

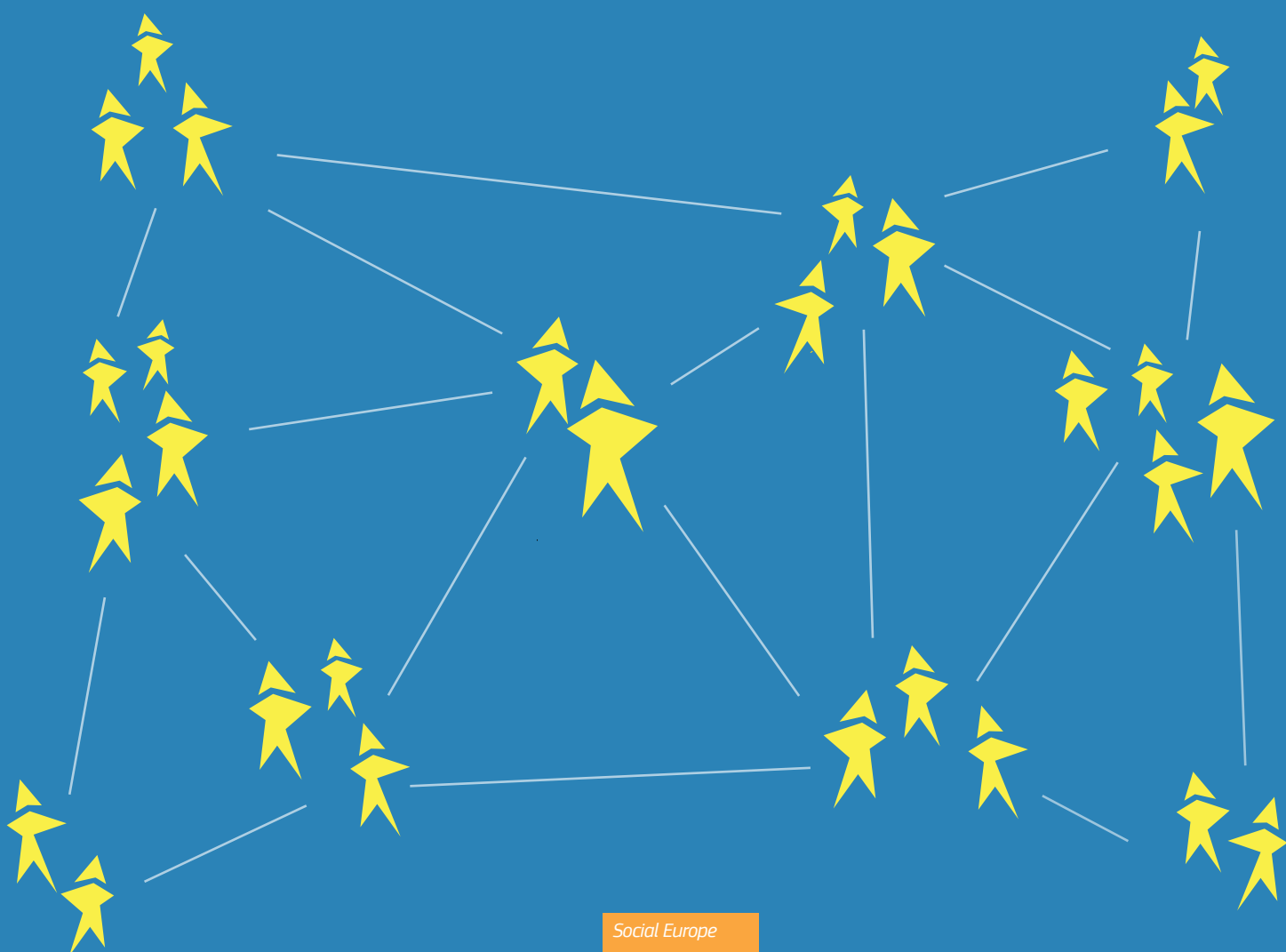


EUROPEAN SOCIAL POLICY NETWORK (ESPN)

# Social protection for people with disabilities

United Kingdom

Fran Bennett and Caroline Glendinning



*Social Europe*

**EUROPEAN COMMISSION**

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# **European Social Policy Network (ESPN)**

## **ESPN Thematic Report on Social protection for people with disabilities**

**United Kingdom**

**2022**

*Fran Bennett and Caroline Glendinning*

The European Social Policy Network (ESPN) was established in July 2014 on the initiative of the European Commission to provide high-quality and timely independent information, advice, analysis and expertise on social policy issues in the European Union and neighbouring countries.

The ESPN brings together into a single network the work that used to be carried out by the European Network of Independent Experts on Social Inclusion, the Network for the Analytical Support on the Socio-Economic Impact of Social Protection Reforms (ASISP) and the MISSOC (Mutual Information Systems on Social Protection) secretariat.

The ESPN is managed by the Luxembourg Institute of Socio-Economic Research (LISER) and APPLICA, together with the European Social Observatory (OSE).

For more information on the ESPN, see:  
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## Summary

This report analyses some important cash and in-kind social protection provisions available to adult people with disabilities (i.e., people aged 18 or above). There are other important provisions available to them in areas not covered in this report. In line with Article 1 of the UN Convention on the Rights of Persons with Disabilities (CRPD), 'people with disabilities' should be understood as 'those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others'.

Six UK means-tested benefits and tax credits are being replaced by Universal Credit, so a range of benefits is relevant now for people with disabilities. Over time, resources have shifted towards means-tested benefits and those for extra costs, away from contributory benefits. Most benefits are UK-wide; we focus on England but note variations in other nations. Local authority provisions (often discretionary) vary even more.

Benefits for those with limited capability to work are contributory (New Style Employment and Support Allowance (ESA)) and/or means tested (income-related ESA, described in an Annex as no new claims are now possible). For both benefits, those assessed as capable of work-related activity are treated increasingly similarly to the unemployed, with new claimants being entitled to lower benefits than those who are unlikely to work. Other systems relate to military service/war and industrial injuries/occupational diseases.

Although the UK has extensive schemes of help for extra costs of disability, this report focuses on healthcare and housing adaptations. Healthcare is free to use; people with some medical conditions, some means-tested benefit claimants and all those aged 60+ get free prescriptions, as can everyone in the smaller nations. Local councils can give grants for disability-related housing adaptations to people with disabilities with low incomes/assets.

Some general benefits have provisions for people with disabilities, including allowing national insurance contributions credits to count towards state pension, and extra amounts in means-tested pension credit if certain disability-related extra costs benefits are received. There are no unemployment benefits for people with disabilities. Universal Credit is criticised for its impact on people with disabilities. It includes no specific help for those with lower earnings due to disability, unlike Working Tax Credit (also in an Annex).

People with disabilities can get access to assistive technology after assessment from their local authority (sometimes also from the health service). Some people opt for cash personal budgets instead of in-kind services, which they use to employ personal assistants. Access to Work provides assistive technology and other equipment to help people with disabilities in employment and can also fund workplace personal assistants.

National debates include concerns about the adequacy of benefits for people with disabilities and the increasing activation of people with disabilities on benefits. Recent or possible reforms include the failure to match additional help during COVID-19 for people on Universal Credit with similar help for other claimants; the withdrawal of additional help for those with the most severe disabilities in Universal Credit; a cross-government National Disability Strategy, which contains little focus on benefits; and proposals to reform assessments of functional capacity for different disability benefits.

Good practice examples include the smaller nations' practices in relation to their own disability strategies, in particular the Scottish government's social security charter and its principles of social security as a human right, and dignity and respect for all benefit claimants. Recommendations include the Department for Work and Pensions ensuring that benefit claimants with disabilities are aware of sources of independent advice and advocacy; reversing the growing trend towards reliance on means-tested benefits; and ensuring that poverty statistics reflect the additional costs of disability.

Annexes 1-4 cover some benefits being replaced by Universal Credit (see above), discussion of proposed reforms of social care, replacement of the major benefit for extra costs of disability in Scotland and the impact of COVID-19 on people with disabilities.

## 1 Access to disability-specific income support<sup>1</sup>

In 2021/22, the UK was forecast to spend £58 billion (€69.52 bn) on benefits for people with disabilities and health conditions.<sup>2</sup> Much of social security provision is UK-wide. There are devolved powers for some aspects of social protection, however. We focus primarily on England as the most populated area of the UK, but in some cases specify differences between provision there and in Scotland, Northern Ireland and Wales. Some benefits are also available at local authority level.

There are some specific benefits for war veterans and for industrial diseases / injuries and these are described below in the appropriate sections. Over time, the proportion of resources devoted to means-tested benefits and those for additional costs (means-tested or not) has increased in relation to non-means-tested contributory benefits.<sup>3</sup>

Some benefits can be a route to others (which are called 'passported benefits').<sup>4</sup>

There are special rules for some benefits for people with terminal illnesses.<sup>5</sup>

### 1.1 Disability-specific benefits/pensions available to working age people

#### 1.1.1 Benefits/pensions not related to military service, war or work

New Style Employment and Support Allowance (ESA) is a disability insurance benefit. Income-related ESA, the equivalent disability assistance scheme, is being replaced by Universal Credit, which is a generic social assistance scheme (for those in or out of employment) and is therefore discussed under Guaranteed Minimum Income (2.3.1). Income-related ESA is still being received by some people, so is described in Annex 1.

##### 1.1.1.1 New Style Employment and Support Allowance (ESA)<sup>6</sup>

To get New Style ESA,<sup>7</sup> you must have limited capability for work - i.e., you are unable to work due to illness/disability. You may get a work-related activity component or a support component depending on the extent to which your condition affects your likely capacity for work. New Style ESA includes some rules aligned with the new means-tested Universal Credit, despite being non-means-tested. It is UK-wide, and administered and paid by the

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<sup>1</sup> Most information in the sections on benefits is taken from the *Welfare Benefits and Tax Credits Handbook 2021/22*. The *Handbook* is published annually by the Child Poverty Action Group. These sections also draw on two ANED reports, on social protection for people with disabilities (2017): <https://www.disability-europe.net/theme/social-protection?country=united-kingdom> and on disability assessment (2019): <https://www.disability-europe.net/theme/social-protection?country=united-kingdom>. [Entitledto.co.uk](https://entitledto.co.uk), [citizensadvice.org.uk](https://citizensadvice.org.uk) and [Turn2us.org.uk](https://turn2us.org.uk) provide online guidance on benefits. Local advice organisations should be listed by area on <https://advice.local.uk/>. Benefit rates here are for April 2021 - March 2022. In April 2022, most benefit rates increase by 3.1% (the Consumer Prices Index rate, September 2021): <https://www.gov.uk/government/news/state-pension-and-benefit-rates-for-2022-to-2023-confirmed> and <https://researchbriefings.files.parliament.uk/documents/CBP-9439/CBP-9439.pdf>. The official guide to disability and benefits is at: <https://www.gov.uk/browse/benefits/disability/>

<sup>2</sup> House of Commons *Hansard*, 20.7.21, cols. 60WS-62WS.

<sup>3</sup> <https://economy2030.resolutionfoundation.org/reports/social-insecurity/> and <https://commonslibrary.parliament.uk/research-briefings/sn04517/>

<sup>4</sup> <https://www.entitledto.co.uk/help/passported-benefits/>

<sup>5</sup> <https://parliament.us16.list-manage.com/track/click?u=3ad7e4c57a864f07e4db008c4&id=4b0347d3a3&e=0a5222a199>

<sup>6</sup> See <https://www.gov.uk/guidance/new-style-employment-and-support-allowance/>; for detail: <https://www.gov.uk/guidance/new-style-employment-and-support-allowance-detailed-guide/>

<sup>7</sup> Some people with disabilities may still be getting contributory ESA, which is being replaced by New Style ESA as part of the same reform as the introduction of Universal Credit (GMIs, 2.3 below).



Department for Work and Pensions (DWP). A claim may be backdated up to 3 months in certain circumstances.

**a) Eligibility conditions:**

Disability-related qualifying criteria: Limited capability for work; you have to score sufficient points unless certain factors apply (e.g., you are terminally ill).

Age: You must be aged at least 16 but under pension age.

Nationality and/or residency: There is no prior residence condition.<sup>8</sup>

Waiting period: You cannot usually get ESA for the first 7 days of limited capability for work; you may get an advance loan payment.

Contributory history: Two contribution conditions must be fulfilled relating to the two complete tax years before the calendar year of the claim. (a) You must have paid 26 weeks' National Insurance contributions on earnings at least at the level of the lower earnings limit (LEL) (£120/week (€143.40) in 2021/22) in one of these two years. Those people earning between the LEL and the (higher) level at which liability for contributions begins (the primary threshold) are treated as having paid contributions – i.e., a zero rate applies, but this counts towards benefits. (b) In each of these years you must also have paid, or been treated as having paid (as above), or been credited with, contributions of at least 50 times the lower earnings limit. Contributions are credited, for example, during periods of unemployment or limited capability for work. Self-employed people can qualify, as their contributions also count.<sup>9</sup>

You can maintain a 'credits only' claim for ESA for limited capability for work; this may be done to ensure you are credited with contributions for weeks when you cannot work. (This may be important to maintain an entitlement for State Pension – see Section 2.1.1 below.)

