

FIRST WAVE FINDINGS: Disability and conditionality

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The recent introduction of conditionality and the application of stricter capacity tests for people with impairments are linked to an ongoing redrawing of the 'disability' category and a wider reconfiguration of the rights and responsibilities of disabled people in relation to work and welfare. This briefing paper presents findings from our research undertaken to date, based on interviews and focus groups with policy stakeholders and practitioners plus interviews with 58 disabled people (welfare service users).



Key points

- The introduction of Employment and Support Allowance (ESA) has enabled increased discretion by professionals while simultaneously introducing behavioural conditionality and stricter impairment tests.
- Many respondents with mental health issues think that their impairments are not taken seriously and that responses to their situations are often inappropriate.
- The Work Capability Assessment (WCA) process was widely condemned. At best it was seen as inappropriately conducted, at worst unfit for purpose.
- Although many disabled service users are critical of the quality of the support offered by Jobcentres and Work Programme providers there are some limited examples of good practice.
- The use of benefit sanctions for those with impairments is viewed as inappropriate and unfair.
- In principle most disabled respondents support the notion that able bodied people in receipt of unemployment benefits should be expected to actively seek work.
- The extension of behavioural conditionality to disabled claimants is more contentious.

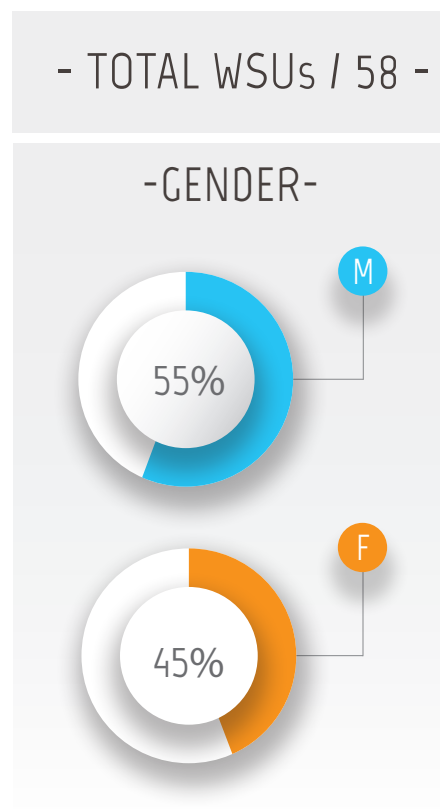
ESA: a personalised approach?

The Welfare Reform Act 2007 ended Income Support (paid on grounds of disability) and Severe Disablement Allowance, and replaced them with ESA. Significantly, ESA extended behavioural conditionality to incapacity benefits for the first time. Following a Work Capability Assessment (see below) those identified as having severe impairments and ‘limited capability for work-related activity’ are placed in the Support Group and have unconditional access to ESA at an enhanced rate. Others are placed in the Work-Related Activity Group (WRAG). Benefit for this group is paid at a lower rate than in the Support Group but is higher than Jobseekers’ Allowance (JSA). WRAG members are required to engage in work-related activities (such as job search, interviews with personal advisers or participation in work preparation /experience schemes) and are subject to benefit sanctions for non-compliance. Individuals found ‘fit for work’ are moved on to JSA or Universal Credit and subject to full conditionality.

The recent introduction of conditionality and the application of stricter capacity tests for people with impairments are linked to an ongoing redrawing of the ‘disability’ category and a wider reconfiguration of the rights and responsibilities of disabled people in relation to work and welfare.

Critics of this process have argued that by focusing on personal capabilities to work, current policy reinforces an individual deficit model of disability that deflects attention from the socially constructed barriers and the problems beyond personal impairments (such as disabling environments and discriminatory attitudes) that many disabled people face when looking for work. These concerns featured strongly in respondents’ accounts which often stressed a perceived shift towards a more punitive turn in incapacity benefit reform.

