Voluntary Support in a Post-Welfare State: experiences and challenges of precarity

Abstract

This paper examines voluntary sector care and support provision under a context of significantly reduced government funding. Whilst geographers have analysed the causes and aftermath of austerity on different populations, our focus is on how managers of voluntary sector organisations have had to learn and evolve through bidding for *non*-statutory funding to sustain their core provision. Drawing on research with voluntary support organisations in the learning disability social care sector in England and Scotland, the paper examines the effects of the state's continued reliance on the sector for core 'public' services whilst simultaneously withdrawing its funding. Using accounts from managers, the paper offers a particularly novel and potent example of voluntary sector precarity and the deepening unfinished and unsettled nature of care and support that has unfolded in the wake of austerity. Through the empirical research, attention is drawn to three levels of precarity that are experienced by those seeking to sustain voluntary support provision: voluntary sector organisation and structures, the voluntary sector workforce, and individual managers' everyday emotional and affective experiences.

Introduction

Within the field of adult social care, comprising public services for older people, disabled people, and those with chronic or mental ill-health, the voluntary or third sector has been at the forefront of community care provision in liberal welfare regimes for close to 40 years.[1] Its position as a central player in public service provision largely arose in response to policy makers and researchers across the US, Canada, and UK viewing the sector as a *panacea* for ameliorating the effects of the late-twentieth century international fiscal crises on statutory health and social care provision (Power and Skinner, 2018). This 're-discovery' of the sector rejuvenated it through increased outsourcing with statutory grant funding and expectations to provide core services, while also raising questions over

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[1] Indeed, it was the precursor to much of the state supported public service provision before the New Deal (US) and post-war (UK) welfare settlements propelled the state into its central position until the late-1970s.

its closer relationship with government (Wolch, 1990; 2006). Since this relative heyday period (in terms of outsourced funding), over the past decade social care provision and independent living support for older and disabled people has been subject to declining public investment across these nations. While the reliance on the sector has continued apace amid declining public services, austerity has marked a more wholesale retrenchment of government spending (DeVerteuil, 2014). In the field of welfare provision, austerity has established a well-defined context of sharp cuts in government spending, reduced entitlements, new assessments and stricter eligibility (Hamnett, 2014; Hall, S., 2019).

This period has seen claims by Peck and Theodore (2010), DeVerteuil (2015) and others that the US, Canada and the UK are in a 'post-welfare' state context, characterised by the extensive (yet incomplete) hollowing out and dismantling of welfare provision and rapid adoption of minimal workfare provision. The UK serves as a particularly potent example for understanding these trends, with government austerity measures since 2010 accelerating developments and strengthening the political ideological basis for enforcing change; with the Global Financial Crisis and resulting deficit serving to provide a rationale for this agenda. The voluntary sector outsourcing (a pre-austerity trend) has thus evolved into a phenomenon of government's enduring dependence on the sector with a simultaneous withdrawal of funding for it (a post-austerity outcome).

While 'austerity' itself has been heralded by the UK government as over in 2018, what is unfolding is not the end of effective austerity but the end of austerity's discursive/affective usefulness for government (Raynor 2018: 1). The impacts of *structurally* embedded cuts, reforms and withdrawals persist, with relations between local and central government fundamentally re-shaped. Here a care 'safety net' is no longer provided by central government, but is now largely a localised responsibility for a withered local government and the community; thus exacerbating already existing spatial inequalities. The recent significant increase in government spending that has coincided with its Covid-19 response is focused on infrastructure and public bailouts (including a furlough scheme), but not on local government or support provision (Proctor, 2020). The wider resource shortfall for care and support services continues.

Much has been written on the ideological project of governments that have driven these reforms in liberal welfare regimes (Wilkinson and Ortega Alcazar, 2018). This incomplete yet pervasive ideological positioning has been focused on depicting the welfare state or public services as an unnecessary luxury at a time of economic hardship and making increased calls for self-responsibility and restraint among the population (Peck et al., 2010). There has also been the language of restriction of state support to those 'most in need' (enacted through continually rising eligibility

criteria) (Taylor-Gooby and Stoker, 2011). Austerity itself, and its wider effects on welfare, public health and social care, has received a wealth of academic scrutiny (Power and Hall, 2018; Stenning, 2018). Geographers have helped advance understandings of austerity as not solely a political and economic project, but also as an everyday, affective and emotional condition (see Hall, S., 2019 and Hitchen, 2016).

One of the central hallmarks of this condition which frames our paper is the sense of precarity that can arise from being insecurely 'placed' in the world and through feelings of anxiety, uncertainty and being neglected. Philo, Parr and Söderström (2019) invoke the term 'on the edge' to denote the metaphorical and material sense of occupying a state of marginality and having a feeling of unmoored-ness, highlighting how precarity is lived and felt within people's everyday experiences (see also Bonner-Thompson and McDowell, 2020). Specifically, our focus draws on Clarke and Newman's (2012) reference to austerity as an *'unfinished and unsettled field'* to inform our thinking on precarity. They use this term to characterise the unfinished political problem of ensuring that consent for austerity was maintained despite the contradictions within it. One such contradiction was the disconnect between the political promises being made that 'we're all in it together' and the reality of increased in-work poverty and precarity for a growing sector of society. Our paper adopts and expands this concept to explore the space that the voluntary sector must occupy in their ongoing 'consent' for the conditions under which they operate, and how this positioning affects the pragmatic and emotional labour involved in care and support provision. In this paper we seek to build upon this work by exploring how austerity has prompted a complex array of pragmatic and affective responses to precarity among those working within the voluntary sector. This precarity, we argue, is present at three levels: in the organisation and structure of the voluntary sector; in the workforce, comprising staff and managers; and within the affective experiences of the labour itself. With the latter, precarity can also be felt through a sense of failure in meeting the needs of those reliant on the sector (in our case, people with learning disabilities), who are already susceptible to the effects of the restrictive and penal nature of austerity-driven welfare reform (Hall and McGarrol, 2012). These experiences are situated within an 'unfinished and unsettled field' – a place where complex and contradictory expressions are felt and shared by participants who must operate within the context of ongoing minimal government funding.

