

Promoting Financial Wellbeing

The Sunderland Financial Wellbeing Strategy 2023-2026



Key Points

The current cost-of-living crisis is not just a temporary economic squeeze: it is a **long-term public health issue affecting the whole population**. The impact on health and well-being has the potential to put it on the same scale as the COVID-19 pandemic, which had already exacerbated existing inequalities.

The cost-of-living crisis requires an urgent public health response to mitigate the effects of the immediate crisis. **In the longer-term** it requires actions to tackle the underlying causes so that health, well-being, and inequality are improved, and individuals, families and communities are supported to be more resilient to economic challenges.

People's **wages and welfare payments are not keeping pace with rising living costs**, especially the costs of energy, fuel, housing, and food. Businesses and public services are also seeing their **budgets go less** far in the face of rising costs. This is referred to as the 'cost-of-living crisis'.

The crisis means more people are unable to afford the essentials, which has **significant and wide-ranging negative impacts on mental and physical health**. These can have **long-term consequences** for the people affected and the systems and services that are needed to support them.

What we are doing at Sunderland City Council

- A focus on health and wellbeing support
- Income maximisation (including specific support on energy, housing and food costs) money advice and debt support
- Efforts to reduce fuel poverty and the impact of cold homes, prevent homelessness, promote healthy eating, ensure equitable public service access and protect against social isolation
- The Council as an employer supporting staff wellbeing
- Safeguarding against an increased risk of violence and domestic abuse
- Ensuring all Services are prepared, ready to respond and support residents, informed by research into 'Lived Experience' in communities
- Understanding and building on the digital inclusion landscape to support people's financial wellbeing
- Learning, skills and employment support across all age groups
- Supporting vulnerable people and those at risk of homelessness or already homeless
- Energy efficiency measures and a shift to affordable, green energy
- Improving housing availability, affordability and quality
- Developing healthy and sustainable local food systems
- Encouraging active, low-carbon travel and public transport
- Promoting fair work
- Violence prevention initiatives
- Enhancing support for parents to address common family stressors
- Poverty proofing strategies
- Enhance financial inclusion and wellbeing
- Supporting children, young people & families to maximise control in their lives
- Taking a flexible approach and adapting to local and national changes and influences

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1 Foreword

We are pleased to share this Financial Wellbeing Strategy, which brings together the significant contribution of services across the City Council, to mitigate the effects of the cost-of-living crisis on Sunderland's communities. It sets out the support in place to help residents to manage through the current economic challenges. It describes how council services and partner organisations can all work together to develop sustainable long-term actions that will support communities and reduce inequalities.

The City Plan sets out our ambition and priorities for the city up to 2035. This Strategy is complementary to the City Plan's Vibrant City Priority to; Understand 'Lived Experience' and work with communities to develop aspirations, identify and utilise community assets. These are vital to the long-term actions required to tackle the underlying causes of inequalities and to improve community health, financial wellbeing, and resilience.

The local context for our work is that we have some of the most deprived wards in the country. Indices of Multiple Deprivation (IMD) figures for 2019 rank Sunderland as 33 of 317 councils (with 1 being most deprived). IMD figures are a stark reminder of the difficulties many residents face, including social and economic exclusion as well as lower life expectancy than the national average.

We have a duty to address inequality for all residents and the Financial Wellbeing Strategy will help us to deliver this, in collaboration with City partners, the voluntary and community sector and residents themselves. Through Sunderland's Engagement Strategy 'Let's Talk' we will make sure that residents' views are listened to and taken account of in everything we do.

This Strategy demonstrates the commitment across the City Council to support Sunderland's residents in the long-term, through core service delivery and future ambitions, such as our work on improving digital infrastructure and digital inclusion; learning, skills and employment support across all age groups; information advice and guidance, ensuring that all communications are accessible, clear and understood by all residents.

Understanding and responding to 'Lived Experience' in all our activities is a priority within the Strategy. This will ensure we "work with" our residents and communities. This will provide our best opportunity to encourage residents to participate in identifying and utilising community assets, so that together we can work to improve the Financial Wellbeing and resilience of all residents.

Councillor Graeme Miller
Leader Sunderland City Council

2 Sunderland City Plan

The City Plan (2023-2035) has three key themes:

- A dynamic smart city
- A healthy smart city
- A vibrant smart city

Health City Plan

The vision for our Healthy City Plan is:

**“Everyone in Sunderland will have healthy, happy lives,
with no one left behind”**

The Healthy City Plan focuses on tackling the social determinants (the causes of the causes) that influence health throughout the life course. The priorities in the Healthy City plan are:

Starting Well: giving every child the best start in life; and enabling children, young people and families to maximise their capabilities and have control over their lives.

Living Well: creating fair employment and good work for all; ensuring a healthy standard of living for all; creating and developing healthy and sustainable places and communities; and strengthening the role and impact of prevention.

Ageing Well: strengthening the role and impact of prevention for older people.

This *Financial Well-being Plan brings together actions that address inequalities. It has a focus on vulnerable and at-risk populations and communities.