Level of financial resources: There is no means test or capital limit for New Style ESA. But the payment is reduced by half of any personal, occupational or public service pension, or some (private) permanent health insurance payments also received by the claimant, over £85 (€101.57) gross per week.<sup>10</sup>

Other: You cannot get New Style ESA if you are entitled to Statutory Sick Pay (SSP). SSP is paid by employers for the first 28 weeks of sickness absence to those employed people who qualify on the grounds of 'incapacity'; it may be topped up by occupational sick pay.<sup>11</sup> If you do not qualify for SSP, New Style ESA is a short-term as well as long-term benefit. It is taxable.

Gaps/obstacles: Many people do not realise they are entitled to New Style ESA as the overwhelming policy focus is on Universal Credit now and income replacement contributory benefits have been neglected.<sup>12</sup>

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<sup>8</sup> This applies to EU and non-EU nationals (there is no habitual residence test) - as well as people with refugee status (being linked to national insurance contributions, the 'no recourse to public funds' rule does not apply).

<sup>9</sup> See <https://commonslibrary.parliament.uk/research-briefings/sn04517/>. Previously, people who did not meet the contribution conditions to qualify for Incapacity Benefit (IB) (replaced by contributory ESA in 2008) could get non-contributory non-means-tested Severe Disablement Allowance (SDA), albeit paid at a lower rate than IB. SDA has now been abolished, though some claimants were transferred from SDA to ESA. 'ESA in youth', for those who had never worked or paid contributions, was closed to new claimants in 2012: <https://www.entitledto.co.uk/help/employment-and-support-allowance-in-youth>

<sup>10</sup> New Style ESA is also reduced by any net local councillor allowance over £143 (€170.88) /week.

<sup>11</sup> <https://www.gov.uk/government/publications/sickness-absence-and-health-employer-behaviour-and-practice/>

<sup>12</sup> <https://blogs.bath.ac.uk/iprblog/2020/05/22/covid-19-and-the-bypassing-of-contributory-social-security-benefits/> and <https://blogs.bath.ac.uk/iprblog/2020/04/06/coronavirus-the-making-or-the-unmaking-of-universal-credit/>

**b) Disability assessment framework:** The 'assessment phase' lasts for 13 weeks, and until a decision is made on capability for work – often later than this. (Some claims to ESA can be linked, if they are close together.) A 'fit note' (sick note)<sup>13</sup> from a medical professional is required (which can now be signed digitally); but claims can be made prior to this and people can self-certify for the first 7 days of sickness/'incapacity'. There is a specific form to complete. Allocation to the work-related activity or the support group may be done then, or after a work capability assessment (the first expected to return to work at some point, and the second usually covering people with more limited prospects of future labour market participation).<sup>14</sup>

Type of assessment: Functional capacity, with points for different levels of difficulty in performing a standard set of tasks (descriptors of functional impairment). As has been pointed out, capability for work is in fact being tested by assessing functional capacity.<sup>15</sup>

Responsible authorities: DWP.<sup>16</sup>

Method: Documentary evidence and personal interaction.

Supporting evidence: Documentation (self-completed questionnaire, and medical and non-medical evidence) and personal interaction with a 'health professional' if the DWP deems this necessary. During the COVID-19 pandemic, face-to-face assessments were suspended, and telephone and paper-based assessments used instead. From March 2021, regulations allow assessment in person, by telephone or by video, though claimants can still ask to be assessed on the basis of their paperwork alone.

Assessor: A 'health professional', who may be a nurse, therapist (physical, occupational, etc.), or other rehabilitation specialist. Private firms hold the contracts for assessment (currently Maximus) and complaints about assessment interviews have led to demands for recording of assessment sessions (see Section 4.2.4 below for more detail on this), and about the work capability assessment testing functional capacity rather than capability for work, and performing badly at testing multiple impairments.<sup>17</sup>

Decision maker: A DWP civil servant makes the final decision, though an appeal is possible. Three in four appeals against decisions on ESA assessments succeed.<sup>18</sup>

Critical analysis: See Section 4.24.<sup>19</sup>

### c) Benefit entitlements:

Level of benefit: There are no additions for partners and/or child(ren). Usually only a basic rate is paid during the initial 'assessment phase' (see Section 1.1.1 a) 'Disability assessment framework', above): £59.20 (€70.74) per week for the under 25s and £74.70 (€89.27) for others. After this, during the main phase, the basic rate is £74.70 per week (€89.27). You may get an additional amount of ESA if you qualify for the support component (see Section 1.1.1a) Disability assessment framework above)

<sup>13</sup> <https://www.gov.uk/government/publications/the-fit-note-a-guide-for-patients-and-employees/>

<sup>14</sup> See [https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018\\_A\\_Better\\_WCA\\_is\\_possible\\_FULL-4.pdf](https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018_A_Better_WCA_is_possible_FULL-4.pdf), pp.23-25, for more detail on the work capability assessment, and evidence that the proportion of claimants allocated into the support group dropped by over half between 2014 and 2016, following a change in guidance. The government has published research on the work aspirations and support needs of claimants in the support group and their equivalent in Universal Credit: <https://www.gov.uk/government/publications/work-aspirations-and-support-needs-of-claimants-in-the-esa-support-group-and-universal-credit-equivalent/>

<sup>15</sup> [https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018\\_A\\_Better\\_WCA\\_is\\_possible\\_FULL-4.pdf](https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018_A_Better_WCA_is_possible_FULL-4.pdf)

<sup>16</sup> If a Service Medical Board decides that someone with severe disabilities can no longer be employed in the Armed Forces, the DWP can accept this as an assessment to qualify them for ESA; see 7.3 in <https://parliament.us16.list-manage.com/track/click?u=3ad7e4c57a864f07e4db008c4&id=4b0347d3a3&e=0a5222a199>

<sup>17</sup> [https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018\\_A\\_Better\\_WCA\\_is\\_possible\\_FULL-4.pdf](https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018_A_Better_WCA_is_possible_FULL-4.pdf); this report compares the work capability assessment in the UK with similar assessments in other countries.

<sup>18</sup> <https://committees.parliament.uk/call-for-evidence/601/>

<sup>19</sup> See <https://www.parliamentlive.tv/Event/Index/c07263ae-5bdd-454d-a142-aa932cb45163> for evidence to a House of Commons Select Committee from representatives of disability organisations about assessment issues.

(£39.40 per week (€47.08)). The work-related activity component (£29.70 per week (€35.49)) was abolished for new claimants from April 2017, so they get the same benefit as unemployed claimants, and must comply with work-related activity requirements (work-focused interviews and other activities).

**Duration of benefit:** Those in the work-related activity group can now only receive contribution-based ESA for a year. Those entitled to the support component can get it for as long as they remain entitled; but there are periodic reassessments, usually at intervals of six months to three years. Many claimants with long-term severe disabilities believe that reassessment is a waste of resources.

**Interactions with other income or other income-related benefits:** If you are entitled to income-related ESA (see Annex 1), you may have your New Style ESA topped up after a means test, depending on circumstances; but new claimants and many whose circumstances change must claim Universal Credit (see Section 2.3.1 below). Income from New Style ESA is fully taken into account in assessments for means-tested benefits.

If you do any work (paid/unpaid) while claiming ESA, you are not eligible for ESA, unless the work is of certain kinds (e.g., work placement, some kinds of voluntary work or caring), or is 'permitted work' (part of treatment, 'supported work', or under 16 hours' work weekly, up to £143 (€170.88)/week, or other work for up to £20 (€23.90)/week).

Benefit is paid fortnightly, though entitlement is calculated on a weekly basis.

**Challenges:** There is no longer any earnings relation in New Style ESA; this has been the case for some time now, as Incapacity Benefit replaced Invalidity Benefit and was itself replaced by contributory ESA, before in turn this was replaced by New Style ESA as Universal Credit was introduced. The Resolution Foundation recently argued: 'A direct consequence of the UK's low, flat-rate basic level of benefits is that the amount of income insurance provided by the social security system in the event of unemployment can be very low for earners who are not deemed to have additional needs';<sup>20</sup> but the same is also true for people with disabilities, as New Style ESA for the work-related activity group is now the same amount as unemployment insurance. Moreover, the level of benefit is very low (see Section 4.1.1, below, on benefits adequacy). Thus people whose capacity to work is impaired partially or wholly by their disabilities or long-term health conditions have no access to a benefit that will replace earnings in any meaningful sense. New Style ESA is deducted pound for pound from social assistance benefits, but is taxable, whereas social assistance benefits are not. Thus, if someone has earnings for part of the year which reach the tax threshold, they may be worse off claiming New Style ESA than not doing so. However, it is important to retain non-means-tested benefits for people with disabilities, in particular because their savings and their partner's income and assets do not affect eligibility for the benefit.

For **income-related ESA**, see **Annex 1**.

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<sup>20</sup> <https://economy2030.resolutionfoundation.org/reports/social-insecurity/>

## 1.1.2 Benefits/pensions related to military service, war or work

### 1.1.2.1 War pension disablement benefits/Armed Forces Compensation Scheme<sup>21</sup>

You must be a former member of the armed forces to claim this, with ill-health or disablement caused by service carried out before 6 April 2005 for war pension disablement benefits, or on or after this date for the Armed Forces Compensation Scheme (AFCS). Some people who get benefit under either of these schemes may also qualify for benefits for extra costs related to needs for care and/or mobility (not covered here). The schemes are administered by the Ministry of Defence, not the DWP, and are therefore not subject to standard benefit eligibility rules. Medical advisers made recommendations about awards but lay officers make decisions. The Independent Medical Expert Group, established in 2010, reports and makes recommendations on the medical/scientific aspects of the AFCS.

#### a) Eligibility conditions:

Disability-related qualifying criteria: You must be a former member of the armed forces, with ill-health or disablement caused by service carried out before 6 April 2005 for war pension disablement benefits, or on or after this date for the AFCS.

Age: No specified age conditions.

Nationality and/or residency: No specified conditions.<sup>22</sup>

Waiting period: No waiting period; but claims should be made within seven years. There is a provision for faster assessment for AFCS awards for very serious conditions.

Contributory history: No contribution history required.

Level of financial resources: No test of means.

Other: There are no other qualifying conditions.

Gaps/obstacles: The quinquennial review of the AFCS will take place in 2022, with a debate in parliament held on 28 March 2022, on a motion 'That this House believes that the current process for claiming War Pensions and Armed Forces Compensation payments is not fit for purpose and urges the Government to launch an independent inquiry into the system's failings'.<sup>23</sup> In Veterans UK's satisfaction survey, only 13% gave ratings for the AFCS above 5 (out of 10); half gave one, the lowest possible option.

#### b) Disability assessment framework:<sup>24</sup> War pension disablement benefit is assessed on a percentage scale; but for the AFCS, 'descriptors' are used to assign a level of injury/ill-health.

Type of assessment: For war pension disablement benefit, disablement is assessed on a percentage scale. For the AFCS, injury or ill-health must come within one of the specified 'descriptors', with each assigned to a 'tariff level' that determines the amount payable.

<sup>21</sup> For more information, see <https://www.gov.uk/government/organisations/veterans-uk/> (part of the Ministry of Defence); [https://www.citizensadvice.org.uk/Global/Migrated\\_Documents/advisernet/09122810-ewsn-notes-about-war-disablement-pension-and-war-widows-or-widowers-pension-pdf-7.pdf/](https://www.citizensadvice.org.uk/Global/Migrated_Documents/advisernet/09122810-ewsn-notes-about-war-disablement-pension-and-war-widows-or-widowers-pension-pdf-7.pdf/); and <https://www.gov.uk/government/collections/free-help-with-compensation-claims-for-injury-in-the-armed-forces>. A debate was held in the House of Commons on 28 March 2022, for a review of the AFCS in 2022, for which a briefing was produced by the Library: <https://researchbriefings.files.parliament.uk/documents/CBP-7923/CBP-7923.pdf>.

<sup>22</sup> This applies to EU and non-EU nationals as well as to people with refugee status.

<sup>23</sup> <https://hansard.parliament.uk/Commons/2022-03-28/debates/A0D1F16F-CEE3-412E-8860-76CD24E8460F/WarPensionsAndArmedForcesCompensationSchemePayments>; see briefing for debate: <https://researchbriefings.files.parliament.uk/documents/CBP-7923/CBP-7923.pdf>, which sets out the recommendations of the 2017 review, and (in 3.3, p17) discusses issues relevant to the current review.

<sup>24</sup> This is described in outline only, as provision is by the Ministry of Defence, not the DWP.

Responsible authorities: Ministry of Defence.

Method: Completion of a claim form, and consideration of this and evidence from other sources. If necessary, medical examination with an appointed doctor.

