility operated smoothly.

The second most urgent concern for participants in the early stage of the pandemic was the effect of closing schools. One child poverty lead official expresses the widespread concern which participants shared

The main focus I felt, at the beginning, when we looked at this, was how do we continue to educate children? How do we get them a package where they can still access their homework, they can still touch base with their teachers?

This issue was explicitly related to concern about child poverty

The urgent priorities were education… Because we know education is linked with poverty - that the route out of poverty is education, better job and all that. So we understood the challenge for our children not having access to data or an IT device in order to try and engage in a different setting at home [local authority child poverty lead]

It became clear to all those we interviewed that digital inclusion to enable online education and distance learning was an imperative. Distributing IT equipment therefore became a significant priority undertaking for many local partnerships. One local authority official illustrates the kind of action taken across Scotland

> We made the most of the digital literacy fund. We bid for 1200 laptops with wi-fi, that we could distribute to anyone on free school meals. So we're currently going through that.

Addressing digital inclusion was also an area where some VCS organisations were able to take quick and effective action, which was not always approved by the local authority, as one representative of lived experience groups described:

> What we did is, there are some people I know who used to work for [private IT company] and other places, and they gave us some advice, because if you get the wrong tech it's even worse. They had access to second-hand computers and they pulled lots of favours. And it was quite hard to get any tech at the time - that's what everybody wanted. Eventually we managed to get a supply of Dell second-hand computers. So we sent out in the end [XXX number of] computers. We raised just under 100 grand with three months of wi-fi. The HCP pitched in for children in care, as well as part of the package. But we also went to schools. And the education services were worried. You know: "How do you find the right people, how do you know who to help?" And it's like, well, if you go to teachers, it's quite clear who is not online, who is not engaging in their classes, and they're the people we need to help.

This participant felt strongly that digital inclusion extended access to beyond formal education and was important to children's development and families' social engagement:

> When we started to talk to the head teachers about it, it's not only not able to engage with a lesson that's on Teams. It's not being able to get work marked and engage with a teacher, or take part in group work. But it's also out of hours that you're not engaging with your friends during that time, because everyone's online. So you're then further isolated. And then when you go to bed your parents probably take the computer and use that themselves for other things. So I think there was quite a wide impact on that.

Participants understood that that effective solutions to digital exclusion were not straightforward and involved doing more than merely providing schoolchildren with

a PC or tablet. For one thing, a single IT device may not be sufficient for a household when so many tasks have some online element

> I think probably similar to what you're seeing across the country is that, when people were sent home to work, and children were sent home to learn, they maybe only had one or maybe two devices within their family. So there weren't enough devices there for everyone to effectively do their work. And that's for families that *aren't* as economically challenged. I think for those families that are living in poverty, the divide became much wider and they became even further excluded [third sector representative[

A second limitation which participants quickly identified was that hardware alone is not sufficient to ensure that children and families are able to access essential services, such as online education

> I think if we're going to give families an iPad, we need to give them data. We need to give the, access to wi-fi. I know it's a challenge how we do that, how we do it and who does it - I accept that. However, if you're going to give somebody a device, there's no point in doing that unless they can access online with that device [local authority child poverty lead]

Participants also understood that the challenges raised by home schooling went beyond digital inclusion and online access, and required imaginative responses

> There was organisations who were creating activity packs for kids to keep, because they were conscious that parents might be suddenly working from home, or kids might be challenged by not seeing friends and not going to school. We saw organisations doing phone check-ins with parents to check that they were okay. We saw organisations making sure that the parents had money, families had money, cash in the pocket. We saw organisations helping out with fuel cards, electricity payments. So, I mean, really broad, and over the duration that's expanded as well [third sector representative]

Some participants noted that not every family which they expected needed IT equipment had come forward to request it, and that there may be important

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hidden reasons for this. One local authority official responsible for child poverty remarked

> In my experience working with families, families will tell me they're not very good digitally. But what they mean is there's problems with literacy. It's much easier to say, "I'm not very good digitally" than it is to say "I'm struggling here with spelling"

Another participant suggested that one reason why uptake of IT kit was lower than expected in their area was because the equipment was provided on loan, and 'I think for really vulnerable families, they probably have some concerns about what happens in the case that the device isn't able to be returned, or about returning in its current state, or not returned at all and the implications of that. I don't know whether that affects the uptake. I suspect it probably does' [local authority child poverty lead]. This remains an unproven but potentially insightful suspicion which merits further consideration.

Another point raised by several participants was the online access was not simply necessary for schoolchildren but for many other vulnerable groups. As one senior NHS official observed

> Because your access to benefits advice and support all moved online, if you didn't have [online] access to that you couldn't get that. Schools, education, was dependent on digital. Even basic advice, everything was getting circulated digitally. So I suppose that really came to the fore, and started a bit more discussion than maybe I was aware of before that

Other NHS official interviewed noted that 'There was a lot of work in adding digital access because families were looking for NHS services and couldn't turn up for appointments. We needed to ensure they weren't impacted by not having this digital access'. Lack of appropriate online access was also felt by several

participants to have prevented some households receiving welfare benefits and other support, as some service providers 'use digital platforms to advertise most entitlements' [local authority official]. Other respondents expressed concern about the suitability of online services for some service users:

> I suppose my fear is of all the things that you would struggle to do online, some of the mental health things were just the most difficult. And then the whole digital inclusion/exclusion thing. So, if you're poor and you've got poor health and all your offered is an online consultation, are we going to have the resources and kit to allow you to do that? [local authority child poverty lead]

3.3. Examples of Innovative Actions

The appreciative element of the project entails considering some of innovative local responses to the crisis to which participants referred. These include some heartening examples of the dedication of local organisation to helping their communities.

The first notable feature is the surge of volunteers who came forward to help deal with some of the demands of the COVID crisis. As one local authority official put it, 'it was refreshing to see how much we pulled together as a team. We had third sector volunteers and everybody was just out for the greater good to make sure that families in need received the food.' Several local authorities described how their staff voluntarily took on new and sometimes unfamiliar duties, such as delivering food and other essentials, or turned their professional skills to new demands:

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> We set up these shielding helplines straight away and they evolved over time. So in financial services, staff who would be used to handling telephone calls normally, about Council Tax or benefits or whatever, we pressed them in. Because their skills of dealing with telephony enquiries and then they handed them off [to specialists]… because they were more attuned to dealing with the issues around that. And they worked closely also with the staff that normally deals with the Scottish Welfare Fund. It was just getting the right staff in the right place. But this was all volunteers - when they couldn't do their day job they volunteered to do this and worked really closely with Education, but also with the Health and Social Care Partnership to identify vulnerable families [local authority Chief Executive]

This commitment to 'mucking in' to help others was particularly evident across the voluntary and community sector, where participants several examples of rapid collaboration:

> Another charity stepped in and took over our phone calls, because our phones [were] ringing off the hook. And they're great because they had the people answering the phones, they were fantastic and incredibly compassionate, but they could also signpost as well. Because, it might be they've [the caller] signed up for a food box, but they were really unwell themselves - in need medical help, or they needed mental health support, or they needed benefits or something. So they can be signposted [lived experience representative]

Several interviewees noted that the experience of volunteering had a potential salutary effect upon those who had previously been unaware of the straitened circumstances of many families

> I definitely felt that people were shocked at how people didn't have access to online when they were phoning them about doing their shopping online. They're *really shocked*, and you're thinking "Oh my god did you not…?" But again, it's just a wee bubble - your world that you live in, or your job. So that, definitely been reflected in the lessons learned as well [local authority child poverty lead]

Interviewees reported a variety of additional measures they had taken or knew of which helped their communities deal with some of the difficulties created by the COVID emergency. This included such measures as a service to collect prescriptions for those who were vulnerable or self-isolating rapidly established in partnership by a local authority and community organisation. Some local authorities extended entitlement to free school meals and other sources of food to families who were not statutorily entitled but in need. Some also provided additional income top-ups or vouchers to vulnerable families.