“ It was about breaking down the barriers to work, and that was about putting in place tailored programmes... I think what



has happened in the last three years... is such a raft of changes which have been quite punitive... Disabled people now, instead of feeling that they are on a journey being supported into employment, feel that they are being forced into employment, and conditionality is one of the elements of that. ”

(PS4, Former government minister)

“ There should be a drive towards supporting people, disabled people, into work. The pendulum has swung too far in terms of the sanctions and the punitive element of it. ”

(FG10, disability, England)

The more personalised and flexible approach of the Personalisation Pathfinders (piloted by the DWP in 2015 with disabled claimants in locations beyond our fieldwork sites) did not feature prominently in many respondents’ experiences of WCAs. Nor did it feature strongly in their interactions with Jobcentre or Work Programme providers (see further discussions in sections

below). However, some did voice concerns about the rigid interpretation and application of requirements that failed to take into account personal needs or the episodic nature of some conditions.

“ I need work that will fit around me, rather than me fit round it. I think you know, I need rest periods and I need times when I’m not able to do something. Then there are times when I am. Whereas with the average work at the moment it’s nine till five. You know that’s the standard business hours and like it or lump it. You know if you can’t fit round that then tough. ”

(WSU, disabled woman, Scotland)

“ The people who make decisions about their benefits have no understanding of what people are going through... People now need to stop being counted as blocks. They need to be counted as individuals. ”

(WSU, disabled man, England)

Disabled respondents related receiving variable, and at times inappropriate, service from staff involved in delivering benefits or training, dependent on the individual who was directly dealing with them. A majority had experienced what they perceived as poor treatment by Jobcentre staff at one time or another.

“ I got a young man who I’d never seen, who was really rude, and I did not like his attitude. I never complained about it at the time because I wasn’t capable of doing it. ”

(WSU, disabled woman, Scotland)

A practitioner with experience of supporting disabled people referred to the Work Programme similarly suggested certain Jobcentre staff had a reputation for being harsh and vindictive to clients.

“ Some of the Jobcentre advisers can be

exceptionally ruthless. They sit in their ivory towers and sort of look down on somebody... you know which adviser... You’re thinking, ‘It wasn’t so and so, was it, by any chance, in [location]?’ ‘Yes.’ Certain people get certain names, you know who they are. ”

(FG15, disability, England)

Because of the relative invisibility of much mental illness, respondents with mental health impairments making a claim for ESA felt that they were more likely to have their impairments disregarded.

“ It’s all very much based on physical stuff, and they don’t take into account the emotional and the mental stuff... It’s, you know, really difficult to actually explain... Just because I can look somebody in the eye, and just because I can speak clearly enough doesn’t mean to say that I’m not depressed and not upset. ”

(WSU, disabled woman, England)

“ If they look at you and they think you look all right, they don’t look at your mental health because it’s not something you can see. They only look at the physical thing. ”

(WSU, disabled man, England)

The inappropriateness of requiring those in the WRAG with mental health issues to attend training and/or undertake work search or job preparation interviews under threat of benefit sanctions was also a noted issue.

“ If people are suffering from depression and anxiety or whatever, if you’re saying, ‘You must spend seven hours a day looking for work,’ that’s just not going to be reasonable for them. It’s going to add to their mental health problems. ”

(WSU, disabled man, Scotland)

“ Expecting people to attend and to go to work clubs or whatever, they may have a good day, they may have a bad day and work would not tolerate that. So some people may not be able to hold down a job because of their illness and their varying moods... physical conditions as well. ”

(FG21, disability, England)

The issues highlighted above are illustrative of the outcomes likely to ensue within a disability benefit system that enables increased discretion on the part of individual staff whilst, simultaneously, introducing behavioural conditionality and stricter impairment tests.

Work Capability Assessments

The WCA is designed to focus on an individual's capabilities rather than incapacities. It is administered by private contractors and is

the key tool used to judge a claimant's level of impairment. It provides the basis on which they are placed in the Support Group or WRAG of ESA, or found to be 'fit for work' and transferred to JSA. Respondents were overwhelmingly critical of the WCA process. Common concerns related to the appropriateness and focus of the questions asked and the tests used, and a lack of empathy in their implementation.

