

Equality Impact Assessment – Results

Title of policy	Social Security (Industrial Injuries Benefit and Personal Independence Payment) (Telephone and Video Assessment) (Miscellaneous Amendments) (Scotland) Regulations 2021
Summary of aims and desired outcomes of policy	<p>Prior to March 2020, clients applying for Personal Independence Payment (PIP) and Industrial Injuries Disablement Benefit (IIDB) were required by the Department for Work and Pensions (DWP) in most circumstances, to attend a face-to-face assessment to help to determine entitlement to benefit.</p> <p>In light of the escalating situation around Covid-19, to safeguard the health of clients and staff, the DWP suspended face-to-face assessments for all health and disability benefits in March 2020.</p> <p>For PIP assessments, DWP developed and delivered a telephone assessment service to replace the face-to-face assessments. All new applications to IIDB which require a face-to-face assessment were suspended.</p> <p>This proposed legislative amendment will provide a legal basis for the continued use of telephone assessments and future use of video assessments for PIP and IIDB.</p>

Directorate: division: team	Social Security Directorate: Disability Benefits Policy Team
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Executive summary

PIP is a disability benefit for people of working age (16 to State Pension age (SPa)) to contribute towards the extra costs associated with living with a long-term health condition or disability.

New clients do not receive any financial support until a decision is made on their application. When the DWP suspended face-to-face assessments in March, it introduced telephone assessments for all new PIP applications and Change of Circumstances cases where they deemed it possible to do so. This left ~2% of applications where a paper-based review or telephone assessment was regarded by DWP as not possible. For these cases, recommendations were made on the information available.

IIDB is a form of compensation for clients who have been injured or contracted a disease or health condition through the course of their employment. Individuals can receive IIDB for life provided they continue to meet the entitlement conditions. The assessment determines the percentage of disablement that is a result of a workplace acquired disease or workplace accident.

The changes are required to Regulation 9 of the Social Security (Personal Independence Payment) Regulations 2013 and Regulation 26 of the Social Security (Claims and Payments) Regulations 1979. The amendment will give a legislative basis to the undertaking of assessments through multiple channels for the relevant benefits. Current Personal Independence Payments regulations make provision for assessments to be carried out either face-to-face or by telephone. Industrial Injuries Disablement Benefit regulations make provision for face-to-face assessments only.

Background

The Scottish Government has had Executive Competence for PIP and IIDB since April 2020. However, PIP and IIDB are currently delivered by the DWP, on behalf of the Scottish Government under the terms of Agency Agreements, prior to the Scottish Government establishing new benefits to replace these in Scotland.

The Agency Agreements between the Scottish and UK Governments require that the Scottish Government consider mirroring changes to the required legislation to enable PIP and IIDB to be administered for Scotland consistently with the rest of the UK. Section 32 of the Scotland Act 2016 and section 53 of the Scotland Act 1998, taken together, require that where functions in relation to disability assistance have been devolved, the Scottish Ministers must exercise those functions instead of the Secretary of State. In this instance that means Regulations require to be laid before the Scottish Parliament so as to amend the Regulations as they apply in Scotland to reflect the amendment being carried out by the DWP for England and Wales.

The Scottish Government intend to replace PIP with Adult Disability Payment in 2022, replacing face to face assessments with client consultations. These consultations will only be undertaken when it is the only practical way to gather the information required for a decision and be held in a manner that suits the client, including by phone and video.

When the Scottish Government commence delivery of Adult Disability Payment, clients will be given a choice of time and place for their consultation if one is required. A client consultation will take place over the phone with video consultations also being made available to clients. Therefore, the proposed amendment to the PIP and IIDB regulations align with the general policy commitments of the Scottish Government around providing an increased level of flexibility in the application and decision making process for disability benefits.

The Scottish Government intend to replace IIDB with Employment Injuries Assistance. A date for implementation has not yet been confirmed. A public consultation and a further Equalities Impact Assessment will be undertaken to inform the delivery of Employment Injury Assistance.

Scope

The Scottish Government has not undertaken consultation activity on this amendment because of the short amount of time available to make the required amendment. However, the Scottish Government have carried out extensive research and engagement with individuals with

lived experience in developing a new system of Scottish Disability Assistance.

A consultation was undertaken in 2019 to seek views on disability assistance including how assessments are carried out. The consultation results were clear that respondents believed that there should be a more flexible approach to assessments. Stakeholders have endorsed the Scottish Government's proposed approach to "significantly reduce face-to-face assessments."