Several participants were aware that people's needs in such a crisis are more than material, and made particular efforts to provide support with consideration and kindness:

> We started sending out boxes of food, like seven days' worth of food but a good quality box that had fresh ingredients, frozen and stuff. It also had some nice things, like, nice smelly things, or it had letters in it. So we had more than "Oh, we can dump some food on you." And hopefully it just cheered people up a bit. We also got a lot access to flowers that Marks and Spencer's were going to throw, so we gave bunches of flowers to people; a few things like that [lived experience representative]

> It was not just a case of a box of food and away you go. People were giving thought to it. And we were getting feedback which we fed back to the food distribution group and various executive groups. We were able to feed back - "Food is great but there's the other stuff as well". And then the other element of it was fresh food... there was a concerted effort to get fresh food and vegetables into the food parcel as well. So it evolved... My point in all that is that it wasn't a case of doing the basics – we got feedback and there were requests for individual items, certainly related to child care, specific foods and specialist foods as well [third sector representative]

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The importance of effective communication was evident in the testimony of some participants. One example which illustrates this was the very positive community response to weekly live online communication from the local authority head of education:

> I got accosted by women and they tell me what a wonderful job education's doing, how much they appreciate it. And of course it's nothing to do with me. They're reacting to the level of communication. Quite amazing! Most of the time I'm talking a lot of waffle, in as much as I'm telling them the same information they've had, and I'm saying the same thing every week. But because I become familiar to them, their trust in me has increased, their negativity [has] absolutely gone. And then the first time, I didn't do it weekly - I left it for two weeks - I got a complaint on social media that I haven't been doing my thing! The point is that the thing that COVID did was up the requirement for direct communication using up to date tools [local authority service head]

Finally, it is worth quoting at length what one local authority Chief Executive said about the dedication to service shown by teachers in their community

> Our best schools, even in a COVID 19 environment, with the teachers being sent home, the head teachers got the teachers mobilised and back out the door. Because it wasn't just enough to be on an online world; making phone calls to families saying "Can you make sure that wee Johnny, logs on for me?" Wee Johnny (a) can't log on because he doesn't have a device, or (b) he's not gonnae log on anyways, even if he *did* have a device because he's too busy playing his Xbox! And it was the head teachers who, from the more deprived areas, basically kind of corralled their head teachers and corralled their deputy, and got all their section heads and teachers and said "Right, we want you out there chapping doors, and see if you can get engagement. We'll give you PPE. We want to send you out and we'll send you round the houses, chapping the door of the mum or the dad, or the carer of the child". Okay, it might seem now, a bit confrontational, but it's something to make sure that (a) there's an observation to make sure that the kid is alright, (b) make sure they're getting the support they need, and that there's somebody out there who cares for them. The family understands we are out there caring for them,

and we are going to be keeping tabs on them because they're our children. And that… happened because we had a really good relationship with the trade unions and with the teachers

3.4. Decision-making Processes

The speed of events and scale of the challenge compelled organisations to revise and accelerate some of their decision-making processes. In the words of one local authority service head 'I think that the pandemic created an urgency, a wave of need.' All those interviewed referred to various ways in which decisions making procedures were simplified and delegated, so that organisations were 'very much able to be nimble and do things, respond very quickly to anything' [local authority service head].

The first manifestation of this were the changes which local authorities made to their formal structures, in some cases creating *ad hoc* cabinet-style executives. This account from one council Chief Executive is typical of such measures

> As soon as the lockdown started we moved into an emergency response procedure. So all council committees were stood down and it was just a single emergency administration committee that only had, I think, six elected members on it. And that was to allow us to get on with things and make decisions quickly and focus on strategic decisions

Another Chief Executive described a similar rapid rationalisation:

> We were streamlining what we were doing, reporting wise. So we weren't creating three different versions of the one report, which quite often does happen… we were looking for people to give us brief updates, not *War and Peace*. So, although we might have had a load of detail behind it, and certain officers were well briefed to

> ask questions, we didn't put all of that into the report. We had a sort of dashboard locally and then a narrative report. So it was maybe three or four pages a couple of times a week - we tried to keep it to keep it concise

Such streamlining was not particular to local authorities – community and voluntary sector organisations also 'changed dramatically. Very, very quickly', as one representative of the sector noted. The sector shifted rapidly from regular formal staged meetings to more frequent online discussions between key stakeholders. For obvious reasons, there was a particular urgency within the NHS, but the processes improvised there corresponded to actions taken by all local strategic practitioners

> We set up a whole new COVID response structure, where we were meeting every day as a strategic group, and it was just within the NHS. Then there would be a weekly meeting with local authority Chief Execs, so these were new. I mean, our Chiefs Execs were always at discussions with local authorities, but it became much more regular and formalised [NHS official]

All participants emphasised the imperative of open communication and effective liaison between key partners, and the importance of ensuring that the right people and 'trusted partners' were involved in taking decisions. As one NHS lead official explained 'You were basically picking people off who you thought were key for particular things'. This approach was also evident within local authorities,

> The right people were brought together from across various bits of the organisation... What we were able to then do - it was a really focused: "What do we need permission for? Who is that person?" And we just let it happen [local authority child poverty lead]

Some procedures were revised to reduce potential delays which might impede an effective response

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Definitely there were changes. There were decisions that were made a lot quicker. So, previously, internal structures, like any big organisation are a big juggernaut in here. And at times there's about a thousand committees and management meetings to get anything through any various levels. We just cut through that. Because we had no time for that. So, there was delegated responsibility given to all of us that was working on the whole response, just to get on with it. That was the message that came through loud and clear. The message was, "Get on with it, make it happen, get it done". So we were like, "Okay!" [local authority child poverty lead]

In particular, several interviewees described how information was shared more rapidly between partners:

I'd also say during COVID, I felt definitely, there… was a sense of "What can I do to help?". For example, the Data Protection Officer responded rapidly and positively to combining data to target support, whereas before things like that previously would have took months [local authority child poverty lead]

Because there was an emergency response we didn't get the usual kind of blocks to do things. "Oh you can't have access to that data that's under Data Protection" or whatever. So that got pushed aside and actually people talked far more, and data was shared more regularly than would normally be the case [local authority Chief Executive]

This was indicative of the different attitude many stakeholders have taken towards risk in the face of necessity, and the trust they have in their own staff and strategic partners: 'We have moved quickly during COVID and we've done that because we've put risk aside and collaborated, and I think that's a really important lesson' [third sector representative]. The dynamism required by the crisis energised many of those interviewed, such as this local authority official

The speed of decision making was just remarkable. It is interesting isn't it? It just shows you that these things can be done. Maybe as a

public sector in Scotland you are universally in a sense that you don't do things, just in case there is somebody somewhere who might actually complain. I'm not sure that we can assess the probability of risks very well

As an example of this, several participants described how they had accepted

affirmation from colleagues or partner organisation to authorise decisions rather

than require more formal verification, and they hoped that they would be able to

continue to do so:

> If we get a notification from within the council, we should be able to accept it and not have to have it written in blood. That's certainly something that I would hope we can build on, and to make that data flow much more efficient. Because actually, quite often, speed of response is more important than size of response. People need help *now* and if they get fifty quid now that'll sort them out. But if they've to wait three weeks they need three hundred quid and they're in all sorts of disastrous situations because of that. So actually, being able to respond quickly is really important. That would be the biggest positive probably [local authority Chief Executive]

A representative of the third sector reiterated this sentiment:

> On what we were discussing about sharing information - I have to report, over the last six months, there's been a positive example of how that should go forward on the previous groups that we sat in. It's not just local authority, the Health Board don't divulge much, but then other major players too. For example, in our area it's the local social housing authority... They have been very, very forthcoming in sharing information with the tenants, feeding back to the various response groups. They've been very open, and what that's led to is more interaction with the food banks, more interaction with the services within the local authority, and more interaction with ourselves in terms of grant applications and mobilising volunteers. So, if we can take that example - it's an exceptional period, I understand - but at some point, we will get through this and I hope there's a lesson to be learned: take down these barriers about preciousness of information, because, there's a fantastic example there of the reach by working together

Interviewees were keen to emphasise that accountability was not abandoned but simplified: 'We had a decision log, so we were able to say, "This is how we decided to do this".' [local authority service head]. Regarding emergency food provision, for example,

> There was an audit attached to it – don't get me wrong. Another colleague at internal audit said we'll need to do a 1% audit of everybody that's getting that food to make sure it's going to the right people. And there was a member of staff that was allocated to track finances – to track the money, and the budgeting [local authority child poverty lead]

However, the emergency meant that many organisations were compelled to take decisions which were 'satisficing' for the context and challenge faced rather than perfect (Simon, 1956):

> From our perspective, governance became a much more "fleet **of** foot" activity… Our Board was really clear that they delegated the responsibility for us to think about what was needed and to make it happen… Our thinking was primarily informed by "What is the fastest, good enough project that we can do?" Which, interestingly, I'm told is how software developers now work - you know? Develop the minimum, basic criteria that you can and get it out and then develop on top. So we found that by ourselves! [third sector representative]

In a similar vein, several interviewees mentioned examples of how greater responsibility and discretion was delegated to front-line service providers to make decisions based on their understanding of the situation and priority needs:

> Things that previously you would have to have written a paper, you'd have had to submitted recommendations, you'd have had to do your costing, you'd have had to identify what budget it was coming from, and you would have then went through various committees to get things approved - it never happened. It was delegated responsibility - you've got responsibility to make

something happen with food, can you go and do that? So, we just went and done that [local authority child poverty lead]

Several interviewees mentioned how refreshing it felt to be able to act quickly in this way, as expressed by one third sector representative

> I was quite surprised. Sometimes it can feel like trying to turn the QE2 trying to develop a new service. But we were actually able to literally turn around some of the prescription services in the humanitarian assistance centre, and quickly establish a one-stop shop, establish the protocols around it, the procedures, and communicate it. So it was almost a 24-48 hour turnaround in some of these initiatives, which was just incredible, because you do think it can take months to plan a new service. But this was based on... we just had to be agile, we just had to make it work. Everybody, I think, from third sector colleagues to CVS colleagues to public sector colleagues, everyone was extremely flexible in order to get the best outcome for the people who needed it

The potential positive lessons from this experience were noted by some:

> Overall, I think that sort of delegated responsibility, less bureaucracy, just cutting through, thousands of normal processes that we go through just to make things happen: it worked. The sky didn't fall in... I'd like to hope we can learn from that. I don't know if we will [local authority child poverty lead]

There was a general acknowledgement among those interviewed of the value of local knowledge in informing actions. One obvious and recurring example of this was the expertise within schools which was used to target support to families with children

> The relationship with Education was very, very close to identify vulnerable families. Individual schools had teachers phoning certain pupils because they knew that those certain pupils were ones that were likely to be in a difficult situation - to maintain that contact and to pass information to identify the people that we needed to get support out to [local authority Chief Executive]

Some stakeholders also used more formal feedback systems to gather local intelligence, such as this local authority

> I've benefited from establishing a couple of particular stakeholder forums that have been helpful for the officers to come into them with me. I've got a Parental Sounding Board that I meet every four weeks, 23 parents, councils, one from each cluster. And I've also got a Pupil Forum where I've got 15/16 kids and some staff who meet me, again every 4/5 weeks. And I've also got the ASN schools' parents on the same basis. So I've got three stakeholder forums that I use [local authority service head]

Chapter 2 noted that some local authority staff have a key role to play in addressing child poverty through the frequency and the nature of their engagement with households. Interviews reiterated this point, but extended such positions beyond council staff to include health visitors and family nurses, and key positions within some VCS organisations. These were vital sources of information about families' circumstances, priority needs and feedback about services.

There was also a commitment referred to by some participants to monitoring and reflecting upon their actions to try to learn lessons

> All of us had been asked to submit - and we've done it - a 'lessons learned' document. It was fairly weighty, it had multiple headings, and we had to say what went well, what can we do better. All of those responses went in, and then there was a facilitated session that was held to discuss that… Some of the things that were pulled out were about decision making - processes, systems, cross departments coming together rather than be in our silo structures [local authority child poverty lead]

It is worth noting that none of those interviewed reported any difficulties in securing these kinds of decision-making and procedural changes. Many welcomed

the opportunity which the pandemic afforded to develop new more rapid procedures:

> Clear political leadership, clear corporate leadership. Absolutely everybody singing from the same hymn sheet. No messing about. "This is the administrations priority, this is the Chief Exec's priority, this is my priority, we all agree on it". Bang! Everybody understands in the organisation, and we don't mess about [local authority head of service]

Several respondents conveyed the satisfaction they drew from being able to accomplish changes to problems which had previously seemed insurmountable

> Within hours, not quite, but days certainly, [we] found the resource and the will to get every homeless person into accommodation. A willingness and a resource that has not been available at any point in the last forty years of the issue being problematic... And it's not as simple as that, because just getting people into a hotel room doesn't solve homelessness. But there is something about, you know, that we're taking a huge stride? Because people were just willing to just do it. Someone just said "Just do it" rather than spending a lot of energy and time writing strategies, which is often the way [third sector representative]

Nevertheless, despite such impressive efforts and encouraging actions, it is important to recognise that they were made possible by the extraordinary conditions of the first few weeks and months of the COVID crisis, when there was a clear and agreed need for urgent action. More chronic conditions may not recreate such clarity and unanimity -

> Everything just vanishes and it's all [about] make new missions and get food in. There's just a few things that you concentrate on. We were a reduced war cabinet and didn't need to concentrate on all these other things! That's kind of what happened. It was refreshing, you know. And it's only now that these other things have started to slip back in [local authority head of service]

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3.5. Partnership Working

As the evidence from the previous section demonstrates, one positive effect of the COVID was that participants felt that, on the whole, it intensified and improved collaboration within and between local organisations. There was strong perception among interviewees of 'being in this together' and a sense of shared commitment to making a critical contribution. As one council official put it, 'We worked quite closely… It was a good team that came together… It was community planning at its absolute best.' Although not universal (as discussed below), this view was endorsed across sectors:

> It was the best partnership project I've ever been in. So out of COVID - even the council, they came on strong. Education came on strong, all the third sectors worked together. There was no bitching and it was brilliant. It was brilliant for the sake of the people who needed it. You know - the end beneficiary? And that is a good thing to say. It was really, really top notch [lived experience representative]

> I suppose there is, going forward, a real commitment to a partnership approach with the third sector and more partnership, because I think we've seen a lot of partnerships that wouldn't have happened if it hadn't been for COVID. Organisations working with each other when normally they might have said, "Well, no, that's mine and that's yours, so let's just keep our little bits because that's what we do". But those barriers have been broken down and I think we need to keep those barriers down and we need to keep those partnerships alive and thriving [third sector representative]

One obvious manifestation of this collaborative spirit was the readiness to share resources between departments, organisations and across sectors. For example, some local authorities provided finance to community and voluntary sector

organisations to buy food before Scottish Government support was available. And in some cases the transfer went the other way -