Supporting evidence: A form has to be completed and submitted by post to claim either benefit, listing injuries/medical conditions, specific incident(s) and link with service, as well as diagnosis and medical treatment. Evidence about the impact of the injury/ill-health and about how it is related to service can be attached and sent in addition. The Veterans' Welfare Service can send a statement to support the claim. Information can then be sought from e.g. Ministry of Defence about injuries/incidents/illness. Other information may be requested, e.g. from the claimant's general practitioner or Medical Officer, or medical records in the case of recent hospital treatment.

Assessor: Medical advisors make recommendations.

Decision maker: Lay officer of Ministry of Defence.

Critical analysis: It may be difficult to prove a link between a veteran's time in service and their injury/illness. In a study commissioned by the Forces in Mind Trust,<sup>25</sup> service medical records, and the impact of experience in the armed forces, were not thought to be taken into account sufficiently in assessments for ESA either. Concerns raised have included delays (in initial claims and appeals) and the use of Veterans UK medical advisors. In the debate in parliament on 28 March,<sup>26</sup> MPs criticised the scheme as discouraging veterans from pursuing claims, having to prove eligibility beyond reasonable standards, and being 'mired with complicated terminology and legalese, with little signposting for those who need it most' (col. 653). An MP reported that of the 94,000 AFCS claims since April 2009, 31% failed at the initial stage, and 74% of appeals were rejected; only 57% of claims resulted in a financial award; and since Veterans UK took over assessment the situation had worsened (col. 654), and many veterans gave up. The Ministry of Defence argues that assessments are arrived at through evidence-based professional judgement and that medical advisers seek to advise on the pre-existing evidence. The government minister (col. 672 on) said there is only a rate of 0.1% complaints, the schemes are being digitised to speed up awards, and Veterans UK is conducting lived-experience roundtables bringing together veterans directly with its staff.

### **c) Benefit entitlements:**

Level of benefit: For war pension disablement benefit, assessments of 20% disablement and above entitle you to a regular pension payment; if under 20%, you get a lump sum instead. For the AFCS lump sum payment, you must have had an injury or ill-health within one of the 'descriptors' (see b) above). If you get an award of a certain level, you also qualify for a guaranteed income payment, calculated as a percentage of your final salary, with awards at 30/50/75/100% depending on the tariff level for your award. War pensions and allowances are not taxable. There are various different elements which may be added,<sup>27</sup> including an 'independence payment' in the AFCS.

Duration of benefit: either lump sum, or pension payment for life.

Interactions with other income or income-related benefits: war widows'/widowers' pensions exist, but are not described here because they are not directly about disability. A war disablement or AFCS pension does not affect the State Pension. It is ignored for Universal Credit, and it may be ignored for Housing Benefit and Council Tax Reduction (all means-tested benefits). War veterans may also get help to cover the cost of medical

<sup>25</sup> <http://www.welfareconditionality.ac.uk/about-our-research/service-leavers/>

<sup>26</sup> <https://hansard.parliament.uk/Commons/2022-03-28/debates/A0D1F16F-CEE3-412E-8860-76CD24E8460F/WarPensionsAndArmedForcesCompensationSchemePayments>

<sup>27</sup> See <https://www.entitledto.co.uk/help/war-pension>

treatment, hospital travelling expenses and nursing care.<sup>28</sup> There are various exemptions from normal benefit rules and/or special arrangements for former and/or serving service personnel and their families.<sup>29</sup> But where a veteran is in receipt of a War Disablement Pension or Armed Forces Compensation Scheme payments, this may affect entitlement to social security benefits.<sup>30</sup>

Challenges: It has been argued that not enough is known about how service leavers and their families navigate the mainstream benefits system, and that it may not be working well for them (in a study commissioned by the Forces in Mind Trust).<sup>31</sup> The Royal British Legion and PoppyScotland<sup>32</sup> recommended improvements to benefits to support veterans with military compensation (who might also be getting disability benefit(s)), arguing that as this is compensation it should be treated differently from other resources.

### 1.1.2.2 Industrial injuries disablement benefit

Industrial injuries benefits are paid if you have disabilities due to an accident (though not a 'process') occurring out of and in the course of your employment or a disease caused by your employment (not self-employment). The Industrial Injuries Advisory Council advises the government about prescription of diseases as industrial etc. (see b) below).<sup>33</sup> The main benefit is disablement benefit.<sup>34</sup> You might also qualify for reduced earnings allowance or retirement allowance if your accident or disease occurred before October 1990 (not covered here).<sup>35</sup> These benefits are administered and paid by the DWP. In Scotland, industrial injuries benefits will be replaced by employment injury assistance from autumn 2022, with Social Security Scotland administering it.<sup>36</sup> The current UK-wide scheme is described here.

#### a) Eligibility conditions:

Disability-related qualifying criteria: Disabilities due to an accident at work or a disease caused by your employment as an 'employed earner' (not self-employment) causing a loss of faculty.

Age: No specified age conditions, so children and pensioners are eligible as well as those of working age.<sup>37</sup>

Nationality and/or residency: No conditions.<sup>38</sup>

Waiting period: you must wait 90 days (excluding Sundays) since the date of the accident or the onset of the prescribed disease or injury (except for mesothelioma).

<sup>28</sup> See <https://www.entitledto.co.uk/help/war-pension>

<sup>29</sup> For details see section 7.3 of: <https://parliament.us16.list-manage.com/track/click?u=3ad7e4c57a864f07e4db008c4&id=4b0347d3a3&e=0a5222a199/>

<sup>30</sup> See section 7.5 of: <https://researchbriefings.files.parliament.uk/documents/CBP-7693/CBP-7693.pdf>

<sup>31</sup> <http://www.welfareconditionality.ac.uk/about-our-research/service-leavers/>

<sup>32</sup> <https://www.britishlegion.org.uk/get-involved/things-to-do/campaigns-policy-and-research/campaigns/making-the-benefits-system-fit-for-service>

<sup>33</sup> <https://www.gov.uk/government/organisations/industrial-injuries-advisory-council/>

<sup>34</sup> For quarterly statistics see: <https://www.gov.uk/government/collections/industrial-injuries-disablement-benefit-quarterly-statistics#2020-data/>; for information on benefit rules etc., see: <https://www.gov.uk/industrial-injuries-disablement-benefit/> and for more detail <https://www.gov.uk/government/publications/industrial-injuries-disablement-benefits-technical-guidance/industrial-injuries-disablement-benefits-technical-guidance>; and for an overview, see: <https://commonslibrary.parliament.uk/industrial-injuries-benefit/>, which also cites further sources.

<sup>35</sup> See Child Poverty Action Group, Welfare Benefits and Tax Credits Handbook 2021/22, pp686-8.

<sup>36</sup> <https://www.gov.scot/binaries/content/documents/govscot/publications/factsheet/2019/02/social-security-questions-and-answers/documents/employment-injury-assistance---questions-and-answers/employment-injury-assistance---questions-and-answers/govscot%3Adocument/Employment%2BIjury%2BAssistance%2B-%2Bquestions%2Band%2Banswers.pdf>

<sup>37</sup> Working age is changing over time as pension age increases but is currently up to age 66.

<sup>38</sup> This applies to EU and non-EU nationals as well as to people with refugee status.

Contributory history: non-contributory (though to qualify you must be an employed earner, which means you pay or ought to pay Class 1 national insurance contributions, even if you earn too little to pay these); some workers (e.g., apprentices) are treated as employed earners for this purpose.

Level of financial resources: non-means-tested.

Other: someone can be in or out of work. Injury can include stress and psychological injury. Compensation may also be available from the DWP for asbestos-related conditions.<sup>39</sup>

Gaps/obstacles: There are often suggestions about widening the scope of prescribed industrial diseases etc. For example, there were suggestions that COVID-19 should be categorised as an industrial disease;<sup>40</sup> the Industrial Injuries Advisory Council advised against this.<sup>41</sup>

**b) Disability assessment framework:**<sup>42</sup> You must have had a personal injury in an industrial accident or have a prescribed industrial disease, or condition associated with your employment, which cause a loss of faculty and therefore disability. 'Industrial accidents' must arise 'out of and in the course of your employment' and prescribed diseases have statutory definitions related to 'prescribed occupations'. There was a review consultation for this benefit in 2007, with evidence from stakeholders, including criticism of repeated assessments which confused claimants and recommendations that the self-employed should be included in the scheme.<sup>43</sup>

Type of assessment: To establish loss of faculty and disabilities (assessed on a percentage basis), some conditions are set down in regulations; for others, a healthcare professional makes an assessment, comparing with someone of the same age and sex. The issues being considered are: whether there is a loss of faculty associated with the accident or disease; the extent of disablement (expressed as a percentage); and what period should be taken into account. Loss of faculty does not necessarily result in disablement. Even if percentages are set in regulations, they can be varied depending on the impact on that individual.

Responsible authorities: DWP.

Method: Assessment is carried out by a healthcare professional, to ensure symptoms are consistent with injuries and movements etc. consistent with claimed disablement.

Supporting evidence: Medical evidence to show an accident arose in employment may be required, as well as evidence to show the claimant did not contribute to it; a prescribed industrial disease must be one of those on an existing list, or proof is needed that it is likely it is linked to a certain employment.

Assessor: Healthcare professional if required.

Decision maker: DWP.

Critical analysis: The Work and Pensions Select Committee is carrying out an inquiry into health assessments for various disability-related benefits, including industrial injuries benefits.<sup>44</sup> We discuss assessments in Section 4.2.4 below, some issues being relevant to industrial injuries benefits assessments as well.

<sup>39</sup> <https://commonslibrary.parliament.uk/research-briefings/sn06012/>

<sup>40</sup> See, for example, <https://www.tuc.org.uk/blogs/covid-industrial-disease-what-it-would-mean-workers-wales/>

<sup>41</sup> <https://www.bmj.com/content/374/bmj.n2018/rr/>

<sup>42</sup> This is described in outline only, as these provisions are specific and cover declining numbers.

<sup>43</sup> See, for example, evidence from solicitors familiar with the system: <https://www.thompsons.law/news/news-archive/personal-injury-law-review-summer-2007/reforming-industrial-injuries-benefits/>

<sup>44</sup> <https://committees.parliament.uk/committee/164/work-and-pensions-committee/news/161718/health-assessments-for-benefits-work-and-pensions-committee-to-question-disabled-people-led-organisations/>

### c) Benefit entitlements:

Level of the benefit: To get disablement benefit you need to have at least 14% disablement for virtually all conditions (since October 1986); 14-19% is treated as 20%, and other percentages are rounded up or down appropriately. If you have a pre-existing disability, this is deducted from the total disablement (offset). (A lower percentage can still give entitlement to reduced earnings allowance.) The amount of benefit depends on the extent of disablement, and in 2021/22 ranged from £36.58 (€43.73)/week (11-20% disablement) to £182.90 (100%) (€218.70). There are no additions for partners or children. But because the amount of benefit is related to the extent of disablement, debates about benefit adequacy (see Section 4.1.1 below) do not occur as frequently as with other benefits related to income maintenance.

Duration of the benefit: How long someone has been affected and the time the effects are likely to continue are taken into account to decide the length of the award. Assessment is either final ('life') or provisional, depending on the condition.

Interactions with other income or other related benefits: Widows/widowers may qualify for bereavement benefits without national insurance contributions being taken into account if an industrial disease/injury was a cause of their late spouse/civil partner's death (not necessarily the only cause). Industrial injuries benefits are taken into account in the calculation of means-tested benefits.

Challenges: No evidence (reports, papers etc.) on adequacy challenges related to this benefit was identified. For example, the Disability Benefits Consortium does not have an entry for industrial injuries benefits in its document listing its policy positions.<sup>45</sup> However, there are sometimes criticisms of it being taken into account in the calculation of means-tested benefits.

## 1.2 Disability-specific old-age pension schemes

There are no disability-specific old-age pension schemes in the UK.

## 1.3 Income support aimed at covering disability-related healthcare and housing expenses

In the UK, benefits towards extra costs of disability include non-contributory, non-means-tested Personal Independence Payment (PIP) (for those of working age), Disability Living Allowance (DLA) (being replaced by PIP for those of working age, but retained for children) and Attendance Allowance (AA) (for older people). These are important in themselves for the rights and living standards of people with disabilities,<sup>46</sup> and because they can give access to benefits for family carers who support them.

This section is limited to considering only costs-related benefits for healthcare (largely irrelevant in the UK, as healthcare is free) and housing adaptations (help given as one-off grants in the UK, not in benefits – see Section 3 below). The Social Metrics Commission notes that including benefits to help with additional costs of disability in income, but excluding these costs, underestimates levels and incidence of poverty among those with disabilities.<sup>47</sup> In addition to DLA/PIP and AA that target general disability-related extra costs, there is some very limited additional help with healthcare and costs of housing adaptations for people with disabilities, described below.

