Centre for Care Consultation Response - Pathways to Work: Reforming Benefits and Support to Get Britain Working Green Paper

This response is provided by members of the ESRC-funded Centre for Care. The Centre for Care is a research-focused collaboration between the Universities of Sheffield, Birmingham, Kent and Oxford, the London School of Hygiene & Tropical Medicine, the Office for National Statistics, Carers UK, the National Children's Bureau, and the Social Care Institute for Excellence. Funded by the Economic and Social Research Council, as one of its flagship research centres, with contributions from the National Institute for Health Research (NIHR) and Department of Health and Social Care, it works with care sector partners and leading international teams to provide accessible and up-to-date evidence on care – the support needed by people of all ages who need assistance to manage everyday life.

Contributors on behalf of the Centre for Care:

- **Charlie Grosset**, PhD student at the University of Sheffield.
- **Dr. Maxine Watkins,** Research Fellow at the University of Birmingham.
- **Professor Katherine Runswick-Cole**, Deputy Director of the School for Social Care Research (SSCR) and Professor of Education at the University of Sheffield.
- **Dr Armineh Soorenian,** Research Associate at the University of Sheffield.
- **Becky Driscoll,** Research Associate at the University of Sheffield.

Main point of contact:

- Lucy Wood, Research Assistant at the University of Sheffield - lucy.wood@sheffield.ac.uk and Centre for Care central inbox - centreforcare@sheffield.ac.uk.

Key points

(1) The proposed cuts to disability and carers benefits will exacerbate deprivation and cause disproportionate harm for disabled people and carers

We are concerned that the proposed reforms will have a significant, negative impact on both disabled people and unpaid carers, who are already much more likely to be experiencing financial hardship and cutting back on essentials (Wyjadlowska, et al, 2024). Carers often have to make difficult decisions about whether to prioritise spending money on food or heating, for example. At £83.30 per week, Carer's Allowance does not cover the costs of a basic standard of living, or of the additional costs of caring, and is fundamentally in need of review. Citizens Advice estimates that the reduction of financial support proposed in this Green Paper - notably restricting Personal Independence Payment (PIP) eligibility, changing Universal Credit (UC) rates and making claims to UC Health element contingent on claiming PIP - will have devastating financial impacts on disabled people, and also on carers as a knock-on effect (Citizens Advice, 2025).

DWP's own impact assessment estimates that over 150,000 unpaid carers will lose entitlement to Carer's Allowance (CA) or the Carer's Element of UC by 2029/30, as the person they care for loses their eligibility to PIP (DWP, 2025). We are deeply concerned about the impact this will have on their health and wellbeing, as well as their financial situation. Many carers have to give up paid employment because of the intensity of their caring role, and the lack of access to affordable, alternative care. Losing their benefits eligibility would not mean that their caring role changes; it merely increases the risk of financial hardship and burn-out. The Green Paper does not outline any plans to support them. This is likely to disproportionately affect women, since 73% of recipients on Carer's Allowance are women (Carers UK, 2025).

Government policy does not acknowledge that many disabled people also have caring responsibilities. We know that a considerable proportion of people claiming disability benefits are also themselves caring for others as well (Edwards and Loughnane, 2024); Census 2021 data finds that nearly 30% of all unpaid carers self-identified as disabled (ONS, 2021). Around 20% of all CA claimants are also in receipt of some form of disability benefit; this has risen 3% in the last 6 years (Source: Benefit Combinations PIP, DLA, AA and CA, Department for Work and Pensions Stat X-Plore, 2025). Around 150,000 people currently receive both CA and PIP - some of them could lose access to both, a double impact on their personal income (Carers UK, 2025).

People who are both caring and claiming disability benefits are more likely to live in deprivation. As of 2024, data shows that household deprivation where families are in receipt of disability benefits and CA stood at just over 60%, an increase of 2.26% from the previous year (Source: Household Below Average Income Disability benefits received by Family and Carer's Allowance received by family - Department for Work and Pensions Stat X-Plore, 2025). Disabled people and their carers are some of the most financially vulnerable claimants accessing the UK's social security system, who will inevitably lose out from further restrictions proposed by this Green Paper. Many carers in the UK are already struggling financially, with an estimated 1.2 million living in poverty, and 400,000 in 'deep poverty' - with incomes over 50% below the standard poverty threshold (Carers UK, 2024). This is likely to have a detrimental impact on their health and wellbeing, which may make it even more challenging to enter or stay in paid employment.

(2) Evidence does not support the assumption that restricting financial support will lead to an increase in employment rates among disabled people and carers

The Green Paper highlights that there has been an increase in the number of people claiming disability benefits, leading to an increase in social security spending. However, there is an assumption throughout the consultation that a reduction in financial support through tightening eligibility criteria or freezing benefits rates will increase the likelihood of disabled people and carers finding paid employment. There is no evidence presented to suggest that this is the case. Instead, research suggests that an increase in the working age population reporting a disability is best understood by examining the underlying causes of systemic health inequalities and worsening population health (Disability Rights UK, 2022).

