

Protocol: Evidence review of the health and wellbeing outcomes of free advice services in the UK

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Review question

To review and synthesise quantitative and qualitative evidence of the health and wellbeing impacts of free advice services delivered by not for profit or public sector organisations in the UK

Introduction

The Covid-19 pandemic has drawn attention to health inequalities, gaps in the social safety net that have widened since 2010, and the need for advice and information services. At the start of the first lockdown period in March 2020, there was a significant increase in the number of people claiming Universal Credit (HOC Library 2020) as well as various government support packages (Hick and Murphy 2020). There was also a spike in the need for information and advice (Citizens Advice 2020, p.14). These changes must also be seen within the context of increasing statutory emphasis on holistic approaches to health and wellbeing, including the requirement of a local authority plan for advice provision under the Care Act (2014). Clinical Commissioning Groups (CCGs) also fund advice services in specific areas but this approach is inconsistent across the country.

While the importance of advice services in increasing the household income for those on the lowest income is widely accepted, there is little recent evidence of the impact of advice services on health and wellbeing outcomes. In 2006 (Adams et al) Carried out a systematic review addressing the question “what are the health, social and financial impacts of welfare rights advice delivered in healthcare settings?”. Their research focused on advice delivered in health settings and covered literature up to and including October 2004. The most recent review of the literature using systematic review principles was Allmark et al (2013) who addressed the question ‘what are the elements in a causal pathway between advice intervention and health outcomes?’ by reviewing literature published in English up to February 2010.

In order for commissioners to assess the effectiveness of such interventions on health and wellbeing, updated evidence is needed. This rapid review will seek to identify

evidence that links advice services (free, independent and impartial advice delivered by not for profit organisations and charities) with health and wellbeing outcomes (specific health outcomes and wider determinates of health) and will focus on literature published between 2010 and 2021.

Review aims and objectives

This mixed methods rapid review seeks to review and synthesise quantitative and qualitative evidence of the health outcomes of advice services in order to draw conclusions and make recommendations useful for advice providers, policy makers and funders. There is a pressing need to firstly understand the impact of advice services in a tough funding environment, and secondly to understand what we know about the relationship between advice interventions and health outcomes, and what more we need to know.

Population – advice service users

Anyone who accesses advice services. Advice service users are made up of a diverse section of society but those with a disability or who are from a deprived area are disproportionately represented (Citizens Advice, 2020, p.7). Findings related to people represented in the 2010 Equalities Act will be highlighted in the review.

Intervention – Advice services

Services that are providing free, independent advice available to the general population in the UK consistent with the definitions of advice services adopted by Citizens Advice and Advice UK:

“Assisting people to understand and exercise their options and legal rights by providing an independent, confidential and accessible service which delivers information, advice and or representation”
[AdviceUK | What is Advice?](#)

All free to access services delivered by public sector or not for profit organisations will be eligible for inclusion. This includes citizens advice and equivalent services offered by other independent organisations and through local authorities; services delivered by volunteers or professionals in face to face, telephone or online formats using a drop in or appointment-based approach; based in any setting; and that are accessible to anyone.

What types of intervention are included and excluded?

A range of interventions are delivered in advice services. This includes those such as: generalist and specialist advice on a range of social and welfare issues such as welfare benefits, housing, debt and employment; referral and signposting to other services. All interventions types will be included (see Welsh Government 2013 for a comprehensive list of advice service interventions).

Health advice or services offering health interventions only will be excluded, for example stop smoking services.

Outcomes – Health and wellbeing outcomes

Studies that include health or wellbeing outcomes to be included. Identification of outcomes was informed by the logic model created by Allmark and colleagues (2013) that identified factors leading to changes in health status following access to advice services, and by the social determinants of health model (Dahlgren and Whitehead, 1991). Specific outcomes include: physical health status; mental health and wellbeing status; health behaviours such as diet, and social determinants of health such as housing outcomes, financial outcomes, and employment status. Amongst studies that include health and wellbeing outcomes we will also look for service implementation outcomes.

Study designs

We will include evaluations of relevant advice services using any study design. This includes designs such as randomised and non-randomised controlled trials, cohort and cross-sectional studies, uncontrolled studies and qualitative studies. In the event that we identify a large number of relevant studies, we will prioritise those with a control group to include within our synthesis.

Methods

A rapid review of the evidence assessing the effectiveness of advice services on health and wellbeing outcomes will be undertaken. To ensure rigour, the methods will be based on the Joanna Briggs Institute's mixed methods systematic review process (JBI 2014). A logic model developed by Allmark and colleagues (2013) of the causal pathway between advice services and health will be used to identify outcomes and to inform the search strategy and synthesis approach.

Search strategy

Our search strategies will attempt to identify studies of the health and wellbeing impacts of advice services in the academic and grey literatures. Studies will be those published in English and between February 2010 and January 2021. The search strategy will have four elements:

1. **Academic literature:** A scoping search in Medline will be conducted using the following key words (advice services OR citizens advice AND welfare AND employment AND housing AND debt) in order to identify further key words in relevant abstracts and articles. Both databases (Medline and Social Policy and Practice) will then be searched using identified key word search terms (see below)
2. **Grey literature:** A web search will then be conducted using the same search terms as 1 to identify grey literature. This will include a targeted google search, and searches of relevant organisation websites, including Citizens Advice, Advice UK, Kings Fund, Health Foundation, and the UK Department of Health and Social Care. CPAG, Rightsnet, Age UK, Joseph Rowntree Foundation, National Audit Office.

3. **References:** Relevant literature will then identify within the reference list of all included studies.

The search will be carried out in January 2021.

Included databases

We identified two databases: firstly, Medline which is the biggest health related academic database; and secondly Social Policy and Practice which contains health and social policy literature. Both were available from the University of Bath library website and covered key areas of research.

1. Medline – biggest health database – life sciences and biomedicine: [MEDLINE®: Description of the Database \(nih.gov\)](#)

2. Social Policy and Practice – Includes health and social policy: [About SPP | Social Policy & Practice | Social Policy & Practice \(spandp.net\)](#)

Data extraction and quality assessment

Data extraction will be carried out by researcher one and researcher two will review 10% of selected abstracts/studies. Disagreement about data abstraction discussed between reviewer 1 and 2. Data will be extracted into a pre-designed form in Microsoft Access. Data will include study characteristics; the characteristics of participants, interventions and settings; outcomes; and study limitations. The quality of studies will be determined using the JBI tools for critically appraising different study designs (<https://joannabriggs.org/critical-appraisal-tools>).

Synthesis

Review findings will be presented in a narrative synthesis and in structured tables. We will present findings by outcome type and highlight the strength of evidence for each outcome, as well as whether different intervention approaches and settings relate to different outcomes.

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