> Some of the voluntary sector gave us money and we bought food for them through our bulk purchasing routes. We got another organisation to store and distribute it all. So we weren't involved in having to do the distribution part of it, because it's not something that we do much as a council. We had a local business that a lot of their staff were on furlough - they stepped in to help [local authority Chief Executive]

Participants also remarked on the responsiveness of partners to requests for assistance, such as one Head of Education immediately giving a community organisation permission to use a school games halls as a food distribution centre. Another third sector representative expressed their pleasant surprise at the alacrity with which the local authority collaborated:

> What was remarkable for me - having worked with the public sector in councils for over a decade - is that we went to the council very early on with an idea of setting up a help-line that would be staffed by [voluntary sector] and council and HSCP officers, and that was given the go-ahead, with council branding and council support and their staff doing the branding for us, for the help-line, in a matter of days. Now, I've been around enough to have done enough partnership projects with local authorities and my experience is months, if not, years of planning before you get to a point that a council would be willing to put anything out with its name on that it didn't develop entirely itself

One interesting feature of that particular example was that the third sector felt it was important to use the name and branding of the local authority on an advice website which the voluntary sector had created, as they believed that this would increase public trust and confidence in the information provided. This is not only indicative of perceptions of the relative credibility of each sector, but the

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importance to effective collaboration of agreeing partners' respective responsibilities.

> The third sector has been absolutely inspirational in this period. They just, you know, their projects started doing things and got themselves some food. And then by the time the council was organised enough to think "Why the hell should we be doing about this?" The third sector had already started. And we then added our weight to that, but we didn't take it over. We just said "Right, you guys are doing a brilliant job here. In fact, we might just get in the road and you're probably doing as well as you are because the council hasn't led it"... This isn't seen as a council lead response but it's a very well council supported response [local authority child poverty lead]

One local authority representative illustrated the kinds of productive relationships that were organised across the country

> A humanitarian group was set up that enabled managers from a variety of services, both internal to the council and external within HSCP. Third sector organisations were involved in that, and some grassroots community groups were involved in that. And that gave us an opportunity to constantly monitor what was happening around COVID cases, deaths, those who were shielding, the needs of those who were shielding, those who were self-isolating, how we were communicating this information, where the gaps where. From that we identified the need to have a one-stop shop telephone helpline, which we also set up on the back of the information we were getting told locally. That was to try and enable those who needed the shielding boxes but weren't maybe getting them nationally – so no one was going hungry

Several interviewees observed that local partners' ability to work effectively was not created overnight – the trust which facilitated effective local partnerships had been developed over time. One local authority interviewee felt that their long-standing collaboration with community planning partners ensured that the transition to emergency response mode was more seamless than other areas: 'I think it is testament to the fact that we've had those relationships in place for a

number of years. There's a level of trust around it and I think that makes a difference'. This was a sentiment shared by several respondents:

> It [COVID] enabled us to work in new ways, but there wasn't an issue about getting to know each other, they all knew who they were, and they were all working together anyway. In fact, it gave us gave us an opportunity to actually co-locate people for the first time and they liked it, they actually liked it [local authority service head]

The urgent need to collaborate forced some new relationships and partnerships which respondents were keen to develop further:

> I suppose the other big partnership that I really should talk about is Public Health… The partnership with Public Health has been unbelievable. It's difficult to see how we sustain that, just because of the volume. But I have to say that has been a real strength of the pandemic for me, and I'm particularly, particularly keen on maintaining that [local authority service head]

Some third sector representatives in particular believed that the experience of collaboration had strengthened their relationships with public sector partners:

> Before the pandemic, three or four years ago, we did have a struggle to get credibility. It's been a concerted effort on our part, it's taken a while before we were getting asked to the table… A good example - I mean there are others – is food distribution in the last six months. We've been fundamental to mobilising that. And they're now planning ahead that and we're heavily involved. So, just by our efforts, all of our partners and staff and third sector in general, we've built a bit of credibility, which is what we wanted to do. And we've also delivered on various projects we've been asked to get involved in. But it needs to continue beyond the pandemic

However, it is important to note that not every area has positive cross-sectoral partnerships. Some relationships have developed rather more tentatively, as one third sector representative described in their relationship with the local authority

> I wouldn't like to think they see us as a *threat*, but they are very precious of their services, and they also might be a bit sensitive about criticism, which, sometimes, we have to bring. But having said that, moving along the road, relations are getting a lot better. They were getting us involved in more things, and that's come a long way during the last six months. So we think we are on the right path in all aspects of public policy

Local partnership working sometimes raises tensions over relative legitimacy and who best represents the community (Sinclair, 2008). Some third sector organisations feel that they are better placed to convey communities' views and what one described as 'ground level practical experience' than statutory organisations. The following statements reflect this view

> I think that we are in the communities, we work with the communities, we know the communities, we know the third sector organisations, we know the priorities and the plans. And sometimes, in my opinion, the TSIs are sometimes a little bit overlooked in terms of the value that they can bring [third sector representative]

> We bring the community element. The word at the moment is 'lived experience', it's what everybody's looking for these days. We try and bring that element of lived experience to the debate. With all due respect to our colleagues in the agencies, they maybe take a more a corporate view to it - it's all budget led, as is everything else. But we try to give a more *real* experience of what's happening on the ground. We feel, and we are, we're in the communities, working with the community groups to look to support people in all kinds of difficulty, including child poverty. So that's the element we try and bring to it. I like to think that it's appreciated by the agencies [third sector representative]

In contrast, local authorities may believe that they are mandated by election, and public sector organisations feel compelled by statutory duties which over-ride what community and voluntary sector organisations contribute to decision making.

These considerations and constraints may require public sector organisations to proceed more cautiously than those in the third sector, and this can cause nervousness among some statutory partners

> Some of the third sector... just absolutely piled into it. And they were really creative and led because they were agile, and they got here faster than the council. And they were just a bit slightly - some of them - were a bit less hung up on health and safety issues than the council [local authority child poverty lead]

In some cases, general unease about the role of VCS organisations became anxieties about the rigour of some of their procedures

> There are lot of volunteers going out who would not be PVG checked [Protecting Vulnerable Groups]. The [established third sector organisation] is checking is all of their volunteers - going through processes that other people weren't. Others are "I'll just get them out there". No! That would be dangerous. People visiting vulnerable families, especially older people, they are not going to distinguish. Now, nothing happened, but it could have done [local authority service head]

These sentiments were not exclusive to public sector participants, some of the more established third sector organisations also expressed reservations about some of the conduct and competence of voluntary and community groups

> I think it's probably safe to say - and I don't mean this as a criticism of the third sector - as well: there will have been poor governance in bits of the sector. I know that some organisations that we've seen have strayed probably further from their purposes than we would've anticipated... was reasonable [third sector representative]

It is therefore unsurprising that some third sector and community organisations were not optimistic about their relationship with some public agencies: 'If we look at the local authority here, and I know the strains that has gone on, but there

seem to be certain officers, it's like a tunnel vison. There's still silo operations'.

One third sector representative felt that the local authority regarded having to

deal with them as something of an inconvenience.

In one area included in the study, the relationship between the local authority and

a community organisation had broken down. The reasons for this are difficult to

unravel without further investigation, and may be due to particular circumstances,

but it has to be acknowledged as an unfortunate case of partnership failure. The

third sector representative interviewed felt that the local authority had been

recalcitrant and deliberately obstructive

> We just feel we're in a position, where we can't say anything. I
> can't say anything to them - they know best. They don't want to
> listen to us... I know that through COVID they do respect some of
> the work that we've done, because we really ramped it up during
> COVID. But they just don't respect our opinion. There's no esteem.
> We're not on a level playing field as professionals

Unsurprisingly, the local authority took a different view of the situation. They felt

that the rush to provide support to vulnerable households in their area had been

disorganised and led to misuse of resources through duplication:

> Once that funding became available, it was like a free for all. We
> had organisations set up that weren't set up before. People
> decided they were going to set up food banks, and it was really,
> really difficult to try and have just - even from the element of
> safety of our community - to try have a handle on exactly what was
> going [local authority child poverty lead]

It is difficult to infer general lessons from what may be a specific episode, other

than to reiterate that effective local partnership working involves effort and takes

time, and this was not an option in the initial stages of the COVID crisis.

