Challenging Harmful Cuts: Our Response to the UK Government’s 'Pathways to Work' Proposals

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cyngor ar bopeth
citizens advice
Abertawe Castell-nedd
Port Talbot
Swansea Neath
Port Talbot

Introduction

The UK Government's proposed changes to disability benefits in their Pathways to Work green paper will significantly impact Wales, and Swansea and Neath Port Talbot in particular, leaving a substantial number of individuals and households with disabilities or health conditions worse off. Key detrimental proposals, such as those relating to PIP eligibility changes and scrapping the Work Capability Assessment are, disappointingly, not being consulted on and to keep a focused response we do not fully explore these issues below, although we are clear in our opposition to them. We will, however, also publish a wider report to address these issues and the impact on our local community in Swansea and Neath Port Talbot in greater detail.

We have also chosen to engage with questions for which we feel we can provide a valuable contribution to the discussion and a picture of how we anticipate issues to impact us locally. As a result, we do not engage with questions where there are other organisations who will have the knowledge and expertise to address subject areas more effectively than we're able to. We encourage you to engage with the publications of these organisations for a comprehensive review of the likely impacts of the proposed changes, We also include limited national statistics to focus on the impact and discussion at our local level and we encourage you to read the Citizens Advice national response 'Pathways to Poverty: How planned cuts to disability benefits will impact the people we support' for a broader view.

Consultation Questions

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?

We believe that current steps, i.e. legislating to ensure that work does not invite reassessment in and of itself for health based benefits and linking rules that mean you can reclaim benefit at the same rate within a certain time period are positive steps in encouraging benefit claimants to attempt work, where it is possible and appropriate for their individual circumstances.

We do, however, have some concerns centring around the scope of the legislation / rules and how this may impact on their effectiveness in removing the risk from attempting to start work for claimants.

We believe that the end goal of getting claimants into work should not be limited simply to securing employment, but should include comprehensive integration into the working world. Being employed does not simply mean working a job but extends to other, associated activities, such as commuting, socialising with colleagues to build working relationships and network, and travel where appropriate to allow for training and professional development.

We believe that legislation to ensure that work does not cause reassessment for disability should also extend to these associated activities to ensure that claimants feel they can safely engage with all aspects of employment without risking their benefits to begin with.

This does raise questions, however, about the extent and duration of any protections offered to health benefit claimants seeking to try out work. For example, many of our clients are in receipt of PIP in part due to their anxiety and difficulty engaging with others; how will seeking work impact the PIP award of such clients where work, and associated activities, may directly contradict the basis on which their PIP was awarded? Some would likely assert that their PIP should not be protected. However, if you truly want to encourage claimants to get back into the workforce, it is imperative that claimants know they will be fully protected in instances like this, as otherwise any distress caused by attempting to work despite conditions which make it so difficult would simply not be worth it.

We discussed this issue with Peter*, who is currently in the process of appealing a denied PIP claim to understand this from the perspective of someone with lived experience. For further context, Peter had been in receipt of UC and categorised as having LCWRA before taking on a new job, meaning the role was one they were able to choose for themselves based on suitability and appropriateness for their health, not one they felt compelled to accept because of job searching requirements.

Peter explained that he has experience of the PIP system both personally and through supporting PIP claimants in his work and he feels that the current system serves only to ignore and invalidate claimants. Peter often observes inaccuracies in health assessment reports and decision notices and notes they often feel copied and pasted, leading to the process feeling very impersonal and dismissive. This, of course, also diminishes any trust in the system to come to the right decisions or to truly understand the impact of an individual's conditions on their ability to undertake daily living or mobility activities. .
*Name has been changed for privacy

The issue this ultimately raises is that under the current system and processes, the DWP simply doesn’t have the credibility or public trust to reassure claimants that the right to try will work and they are not taking a substantial risk. The first step taken by the Government to reassure claimants that work will not lead to an automatic loss of benefit entitlement should be to reform the current PIP system to demonstrate to claimants that it can work with them, not against them.