“ When you go for a medical you could be there for five minutes and all they do is ask you can you touch your toes. They lay you down on this bed so you can touch your toes and bend your knees and all that... Next thing they write back to you saying you didn't pass. You're supposed to get points. The points go up to 100. I didn't get any. ”

(WSU, disabled man, England)

“ There didn't seem to be any comprehension of what having particular disabilities is like, or how that experience feels on the inside, or the fact that you might actually be trying to be compliant. ”

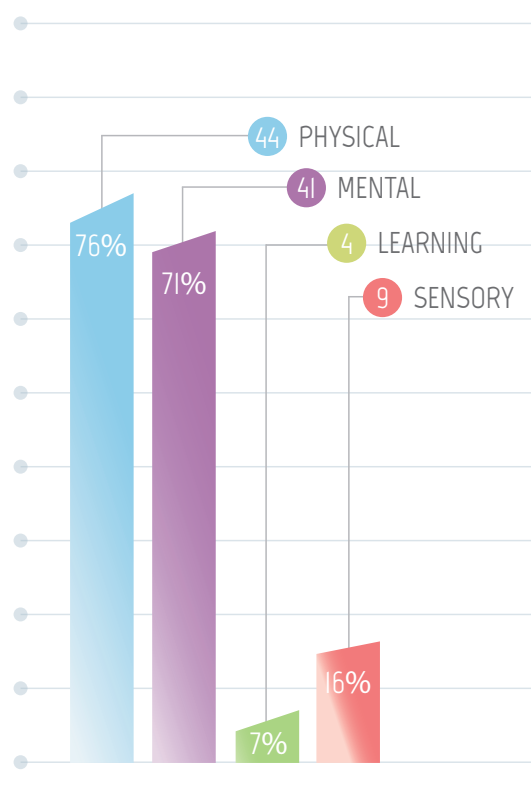
(WSU, disabled woman, Scotland)

“ They tell me to pick a pen up. So you pick a pen up, give it to them and I got angry. I said, 'What do you want? My leg chopped off and I'll deliver it to you?' ”

(WSU, disabled man, England)

Many disabled respondents voiced strong dissatisfaction with the points they were awarded or the outcome of their WCA and assessors' judgment about their ability to prepare for, or undertake, paid employment. Several also reported inaccuracies in how the information they had relayed to assessors was recorded and subsequently reported. Concerns about the processes and outcomes of WCAs were similarly raised by a number of policy stakeholders (PSs 4, 6, 10, 12) and focus group participants, with some

-REPORTED IMPAIRMENT TYPE-



questioning whether the current system was fit for purpose. That view is perhaps corroborated by evidence available elsewhere, detailing the number of initial WCA decisions that are successfully overturned on subsequent appeal; something that occurred for the first respondent cited below.

“ They went through the medical and were not interested in any of my medical problems. The one thing they asked me was how I got to the medical. I said, ‘Well I got the bus to [location], walked down [place], got the bus down to here and walked from the bus stop.’ Next thing I know I get a letter through saying that I’m on suspension because I do meet the criteria of work. The argument that they had was because I’d walked from the bus stop I was able to work. When it went in front of the judge, the judge didn’t even bother with it. He said, ‘This is absurd.’ He just wrote everything off there. But then for a further six months I wasn’t in receipt of the DLA component because the ESA people failed to inform the other people that I’d won my appeal. ”

(WSU, disabled man, England)

“ [The WCA] Disastrous. It’s discredited. There’s a very high success rate among people who appeal decisions. There’s a great deal of concern about it ... from the point of view of the process and the point of view of the quality of decisions and despite four independent reviews of it, those concerns really haven’t gone away. ”

(PS6, Labour MP)

For some, the WCA exacerbated the illnesses and impairments for which they were being assessed.

“ It was just horrific... I sort of went into a like a panic attack... It’s happened a

few times down the line, because you know this is just the beginning of it, but I’ve developed panic attacks and anxiety attacks, because the whole thing [WCA]. ”

(WSU, disabled woman, England)

“ At the end of it [husband] had been planning to go back to work and I was simply going to get a taxi home. And he said, ‘I can’t, you’re in such a state I can’t...’ he cancelled his - and came, took me back and put me to bed for the day. I was in such pain, psychologically, spiritually even I suppose, and physically that he put me to bed for the day and worked at home for the next couple of days. ”

(WSU, disabled woman, Scotland)

This was especially the case for those with mental health issues who believed that their impairments were either not understood or not taken seriously. WCAs were often described as distressing and debilitating.