3 Purpose of Strategy – From crisis support to supporting resilience

** **Financial Wellbeing** is a sense of security and feeling as though you have enough money to meet your needs. It is being in control of your day-to-day finances and having the financial freedom to make choices that allow you to enjoy life.*

The Financial Wellbeing Plan describes the ways in which the cost-of-living crisis impacts the health and wellbeing of Sunderland’s communities. It identifies actions to mitigate these impacts in the short and medium-term. It considers long-term actions that improve health and wellbeing through supporting financial resilience for individuals and in communities. Promoting community resilience and connecting community assets will also provide more effective ways to provide services in communities.

The following model sets out how we can improve financial resilience and wellbeing by providing support and services at appropriate levels for all residents with a focus on the most vulnerable people and communities.

Within us	Between us	Beyond us
<i>Some individuals are just more resilient or have advantages that mean they can find and use information and support</i>	Some individuals can act on information, support and advice provided informally in communities by friends, neighbours or community organisations	Some individuals need more support to be provided by professionals or experts – a smaller number of individuals need this higher level of support
<i>This group is able to 'self-serve' from information and advice that is available in all media – print, web-based and mass media</i>	Printed, verbal and web-based information can be explained and passed on informally in communities by trusted individuals or organisations	Some information, advice and support is specialist and can only be provided by formal services and organisations.

Resilience for Public Health: Supporting Transformation in People and communities – Seaman P, Nc Niece V, McLean J. www.gcph.co.uk/assets/0000/4197/Resilience_Briefing_Paper_Concepts_Series_12.pdf

The strategy has several themes that help us understand the 'Lived Experience' of residents and to prioritise support. It sets out short-term crisis support and the transition to long-term actions that promote resilience. It links with plans and policies across all Sunderland City Council services.

Key themes include:

- **Lived Experience:** engaging with Sunderland's residents to discover and understand their aspirations and needs; develop actions to support residents in crisis; co-design and deliver solutions that improve financial resilience, with individuals and communities.
- **Housing and Homelessness:** we have initiatives in place to prevent and respond to homelessness. These include advice and support for those at risk of becoming homeless. Ensuring good standards of housing for all residents.
- **Financial Inclusion and Wellbeing:** support, signposting and referrals to Council and partner support services. This includes awareness and access to welfare rights advice, energy advice, affordable credit and debt advice.
- **Learning and Skills:** supporting residents with skills that provide a vital steppingstone for personal and career development and income.
- **Health and Wellbeing:** supporting residents to maintain and improve their health and wellbeing. There is a focus on mental wellbeing and food insecurity.
- **Early Help/Safeguarding (Children and Adults):** Providing support for the specific aspirations and needs of children, young people and vulnerable adults.
- **Digital Inclusion:** ensuring that people make full use of the internet or information and communication technologies and gain maximum advantage.
- **HR:** offering support to the Council's own staff as many are residents of Sunderland.

Enabling themes include:

- **Information, Advice and Guidance:** ensuring Sunderland's residents have up-to-date, accurate information. Advice and guidance help them to make decisions and gain more control in their lives.
- **Communication (Internal and External):** internal and external communication supports all themes and key messages. It ensures all communications are clear, can be understood by all residents and are circulated by the most appropriate communication channels.
- **Being intelligence led:** using existing data, lived experience and wider intelligence to influence longer-term actions that promote resilience.
- **Building on individual and community strengths:** recognising and connecting the strengths of individuals in communities. Building on these to co-produce wellbeing and financial resilience for them, their friends and families.

We are working with our partners to coordinate and maximise our impact through the Sunderland Partnership Task Force. The group membership includes Sunderland City Council, Gentoo, South Tyneside and Sunderland NHS Foundation Trust, University of Sunderland, Integrated Care Board (NHS North East and North Cumbria), Sunderland College, Northumbria Police, Sunderland Football Club and Department for Work and Pensions.

4 Introduction

The cost-of-living crisis is expected to negatively impact on the population's health and wellbeing and to widen health inequalities.ⁱ Details of the pressures facing residents at both a local and national level make stark reading. The predicted impact in Sunderland on individuals, families and some communities is that many households will not have enough income for food, fuel, housing and other essentials.

A recent Marmot review on fuel poverty, cold homes and inequalities described a *'humanitarian crisis' of fuel poverty with thousands of lives lost.*ⁱⁱ The review highlighted *'Warm homes, nutritious food and a stable job are vital building blocks for health. In addition to the effect of cold homes on mental and physical illness, living on a low income does much damage. If we are constantly worrying about making ends meet it puts a strain on our bodies, resulting in increased stress, with effects on the heart and blood vessels and a disordered immune system. This type of living environment will mean thousands of people will die earlier than they should, and, in addition to lung damage in children, the toxic stress can permanently affect their brain development.'*ⁱⁱⁱ

The cost-of-living crisis is influenced by national and international factors. The rising cost-of-living means many of our residents are making difficult decisions that will impact directly on their long-term health and wellbeing. Many residents are unable to afford the essentials to maintain a decent standard of living. This increases stress and anxiety (see recent Marmot review, above). Increased poor health results in greater demand for health and social care services which are already experiencing severe pressures.