In terms of measures specific to the ‘right to try’, transparency and trust can be worked towards by ensuring that the extent of protection offered is fully and clearly communicated to claimants, as well as any times the scope of the protection may change so that claimants can make informed choices.

We also believe that the timeframe of any protection offered needs to be sufficiently long so that claimants can fully ensure that work, or in particular the work that they are trying, is appropriate for them in order to encourage long-term movement into employment.This aim could also be supported through introducing some employment protections earlier than they are currently available to individuals newly in employment, as is proposed through the removal of the qualifying period in relation to unfair dismissal in the Employment Rights Bill currently making its way through Parliament.

A further way in which claimants seeking to move into work may be supported is through continued contact with a workcoach well into the beginning of any employment, to ensure a smooth transition and give claimants the best chance at securing appropriate employment that works for them in the long term. This could allow for claimants who have been out of work for some time, in some cases decades, to ask questions and seek general advice on issues they may face as they make this transition. This would also provide claimants, who are more likely to require adaptations or to face discrimination, with a trusted source so that they can understand their rights.

We believe strongly that such protections are needed based on our client statistics that show that discrimination based on physical or mental health is consistently the highest advice need relating to discrimination in employment in Swansea and Neath Port Talbot. Furthermore, the next most common protected characteristic which clients sought advice on due to discrimination in employment was observed at half the rate of discrimination due to health.

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?

We would like to preface this section by noting that we strongly oppose the planned change to the scoring requirements for PIP. Many disabled people will be financially harmed by this change and it will increase poverty across the UK, as has been pointed out by other organisations and pieces of research.

We also believe that the PIP system itself should face reform to address some of the key issues causing poor outcomes for claimants before it is adopted as the key assessment which decides entitlement to any and all disability benefits (including UC Health). We have previously published a report discussing the issues with PIP in the context of Swansea and Neath Port Talbot and will publish further material in light of new UK Government plans to rely more heavily on PIP.

The DWP's figures show that a large demographic impacted by this change to eligibility requirements will be claimants with mental health conditions as issues with prompting, focus, motivation, and other symptoms of mental health conditions often attract 2 points. As a result, we feel that additional mental health support and infrastructure should be put into place for those who will lose entitlement.

This is especially important in areas such as Swansea and Neath Port Talbot which include poorer and more rural areas where support can be difficult to obtain for those who are struggling. It is imperative that work is done at a local level to ensure that everyone, especially those most isolated and so most vulnerable, are not left without any additional support when they lose their entitlement to PIP.

> Chris's* Story:
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> Many of our clients will be severely adversely affected by the planned changes to PIP eligibility. Chris is just one of those clients who's likely outcome from the UK Government's planned changes demonstrates both how significant the impacts can be and the inadequacy of the existing PIP system.
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> Chris has several health conditions which impact his ability to undertake daily living activities including anxiety, depression, back and joint pain, incontinence and sleep apnoea. His conditions, in particular his mental health conditions and the pain he experiences, mean that he struggles to go about his daily routine due to difficulty with motivation and increased pain when moving around.

Chris first applied for PIP in October 2023 and was regarded as scoring only 2 points for daily living activities and 0 points for mobility activities - his PIP claim was therefore denied. Chris then asked that the DWP reconsider his claim and in 2024 the DWP upheld their original decision. Chris initiated an appeal against this decision 3 weeks later and was finally awarded the standard rate of the daily living component by an independent tribunal in early 2025, almost 16 months after the date of his initial claim. This delay and sequence of events alone demonstrates the inadequacy of the current PIP system and raises questions about its extension to determine eligibility for all disability benefits, as the government plans to do.

Importantly for Chris, his PIP was awarded based on 9 points spread across 5 activities, with a maximum score for a single activity of 2 points. This means that under the new eligibility requirements, when Chris is next assessed in 2028 he will likely lose his PIP award, unless his conditions have worsened in this time.