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<sup>45</sup> <https://disabilitybenefitsconsortium.files.wordpress.com/2022/02/policy-positions-dbc-2022.02-update.pdf>

<sup>46</sup> See, e.g., <https://committees.parliament.uk/publications/8745/documents/88599/default/>

<sup>47</sup> [https://socialmetricscommission.org.uk/wp-content/uploads/2019/07/SMC\\_measuring-poverty-201809\\_full-report.pdf](https://socialmetricscommission.org.uk/wp-content/uploads/2019/07/SMC_measuring-poverty-201809_full-report.pdf)



### 1.3.1 Healthcare

#### 1.3.1.1 Help with costs of medicines and eye and dental care

**a) Brief description:** There are no UK cash benefits specifically to assist with healthcare costs although, as noted in 1.3 above, two cash benefits aimed at mitigating additional disability costs (PIP for people below 65 and AA for those aged 65 plus) are in many instances used to meet extra health-related costs e.g., special diets, help with mobility and extra heating. In England, prescriptions are free of charge for all older people; for some working age people dependent on means-tested benefits; and for working age<sup>48</sup> people with disabilities who have a specified medical condition (including diabetes, permanent fistula, thyroid problems, epilepsy, cancer); have a continuing physical disability preventing them going out without help from someone else;<sup>49</sup> or have a war pension. People with disabilities with other medical conditions that require extensive medication can purchase a prepayment certificate that buys as many prescriptions as needed for a set price. Prescriptions are free of charge for all adults in Scotland, Wales and Northern Ireland.<sup>50</sup>

People with disabilities who receive a war pension are eligible for free dental care and the costs of travel to treatment connected with their registered disability. Working age adults registered blind or partially sighted or who have diabetes or glaucoma are eligible for free sight tests.<sup>51</sup> All older people, including those with disabilities, can have free sight tests.

**b) Main gaps/obstacles:** From time-to-time patient representative groups campaign for new conditions (e.g., severe menopause symptoms) to be added to the list of specified exemptions from prescription charges.

**c) Main adequacy challenges:** There are no UK cash benefits specifically aimed at healthcare costs, so there are no adequacy challenges. There are issues about the cost of medicines for those not entitled to free prescriptions; other issues include the ways in which eligibility for free prescriptions is dealt with under Universal Credit. But neither is specific to people with disabilities.

### 1.3.2 Housing

#### 1.3.2.1 Help with home adaptations

**a) Brief description:** There are no UK-wide cash benefits aimed at disability-related housing expenses, although as noted in 1.3.1.1 above, the two general disability-related extra costs benefits (PIP/AA) will often be used for housing-related costs such as extra heating.<sup>52</sup>

In England, Wales and Northern Ireland, local authorities can award a Disabled Facilities Grant (DFG) towards the costs of adapting a home to make it suitable for someone (whether owner or tenant) with a physical, mental, or sensory impairment. The level of a DFG depends on levels of household income and savings over £6,000 (€7,094), up to a maximum of £30,000/€35,500 (England) or £36,000/€42,500 (Wales) or £25,000/€30,000 (Northern Ireland).<sup>53</sup> In England, the average DFG is £9,000/€10,642. Eligibility depends on an assessment by an occupational therapist. Minor adaptations (<£1000/€1,182) are free of charge. In Scotland, financial help with

<sup>48</sup> Everyone aged 60+ is currently entitled to free prescriptions regardless of health status.

<sup>49</sup> <https://www.nhsbsa.nhs.uk/exemption-certificates/medical-exemption-certificates/>

<sup>50</sup> <https://researchbriefings.files.parliament.uk/documents/CBP-7227/CBP-7227.pdf>

<sup>51</sup> <https://www.nhsbsa.nhs.uk/nhs-help-health-cost/>

<sup>52</sup> <https://committees.parliament.uk/publications/8745/documents/88599/default/>

<sup>53</sup> <https://www.gov.uk/disabled-facilities-grants/>

home adaptations is available from local authorities, with savings limits and user charges dependent on local authority policy.<sup>54</sup>

- b) Main gaps/obstacles:** DFG applicants may be required to employ an architect or surveyor; must also apply for planning permission to adapt their property; and must not begin building work before the grant is approved.
- c) Main adequacy challenges:** In England, Wales and Northern Ireland, people with disabilities with high incomes and/or savings are unlikely to qualify for DFGs. The local authority must be satisfied the adaptations are appropriate, necessary, and feasible, taking into account the condition of the property.

## 2 Access to some key general social protection cash benefits

### 2.1 Old-age benefits

#### 2.1.1 State Pension

- a) Eligibility conditions:** The State Pension (called New State Pension from April 2016 onwards) is a contributory benefit with conditions that help some people with disabilities to qualify. But it is not possible to claim early due to ill-health/disability.<sup>55</sup> There is no supplement to the State Pension for people with disabilities but other benefits (e.g., AA to help with costs) may be available; see Section 2.1.2 for Pension Credit.

Age: pension age (now 66 for both men and women), including people with disabilities, but due to rise in future; a review of these proposals is being carried out.<sup>56</sup>

Nationality and/or residency: No conditions.<sup>57</sup> There are no differences for people with disabilities.

Contributory history: this is a contributory benefit and since the New State Pension started in April 2016 each individual must qualify on their own contributions. To qualify for a full pension, you need 30 years of contributions or credits. To qualify for any pension, you must have at least 10 years of contributions, meaning contributions either paid or credited on 52 times the lower earnings limit for that year (£120 (€143.44) per week in 2021/22).<sup>58</sup> Some people with disabilities can include times when they were credited with contributions when unable to work through ill-health/disability towards their pension entitlement. Contributions can be credited for such periods as though someone had earned at the weekly lower earnings limit. Credits are given automatically for people receiving ESA or UC.<sup>59</sup> Those who do not qualify for State Pension may be able to get means-tested Pension Credit if they have a low income (see Section 2.1.2 below).

Level of financial resources: there is no earnings limit in the State Pension. It is not means tested. There is no difference in the amount for people with disabilities.

- b) Additional amount/compensation included and adequacy issues:** The full weekly rate of State Pension is £179.60 (€214.67), much higher than working age benefits. Some people may get a higher 'transitional rate' if they contributed in part

<sup>54</sup> <https://www.gov.scot/policies/independent-living/housing-adaptations/>

<sup>55</sup> <https://www.moneyhelper.org.uk/en/pensions-and-retirement/taking-your-pension/early-retirement-because-of-illness-sickness-or-disability/>

<sup>56</sup> <https://www.gov.uk/government/news/second-state-pension-age-review-launches/>

<sup>57</sup> This applies to EU and non-EU nationals as well as to people with refugee status.

<sup>58</sup> For years before 6 April 1978, the amount is 50 times the lower earnings limit.

<sup>59</sup> <https://commonslibrary.parliament.uk/research-briefings/sn04517/>

under the pre-April 2016 system (when there was some earnings relation for those contracted in). There is no increase for a partner or children or for disability but the amount is increased for postponing claiming beyond the minimum qualifying age. (AA paid towards extra costs experienced by older people with disabilities is out of scope for this report.)<sup>60</sup>

- c) Gaps/obstacles:** Any benefit that depends on contributions paid in employment is not going to be a good fit for people who either are born with disabilities or acquire them in working age. What is important is that there are satisfactory arrangements for 'crediting in' to match paid contributions and/or good alternative benefit arrangements for these groups. The abolition for new claimants from 2012 of a non-contributory non-means-tested benefit for those born with disabilities preventing them entering employment ('ESA in youth') means this provision has worsened recently.

### 2.1.2 Pension Credit

- a) Eligibility conditions:** Pension Credit is an additional means-tested payment on top of the basic State Pension. There are two types of Pension Credit: guarantee credit, ensuring a minimum income level, and savings credit (intended to reward someone for making provision for retirement through savings or an occupational pension). You can get one or other or both, but savings credit is being phased out, now being only available for those who reached pension age before 6 April 2016 and who remain entitled. There are no differences for people with disabilities. Pension Credit is administered and paid by the DWP.

**Age:** pension age, which for men and women is now 66; there are no differences for people with disabilities. Couples with one partner under pension age ('mixed age') have to claim Universal Credit, however, which means no access to some additional disability payments (see b) below)

**Nationality and/or residency:** you must satisfy the habitual residence<sup>61</sup> and right to reside tests; (with some exceptions) you must not be 'a person subject to immigration control', subject to a 'no public funds' condition. If you are from the EU or another EEA country or Switzerland, you and your family usually also need settled or pre-settled status under the EU Settlement Scheme to get Pension Credit. There are no differences for people with disabilities.

**Contributory history:** no national insurance contributions record is needed to qualify. This is helpful for people with disabilities, who are less likely to build up a contributions record.

**Level of financial resources:** Pension Credit is a means-tested benefit; tests of entitlement include income, savings and needs. For savings credit, your qualifying income must exceed the threshold but not be so high that it means a nil award. Benefits towards the additional costs of disability are not taken into account.

**Other:** the criteria for the severe disability amount (b) below) are the same as for the severe disability premium in means-tested benefits for those of working age (which has been abolished in Universal Credit, however). You must receive a qualifying benefit (in this case AA - or the Armed Forces independence payment); you have no non-

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<sup>60</sup> See <https://www.nhs.uk/conditions/social-care-and-support-guide/money-work-and-benefits/benefits-if-you-are-over-state-pension-age/> for more information on Attendance Allowance and other benefits for older people.

<sup>61</sup> <https://www.citizensadvice.org.uk/benefits/claiming-benefits-if-youre-from-the-EU/before-you-apply/check-if-you-can-pass-the-habitual-residence-test-for-benefits/>. People coming from Ukraine or Afghanistan recently do not have to satisfy the habitual residence test.

dependent adult living with you; and no one gets Carer's Allowance or the carer element in Universal Credit for looking after you.<sup>62</sup>

- b) Additional amount/compensation included and adequacy issues:** Pension Credit is much more generous than working age means-tested benefits. The standard minimum guarantee is £177.10 (€211.83) per week for a single person and £270.30 (€323.31) for a couple. The savings credit adds to this but is currently being phased out. If you get AA, or the middle or highest care component of other non-means-tested benefits for extra disability costs (out of scope for this report) an extra severe disability amount is added, of £67.30 (€80.50) per week.<sup>63</sup> Non-means-tested benefits for extra disability costs are also ignored in the means test for Pension Credit. Receipt of an extra amount for severe disability in Pension Credit usually stops (as will other extra costs benefits) if a claimant of Pension Credit is in hospital for over 28 days.
- c) Gaps/obstacles:** The major issue with Pension Credit is take-up. The latest figures, for 2018/19,<sup>64</sup> show only an estimated 60% of those entitled to Pension Credit actually claimed it and some 76% of total possible expenditure was claimed. It is not known how take-up affects people with disabilities. The government has recently been discussing an initiative to boost take-up of Pension Credit.<sup>65</sup>

## 2.2 Unemployment benefits

The UK has no specific unemployment benefits for people with disabilities. Those claiming Jobseeker's Allowance or Universal Credit may be able to restrict their availability for work (or modify the equivalent 'claimant commitment' for Universal Credit), because of their physical or mental condition, for which they will probably need medical evidence.<sup>66</sup>

Contributory (now New Style) Jobseeker's Allowance, like New Style ESA (1.1.1 above), has rules by which credited national insurance contributions can count towards benefit entitlement. This means that those unable to work due to illness/disability who are credited with contributions may be able to meet this condition. However, since (as with New Style ESA), there are two contribution conditions, and the other cannot be satisfied via credited contributions, this is not discussed further here (See New Style ESA, 1.1.1 above).

## 2.3 Guaranteed minimum income schemes and other social assistance benefits (GMIs)

Those claiming means-tested Housing Benefit and/or Council Tax Reduction from their local authority, and/or Income Support from the DWP and Child Tax Credit from HM Revenue and Customs, may be able to get additional income from these (and/or still be entitled to help at higher levels of income) due to having disabilities. For example, for some benefits the earnings disregard is higher if someone is getting a disability premium. An additional bedroom needed because of disability may be allowed in Housing Benefit, thus allowing some claimants to avoid the 'bedroom tax' ('abolition of the spare room subsidy').

It would be impractical to discuss the conditions for each of these benefits. They are also all being replaced by Universal Credit, with the exception of Council Tax Reduction, which

<sup>62</sup> There are some exceptions and special rules in relation to this – see Child Poverty Action Group, *Welfare Benefits and Tax Credits Handbook 2021/22*, p338.

<sup>63</sup> <https://www.gov.uk/government/publications/pension-credit-toolkit/pension-credit-and-help-for-disabled-people/>

<sup>64</sup> <https://www.gov.uk/government/statistics/income-related-benefits-estimates-of-take-up-financial-year-2018-to-2019/income-related-benefits-estimates-of-take-up-financial-year-2018-to-2019/>

<sup>65</sup> <https://www.politicshome.com/thehouse/article/the-government-is-boosting-takeup-of-pension-credit-and-our-parliamentary-colleagues-can-help-us/>

<sup>66</sup> See Child Poverty Action Group, *Welfare Benefits and Tax Credits Handbook 2021/22*, p1116.

has rules determined by each local council.<sup>67</sup> Those of pension age can continue to claim Housing Benefit as they cannot claim Universal Credit. A claimant of one of the 'legacy' benefit/tax credits being replaced by Universal Credit who undergoes certain changes of circumstances must claim Universal Credit instead if entitled. The remaining claimants of such benefits/tax credits will be compulsorily moved on to Universal Credit in due course.