Many residents were already in financial difficulty due to changes in benefits, unemployment or low paid employment. The position was eased for some during the Covid-19 pandemic. There was additional support from the Department for Work and Pensions, including temporary relaxations to rules and conditions for some benefits. The pandemic brought challenges for residents who were previously financially stable and have not yet recovered.

Estimates suggest that approximately 50,000 households across the city that are in receipt of DWP Means-Tested Benefits or HMRC Tax Credits are particularly vulnerable to rising living costs. Some are facing extreme hardship, with lower income households most at risk because they have fewer resources and less money. Increased costs from energy, food and fuel represent a greater proportion of household income.

As inflationary pressures have increased, we are likely to see financial difficulties affecting many other low to moderate income households who had previously been able to afford the essentials. This level of uncertainty requires a flexible response from the Council and other services. Support and services must remain empathetic to the felt and expressed needs of Sunderland's communities.

5 Understanding the Cost-of-Living Crisis in Sunderland

Whilst average life expectancy at birth had improved in Sunderland the city continues to be below the England position. People in Sunderland live shorter lives than the England average^{iv} and live a greater part of their lives with illness or disability which limits their daily activities.

Life expectancy at birth for males in Sunderland is 76.6 for 2018-20, compared with 77.6 for the Northeast and 79.4 for England. Life expectancy at birth for females in Sunderland is 80.9 for 2018-20, compared with 81.5 for the Northeast and 83.1 for England. The gap between healthy life expectancy for Sunderland and for England widened for both males and females between 2017-2019 and 2018-20, from 5.7 years up to 7 years for males and from 6.2 years to 7 years for females.

There are different health outcomes across areas of the city because of health inequalities caused by underlying deprivation. Evidence shows that people living in the most deprived areas have poorer health than those from more affluent areas. People in deprived areas have more exposure to negative influences on health and lack the resources to avoid the effects.

Our 2021 resident survey indicates how residents are feeling about their personal finances. The fieldwork took place from October to December 2021, before the true impact took effect but results showed:

- 35% of residents stating that personal finances were likely to worsen in the next 12 months.
- 16% had difficulty paying for fuel and energy costs
- 12% had difficulty affording food
- 10% were worried about job security
- 59% of residents reported being unaffected by any of the financial issues listed in the survey but noted not being able to afford luxuries like a holiday (22%)

The following section summarises the ways in which the cost-of-living crisis affects residents.

Housing and Homelessness

Many people were already at risk of homelessness due to an inability to pay their mortgage, rent and other debts before cost-of-living pressures started to really impact.

Between April-October 2022, the number of new clients approaching the Council due to homelessness increased by 18.8% on the same period in 2021. This represents an increase of 186 new clients presenting as homeless (986 in 2021 and 1172 in 2022.) Repeat Homeless Reduction Act (HRA) applications are down slightly on previous years, suggesting an increase in the number of people who are presenting for the first time. The most common type of applicant is lone male (48%) followed by lone female (20%) and lone parent (female) with dependent children (19%).

The Joseph Rowntree Foundation reports ^{xviii} that those on low income spend proportionately more of their income on housing costs. People living in rented accommodation (social or private rent) are more likely to have a low income after housing costs are accounted for, than people who own their own home.

As part of a homelessness health needs assessment, Sunderland's housing providers were asked about the cost-of-living crisis for people who are homeless or at risk of homelessness. Feedback includes:

- People are entering supported accommodation with rent arrears and debt – makes 'move-on' more challenging in terms of securing a tenancy and affordability
- Increases in rent is leading to fewer affordable properties being available – especially when Local Housing Allowance rates have not kept up with these increases
- Some landlords are starting to exclude gas/electric in rental price. Where it is included, some landlords are not allowing top ups to heating.
- Some Private Landlords are now issuing No Fault Eviction notices – Section 21, to sell the property or use it as a mechanism to raise rents, data released by Sky following a National FOI review of LAs shows this is highest within the NE. This is creating more homelessness and threats of homelessness that were not there previously.
- People cannot afford travel costs to get to appointments
- Universal credit housing element is being paid directly to families and in many cases are not able to prioritise rent payments
- There has been an increase in requests for food and sleeping bags amongst people sleeping rough
 - There is a particular issue for people sleeping rough who often do not have access to a phone and are unable to call services to make appointments.

The health needs assessment showed that some groups have an increased risk of becoming homeless and highlighted a concern that the cost-of-living crisis will exacerbate homelessness.

The rising cost-of-living compounds the effects of homelessness and poor housing on health and wellbeing. Being unable to keep a home warm increases the risk of developing respiratory diseases. For the most vulnerable this will lead to death^v. Inability to afford to run a fridge or freezer mean that some residents switch these appliances off overnight, risking food poisoning. More people are eating food beyond the use-by date, which is concerning^{vi}. Increased fuel costs mean that many residents struggle to make hot food at home and cannot warm themselves up with a hot meal.

Poor quality homes impacting on health

There are direct and indirect health effects of inadequate housing, for example, high accommodation costs reduce disposable income and spending on things that maintain health. Damp, cold and mouldy housing is associated with higher prevalence and exacerbation of asthma and chronic respiratory diseases. Cold homes can exacerbate circulatory and cardiovascular conditions. Affordability of housing and unsuitable housing conditions^{vii} adversely influence mental health.