“ They’re not understanding... they ask you a lot of questions though and they open up a lot of wounds. I’ve always left in tears and heartbroken, really sobbing, and they’re not interested in making sure you’re all right or anything. ”

(WSU, disabled woman, England)

“ The depression was much more disabling than any physical illness I’ve had. I think I was two years out of hospital after a suicide attempt, went to the medical and they still managed to score me zero points. ”

(WSU, disabled man, Scotland)

Others spoke of how, when faced with medical assessments, they felt pressured to answer

questions and present themselves in a more positive light than the reality of their situations. Some reflected on how the process forced them into a demoralising reflection on the progressive nature of their impairments and uncertain futures.

“ When you put people into that situation with those parameters around it, they’ve got a lot riding on it, they’re worried about their situation and they perform. They perform better than they actually live. ”

(WSU, disabled woman, Scotland)

“ In your head you should be able to do it, so you’re answering in that way rather than what you’re actually capable of... and then you start getting upset or stressed or really annoyed with yourself because you feel that you’re not answering their questions. ”

(WSU, disabled woman, Scotland)

“ Because most of the time I get through having had this for 40-odd years by ignoring it and pretending I’m just like everybody else and you can’t do that if you’re having to go through every single part of your day and think about the difficulties. It also makes you think about the future and how it’s a progressive disease which is hugely depressing. ”

(WSU, disabled woman, Scotland)

Support

Disabled respondents reported variable quality and satisfaction with the support they received from Jobcentres and Work Programme providers. The most common view was that practical support into work was limited. Several spoke of being treated like ‘a number’ and felt that the prevalent ‘one-size fits all’ approach to supporting disabled people into work was inappropriate. Many

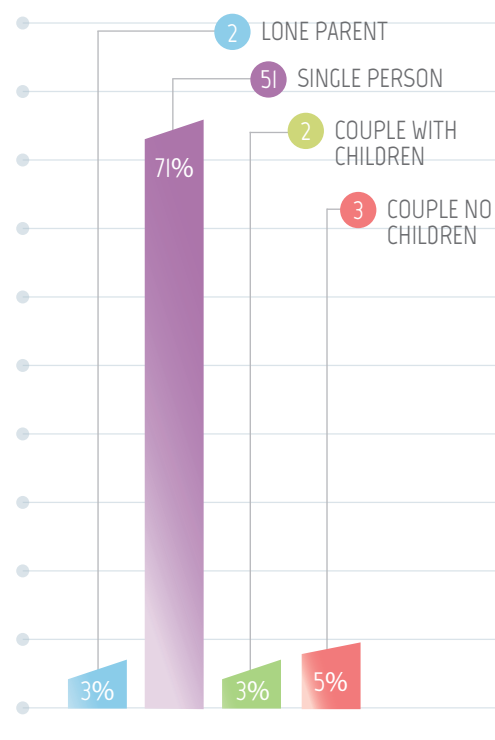
interactions with staff were characterised as being ‘tick box’ exercises where individuals were told what to do and expected to get on with it, or suffer the consequences of non-compliance.

“ Never been a two-way process, it’s always been this is what’s going to happen, this is how you have to behave, this is what needs to get done and if you don’t, we threaten you with this. ”

(WSU, disabled man, Scotland)

Allied to these critiques was a concern among policy stakeholders and disabled respondents about the way in which information was communicated to disabled people by agencies involved in training and benefit delivery. Typically respondents wanted more timely and precise information about why sanctioning decisions or judgements to allocate them to a particular ESA grouping had been made and how these would affect their benefits. Several reported being unaware that they had been subject to a benefit sanction until they tried to get money at an

-HOUSEHOLD TYPE-



ATM and found that their benefits had not been paid. Commonly, respondents were also critical about the limited availability and type of training opportunities. Courses were described as too basic and often too short in duration, and thus unlikely to offer meaningful enhancement of skills. Some in the WRAG group also said that they felt they were being ‘pushed’ into training or work that was not appropriate to their individual capabilities.