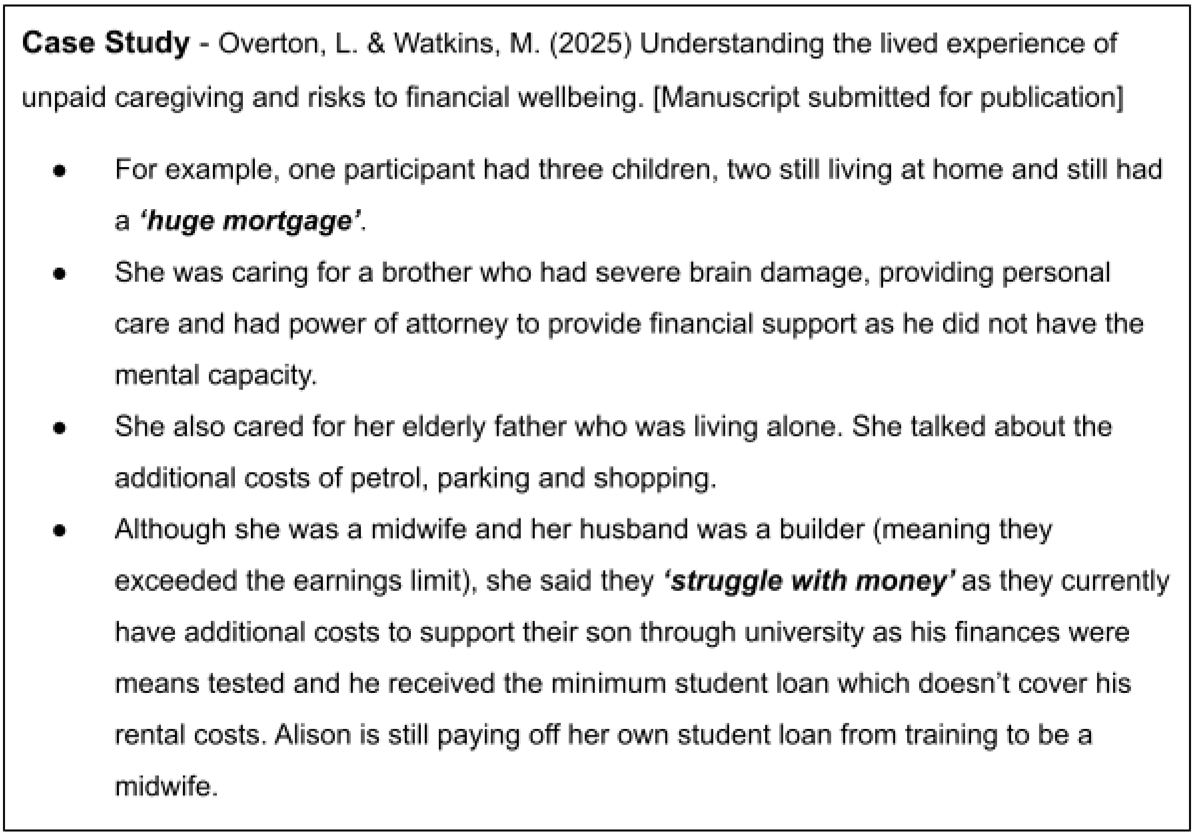
While we welcome the aim of supporting more disabled people to work if they can, tightening the eligibility criteria for PIP may have the opposite effect. There is strong evidence to suggest that these proposed reforms will cause a significant reduction to household income for carers and disabled people, which will push many further into poverty, and reduce their ability to enter the labour market (Citizens Advice, 2025, JRF, 2017). The Green Paper makes assumptions that the benefits system provides 'perverse incentives' through financial support - but these are unsubstantiated. PIP is not an out-of-work benefit and is intended to help people with the additional costs of disability or health conditions; indeed, for many PIP provides support (e.g. to help with the costs of transport, workplace modifications or specialist equipment) which enables them to stay in work, with Citizens Advice reporting that a quarter of people using PIP who were helped by Citizens Advice in 2024 were in work (Citizens Advice, 2025).

(3) A lack of support for, or acknowledgement of the role of unpaid carers

The Green Paper largely focuses on disabled people; however these proposals will also have significant consequences for unpaid carers, and particularly for disabled people who are also carers, which are not adequately explored. Much more needs to be done in order to improve carers' finances, ability to stay in work, and their health and wellbeing. However, the Green Paper does not adequately consider the specific needs of carers or the likely impact these changes will have on their lives. Since PIP is a gateway benefit to carers benefits, any loss of entitlement to PIP for a disabled person means that, if they have a carer, this person will also lose their CA. The DWP's own estimate is that 150,000 unpaid carers will lose entitlement to Carer's Allowance / UC Carer's Element because of changes to PIP (DWP, 2025). Of course, this does not mean that their caring responsibilities will change - if anything, the needs of the person they care for could increase without the support provided by PIP to help them live more independently. The combined loss of PIP and CA could be devastating for some households.

The only clear reference to carers is to the recent increase to the earnings limit of Carer's Allowance. Although this is a positive step, there is some evidence to suggest that removing the limit completely could have a positive impact for those carers who are able to undertake some paid employment alongside their caring responsibilities. An increasing number of quantitative studies demonstrate that caring has a negative impact on carers' financial wellbeing in multiple ways; such as direct costs and other expenses (Keating et al., 2014; Shooshtari et al., 2017); impacts on paid work, savings and investments (Petrillo et al., 2024; Raiber et al., 2022); health and wellbeing (Zhang & Bennett, 2024; Zhang et al., 2021) and inadequate services and benefits (Pickard et al., 2018; Morgan, 2018; 2019). Carers are disproportionately living in poverty.

More recent qualitative work produced by the Centre for Care (Watkins & Overton, 2024; Overton & Watkins, 2025) suggests that the cost of caring is experienced unequally depending on individual influences (e.g. financial resources, nature of employment and housing), relational / familial influences (e.g. nature of caring roles and responsibilities, household income and care recipient financial resources) and societal / systemic influences (e.g. workplace policies and culture, cost of living, benefits and financial support).
Care-related expenses make financial circumstances particularly difficult for those living on low incomes, with higher housing costs and with multiple caring responsibilities.



Case Study - Overton, L. & Watkins, M. (2025) Understanding the lived experience of unpaid caregiving and risks to financial wellbeing. [Manuscript submitted for publication]

- For example, one participant had three children, two still living at home and still had a ***'huge mortgage'***.
- She was caring for a brother who had severe brain damage, providing personal care and had power of attorney to provide financial support as he did not have the mental capacity.
- She also cared for her elderly father who was living alone. She talked about the additional costs of petrol, parking and shopping.
- Although she was a midwife and her husband was a builder (meaning they exceeded the earnings limit), she said they ***'struggle with money'*** as they currently have additional costs to support their son through university as his finances were means tested and he received the minimum student loan which doesn't cover his rental costs. Alison is still paying off her own student loan from training to be a midwife.

In addition to reforming CA, more consideration of measures which could support unpaid carers to balance paid employment with their caring responsibilities is needed (e.g. the introduction of paid carer's leave and rights to flexible working) - particularly given the context of wider social policies that extend working lives, for example raising the state pension age (DWP, 2017; Thurley et al., 2021) and offering support packages to help those over age 50 return to or remain in the labour market (DWP, 2022). Currently, the earnings threshold of CA allows recipients to undertake only 16 hours of work at the national minimum wage. This leaves many unpaid carers with little choice but to seek lower paid and possibly lower skilled employment, reduce their working hours or leave employment altogether (Evandrou et al., 2024).

There is also an economic case to be made for financially supporting unpaid carers. The economic value of unpaid care in England and Wales is greater than ever before, and is now estimated to be £162 billion - exceeding that of the entire NHS budget in England for health service spending (Petrillo and Bennett, 2023), and an increase of 29% since 2011. Unpaid carers are an integral part of our health and care systems, which would simply collapse without their support. They need adequate financial support, whether they are able to undertake paid employment or not. Whether or not they are able to enter the labour market is also determined to a large extent by whether or not their loved one is able to access good quality, affordable social care. In addition, the Joseph Rowntree Foundation found that policies that would provide higher levels of financial support for unpaid carers has strong support from the general public.

References

Carers UK. (2025). *Briefing on Pathways to Work Green Paper: Impact on unpaid carers | Carers UK*. [online] Available at: https://www.carersuk.org/briefings/briefing-on-pathways-to-work-green-paper-impact-on-unpaid-carers/.

Carers UK (2024). *The impact of caring on: finances State of Caring 2024*. [online] Available at: https://www.carersuk.org/media/umaifzpq/cuk-state-of-caring-2024-finances-web.pdf.