It would also be impractical to discuss the modifications made by the devolved administrations to Westminster government policies (though where these are related to disability, we cover them). Scotland and Northern Ireland in particular have put in place measures to try to mitigate the impact of some benefit cuts introduced since 2010.<sup>68</sup>

### 2.3.1 Universal Credit (UC)

**a) Eligibility conditions:** UC is replacing six means-tested benefits and tax credits for income maintenance and certain additional costs for those of working age (all main national means-tested schemes, including income-related ESA (see Annex 1), but not Council Tax Reduction).<sup>69</sup> It can be claimed by those in and out of work, including those with disabilities. But its introduction has been delayed and it will now not be fully introduced until late 2024. Those moved to UC by the DWP get transitional protection; but those having to claim when their circumstances change do not (with the exception of some people who received premiums for severe disability). The focus here is on disability, as there is not room for a detailed explanation of UC rules.<sup>70</sup> Many of those still to be moved to UC in future are people with disabilities.

**Age:** UC can be claimed by those of working age. 'Mixed age' couples (with one member of pension age) must also claim UC rather than Pension Credit. This can mean that they miss out on disability-related additions. Regulations in December 2021 bar students with disabilities from claiming UC unless they are assessed as having limited capability for work before their course.<sup>71</sup>

**Nationality and/or residency:** UC is dependent on satisfying the habitual residence test<sup>72</sup> and having the right to reside.<sup>73</sup> You cannot claim if you are subject to a 'no public funds' rule as an immigrant. There are no differences for people with disabilities.

**Waiting period:** Because UC is paid in arrears based on assessment at month's end, there is an inevitable wait of some five weeks or more before payment is made. This can be mitigated by an advance (loan), to be repaid from benefit over two years; and also, by two-week run-ons of benefit if new UC claimants received a means-tested 'legacy' benefit (but not tax credit) just before their claim. The 'five week wait' is one of the key reasons why there is a mistrust of UC amongst people with disabilities.

**Contributory history:** no contribution record necessary.

**Level of financial resources:** UC is a means-tested benefit, which applies a joint means test to couples. The means test is similar to those for other means-tested benefits/tax

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<sup>67</sup> Scotland and Wales decided to have national schemes for Council Tax Reduction, so all local authorities in those countries have the same rules. In Northern Ireland there is a system of rates instead of council tax, with relief for those on low incomes given via Housing Benefit.

<sup>68</sup> <https://www.jrf.org.uk/report/uk-poverty-2022/> (p4).

<sup>69</sup> Statistics on Universal Credit can be found at: <https://www.gov.uk/government/statistics/universal-credit-statistics-29-april-2013-to-13-january-2022/> and on the roll-out by area here: <https://commonslibrary.parliament.uk/constituency-data-universal-credit-roll-out/>

<sup>70</sup> See <https://www.gov.uk/health-conditions-disability-universal-credit/> and <https://www.gov.uk/government/publications/universal-credit-if-you-have-a-disability-or-health-condition-quick-guide/>

<sup>71</sup> <https://www.disabilityrightsuk.org/news/2021/december/disabled-students-lose-entitlement-universal-credit-week/>

<sup>72</sup> <https://www.citizensadvice.org.uk/benefits/claiming-benefits-if-youre-from-the-EU/before-you-apply/check-if-you-can-pass-the-habitual-residence-test-for-benefits/>

<sup>73</sup> <https://www.gov.uk/right-to-reside/>. These tests do not apply to people coming from Ukraine or Afghanistan recently.

credits but has adopted various rules applying to only some (e.g., there is a capital limit for UC, but there was none in the tax credits system). This is the same for people with disabilities; but non-means-tested benefits paid towards the additional costs of disability are ignored in the means test.

Other: Assessment is similar to the WCA for ESA (1.1.1 above). A minimum 15 points is needed to qualify as having limited capability for work (a further 'limited capability for work-related activity' assessment is used to divide those eligible into two levels, with the latter having a more stringent qualifying threshold). However, unlike ESA, there is no rule in UC that treats you as having limited capability for work while awaiting a WCA. So you may have to fulfil work-related requirements during that time.

- b) Additional amount/compensation included and adequacy issues:** UC has two different rates for those with limited capability for work and those who also have limited capability for work-related activity (LCWRA). The former, confusingly, is equivalent to the work-related activity group in ESA and the latter equivalent to the support group. But, as with ESA, for new claims after 3 April 2017 there is no additional amount for limited capability for work (previously £128.89 (€154.26) per month). The LCWRA element is worth an additional £343.63 (€411.25) per month. Assessments of adequacy in relation to the poverty line (customarily 60% of median equivalised disposable household income after housing costs) or the minimum income standard<sup>74</sup> are challenging, due to frequent policy changes; one impact study in 2019,<sup>75</sup> for example, has been overtaken by new policy measures. But assessments show gainers and losers, related not just to amounts but also policy design (see gaps/obstacles below)

There is also a benefit cap which includes UC as well as other benefits. This is a limit on total benefit receipt, compared with average earnings, which is higher in London. Those who have no obligation to be available for work due to disability should not be affected by it.

The 'abolition of the spare room subsidy' (or 'bedroom tax') affects UC as well as Housing Benefit. Those in social housing considered to have one or more 'spare' rooms have certain amounts deducted from their benefit. But if your disability means you need a spare room (e.g., because you cannot sleep in the same room as your partner, or you need a carer to spend the night) this room is not 'spare' (see Section 2.3).

Receipt of UC may also give entitlement to 'passport benefits'.<sup>76</sup>

- c) Gaps/obstacles:** UC has been criticised for its impact on many claimants with disabilities – for example, one recent report stated: 'Within UC itself, there is a pattern of gainers and losers, but the losses for disabled people are considerably greater than the gains'.<sup>77</sup> Analyses from a decade ago were also critical.<sup>78</sup>

One salient issue for means-tested benefits is take-up. The government claimed that take-up would improve once UC was introduced, because it is an 'all in one' benefit, so people would not miss out on one element.<sup>79</sup> But it has not published take-up figures

<sup>74</sup> <https://www.jrf.org.uk/report/households-below-minimum-income-standard-200809-201920/>

<sup>75</sup> <https://www.jrf.org.uk/report/where-next-universal-credit-and-tackling-poverty/>

<sup>76</sup> <https://www.entitledto.co.uk/help/passported-benefits/>

<sup>77</sup> <https://disabilitybenefitsconsortium.files.wordpress.com/2019/10/mending-the-holes-restoring-lost-disability-elements-to-universal-credit.pdf>, p2; and <https://disabilitybenefitsconsortium.files.wordpress.com/2019/09/disability-benefits-consortium-report-has-welfare-become-unfair.pdf>

<sup>78</sup> See, for example, in 2012: <https://www.citizensadvice.org.uk/about-us/our-work/policy/policy-research-topics/welfare-policy-research-surveys-and-consultation-responses/welfare-policy-research/holes-in-the-safety-net-the-impact-of-universal-credit-on-disabled-people/>

<sup>79</sup>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/48897/universal-credit-full-document.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/48897/universal-credit-full-document.pdf) (Annex 2 suggests stakeholders agreed that UC would mean higher take-up).

for UC and has now confirmed that it will discontinue publication of take-up figures for all working age means-tested benefits.<sup>80</sup>

As with ESA, there has also been concern about work capability assessments for UC. Reports now suggest backlogs have become so critical that the DWP is not currently arranging reassessments for those already on UC, focusing on new UC claimants only.<sup>81</sup>

### 2.3.2 Other social assistance provisions

Other means-tested (and sometimes discretionary) provisions may be available at both national and sub-national level that can be accessed by people with disabilities. For example, the Flexible Support Fund may help claimants on ESA, UC and other benefits with costs related to getting into work in particular. Loans and grants used to be available through the discretionary Social Fund at national level, including community care grants intended to enable people with disabilities to live independently. These grants and other provisions have been devolved to local authorities (or smaller nations in the case of the devolved administrations), with a cut in funding, and became 'local welfare assistance'. The funding is no longer ring-fenced for this purpose, and 13 million people live in areas with no scheme,<sup>82</sup> meaning that many people with disabilities (and others) may instead have to approach charities. But some local councils and the devolved administrations continue to give out grants for this purpose. National information about these is much more limited.

## 3 Provision of assistive technology and personal assistance

### 3.1 Assistive technology

#### 3.1.1 Assistive technology

Assistive technology includes both medical devices and aids to daily living, including wheelchairs. In Great Britain, the licensing and supply of medical devices is tightly regulated (different regulations cover Northern Ireland following Brexit).

Following assessment, simple, commonly used daily living aids are supplied on loan and free of charge from local community equipment stores (these are usually jointly funded by the local authority and local NHS services). For people needing temporary help following hospital discharge, the NHS may also provide equipment for the home.

Some local authorities also operate Disability Equipment Prescriptions; these are vouchers that allow someone with disabilities to purchase simple pieces of equipment from an accredited local retailer. More complex devices, including telecare, telehealth monitors and environmental control systems, are supplied on an individual basis by local authorities (sometimes with additional local NHS funding), following a specialist occupational therapy assessment.

Eligibility for help depends on a needs assessment by an occupational therapist; there are long delays in obtaining assessments. Relatively small, inexpensive items are likely to be provided or loaned free of charge, without any means-test, depending on individual local authority policy. The range of assistive technology devices that local authorities or the NHS are willing to fund may also be restricted (e.g., only manual, not powered wheelchairs).

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<sup>80</sup> <https://www.gov.uk/guidance/income-related-benefits-estimates-of-take-up-fye-2020-statistical-notice/>

<sup>81</sup> <https://www.disabilitynewsservice.com/mounting-evidence-of-assessment-crisis-as-dwp-halts-wca-reassessments/>

<sup>82</sup> <https://endfurniturepoverty.org/wp-content/uploads/sites/4/2022/02/The-State-of-Crisis-Support-Final.pdf>; it also found one in four schemes only available as a last resort, after other options.

There is no evidence on unmet need; at least some people may choose to purchase items privately if a specific preferred option is not available from statutory sources.

### 3.1.1.1 Access to Work

In England, Scotland and Wales a separate Access to Work<sup>83</sup> scheme is operated by the DWP to help people with disabilities enter or stay in work (including self-employment and job or work trials), through the provision of work-related assistive technology (including communication assistance), over and above any 'reasonable adjustments' an employer must make to comply with equalities legislation. The Access to Work scheme does not involve means or assets tests, simply confirmation by an employer of the need for technological support and an assessment of that need by an Access to Work advisor. Access to Work help comes as a grant paid to the person with disabilities, their employer, or the equipment supplier; there is an annual cap on the total amount of support that can be funded, currently £60,700 (€73,173). (Also see Section 3.2.)

## 3.2 Personal assistance

Since the mid-1990s, it has been possible for people with disabilities who meet the needs, income and assets eligibility criteria for local authority-funded social care to receive their support in the form of a cash 'direct payment' (sometimes called a personal or individual budget) rather than services in kind. The campaign to introduce the cash payment option was led by working age activists with disabilities but the option has subsequently been extended to adults of all ages, parents of children with disabilities and family carers.<sup>84</sup> The person with disabilities uses the cash payment to employ one or more 'personal assistants' to provide personalised support at the time and in the manner of their choice. As well as personal care, personal assistants may provide help with communication, leisure time activities and social support, depending on the needs and priorities of the person with disabilities. However, as social care budgets have become more constrained local authorities increasingly restrict the types of help that direct payments can be used for.

Eligibility for a cash 'direct payment' depends on meeting the stringent needs, wealth and income requirements governing access to local authority-funded care. People with disabilities who do qualify may still be required to pay an income-tested contribution towards that care. The recruitment, payroll and other employer responsibilities involved in managing a direct payment and employing personal assistants can be serious deterrents; many local authorities have contracted disability-led support services to help to manage these responsibilities. Direct payments have always been more popular among working age than older people; in England, in 2015/16, 39.5% of working age adults and 16.9% of older people used direct payments. Recently, the number of people in England opting for direct payments rather than services in kind has fallen, from 126,000 in 2018/19 to 123,000 in 2019/20.<sup>85</sup> The direct payment option is also available in Scotland (where it is called Self-Directed Support), Wales and Northern Ireland, as well as in England.

Personal assistants can also be funded through the Access to Work scheme (see Section 3.1.1.1 above) to support a person with disabilities in the workplace.<sup>86</sup>

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<sup>83</sup> <https://www.gov.uk/access-to-work/>

<sup>84</sup> Leece, J. and Bornat, J. (eds.) (2006) *Developments in Direct Payments*, Bristol: Policy Press.