Within Sunderland:

- Hospital admissions for asthma (under 19 years) 2020/21 were 121 per 100,000, higher than the England average (74.2 per 100,000)
- Emergency hospital admissions for COPD 2019/20 were 775 per 100,000, higher than the England average (415.1 per 100,000)
- Under 75 mortality rate from respiratory disease 2020, 42 per 100,000, higher than the England average (29.4 per 100,000)
- Under 75 mortality rate from cardiovascular diseases considered preventable 2020, Sunderland was 36 per 100,000, higher than England 29.6 per 100,000.

Injury related to poor housing

Poor quality and overcrowded housing is associated with increased prevalence of injury. This presents particular risk for young children and older people. NICE recognises that living conditions are an important factor in preventing unintentional injuries in children.

Within Sunderland:

- Emergency hospital admissions due to falls in people aged 65 and over 2021 in Sunderland was 3164 per 100,000 higher than England of 2023 per 100,000.
- Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-4) 2020/21 153 per 100,000 higher than England 108.7 per 100,000

Employment and Income

Low income (in and out of work) households are particularly vulnerable to cost-of-living increases, debt, social exclusion, and the increased health risks of poverty.^{viii} These include stress, anxiety and depression. Low-income families in work face

unique challenges in accessing support. Parents, guardians and carers are likely to work long and/or unsociable hours. This makes it difficult for attend food banks, advice centres and many appointments.

The scale of the cost-of-living crisis means many more residents are now experiencing hardship. People on low to moderate incomes are most affected and least able to manage the impacts.

Within Sunderland:

- Average full-time earnings for workers (2021) who are Sunderland residents was £483.80 per week; this was below the average for the North-East (£546.80) and Great Britain (£613.10).^{ix}
- The percentage of out of work benefit claimants aged 16-64 in Sunderland in May 2022 was 4.9%, which was higher than the Northeast figure of 4.3% and the national figure of 3.9%^x and levels of people classed as economically inactive (not in work or claiming benefits) has increased significantly since start of the pandemic.
- The number of Universal Credit claimants in Sunderland increased from just over 18,000 at start of pandemic to just over 32,000 which is an 82% increase. This represents about 28,000 UC claims. UC figures had plateaued for about a year but are now increasing again.
- Loss of income from the temporary Universal Credit and Tax Credit uplift of £20 per week had a projected impact on Sunderland residents of a £30 million loss p/a.
- Welfare reforms between 2010 and 2021 are estimated to have cost Sunderland residents £150 million per year (£840 per working age adult) Figures do not include changes linked to Universal Credit implementation

Food Insecurity

There is no single measure of food insecurity. It is characterised by an inability to consistently afford or access food of a suitable quality. Food bank use is accepted as an indication of levels of food insecurity (although levels of food insecurity are higher than food bank use) as is eligibility for Free School Meals and Healthy Start vouchers.

Trussell Trust foodbank usage increased by 128% over the last 5 years. There are several drivers for food bank use, including adverse life experiences: eviction, ill health, divorce, low incomes, high housing costs, and changes to the welfare benefit system. People in debt are particularly at risk, as are those in low-paid, insecure work, and those with long-term health problems.

Sunderland Foodbank (SFB) has eight sites across Sunderland. There approximately another 30 independent food banks and food aid providers in the city offering a range of support.

The figures below, supplied by food aid providers who shared their data with us show between 2019/20 and 2020/21 people seeking support increased by 82% (from 10,809 to 19,674). Foodbank use this year increased, after a local / national reduction last year. Foodbanks are reporting significant problems with donation

levels. Many people are being helped by local, informal food aid but this is under reported. The data on foodbank use may be just the tip of the food insecurity iceberg

Food aid	2019-2020	2020-21	2021-22	2022-23 (projected)*
Number of parcels distributed	5780	10,481	8,296	11,290
Number of people reported as being supported	10809	19,674	19,397	26,826

The figures show a significant growth in provision during this period. Note the initial increase was partially explained by the council receiving more food bank figures. It should also be noted that food parcels typically feed 2-3 people so the numbers of individuals being supported by Foodbanks is likely to be higher than declared.

The percentage of secondary school pupils eligible for free school meals in Sunderland increased from 21.3% to 31% between 2016/17 and 2021/22. Similarly, in primary schools 28% pupils eligible for Free School Meals, rose from 20.8 in 2016/17. For the past 7 years, Sunderland has consistently ranked in the top 10 for highest rates of free school meal eligibility in the country.^{xi} For secondary schools, the take-up for Free School Meals is much higher than the national average. In 2021/22 24.7% secondary school pupils were taking Free School Meals, compared to 19.9% national average. In primary schools take-up is closer to the national average: 22.9% in 2021/22, compared to the national average of 21.9%.^{xii}

In Sunderland the take-up of Healthy Start vouchers by eligible families is currently 81%, one of the highest in the country. This is a significant increase from 2021, when only 64% eligible families registered to receive Healthy Start vouchers.^{xiii}

Fuel Poverty

Evidence shows that living in cold homes is associated with poor health outcomes and an increased risk of morbidity and mortality across all age groups. Studies have shown that more than one in five (21.5%) excess winter deaths in England and Wales are attributable to the coldest quarter of housing [2].