The paper seeks to build on an established body of geographical work exploring how austerity has put renewed pressure on the voluntary sector to do more with less (DeVerteuil, 2015; Milbourne, 2013). We explore this literature further in the next section. Such accounts have not tended to examine the transition from statutory outsourcing to post-state funding in any great detail (see Fuller, 2016; Williams et al., 2014 for exceptions). We hope to advance this work by examining

how voluntary sector support managers have had to learn and evolve through bidding for *non-statutory* funding (a post-austerity context) as a way to continue offering their core social care service provision – responsibilities that expanded in the decades preceding austerity. The state's *continued* reliance on the sector for core 'public' services whilst simultaneously withdrawing its funding offers a particularly novel and potent example of voluntary sector geographies within a context of minimal government funding, whilst maintaining or even expanding its regulatory framework. The replacement by increasingly non-state funding, we argue, is a new chapter in voluntary sector co-option – a long-standing concern of geographers (Fyfe and Milligan, 2003; Milligan and Conradson, 2006) – and little is known about how the sector is sustaining its support provision under this context. Such practices, we argue, are distinct from previous neoliberal and 'Third Way' strategies in the 1990s and early 2000s of outsourcing state funded contracts to the 'non-profit sector' – a point we explore further below. Little is known about whether this context allows the sector more independence from the state or whether it curtails its ability to serve disempowered populations living in precarious situations.

The paper is informed by a larger interdisciplinary study involving geography and education which sought to examine how people with learning disabilities are experiencing and responding to the changes in social care, the learning that was involved, and how support organisations are adapting to the changes in the devolved nations of England and Scotland. The paper is focused on the latter part of this aim; specifically examining how operating within this context is being experienced, framed and felt by those managing voluntary organisations working in the field of adult learning (intellectual) disability support, and how it affects the nature of their support provision. In particular, it focuses on how they have managed to get a foothold in the sector, how they are learning to evolve (both financially and emotionally), and the extent to which they rely on bidding activity to secure fixed-term grants from non-state funding.

A focus on voluntary sector organisations will serve as a lens to understand the broader framing of the expectations of care responsibility within the post-welfare state and the relative roles of the state and voluntary sector within this mix. To better understand this debate, we now turn to examine the austerity geographies in which the voluntary care sector is situated, before outlining our study.

Austerity geographies of voluntary care

Charities have long relied on fundraising and other sources of non-state funding for ancillary services across countries in liberal welfare regimes. Indeed, philanthropy served as a precursor to general

state welfare provision. However, their role was largely separate and subservient to statutory care, which mostly took the form of institutionalised care settings for people with mental ill-health and disability (Parr 2008). Once neoliberal welfare reform gained policy attention from the late 1970s, state funding of the voluntary (and private) sector and delivery of ancillary community services grew. Relying on the voluntary sector became a convenient policy solution in some nations deemed to have 'liberal' welfare regimes, such as the US, Canada, Ireland and the UK as a response to the fiscal crises at this time. The voluntary sector from the late 1970s through to the early 2000s (re-)occupied a larger role in welfare and social care systems, particularly in learning disability support, through bidding for and securing public-sector contracts. From the 1990s, closer ties between the state and voluntary sector began to evolve with what Smith (2008) referred to as the rise of a softer 'liberal neoliberalism', for example through Third Way politics as espoused by the New Labour government in the UK. At this time, the sector became defined as 'non-profits for hire', as welfare policy shifted toward privatisation and contracting out (Smith and Lipsky 1993).

The increasingly formalised and interconnected partnerships between the state and voluntary sector that evolved raised questions over the transformative potential of voluntary sector organisations. The increased role of the voluntary sector was managed through a forced introduction of market models and regulation, a central point of neoliberalism (Albers, 2013). Wolch's (1990; 2006) influential characterisation of the sector as a 'shadow state' helped articulate the tensions that emerged in this context, highlighting the co-option and acquiescence of the voluntary sector and its staff by the state. This tension lives on, with Cloke et al. (2017) identifying the reinforcement of neoliberal rationalising of self-responsibility by foodbank volunteers and staff, as undermining efforts to challenge and transform broader structural roots of poverty and social injustice. Further, managing demands for greater professionalisation and training of volunteers have presented challenges for some people with learning disabilities, particularly those seeking to access voluntary work positions (Hall and Wilton, 2011). Given these tensions, Mohan and Bulloch (2012) identify the perils of relying on a more piecemeal, geographically uneven voluntary sector for welfare provision. The centralist and universalist post-war foundations of support services have thus been eroded and in turn replaced by 'new landscapes of inequality' (Collins et al., 2008).

Notwithstanding these debates, the sector's increased role from the late 1970s helped bolster the safety net for populations in increasingly vulnerable situations ill-served by the state, the market and informal communities, at a time of growing neoliberal welfare ideology. It has continued to play a central role in health and social care provision. Indeed, its positioning was further cemented from the 2010s, with two emergent policy agendas across neoliberal welfare regimes that have prioritised its role in social care: personalisation and co-production (Baglioni, 2017; Alford, 2009).