Citizens Advice. (2025). *Pathways to Poverty: How planned cuts to disability benefits will impact the people we support*. [online] Available at: https://www.citizensadvice.org.uk/policy/publications/pathways-to-poverty-how-planned-cuts-to-disability-benefits-will-impact-the/#h-overall-impact.

Department for Work and Pensions (2012). *Carer's Allowance Eligibility*. [online] GOV.UK. Available at: https://www.gov.uk/carers-allowance/eligibility

Department for Work and Pensions (DWP) (2017). Fuller working lives: a partnership approach. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/587654/fulle r-working-lives-a-partnership-approach.pdf

Disability Rights UK (2022). *'Under strain' – the real causes of the rise in working-age disability and incapacity benefits spending | Disability Rights UK*. [online] Available at: https://www.disabilityrightsuk.org/news/%E2%80%9Cunder-strain%E2%80%9D-%E2%80%93-real-causes-rise-working-age-disability-and-incapacity-benefits-spending?srsltid=AfmBOorVWqa9MLhya-GN6v7G3257mqkyjOh9qv7kWniqsSmD3P_e1pk_.

Department for Work and Pensions (DWP) (2025) Spring Statement, health and disability benefit reforms - Impacts (2025). Available at:

https://assets.publishing.service.gov.uk/media/67e667fe4a226ab6c41b1fe2/spring-statement-2025-health-and-disability-benefit-reforms-impacts.pdf.

DWP (2022). New package of support to help over 50s jobseekers back into work, 4 July 2022.
https://www.gov.uk/government/news/new-package-of-support-to-help-over-50s-jobseekers-back-into-work

Edwards, C. and Loughnane, C. (2024). 'Plenty of Disabled People Care': Revealing Reciprocity and Interdependence in Disabled People's Everyday Caregiving Practices. *Scandinavian Journal of Disability Research*, 26(1), pp.588–600. doi:https://doi.org/10.16993/sjdr.1182.

Evandrou, M., Falkingham, J., Qin, M., and Vlachantoni, A. (2024) Delivering '50 PLUS Choices' in the UK: how compatible are 'fuller working lives' with an increasing reliance on informal carers to deliver social care? *Journal of Social Policy*. https://doi.org/10.1017/S0047279424000357

Joseph Rowntree Foundation (2017). *How poverty affects people's decision-making processes | Joseph Rowntree Foundation*. [online] Available at: https://www.jrf.org.uk/savings-debt-and-assets/how-poverty-affects-peoples-decision-making-processes.

Keating, N., Fast, J.E., Lero, D.S., Lucas, S.J., & Eales, J. (2014). A taxonomy of the economic costs of family care to adults. *Journal of the Economics of Ageing,* 3, 11–20. https://doi.org/10.1016/j.jeoa.2014.03.002.

Morgan, F. (2018). The treatment of informal care-related risks as social risks: An analysis of the English care policy system. *Journal of Social Policy,* 47, 179–196. https://doi.org/10.1017/S0047279417000265.

Morgan, F. (2019). Understanding the complexity and implications of the English care policy system: A governance analysis approach. In Carmel, E. (ed), *Governance Analysis: Critical Enquiry at the Intersection of Society, Politics and Public Policy.* Cheltenham: Edward Elgar, 112–131.

Overton, L. & Watkins, M. (2025) Understanding the lived experience of unpaid caregiving and risks to financial wellbeing. [Manuscript submitted for publication]

Petrillo, M., Ibarra, D. V., Rahal, C., Zhang, Y., Pryce, G., & Bennett, M. R. (2024). Estimating the Cost of Informal Care with a Novel Two-Stage Approach to Individual Synthetic Control. *arXiv preprint arXiv:2411.10314*.

Petrillo, M., & Bennett, M. (2023). *Valuing Carers 2021*. [online] *carersuk.org*. London: Carers UK. Available at: https://employersforcarers.org/media/nvyjkmf3/valuing-carers-report.pdf.

Pickard, L., Brimblecombe, N., King, D., & Knapp, M. (2018). 'Replacement care' for working carers? A longitudinal study in England, 2013–15. *Social Policy & Administration*, 52(3), 690-709. https://doi.org/10.1111/spol.12345

Raiber, K., Visser, M., & Verbakel, E. (2022). The wage penalty for informal caregivers from a life course perspective. *Advances in Life Course Research*, 53, 100490. https://doi.org/10.1016/j.alcr.2022.100490

Shooshtari, S., Duncan, K.A., Roger, K., Fast, J., & Han, J. (2017) Care-related out-of-pocket spending and caregiving consequences: Results from a Canadian population-based study. *Journal of Family and Economic Issues* 38*,* 405–420. https://doi.org/10.1007/s10834-016-9516-1.

Thurley, D., Mackley, A., & McInnes, R. (2021). Increases in the state pension age for women born in the 1950s (briefing paper). House of Commons Library

Watkins, M., & Overton, L. (2024). The cost of caring: a scoping review of qualitative evidence on the financial wellbeing implications of unpaid care to older adults. *Ageing & Society*, 1-28. https://doi.org/10.1017/S0144686X24000382

Wyjadlowska, J., Beebee, M., Oakley, M., Tibbles., M. (2024). Poverty and financial hardship of unpaid carers in the UK A WPI Economics Report for Carers UK. [online] Available at: https://www.carersuk.org/media/dnxerxqv/poverty_financial_hardship_uk_web.pdf.

Zhang, Y., & Bennett, M. R. (2024). Insights Into Informal Caregivers' Well-being: A Longitudinal Analysis of Care Intensity, Care Location, and Care Relationship. *The Journals of Gerontology: Series B*, 79(2), gbad166. https://doi.org/10.1093/geronb/gbad166

Zhang, Y., Bennett, M. R. & Yeandle, S. (2021). Longitudinal analysis of local government spending on adult social care and carers' subjective wellbeing in England. *BMJ Open,* 11(12). https://doi.org/10.1136/bmjopen-2021-049652