- 14.6% of households in Sunderland were living in fuel poverty (low income, low efficiency methodology) in 2020, this was above the Northeast (14.4%) and England (13.2%) averages. These figures however pre-date the ongoing increases in utility prices and the position is likely to have increased. The new measure also discounts people living in energy efficient homes but who cannot afford to put their heating on due to low income.

Child Poverty

The effects of poverty and financial inequalities on health last a lifetime, enduring across generations. Socioeconomic disadvantage is a primary risk factor in maternal and infant health outcomes. Children growing up in poverty experience disadvantages which accumulate across the life-course, leading to inequalities in

health, cognitive development, social and emotional development. These reduce educational attainment.^{xiv}

Between 2015 and 2020, the percentage of children living in poverty in Sunderland (after housing costs) increased from 19% to 27% (the current England average is 19%). This is expected to increase due to the cost-of-living Crisis.

- 30.8% of children live in low income (relative measure) families in Sunderland compared to 18.7% nationally.^{xv}
- Across the city there are major differences
 - In Fulwell 13% of children live in low-income families
 - In Hendon 42% of children live in low-income families

Children from low-income families are likely to eat less fruit, vegetables, and fibre than children in higher income families. They are more likely to live with overweight or obesity, have tooth decay, and to be shorter than those from more affluent families.^{xvi} They are less likely to be physically active (only 39% achieve CMO guidelines).^{xvii} The increase in families surviving on a low-income is concerning because of the long-term implications for their health and wellbeing.

Food insecurity in families with infants under 12 months

The rising cost of food and infant formula is leading to an increasing number of families experiencing food insecurity. Infants under the age of six months should only receive breast milk or infant formula as their source of nutrition. After which solid foods can be given. Cow's milk/milk alternatives should not be introduced until 12 months old. Regional health visiting services have found families diluting infant formula to make it last longer and more families using hungry baby formula (this is harder for babies to digest). There is concern that an increasing number of babies will be weaned off infant milk, introduced to food and other milk sources earlier than they should be due to cost. This can be harmful to health.

In response to this, UNICEF UK Baby Friendly Initiative, First Steps Nutrition Trust and the National Infant Feeding Network (NIFN) have updated guidance for local authorities and health services to support families with infants under 12 months experiencing food insecurity. Guidance is based on principles of *duty of care*, *provision of infant feeding support* (which includes the promotion and support of breastfeeding and compliance with the World Health Assembly International Code of Marketing of Breastmilk Substitutes) and the *development of pathways of wraparound care*.

Digital Inclusion

Digital inclusion is a utility and essential to modern life. The internet and ICT have a huge bearing on how we communicate, work, learn, entertain ourselves and access public services. For example, 90% of job adverts are placed online and over 57% of employers require basic skills (Maths, English and Digital skills); children who have broadband in their home score one or two grades higher than those that don't; people with health conditions are able to access information, advice and online support forums to help them cope with everyday life; assistive technologies encourage people to living independently; the first step of renting a home involves

completing an online housing application, then weekly competing virtual against others to secure a home; many people claiming universal credit must maintain their benefits by logging onto their personal 'Journal' daily. Failure to do so affects whether they receive a payment.

The gap relating to digital poverty is widening and will accelerate due to the cost-of-living. Digitally excluded households spend an average of £10.75 more per week on shopping and utility bills. Online shopping has been found to be around 15% cheaper. Currently over half of low-income homes are without broadband. Evidence suggests that accessing services online, especially energy deals, is saving individuals over £1,000 a year. The gap between those who are regular internet users and those who struggle to use it is becoming starker. As a consequence, the digitally excluded potentially miss opportunities and vital support around many of the underlying causes of poor health and health inequalities.

Types of digital exclusion:

1. Socio-economic

People who have a lower income may not be able to afford a home internet connection or smartphone. However, they are often keen to use digital technology in a library or community building.

2. Geographical

Some households do not have access to the internet or struggle with internet speeds because they live in more remote areas. In 2020, 18% of UK premises had full-fibre broadband, up from 10% the year before.

3. Age-related

Older people are less likely to use the internet (even if they have a home computer and internet) and are generally less inclined to turn to online services. They may also struggle to develop digital skills. According to Age UK, 42% of people aged over 75 never use the internet, with many arguing it is not relevant to them.

4. Other

Others who are less likely to use digital technology on a regular basis, for a range of reasons, include people with disabilities, people with fewer educational qualifications, homeless people and people whose first language is not English.

Available data indicates that the Northeast is the worst digitally excluded region in the England. Low levels of confidence and trust, the cost of connectivity, lack of access to devices or WiFi, resistance and attitude, and lack of skills all contribute. This is acute in areas with greater levels of deprivation and disadvantage, where barriers are – infrastructure, accessibility, insufficient skills for digital inclusion and growth.