“ I’ve been to a couple of their workshops but they were very basic and I just don’t find them very helpful. ”

(WSU, disabled man, Scotland)

“ I feel she’s like pushing me into things that I’m not ready to do for health reasons... she just said, ‘Oh you’re putting up barriers.’ I said, ‘I’m not, I’m just trying to make you understand what I am capable of doing.’ ”

(WSU, disabled woman, England)

Nonetheless, some respondents described more positive experiences and several said that once staff properly appreciated their situation, appropriate support and advice had been offered in a sensitive manner. For example:

“ She was lovely, very nice. She told me about all the training options... she understood exactly what I wanted... She gave me choices. ”

(WSU, disabled man, England)

Such support often emerged after quite negative initial experiences of attempts to cajole or compel people into work that had either been unsuccessful or had on occasions triggered adverse reactions in disabled respondents. A disabled man in the ESA Support Group, with a history of homelessness and mental health issues, spoke enthusiastically about the support he received from his local Jobcentre. However,

previously he had suffered major panic attacks, triggered by the inappropriate location and stress of appeals to overturn prior decisions that he was fit for work and ineligible for ESA.

“ I’ve learnt most of what I know through people from the Jobcentre because I’m willing to sit there and discuss my options... that’s the other thing, if you see the same person, because I see the disability welfare officer up in [location]. If you see the same person you get to know them, they get to know you. It becomes easier to discuss things. It becomes easier to talk to that person... Brilliant because the worker that I’ve worked with will come outside and sit on a bench outside with me so that my claustrophobia isn’t really causing a problem. ”

(WSU, disabled man, England)

Likewise, another woman stated:

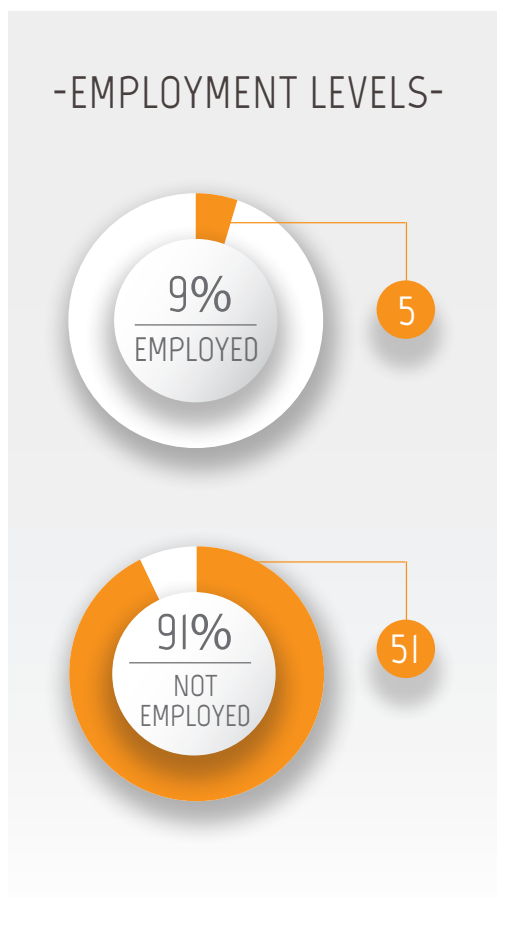
“ I heard about disability employment advisers [DEAs], and that was my lifeline... there should be more DEA officers... since more people with disabilities are being forced to find work. ”

(WSU, disabled woman, Scotland)

The planned roll out of the proposed Unipod system of support under Universal Credit will see the end of DEAs. It should be noted that DEAs were seen by the disabled respondents who spoke positively about their experiences as an important source of support.

For many, allocation to the Support Group was a welcome relief from the fear of sanctions that initial placement in the WRAG group clearly produced. Conversely, a number of those placed in the Support Group complained of being abandoned and (ironically) left without support.

“ All they do is give people ESA and leave them to it. What about the actual real



support that they want to get back into work? What about skills? I just think they could do so much more. ”

(WSU, disabled man, England)

“ When you get put into that category that’s it. You’re put in a corner and forgotten about... I’ve got a disability and therefore I’m good for nothing. ”

(WSU, disabled woman, Scotland)

Disabled respondents clearly valued the unconditional assistance they were able to receive through a range of other sources. Family, friends, support groups, advice services, drug and alcohol services and homelessness centres were all

variously cited as important avenues of emotional, practical and legal support.