Consultation Questions

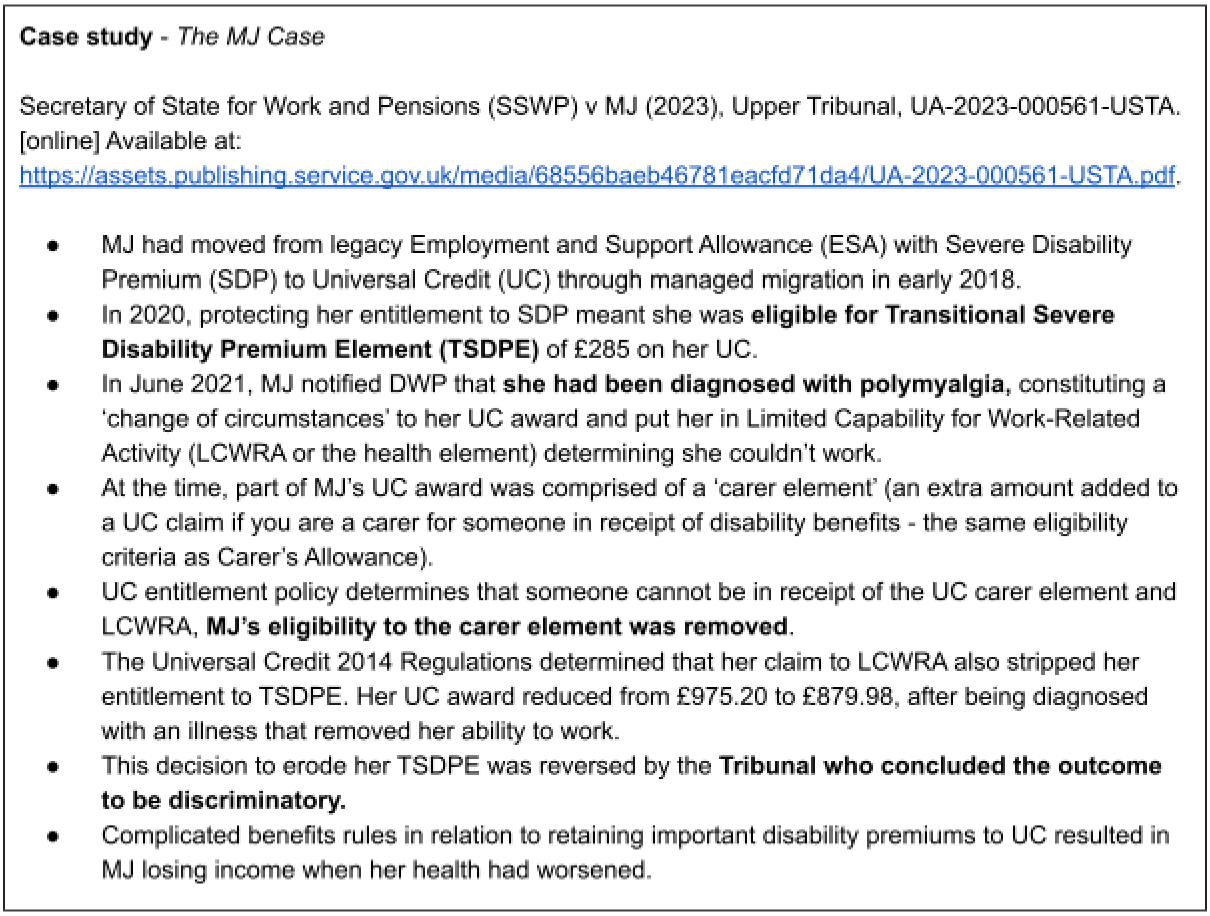
Chapter 2:

1.) What further steps could the Department for Work and Pensions take to make sure the benefit system supports people to try work without the worry that it may affect their benefit entitlement?

1.1 The current system penalises those with fluctuating health needs and does not recognise the value of unpaid care - both central to the lives of many disabled people. Evidence shows that fear of reassessment, sanctions, or income loss stops people from attempting flexible or part-time work (Garthwaite, 2013). Trying work should not place individuals at risk of destitution or increased scrutiny if their condition fluctuates or if they cannot sustain employment.

1.2 Rather than framing work as a binary (either "fit" or "unfit"), the system should support non-linear, episodic, and partial engagement with work or voluntary activity. This would involve:

a) **Removing fear of reapplication for UC**. Research by the Joseph Rowntree Foundation (Porter, 2024) found that disabled people are often reluctant to try work due to fear of being unable to return to benefits quickly if needed.
b) **Considering whether conditionality meets the needs of disabled people.** Disability Rights UK argues that conditionality undermines trust and discourages risk-taking with employment: conditionality rules in the Work Capability Assessment (WCA) will not conform to the rights of disabled people under the UN Convention (Nightingale Rights Initiative, 2023).
c) **Understanding how complicated benefit rules can inadvertently remove support.** The MJ case (see below) demonstrates that changes in benefit elements can inadvertently reduce overall support, discouraging disabled people caring for others from engaging in work-related activities due to financial insecurity (Nightingale Rights Initiative, 2023).



Case study - *The MJ Case*

Secretary of State for Work and Pensions (SSWP) v MJ (2023), Upper Tribunal, UA-2023-000561-USTA. [online] Available at: https://assets.publishing.service.gov.uk/media/68556baeb46781eacfd71da4/UA-2023-000561-USTA.pdf.

- MJ had moved from legacy Employment and Support Allowance (ESA) with Severe Disability Premium (SDP) to Universal Credit (UC) through managed migration in early 2018.
- In 2020, protecting her entitlement to SDP meant she was **eligible for Transitional Severe Disability Premium Element (TSDPE)** of £285 on her UC.
- In June 2021, MJ notified DWP that **she had been diagnosed with polymyalgia,** constituting a 'change of circumstances' to her UC award and put her in Limited Capability for Work-Related Activity (LCWRA or the health element) determining she couldn't work.
- At the time, part of MJ's UC award was comprised of a 'carer element' (an extra amount added to a UC claim if you are a carer for someone in receipt of disability benefits - the same eligibility criteria as Carer's Allowance).
- UC entitlement policy determines that someone cannot be in receipt of the UC carer element and LCWRA, **MJ's eligibility to the carer element was removed**.
- The Universal Credit 2014 Regulations determined that her claim to LCWRA also stripped her entitlement to TSDPE. Her UC award reduced from £975.20 to £879.98, after being diagnosed with an illness that removed her ability to work.
- This decision to erode her TSDPE was reversed by the **Tribunal who concluded the outcome to be discriminatory.**
- Complicated benefits rules in relation to retaining important disability premiums to UC resulted in MJ losing income when her health had worsened.

1.3 Recommendations, in reference to supporting people to try work without the fear of losing benefit:

1. **Implement 'return-to-safety' mechanisms to create flexibility in trying work** like a 12-month 'grace period' as supported by the Work and Pensions Select Committee (2022), enabling a return to benefits without a fresh WCA.
2. **Significantly increase or abolish the earnings limit for Carer's Allowance**. This would enable carers to choose to undertake more paid employment and / or employment at a higher wage rate, if they are able to balance this with their caring responsibilities.
3. **Review interactions between UC and disability premiums from migration.** Complicated eligibility criteria can mean there are unintended financial losses when claimants' circumstances change, as exemplified in the MJ case.

References

Carers UK (2022). *A snapshot of unpaid care in the UK State of Caring 2022*. Available at: https://www.carersuk.org/media/p4kblx5n/cukstateofcaring2022report.pdf.

Garthwaite, K. (2013). Fear of the Brown Envelope: Exploring Welfare Reform with Long-Term Sickness Benefits Recipients. *Social Policy & Administration*, 48(7), pp.782–798. doi:https://doi.org/10.1111/spol.12049.