Indicator	North East	England Av.
Proportion of people offline	8%	5%
Proportion with low levels of digital engagement	32%	28%
Confidence in using the internet	83%	86%
Digital skills improvement during Covid	23%	29%
Passive and uncommitted internet users	32%	20%

Sunderland is below the national benchmarks when it comes to internet connectivity within the home. It is also the case, that the most vulnerable residents are the least connected. The Lloyds Bank UK Consumer Digital Index 2020 reported that: 77% of over 70s have Very Low digital engagement and 52% of those who are offline are aged between 60 and 70 years old. Another key finding in this report is the level of digital exclusion among the most vulnerable groups - people with an impairment are 25% less likely to have the skills to get online and 4 in 10 benefit claimants have Very Low digital engagement.

In total, 93% of residents in Sunderland can access the internet at home. The Office of National Statistics (ONS) Internet Access Survey in 2020 reported that 96% of households in Great Britain had internet access, up from 93% in 2019.

Among residents in Sunderland, eight in ten (84%) have access to broadband through a Wi-Fi router in the home, this figure rises to 98% among those households with children and 96% of those in employment. The ONS Opinions and Lifestyle Survey reports that 98% of households had a fixed broadband connection in 2019. Overall, 5% of residents in Sunderland rely solely on public Wi-Fi and these residents are more likely to be not in work (12%), living in a single person household (10%), private renters (13%), with long-term health conditions (8%) or in bad health (10%).

A further 6% rely on their mobile data to access the internet, either paying monthly or pay as you go. Those aged 65 or over are more likely to rely on monthly mobile data (8% vs. 4% overall), public Wi-Fi (8% vs. 5%) or they do not use the internet in the home (21% vs. 7%).

Residents that did not use the internet at home or outside their home were asked to record the reasons for this. The most common was that the internet is not of interest (35%), this figure is in line with the Consumer Digital Index (36%). Those aged 65 or over were more likely to choose this reason (49%).

A further 27% of residents do not go online because they feel the internet is too complicated to use and a significant proportion (24%) are worried about their privacy. Some residents are digitally excluded because of the cost (19%) and in some cases residents do not access the internet because they do not have mobile coverage (12%) or access to broadband in their area (4%).

Overall, 5% of residents reported that they have an impairment that prevents them from using the internet (7% in the Consumer Digital Index), with 9% of social tenants and 7% of those with a long-term illness or disability selecting this reason.

6 Summary of support to local people to mitigate impact of cost-of-living crisis

The Financial Wellbeing Council Group, chaired by Executive Director Health, Housing and Communities, held its first meeting in June 2022 and continues to meet monthly. Membership of the group includes the leads for each themed area. The leads have oversight on the following themes: housing and homelessness, digital inclusion, learning and skills, health and wellbeing including food Insecurity, early help / safeguarding (children), early help / safeguarding (adults), financial resilience including fuel poverty, human resources including staff wellbeing, information, advice and guidance, communication (internal and external) and lived experience.

7 Key Initiatives and activity

Below are actions which have been agreed to protect and promote the health and wellbeing in response to the cost-of-living crisis. They outline our approach to the crisis in the short-term and describe how council services and partner organisations can all work together to develop sustainable long-term actions that will both support communities and reduce demand on services.

Key to our long-term actions are the contributing themes set out in the strategy, including but not limited to Skills and Employment, Financial and Digital Inclusion. Our commitment to reviewing all plans and policies through a socio-economic lens by using the Integrated Impact Assessment process will support our intention to address inequalities and reduce the income gap between the least and most well-off residents.

We also need to engage and involve residents with our activities by embedding the resilience model into the delivery of this work (ref section 3) and identifying, connecting and utilising community assets. This activity will be delivered through our community engagement work on 'Lived Experience'.

Building capacity within the council to support the delivery of the strategy and action plan

A Financial Wellbeing project manager has been appointed to develop and drive longer-term actions in response to cost-of-living and Lived Experience of residents. Building on existing activities to ensure that all work effectively meets the immediate needs of the community. Planning for longer-term activities that promote resilience and prevent a cycle of falling in and out of crisis.

The post will also coordinate implementation of the council's Financial Wellbeing Strategy and Delivery Plan.

Lived Experience

Engagement with residents to understand their experience is ongoing, including

- Utilising the brand used in Sunderland to engage with residents “Let’s Talk Cost of Living” to understand Lived Experience around cost-of-living.
- Engaging with residents and creating additional capacity via the warm spaces to,
 - a) deliver more activities within communities to support health, wellbeing and resilience
 - b) grow the social prescribing offer.
- Working with frontline services to ensure we listen to service users/ residents, gain insights and respond effectively.
- A Community Engagement post has been appointed to lead the activity on ‘Lived Experience’

An Engagement and Participation Team (TfC) is investigating the experience of Children and Young People.

Housing and Homelessness

- Produced a Fuel Poverty Plan that includes advice, education, practical support, and financial assistance
- An interim partnership with Utilita to deliver a boiler replacement “safety net” for those in crisis with no working boiler. Exploring ECO Flex 4 and other options
- Working with Registered Providers to establish the true cost of poverty for tenants and housing associations. Collaborating on solutions to mitigate the effects.
- Providing housing advice and support to residents.
- Eviction prevention services for those facing housing problems.
- Dedicated worker in substance misuse, alcohol treatment and recovery services for those experiencing housing problems or homelessness
- Ensuring that people rough sleeping who often don’t have access to a phone, have support to make appointments and contact services.