3.6. The Role and Capacity of the Third Sector

This particular case aside, the majority of interviewees cited examples of the positive contribution which community voluntary sector organisations made to addressing the COVID crisis and its impact upon families and children vulnerable to poverty. As one local authority Chief Executive concluded 'It was evidence on the ground that big community still exists. If the ask is right, the community will step forward.'

One particular strength of the third sector which respondents valued was their capacity to be flexible and respond rapidly to demands, as this statement from a third sector representative summarises

> We're very flexible. I think that's why we were able to respond in speed - we could because, I just kept the trustees informed of what mad plans I was up to and they were quite cool with it. We set up this network of charities - so that was quite helpful and I had a link into somebody at the Council who I've gotten on quite well with, because they're sort of gatekeeper. That's the key - so that you're not all trying to do the same thing because there's some sort of coordination. In fact it was really quite coordinated, so that we knew the part we were playing, and we could ask for help when we needed it

In some areas, particular VCS organisations became nodes co-ordinating local partners' work

> A lot of our priority was around that kind of light touch
>
> coordination, for want of a better word, of the sector. So we set up

an online directory, where people in organisations could find out what else was happening. We set up a telephone line originally, very, very early on, in partnership with the council and the HSCP. That was before the shielding plus lines were set up by the Scottish Government, so a little bit of overlap there. But we set that up very much early on so that people who were struggling, had a place that they could lift the phone to and say "I'm not able to access, can someone find me somebody that can help me?" So it's very much, for us, focussing on helping people to find the support that the third sector was offering rather than seeking to directly offer support ourselves [third sector representative]

This is just one example of a VCS organisations being able to act quickly and decisively with the trust of local partners.

The COVID emergency required many voluntary and community groups to rapidly redesign both what they did and how. Like many organisations, the third sector had to adapt their services to comply with lockdown restrictions

I know that a lot of the third sector providers very quickly tried to evolve their service model and look at how they could still continue to support vulnerable families, whether it was using a blended approach or telephoning where possible. I know that the volunteers stepped up in their roles as well to support that effort [third sector organisation]

Several VCS organisations also had to make more fundamental changes to their activities -

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> We saw organisations that completely pivoted. So they were doing something completely different to before and just went: "You know what, what we were doing before is not needed right now but we can be over here doing that". So we saw a whole load of organisations, particularly on the food agenda, a whole load of organisations that just went: "We can't do what we normally do but the folk that we work with and the folk in our community don't have food in their fridge so we're gonnae focus on that for a bit" [third sector organisation]

For example, one established VCS organisation described how, because of their strategic position within their community they became one of the principal food distribution organisations in their area, despite never having previously performed that role. That is one of several examples of how innovative VCS organisations and effective have been during the COVID crisis. Other similar cases are worth noting, such as this example of innovation in accessing and distributing food:

> The logistics was a bit more than that, trying to get a hold of pasta. I was contacting, phoning everybody and their granny. And then eventually I started phoning restaurants, because restaurants were closed. And I got this guy - I've got him on my phone, I canny mind his name, but he then started supplying the pasta for us. Because he was a pasta supplier to all these restaurants which were closed. So getting pasta was not hard for us! But for other organisations, it was, it was really hard. We ended up having pasta coming out of our ears - honestly! [lived experience representative]

In another case a local third sector organisation used its status as a trusted source to direct emergency financial support to a family in need -

> There was a case of a family who were expecting a baby and for whatever reason, I can't remember the details, they had nothing at all for this baby coming any day. They were able to access a grant, but the grant had to go to an organisation, and at short notice we decided we would be that organisation. We would apply for the grant on that family's behalf and get them access to funds to buy bottles and a cot and everything that the baby was going to need.

> We really just did what we had to do, as I suppose every
> organisation did [third sector organisation]

These kinds of irregular, imaginative improvisation are perhaps less easy for some public sector organisations, which may feel constrained by procurement regulations and other accountability requirements. But they illustrate the distinctive contribution which an effective VCS is able to provide.

Some third sector organisations were able to bring additional resources to their communities through bidding for charitable or government funding. In some cases the sums involved were substantial -

> The Scottish Government money only went so far, but we raised,
> about another £500,000 from charitable trusts. You know,
> donations? ... We raised a lot of money. So, for example, our
> turnover is about normally about £1.5, 1.6 million, roughly. We're
> going to turn £3.2 million, this year. That's all to do with COVID.

Despite such successes, some VCS organisations (and their partners) were concerned about the demands they faced and the impact of COVID on their resources and future viability. Several participants acknowledged that the capacity of the third sector had been severely stretched by the crisis. Most VCS organisations rely upon considerable investment of time from volunteers, and the demands placed upon them by a prolonged emergency may not be sustainable. The problem is made even more serious by the impact of the pandemic upon the income of many third sector organisations. As one representative explained, the sector organisations principally rely upon three main income sources: (i) donations, (ii) trade and services, and (iii) grants. All three have been hit by COVID – public donations are reduced as many people have less disposable income. Government

grants may be reduced if spending cut-backs are imposed, and there are additional knock-on effects

> Bear in mind that many of the independent funders will have less money. So a really practical thing: the Lottery didn't sell many face-to-face tickets for the first three months of lockdown, so that's a quarter of their income. Usually the majority of their income is from face-to-face tickets rather than online… [In the first] quarter of the year they lose that, that's a significant impact there [lived experience representative]

Finally, many VCS organisations sell services (e.g. to local authorities or housing associations) which have already or may be reduced. And much of their trading income – such as leasing facilities – is based on direct face-to-face provision in deprived communities, which cannot be easily shifted online. Several respondents therefore were concerned that, as the pandemic continued, the third sector would face increasing demand with fewer resources.

3.7. National Policy and Support

Participants were asked their opinion on the information and resources provided by government to fund their actives in response to the emergency. This solicited several positive responses:

> It was fantastic, obviously, the amount of financial support that we received from the Scottish Government. It enabled us to do things that as a local authority we probably we couldn't. It allowed us to

> support the third sector to react very, very quickly to what needed [to be] done. So having the financial support was really good. We had a couple of national meetings where we could highlight and discuss any challenges that we had locally [local authority child poverty lead]

In addition to financial support, several interviewees welcomed the guidance and advice they received from the Scottish Government. Several interviewees spoke positively about the regular, clear information provided and the flexibility they were accorded, including government temporarily waiving some regulations to allow local partners to act quickly. The following quote illustrates this sentiment:

> I think that the guidance was good and it was early and there was enough flexibility in it to allow local partners to do what they needed to do. I've got the feeling that it was as light a touch as we seen for decades and I'd like to think you can trust us to do that [local authority child poverty lead]

In particular, some respondents praised the responsiveness and flexibility of government to requests to vire funding to address urgent needs:

> I had to ask the Scottish Government, "Can I use the funding which we have been allocated that we can't use for youth clubs, adult clubs, family clubs, blah, blah, as everything has closed down, can I use it for COVID response?". And the answer was, "Yeah". And every funder said the same thing. So that was great, as that then allowed me to unfurlough staff [third sector representative]

One local authority Chief Executive made a similar point about being authorised to reallocate Pupil Equality Fund and Attainment Challenge resources to emergency COVID measures.