House of Commons Work and Pensions Select Committee (2022). *Health assessments for benefits: Government response to Committee's Fifth Report of Session 2022–23 - Work and Pensions Committee*. Parliament.uk [online] Available at: https://publications.parliament.uk/pa/cm5803/cmselect/cmworpen/1558/report.html.

Nightingale Rights Initiative. (2023). Proposed Work Capability Assessment Changes Risk Leaving Disabled People Behind. Available at: https://nightingalerights.com/2023/10/01/proposed-work-capability-assessment-changes-risk-leaving-disabled-people-behind/#:~:text=This%20includes%20Article%2019%20which,and%20participation%20in%20the%20community%E2%80%A6%E2%80%9D&text=%E2%80%9Can%20adequate%20standard%20of%20living,be%20held%20against%20the%20Government.

Porter, I. (2024). *Unlocking benefits: Tackling barriers for disabled people wanting to work*. [online] Joseph Rowntree Foundation. Available at: https://www.jrf.org.uk/work/unlocking-benefits-tackling-barriers-for-disabled-people-wanting-to-work.

2.) What support do you think we could provide for those who will lose their Personal Independence Payment entitlement as a result of a new additional requirement to score at least 4 points on one daily living activity?

2.1 This proposal risks harming disabled people with complex needs who do not fit into neat assessment categories. PIP criteria already exclude many people with fluctuating or mental health conditions (Disability Benefits Consortium, 2023). Indeed, this proposed change risks entrenching further disablism[1] by assuming that disability and need can be neatly quantified through a single metric. Support needs are often relational, fluctuating, and cumulative, particularly when someone is also providing care to others.

2.2 Complex needs are poorly captured. Mind (Furber C.,2023) and the National Survivor User Network (NSUN, 2024) both highlight how mental distress and fluctuating impairments are poorly reflected in PIP descriptors.

2.3 It is deeply concerning to note that the loss of entitlement to PIP will impact some of the most financially vulnerable members of society - 60% of families who claiming both a disability benefit (including PIP) and Carer's Allowance (CA) already experience household deprivation (Source: Household Below Average Income Disability benefits received by Family and Carer's Allowance received by family - Department for Work and Pensions Stat X-Plore, 2025).

2.4 Research finds that carers often have to make difficult financial decisions due to low income, such as missing meals in order to save money (Carers UK, 2024). People who are disabled and have caring responsibilities are already at a high risk of having to sacrifice their basic needs to meet the costs of caring. Losing entitlement to PIP and CA could exacerbate their already precarious financial situation and their ability to meet their own needs; yet their caring responsibilities will remain.

2.5 Citizens Advice notes that over 50% of existing PIP claimants score less than four points across multiple activities; they estimate that 1.3 million existing claimants will not meet the new four point threshold (Citizens Advice, 2025). Citizens Advice notes that "it's not the case that someone who scores less than 4 points across multiple categories must have lower health-related and financial needs than someone who scores 4+ points in one activity. The cumulative impact of low scores across multiple activities often amounts to a level of need greater than the sum of its parts". These reforms risk further increasing deprivation among a large group of people who are already struggling.

---

[1] "Disablism relates to the oppressive practices of contemporary society that threaten to exclude, eradicate and neutralise those individuals, bodies, minds and community practices that fail to fit the capitalist imperative." Goodley, D. (2014). *Dis/ability studies: Theorising disablism and ableism*. New York: Routledge, Taylor & Francis Group, p12.

2.6 We strongly recommend that these changes are re-evaluated to understand the likely impact. This could be achieved by:

1. **Conducting impact modelling and qualitative research** to understand who is most at risk under the proposed change - particularly disabled and unpaid carers.
2. **Offering transitional protections**, including guaranteed temporary payments and automatic review rights, to prevent sudden income loss.
3. **Reforming assessment frameworks** to reflect holistic, relational needs rather than discrete tasks - particularly where these needs involve managing energy, mental distress, or shared care within a family.
4. **Including carers and disabled people in a dedicated consultation** before implementation, so as to understand the real-world implications of tightening eligibility criteria.

References

Carers UK (2024). *The impact of caring on: finances State of Caring 2024*. [online] Available at: https://www.carersuk.org/media/umaifzpq/cuk-state-of-caring-2024-finances-web.pdf.

Citizens Advice. (2025). *Pathways to Poverty: How planned cuts to disability benefits will impact the people we support*. [online] Available at: https://www.citizensadvice.org.uk/policy/publications/pathways-to-poverty-how-planned-cuts-to-disability-benefits-will-impact-the/#h-overall-impact.

Furber, C. (2023). *Reassessing assessments: How people with mental health problems can help fix the broken benefits system.* London: Mind. Available at: https://www.mind.org.uk/media/sjbptudq/reassessing-assessments-report.pdf

Goodley, D. (2014). *Dis/ability studies: Theorising disablism and ableism*. New York: Routledge, Taylor & Francis Group.

NSUN website. (2024). *PIP Archives - NSUN website*. Available at: https://www.nsun.org.uk/tag/pip/ [Accessed 3 Jun. 2025].

5. What practical steps could we take to improve our current approach to safeguarding people who use our services?

5.1 Safeguarding should focus on protecting the wellbeing of vulnerable people and preventing harm; it should not double as a coercive form of monitoring. Processes which ostensibly support claimants can often be experienced as imposing, punitive and unhelpful. DWP claimants have reported that work-related conditionality feels overbearing and often unreasonable considering the impact of their disabilities (Bennett, Currie and Podoletz, 2024; Geiger et al, 2025). Regular required attendance at work-related meetings and inflexible requirements to fill in online journals and meet work-related activity criteria meant that claimants felt pressure to comply but not to achieve meaningful outcomes (Wright and Dwyer, 2020). Evidence also shows that benefit claimants often experience DWP safeguarding mechanisms as opaque and punitive, especially when tied to work assessments or sanctions (Garthwaite, 2013). A relational approach would require cultural change at DWP and would centre these key principles:

a. **Trust**: Institutional harm can lead to a breakdown in trust. The UN Committee on the Rights of Persons with Disabilities (2016) concluded that UK welfare reforms had led to “grave or systematic violations” of disabled people’s rights. Safeguarding systems must be built with, not imposed upon, disabled people. Peer-led input into safeguarding design is essential.
b. **Transparency**: People need clear, accessible information about what safeguarding means in the context of benefits.
c. **Trauma-informed support**: Many disabled people have histories of violence, abuse, and neglect, including in institutional settings. Safeguarding policies must avoid damaging those who have been harmed by the very systems meant to protect them.

5.2 A reimagined safeguarding approach should recognise vulnerability as *produced by austerity, policy contradictions, and service withdrawal* (Barford and Gray, 2022; Bennett, Currie and Podoletz, 2024; Edmiston, 2024), not as a deficit in the individual.

5.3 Recommendations, for practical steps to improve safeguarding people who use DWP services include:

1. **Co-production of safeguarding policies** with a variety of disabled people and carers.