Personalisation (self-directed support), first built on the aspirations of disabled people in the US and UK, has sought to give people more choice and control over their support budgets. This policy increased the freedom for people eligible for social care to use their entitlements to buy support from community and voluntary sector organisations. Personalisation is now at the heart of social care legislation in England and Scotland, although Pearson et al. (2018) notes how Scotland has been more sceptical of the market-focused policy incarnations of personalised support.

The second policy agenda encourages co-production. In England, with the *Care Act 2014* and its statutory guidance (2016), professionals, community 'assets' (including local voluntary organisations) and local citizens are encouraged to design, plan, assess and deliver support together. The *Localism Act 2011* also establishes a framework of breaking down barriers that stop local charities, social enterprises and voluntary groups 'getting things done for themselves' (Statutory guidance, 2011). A similar approach has been adopted in Scotland, with the Christie Commission on 'Future Delivery of Public Services' (2011) focusing on prevention through co-production, followed by the *Community Empowerment (Scotland) Act* 2015, with service providers expected to work closely with communities to meet needs. Given the timeframe of these policies, it is difficult to disentangle their emergence from the parallel evolution of austerity, which we turn to next.

Following the global fiscal crisis in 2008, many governments were forced to respond to financial deficits. In the UK, the initial focus of New Labour was to secure economic stability via 'light touch' regulatory control. From 2010, a new Conservative-Liberal Democrat coalition government was formed with a radical deficit reduction agenda; this marked the beginning of austerity. From the end of 2010, financial support to local authorities from the government decreased by 40 percent (The Kings Fund, 2015). Adult social care is the largest controllable element of a local authority's budget and is not ring-fenced as part of the allocation councils receive from central government, which made it difficult for councils to completely protect social care from cuts. Numbers deemed eligible for social care fell by 25 percent from 2009 to 2015 (from 1.7 million to 1.3 million) and in 90 percent of local authorities only those with 'substantial' or 'critical' needs were deemed eligible for publicly funded services (ibid.). Voluntary organisations in England have also been affected by funding cuts, with many being forced to cease operating (Jones et al., 2015). Scotland played a significant role in the UK government's deficit reduction plan. The devolved administration had to cut spending by around 7 percent from 2011 and capital expenditure by 40 percent, generating £3.3bn in savings from 2010 (Cunningham et al. 2016). Since this time, as noted above, there has been a declaration of the 'end of austerity' in 2018, but the structural reforms towards localism, devolution of responsibility, and restricted welfare entitlements associated with austerity's ideological project

remain largely unchanged. The UK thus serves as a compelling case given its stage of neoliberal development and the wholesale hollowing out of its welfare system.

A key point that underpins our empirical study is that the devolved governments in England and Scotland have *continued* their reliance on the voluntary sector for core 'public' services in the community at a time of significant cuts in government investment in adult social care more generally. This particular spatial and temporal context serves to characterise England's and Scotland's local neoliberal 'mutations' (Peck 2014). They offer potential insights into unfolding processes in similar but variegated neoliberalizing movements evident in the US (DeVerteuil, 2015), Canada (Cunningham et al., 2016) and across Europe (Baglioni, 2017) – although we acknowledge notable differences are evident in different nations, each crafting (local) models, adaptations, defences and alternatives (Peck, 2014).[2]

Despite the goal of personalisation to increase the space for voluntary sector organisations to occupy the social care market, it has been critiqued by disability studies and critical social policy scholars for reinforcing the principle of reduced government welfare provision (Morgan and Roulstone, 2009; Pearson and Ridley, 2017). Likewise, co-production under the auspices of minimal government funding arguably marks a final staging post in the devolution of responsibilities – another kernel of neoliberalization (Secker et al., 2006) – from local authorities to 'communities', understood as local voluntary and community organisations, individuals and families.

Within voluntary sector geographies, some studies have helped to highlight some of the emerging effects of austerity. DeVerteuil (2015) has examined how urban homeless charities have adapted practices to be resilient under the 'post-welfare state'. Cunningham et al. (2016) have explored how austerity has compelled precarity of employment conditions for nonprofit workers. Others (e.g. Milbourne, 2013; Hall, S., 2018) have explored how austerity has created conditions where day-to-day survival is harder to maintain. There is little evidence of governments undertaking succession planning with the sector when their funding was being cut (Fuller, 2016).

While austerity can be understood as a financial tool invoked through political ideology, this account fails to recognise how it also manifests as an emotional and affective condition. S. Hall (2019) discusses austerity as something that is lived and felt in everyday life as a personal experience of fragility, exhaustion, and uncertainty. Likewise, Hitchen (2016) and Clayton et al. (2015) both highlight the emotional toll of changes under austerity on the professional lives of those delivering

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[2] In much of Europe, for example, 2008 saw considerable fiscal stimuli until the neo-Keynesian consensus was replaced by a more austere ideology in 2010-11. Meanwhile, in Canada, despite experiencing a lighter recession, the federal government responded with radical cuts and austerity policies (Cunningham et al. 2016).

services. Here, austerity shapes capacities to feel and act, how austerity is in some way always there, ready to make itself present. In a similar vein, Wilkinson and Ortega Alcazar (2018) detail how precarity and hardship can manifest through emotional weariness of young people. It seems crucial that we explore the emotional and affective experiences that accompany the experience of precarity, imbricated with the pragmatic financial decisions that are made.