“ It took a lot of weight off my shoulders with having [external support agency] writing letters and corresponding with [the Jobcentre]. ”

(WSU, disabled woman, England)

“ If it weren’t for my family, I would have been in a worse state. You know, if I hadn’t got that support. ”

(WSU, disabled woman, England)

Sanctions

21 disabled respondents had experienced benefit sanctions, either when in receipt of ESA or previously when claiming JSA. Sanctions were applied for a variety of reasons including missing required appointments and medical assessments. Those who had been sanctioned reported being unable to attend appointments due to ill health, or being unaware of appointments. The latter could be due to poor communication (including letters going missing in the post) or not fully understanding the behavioural requirements attached to benefit receipt. Accordingly, they were unanimous in stating that their loss of benefit was inappropriate. Key informants also questioned the of acceptability of applying sanctions to those on incapacity benefits, especially those they considered unable to work or not ready to re-enter the labour market due to ongoing impairments. Several people successfully appealed their sanction and reported initial decisions being overturned at tribunals; nonetheless, a lingering resentment and sense of injustice often ensued.

“ They’ve given me it back... but it’s not a point of them paying it back. It’s just a point of them taking it in the first place. ”

(WSU, disabled man, England)

Disabled respondents made clear and repeated references to the negative impacts of benefit sanctions on both their financial ability to meet their needs and also their physical and mental health. They described the adverse and lasting impact that sanctions had on their day-to-day lives.

“ It had a massive impact on my mental health, physical; obviously I had to go to food banks, stuff like that... having to go to food banks and stuff like that and relying on friends doesn't make you feel very good about yourself, doesn't make you feel very, I don't know - I can remember distinctly how I felt actually. I felt like a piece of shit. ”

(WSU, disabled woman, England)

“ Well, it put me in debt! So, it depressed me. I never ate so many beans and pasta in my life... that's when I went £500 in arrears with my rent. ”

(WSU, disabled man, Scotland)

Although not a typical case, one female respondent detailed the extreme negative effects that loss of benefit triggered in her particular case.

“ A missed appointment, they said. They put me under the sanction... I was on zero income. Zero Housing Benefit, zero Council Tax Benefit. Towards the end I put in a nil income form, which activated my Housing Benefit temporarily. But I think once I had nil income for four and a half months... I turned to prostitution. It was the most horrific time of my life. I got raped. I got raped. I got [hesitates] beaten up, raped and bugged, trying to [hesitates] earn money via prostitution. I was working with [two support organisations]. They were liaising with the benefits as well. It made no difference. ”

(WSU, disabled woman, England)

Unable to buy suitable food, a respondent with a serious condition had lost two stone in weight, prompting unease among medical staff about his weight loss and its deleterious impact on the effectiveness of prescribed medication.

“ [The hospital] were saying, ‘You've lost weight.’ I said, ‘Well I can't eat. I've got no food, I've got no money.’ ”

(WSU, disabled man, England)

No respondents reported the application of sanctions as triggering a search for work or having a positive impact on their situation. Anxiety and hardship appear to have been the only palpable outcomes.

Disability, conditionality and behaviour change

Disabled respondents, policy stakeholders and practitioners were generally of the opinion that applying behavioural conditionality pushed people away from available support and led to disengagement from the benefit system; sometime with grave consequences.

“ No. I never really bother with them. It's like if you're being horrible to me and messing me around with my benefits and all this stuff I'm not going to come and do anything for you kind of thing, you know what I mean? You're not interested in that. You're just interested in surviving. ”

(WSU, disabled man, England)

“ I think unintended outcomes are that people engage even less. That people disappear from the welfare system and we actually don't know what the quality or the nature of their lives are, whether people are forced to engage in the informal economy and illegal or criminal activities or whether people sink into depression,

anxiety, stress, mental health conditions and then use those services more.”

(PS12, Policy and communications manager, UK disability organisation)

In contrast to this dominant view a smaller number of respondents spoke of conditionality making compliant behaviour more likely. Interestingly, on occasions this was seen as promoting dependency rather than alleviating it. Fearful of the consequences of non-compliance, those disabled people capable of meeting the demands placed upon them tended to make sure they did as instructed in order to avoid sanctions.

“ I think it does change your behaviour because you’ve become dependent on the benefit because of the situation you’re in. So you are a little bit more scared that if you don’t do what they say, they’re going to stop your money.”