2. **Clear communication** about what safeguarding means in a DWP context.
3. **Introduce a statutory duty for DWP to safeguard vulnerable claimants.** We endorse recommendations made by the House of Commons Work and Pensions Select Committee to introduce a statutory duty for referring vulnerable claimants to support services. This will likely improve departmental cultural attitudes to safeguarding, ensure consistency of existing safeguarding measures and the coherency of DWP's approach to safeguarding, and create a stronger accountability framework (House of Commons Work and Pensions Select Committee, 2025)

References

Barford, A. and Gray, M. (2022). The tattered state: Falling through the social safety net. *Geoforum*, [online] 137(1), pp.115–125. doi:https://doi.org/10.1016/j.geoforum.2022.09.020.

Bennett, H., Currie, M. and Podoletz, L. (2024). Universal Credit: administrative burdens of automated welfare. *Journal of Social Policy*, [online] pp.1–19. doi:https://doi.org/10.1017/s0047279424000175.

Edmiston, D. (2024). Indentured: Benefit deductions, debt recovery and welfare disciplining. *Social Policy and Administration*. doi:https://doi.org/10.1111/spol.13021.

Garthwaite, K. (2013). Fear of the Brown Envelope: Exploring Welfare Reform with Long-Term Sickness Benefits Recipients. *Social Policy & Administration*, 48(7), pp.782–798. doi:https://doi.org/10.1111/spol.12049.

Geiger, B.B., Scullion, L., Edmiston, D., de Vries, R., Summers, K., Ingold, J. and Young, D. (2025). Benefits Conditionality in the United Kingdom: Is It Common, and Is It Perceived to Be Reasonable? *Social Policy & Administration*. doi:https://doi.org/10.1111/spol.13119.

Powell, A., Foster, D., Pyper, D., Loft, P., Harker, R., McInnes, R., Kennedy, S. and Wilson, W. (2020). The UN Convention on the Rights of Persons with Disabilities: UK implementation. *commonslibrary.parliament.uk*. [online] Available at: https://commonslibrary.parliament.uk/research-briefings/cbp-7367/

Work and Pensions Select Committee (2025). *Safeguarding Vulnerable Claimants.* House of Commons: London. [online]. Available at: https://committees.parliament.uk/publications/47840/documents/250688/default/.

Wright, S. and Dwyer, P. (2020). In-work Universal Credit: Claimant Experiences of Conditionality Mismatches and Counterproductive Benefit Sanctions. *Journal of Social Policy*, [online] 51(1), pp.1–19. doi:https://doi.org/10.1017/s0047279420000562.

Chapter 3:

Our new support offer

6. How should the support conversation be designed and delivered so that it is welcomed by individuals and is effective?

6.1 The "support conversation" must be **non-punitive, co-produced, and grounded in lived experience** (Negri and Cavanagh, 2023). It should not be a backdoor method of enforcing conditionality. A meaningful support conversation must be rooted in trust, co-production, and the real-life complexity of people's care arrangements and health fluctuations, paired with continuity of advisor in successive conversations (Negri and Cavanagh, 2023). The MJ case (see paragraph 1.2 for detail) highlights the importance of considering the interconnected nature of various benefit elements and the potential unintended consequences of changes (SSWP v MJ, 2023).

6.2 The MJ case exemplifies the scenario of someone who is disabled or in ill health while also caring. In this circumstance she was financially penalised for reporting her health condition and lost her Carer's Element entitlement (SSWP v MJ, 2023). To be disabled or to be in ill health is not mutually exclusive with having caring responsibilities. Census 2021 data states that 28.9% of family carers self-identify as disabled (ONS, 2021). The design and implementation of welfare benefits and support conversations must understand that disabled people are not only recipients of care, and recognise the reality of interdependent caring relationships (Gutland, 2023).

6.3 Charlie Grosset's PhD research on the experiences of disabled people caring for others highlights the deeply punitive culture of welfare assessments, so much so that some disabled people hide the care they provide to others in their PIP assessments due to fears that this will be used as evidence to deny the true extent of their disability (Grosset, 2025).

There is an urgent need to reflect on the ways in which welfare assessment encourages disabled people to hide their contribution as carers.

6.4 These fears arise from the recent increase in PIP appeals where entitlement has been denied on the grounds that disability is being exaggerated as the claimant has caring responsibilities. A recent upper-tier tribunal decision determined that DWP cannot put unreasonable weight on caring responsibilities when deciding PIP eligibility. In the case LM v Secretary of State for Work and Pensions (SSWP) a woman with a wide range of health issues (including chronic obstructive pulmonary disease, chronic bronchitis) who cared for her severely disabled husband and three year old daughter was given zero points in her PIP assessment (SSWP v LM, 2023). Support conversations must recognise that people can be both carers and disabled, one does not preclude the other.

6.4 Recommendations for design principles and considerations for delivery in support conversations include:

1. **Narrative-based approaches**: Allow individuals to tell their story in their own terms, including caring roles they provide or receive. The system should respond to people’s lived realities.
2. **Recognition of the interdependence of caring relationships**: Conversations should capture the complexities of both giving and needing care. Giving and receiving care is emotionally and physically demanding, shaping people’s capacity to engage with employment or training.
3. **Supportive framing**: Rather than centering "moving toward work", the conversation should focus on what a meaningful, sustainable life looks like for the person - including rest, care, community, non-work contributions as well as employment.
4. **Providing continuity:** This can be achieved through using the same adviser and involving peer support where possible.

References

Grosset, C. (2025). *Overview of Welfare Reforms*. [online] the Centre for Care. Available at: https://centreforcare.ac.uk/commentary/2025/04/overview-of-welfare-reforms.

Gulland, J. (2023). How does Carer’s Allowance in the UK construct family carers? History and recent developments. *International Journal of Care and Caring*, 8(1), pp.1–17. doi:https://doi.org/10.1332/239788221x16716339335353.

Office for National Statistics (ONS) (2021) UK Census 2021: Custom Dataset, All usual residents, Disability and Unpaid Care. Available at: https://www.ons.gov.uk/filters/a67f0064-cfa5-4378-8009-3cc6e1e0397d/dimensions/change

Nightingale Rights Initiative. (2023). *Proposed Work Capability Assessment Changes Risk Leaving Disabled People Behind*. [online] Available at: https://nightingalerights.com/2023/10/01/proposed-work-capability-assessment-changes-risk-leaving-disabled-people-behind/.

Negri, O., Cavanagh., H. (2023). *Making benefits work: Improving support for disabled people | Disability charity Scope UK*. [online] Available at: https://www.scope.org.uk/campaigns/making-benefits-work-report.

Secretary of State for Work and Pensions (SSWP) v LM (2023), Upper Tribunal, UA-2023-000634-PIP. [online] Available at: https://disabilityrights.org.uk/images/socialpolicy/UA-2003-000634%20-%20CA%20and%20PIP.pdf.