The focus of our research helps to unpack further these concerns of how voluntary sector precarity manifests itself as occupying an 'unfinished and unsettled field', with people's (incomplete) willingness to subscribe to this framing (Clarke and Newman, 2012). We examine the phenomenon of voluntary sector precarity, specifically how it manifests in pragmatic funding decisions to 'stay afloat' at the organisational level, how it shapes the workforce within organisations, and how it is experienced as an emotional and affective state.

Researching a field of precarity

The research underpinning this paper is based on a two-year study conducted by researchers at the Universities of Dundee and Southampton. Both universities gave ethics approval for the research. The aim of the wider study was to examine how people with learning disabilities are experiencing and responding to the changes in social care, the learning that was involved, and how support organisations are adapting to the changes. For this paper, we address the last part of the aim, more specifically to explore how learning disability voluntary support organisations are adapting and evolving in the wake of personalisation and austerity. We developed a qualitative research design informed by a pre-established network of advisory group partners, including people with learning disabilities, their advocacy organisations and support providers, who helped design the research questions and methods. We also liaised with our national stakeholder partners, Scottish Commission of Learning Disabilities and Think Local Act Personal, in the research development and dissemination stages.

The first phase involved an area-based study of support organisations. We chose four case-study areas in the UK – two in England and two in Scotland (one urban and one rural in each) – and looked at community-based day support provision in each area. We interviewed seven local authority representatives (including five commissioners in social care) in one of the urban and two rural areas. We also interviewed 39 staff at 29 organisations providing a range of day/evening community support and activities, through for example friendship clubs and self-advocacy groups, volunteering placements and neighbourhood networking schemes. Over the course of the research, we found that these were often the sole sources of support for people, due to the strict eligibility for

domiciliary care. As part of this process, we also attended activities, meetings and events at eight of these organisations over a four-month period. We had to carefully manage ethical concerns over asking about the financial and physical vulnerabilities of non-profit work; we liaised closely with our advisory group partners (including some non-profit managers) to ensure our questions were balanced and covered the positive and rewarding aspects of their work. The organisations providing these community-based support and activities were predominantly charities and micro-enterprises. Micro-enterprises have been shown in other research (Needham and Allen, 2016) to deliver more personalised, innovative and valued support for a similar or lower cost than larger providers. However, they can find it hard to get started and to stay in business.

The second phase involved focus groups and interviews with people with learning disabilities who were supported by these organisations. We talked to 43 people across the four areas about their experiences. Most participants had more mild and moderate learning disabilities and support needs, regarded as being at the sharper end of the cuts (Hall and McGarrol, 2012). Although a large variation existed within this group, we recognised that people with profound and multiple disabilities were not often present at the kinds of community initiatives we explored. To help participants fully contribute to focus groups and interviews, we used additional methods of capturing their experiences (a circle of 'people in my life', a schedule of 'your typical week' and an 'activities' sheet).

This paper primarily focuses on the interview material from the first phase and field notes from the research, because of the focus on the voluntary sector. The data were analysed in an iterative process. Initially individual researchers focused on exploring the landscape of care, the sustainability of voluntarism, the role of the state and support initiatives. Some deductive codes were predetermined, including managing volunteers and funding. These codes were refined, with new codes added inductively. Later, pre-set and emerging data codes from this process were brought together and core themes were identified. The analytic process allowed us to identify the key experiences of managers of their own organisation, of the sector more generally, and how they aligned with the commissioners' views. The following section outlines four discrete themes which structure the findings: the managers' experiences of start-up; sustaining provision; relying on volunteers; and the impacts on support.

Occupying the austere landscape of voluntary care provision

Getting a foot hold in the sector

A key part of our research was to explore how voluntary organisations were established in the first instance. During the interviews, we heard many origin stories about how the organisations had emerged *within* the context of austerity. In some cases, this process involved individuals taking a personal financial risk in establishing their organisations. As stated, these tended to be small non-profit social enterprises or charities that individuals set up themselves, sometimes through their own personal finance.

> [Starting up] was a leap of faith because it was at a time where it was very evident that funding was drying up [established in 2007]. Do you sink or do you swim? And I was not going to sink. So I invested my own money into this and completely gutted the place… So it's now fit for purpose. (Margaret, Community Day Activities, England)

One manager of an advocacy organisation reflected on how much easier it was to get projects off the ground before austerity.

> The [local authority] partnership boards used to have budgets, back in the day [laughs]. So you could go to your partnership board with an idea for a project and get maybe 30 grand [thousand pounds] or something, to develop an idea or to run some groups, or--, and the partnership boards, as a body, would allocate that money… I mean we never felt like we had loads of money, but with hindsight, money was quite easy to come by, but we wouldn't have said that at the time [laughs]. (Charlotte, advocate, England).

To illustrate this further, a manager of an organisation, established before the period of austerity, shared his experiences of subsequently seeking to expand their provision of peer-support facilitation into other local authorities and the frustrations of trying to secure local authority funding.