Several participants also expressed positive views concerning how emergency funding was allocated. One local authority service head highlighted the benefits of prescribing funding for specific purposes, and

> … the fact that it has to be spent on [specific purposes]. We actually kind of welcomed the government surrounding, because than we could work with partners and say, "Here are the outcome they were giving us for this". So, in a way, it clarified it, but I know a lot of people found it bureaucratic

One third sector representative endorsed the procedure of allocating funds through a selected local organisation:

> The model was really interesting. The idea that you give money to an anchor organisation who would then bring together the different players in that community to respond. I think the underlying model… that you give the money to an anchor organisation in a community is really strong.

However, some less positive comments were also made both about the 'information overload' from national government, and how emergency support was distributed. One health official remarked on 'The sheer amount of guidance [that] has come out from everywhere probably means that many of us haven't read half of it'. This complaint was not exclusive to NHS or Public Health officials. One local authority service head reflected that 'I suppose the lesson I personally feel I've learned is, when you're in a crisis, you want to get simple messages, clearly articulated'.

In addition to the volume and clarity of information, several interviewees complained that they were not always provided with sufficient notice of national policy changes which they had to implement or explain to the public. Examples

referred to were changes to regulations on some services closing (and then reo-

opening), and to policy on shielding: 'There was no notification that they were

doing that. They never told us they were doing that – even in our daily calls they

never told us that. They even sent a letter to everybody that was shielding, telling

them that it was coming to an end, and they never told *us* that' [local authority

official]. Another interviewee remarked

> I think there was definitely a breakdown in communication and
> sharing with the local authority when decisions were being made to
> contact members of the public. Things like, at the beginning –
> "Contact your local authority for help". We were like, "What?" For
> prescription pickups and things – we didn't know that was us. And
> then we're scrambling about, trying to figure out *how* we would,
> with staff in lockdown. Also, knowing that to get into someone's
> house, they'd have to have a full PPE attire… [local authority child
> poverty lead]

Local authority staff also reported that the conditions on some funding allocated

were inconsistent and unclear

> The guidance is always lagging. You were making assumptions. You
> thought you knew what the guidance is going to say and you were
> then starting to spend money, but you were then finding out,
> actually they've put quite tight restrictions on some of it. So the
> first lot of funding we got, we just got allocated it and you were
> just allowed to spend it. The next lot of funding we got, you
> actually had to spend and then claim, you could only get what
> you've claimed for… And then this one we've been told that we're
> getting money for food and fuel but we've still not got any
> guidance. So we're making assumptions that some of the things
> we've previously spend it on we can, we're just rolling that forward
> and hopefully it will be fine. But we have had feedback about
> certain things, "Oh, you can't use that for this". So we've had to
> find other funding [local authority Chief Executive]

However, the principal criticism made of some of central funding provided was the

claim from several participants that it was misallocated and mismanaged

On a negative side, the way the government managed the funding, was a disaster. Local government delivered, across the country, but [the Scottish Government] put loads of money in the third sector when I don't think they had the knowledge of the third sector within local areas to do that effectively. And my understanding is now they're going back and taking a lot of money back off the third sector because they didn't put it in the right organisations. The third sector [were] offered money, so they were trying to do stuff but actually it wasn't their skill set, so it was inefficient and actually slowed down… If [the Scottish Government] had just given the money to local government, local government would've done what they needed to do - made sure it was done but they would've brought the third sector in to do it as, as we did. We should've controlled all of that money. And we told Scottish Government that, but they didn't believe us. So that would be the big lesson to learn [local authority Chief Executive]

A recurring a point advanced by local authorities was that they should have been more involved in the allocation of funds to local initiatives. The failure to draw upon local expertise led, in the opinion of some respondents, to what one local authority child poverty lead described as a disorganised 'free for all', where councils were unsure 'who was getting funding to do what - who was getting funding for food, and who was getting funding for mental health services'. A different local authority official reiterated this concern

The Scottish Government decided in their wisdom to provide funding - open it up to anyone to apply. So what we found then was a lot of our third sector organisations started applying, without any coordination, without any joint focus or joint outcomes. They just started to apply for funding then started doing whatever they wanted to do anyway. And this was not about the local authority having control. It was about being able to coordinate what was happening, being able to coordinate who was receiving support and where the gaps were

The possibility that such criticisms may be self-serving on the part of local authorities are tempered by the fact that they were not the only participants to voice them. Other local strategic practitioners also felt that they had been sidelined in a process to which they could have usefully contributed. One third sector representative expressed an opinion aired by several others: 'I think they possibly overlooked to some extent the role of the TSIs and how well the TSIs know their own communities' when it comes to where additional funding is most needed. Even those who felt that the principal of selecting local 'anchor' organisations to distribute money 'was really strong' (as noted above) still believed that this model was badly executed. For example, 'The flaw comes invariably when people assume that, because a housing association could be an anchor organisation, doesn't mean that *every* housing association is a suitable anchor organisation' [third sector representative]. The outcome, according to those who voiced such criticisms, was that some 'weird' local organisations were chosen to distribute funding, leading to questionable choices and poor outcomes

> It was meant to be about community anchor organisations, and there was assumptions made therefore that certain organisations would be community anchors. Blatantly, we would've. We would argue that if you want to know who the community anchors are in [name of location], come and speak to us and we'll tell you who the community anchors are. Instead, what we got, was seven different partners, randomly choosing organisations. We saw overlap, we saw organisations being contacted by two partners, we saw communities not get anyone contact them [third sector representative]

As a result, respondents from all sectors claimed that there was duplication and wasted of resources in some areas:

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I think a lot of money was wasted. We saw a lot of money going into food in the area. I speak to colleagues in the sector and they tell me literally about food just being abandoned on doorsteps, that they over-supply [third sector representative]

People were phoning us to say, "I'm already getting my food parcel". Their housing association was doing it as well, so there was no co-ordinated approach. Looking at whereabouts they were based, in the area, *who* they were supporting, *how* they were supporting them, was it mental health, was it activity, was it digital, or was it food? It all felt just a bit, up in the air [local authority child poverty lead]

Part of the problem, according to several participants, was that the urgency of the emergency meant that the decision to provide additional resources was – for understandable reasons – hurried. As a result 'there was too much money to get out too quickly' [local authority service head]. Several interviewees felt pressured to spend money more quickly than they would have liked or thought was suitable for the situation: 'I just wonder if it could have been done over a longer period to match the actual need' [local authority official]

The Wellbeing Fund just felt like money out the door. I'm sure lots of it was spent on good things, but from a [name of area] perspective we were sitting locally, talking to organisations, talking to the council and just going "This is madness", you know? And it was huge amounts of money which had to be spent in three months, amounts of money which the sector tells us, quite openly, they could've done eight, nine months' worth of work with if they were allowed to spend it over a longer period of time. But, just you know - "We'll just throw it and deal with it!" [third sector representative]

Some local authority officials interpreted this as reflecting centralisation tendencies in national government and a lack of trust in local authorities:

> The Scottish Government like to be in control. I think there's probably a certain amount [that] they thought they would over-burden local government and that they could do it directly. Or that they thought local government would use the money for something else. Which, to be working in local government doesn't really make sense. We're far more attuned to the needs, because if we can sort out a problem here it actually saves us having another problem further down the line. If we can deal with a family and keep them safe and secure then they don't present as homeless, or they don't present in some other situation. So it's in our benefit to make sure we do deal with situations as best we can [local authority Chief Executive]

Among the lessons which some respondents offered from this experience was that a more rigorous test of fitness should be applied if local anchor institutions are to be used to distribute funding. This should be based on a transparent assessment of which organisations best understand their communities' particular circumstances and needs