Secretary of State for Work and Pensions (SSWP) v MJ (2023), Upper Tribunal, UA-2023-000561-USTA. [online] Available at: https://assets.publishing.service.gov.uk/media/68556baeb46781eacfd71da4/UA-2023-000561-USTA.pdf.

Delaying payment of the health element of Universal Credit

11. Should we delay access to the health element of Universal Credit within the reformed system until someone is aged 22?

11.1 The framing of this question suggests that, for young people with health conditions or disabilities, the ‘financial incentive’ of the UC health element prevents them from engaging with work or moves them further from the labour market when they claim. There is no evidence presented to substantiate this. In order to support disabled young people into work, the Government must tackle the barriers they face in the labour market. Fundamentally, more needs to be done to ensure that more jobs are accessible to disabled people, and that they are not pushed into low paid and poor quality work which could ultimately worsen their health.

11.2 Research by the Joseph Rowntree Foundation (JRF) finds that the proposed changes to delaying UC health payment for this group will push under 25s with health conditions and disabilities into further hardship, as well as hampering efforts to encourage engagement with employment through the ‘Youth Guarantee’ (JRF, 2025). Further hardship is likely to exacerbate an existing lack of access to affordable housing, which combined with a broader lack of financial support worsens the cognitive strain of poverty, and therefore the ability to engage fully in employment support and training initiatives (JRF, 2025). Research has consistently shown that people living in lower socio-economic conditions are more likely to have a lower sense of self worth and lack belief in their skills or ability to learn (JRF, 2017).

11.3 Young people with health conditions and disabilities experience multiple barriers to entering the labour market. This is especially true for young people with learning disabilities, who are systematically excluded from employment opportunities (Hunter et al, 2019). In 2018 only 6% of adults with learning disabilities were in paid employment (Hunter et al, 2019). Since 2010, there have been various policy commitments to improve the prospect of employment for people with learning disabilities. However, take up of various programmes remains stubbornly low (Hunter et al, 2019):

- Under 5% of people using the Work Choice Programme (supporting disabled people into work) of 2010 had a learning disability. the service.
- Only 5.7% of the users of the Access to Work scheme have a learning disability.

Reports by the Driver Youth Trust identified barriers to employment for this group existing in a system of support that is badly coordinated and leaves many without support (Hunter et al, 2019).

11.4 A supportive, rather than financially punitive, approach is likely to garner better outcomes. A more helpful consultation question would be:

- *‘How can young people, from 16-24 with health conditions or disabilities be best supported to access and stay in employment that is fulfilling?’*

11.5 Considerations of the support needs for this group are essential, notably the reform and extension (both geographically and into employment) of Education Health and Care Plans (EHCPS) (Hunter et al, 2019). EHCPs are intended to support young people considered to have special educational needs and/or disabilities through education and provide a pathway to employment.

11.6 While a young person is in receipt of EHCPs they would expect to have ‘transition reviews’. Transition reviews of EHCPs assess the support needs recorded to ensure they are useful and reflect the individual. These are conducted when a young person with an EHCP moves between different stages of education and into adulthood. EHCPs need reform in order to meet these aims (Hunter et al, 2019) but they could be an effective vehicle for employment support, if used to engage with conversations about work at transition reviews and if it can be kept during the first year of employment (Hunter et al, 2019). Families and disabled young people often see the plan as a “golden ticket”, enabling them to advocate for their needs in a system that problematises disability; if this is appropriately utilised to access work it could reduce fear of engagement (Hunter et al, 2019).

11.7 Recommendations for how young disabled people can be better supported to enter or stay in employment include the following:

1. **Do not freeze payments of the UC health element for young people under 22.** For young people with health conditions and disabilities who crucially need this support, this cut would push them further into financial deprivation and potentially disincentivise future engagement with employment support.
2. **Embed employment into transition reviews.** Transition review guidance (NDTI, 2018) emphasises the importance of employment discussions. However, given the low rates of paid employment for adults with learning disabilities, this would suggest that the guidance is not being well implemented.
3. **Provide investment for local authorities to host supported internships[2].** Supported internships have been proven to be successful for moving young people into work, but the provision across local authorities is patchy, likely due

---

[2] “Supported internships are a structured, work-based study programme for 16- to 24-year-olds with SEND, who have an EHC plan. The core aim of a supported internship study programme is a substantial work placement, facilitated by the support of an expert job coach.”
Department for Education (2025) *Supported internships*. [online] Available at: https://www.gov.uk/government/publications/supported-internships-for-young-people-with-learning-difficulties/supported-internships.

to insufficient funding. Central government should increase funding for supported internships while local authorities should consistently encourage employers to offer this provision.

4. **Extend use of EHCPs into the first year of work.** Extending the use of EHCPs into the first year of work would tackle concerns by young people and parents that engaging with employment risks a loss of support. Families often see the EHCP as a “golden ticket” and fear that employment will break down in the first year while the EHCP is no longer in place; a perceived inability to obtain a new plan results in a lack of employment engagement.
5. **Invest in job coaching across the UK for young people.** Provision for job coaching across the country is disparate but more investment in this area would enable more young people to access support through their local authority. Local authorities should develop the role of job coaches according to the British Association of Supported Employment’s National Occupational Standards (BASE, 2025).

References

BASE (2025). *National Occupational Standards - The British Association of Supported Employment*. [online] Available at: https://www.base-uk.org/page/National-Occupational-Standards.

Hunter, J., Runswick‐Cole, K., Goodley, D. and Lawthom, R. (2019). Plans That Work: Improving Employment Outcomes for Young People with Learning Disabilities. *British Journal of Special Education*, 47(2). doi:https://doi.org/10.1111/1467-8578.12298. (2017).

Joseph Rowntree Foundation. (2017). *How poverty affects people’s decision-making processes | Joseph Rowntree Foundation*. [online] Available at: https://www.jrf.org.uk/savings-debt-and-assets/how-poverty-affects-peoples-decision-making-processes.

Joseph Rowntree Foundation. (2025). *Unlocking the potential of young people furthest from the labour market*. [online] Available at: https://www.jrf.org.uk/work/unlocking-the-potential-of-young-people-furthest-from-the-labour-market#_-how-get-britain-working-and-pathways-to-work-measure-up.

NDTI (National Development Team for Inclusion) (2018) *Preparing for Adulthood: approaches and strategies* [online] Available at www.nasen.org.uk.

Chapter 4:

15. What do you think the future role and design of Access to Work should be?

15.1 This question assumes that workplace adjustments in the form of Access to Work (AtW) as the sole means of employment support is the most appropriate way to facilitate people with disabilities and health conditions to enter the labour market and stay in work. We disagree with this assumption, as the evidence shows that alternative initiatives can also produce positive outcomes for different groups of people. The most effective approach would be to invest in multiple employment support initiatives.