> On the odd occasion when we do find a local authority who are prepared to take a bit of a punt [gamble], we are able to readily prove [our model works], but even when you present that evidence, the local authorities are still saying, 'Well that's great. And we do believe that you can save us 10,000 pounds next month, but we haven't got the 2,000 pounds--, to give you now.' …So what we are having to do, is we're having to try and secure funding from elsewhere to take to the local authorities to say, 'Look, we've got monies here to run a pilot, if we can run the pilot, to evidence our worth would you be prepared to commit beyond?' So, we're just currently, well, as of the 1st of June, about to start a two-year pilot in [county], and it's two networks that have been part funded by the Lottery, Trust [name] and a

nominal amount from the local authority. They've found a fiver down the back of the sofa or something, that they--, they've tossed into the pot. (Anthony, Good Neighbours, Scotland)

This experience was galling for some managers who said that the council were *'very ready at sending people to [our organisation], but no support financially from the local authority'* (Frances, Scotland). Frances' organisation was being treated like a day service by the council, and as a result, demand outstripped capacity. Anthony later explained how his organisation had faced first-hand the state withdrawing its funding in one of the local authorities they operated in. The organisation managed this by using its own resources for a period to extend their support.

So our worry is that we pull all these people in and in 18 months' time we need to say to them, 'Look, I'm really sorry.' And we have been in that situation previously and because of the organisation that we are we probably--, well we extended our support to those people way beyond when the local authority stopped actually funding us and we used some of our reserves and--, I suppose it didn't compromise the organisation but we bailed the local authority out quite a bit. (Anthony, Good Neighbours, Scotland)

While this serves as an example of abandonment, Anthony later outlined how his organisation persisted in their engagement with local authorities and did secure some state funding to continue operating due to relationships built with commissioners.

Sustaining provision

Once established, the managers of organisations discussed the ongoing pressures. Participants shared accounts of their efforts to sustain their organisations in a deeply challenging environment. Managers explained their funding models, which typically comprised multiple separate grants. The Big Lottery Community Fund was one central source commonly referred to. Each funding source was usually tied to a 'project' that was often time-limited with specific goals (e.g. money awareness training, speaking up sessions). Given the atomisation of funding, this required constant bidding, evaluation and reporting of outcomes, which required learning new knowledge and skills. Also, it meant that most organisations we interviewed had no core money to cover the overhead costs such as the office, printing, and staff salaries, with these costs having to be added as a fraction to each grant proposal. This reliance on fixed-term, piecemeal funding led to the feeling of continually operating hand to mouth, as described below.

So currently a small proportion of our income is from the local authority and CCG [Clinical Commissioning Group] and that's the Forum and Quality Check project so of our income it's

about ten percent. And the rest of it is through funding grants and donations... We've been funded by Mencap, People's Health Trust, Lloyds Community Health Foundation Trust, Water [supplier], we get lots of little bits of grants from them, Comic Relief, so we've got, at any one time, we could have 20 funders who all want reporting and writing. We apply to small organisations locally who might give us five thousand every couple of years, something like that, that helps us go. So it's hand to mouth. And I think most charities would say the same. (Casey, Friendship MeetUps, England)

Later in the interview, Casey shared her fears about the sustainability of operating under these conditions: '*every year I think, will I still be here and we've kept it going for now but there's never a guarantee. I couldn't say we'd be here in a year's time, we might be, we might not*'. Many others expressed similar sentiments, with one participant Yvonne (LD Self-advocacy, England) using the term 'battleground' to describe this environment, '*cause you're all kind of going for the same pots of money sometimes, aren't you? And then you're like [in] a battleground between each other.*' Yvonne later suggested that she felt that she could never switch off, '*there's always somebody down the road that needs help. So, I never switch off from [this, unlike] social workers and professionals [who can] think it's bed-, it's switch off time*'.

Their accounts also highlight an acute awareness that local authorities have limited resources themselves for community provision.

I have every empathy that Social Services are stretched, they've got no money either, they're fighting crises, so they can't put in [resources] to preventative work... So, if we set that as a challenge we've got to keep going, we fundraise, people are very generous, and we rely on a lot of the goodwill of volunteers to support our work so we can stretch what we do further and that's really important... So it's about using all our resources the best way we can to ensure our sustainability. (Casey, Friendship Meet Ups, England)

The quote suggests that the financial fragility of social care had become normalised by those working in the sector.

Within the social care market, advocacy has become a statutory duty following the Care Act 2014 (in England). This has meant that some organisations have attracted government funding for the advocacy part of their service, while the remaining forms of support provision remain largely reliant on non-state funding. This has resulted in complex hybrid organisations driven by cost-efficiency demands:

the whole thing about making advocacy a statutory thing, because when we first started, it was very much based around volunteering, it was citizen advocacy so an advocate would get to know somebody and maybe visit them every month for a couple of days. So you've got [your advocacy] qualification, you've got your quality mark, you've got your charter. That's great, and it has to be commissioned by law, but the commissioning process means that it's been cut to the bone and whoever's cheapest wins [laughs], that's my cynical hat, obviously you're rated on your quality answers as well as your pricing. But we all know the cheapest wins. So you're cut down and down and down and conversations are always about how can we get our hourly rate down, how can we do more hours with less money. Our staff are so tired at the moment and have been for ages. They're--, it's not what most people think of being a charity environment, it's a pile of caseloads. It's--, and advocates literally run in and out of the door, they grab a file, they drive to [nearby town], they come back, they grab another file, they drive somewhere else, and they've got eight reports to write. They take it home and work into the night. It's really high pressure and that's what the lack of money does, and it's totally transformed organisations from being value driven volunteering organisations, to being low cost businesses. And that concerns all of us really. (Charlotte, advocate, England)

The quote shows the extent to which voluntary social care organisations are becoming professionalised, with her description of the work sounding like a local authority social work department, whilst being ran as a private business, and simultaneously seeking to maintain its original voluntary sector ethos. A new hybrid form of organisation thus emerges comprising voluntary, state-like, and private sector characteristics. Learning to run these organisations and navigate this environment was a challenge. This was clearly articulated by a manager of a disabled person-led peer-support charity:

So it's about trying to find that middle line where you're able to have the user-led-ness so that you feel it is run and led by people with learning disabilities but mindful of keeping the money coming in so that we can continue. So that's always the fine line. It's like running a business, you know, you've got to keep looking at the costs all the time. (Casey, Friendship MeetUps, England)

While we purposely chose to focus on the experiences of managers in this paper, it is worth briefly highlighting the account of one of the commissioners we interviewed that reinforces the participants' accounts. The following extract shows a similar narrative of the challenges facing preventative community services:

Yes, the challenges of funding has meant that the focus--, most of our funding is meeting our statutory duties [often with large private sector residential care providers]. You've got an increasing population of young, complex people coming through into adulthood with very high support needs, and then alongside that you've got an ageing population of people with learning disabilities with increasing needs. So, yes, the preventative services [from voluntary organisations] you're forever defending--. (Charles, commissioner, England)

The quote indicates an acknowledgement of the need to defend the voluntary sector, whilst simultaneously reflecting on the lack of resources to do so. Another local authority (in Scotland) got around this by allowing some of their staff to use their paid staff time to support local voluntary organisations (e.g. to facilitate a local self-advocacy group and a theatre group). It was acknowledged by the council that this was not an ideal situation and they would prefer if these voluntary organisations were self-sustaining. However, without being able to offer statutory funding the unofficial view was to turn a blind eye to these sorts of 'in-kind' reciprocal arrangements. This demonstrates an acknowledgement of the need to defend the voluntary sector and create ways to do so, with little or no financial means. Indeed, some social care staff also used some of their own time to support these organisations in a voluntary capacity – reflecting the philanthropic nature of this support.

This was not the case everywhere. In another local authority in England, the life skills and support lead took our researcher to a local café that had started to employ people with learning disabilities on an unpaid and paid basis. She wanted to show the researcher a beacon of hope in the community, somewhere people could come and do volunteer work and progress to paid work. However, when our researcher spoke to the manager it was evident that the whole enterprise was unsustainable and reliant on his own philanthropic funding which was drying up. The café closed before the research ended.

Relying on Volunteers

With the co-production agenda being foregrounded by government, we explored how voluntary organisations – long-accustomed to utilising volunteers – have managed this expectation over this period. Several accounts were shared with us about the challenge of managing volunteers with limited and piecemeal funding.

Part of our contract [for advocacy with the local authority] was to do -- there were some expectations to do community work. Unfortunately-- and there was a hope that we could

find volunteers to be able to do that work. I don't know why, the volunteering environment has really dried up. It takes a lot of work to manage a volunteer… we don't have the capacity to do that. (Mary, Advocacy Central, England)

The account is from an organisation with a mixed hybrid model of funding, comprised of local authority money to cover advocacy, and non-state funding to run other core parts of the service, including facilitating community-based peer-support. At the end of the research, this organisation lost its contract to another larger organisation operating across multiple areas of the UK. The challenge of managing volunteers, expressed in the above quote was a common experience. In the account below, a manager talked about the assumption being made that organisations can expand their provision through increased engagement with volunteers.

We'd love to develop [Friendship MeetUps], for example, by buddying people with learning disabilities with volunteers so that they can attend events outside of [Friendship MeetUps] on their own. You know, there's lots of opportunities. But we need funding to do that. We can't just--, people say, why don't you do that, well, we'd love to and it would hugely benefit our members but unless we can find funding [for] that, I've got to pay staff, we can't expect…, we used to engage volunteers massively throughout our projects but they still need supervision so there's an element where as much as we could get people to volunteer lots of their time, I think realistically, expectations are that we are working with vulnerable adults and there does need to be some staff support as well in many of these areas. We do use volunteers where we can but we also do a risk assessment so there actually does need to be a member of staff. (Casey, Friendship MeetUps, England)

This raises an important point about the need for a core of paid, trained staff, to enable the effective recruitment and management of volunteers. Some organisations we looked at also sought to recruit self-advocates with learning disabilities as volunteers, which added to the complexities around training cultures, questions over paid/unpaid labour, and managing relationships of mutual support. Absence or unpredictability of funding (exacerbated by the atomisation of sources) made this careful work more difficult. One participant spoke of having to let a paid volunteer go because they had come to the end of the fixed-term funding period.

People think volunteers just go and do things. They need leaders. And the best will in the world [laughs] I can't split myself and neither can Mark. And you can get volunteers to lead projects sometimes, but you're asking a bit much all the time. And I think, if you pay for a leader, which we did with that money and we had Bob our horticulturist who led a gardening group, we had so much more back from that. 'Cause he was, in turn, then

dedicated. I've ran out of funding for Bob so I had to let him go at the end of October. I'm not happy about that but I'm trying to get a bit of funding in for March. And now I've got about 25 people in [local town] that's going to be sitting around, well not sitting around, I have to find alternative things for them to do during the winter months. That's quite difficult, that's hard but I'm going to try and keep them connected. (Sian, Volunteering Support, England)

Impacts on Support

Ultimately, we were interested in exploring the perceived impacts on care and support provision on people who were reliant on this sector, and the expectation that people could be supported with minimal government involvement. While our broader study was informed by the accounts of people with learning disabilities, we draw upon the managers' views here given the focus of our paper and their oversight of the client group they served.

Because of the expectations by funders to be financially lean, managers spoke of the pressures to operate via a caseload model, with limited amounts of hours allocated to each 'case'. Charlotte referred to the constant pressure to cut hours, which meant that by helping some clients with complex cases, others received less hours, as articulated below.