Digital Inclusion

- Access to affordable social broadband and phone packages, especially those aimed at benefit claimants
- Developing a Digital Inclusion Strategy and Action Plan in conjunction with partners and VCS
- Supporting the bid to UKSPF
- Develop and target communications to publicise free access and support available in communities
- Deliver phase 1 free ultrafast wi-fi in city centre and Roker
- Provide devices and/or licences to frontline employees and undertake engagement sessions
- Equip a range of drop-in zones with PCs for frontline employees
- Embed digital inclusion into policy and financial decision making
- Encouraging cultural change across our employees to become ‘Tech Mates’
- Identify and signpost the city’s most vulnerable people into digital support
- Explore the feasibility of an Internet Service Provider in Sunderland, for Sunderland.

Employment, Learning and Skills

- Launched Sunderland as a Real Living Wage City.
- Adopted Community Wealth Building and agreed a Charter with the City Board.
- Developing capacity of the voluntary and community sector to support communities.
- Value and utilise resident's lived experience to inform change
- Promoting an inclusive economy, by improving skills and access to a range of employment opportunities, particularly for people on low incomes.
- Individual Placement and Support scheme, offering intensive employment support for those accessing substance misuse treatment and recovery services.

Health and Wellbeing

- Supporting the 67 Warm Spaces across the city.
- Extending the offer of services and activities provided in Warm Spaces.
- Increase access to services and develop community involvement linking to Social Prescribing in Sunderland
- Launch a volunteer recruitment campaign – linked to Warm Spaces
- Set up hubs in each of Sunderland's five localities to host the 'Bread and Butter Thing' (TBBT). Free membership allows residents to buy basic shopping at a fraction of the cost of supermarkets
- Ensure that Making Every Contact Count, Financial Wellbeing and Emotional Health and Resilience are included in the Sunderland Health Champion training programme.
- Use Integrated Impact Assessments (IIA) to support the council in making decisions. Support officers to consider actions that create positive impacts and mitigate negative impacts in the following areas. Improving population health and reducing health inequalities; carbon reduction and sustainability; community wealth building; reducing socio-economic and digital inequalities; and ensuring we meet the aims of the Public Sector Equality Duty.
- A Health Response Group has been set up. It includes colleagues from the Integrated Care Board (NHS North East and North Cumbria), South Tyneside and Sunderland NHS Foundation Trust (STSFT), Sunderland GP Alliance and Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW).
- Swap to Stop Pilot – a targeted approach to help those in social housing stop smoking specifically to improve their financial situation.
- Working with community-based providers to expand the social prescribing model by extending it to other key partners.
- Understanding patterns of foodbank use, changing demands on foodbanks and other food aid organisations.
- Influencing organisations offering food support and 'more than food offers'. Providing support to these organisations to enable them and their customers to reduce repeat demand.
- Develop a local food system that supports healthy, affordable, and sustainable food for all

- Developing a data and intelligence dashboard to monitor the evolving impact of the cost-of-living crisis on health and well-being. Identification of and support for population groups at high risk of negative impacts.

Early Help/Safeguarding (Children)

- Establishing a pathway of support to families with infants under 12 months experiencing food insecurity
- Taking a population health management approach to identify the most vulnerable households
- Delivering Holiday Activity and Food Programme (HAF) during Easter, Summer and Winter breaks to support FSM children and young people with a hot healthy meal and activities.
- Increased HAF delivery over the National offer to include a wider cohort of young people
- Establish a family support offer across the SSP thresholds of need to support families at the earliest opportunity.
- Wear Here 4 You Partnership Prevention Bus in city throughout the year offering information, guidance and support.
- Continue to identify and support families to access the 2-year-old childcare offer.
- Develop Sunderland's Family Hub model, with a venue in each locality.
- Implement the Relationships Matter programme with parents
- Continue to promote access to support services around DVA for parents and their children.

Adult Social Care/Safeguarding (Adults)

- Population health management approach to help identify the most vulnerable households
- Preventing violence against women, including domestic abuse and sexual violence

Financial Inclusion and Wellbeing

- Continue to develop, promote and encourage uptake of local welfare schemes
- Delivering MECC financial wellbeing training to frontline staff to enable them to advise and signpost residents.
- Continue to deliver a flexible package of council financial support to the most vulnerable residents. Including Discretionary Housing Payments, Local Welfare Provision Scheme, Disabled Facilities Grants. Align these with additional short-term support through Household Support Fund
- Continue to deliver welfare rights advice through direct and commissioned services.
- Challenge illegal money lending by promoting access to affordable credit, including the Credit Union.

HR

- Promoting the range of staff benefits, including SCC Staff Initiatives via internal hub

- Promote the range of Employee Health and Wellbeing activities
- Provide IT devices and / or licences to frontline employees and undertake engagement sessions
- Maximise opportunities for digital training for employees, investigate the feasibility of using the Apprentice Levy to enable this

Information, Advice and Guidance

- A Cost-of-Living Support Hub via the council website for residents and via an internal support hub council staff has been launched
www.sunderland.gov.uk/cost-of-living

Communication (Internal and External)

- Developed communication principles to underpin all cost-of-living related activity, with a focus on financial well-being and resilience.
- Following approval of a wider Communications Strategy, develop a delivery plan
- Communicate and promote specific campaigns, such as Warm Spaces, Talk Money Week, The Bread-and-Butter Thing
- Develop clear and easy to understand information for residents and staff about available support. Including, including websites, The Hub, and Your Sunderland newsletter.
- Reviewing a range of Council communications and correspondence to ensure it is clear, empathetic and is easy to understand.

