

**Social welfare advice and health among young people: A scoping review**

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**Word count (all):** 9317

## **Abstract**

Social determinants of mental and physical health influence young peoples' trajectories into adulthood are often remediable through law. To address inequalities, including those exacerbated since the COVID-19 pandemic, there is a need to better understand young people's need for and uptake of advice for social welfare legal problems. This scoping review aimed to review available evidence and identify gaps to inform further research. To identify studies relevant to social welfare legal advice among young adults we conducted searches of eight bibliographic databases (January 1998 and June 2020), hand searches of included article reference lists and targeted grey literature searches. 35 peer reviewed and grey literature studies were selected based on inclusion and exclusion criteria including evaluations of interventions to promote access to advice, general population surveys, observational studies, and audits of charity data or targeted surveys. Evidence suggests considerable and inequitable need for social welfare legal advice among young adults with adverse consequences for health and wellbeing. Needs among higher risk groups are likely underestimated. Evidence for interventions to enhance access/uptake of advice is limited and methodologically weak. We identify several gaps in the literature to inform research and to enable systematic reviews around more specific questions to inform practice.

**Keywords:** Young people, young adult, social welfare, social determinants, legal advice, health inequalities, scoping review

## **Introduction**

Late adolescence and young adulthood (~16-25 years) is a critical period during which trajectories into adulthood are influenced by personal, economic and social circumstances, as well as transitions in education, family, and employment (World Bank 2006). Experiencing social disadvantage at this age is associated with subsequent poorer physical and mental

health (Viner *et al.* 2012). Since these circumstances are potentially modifiable, interventions to help alleviate disadvantage are important for prevention and early intervention (Catalano *et al.* 2002).

Certain social determinants of health may be remedied by law, whether or not individuals are aware that such a remedy exists or would seek a legal solution. This includes problems concerning rights and entitlements that are enforceable through courts and/or tribunals (Genn and Beinart 1999). For example, problems related to welfare benefits, debt, discrimination, education, employment, immigration, or housing. We use the term ‘social welfare legal problems’ to refer to non-criminal legal issues for which rights and entitlements are bestowed by law, and which can affect ill health. These are more likely to affect people on low incomes who are socially excluded or vulnerable, including by virtue of young age (Balmer 2013), as well as people experiencing physical disability, long term health conditions and problems with mental health (e.g., Marmot *et al.* 2010).

Social welfare advice services - often provided by the voluntary and community sector or pro-bono legal services – are referred to as those which advise, advocate and/or provide tangible support for such issues (e.g., court representation). Access to support may be particularly important for young people, who are least likely to know how to navigate ‘the system’, how to access support for such problems, or to understand their rights (Balmer *et al.* 2007, YouGov 2020). Further, access may be restricted by reductions to legal aid provision and advice services which disproportionately affect vulnerable groups of young people and young people from racial and ethnic minority groups (Palmer *et al.* 2016, Advice Services Alliance 2020).

This has become even more urgent in the context of the COVID-19 pandemic which has impacted those most in need of support for social welfare legal needs. Reports suggest that

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the pandemic and associated public health measures have also increased social welfare needs, including among young people (Edge and Kenrick n.d., OECD 2020, Turn2Us 2020); increased demand for social welfare legal support; affected the types of issues for which people need support (e.g., a relative increase in need for employment advice); and, further reduced the availability of face-to-face support while accelerating moves to telephone and digital advice (Creutzfeldt and Sechi 2021). Additional to the known limitations of telephone advice for complex problems, and for vulnerable and socially excluded population groups (Burton 2018; 2020), those most in need of advice and those most affected by the pandemic are also most likely to experience digital exclusion (Serafino 2019). Moreover, evidence from prior research suggests that even among young people with greater access and familiarity with online services, this may not necessarily translate into increased awareness of rights or capacity to successfully identify solutions to social welfare legal problems online (Denvir *et al.* 2011, 2016).

There is increasing awareness of the importance of intervening in social circumstances during adolescence and young adulthood to future life course trajectories of health (Patton *et al.* 2016). Early intervention in social welfare legal needs not only helps with timely resolution but may also help prevent clustering and accumulation of problems over the life course (Creutzfeldt and Sechi 2021). However, there is limited widespread understanding about the scale of need for, the health impact of, and the outcomes of support for social welfare advice needs among young people. Further, while closer integration of health and legal services is supported by research (Beardon *et al.* 2021; Woodhead *et al.* 2017; Creutzfeldt and Sechi 2021), practice and policy (Department of Health (DH) 2015; Bromley by Bow Insights 2021), there is limited focus on their potential utility specifically for young people. A review

synthesising the evidence base on these issues is necessary to direct research and policy action to this area.

Scoping reviews allow for more general research questions than systematic reviews or meta-analyses, more flexibility to include a broader range of studies across disciplines and methodologies, and are useful for exploring new topics without a defined evidence base (Peterson *et al.* 2017). Unlike systematic reviews, which have a narrowly defined question often linked to appraising evidence for the efficacy of a particular practice, scoping reviews are used to scope the range and type of literature available on a topic, identify gaps in knowledge, understand how research on a topic has been conducted methodologically, and to clarify concepts (Arksey and O'Malley 2005, Peterson *et al.* 2017, Munn *et al.* 2018). We therefore conduct a scoping review to:

1. Identify the types of available evidence about social welfare legal advice needs among young adults.
2. Examine how research in this field has been conducted methodologically.
3. Identify knowledge gaps to direct future research and evidence synthesis.