(WSU, disabled man, England)

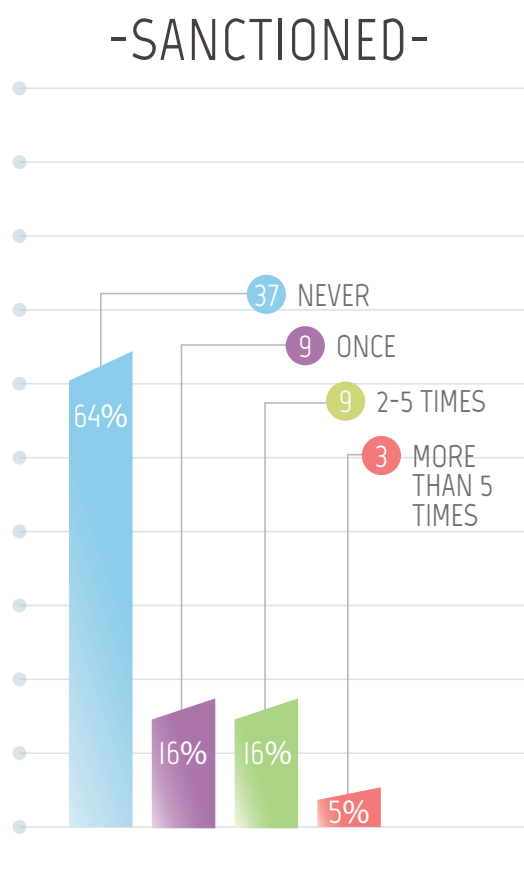
Evidence of conditionality working to move disabled people nearer to the paid labour market was rare but not entirely absent from the data. One respondent with multiple needs who had been on ESA and JSA intermittently spoke positively about her participation on the Work Programme, once she had become reconciled that it may be in her best interests to engage. She had recently been offered a job in retail.

“ I got past a year and three, four months I started knowing what to look for, what to do. I think confidence kicked in then, or maybe I had become more reconciled to the fact that this was what I was doing. I don’t know, but something changed, and it was psychological; something shifted. So I started making my own changes on my own CV, I started writing my own cover letters instead of waiting for somebody to do it for me ... But without [Work Programme’s] help. Because to be quite

honest with you, if I was doing this at home I would have been in one hell of a mess.”

(WSU, disabled woman, Scotland)

A practitioner in a focus group who supported people with long-term addiction issues also believed that making benefit receipt conditional on compulsory engagement with work programmes could lead to positive behaviour changes in some cases. She cited an example of a client with long term drug addiction issues who was very reluctantly ‘nudged’ into doing unpaid Mandatory Work Activity. Despite his initial strong opposition and fear, he subsequently found full time work and a ‘purpose in life’ (FG10, disability, England). Supporters of conditional welfare systems could argue that the threat of sanction acted to compel engagement in the first instance. However, the evidence suggests that the common thread that linked these two stories of successful transitions into work was not so much the



threat or experience of loss of benefit, but the availability of appropriate individual support.

Ethics

In the past, questions about unemployed disabled people claiming social security benefits and whether or not they chose to work were perceived as being of limited relevance. This was because disabled people's 'inability' to work was seen as being linked to their individual incapacities to undertake paid employment. Such views have been identified as disabling by many disabled people and their allies. These views are seen as deeply problematic and may reflect wider ideas about disabled people being a 'deserving' case for largely unconditional collective support on grounds of sympathy. Today there is increasing recognition of how disabling environments and attitudes exclude many disabled people from meaningful engagement with the paid labour market. That said, politicians have recently looked to extend behavioural requirements to many of those receiving ESA and questions have been asked about whether many previously regarded as having a legitimate claim to incapacity benefits are 'shirking' their wider responsibility to contribute to society. Disabled respondents were

acutely aware of a wider societal shift in how they were perceived.

“ Because there's this feeling in the country isn't there that everyone on disability benefits is defrauding the system... I speak to people all the time and I know that there are, but I'm not. ”
(WSU, disabled man, England)

The majority of disabled respondents endorsed the principle that citizens, when and if they are able to work, should be expected to rather than rely on social benefits. A typical view was:

“ I think so, yes, yes. I wouldn't just have expected to get benefits just to do nothing, like some people. There are some people in this world that just think I'm just going to get my money put in the bank and I just don't give a thing about getting a job, yes, because I'm getting the money for nothing basically. I don't think that's the right attitude because obviously you've got to do something haven't you? ”
(WSU, disabled man, England)

The extension of behavioural conditionality to disabled people was more contentious. A small minority was vehemently opposed and the wider application of conditionality across the benefits system was seen as an unjust and totally inappropriate attack on the most vulnerable in society.