<sup>85</sup> <https://www.kingsfund.org.uk/publications/social-care-360/quality/>

<sup>86</sup> Graham, K., Brooks, J., Maddison, J. and Birks, Y. (2021) 'Two jobs in one day', *Scandinavian Journal of Disability Research* 23(1), pp147–157. DOI: <https://doi.org/10.16993/sidr.761>



## 4 National debates, reforms and recommendations

### 4.1 National debates

#### 4.1.1 Benefits adequacy<sup>87</sup>

Over the past decade, many working age benefits were frozen or raised by less than inflation in different years, sometimes for several years at a time.<sup>88</sup> However, benefits for people with (more severe) disabilities, and elements of general benefits specific to people with disabilities, were not affected in the same way. This does not imply that such benefits were, or are currently, adequate, however.<sup>89</sup>

The Westminster government commissioned qualitative research about the uses of health and disability benefits in England, Scotland and Wales, but has refused to publish the resulting report (on the grounds of needing a private space in which to discuss policy),<sup>90</sup> despite a protocol suggesting it should do so. This mirrors other evidence that the DWP does not necessarily find it easy to be open in discussing policy options.<sup>91</sup> The House of Commons Work and Pensions Select Committee used its powers to publish the report.<sup>92</sup>

The report concluded that the way these benefits were used was influenced by wider circumstances, and that (p4): 'for those with restricted financial circumstances ... some ... reported that they were still unable to meet essential living costs such as food and utility bills'; and (p63): 'Participants with very limited financial resources in particular said that an increase in benefit payments would improve their overall wellbeing'.

The Resolution Foundation recently argued that 'unemployment benefit in 2022-23 will be at its lowest level in real terms since 1990-91 and is only slightly above an estimated destitution income level of £70 per week. As a proportion of average earnings, it now stands below 14%, half the level it was in the 1970s'.<sup>93</sup> But those on New Style ESA get the same level of benefit as this, unless they are entitled to the support component; so they are affected in the same way.

The last comment here suggests that in any consideration of adequacy of benefits for people with disabilities it should not just be benefits specific to disability that are considered. There is concern in particular that UC results in losses for some people with disabilities (see Section 2.3.1 above); and that more generally the current inflation rate is not reflected in forthcoming benefit increases in April 2022. The Joseph Rowntree Foundation<sup>94</sup> estimates that some nine million households on means-tested benefits will experience an average real-terms cut of £500 (€604.12) per year. It says government

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<sup>87</sup> See briefing from House of Commons library about how benefit levels are set: <https://researchbriefings.files.parliament.uk/documents/CBP-9498/CBP-9498.pdf>

<sup>88</sup> Bennett, F. (2019) 'UK: changing politics of crisis management', in S. Olafsson, M. Daly, O. Kangas and J. Palme (eds.) *Welfare and the Great Recession: A Comparative Study*, Oxford: Oxford University Press, pp175-191.

<sup>89</sup> See, for example, Frances Ryan, *The Guardian*, 22.9.21: <https://www.theguardian.com/commentisfree/2021/sep/22/universal-credit-cut-bedroom-tax-esa-reductions-policy/>

<sup>90</sup> House of Commons *Hansard*, Oral Answers 7.2.22, col. 669.

<sup>91</sup>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/946014/ssac-occasional-paper-25.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/946014/ssac-occasional-paper-25.pdf), p8.

<sup>92</sup> <https://committees.parliament.uk/publications/8745/documents/88599/default/>

<sup>93</sup> <https://economy2030.resolutionfoundation.org/reports/social-insecurity/>

<sup>94</sup> <https://www.irf.org.uk/press/400000-people-could-be-pulled-poverty-real-terms-cut-benefits-april/>; see also <https://cpaq.org.uk/news-blogs/news-listings/uc-families-face-%C2%A3570-income-cut-costs-surge> and <https://policyinpractice.co.uk/better-use-of-universal-credit/>

measures to help those on low incomes with rising energy costs are inadequate, and that people with disabilities on benefits also lost out when the 'uplift' ended in October 2021.

#### 4.1.2 Activation of people with disabilities on benefits

Increasingly, people with disabilities and long-term health conditions are treated similarly to unemployed people, even if they are claiming benefits predicated on having reduced capability for work (and work-related activity). The introduction of UC made the distinction between unemployed claimants and those with disabilities or health conditions less clear-cut, and also brought in the 'claimant commitment', giving more discretion to work coaches in the operation of conditions on claiming.

The ratcheting up of conditionality in recent years has exposed more people with disabilities to sanctions (benefit reductions) if they fail to comply with activation requirements. High numbers of claimants with disabilities have been sanctioned in recent years.<sup>95</sup> This applies especially to those in the work-related activity group of ESA, who can be sanctioned if they do not meet certain work-related activity requirements, after which they can lose benefit for 1–4 weeks once they start complying.

The National Audit Office (NAO) published a report on benefit sanctions in 2016.<sup>96</sup> Press coverage suggested it concluded that sanctions discouraged claimants with disabilities and health conditions from working.<sup>97</sup> Sanctions can also have severe impacts on living standards and mental health (a particular concern in relation to claimants with disabilities due to severe long-term mental ill-health). The fact that sanctions, primarily aimed at unemployed claimants, can also be imposed on those with disabilities and health conditions means that there is growing concern about this 'activation'. There had been growing concern not only about these impacts of sanctions on claimants, but also about the rumoured use of targets for sanctions imposition in Jobcentres and widely varying rates of sanctioning. There also seems to be limited evidence available about the effectiveness of sanctions on labour market (re)entry or other effects.<sup>98</sup> However, sanctions in general decreased in more recent periods because of the suspension of conditionality in the pandemic; and from the beginning of the pandemic up to the end of October 2021, there have still been no new sanctions on ESA claimants.<sup>99</sup> The government has not published its own research on the effectiveness of sanctions,<sup>100</sup> and the NAO report said that the DWP was not aware of their wider costs and benefits.

The government is now piloting an 'employment and health discussion' between DWP work coaches and people with disabilities who currently have to take steps towards work, to test out a more voluntary approach.<sup>101</sup> In addition, in part due to the estimated 300,000 people with disabilities who fell out of work each year prior to COVID-19,<sup>102</sup> it published its

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<sup>95</sup> [https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018\\_A\\_Better\\_WCA\\_is\\_possible\\_FULL-4.pdf/](https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018_A_Better_WCA_is_possible_FULL-4.pdf/) reported that over a million benefit sanctions had been applied to claimants with disabilities since 2010. Updated figures on sanctions are available from regular bulletins from David Webster: <https://cpag.org.uk/policy-and-campaigns/briefing/david-webster-university-glasgow-briefings-benefit-sanctions/>

<sup>96</sup> <https://www.nao.org.uk/wp-content/uploads/2016/11/Benefit-sanctions.pdf>

<sup>97</sup> <https://www.theguardian.com/society/2016/nov/30/benefits-sanctions-a-policy-based-on-zeal-not-evidence/>

<sup>98</sup>

<https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cambridge.org%2Fcore%2Fjournal%2Fjournal-of-social-policy%2Farticle%2Fimpacts-of-benefit-sanctions-a-scoping-review-of-the-quantitative-research-evidence%2F9272BC857236795930DCD6AB7B8E04A1/>

<sup>99</sup> Regular briefings by Dr David Webster on sanctions, available at [www.cpag.org.uk](http://www.cpag.org.uk); latest information in an email from him, 20.2.22.

<sup>100</sup> <https://www.theguardian.com/society/2022/jan/27/report-on-effectiveness-of-benefit-sanctions-blocked-by-dwp/>

<sup>101</sup> E.g. see House of Commons *Hansard*, Debates 1.2.22, col. 106WH.

<sup>102</sup> House of Commons *Hansard*, 20.7.21 col. 61WS.

response to *Health is Everyone's Business*, which set out measures to reduce job loss related to disability and ill-health.<sup>103</sup>

## 4.2 Recent reforms and reforms currently in the pipeline

### 4.2.1 Policy changes in the COVID-19 pandemic<sup>104</sup>

People with disabilities, as well as others, received a £20 (€24.01) per week 'uplift' to the standard allowance of UC during the pandemic (which was withdrawn from October 2021).<sup>105</sup> Claimants on 'legacy' benefits such as ESA did not receive this, however. The Disability Benefits Consortium conducted a survey of 1,800 people with disabilities on these latter benefits, with results published in 2021,<sup>106</sup> which revealed the negative impact on them. A legal case trying to extend this uplift to those on 'legacy' benefits was lost in the High Court.<sup>107</sup>

During the COVID-19 pandemic,<sup>108</sup> central government gave several allocations of funding to local authorities in England to disburse using their discretion for various purposes, with equivalent sums given to the devolved administrations. Some monitoring of these disbursements and other expenditure at local level has been carried out.<sup>109</sup> But it is not known how much was allocated to people with long-term disabilities.

### 4.2.2 Moving to Universal Credit for those with severe disabilities

In UC there is no enhanced disability premium (EDP) or severe disability premium (SDP). These were paid on top of a range of means-tested benefits<sup>110</sup> if you were already either registered blind or entitled to one of various disability-related payments (largely for extra costs). Some claimants with disabilities who had to move to UC because their circumstances changed thus lost these payments and took the government to court. As a result, if someone was entitled to the SDP on income-related ESA or various other means-tested benefits (but not Housing Benefit) when they claimed UC, they became entitled to transitional protection.<sup>111</sup> But this was not sufficient to make up for the loss, and so has been subject to further legal challenge.<sup>112</sup> And it is a cash amount only, so will be eroded by inflation (or ended with certain changes of circumstances). Others in this position who

<sup>103</sup> <https://www.gov.uk/government/consultations/health-is-everyones-business-proposals-to-reduce-ill-health-related-job-loss/> and government response, following consultation: <https://www.gov.uk/government/consultations/health-is-everyones-business-proposals-to-reduce-ill-health-related-job-loss/outcome/government-response-health-is-everyones-business/>

<sup>104</sup> See UK thematic report on social protection and inclusion policy responses to COVID-19 (2021): [https://ec.europa.eu/social/main.jsp?pager.offset=30&advSearchKey=%20ESPN\\_covid2021&mode=advancedSubmit&catId=22&policyArea=0&policyAreaSub=0&country=0&year=0/](https://ec.europa.eu/social/main.jsp?pager.offset=30&advSearchKey=%20ESPN_covid2021&mode=advancedSubmit&catId=22&policyArea=0&policyAreaSub=0&country=0&year=0/)

<sup>105</sup> See, for example, <https://www.bath.ac.uk/publications/complexities-for-claimants-the-reality-of-the-20-weekly-uplift-to-universal-credit/> for more information about the £20 (€24.01) 'uplift'. WTC claimants also received a £20 per week increase to their basic allowance, but this was ended earlier with a £500 payment instead to cover the last six months.

<sup>106</sup> <https://disabilitybenefitsconsortium.com/2021/08/26/test-post/>

<sup>107</sup> <https://www.bbc.co.uk/news/uk-59555458/>; and see: <https://www.disabilitynewsservice.com/appeal-hopes-follow-anger-at-universal-credit-20-uplift-court-defeat/>

<sup>108</sup> As described in our recent UK report for ESPN on provisions during the COVID-19 pandemic.

<sup>109</sup> <https://www.gov.uk/government/publications/local-authority-covid-19-financial-impact-monitoring-information/> and <https://www.gov.uk/government/publications/covid-local-support-grant-management-information-17-april-to-30-september-2021>

<sup>110</sup> <https://www.gov.uk/disability-premiums/eligibility/>. As with Attendance Allowance for those of pension age, it is often not possible to get these premiums if the relevant person has someone aged 18 or over living with them or they have someone getting a benefit for caring for them.

<sup>111</sup> <https://www.turn2us.org.uk/Benefit-guides/Severe-Disability-Premium/Severe-Disability-Premium-and-Universal-Credit/>

<sup>112</sup> The DWP paid for the loss of severe, but not enhanced, disability premium – see Leigh Day (solicitors) press release, 21.1.22: <https://www.leighday.co.uk/latest-updates/news/2022-news/severely-disabled-benefits-claimants-win-legal-challenge-over-loss-of-income-caused-by-move-on-to-universal-credit/>

had not yet moved to UC could stay on 'legacy' benefits until 27 January 2021, but then had to move to UC like other claimants.<sup>113</sup>

### 4.2.3 National Disability Strategy

The 2021 National Disability Strategy<sup>114</sup> involves all government departments, but the proposed short-term actions do not include any proposals on benefits. The DWP does have a short section in it (pp112-113), saying that it 'will take action to remove the barriers disabled people face at work and set out proposals to improve access to support for disabled people who cannot work'. But the only reference to social security provision is about 'proposals to improve the experience of accessing disability benefits' (see Section 4.2.4, Assessment processes for ESA, UC and PIP, below). See Section 4.3 below for the smaller nations' actions.