We define and distinguish between ‘need’ in relation to the public health concept of ‘felt need’ (individual subjective need for support) and ‘uptake’ in relation to the concept of ‘expressed need’ (when individuals turn felt need into action, or ‘help-seeking’) (Bradshaw and McLachlan 1972). Given that people (and young people in particular) may not be aware of their rights and/or that issues they experience are remediable through law - and thus may not recognise a need for or the availability of support - the concept of ‘latent demand’ commonly applied to consumer use of goods and services is also relevant here (e.g., Arora *et al.* 2015).

## **Materials and methods**

We followed the scoping review guidance outlined by Arksey and O'Malley (2005) and Levac *et al.* (2010).

### ***Search strategy***

Following identification of the review questions above, structured searches of eight bibliographic databases across disciplines were carried out to identify relevant studies published between January 1998 and June 2020. The start date was chosen for pragmatic reasons and considered suitable given the timing of Genn's pioneering legal needs research published in 1999 (Genn and Beinart 1999). Databases were selected based on the relevance of their scope to the review. Databases included OVID Medline, PsycINFO, Embase, PsycARTICLES Full Text, SCOPUS, Sociological Abstracts, Social Services Abstracts and the Legal Journals Index. Key search terms were developed for the population of interest, including "young adult\$" or "adolescen\$" or "early adult\$" or "youth" or "teen\$" or "young people". To focus the search to studies examining felt/expressed need for *support for* social welfare legal issues (rather than more broadly assessing the issues themselves), we combined population terms with relevant terms that were all suffixed separately by the words, "advice" and "rights". These included "social welfare", "debt", "immigration", "socio-legal", "benefits", "legal", "welfare", "welfare benefit", "employment", "housing", "financ\$", "money", "homeless\$", and "discrimination". To identify additional relevant grey literature, we also searched 'Google' using combinations of the above as free text terms and the websites of relevant agencies (e.g., OECD, Law and Justice Foundation, the Law Society, Access to Justice Foundation). Finally, references and citations of included articles were hand searched.

### ***Study selection***

Studies were selected following two screening rounds (first by title and abstract, and then screening full text against inclusion and exclusion criteria outlined in Table 1). One reviewer screened all citations in this manner. To increase rigour, a second reviewer screened the title and abstract of the first 200 citations. Any mismatches between reviewers would have been resolved through verbal discussion clarifying the inclusion/exclusion criteria though in practice this was not necessary.

[TABLE 1 HERE]

### ***Data extraction***

Data relevant to the research questions were extracted including: authors, publication year, title, abstract, country, article type/study design, population group, setting, type of social welfare legal issue addressed/description of extent of advice, focus of study, outcomes examined, and, summary findings. As a scoping review, methodological quality was not formally assessed using checklist criteria; however, for the second study aim data were extracted on whether studies were peer reviewed, clarity of methodology (i.e., would the description allow for replication), sample size, control/comparison group, use of validated measures, and reporting or accounting for non-response. Finally, extracted data were collated, charted and summarised to address the review aims.

### **Results**

Figure 1 summarises the outcomes of the searches and selection processes. 1829 citations were identified, of which 35 articles were included in the review.

[FIGURE 1 HERE]

***Summary of included studies***

As outlined in Table 2, articles were published between 2003 and 2020. Most reported data relating to young people between 13 and 25 years old, even if not the primary focus of investigation. Twenty-nine (83%) were UK based, with five (14%) from Australia and one (3%) from the USA. The greatest number (15, 43%) were evaluations of interventions aiming to promote access to advice or support related to social welfare legal issues. Thirteen studies (37%) reported data from household or online population-based surveys. Of these, three reported findings for a young person subgroup of the same Australian survey (the 2008 Legal Australia Wide (LAW) survey, Coumerelos *et al.* 2012, Macourt 2013, 2014), and seven reported findings on young person subgroups from multiple English and Welsh household surveys; the Civil and Social Justice Survey (CSJS 2004, 2006-9) (Balmer *et al.* 2007, Buck *et al.* 2008, Denvir *et al.* 2011), Civil and Social Justice Panel Survey (CSJPS 2010, 2012) (Pleasence 2011, Pleasence *et al.* 2015), the Legal Problem Resolution Survey (LPRS 2014-15) (Balmer and Pleasence 2018), and the Legal Needs of Individuals in England and Wales survey (YouGov 2020).

A further five articles (14%) were grey literature reports detailing audits of organisation activity data (e.g., callers to a debt advice charity) (StepChange 2017, Brownfield 2018, Balmer *et al.* 2012b) or surveys targeted at groups of young people who were interested in or had existing social welfare needs (e.g., homelessness) (JustRights 2014, Centrepoint 2015). Finally, two (6%) were quantitative or qualitative research studies, one an experimental study assessing support-seeking online to pre-defined social welfare issues (Denvir 2016), and one an interview study of young people accessing advice at a refugee organisation (Gateley 2014).



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Information was published relating to need ('felt need') (12, 34%), uptake ('expressed need') (31, 89%), as well as outcomes of social welfare legal advice (12, 34%). Most incorporated information about multiple social welfare legal issues (21, 60%). Others pertained to specific problems including money and/or debt (8, 23%), welfare benefits (4, 11%), housing/homelessness (3, 9%), immigration (2, 6%) and, employment (1, 3%). Finally, studies covered a broad range of support intensity. This included various combinations of information, advice, and guidance; and a range of support types (e.g., help to manage debt repayments, access housing, legal casework, or representation). Except for Widdowson *et al.* (2010), articles did not disaggregate findings by the depth or extent of support.

For the first review aim, the following section provides an overview of the types of literature in the domains of need, uptake and outcomes of support for social welfare legal issues among young adults.

[TABLE 2 HERE]

### *Need for social welfare legal advice*

Studies assessing felt need included information on: i) the incidence or prevalence of social welfare issues requiring support (8) or an assessment of the issues young people most need advice about (2), ii) variation across subgroups of young people defined by various types of vulnerability (5) and, iii) the perceived impact of these issues on health, well-being and social functioning (7).