> I think that we do need to really think about, in future, if there's going to be food provision for example - how is that best coordinated? How do we think about what is needed in which communities and which third-sector organisations are best to deliver that? Rather than just, you know, punting money to organisations that happen to put in an application. So I think there's some challenges there and some learning in that [third sector organisation]

3.8. Lessons and Priorities for the Future

Towards the end of the interview, participants were asked to reflect on their experience of responding to the COVID crisis to date, and consider whether it had affected their views on child poverty and future priorities. Responses to the first

question fell into two broad categories. The first group felt that the pandemic reaffirmed what they already knew about local conditions and child poverty:

> We keep talking about the impacts of COVID, and there are definitely impacts of COVID, but I don't think any of the problems that COVID have highlighted weren't already there, or shouldn't have already been on our agenda. I don't think that suddenly things came out of nowhere, I think it just highlighted and aggravated *all* of the same issues that we had - from the basics of food, and fuels, through to attainment gaps through to schools. So it's not that I think any of those weren't pre-existing problems [head of health]

An alternative view was that COVID had been a revelation, if not to them personally then to large sections of society which had previously been unaware of the difficulties faced by many communities and households. For example, referring to what they described as the number of households 'really struggling financially', one third sector representative believed -

> The pandemic and lockdown blew the cover off it, *it absolutely blew the cover off it*. I think the statutory bodies and statutory organisations thought they had it in control and they really didn't. I think part of the reason I think it's a national issue was the schools closure. The closure of schools and families just didn't know where to go, didn't know where to turn to, which I think was a shock for the statutory sector. But the strange thing - it wasn't a shock for the third sector. So lessons have been learned locally about that. But these are the only words I can use to describe it - it really blew the cover off

Irrespective of how much of a revelation they felt that COVID had been, all respondent agreed that the pandemic had worsened conditions for many lower income households and made the challenge of addressing child poverty even more difficult.

Participants' principal concerns and future priorities covered both substantive concerns and policy processes. Thinking beyond emergency measures, such as food provision, the main medium and longer-term concern mentioned by most participants was employment. This is unsurprising, given how prominent job quality and pay levels were among the perceived causes of poverty (Sect 3.1.2). Participants generally agreed that low pay and irregular, insecure work remain chronic problems, as this vignette offered by one local authority Chief Executive illustrates

> It was really clear that this family's problem was... they were working poor. The father in the family worked for a large supermarket retailer, but had a 10 hour contract. Now, most weeks he didn't work 10 hours he worked 30 or 40 hours and the family were absolutely fine. But on the weeks where he only got his contractual hours, they were in trouble. And the reality was they didn't have enough spare - there wasn't enough resilience in the family budget to cope with the down weeks. They got by when he had the full hours, but they really struggled, and that's actually the issue - the issue was a crap job

The response proposed to resolve this problem was 'better jobs paying a living wage… and people getting proper contracts'. However, most participants were concerned that the labour market effects of COVID made this less likely. As one local authority Chief Executive put it 'All the predictions are that unemployment is going to go through the roof'. Several respondents were anxious that this would be particularly serious for and damaging to younger people (especially those less qualified), many of whom who faced bleak employment prospects. A number of respondents had already given some thought about measures to try to address this by increasing employment training, as in the case of this local authority service head: 'With the unemployment coming towards us, we'll probably put a lot more

of our energies, and maybe direct money into things like apprenticeships, and bring people out of their circumstances'. However, several respondents felt that their capacity to improve employment prospects in their community were limited and that a national strategy was necessary.

A second issue raised by several participants was the deleterious effect of the pandemic upon mental health. The pandemic not only directly impacted upon many people's mental well-being (e.g. through anxiety, financial worries and enforced isolation) but also meant that some support services were cut back or withdrawn. The effects of this double blow on those already vulnerable were highlighted by several interviewees

> The social challenges off the back of COVID - how do we support people whose social care has been withdrawn? How do we support people whose social interactions have been removed from them? How do we support people whose mental health has suffered? We're speaking to mental health organisations who are saying that they are now starting to see people coming to them with clear signs of trauma from COVID. So they are now in that place, that that is a thing [third sector representative]

Some participants related this mental health crisis to the impact of the pandemic upon employment prospects

> Mental health is one of the national priorities, and was a priority in our strategy, but it needs to be a *real* priority rather than just on paper, going forward. I think that will be crucial, young people - young people's mental health. Particularly given what the employment situation might be, or how much education, even university education they might have lost [head of health]

A third substantive priority which several participants identified was digital connectivity. This was obviously an issue that immediately arose in the first

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lockdown and to which local partners responded urgently (Sect 3.2). However, several respondents felt that a longer term strategy was required in the likely prospect that there will be a greater reliance on digital access in the future -

> Digital inclusion came up. That was high up the agenda for us going in, because we weren't like some of the parts of the country that had a lot of money [and] had deployed digital devices. So quickly, we've done a lot of stuff on that over this last period. And obviously trying to get teaching up and run digitally as well, just in case we get into the blended learning. Because it's the most deprived areas that are most effected by those sorts of things. So that's definitely been fast tracked [local authority Chief Executive]

Digital inclusion was identified not only as essential to address educational inequalities but also necessary to improve access to welfare benefits and social services. This was part of a more general revision of welfare provision which some participants advocated

> Obviously, it's going to take a lot of money to support families that are living in poverty – that's a huge thing. But I think there's an opportunity for services to really look at the processes they've got. We make things so difficult for people to be able to access the benefits they're entitled to... It's things such as, for example, trying to get the automation of School Clothing Grants or even EMA. I just don't know why someone has to fill out the same form a half-a-dozen times – if you are entitled to the money you should be entitled to the money... So I think there is something to be done around processes. People need the money, they get the money they're entitled to. And I think we need to put an element of trust - that people get that money and they spend it on what they need and who are we to judge what that may or may not be? So I think there is work to be done around there [local authority child poverty lead]

Part of the issue was about sharing data (discussed above), but there was a deeper question of how organisations conceived of citizens' entitlements and whether a more pro-active approach to providing these was possible. For example, one local

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authority official responsible for child poverty suggested that any apparent under-spend in a service area should not be regarded as a lack of demand but a failure to ensure uptake, which ought to be addressed:

> We are looking at how we ensure the Welfare Fund is going to people who need it. If you look at the data, we've got funding that is left at the end of each year in the Welfare Fund. So, if you're a Chief Financial Officer that indicates that there isn't a need, whereas if you talk to someone from advice services, they say the need *is* there, they just don't know how to get over those barriers. So we are looking at how do we provide training, to any front line member of staff - whether that is any council member of staff, HSC, or the third sector - so they know the trigger questions to ask. And they know how to handle – not just refer – but take someone to the next stage, talking to services and organisations so they get what they're entitled to

Participants from all sectors referred to the need for similar more creative endeavours promoting access to and uptake of support, rather than being constrained by regulations

> Authorities have the means legislatively to provide vouchers and other means of support. I'd like to see more innovation in that sense - which is not always by an application process, or by advertisement, because that requires self-selection [third sector representative]

One widespread sentiment of a positive lesson that could be taken from the experience of dealing with the COVID emergency was that it afforded an opportunity to reform some processes and services. Third sector representatives in particular hoped that the partnerships forged or reinforced during the crisis would continue, and that they would be more involved in making rather than merely delivering policies -

> I think it's imperative that third sector organisations, member organisations and community groups who support families and

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work in this area are consulted, are included, are part of the decision making process. Their knowledge base is invaluable to the statutory bodies that make the decisions, and I think they should be recognised as they're not just organisations that provide support, they are the future. They will redesign the service if they're listened to. And they should be more recognised and be given a bigger role to play [third sector representative]