The UK-wide National Disability Strategy has been judged unlawful<sup>115</sup> by the High Court, due to inadequate consultation with people with disabilities (p12); but the government is appealing against the judgment.<sup>116</sup> The Equality and Human Rights Commission is also reported to have abolished its advisory group of people with disabilities.<sup>117</sup> The independent Social Security Advisory Committee had already published a report on working age benefits suggesting the government thought lack of trust from people with disabilities made reforms harder to introduce, and proposing ways to improve this, including a protocol for DWP engagement.<sup>118</sup> The Strategy is referred to in the government's follow-up report to the UN Committee on the Rights of Disabled People after its 2016 inquiry.<sup>119</sup>

### 4.2.4 Assessment processes for ESA, UC and PIP<sup>120</sup>

These assessments have different purposes: for ESA and UC, the assessment focuses on the impact of disabilities on capability for work (and work-related activity);<sup>121</sup> for PIP (and other benefits for disability costs), the assessment focuses on the impact on functional capacity. Some issues of assessment are also relevant for other social security benefits. The three main debates about these assessment processes are about: their form (whether telephone and paper assessments should continue beyond the pandemic); their content (whether other information, especially medical, should play more of a role); and whether assessments should continue to be conducted by private companies contracted by the DWP. There is also serious concern about their accuracy and quality.<sup>122</sup>

<sup>113</sup> <https://www.disabilityrightsuk.org/news/2021/january/claimants-severe-disability-premium-awards-no-longer-exempt-requirement-claim/>

<sup>114</sup> <https://www.gov.uk/government/publications/national-disability-strategy/>

<sup>115</sup> <https://www.disabilitynewsservice.com/disability-strategy-is-unlawful-court-confirms-and-denies-dwp-permission-to-appeal/>; and <https://www.disabilityrightsuk.org/news/2022/january/national-disability-strategy-declared-unlawful-disability-rights-uk-comment/>

<sup>116</sup> See debate in House of Commons *Hansard*, 1.2.22, col. 83WH.

<sup>117</sup> <https://www.disabilitynewsservice.com/new-concerns-over-equality-watchdog-as-it-scrap-disability-committee/>

<sup>118</sup> <https://www.gov.uk/government/publications/ssac-occasional-paper-25-how-dwp-involves-disabled-people-when-developing-or-evaluating-programmes-that-affect-them/>

<sup>119</sup> House of Commons *Hansard*, 9.12.21, Written Statements cols. 26WS-28WS.

<sup>120</sup> See ANED report about assessment in the UK (2019): <https://www.disability-europe.net/theme/social-protection?country=united-kingdom/> and government guide for health professionals involved in writing medical reports:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1064969/medical-reports-completion-guidance.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1064969/medical-reports-completion-guidance.pdf)

<sup>121</sup> No statistics are currently produced about work capability assessments for Universal Credit.

<sup>122</sup> See, for example, report by Baumberg Geiger, B. (2018): [https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018\\_A\\_Better\\_WCA\\_is\\_possible\\_FULL-4.pdf](https://demosuk.wpengine.com/wp-content/uploads/2018/02/2018_A_Better_WCA_is_possible_FULL-4.pdf), for Demos think tank.

According to the Disability News Service, the government admits that its assessment system is 'fragmented' and 'inefficient'.<sup>123</sup> It says it is committed to reforming the WCA in particular.<sup>124</sup> Disability Rights UK reports on claimant deaths after DWP actions on benefits,<sup>125</sup> including the withdrawal of benefits following assessment. The government has not responded to calls for an inquiry.<sup>126</sup> The Work and Pensions Select Committee is conducting an inquiry into health assessments for benefits.<sup>127</sup> This has been prompted in part by concerns about delays; the quality of reports and expertise of assessors; how the DWP uses expert additional evidence; stresses on claimants; how accessible the processes are; and whether the descriptors accurately reflect the impact of people's health conditions.<sup>128</sup> The Disability Benefits Consortium has published proposals to reform assessments of capability for paid work.<sup>129</sup> The Westminster Government has researched claimants' views about the self-completion questionnaires that form part of assessment.<sup>130</sup> It plans to reform assessments for ESA and other benefits, to integrate them into one service, initially on a pilot basis in one area.<sup>131</sup>

A government policy discussion paper (Green Paper)<sup>132</sup> includes a proposed review of social security support for people with disabilities to review: 'how successful the changes we have made to the benefits system since 2010 have been. We consider whether we need to re-think any aspect of these changes or go further. We want to explore whether our current system encourages and supports people in the best way' (p6). This includes disability benefit assessment processes: 'exploring how to conduct assessments in different ways. This includes through the use of telephone and video assessments; continuing to reduce repeat assessments where a person's health is unlikely to change; continuing to increase the quality and accuracy of the decisions we make on benefit entitlement; exploring further improvements to our mandatory reconsideration and appeal processes; and improving the information we use to make decisions. This includes securing better medical evidence to increase the speed and likelihood of people getting the correct level of support at the outset' (p7).

The DWP's brief description of this in its *Outcome Delivery Plan 2021/22* is: 'The Health Transformation Programme will deliver improvements to the current health and disability benefits system, making it easier to navigate for claimants and delivering better value for money for taxpayers.'<sup>133</sup> MPs debated disability benefits assessments and the Green Paper in February 2022,<sup>134</sup> with the Minister arguing that 3% of WCAs for ESA since October 2013 have gone to appeal, and 2% have been overturned at a tribunal hearing. Testing is also taking place of a 'case manager' approach to assessment, with a DWP official talking

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<sup>123</sup> <https://www.disabilitynewsservice.com/dwp-admits-assessment-system-is-fragmented-and-inefficient/>

<sup>124</sup> House of Commons *Hansard*, 20.7.21, col. 60WS.

<sup>125</sup> <https://www.disabilityrightsuk.org/news/2021/may/82-benefit-claimants-have-died-after-some-alleged-dwp-activity-such-termination/>

<sup>126</sup> <https://www.disabilitynewsservice.com/minister-for-disabled-people-ignores-calls-for-inquiry-into-dwp-deaths/>

<sup>127</sup> <https://committees.parliament.uk/work/1468/health-assessments-for-benefits/>

<sup>128</sup> <https://committees.parliament.uk/call-for-evidence/601/>

<sup>129</sup> <https://disabilitybenefitsconsortium.files.wordpress.com/2020/07/wca-dbc-2020.07-policy-position-on-wca-v7.docx>

<sup>130</sup> <https://www.gov.uk/government/publications/claimant-views-on-ways-to-improve-pip-and-esa-questionnaires/>

<sup>131</sup> <https://questions-statements.parliament.uk/written-statements/detail/2020-07-09/HCWS353/>

<sup>132</sup> For Green Paper see [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1004042/s\\_haping-future-support-the-health-and-disability-green-paper.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1004042/s_haping-future-support-the-health-and-disability-green-paper.pdf); and for analysis see briefing from House of Commons Library: <https://commonslibrary.parliament.uk/research-briefings/cdp-2022-0021/>

<sup>133</sup> <https://www.gov.uk/government/publications/department-for-work-and-pensions-outcome-delivery-plan/department-for-work-and-pensions-outcome-delivery-plan-2021-to-2022/>

<sup>134</sup> House of Commons *Hansard*, Debates 1.2.22, cols. 83WH-107WH.

proactively to the claimant about their condition and functional capacity before an assessment.

One well-informed and engaged member of the House of Lords has commented: 'The DWP has been silent ... not mentioning adequacy once in last year's health and disability Green Paper'.<sup>135</sup> There was also concern among disability bodies about the standard 12-week consultation for the Green Paper in summer 2021, judged too short.<sup>136</sup>

The Scottish Government intends to develop a new approach to assessment (see Section 4.3.1).

## 4.3 Good practices and recommendations on how to tackle gaps and obstacles

### 4.3.1 Policy and practice in the devolved administrations

The Scottish Government published a delivery plan for its strategy for people with disabilities (2016-21),<sup>137</sup> and a progress report to judge performance against indicators of national wellbeing in 2021.<sup>138</sup> The Welsh Government is reviewing its action plan on disability (2019) and in March 2021 adopted the Socio-economic Duty, a lever to help tackle inequality.<sup>139</sup> Northern Ireland has been working on a disability strategy since autumn 2020.

In Scotland there is a social security charter for claimants.<sup>140</sup> This is intended to put dignity, security and respect at the heart of the benefits system. Social security is also seen as a human right. The Scottish Government has placed particular emphasis on consultation with people with disabilities about proposed changes to social protection, with on-going engagement through a Disability and Carers' Benefits Expert Advisory Group and an Ill Health and Disability Benefits Stakeholder Reference Group. There are 'experience panels' of people on benefits who are consulted about social security policies.<sup>141</sup> These are innovative developments which would be likely to benefit people with disabilities if they were also implemented on a UK-wide basis. The Social Security Advisory Committee has suggested that the UK government establish a panel of people with disabilities to be consulted regularly about projects.<sup>142</sup>

In particular, from April 2022 the Scottish government will take over responsibility for assessment and decision-making relating to PIP and AA awards (benefits towards the extra costs of disability), renamed Adult Disability Payment and Pension Age Disability Payment respectively (not covered in this report).<sup>143</sup> Face-to-face assessments will only be conducted where necessary (and not at all for the Pension Age Disability Payment) and

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<sup>135</sup> <https://disabilitybenefitsconsortium.com/2022/02/03/dbc-responds-to-the-uses-of-health-and-disability-benefits-report/>

<sup>136</sup> <https://disabilitybenefitsconsortium.com/2021/08/06/dbc-dpac-letter-to-minister-for-disabled-people-on-green-paper/>

<sup>137</sup> <https://www.gov.scot/publications/fairer-scotland-disabled-people-delivery-plan-2021-united-nations-convention/>

<sup>138</sup> <https://www.gov.scot/publications/analysis-national-performance-framework-indicators-perspective-disability/>

<sup>139</sup> See National Disability Strategy, pp15-16, for what the devolved administrations are doing.

<sup>140</sup> <https://www.gov.scot/policies/social-security/benefits-disabled-people-ill-health/> and <https://www.socialsecurity.gov.scot/about/our-charter/>; and see also Select Committee report: <https://committees.parliament.uk/publications/6382/documents/70010/default/>

<sup>141</sup> <https://www.gov.scot/collections/social-security-experience-panels-publications/>; and see <https://www.gov.scot/policies/social-security/engagement-on-social-security/>

<sup>142</sup>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/946014/ss-ac-occasional-paper-25.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/946014/ss-ac-occasional-paper-25.pdf), p12

<sup>143</sup> <https://www.gov.scot/publications/disability-assistance-assessments-policy-position-paper/>

claimants will be able to submit a range of supporting information, such as an assessment for social care, a report from a district nurse or community psychiatric nurse or information from a family carer.<sup>144</sup> These reforms would address some of the criticisms of DLA/PIP/AA assessments in the rest of the UK. However, they do not go as far as those recommended in an earlier landmark, cross-departmental report by the Westminster government<sup>145</sup> that recommended integrating multiple funding streams and reducing or aligning multiple assessments.

#### **4.3.2 Advice and advocacy**

A Disability Benefits Consortium report suggests that the DWP should recommend people needing help with their benefits to advice and advocacy organisations in the local area.<sup>146</sup>

#### **4.3.3 Reverse the growing emphasis on means-tested benefits in the UK's social protection system**

The additional element payable to people in the work-related activity group in New Style ESA should be restored. In addition, the more emphasis is placed on non-means-tested benefit entitlement, the less people with disabilities have to depend on others within their household for income maintenance and the more they have individual rights. This is particularly important for women and could result in reductions in 'in-work poverty' if partners not in the labour market (including those with disabilities) have access to income of their own.<sup>147</sup>

Benefits for the extra costs of disability are largely non-means-tested (though there are additions to means-tested benefits for additional costs as well, and non-means-tested benefits for extra costs are often ignored and give access to means-tested additions). It is critical that they remain non-means-tested as they aim to address horizontal rather than vertical inequality (i.e., additional costs that someone with disabilities faces compared with someone on the same income without disabilities).

#### **4.3.4 Recognise the additional costs of disability in the UK's poverty statistics**

As recommended by the Social Metrics Commission (SMC), the additional costs of disability should be taken into account in the annual *Households Below Average Income* publication so as not to under-estimate the poverty of people with disabilities, as is done now when benefits for additional costs are included but the costs themselves are excluded. The SMC suggested that until this can be done disability benefits should be ignored.<sup>148</sup>

#### **4.3.5 Strengthen data collection on disability and people with disabilities**

The UK should strengthen its data collection mechanisms, ensuring that comprehensive, reliable and disaggregated data on disability and people with disabilities are collected, in line with Article 31 (Statistics and data collection) of the UN CRPD provisions.