“ Under international law, [it's] a crime against humanity... They are treating the sick and disabled people and the unemployed more penal than they are the rest of society... It is a government policy that is designed to really penalise and hurt those that are so vulnerable they can't fight back. ”
(WSU, disabled woman, England)

-KEY-

PS refers to policy stakeholder
FG refers to focus group
WSU refers to welfare service user

However, two narratives dominated disabled respondents' thinking about the ethicality of conditionality in respect disabled people's rights to welfare. First, there was a strong sense that any job search, labour market preparation or work experience requirements demanded of disabled claimants had to be specifically and realistically tailored to each individual's individual particular situation and capabilities.

“ There’s certain people who abuse the system and certain people who are in need of help. I think there should be more discernment in the way the system operates. It’s like a machine, isn’t it? There’s no humanity left in it or nothing. ”
(WSU, disabled man, England)

Second, and more negatively, many disabled people looked to endorse the legitimacy of their own claim to welfare as ‘disabled people’ by undermining the claims of others who they saw as either able-bodied ‘scroungers’ or people whose situation was a result of their own irresponsible behaviour. For example:

“ They need to knock out the alcoholics, the drug takers, like the heroin addicts and the smack heads and things like that, they need to sort out them and also the people that are claiming ESA and going out working. I know three people that are claiming ESA and going out working... they’re like, ‘Oh we can get you some work.’ ‘I can’t work. I am poorly. I’m not lying. You’re blagging the system.’ ”
(WSU, disabled man, England)

Indeed, some respondents felt that sanctions were fair for those who were defrauding the system at the expense of those in genuine need:

“ [Sanctions are] definitely fair because it’s basically saying if you’re able to work

and you’ve not got depression things and you’re able to work and you’re not actively looking for work, then you’ve got to face the consequences because the money you’re getting could be used to help someone else. So, it’s just like stealing, isn’t it? ”

(WSU, disabled man, England)

“ Okay there are people out there who don’t want to work and they want to claim everything they can get and they don’t want to go back to work if they’ve got something minor wrong with them. I do know people like that. ”

(WSU, disabled woman, England)

About the research

The following criteria were used in recruiting disabled people:

First, adults, aged 18-64, who broadly match the definition of a disabled person as set out in the Equality Act (2010): a person with ‘physical or mental impairment and the impairment has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities’(S6(1)).

Second, have current or recent or experience of welfare service benefits and interventions that are subject to incapacity assessment and welfare conditionality (eg, assessment for ESA and/or DLA, PIPs).

Issues of disability and impairment had a wider resonance across the full sample of welfare service users. An additional 162 respondents outside of the 58 recruited to the disabled people’s panel self-declared impairments at ‘wave a’ interview.

Further research

These disabled people will be interviewed again for our research in 2015-16 and then for a third time in 2016-17. This will enable the research to capture the dynamics of change for

these individuals and the role of sanctions and support within this. It will also enable a better understanding of the medium-term cumulative outcomes of interventions and the impacts of new legislation and mechanisms of sanctions and support that are currently being introduced.

Further information

This paper was written by: Prof Peter Dwyer, University of York; Dr Jenny McNeill, Universities of Sheffield and York; Dr Lisa Scullion and Katy Jones, University of Salford, and Dr Alasdair Stewart, University of Glasgow. It is one of a

set of nine presenting our first wave findings on different policy areas. An overview paper sets out our findings in summary. <http://www.welfareconditionality.ac.uk/publications>

Further information about the project may be found at: <http://www.welfareconditionality.ac.uk/>

A briefing paper on the policy context and existing research evidence on disability may be accessed at: <http://www.welfareconditionality.ac.uk/publications>

For further information about our findings, please contact communications officer Janis Bright at janis.bright@york.ac.uk

Welfare Conditionality: Sanctions, Support and Behaviour Change is a major five-year programme of research funded under the Economic and Social Research Council's Centres and Large Grants Scheme. The project aims to create an international and interdisciplinary focal point for social science research on welfare conditionality and brings together teams of researchers working in six English and Scottish Universities.