Chris's points are awarded largely due to a need for prompting to undertake daily activities such as preparing food, taking necessary medication, washing and bathing and dressing and undressing. Without this support, Chris cannot function day to day as he will forget to eat, take medication, change clothes and shower. Incidentally, it should also be considered how an inability to undertake these activities consistently would impact on someone's ability to obtain and maintain employment.

With the loss of his PIP, Chris will be at a minimum £73.90 per week worse off financially. This is equivalent to £320.23 per month or £3842.80 each year and represents 44% of Chris's current income, as his only other income is from the standard rate of UC for someone over the age of 25. Despite the fact that Chris is fortunate enough to have no rent or mortgage liability, his total monthly income of £730.37 as it currently stands (before the loss of PIP) is clearly not enough, as Chris already relies on food banks to meet his basic needs. The loss of PIP will push Chris further into poverty, causing him to rely even further on charitable support just to get by, as is also predicted for thousands of other disabled individuals and households throughout England and Wales.

On top of this, Chris is currently categorised as having Limited Capacity for Work by the DWP and while this does not come with an additional financial income that Chris stands to lose if he loses his PIP the loss of LCW will likely still impact Chris's health. If Chris loses his PIP, and subsequently his LCW, he will lose the

> flexibility and additional support surrounding his claimant commitment and pursuit of employment, ultimately making it harder for Chris to find work due to his mental health problems. We understand that the UK Government has plans to improve employment support and will likely claim this additional support will mitigate this harm. However, this support is untested and research is beginning to suggest that it is unlikely to cause the anticipated employment growth reported by the UK Government. As a result, Chris cannot reasonably rely on it to support him to a better outcome.
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> To summarise, the new 4 point minimum eligibility criteria will likely mean that Chris will lose his PIP and LCW status when he is next reassessed. As a result, Chris will lose 44% of his current income and will be at least £320.23 per month worse off - without considering any consequential loss of income (e.g. lost council tax reduction) or increase in expenditure (e.g. travelling to a job centre more frequently due to loss of LCW). This also doesn't consider the impact of potential worsened health due to the loss of LCW and income that Chris may experience. This is also all after having to battle an inadequate system for nearly 16 months for an independent tribunal to award Chris his current PIP entitlement after the DWP failed to do so on two occasions. The current system is already failing many of our clients, and the proposed changes will likely only worsen this.
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> *Name has been changed for our client's privacy

We also understand from the DWP figures that these changes will impact specific claimants more greatly than others, for example women, older people, those with musculoskeletal diseases, chronic pain syndromes etc. It is important that support is tailored to these individual groups, and is not one size fits all.

We feel strongly that it is important to ensure that claimants know clearly why they are losing their PIP and allow them time to prepare appropriately. This could be done through clear, easy to understand language on decision notices as well as a run on period to ensure claimants do not see an immediate loss of income and can prepare. We also believe that follow up contact from the DWP should be pursued to ensure that claimants are aware of the upcoming changes to their income and available support in light of this change. Much like with the enhanced support journey for managed migration, the DWP could follow up with clients if they find they have not engaged with any support after their initial contact but before they lose their income.

We also anticipate that this change to eligibility requirements will put additional pressure on the third sector to meet the support needs of those who have lost entitlement. This will likely be both in terms of querying the decision and whether they can appeal it as well as for ongoing support with their income, debt and other advice needs that will come with losing this income.

PIP is consistently the largest issue advised upon in Citizens Advice Swansea Neath Port Talbot, accounting for 18.4% of all issues in 2024. We provide support and advice with PIP from the initial application process to assessment and challenging incorrect decisions. It’s indisputable that the PIP system as it currently stands is too complex and generates a significant amount of work for the third sector, and changing the eligibility criteria will likely only add to this. It is important, therefore, that the UK Government is prepared to support the third sector in managing this increased demand for advice and resources when thousands of people find their income cut significantly overnight.