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<sup>144</sup> <https://www.gov.scot/news/stop-to-traumatic-disability-assessments/>

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<https://webarchive.nationalarchives.gov.uk/ukgwa/+http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/disability.pdf>

<sup>146</sup> DBC (2022) *Future of Assessment Services: advice and advocacy – a proposal from the Disability Benefits Consortium*: <https://disabilitybenefitsconsortium.com/dbc-reports/>

<sup>147</sup> <https://ideas.repec.org/p/ese/iserwp/2011-09.html>

<sup>148</sup> [https://socialmetricscommission.org.uk/wp-content/uploads/2019/07/SMC\\_measuring-poverty-201809\\_full-report.pdf](https://socialmetricscommission.org.uk/wp-content/uploads/2019/07/SMC_measuring-poverty-201809_full-report.pdf)

## Annexes

### Annex 1: Benefits of importance to people with disabilities being replaced by Universal Credit

Some people with disabilities may still be claiming these benefits, but their numbers are declining as Universal Credit replaces them for anyone who undergoes a relevant change of circumstances.

#### ***Income-related Employment and Support Allowance (ESA)***

**a) Eligibility conditions other than those related to disability:** Income-related (means-tested) ESA is a 'legacy' benefit; there are no new claims for it, as it is being replaced by Universal Credit (see GMIs). But some people still receive it.

Age: The claimant is entitled from age 16, but under pension age.

Nationality and/or residency: anyone not a British/Irish citizen or who is 'subject to immigration control' is excluded from this and many other means-tested benefits. The definition is complex but affects a limited group (e.g., without leave to remain, or (with a few exemptions) with leave to remain but with 'no recourse to public funds' (NRPF), which applies to some EEA nationals since the end of 2020). If the claim is for a couple or family, and someone included in the claim has NRPF, no benefit is paid for them, although (if a partner) their resources are taken into account. You also have to satisfy the habitual residence test<sup>149</sup> and have the right to reside.<sup>150</sup>

Waiting period: For most people there are seven waiting days before getting ESA. It is possible to ask for an advance payment.

Contributory history: national insurance contributions are not required for this benefit.

Level of financial resources: income-related ESA is means tested (income and assets). For couples this includes both partners' income and capital. Those with assets of £16,000 (€19,120) or more are automatically ineligible; a tariff income is assumed for capital below this but above £6,000 (€7,170). Other rules set out how needs are assessed and how income is taken into account. Non-means-tested benefits for extra disability costs are ignored in the calculation of this and other means-tested benefits.

Other: if you are in a couple, your partner must be working for under 24 hours per week for you to qualify. Income-related ESA is not taxable.

**b) Disability assessment framework:** The same assessment process is used as for New Style ESA (see Section 1.1.1), with claimants allocated to either the work-related activity or support group.

#### **c) Benefit entitlements:**

Level of benefit: The basic single person's amount is the same as for New Style ESA (1.1.1 above), but couples get £117.40 (€140.29) per week. Those in the work-related activity group get an additional £29.70 (€35.53) per week in the main phase of benefit, and those in the support group get an additional £39.40 (€47.14). Claimants may get an enhanced or severe disability premium added to their ESA, higher if both partners qualify;<sup>151</sup> those in the support group of income-related ESA also get the

<sup>149</sup> <https://www.citizensadvice.org.uk/benefits/claiming-benefits-if-youre-from-the-EU/before-you-apply/check-if-you-can-pass-the-habitual-residence-test-for-benefits/>

<sup>150</sup> <https://www.gov.uk/right-to-reside/>. These tests do not apply to people coming recently from Ukraine or Afghanistan. Also see <https://www.citizensadvice.org.uk/scotland/immigration/benefits-services-and-your-immigration-status/are-you-subject-to-immigration-control/>

<sup>151</sup> These may also be given as additions to other means-tested benefits, including Income Support, income-based Jobseeker's Allowance and Housing Benefit (see Child Poverty Action Group, *Welfare Benefits and Tax*



enhanced/severe disability premium.<sup>152</sup> Both have been phased out under Universal Credit (see GMIs).

Duration of benefit: Unlike New Style ESA, those in the work-related activity group can continue to claim income-related ESA indefinitely (unless they fail an assessment).

Interactions with other income or other income-related benefits: Income-related ESA can give entitlement to some 'passport benefits'.<sup>153</sup> These can include free prescriptions (see Section 1.3.1). They may also include additional schemes and benefits mainly awarded at the discretion of the local council, largely related to travel, potentially including: blue parking badge; discount leisure pass; bus pass; free car tax; discounted rail card; and reduced taxi fares.

People receiving income-related ESA may also be entitled to other means-tested benefits and tax credits.<sup>154</sup> Children in claimant households may receive child tax credit, which is claimed and paid separately by HM Revenue and Customs (£2,845 (€3,400) per year). Claimants can also apply for means-tested Housing Benefit and Council Tax Reduction (local authority-administered benefits helping with rent and property tax). If you move to Universal Credit from income-related (not New Style) ESA, you get a 'run-on' of ESA for two weeks at the start of the Universal Credit award. If you fail a work capability test and are considered fit for work, you must claim Universal Credit if you want benefit. But if you appeal against the work capability decision you can stay on income-related ESA while waiting for a mandatory reconsideration and potentially an appeal hearing.

Benefit is paid fortnightly, though entitlement is on a weekly basis.

### ***Disabled worker element<sup>155</sup> of Working Tax Credit (WTC)<sup>156</sup>***

WTC is being replaced by Universal Credit (see Section 2.3.1 above). But some people are still claiming WTC, so it is included here. Tax credits are calculated over a year, on the basis of an estimate for the current year, adjusted when circumstances change or at year end. Self-employed people can also qualify. The disabled worker element is an extra amount for workers disadvantaged due to disability/ill-health. The severe disability element is an addition to the disabled worker element, so you get a higher amount. Tax credits are administered by HM Revenue and Customs and can be paid 4-weekly or weekly. They are not taxable.

#### **a) Eligibility conditions:**

Age: at least 16, with no upper age limit (but see 'Other' below about under 25s).

Nationality and/or residency: the claimant needs to be present and ordinarily resident in the UK, and not be a person 'subject to immigration control' (see income-related ESA, Annex 1).

Waiting period: none; if you met the conditions before your date of claim, WTC can be backdated for up to 31 days.

Contributory history: No contribution record necessary.

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*Credits Handbook 2021/22*, p334). The conditions for all these benefits are not described here, as this would involve describing the rules of entitlement for several different benefits, all of which (except for Housing Benefit for older people) are being replaced by Universal Credit.

<sup>152</sup> <https://www.gov.uk/disability-premiums/eligibility/>

<sup>153</sup> E.g. see <https://www.entitledto.co.uk/help/passported-benefits/>

<sup>154</sup> Note that 'tax credits' as described in this report are in effect means-tested benefits but paid by HM Revenue and Customs rather than the DWP.

<sup>155</sup> The title of this element of Working Tax Credit is 'disabled worker' (not 'worker with disabilities').

<sup>156</sup> The Low Incomes Tax Reform Group provides advice online about tax credits and benefits: <https://www.litrq.org.uk/tax-guides/tax-credits-and-benefits/>

Level of financial resources: WTC is means tested, but has no capital rule.

Other: you (or your partner, if a couple) must be in paid work, with the number of hours required depending on your circumstances. If you qualify for the disabled worker element you only have to be working 16 hours per week, and exceptionally you can be aged under 25. You must be experiencing one or more disadvantages in a specified list.<sup>157</sup> You must also usually be getting a qualifying benefit (largely those paid for extra disability costs), and for the severe disability element must be getting the higher amount of such a benefit.

- b) Additional amount/compensation included and adequacy issues:** The disabled worker element is £3,240 (€3,871.77) per year. More than one can be paid if you are a couple and you both qualify. The severe disability element is an additional £1,400 (€1,673) per year. The total WTC payment depends on income and individual/family needs. Child tax credit can be claimed separately, as can help with rent and council tax (local taxation).
- c) Gaps/obstacles:** This is being replaced by UC, which has no equivalent provision for workers who may earn less because of their disability.

## Annex 2: Social care funding and reform proposals

People with disabilities have been badly affected by the decade of austerity policies that have cut the budgets of local authorities responsible for social care. There is now an estimated shortfall in social care funding in England of between £6.1bn (€7.29bn) (just to meet the expected increase in demand from demographic change) and £14.4bn (€17.21bn) (to meet increased demand, improve access to care and pay higher fees for care services).<sup>158</sup> Only people with very high levels of need and low levels of assets and income are now eligible for publicly-funded care; those who are eligible also have to pay charges and are then means-tested if they require help with these.

Social care reform plans published in autumn 2021<sup>159</sup> are aimed mainly at reducing the risk of older people having to sell a home in order to fund care. However, working age people with disabilities, some of whom receive personal budgets to employ a personal assistant rather than services in kind, constitute a third of all social care users and account for half of local authority spending on care; sector leaders are particularly concerned about the rapidly rising care costs for people with complex needs such as learning disability, autism and challenging behaviour.<sup>160</sup> Working age people with disabilities and the households in which they live are at a disadvantage in terms of wealth; average levels of household wealth are considerably lower than those of others, so they are unlikely to benefit from the proposed reforms; neither will the poorest older people with disabilities.<sup>161</sup> They will therefore remain largely dependent on inadequately funded local authority care.

<sup>157</sup> See <https://www.turn2us.org.uk/Jargon-buster/Disadvantage-in-getting-a-job/>

<sup>158</sup> <https://www.health.org.uk/news-and-comment/charts-and-infographics/REAL-social-care-funding-gap/>

<sup>159</sup> UK Government (2021) *Build Back Better: Our Plan for Health and Social Care*:

<https://www.gov.uk/government/publications/build-back-better-our-plan-for-health-and-social-care/>

<sup>160</sup> Association of Directors of Adult Social Services, *ADASS Spring Survey 2021*:

<https://www.adass.org.uk/media/8766/adass-spring-survey-report-2021-final-no-embargo.pdf>

<sup>161</sup> McKnight, A. (2014) *Disabled People's Financial Histories: Uncovering the disability-wealth penalty*, CASE WP181, London: London School of Economics: <http://eprints.lse.ac.uk/58041/1/CASEpaper181.pdf>

### **Annex 3: Proposed reforms to benefits for extra costs of disability for those of working age in Scotland**

Using newly acquired devolved powers, in 2018 the Scottish Government published proposals to reform disability benefits, including PIP (to be renamed Adult Disability Payment (ADP)).<sup>162</sup> An extensive consultation exercise<sup>163</sup> involving people with disabilities and their organisations was conducted. A major theme in the responses was that the proposals did not go far enough; because most benefits and benefit delivery processes are reserved to the UK Government, structural constraints severely restricted more radical Scottish reforms. So far, changes to the application and assessment processes have been announced and will begin to take effect from 2022. It will be rolled out in phases from March to July, and will then apply across Scotland from 29 August. A wider review is planned for 2023, starting with the mobility component of ADP.

### **Annex 4: Impact of COVID-19 pandemic on people with disabilities**

There is robust evidence from population surveys that, across England, Scotland and Wales, higher proportions of people with disabilities have experienced adverse psychosocial and economic impacts during the COVID-19 pandemic compared with other adults. Figures up to November 2021 show the risk of death from COVID-19 in England was 3.1 times greater for men with disabilities and 3.5 times greater for women with disabilities than for their counterparts.<sup>164</sup> Adults with disabilities were twice as likely as those without to report that their access to healthcare and treatment for non-COVID related conditions had been adversely affected (58% for people with disabilities compared with 31% for others). Some 55% of people with disabilities also reported that their wellbeing had been affected, compared to 35% of others. People with disabilities were also more likely to report feeling stressed and anxious, with worsened mental health and feeling a burden on others.

Some 15% reported increases in their cost of living (compared with 12% of people without disabilities), because of increased food, energy and other fuel prices.<sup>165</sup> Organisations of people with disabilities have cited these experiences as particularly damaging evidence of poor government management of the pandemic, and argued that they exacerbate existing structural health and other inequalities.<sup>166</sup> The cross-party Parliamentary Women and Equalities Committee has also highlighted the risks of discriminatory treatment of people with disabilities during the pandemic,<sup>167</sup> and published a report about coronavirus, disability and access to services.<sup>168</sup>

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<sup>162</sup> <https://www.gov.scot/publications/adult-disability-payment-response-consultation/pages/6/>

<sup>163</sup> <https://consult.gov.scot/social-security/improving-disability-assistance/>

<sup>164</sup> Shakespeare, T., Ndagire, F. and Seketi, Q. (2021) 'Triple jeopardy: disabled people and the Covid-19 pandemic', *The Lancet*, vol 397, 10 April.

<sup>165</sup> Office for National Statistics (2022) *Coronavirus and the Impacts on Disabled People in Great Britain*, March 2020 to December 2021:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/articles/coronavirusandthesocialimpactsongdisabledpeopleingreatbritain/march2020todecember2021>

<sup>166</sup> Shakespeare, T. et al., (2021) 'Disabled people in Britain and the impact of the COVID-19 pandemic', Preprints: <https://www.preprints.org/manuscript/202101.0563/v1>;

<sup>167</sup> <https://www.health.org.uk/news-and-comment/blogs/the-forgotten-crisis-exploring-the-disproportionate-impact-of-the-pandemic/>

<sup>168</sup> <https://committees.parliament.uk/publications/4068/documents/40461/default/>

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