8 Measuring Outcomes and Outputs

Our overall aim is to reduce the income gap in Sunderland between the most and least well off. We will continue to develop the performance management framework for the Financial Wellbeing Strategy; however, the key initial performance indicators include:

- Reduce the income gap in Sunderland between the most and least well off
- Increase in the number of households accessing information, support and guidance at the earliest opportunity.
- Increase in the number of people that take up the financial support for which they are eligible.
- Increase in awareness and access to crisis food provision via a joined-up network of providers.
- Reduction of dependence on crisis food support and the need for repeat support. Develop extra advice and promote more cost-effective food provision.
- Reduction in the number of services people pass through to get the support they need, when they need it.
- Reduction in the number of households experiencing crisis because of increasing financial hardship.
- Increase in the provision of community led initiatives that act as an 'anchor' and can respond to local need.
- Increase in the numbers of households who feel confident and can manage their own finances.

- The University of Sunderland University is providing support to evaluate the warm spaces including looking at the social value delivered through the initiative.
- Increase in support to families with infants under 12 months experiencing food insecurity
- Embed learning from regional and STSFT health literacy work into council policies and practices

9 Summary and Conclusion

The Financial Wellbeing Strategy brings together the significant contribution of services across the City Council, to mitigate the effects of the cost-of-living crisis on Sunderland's communities.

It sets out the short-term (Crisis response) support required to help residents to manage through the current economic challenges.

It suggests how council services and partner organisations can all work together to develop sustainable long-term actions that will both support communities and reduce demand on services.

These will focus on developing and embedding the resilience model (ref section 3) and identifying, connecting and utilising community assets.

To support and enable the outcomes in the strategy the work to understand 'Lived Experience' will continue to inform the delivery and development of support in communities. This element is vital in engaging communities with co-design and co-production of their own solutions and support.

Governance arrangements involving both internal and external services will oversee and review the delivery to maximise opportunities to collaborate and ensure that positive outcomes are delivered, through the Financial Wellbeing Delivery Plan (see 10)

10 Financial Wellbeing Delivery Plan

A Financial Wellbeing Delivery Plan has been developed which details the Council core services that support Financial Wellbeing as well as activities that have been required to support residents in crisis. The priorities align with the City Plan which considers activity up until 2035.

<https://sunderlandcitycouncil.sharepoint.com/:x:/r/sites/CostofLivingDelivery/Shared%20Documents/Delivery%20Plan/Plans%20and%20information/Financial%20Wellbeing%20Delivery%20Plan%20March%2023%20v2.xlsx?d=w05f42e6d5c144c6fbfe3a4aac8fddc9f&csf=1&web=1&e=57A3qd>

ⁱ [Cost-of-Living crisis threatens to worsen health inequalities | UCL Policy Lab - UCL – University College London](#)

ⁱⁱ [Fuel Poverty, Cold Homes and Health Inequalities in the UK - IHE \(instituteoftheequity.org\)](#)

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- iii [Fuel Poverty, Cold Homes and Health Inequalities in the UK - IHE \(instituteofhealthequity.org\)](#)
- iv [Public Health Profiles - PHE](#)
- v [Latest consumer survey tracks level of worry around the cost of food and its impact on food safety | Food Standards Agency](#)
- vi [Latest consumer survey tracks level of worry around the cost of food and its impact on food safety | Food Standards Agency](#)
- vii [OHID Housing and Health Dashboard: North East and Yorkshire Regions; Microsoft Power BI](#)
- viii [Public health profiles - OHID \(phe.org.uk\)](#)
- ix [Annual Survey of Hours and Earnings - Data Sources - home - Nomis - Official Census and Labour Market Statistics \(nomisweb.co.uk\)](#)
- x [Labour Market Profile - Nomis - Official Labour Market Statistics \(nomisweb.co.uk\)](#)
- xi [Percentage of secondary school pupils known to be eligible for free school meals in Sunderland | LG Inform \(local.gov.uk\)](#)
- xii [Percentage of primary school pupils eligible and taking free school meals in Sunderland | LG Inform \(local.gov.uk\)](#)
- xiii [Healthcare professionals – Get help to buy food and milk \(Healthy Start\)](#)
- xiv NHS Health Scotland. (2018). Child Poverty in Scotland: health impact and health inequalities. Edinburgh: NHS Health Scotland. www.healthscotland.scot/media/2186/child-poverty-impact-inequalities-2018.pdf
- xv [children-in-low-income-families-local-area-statistics-2014-to-2021.ods \(live.com\)](#)
- xvi [The National Food Strategy - The Plan](#)
- xvii [PowerPoint Presentation \(sportengland-production-files.s3.eu-west-2.amazonaws.com\)](#)
- Xviii [Renters on low incomes face a policy black hole: homes for social rent are the answer | JRF](#)