In 2024, 71% of our clients at Citizens Advice Swansea Neath Port Talbot regarded themselves as being disabled or having a long-term health condition. Of those clients, 23% noted having a mental health condition, and many more will be part of the 60% recorded as having ‘multiple impairments’ or ‘other’. It is clear to us that people with disabilities, and those with mental health conditions, are a more vulnerable demographic, disproportionately represented in our client statistics already. We anticipate that these changes to eligibility will mean making Swansea and Neath Port Talbot residents who have a disability or health condition significantly worse off and having to rely heavily on the third sector for support.

4. How could we introduce a new Unemployment Insurance, how long should it last for and what support should be provided during this time to support people to adjust to changes in their life and get back into work?

We believe that this unemployment insurance should last for at least 12 months to ensure that it will cover individuals who do not meet the necessary PIP eligibility criteria relating to the duration of their condition. This criteria requires that at the time of claiming, individuals have already been experiencing the impacts of their condition for at least three months and anticipate that it will continue to impact them for another 9 months. This will mean it is more likely to be available to support individuals such as those with a cancer diagnosis, who would previously have had automatic allocation as having LCWRA even if they could not satisfy the PIP criteria.

While available employment support would be beneficial, it should not be mandatory. Unemployment insurance would be used by a variety of individuals, some of whom would benefit from significant employment support and advice, such as someone who has recently been made redundant from a job they had previously held for an extended period of time, to others for whom employment support would be completely inappropriate, for example someone undergoing cancer treatment. As a result, support should be offered and well advertised for those who would like and benefit from it, but no requirement should be introduced to engage with it nor any sanctions or penalties for failing to do so.

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

We have previously published two reports on the PIP system and digital exclusion and benefit access which outline steps that can be taken to help safeguard vulnerable clients or offer valuable contributions to this discussion. Below is an outline of some key steps that we believe could be introduced to help safeguard vulnerable claimants:

A. Inter agency communication and work to ensure vulnerable individuals are not only recognised to begin with but that it is flagged when they are likely to be impacted by a change or stop engaging with a service.
    a. For example, benefit safeguarding processes, such as that of Greenwich Council (see here) help ensure that claimants who are entitled to additional support from the benefits system actually access that support. By completing their alert form, the local authority will share information surrounding a claimant's health conditions with the relevant benefit authorities so the necessary adjustments can be put in place and allow claimants to name a third party who will be notified of any issues with their claim. They also work closely with a local jobcentre to ensure that the benefit safeguarding alert is taken into consideration with an individual's claimant commitment, for example making every effort to contact the claimant or their named third party in the event of a missed appointment.

B. Better non-digital access to make and manage benefit claims and easier and more accessible adjustments and alternatives for those unable to manage an online claim.

C. Improving the PIP system before it is relied upon to assess for eligibility and access to all health related benefits to ensure that individuals are not excluded from accessing their benefits, creating poor outcomes for some of the most vulnerable individuals.

D. Better working relationships with third sector organisations so that when we are working with vulnerable claimants we are better able to represent them, discuss their claims or issues and offer the necessary support and advice to address their needs / concerns. This should also extend to making it easier for claimants to appoint trusted third parties to access and manage their claims where needed.

9. Should we require most people to participate in a support conversation as a condition of receipt of their full benefit award or of the health element in Universal Credit?

While we understand the value of continued contact with vulnerable claimants for safeguarding purposes, we do not believe that it should be mandatory to engage in employment related topics to ensure financial security for claimants.

It is also a factor that under the current system, claimants already note feeling that PIP assessments and contact with the DWP require claimants to ‘prove’ that they are disabled or unwell enough to deserve their disability benefits. Placing further contact requirements and conditions on the receipt of their disability benefit without first improving the system, transparency and trust in the government will only worsen this.

We also share the concerns of other organisations that the enforcement of engaging with these conversations through the use of sanctions would cause too much financial hardship for disabled households.