15.2 AtW, when effectively provided, can be incredibly important to providing an inclusive workplace for people with health conditions and disabilities. Work by Dr Armineh Soorenian, exploring the everyday lives of disabled people, showed that people felt a sense of autonomy and their ability to take on further responsibilities at work was increased when physical adaptations were implemented to create a flexible work environment (Disability Unit, 2021). However, AtW is not universally implemented, with case studies suggesting that a lack of adjustments results in disabled people unable to maintain work and causing significant distress (Disability Unit, 2021).

15.3 AtW can provide help to pay for assistive equipment, Support Workers who may assist someone in at work and physical adaptations to the workplace (Access to Work, 2012). Without practical support in the form of AtW, workplaces may become more inaccessible for disabled people. A low take up of AtW means many disabled people often feel work is not willing to make physical adaptations (Disability Unit, 2021), equally research suggests the effectiveness of AtW outweighs the cost of implementation (Elmore, Windett and James, 2024).

15.4 Despite its value if implemented as intended, language used within the Green Paper could indicate further cuts to the AtW scheme - such as mention of a huge surge in claims and whether businesses are better placed to provide the support more directly (Hadi, 2025; Pring, 2025).

15.5 Research shows that alternative employment initiatives, such as Supported Employment[3], also have a high success rate in enabling people with disabilities to not only enter the workforce but to find fulfilling employment (Baxter et al, 2024). Using Supported Employment to find the right employment can improve individuals' outlook on life, and improve their skills and confidence (Baxter et al, 2024). Long term positive impacts can also be observed in relation to health, financial security and a sense of social belonging (Baxter et al, 2024).

15.6 While AtW is mostly successful for disabled people, people with learning disabilities make up only 5.7% of users on the scheme (Hunter et al, 2019). Research has found that Supported Employment has the potential to be effective employment support for a wide range of people with health conditions and disabilities (Hunter et al, 2019). Its focus on positive relationships with advisors for the clients and the wellbeing for all clients as well as finding well matched employment fosters a person-centred experience.

15.7 It must be considered that, while funding and improvement of AtW is important, implementing a wide range of employment support options would likely be the most supportive way to help all disabled people find fulfilling work.

15.8 We believe there are two key questions that the Government should consider in order to meet the aim of supporting more disabled people into work:

- *How can Access to Work be improved in order to support people with health conditions to engage with work that is empowering and sustainable?*
- *What other methods of employment support are effective in supporting disabled people in/into work that is fulfilling? How can we facilitate their success?*

15.9 Our recommendations for Access to Work and progressing the effectiveness of Supported Employment are as follows:

---

[3] Supported Employment is holistic, fidelity-based employment support for people with health conditions and disabilities. The principles of Supported Employment are to place an individual in employment to then train them in their workplace on the open job market through rapid job search, considering where is the most appropriate workplace for them while supporting their needs at work. This is in contrast to existing models of train-then-place before job searching and considers volunteering and/or sheltered employment as a success.

1. **Ensure the Access to Work scheme is supported, not depleted.** Access to Work is a successful scheme when consistently applied. Employers should be encouraged to implement the scheme and increased funding would likely facilitate its success.
2. **Invest in Supported Employment programmes** beyond those with severe mental health conditions. NIHR-funded research shows that Supported Employment has the potential to be successful for a wide range of people with health conditions and disabilities.
3. **Use the evidence base to improve Supported Employment services.** Katherine Runswick-Cole and colleagues have done extensive research into the ways that Supported Employment services could be improved (Runswick-Cole et al, 2019), and argue for:
    a. Adequate resourcing and low caseloads. Low caseloads for the delivery of the Supported Employment programme will likely improve performance.
    b. Ensuring frontline employment specialists have the right values, skills and commitment to deliver the programme, to foster trusted relationships between clients and the specialists.
    c. Emphasising the “importance of values and the links between fidelity and values” (Runswick-Cole et al, 2019, pp7).
    d. Securing employer engagement consistently, implementing an employment engagement and support spectrum - understanding the implications for clients and employers who sit in different places on that spectrum.

References

Access to Work (2012). *Get Support in Work If You Have a Disability or Health Condition (Access to Work)*. [online] GOV.UK. Available at: https://www.gov.uk/access-to-work.

Baxter, S., Cullingworth, J., Whitworth, A., Runswick-Cole, K. and Clowes, M. (2024). Understanding interventions and outcomes in supported employment and individual placement support: A qualitative evidence synthesis. Disability and health journal, 17(2), pp.101579–101579. doi:https://doi.org/10.1016/j.dhjo.2024.101579.

Disability Unit (2021). *Exploring the everyday lives of disabled people*. [online] GOV.UK. Available at:

https://www.gov.uk/government/publications/exploring-the-everyday-lives-of-disabled-people/exploring-the-everyday-lives-of-disabled-people#references.

Elmore, J., Windett, S. and James, K. (2024). *Learning and Work Institute What support helps disabled people and people with health conditions move into sustainable work?* [online] Available at: https://learningandwork.org.uk/wp-content/uploads/2024/10/506DEF-00_Supporting-people-with-LTHCs-and-disabled-people-into-sustainable-work.pdf.

Hadi, F., (2025). *How does limiting the Access to Work Scheme get more Disabled people into work? | Disability Rights UK*. [online] Available at: https://www.disabilityrightsuk.org/news/how-does-limiting-access-work-scheme-get-more-disabled-people-work?srsltid=AfmBOopR8n9cAGT8C02dkmQYKF58azb8gsqkCEMA7gwzhUbTwdqpjb9Z.

Hunter, J., Runswick-Cole, K., Goodley, D. and Lawthom, R. (2019). Plans That Work: Improving Employment Outcomes for Young People with Learning Disabilities. *British Journal of Special Education*, 47(2). doi:https://doi.org/10.1111/1467-8578.12298. (2017).

Joseph Rowntree Foundation. (2017). *How poverty affects people's decision-making processes | Joseph Rowntree Foundation*. [online] Available at: https://www.jrf.org.uk/savings-debt-and-assets/how-poverty-affects-peoples-decision-making-processes.

Pring, J. (2025). *Second wave of cuts could lead to 'decimation' of Access to Work scheme, but DWP refuses to comment*. [online] Disability News Service. Available at: https://www.disabilitynewsservice.com/second-wave-of-cuts-could-lead-to-decimation-of-access-to-work-scheme-but-dwp-refuses-to-comment/.

Runswick-Cole, K., Baxter, S., Brennan, A., Astley, E., Ferguson, A., Farnsworth, V., Self, S., Spencer, A. and Baillie, S. (2025). *NIHR Final report Project title: Supported Employment beyond severe mental health NIHR Policy Research Programme (PRP) grant number NIHR202996*. [online] Available at: https://www.ipsbeyondsmi.org/_files/ugd/6f5158_b58173cba1854b5494a32bf5775ae022.pdf
.