### *Incidence or prevalence of social welfare legal issues.*

General population surveys examined felt need in relation to the experience of social welfare legal problems that were 'difficult to solve' or 'substantial', cited as indicative of need for advice. These were assessed over the past year in Australia (Coumarelos *et al.* 2012) to three

or four years in England and Wales (Balmer *et al.* 2007, Pleasence 2011, Balmer and Pleasence 2018, YouGov 2020), and reported for a subgroup of 15, 16, or 18 to 25-year olds (with the exception of the most recent survey which aggregated data from 18-29 years (YouGov 2020)). Multiple problem domains were included such as money and debt, work and employment rights, housing and homelessness, education rights, family or relationships, welfare benefits, discrimination, immigration, asylum and refugee issues, consumer issues, domestic violence, neighbour problems, and unfair police treatment. The three-year incidence ranged from 33-37% in UK surveys between 2004-15 (Balmer *et al.* 2007, Pleasence 2011, Balmer and Pleasence 2018), compared to 18-27% in the past 12 months in Australia in 2008 (Coumarelos *et al.* 2012, Macourt 2013). The survey of England and Wales published by YouGov (2020) reported a figure of 61%, though over the past four years and among a wider age group (up to 29 years). Two surveys asked what issues respondents thought young people most needed advice about. This included a representative survey of 11 to 25-year olds in England, of which 12% selected 'housing' (Garvey *et al.* 2008), and a targeted survey of young people interested in or users of advice services, of which 86% identified money and debt and between 42% and 83% identified a range of other issues such as discrimination, housing, and welfare benefits (JustRights 2014).

#### *Variation in need by subgroup*

Studies using population-based survey data examined differences by age and multiple self-reported markers of vulnerability. For example, whether they were lone parents, in receipt of benefits, not in education, employment or training (NEET), socially isolated (defined as not living with an adult aged 25+ years), whether they had any mental health issues, long-term limiting illness or disability (e.g., Balmer *et al.* 2007, Balmer and Pleasence 2018), had been in care, were Indigenous (Macourt 2013), and differences by social grade (Garvey *et al.*

2008). Such markers were in general associated with reporting legal problems and a greater number of them. Data were self-reported and only studies using the English and Welsh CSJPS (e.g., Pleasence *et al.* 2015) and a study of young people accessing advice services (Balmer and Pleasence 2012a) included a validated measure of common mental disorder to assess current mental health.

*Impact on health, well-being and social functioning*

Finally, felt need for advice was also examined in terms of perceived impact of social welfare legal issues on health, well-being and social functioning. Two studies evaluated interventions aiming to increase access to advice (Balmer and Pleasence 2012a; Ollerenshaw and Camilleri 2017), and five reported findings from general population surveys (Balmer *et al.* 2007, Pleasence 2011, Macourt 2014, Pleasence *et al.* 2015, Balmer and Pleasence 2018). Multiple consequences for health and well-being were assessed including self-reported impact on physical and mental ill health, stress-related ill health, difficulties concentrating or sleeping, loss of confidence, fear, drinking or drugs. For example, UK surveys indicated that between a fifth and a 46% of young respondents reported becoming ill due to their problems, primarily due to stress but also physical ill health (Balmer *et al.* 2007, Pleasence 2011, Balmer and Pleasence 2018, YouGov 2020). Evidence was strongest for mental ill health, where over time additional exposure to legal problems was associated with deterioration in a validated measure of common mental disorder (Pleasence *et al.* 2015). Other self-reported social and functioning consequences included family or relationship problems, having to move home, loss of income or financial strain, problems with being physically threatened, trouble with the police, contact with social services, and problems with education or at work. Those identified with ‘vulnerabilities’ were more likely to report adverse consequences of legal problems on health and wellbeing (e.g., Balmer and Pleasence 2018).

*Uptake of advice for social welfare legal needs*

Most studies (30) examined different facets of expressed need, including uptake to services, types of support, sources and preferred modes of support-seeking. These included evaluations of interventions designed to increase access and uptake of support for social-welfare legal issues (15), or audits of advice services (3). Some reported the proportion of all those accessing non-age specific services that were young adults, including co-located welfare advice services in general practice (Abbott and Hobby 2003, Greasley and Small 2005, Krska *et al.* 2013, Woodhead *et al.* 2017) and debt charity advice services (StepChange 2017, Brownfield 2018).

Other evaluations reported the numbers and characteristics of those referred, or up-taking support, and the types of issues advice was sought for. These included evaluations of young person-specific partnerships between community health and legal services (Klein *et al.* 2013, Ollerenshaw and Camilleri 2017, Camilleri *et al.* 2018), initiatives to provide information, advice and guidance to refugee young people (Baker *et al.* 2015, Ahmad and Dorrans 2017), an online digital platform offering information and advice on social welfare legal issues (Lambley *et al.* 2007), and, other community-based advice services targeting young people (Gillespie *et al.* 2007, Butler and Hutchinson 2007, Widdowson *et al.* 2010, Balmer and Pleasence 2012a, Bashir *et al.* 2013). A minority of these evaluations examined differences in the types of support accessed across groups of young people defined by vulnerability as above (Widdowson *et al.* 2010, Balmer and Pleasence 2012a). Finally, a small number also examined differences in mode of advice used or preferred (Balmer *et al.* 2012b, Butler and Hutchinson 2007).