> One thing that we do a lot of is [advocacy for] parents with learning disabilities, we've got a long history of helping parents who have learning disabilities. But if they're in the court of protection that's five days in court in [nearby city]. The funding we get for that will be eight hours, do the maths [laughs]. Sometimes those cases can be 60 hours, 100 hours, when you're funded eight hours then that becomes tricky, so you have to have a large number of cases that you complete within five hours or six hours in order to balance that. (Charlotte, advocate, England)

As a result of this pressure, Charlotte spoke of her concerns for people without informal support networks. Her example suggests that despite advocacy being a statutory entitlement, assessments were still taking place without advocates, and this was having devastating consequences for some people whose services were cut.

> I worry about people with learning disabilities who don't have families or don't have outspoken families. When I spoke to a carer a couple of weeks ago she knew of a lad, he'd had a needs assessment and it was just the social worker with him, there was nobody else, and he basically agreed to everything as people quite often do, to make the professional

smile and happy and pleased with them. And that's his services cut, massively. And I said to this carer 'where was the advocate?'; they should have had an advocate in the room to say well there's lots of people who--, that happens to and they don't have advocates, even though they're entitled to them. (Charlotte, advocate, England)

Some participants also suggested that by operating within the market environment, some organisations had become competitive over attracting their clients, which indirectly affected people's ability to choose.

I have concerns. I have [clients] that come to me, who come in and say they can't come in next week because they're needed by the other day service. There seems to be this pressure on them. It's changing. It's aggressive. And it's a shame. And the shame of it, and it is shameful, is that it's affecting vulnerable adults, and I think it's almost a sign of abuse, actually, I think it is abusive to put that sort of pressure on people. (Margaret, Community Day Activities, England)

While these challenges were presented throughout the research, there were also moments of positivity, where managers continued to feel motivated, and whose organisations were making a difference, filling a gap in an area with otherwise limited opportunities. The Bookshop project (Scotland) was a good example of an organisation that was established during the research period and has managed to navigate the complex funding system with non-statutory funding. The project recruits and trains people with learning disabilities to run the bookshop and learn customer service skills. Despite this positive example, the manager Frances remained acutely alert to the effects of the wider challenges on their sector, and the expectations from funders: '*Probably in the future we will have to broaden things to continue to get funding because funders won't keep funding the same thing. They want to see more.*' More generally, there was an awareness that due to these challenges, the sector was becoming withered; '*unfortunately a lot of those People Firsts [disabled people-led organisations] have not been able to survive and I think there's something like 60 or something left around the country, so it's hugely diminished*' (Casey, England).

Discussion

Our paper examines the experiences of voluntary sector organisation managers seeking to establish and sustain support provision within the context of minimal state funding. In interpreting our findings, we acknowledge we did not forensically examine each organisation's funding sources, but

chose instead to listen to participants describing these. With this caveat, the accounts from participants reveal the experiences behind their efforts to sustain their provision.

At the outset, we were conscious of personalisation being less welcomed in Scotland (Pearson et al. 2018), however, in our study, we found little differences across the two devolved nations in the experiences of participants; the mainstay of the organisations' funding for preventative community-based support in both jurisdictions was largely non-statutory grant funding. This lack of difference is perhaps systematic of the wider failure of social care reform in times of austerity to make a demonstrable improvement in people's lives (Pearson et al. 2018). Despite the significant funding constraints on the voluntary sector, it was clear from our study that this did not stop local authorities relying on organisations for support provision. Frances' account most clearly highlighted this, where the local authority was very ready to send people to the bookshop project, while simultaneously offering no financial support.

Our research points to a shared experience of precarity that was not just an employment-based financial experience, rather it operated at three levels; across the organisational and structural level in which organisations are situated; through the labour force comprising staff and volunteers; and within the embodied emotional and affective experiences. Each of these intersect to create a complex and contradictory form of emotional and physical labour in sustaining voluntary sector efforts.

At the organisational and structural level, due to the market-led structure and minimal government funding of care services, organisations typically relied on multiple grant streams, with each grant often ear-marked for a specific project. Many organisations still refer to local authorities as a part-funding source, although this was typically for specific contracts like delivering advocacy. On rare occasions, organisations were able to acquire some local authority funding for preventative work, although this had a lot to do with the relationships built with commissioners who could see the care (and cost saving) value of this service. In mitigating this precarity, Charlotte and Casey spoke about their organisations becoming hybridised and adapting characteristics of local authority social service departments and private businesses, while seeking to maintain their voluntary sector ethos.

At the workforce level, precarity manifested in undermining the managers' ability to recruit and draw upon the support of staff and volunteers over the long-term. Our examples of the horticultural employee who was let go, and the café which ceased to operate, offer insights into the harshness of this funding climate. Such experiences resonate with Hitchen and Shaw's (2019) account of people, organisations and public spaces (e.g. libraries, parks) quite literally falling off the map, becoming the hidden and redundant workforce, and the disappearing spaces of care from the material

environment. These gaps, we suggest, further fuel the support needs of the people these organisations seek to support, highlighted by the example of the adult with learning disabilities who was unable to access an advocate.