Many respondents cited issues faced when travelling to an assessment. One in three of those responding said that the ability to travel depended on the particular condition, disability or health status of the client at the time of assessment.

Stakeholders such as the Disability and Carer Benefits Expert Advisory Group (DACBEAG) have expressed support for the Scottish Government's proposed approach to client consultations which will replace DWP health assessments. DACBEAG have stated that "face-to-face assessments will not, in the majority of cases, provide any useful additional evidence regarding a client's entitlement to Disability Assistance and we agree with the Scottish Government's commitment to reduce the number of these assessments."¹

The 2019 consultation also included equality questions to inform the Scottish Government's approach and sought views on an Equalities Impact Assessment that analysed the impacts of the policies contained in the consultation on those with protected characteristics. No significant concerns were raised in relation to these questions.

A public consultation on draft regulations for Adult Disability Payment was launched on 21 December 2020. The consultation will run until 15 March 2021. An Equalities Impact Assessment was carried out relating to the draft regulations.

The Scottish Government intend to replace IIDB with Employment Injuries Assistance. A date for implementation has not yet been confirmed. A public consultation and a further Equalities Impact Assessment will be undertaken to inform the delivery of Employment Injury Assistance.

¹ [Disability and Carers Benefits Expert Advisory Group - informal observations: advice](#)

The amendment will affect people applying for or being reassessed for PIP and IIDB who are determined by DWP to require an assessment.

The DWP have advised that it is likely some medical conditions are difficult to assess via telephone, and therefore the option to use face to face and video assessments will help to ensure that clients receive an assessment appropriate to their circumstances. This brings DWP's approach closer to the Scottish Government's policy intention of introducing a multi-channel approach to communicate with clients when it starts delivery of Adult Disability Payment and Employment Injuries Assistance.

Protected Characteristics

Age

PIP

Table 4: Proportion of PIP registrations and caseload by age band

	New registrations (April 2013-July 2020)	DLA to PIP Reassessment registrations (April 2013-July 2020)	Caseload (July 2020)
16-19	4%	13%	4%
20-24	7%	5%	5%
25-29	8%	5%	5%
30-34	9%	5%	6%
35-39	9%	6%	6%
40-44	10%	7%	7%
45-49	12%	10%	9%
50-54	13%	12%	12%
55-59	14%	12%	14%
60-64	13%	13%	15%
65-69	1%	13%	12%
70 and over	0%	0%	4%
Total	3,435,000	1,884,000	2,557,000

Table 4 shows the proportion of PIP reassessment and new registrations made between April 2013 and July 2020 in each age group. Table 4 also shows the proportion of the PIP caseload in July 2020 in each age group. As of July 2020, within the 16-19 age range, 3,380 people under age 18 were entitled to PIP in Scotland. The introduction of video and

telephone assessments could potentially affect all eligible PIP clients between 16 up to State Pension Age (SPa), and all PIP clients undergoing award review.

PIP is primarily a working age benefit so a new application has to be made prior to SPa. As a result, most clients are under SPa. According to data provided by DWP, 50% of all applications for reassessment made and 60% of all new applications made since April 2013 are from a person aged under 50.

DWP have advised that some medical conditions are harder to assess over the telephone using the PIP assessment model. Therefore, DWP believe that video assessments and face to face assessments will be more suitable for assessing such cases. For example, it may be more appropriate to assess clients who are Deaf or hard of hearing via face to face or video assessment. In July 2020 46% of those who are Deaf or hard of hearing on the PIP caseload were over 50 years old, and 63% were over 40 years old. This suggests that older clients with these conditions are potentially more likely to be assessed by DWP through a face-to-face or video assessment.

With regard to internet use, ONS analysis of UK data found that in 2019, people aged 16-64 were more likely to have used the internet in the last 3 months (between 93.2% and 99.2%) compared to people aged 65-74 (83.2%) and 75+ (46.8%). As PIP is a working age benefit, new clients are more likely to use the internet. 4% of the PIP caseload are above 70, so may be less likely to use the internet, which would be required for a video assessment. PIP policy is that those above SPa should have less frequent light touch award reviews, so this group of clients age 70+ are less likely to interact with this type of assessment.

