## Citizen Journey 2 | Sam: Economically inactive person, aged 34 with mental health condition (depression) and background of alcohol dependency, parent of a young child



Meet Sam, a 24-year-old former retail worker in a small UK city. Sam enjoyed a fulfilling life until experiencing a family bereavement and the end of a long-term relationship. As Sam's mental health deteriorates, she finds it increasingly hard to manage and stay in work. Sam's story highlights the need for a comprehensive government approach to service design and delivery. Early, targeted actions from departments beyond DHSC, aimed at improving her health could have prevented Sam from falling out of the workforce. Additionally, it may have reduced the number of interactions (and associated costs). Whilst many services may have been available to Sam, the complexity of these – exacerbated by her increasing isolation – make them very difficult to navigate. A more joined-up approach may have addressed this.

phased return to work...

Inflection point 1:
A lack of flexible working ultimately resulted in Sam leaving the workforce. At this stage it is possible the government (DBT) could work together with employers to provide support and options for those struggling. If Sam's case had been flagged to DfE to offer her reskilling or retraining, it may have opened up alternative flexible employment.

Inflection point 2:

Limited provision of green space and exercise facilities

Inflection point 3:

DLUHC's lack of knowledge and data on Sam's wider circumstances worsened

Limited provision of green space and exercise facilities reduced Sam's ability to act on medical advice, keeping her away from work. Targeted interventions to offer additional exercise opportunities as well as further education on the topic (DEFRA, DCMS) may have helped and brought her closer to re-entering the workforce. If DWP were made aware that Sam was successfully engaging with alcohol dependency programs, they may have been able to proactively support Sam in designing a

her isolation, pushing her further from the workforce. If local healthcare could provide the wider context of Sam's situation, a more appropriate housing situation may have been identified.

Local Council

DBT

Local Healthcare

DHSC

Day 0



1. Mental health deteriorates.

Sam experiences a family bereavement and the end of a long-term relationship. At this stage, she has very limited interaction with health or government systems.



Develops depression.

As Sam's mental health deteriorates, she struggles to balance health appointments and shifts at her retail job. Despite trying, she was unable to agree a flexible contract with her employer and consequently left her job.



Develops alcohol dependency.

Sam's mental health continues to decline – she now has severe depression and loses her job. To cope, she increases her alcohol consumption which eventually leads to alcohol dependency.



 Starts receiving Universal Credit and support from mental health services.

Sam accesses an outpatient mental health service specifically for alcohol dependency and employment counselling through the Individual Placement and Support in Primary Care (IPSPC) service (local council). By this point, she is engaging with multiple different government and

health services.



5. Struggles to follow all the recommendations to improve mental health.

Sam can't implement exercise recommendations for depression due to limited access to green spaces (DEFRA) and exercise facilities (DCMS).



6. Alcohol dependency improves, but depression persists.

Sam has a positive experience with the drug and alcohol team at Turning Point and is able to address her dependency. However, her depression persists and she struggles to afford rent after losing her job, forcing

her to move in with friends.



7. Becomes pregnant. Sam is offered social housing (local council).

At this point, the level of health and government support Sam is receiving significantly increases again.



 Gives birth but becomes increasingly socially isolated.

Sam's new social housing is over an hour away from her hometown and her friends and family. The route is long on public transport and she struggles to make the journey with a newborn. She becomes increasingly isolated.



9. Begins new family support programmes.

Sam is encouraged to engage with a local Sure Start centre (DfE) and Supporting Families programmes (DLUHC). As a new mother, she is navigating parent services for the first time – on top of the services for her mental health, housing and unemployment.





10. Can't attend meetings with mental health services and UKSPF-backed local employment support.

As Sam's child is so young, she doesn't qualify for free childcare and without support from friends and family, her caregiving responsibilities make it difficult to access support. She is not aware of local charities and private organisations that may be able to provide help.

DBT: Department for Business and Trade, DCMS: Department for Culture, Media and Sport, DEFRA: Department for Environment, Food and Rural Affairs, DfE: Department for Education, DfT: Department for Health and Social Care, DLUHC: Department for Levelling Up, Housing and Communities, DWP: Department for Work and Pensions. UKSPF: UK Shared Prosperity Fund