At the emotional and affective level, we heard complex and contradictory expressions by participants of mutually being disaffected *and* committed, disgruntled *and* engaged, agitating *and* compliant. Being committed, engaged and compliant was evident in Casey's and Sian's questioning of whether they will still be here in the future, yet both stated that they have got to keep going, often working into the night. Here, sustaining is not just about funding; it is also about energy, commitment, learning, building knowledge and being valued. The managers recounted how their work is based on a strong moral obligation to serve their communities despite the challenges. They cannot stop because they know what is at stake. Such accounts were tinged with feelings of being disaffected and disgruntled, illustrated in the accounts of Yvonne and Charlotte, who revealed experiences of never switching off and being 'in a battleground', yet only rarely conceding their fragility. These accounts were tempered with small successes through agitation, for example from Anthony, who successfully gained local authority money and in-kind support.

These research findings resonate with understandings of voluntary sector precarity in times of austerity as lived and felt (Clayton, 2015; Hitchen, 2020; Hall, S., 2019). For example, Hitchen (2020) describes how library workers experience austerity through fluctuating, non-coherent and sometimes conflicting affective relations. This contradictory affective state gives voluntary sector organisations the ability to enact their own localised agendas. One benefit of applying for non-statutory grants is being able to shape the service in ways that organisers feel best meets people's needs and on their own terms, a point most clearly articulated by Margaret who self-funded her own start-up. This point is suggested by DeVerteuil, Power and Trudeau (2019: 6), who argue that voluntary organisations can 'exercis[e] a certain latitude to engage with vulnerable communities in ways that diverge from a strictly neoliberal, co-opted and parasitic one'. On the other hand, by putting the community label on the work that these organisations do, the government is arguably permitted to be complacent and continue to imagine communities as a limitless resource of people and places that *ought* to care (Gleeson and Kearns, 2001). The anticipated 20 percent cuts to local authority budgets in the wake of Covid-19 will only further exacerbate this problem (Proctor, 2020). This context has relevance for how we think of the landscape of care (Milligan and Wiles, 2010), as being framed largely as an 'imagined moral geography' (Gleeson and Kearns, 2010), as the responsibility of individuals and local communities. The affective value of community continues to be exploited as it presumes that people can understand their role within 'community' social relations.

Given the normalisation of minimal funding across the voluntary sector, illustrated through accounts by Charles and Casey, the unsettled and unfinished nature of support provision is likely to persist for those working in and seeking support from voluntary sector support organisations. As Clarke and Newman (2012) posit, if left unchecked, this positioning may more depressingly point to disengagement, withdrawal, the rise of cynicism, scepticism, and anti-politics: the privatisation of disaffection rather than its public and political mobilisation. How this would manifest within the voluntary sector is unclear. The evidence in our paper suggests that this is not simply a story of shadow state organisations 'guilty' of responsibilising individuals (Newman, 2005) nor is it solely the responsibilisation of communities through uncontested and homogenous forms of governmentality (Fuller, 2016). Rather, the sector's hybrid engagement offers some limited scope for managers to both agitate and foster the relationships in which their organisations operate, yet little room for them to transform conditions because they are so exhausted labouring under them.

The nature of state withdrawal of public services is problematic given the state's increasingly confident articulation of co-production being at the heart of social policy. The co-production agenda arguably builds on assumptions of the voluntary sector being available as 'community assets' in delivering support. DeVerteuil (2014) argues that more punitive aspects of market-led social policy governance associated with austerity and the post-welfare state, have increased in anticipation of a supportive voluntary sector response. The growth in outsourcing of services to the voluntary sector in the 'Third Way' period prior to austerity offered voluntary organisations a platform for growth in care provision. Following the guiding principle of co-production since 2008, central and local governments in the UK are increasingly reliant on (and arguably complacent about) voluntary sector organisations doing the work of support for people with learning disability and many other groups. Horton's (2016) theorisation of 'anticipatory political action' suggests a set of discursive, technical, and affectual processes that constitute a practice of 'acting-in-advance'. Consequently, those working in the sector have had to live with the anxious anticipation of what might happen in an era of ongoing austerity. Similar to Horton (2016), our study depicts a particular affective mood or atmosphere of feeling unstable and unsettled, where consent with co-production is conditional and grudging, rather than enthusiastic.

Conclusion

Our findings reveal some of the experiences of occupying the unsettled nature of voluntary care provision within England and Scotland and add texture and nuance to structural accounts and ideological critiques of neoliberal post-welfare regimes. The insights illustrate how support provision

is being sustained in this environment, by a sector that is itself precarious. We acknowledge that our participants' sense of loss of a former 'heyday' period may be somewhat misplaced. Although funding was more secure it was never adequate; state-voluntary sector relationships have continually evolved in ways that have not always been favourable for the latter (see also Wolch, 1990). Nonetheless, our study further advances voluntary sector geographies *beyond* outsourcing. The cases of England and Scotland offer an insight into the specific temporal and geographical context in which voluntary sector organisations occupy, with devolved governments continuing to place considerable demand on the sector, through calls for co-production, at a time when funding has dried up.

The evidence presented here serves as an illustration of a particular variegated form of neoliberalization which has unfolded within a post-welfare state context. Though national austerity programmes may differ and impact differently on voluntary sector support organisations in different jurisdictions and on different populations, for managers, the experience of austerity policies is a shared one, unquestionably dominated by precarity. Our study echoes comparable elements of precarity being reported elsewhere, from the US (DeVerteuil, 2015) and Canada (Cunningham et al., 2016) and other neoliberal welfare regimes. Common among these accounts are stories of mutual contradictions, with reports of resilience, agitation and relational accomplishments accompanying those of loss. Future research could help galvanise this work to further problematise and challenge the state's continued agenda of co-production, through unpacking the convergent experiences of precarity that undermine such politics.

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