The other main group of studies examining uptake were those using data from the English and Welsh, and Australian general population surveys (Balmer *et al.* 2007, Buck *et al.* 2008, Denvir *et al.* 2011, Pleasence 2011, Coumarelos *et al.* 2012, Balmer and Pleasence 2018) and the young person specific population-based (Garvey *et al.* 2008, Harrison *et al.* 2016, Money Advice Trust 2016) or targeted surveys (JustRights 2014, Centrepoint 2015). These asked respondents what action they would, or did, take in response to their identified social welfare legal needs (e.g., no action, seeking formal advice from a lawyer or adviser, websites or other self-help, advice from friends or family). UK and Australian population surveys indicated low levels of help seeking, with 14 – 31% of young people reporting doing nothing at all to try to resolve civil law problems (Balmer *et al.* 2007, Pleasence 2011, Coumarelos *et al.* 2012). However, compared to older age groups, they most often reported wishing they had got advice, got more, acted sooner or tried harder to get advice (Buck *et al.* 2008, Pleasence 2011, Balmer and Pleasence 2012, Coumarelos *et al.* 2012, Balmer and Pleasence 2018). Finally, studies also examined preferred source (e.g., formal/informal) or mode of advice (e.g., telephone, face-to-face or online). In some cases, differences in help-seeking were compared across groups of young people defined by vulnerability (Balmer *et al.* 2007, Pleasence 2011), while one experimental study assessed young people's help-seeking to pre-designed social welfare legal problems to determine their capacity to elicit information online (Denvir 2016). Studies indicated that from most to least preferred, young people prefer face-to-face advice, followed by telephone or online, e-mail, then text message (Gillespie *et al.* 2007, Garvey *et al.* 2008, JustRights 2014). Online help-seeking may not be common or successful despite high levels of access, (Denvir *et al.* 2011) possibly due to problems finding accurate or sufficient information, limited legal capabilities (Denvir 2016), or feeling overwhelmed by the quantity of information available (Harrison *et al.* 2016).

*Outcomes of support for social welfare legal problems*

Twelve studies included information about the health and social outcomes of advice for social welfare legal issues. The majority of these (9) were evaluations of interventions targeting young people at greater risk of such problems in health or community (e.g., youth centre) settings (Butler and Hutchinson 2007, Gillespie *et al.* 2007, Widdowson *et al.* 2010, Balmer and Pleasence 2012a, Klein *et al.* 2013, Baker *et al.* 2015, Ahmad and Dorrans 2017; Ollerenshaw and Camilleri 2017, Camilleri *et al.* 2018). Other articles reporting on outcomes of advice included a UK-based population study (Pleasence 2011), a qualitative study of refugee young people seeking advice (Gately 2014), and an audit of people accessing housing advice (Balmer *et al.* 2012b).

The types of outcomes examined in each of those articles are summarised in Table 3.

Practical instrumental support outcomes included improvements to finances or debt, housing, living standards or avoiding homelessness, employment, education or training circumstances, access to health care or averting social services intervention, and, other legal outcomes.

Health outcomes of advice were described in terms of physical health or health behaviours, and mental health or wellbeing. Improvements to stress and anxiety were commonly self-reported in both intervention and survey studies (e.g., Pleasence 2011, Ollerenshaw and Camilleri 2017). In addition, several studies examined the impact of advice on psychosocial factors such as self-confidence or perceived social support, improvements in knowledge and awareness of rights and where to seek help in future, or improvements in interpersonal relationships and communication skills. Qualitative findings also indicated that by dealing with these pressing social problems, advice gave young people space to think and make important life decisions (Gately 2014), left them feeling more in control of their lives and better able to make decisions affecting key life domains (Butler and Hutchinson 2007).

*Conduct of research on social welfare legal needs among young people*

The parameters used to examine the methodology of included articles and to informally assess their quality are summarised in Appendix 1. Overall, just under two fifths (37%) of articles were peer reviewed and 16 (46%) clearly reported the study methodology, of which the majority were intervention evaluation studies. Among 15 evaluation studies, five (33%) collected both before and after data. Two (13%) included a control or comparison group and these were also the only two studies to have reported non-responder characteristics and to have adjusted for these in analyses. Of those studies examining health outcomes, none which disaggregated findings by age used objective or validated measures, compared to over half (54%) of those quantifying non-health outcomes. Of the population-based studies estimating incidence or prevalence of legal advice needs the average sample size of young adults in UK-based surveys was n=933, compared to n=3517 in the Australian (LAW) survey (Coumarelos *et al.* 2012). These all reported being nationally representative surveys, though weighting measures to account for non-response were only used in studies using CSJS/CSJPS (e.g., Pleasence 2011), Legal Needs of Individuals in England and Wales (YouGov 2020) and LAW data (e.g., Macourt 2013).

Other key methodological considerations were identified. Prevalence/incidence estimates from household surveys may be underestimates as they exclude young people in non-residential settings who may be at greater risk of exposure to social welfare legal problems, such as prison or homeless populations. Estimates are also not directly comparable between reports because of differences in age group parameters, type and number of legal problems asked about, and survey mode (postal, telephone or online). While some population-based surveys gathered information to assess inequalities in legal needs by self-reported vulnerability factors, they did not examine differences by key characteristics to support

targeting of support such as ethnicity, social class (except Garvey *et al.* 2008), gender (except Macourt 2013, 2014), or region. Further, studies examining the impact of legal needs on health and well-being relied on self-report. Finally, intervention studies had unclear or short follow up periods (up to 12 months, though with considerable attrition), and none explored differences in outcomes among different groups of young people or the impact of different degrees or modes of support.

The discussion will next summarise findings and identify gaps in the literature to address the third review question.