To enable this, some VCS organisation representatives wanted to see more transparency and have a greater say in local decision-making

I think you need agencies to be very open about the monies that they received, and what that money was being spent on, and that needs to be shared. In *true* community planning fashion, we need to know what the budgets are, and we need to then prioritise them as a collective, based on analysis and research and data. I think that agencies naturally, especially in the current economic situation, are very protective of resources, and how they're deploying these [third sector representative]

Participants were uncertain about whether it was possible to maintain momentum on tackling child poverty. One reassuring response from several NHS/PHS participants was that (as one respondent said) 'child poverty is right up there' in their thinking and strategic objectives. In some cases, this message required further reinforcement:

I think what COVID changed is that we really need to fight as much as possible for *more* focus in these areas. I think, within the NHS, probably trying to get more buy-in from people [so] that it's not about us chipping them along to help us with child poverty. They really need to take a bit more ownership for it. I think we quite often educate people, health visitors, and maternity services et cetera, to try and get them to take more ownership for this. But I think we do need to try and get that much better embedded, as opposed to an ask on our behalf, "if they wouldn't mind" [NHS official]

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However, it is encouraging that the health professionals interviewed expressed their commitment to maintain and extend education about child poverty among staff who are in a position to make a crucial contribution:

> One of the things we have *really* driven forward within COVID, and we will do before COVID and post COVID, is the e-learning modules around child poverty - ensuring that our professional staff and our community workers have a good understanding of what child poverty is and how it impacts families. Just to make sure our staff are aware that sensitive conversations are taking place [NHS official]

Despite the unprecedented challenges which local partnerships faced in responding to COVID and supporting families with children, there is evidently a commitment among many local strategic practitioners to learn what they can from the experience.

Chapter 4: Drawing Lessons

As a recent Joseph Rowntree Foundation report observed 'the coronavirus storm has unleashed strong currents sweeping many people into poverty and others deeper into poverty' (2020: 1). However, the pandemic also provides a rare opportunity to make significant changes, and as Public Health Scotland stated 'We need to do things differently, if we are going to be successful in creating a Scotland where everybody thrives' (2020). This project aimed to identify what aspects of local policy-making, leadership and partnership working in response to COVID could and should be preserved, developed and promoted. Several studies of the response to the COVID crisis have noted a widespread desire that there should be no return to what was 'normal' before, nor to the conditions which lead to and exacerbate child poverty. There is a sense that change is needed, and that the COVID crisis has created an opportunity for reform that should not be squandered:

> I hope we have learned some lessons from COVID. I'm definitely speaking to an awful lot more people than I would've in the past around how we can make sure information is out, how we can change our processes, how we can make things easier, and that's definitely happened. But I just think if a pandemic doesn't change our processes or change our thinking then, we've kind of lost the plot a bit! [local authority child poverty lead]

The response to the challenges which the pandemic threw up demonstrated to many local leaders what can be achieved at speed and scale when the need arises and energies are focused: 'I think we should take a lot of learning from the fact that we can do things when we're really motivated to turn things around quickly, we can turn them around quickly and it's evidenced' [third sector representative]. This idea of positive possibilities was widely shared among those interviewed:

> We live in a place where poverty, suicide, addictions, homelessness kill far, far too many people every single year and we don't move at that pace to stop those deaths… But suddenly there's something different about COVID that has meant people being willing to move quickly to save lives and to do right thing, and yet we struggle to do that in other areas [lived experience representative]

One local authority service head provided an insightful example of the kind of radical change that the pandemic had prompted, and what is possible -

> COVID demonstrates to us all that - well, if you think of the simple things. If I were to say to all 32 authorities, "As of next month, 80% of your operating budget for travel, accommodation, training is now going to be stripped out, and we'll then get rid of all these expensive buildings because you can work from home or spare capacity", there'd be an uproar. COVID happens, and we're all working from home!

However, it is important not to become rosy-eyed about the implications of COVID. If the pandemic shook up some ideas of what was possible, it also piled problems upon struggling communities and vulnerable households while curtailing the resources required to respond. It is, in the words of one local authority official a 'perfect storm. It's something you can't PR positive your way out of'.

The literature on child poverty makes frequent reference to the need for a 'step change', often without clarifying what this entails. Countries which have the low levels of poverty aspired to in the 2017 Child Poverty Act have very different macroeconomic, labour markets and fiscal systems from those which currently exist in Scotland. The step change required to move in this direction is clearly beyond the capacity of local leaders. Nevertheless, they can make important changes to processes and policies using their existing powers, and such changes are required to make a meaningful difference to childrens' prospects.

Child poverty is the archetypal complex and 'wicked' problem, i.e. one which is multi-dimensional, dynamic, contested, context-dependent, and with emergent properties which cannot be reduced to direct causal factors (Rittell and Webber 1973). There are no technical solutions to wicked and complex problems. Indeed, the terminology of 'problems' is itself misleading, as it suggests a discrete and fixable issue, when it is more appropriate to think of altering conditions. Complexity does not mean that issues should not be addressed and cannot be improved. The impossibility of perfect solutions should not deter improvised improvements. These require collective intelligence and collaboration, as the competence and capacity to effect improvements goes beyond any particular actor or organisation. 'Wicked Problems require the transfer of authority from individual to collective because only collective engagement can hope to address the problem' (Grint, 2008: 13). In short, tackling child poverty requires partnership; hardly a new finding. Partnership working requires trust, as it leaves organisations vulnerable to the potential mistakes of others, which understandably makes some statutory partners uncomfortable. It seems easier, less risky, perhaps even more effective to retain control of resources and policies. However, when faced with a challenge of this scale, continuing as before is not an option – it was not having the required effect before the COVID pandemic and it certainly won't be enough to meet the challenges it has raised. Therefore, there is more risk involved in *not* being innovative:

> The council find it difficult enough dealing with ourselves, helping
> out as charity. They couldn't cope with some people wanting to
> help and giving out food and things like that. They just see

everything as a risk. But I think in these days, it's just a different world, you have to take a different attitude to risk. So there needs to be some guidance as to how we work with people because it's going to be essential, I think in the future, that we do bring everyone into the fold [lived experience representative]

What is required is sharing power and resources, delegation, experimentation and innovation – including the willingness to make mistakes and courage to apparently 'fail' on occasion. Because the opposite of any such 'failure' and eschewing risk by doing more of the same is not 'success' but merely managing chronic ineffectiveness. The essential feature is to learn from any such failures and share these lessons with others: 'Innovation is essentially a matter of learning. In fact, one critical insight that we have drawn from our research is that effective organizations approach innovation not with an expectation of success but with an expectation of learning' (Seelos, and Mair, 2016).

A positive findings from this research is that some of the conditions required to take the necessary step-change are already in place in Scotland. The principles and recommendations of the Christie Commission (2011) and key elements of what has been described as the 'Scottish Approach' to policy-making provide a foundation upon which local leaders and strategic practitioners can build (Ferguson, 2015)[8]. Upon this foundation there is the resource of the evident devotion to public service and commitment to the common good demonstrated by the extraordinary efforts of public officials, third sector organisations and a mass of volunteers who came forward from all communities in Scotland to help their neighbours and

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[8] Among the relevant features of the 'Scottish Approach' to policy are 'network governance and distributed leadership', partnership working beyond discrete 'silos' of responsibility and a focus upon outcomes rather than inputs (see Eliot, 2020: 285).

strangers. The shared experience of vulnerability and social mixing compelled by the Second World War opened many people's eyes to the scale and nature of social problems, and this was crucial in the resolve to address them together (Glennerster, 1995: 3). This formed the basis upon which the main institutions of the welfare state were constructed. From war came welfare, from COVID there could come a new spirt of community and commitment to end child poverty.

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