Furthermore the current PIP assessment system is inadequate to determine who should be expected to engage and at what level with any accuracy, and as such could not be relied on. There are many issues within the PIP system which contribute to this inadequacy, however one of the key factors is the inability to provide an appropriately knowledgeable assessor to individuals. This means that often individuals are assessed by someone who has very little insight as to how the individual's condition actually impacts their daily life and are therefore arguably ill equipped to make assessments surrounding this.

There are further issues with poor translation services not allowing for health condition impacts to be effectively communicated and hostility / dismissiveness from assessors which mean that the existing PIP assessment process simply cannot be extended to other decisions such as these.

We understand that you are not consulting on PIP reform currently and have noted planned changes in future, however we strongly believe that in order for the changes outlined in this green paper to be introduced with as little harm as possible, the current PIP system must be thoroughly reviewed and reformed first. Once this has been done organisations and decision makers will be in a better position to judge how these changes may be implemented with as little detriment as possible. More can be seen on the PIP system in our report here.

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

We strongly believe that implementing this change would not support the UK Government's purported aim to ensure that there is no 'incentive' for young people to not be in work and instead would financially harm young, vulnerable disabled individuals.

The cost associated with disability is not any less for those under 22 and as such those claimants should not be treated any differently to their 23 year old plus counterparts.

The lower wage requirements for individuals under 21 also means that those who are under 21 and disabled would face the same, higher living costs associated with disability with no access to additional income through UC health and reduced income available through employment. That is if their condition allows them to work at all.

While we understand that you acknowledge that some individuals would never be able to work and as such should be an exception to this rule, as we have pointed out above we do not believe that you currently have adequate infrastructure to accurately assess and categorise these individuals and their needs.

Even with better assessments however, we would not support the withdrawal of additional financial support for the higher living costs associated with being disabled under an arbitrary age cut off.

Young people are more likely to report experiencing mental health conditions and this language surrounding ‘disincentivising’ disability benefits over employment is representative of a dismissive attitude towards young people's health concerns. Claimants already note feeling they have to ‘prove’ they are deserving of their disability benefits under the current system causing mistrust in the government and system. Introducing changes such as these will further contribute to a poor relationship between claimants and the DWP.

In 2024 4.5% of our clients were under 24 which means they’re significantly underrepresented compared to our 2021 census data which records 13% and 8.4% of Swansea and Neath Port Talbot residents under 24 respectively. We caution that changes such as these will only further disincentivise young people from accessing the support they need and suggest that early health interventions in settings such as schools / colleges would be more appropriate to support young people’s mental health - not the removal of financial support.

12. Do you think 18 is the right age for young people to start claiming the adult disability benefit, Personal Independence Payment? If not, what age do you think it should be?

We believe that there are both advantages and disadvantages to changing the age at which young people transition to PIP to 18 but ultimately believe the best course of action would be an open window during which young people can choose to transition when it is appropriate for their personal circumstances, for example from age 16 to 24. This is because the personal circumstances of young disabled people can vary wildly, from continuing to live with parents / a carer indefinitely to full independence at 16. We believe therefore that young people should be able to make their own choices regarding their disability benefits based on what works for them.

We understand that there are potential advantages of raising the age to 18 - for example in assessing young people who still live with and are cared for by a third party. These individuals may struggle to answer questions surrounding certain activities, such as cooking or planning a journey as they may be in a position where these things are done for them out of habit / in keeping with how they grew up but if required to do so they would have difficulty completing the activities themselves. For these individuals who are still more heavily provided for by a parent, guardian or carer, remaining on DLA past 16 may make sense.

However, for young disabled people who are more independent, whether they remain living with a parent / guardian / carer or not, being able to transition to an adult disability benefit which is paid directly to them would be beneficial. It would not make sense for these individuals to have to remain on DLA until age 18.

We also would like to note that raising the age at which young people transition from DLA to PIP increases the potential for financial coercion / control. As such it might be appropriate to initiate contact with young disabled people in receipt of DLA at age 16 to communicate the transition process and their options, and to ensure there are no safeguarding concerns surrounding financial control on behalf of the carer that is paid the DLA.