## **Discussion**

This scoping review aimed to examine the types of available evidence about social welfare legal advice problems among young adults, assess how research has been conducted, and identify knowledge gaps. In brief, social welfare legal issues are common among young people, with between a fifth and three fifths experiencing problems depending on the time period and age range assessed. Subgroups at elevated risk of social welfare legal problems include those experiencing social exclusion, poor mental and physical health. Links to health and well-being were reciprocal, with substantial proportions of young people reporting that social welfare legal issues affected psychosocial factors (e.g., confidence, self-esteem, stress), substance use, physical or mental health. Levels of help-seeking are low, though compared to older groups, young people more commonly report wishing they had sought advice. Relevant to the digitisation of advice and impact of the pandemic on remote delivery, young people report preferring face-to-face advice with online help-seeking not necessarily fruitful despite greater access than older age groups. Intervention studies indicate that initiatives to integrate advice into health settings to reach young people most at risk of health-harming social welfare legal issues exist but these appear to be patchy rather than mainstream.



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The majority of articles reporting findings for young adults come from England and Wales, and Australia. While this includes nationally representative samples indicating levels of need for and uptake of advice for social welfare legal issues, evidence from other global regions is lacking and such studies exclude groups likely to be at greater risk (e.g., those in institutions such as hospitals, youth offending institutions, those in care or who experience different forms of housing instability or homelessness). They also likely underrepresent other potentially higher risk groups such as asylum-seekers and refugees, racially and ethnically minoritised groups, those experiencing housing instability, LGBTQ+, and young people with mental or physical ill health, or disabilities. Interventions to increase access and uptake to advice included implementing advice in health settings and in youth accessible community spaces, however, evaluations of these were methodologically weak.

### *Evidence gaps*

Given the considerable proportion of young people reporting social welfare legal problems and evidence, even if self-reported, of their health harming effects, the gaps in the evidence base we identify primarily relate to:

- Identifying young people at highest risk of health and social harm as a result of social welfare legal problems, and the needs of specific groups.
- Generating a stronger evidence base for initiatives to increase access to social welfare legal support and assessing their impact on health and social inequalities.
- Evidencing the impact of the COVID-19 pandemic on young people's need for and uptake of advice. As we move into the recovery period, there is also a need to identify how best to support young people most affected by the longer-term socio-economic and health and well-being impacts of the pandemic (the 'pandemic scar', Moxon *et al.* 2021).

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- Increasing and improving research among young people at greatest risk of social welfare legal problems and those underrepresented in population-based studies. For example, booster samples to better represent racially and ethnically minoritised groups (e.g., Berthoud *et al.* 2009).

More specifically, there is a lack of information to identify whether particular groups of young people (e.g., across different and intersecting social statuses, or with mental or physical health needs) may benefit more from advice for social welfare legal problems, how needs cluster together, and which approaches are most effective at increasing access and uptake of such advice. For example, while non age-specific interventions aiming to enable access to social welfare legal advice often focus on integrating support in primary care health settings, this may not be optimal for adolescents and young adults.

This is supported by our findings that only a small proportion of those seeking advice at general practices were young adults, and that young people often did nothing or sought informal advice about problems. It is also supported by research indicating that young people do not necessarily turn to primary care to seek help, instead opting for support from peers or family first (McGorry *et al.* 2014). Those that do experience the shortest consultations, report the least satisfaction with primary care - particularly socially disadvantaged young people - and find it difficult to discuss personal problems (Churchill 2017, Yassaee 2017).

To promote help-seeking in this age group, research suggests making available youth-relevant, friendly and accessible services, relocating services to places where young people go, and creating networks between formal and informal services to offer multiple entry points (Barker 2007). Potential promising models in need of further examination have been identified (e.g., Department for Health and Social Care 2017, Hetrick *et al.* 2017, Burstow 2018, Duncan *et al.* 2018).

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Further, given the bidirectional relationship between health and social welfare legal issues, the potential for interventions to positively impact upon trajectories of health and mental health is well established (Beardon *et al.* 2021, Beardon and Genn, 2021). However, while advice for social welfare legal issues has been associated with self-reported improvements in a range of health and social functioning domains, there is little understanding of the mechanisms underpinning this (e.g., through changes in stress, sleep, health behaviours), of objective measures of change, or, the role of key contextual issues influencing whether these outcomes arise (e.g., cuts to legal aid, policies influencing the availability of work and welfare benefits, rises in precarious employment). Also, while studies report improvements following advice, there is no evidence for any longer-term outcomes; for example, whether support at this age influences future health and social functioning, and/or capacity to deal with such issues in future.

Finally, as noted in the introduction, many areas of social welfare law overlap with known social and structural determinants of health and mental health, particularly pertinent since the outbreak of the COVID-19 pandemic (Youth Access 2021). A review of help-seeking among adolescents and young adults identified support needs around specific health problems, normative developmental issues (e.g., employment, relationships), and personal stress/problems (e.g., family or financial crises, trauma, or homelessness). Being able to seek such instrumental, emotional and informational social support was identified as a key protective factor to enable good health and well-being (Barker 2007). There is therefore a need to better understand the systemic influences on young peoples' access to advice services and where intervening may have the greatest effect on health and inequalities.

*Strengths and limitations*

Scoping reviews aim to explore the breadth of evidence in the area of interest to inform future research, rather than to provide in-depth synthesis on a specific research question. To do this in a timely way some compromises were made, such as only including studies published in English in the last 20 years, one reviewer screening all abstracts and titles, and narrowing our search to include specific terms linked to ‘advice’ and ‘rights’. Searches made without reference to these terms may have identified some additional studies but would have hugely increased the number of citations and time taken to screen articles. Nonetheless, we developed a comprehensive systematic search strategy including multiple databases covering different disciplines and incorporated grey literature searches. Further (systematic) reviews on this topic would benefit from inclusion of additional databases (e.g., ERIC and OpenGrey). To enhance reliability of the screening process a second reviewer examined the first 200 identified articles and consensus was achieved. We note that the majority of included studies were conducted pre-COVID-19 which likely will have ongoing social, economic and health and well-being impact for young people, as well as potential implications for preference and comfort with remotely delivered services, speaking to the importance of further research in this area. In addition to the limitations of the review itself, we also note that nearly one third of our included studies were published by the Legal Services Research Centre (no longer in operation), and thus there is limited disciplinary diversity in the research community publishing data about young people’s social welfare legal needs. Finally, despite not being a priority of scoping reviews we extracted key relevant information accounting for the different study types to make a narrative assessment of the quality of included studies to help readers contextualise our review findings.

### ***Conclusions***

Available evidence suggests considerable and inequitable need for support for social welfare legal issues (both in terms of experience of social welfare law problems and of access to support and advice) among young adults with implications for health and social wellbeing. Such evidence primarily is limited to the UK and Australia and may underestimate needs among young adults at higher risk of both social welfare legal issues and poorer physical and mental health. While some evidence for interventions aiming to enhance access to advice is available, this is scarce and methodologically weak. Further research is imperative to identify how best to improve access, particularly for young people at higher risk of social welfare legal problems and their health harming effects. We identify several evidence gaps to inform research and to enable systematic reviews addressing more specific questions to inform practice in future.

### **Acknowledgements**

We would like to thank Lindsey Poole for her contribution to the consultation process as part of the review. CW is supported by the ESRC Centre for Society and Mental Health at King's College London (ESRC reference: ES/S012567/1), CG was partly funded by the National Institute for Health Research (NIHR) Biomedical Research Centre at South London and Maudsley NHS Foundation Trust and King's College London. The funders had no involvement in study design, data collection, analysis, interpretation or the decision to submit for publication. The views expressed are those of the author(s) and not necessarily those of the funders.

**Declaration of interest:** The authors declare they have no conflicts of interest.

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Table 1. Inclusion and exclusion criteria for screening

Inclusion criteria	Exclusion criteria
<ul style="list-style-type: none"> <li>• Studies published between 1<sup>st</sup> January 1998 and 5<sup>th</sup> June 2020.</li> <li>• Studies focussed on adolescents/young adults (aged 16-25 years) or which present findings covering this age group.</li> <li>• Studies of need or uptake of support/advice for social welfare legal problems.<sup>1</sup></li> <li>• Studies in English.</li> <li>• Qualitative, quantitative, or economic studies, grey literature reports.</li> </ul>	<ul style="list-style-type: none"> <li>• Studies that do not focus on adolescents/young adults (16-25 years) or do not present findings covering this age group.</li> <li>• Studies focussing on social welfare issues where these did not include assessment of need or uptake of <i>advice or support</i> for such problems</li> <li>• Validation studies, case studies.</li> <li>• Articles which do not present original research materials including reviews, studies describing theoretical concepts, editorials, commentaries, book reviews, letters.</li> </ul>

<sup>1</sup>Social welfare legal problems refer to non-criminal everyday legal problems which may be remedied by law. ‘Social welfare’ problems are defined here to include welfare benefits, debt/money, housing/homelessness, employment rights, education rights, discrimination or immigration issues.



Table 2. Summary characteristics of included studies

<b>First author (year)</b>	<b>Country</b>	<b>Study design</b>	<b>Population (age in years)</b>	<b>Study focus</b>	<b>Type of issue/ extent of support</b>
<b>Intervention evaluations</b>					
Abbott (2003)	UK	Quantitative service evaluation	General practice patients accessing co-located welfare rights advice (15+)	U	Welfare benefits, debt / advice, casework
Butler (2007)	UK	Qualitative service evaluation	YP accessing advice agencies (16-25)	U, O	Various / information, advice, casework and representation
Gillespie (2007)	UK	Mixed methods service evaluation	Disadvantaged YP (16-25)	U, O	Money issues, debt / advice, casework
Greasley (2005)	UK	Quantitative service evaluation	General practice patients accessing co-located welfare rights advice (<20+)	U	Welfare benefits, debt / advice, casework
Lambley (2007)	UK	Mixed methods service evaluation	YP accessing online support (13-19)	U	Various / information, advice, support (unspecified)
Widdowson (2010)	UK	Quantitative service evaluation (pilot)	YP accessing advice agencies (16-25)	U, O	Various / information, advice, casework and representation
Balmer (2012a)	UK	Quantitative service evaluation (before only)	YP accessing advice services (14-26)	N, U, O	Various / information, advice

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Bashir (2013)	UK	Before and after evaluation with comparator	YP attending youth centres (13-19)	U	Various / information, advice, guidance
Klein (2013)	USA	Quantitative service evaluation	YP attending paediatric clinics (0-21)	U, O	Various / advice, casework, representation
Krska (2013)	UK	Uncontrolled before and after study	General practice patients accessing co-located welfare rights advice (18+)	U	Various / welfare rights advice (extent not specified)
Baker (2015)	UK	Mixed methods service evaluation	Youth people accessing immigration support (unspecified)	U, O	Immigration / information, advice, representation, support
Ahmad (2017)	UK	Mixed methods service evaluation	Youth people accessing immigration support (unspecified)	U, O	Immigration / information, advice, representation, support
Ollerenshaw (2017)	Australia	Uncontrolled before and after evaluation	YP accessing community health care ( $\leq 25$ )	N, U, O	Various / legal services (unspecified)
Woodhead (2017)	UK	Controlled before and after study	General practice patients accessing co-located welfare rights advice (18+)	U	Welfare benefits, debt / advice, casework
Camilleri (2018)	Australia	Uncontrolled before and after evaluation	YP accessing community health care ( $\leq 25$ )	U, O	Various / legal assistance, casework

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<b>Population surveys</b>					
Balmer (2007)	UK	Cross-sectional survey	General population survey respondents (18-24)	N, U	Various / advice
Buck (2008)	UK	Cross-sectional survey	General population survey respondents (18-24)	U	Various / not specified
Garvey (2008)	UK	Cross-sectional survey	General population survey respondents (11-25)	N, U	Various / advice, guidance, support
Denvir (2011)	UK	Cross-sectional survey	General population survey respondents (18-24)	U	Various / information, advice
Pleasence (2011)	UK	Cross-sectional and longitudinal panel survey	General population survey respondents (16-24)	N, U, O	Various / advice
Coumarelos (2012)	Australia	Cross-sectional survey	General population survey respondents (15-24)	N, U	Various / advice, support
Macourt (2013)	Australia	As above	As above	N	Various / not specified
Macourt (2014)	Australia	As above	As above	N	Various / not specified
Pleasence (2015)	UK	Longitudinal panel survey	General population survey respondents (16-24)	N	Various / not specified
Harrison (2016)	UK	Mixed methods study	General population survey respondents (18-24)	U	Money issues, debt / not specified

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Money Advice Trust (2016)	UK	Cross-sectional survey	General population survey respondents (18-24)	U	Money issues, debt / advice
Balmer (2018)	UK	Cross-sectional survey	General population survey respondents (18-24)	N, U	Various / advice
YouGov (2019)	UK	Cross-sectional survey	General population survey respondents (18-29)	N, U	Various / advice
<b>Qualitative or quantitative research studies</b>					
Gateley (2014)	UK	Qualitative study	YP seen at refugee organisations (18-29)	O	Various / information, advice, support (unspecified)
Denvir (2016)	UK	Quantitative survey/experiment	YP recruited to study (15-26)	U	Employment, housing / information, advice
<b>Audit of activity data/ targeted surveys</b>					
Balmer (2012b)	UK	Audit of activity data	Contacts to legal aid services (18-24)	U, O	Housing, homelessness / information, advice
JustRights (2014)	UK	Cross-sectional survey	YP accessing advice or interested in advice issues (15-25)	N, U	Various / information, advice
Centrepoint (2015)	UK	Cross-sectional survey	YP accessing housing support (16-25)	U	Housing, Homelessness / advice, support

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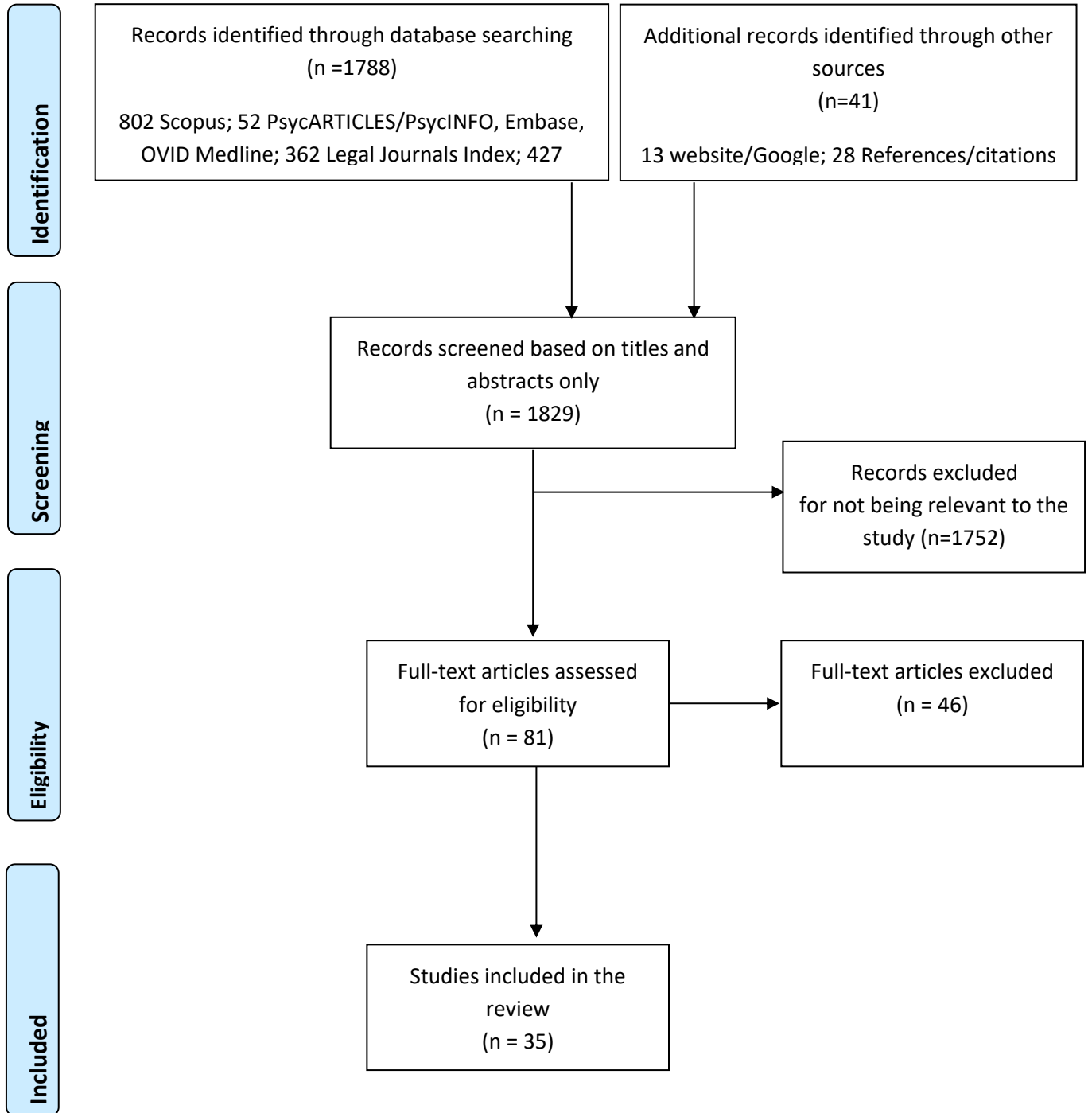
StepChange (2017)	UK	Audit of activity data	Callers to debt advice charity (<25)	U	Money issues, debt / advice, support
Brownfield (2018)	UK	Audit of activity data	Callers to debt advice charity (<25)	U	Money issues, debt / advice, support

N=Need, U=Uptake, O=Outcomes, YP=Young People

Table 3. Outcomes of social welfare legal advice

<b>Type of outcome reported</b>	<b>Number of articles</b>	<b>Source – first author (year)</b>
Financial or debt-related outcomes	6	Gillespie (2007), Klein (2013), Baker (2015), Widdowson (2010), Butler (2007), Pleasence (2011)
Housing, living standards, avoiding homelessness	8	Klein (2013), Baker (2015), Ahmad (2017), Widdowson (2010), Butler (2007), Pleasence (2011), Balmer (2012), Balmer (2012b)
Employment, education or training circumstances	5	Klein (2013), Baker (2015), Ahmad (2017), Widdowson (2010), Balmer (2012a)
Mental health, stress, well-being, life satisfaction, feelings about future	6	Camilleri (2018), Ollerenshaw (2013), Widdowson (2010), Butler (2007), Pleasence (2011), Balmer (2012a)
Self-confidence, self-esteem, self-mastery, decision-making ability, social support	4	Widdowson (2010), Butler (2007), Pleasence (2011), Gateley (2014)
Physical health, health behaviours	3	Camilleri (2018), Butler (2007), Balmer (2012a)
Access to health care, averted social services intervention	2	Klein (2013), Butler (2007)
Relationships, communication skills	2	Butler (2007), Balmer (2012a)
Knowledge of or ability to manage problems in future, understanding of rights	2	Widdowson (2010), Butler (2007)
Other legal outcomes (e.g., immigration status, avoiding criminal behaviour)	7	Gillespie (2007), Klein (2013), Baker (2015), Ahmad (2017), Butler (2007), Pleasence (2011), Balmer (2012a)

Figure 1. Flow diagram of article selection process



## Appendices

### Methodological information about included articles

First author (year)	Peer review	Clarity of reporting methodology	Sample size (of young person sample)	Control or comparison group	Validated/objective measures of health outcomes	Validated/objective measures of non-health outcomes	Reporting/accounting for non-response
<b>Intervention evaluations</b>							
Abbott (2003)	PR	Clear	13	No	n/a	n/a	No
Butler (2007)	NPR	Partial	27	No	No	No	Unclear
Gillespie (2007)	NPR	Clear	218	No	No	Yes	No
Greasley (2005)	PR	Clear	147	No	n/a	n/a	n/a
Lambley (2007)	NPR	Partial	549	No	n/a	n/a	No
Widdowson (2010)	NPR	Partial	518	No	No	Yes	No
Balmer (2012a)	NPR	Clear	188	No	No	No	Yes
Bashir (2013)	NPR	Clear	552	Yes	n/a	n/a	No
Klein (2013)	PR	Clear	1614	No	No	Yes	n/a
Krska (2013)	PR	Clear	7	No	Yes but not disaggregated by age	n/a	n/a
Baker (2015)	NPR	Partial	874	No	No	Yes	No
Ahmad (2017)	NPR	Partial	Not stated	No	No	Yes	No
Ollerenshaw (2017)	PR	Clear	41	No	No	No	No
Woodhead (2017)	PR	Clear	4	Yes	Yes but not disaggregated by age	N/a	Yes
Camilleri (2018)	NPR	Clear	133	No	No	No	No
<b>Population surveys</b>							
Balmer (2007)	NPR	Partial	525	n/a	n/a	n/a	Unclear
Buck (2008)	PR	Partial	365	n/a	n/a	n/a	Unclear
Garvey (2008)	NPR	Unclear	654	n/a	n/a	n/a	Unclear



## Social welfare advice and health among young people

Denvir (2011)	PR	Clear	1269	n/a	n/a	n/a	Unclear
Pleasance (2011)	NPR	Partial	232	n/a	No	No	Yes
Coumarelos (2012)	NPR	Clear	3517	n/a	n/a	n/a	Yes
Macourt (2013)	PR	Clear (from reference document)	3517	n/a	n/a	n/a	Yes
Macourt (2014)	PR	Clear (from reference document)	3517	n/a	n/a	n/a	Yes
Pleasance (2015)	NPR	Partial	601	n/a	n/a	n/a	Yes
Harrison (2016)	NPR	Partial	744	n/a	n/a	n/a	Yes
Money Advice Trust (2016)	NPR	Unclear	2042	n/a	n/a	n/a	Unclear
Balmer (2018)	NPR	Partial	473	n/a	n/a	n/a	Yes
YouGov (2020)	NPR	Clear	2430	n/a	n/a	n/a	Yes
<b>Qualitative or quantitative research studies</b>							
Gateley (2014)	PR	Partial	42	n/a	n/a	n/a	No
Denvir (2016)	PR	Partial	208	n/a	n/a	n/a	No
<b>Audit of activity data/ targeted surveys</b>							
Balmer (2012b)	PR	Clear	Not stated	n/a	No	Yes	n/a
JustRights (2014)	NPR	Partial	114	n/a	n/a	n/a	n/a
Centrepoint (2015)	NPR	Partial	101	n/a	n/a	n/a	n/a
StepChange (2017)	NPR	Partial	Not stated	n/a	n/a	n/a	n/a
Brownfield (2018)	NPR	Partial	Not stated	n/a	n/a	n/a	n/a

NPR=Non-peer reviewed, PR=Peer Reviewed