Telephone and video assessments could potentially mitigate the stress and anxiety that many young people say that is associated with PIP assessments. This is because some clients will not have to travel to an unfamiliar location to participate in a PIP assessment where it is decided that a video or telephone assessment should take place.

IIDB

Table 5a: IIS applications in 2019 by age

Age	IIS Prescribed Disease Applications	IIS Accident Applications
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Working Age	35%	96%
Over Pension Age	66%	4%
Total	9,630	3,950

Figures may not sum due to rounding

In 2019, 35% of new applications for IIS due to Prescribed Diseases were from people of working age and 66% were for people over pension age. In December 2019, 36% of IIS clients were aged up to 64 and 64% were aged 65 and over. Compared to new applications due to Prescribed Diseases, a much higher proportion of IIS new applications for accidents in 2019 were from people of working age (96%). Therefore, people of working age are more likely to be affected by the proposed policy.²

Table 5b: IIS Caseload in December 2019 by age

Age	IIS Caseload
Up to age 64	36%
65 and over	64%
Total	267,290

Figures may not sum due to rounding

This EQIA has concluded that it is unlikely that this policy will have specific positive or negative impacts on people as a result of their age. Although the policy primarily impacts on people of working age, anyone over the age of 16 who are applying to, or in receipt of PIP and IIDB, and are required by DWP to participate in an assessment, may be impacted by the policy.

Disability

PIP and IIDB are benefits for disabled people or those with long term ill health conditions and any changes will have a direct impact on disabled people. The majority of PIP clients in particular are likely to be covered by the definition of “disability” in the Equality Act 2010.

This change will affect all PIP and IIDB clients that DWP require to participate in an assessment. Some of the most severely disabled and those who are terminally ill may be less likely to be impacted by the multi-channel approach, as they are less likely to be required by DWP to

² The data for new applications is broken down by working age and over pension age. This is compared to the caseload aged up to 64 and 65 and over. Although this is not an exact comparison, we expect the conclusion would remain the same.

participate in an assessment. DWP advise that they are more likely to carry out a paper based review of these cases.

The introduction of video assessments has the potential to benefit some groups who are unable to participate in a telephone assessment or find participating in a telephone assessment challenging. This may affect:

- clients with speech difficulties
- clients with hearing difficulties
- clients with learning disability who do not have an appointee
- clients who are experiencing poor mental health
- clients who require a BSL interpreter

PIP

Table 7: Proportion of PIP clearances and caseload by disability³

	Application clearances (April 2013-July 2020)	DLA to PIP Reassessment clearances (April 2013-July 2020)	Caseload (July 2020)
Malignant disease	7%	2%	3%
Psychiatric disorders	24%	37%	36%
Neurological disease	7%	13%	13%
Visual disease	1%	2%	2%
Hearing disorders	1%	1%	1%
Cardiovascular disease	3%	2%	2%
Gastrointestinal disease	1%	1%	1%
Skin disease	1%	1%	1%
Musculoskeletal disease (general)	13%	16%	20%
Musculoskeletal disease (regional)	10%	9%	13%
Autoimmune disease	0%	0%	1%

³ Disability data is only collected once the application is successfully built, so data is based on clearances rather than all new applications.

(connective tissue disorders)			
Genitourinary disease	1%	1%	1%
Endocrine disease	1%	1%	1%
Respiratory disease	4%	4%	4%
Others	27%	10%	1%
Total	3,276,000	1,855,000	2,557,000

New applications for PIP make up roughly 57% of PIP awards in Scotland and have a 46% success rate. These new applications make up 67% of assessments carried out in Scotland.

DWP have advised that early indications from providers are that some medical conditions are harder to assess over the telephone, for example musculoskeletal conditions, speech problems and severe anxiety. This may have an impact on how robust a decision is under DWP's assessment model, meaning that a video assessment or face to face assessment may benefit these clients. DWP will choose which assessment channel they believe will enable the most robust assessment decision.

As previously explained when considering the impact of age, those who are Deaf or hard of hearing may be able to participate in a video assessments, but are unlikely to be able to participate in a telephone assessment.

ONS analysis of UK data found that in 2019, 78.3% of people aged 16 years and over who self-assess that they have a disability in line with the Equality act definition of disability had used the internet in the last 3 months. In comparison, 94.8% of people aged 16 years and over who did not report having a disability had used the internet in the last 3 months. This indicates that there are barriers to some disabled people accessing the internet. This may be because of financial or economic factors such as the increased cost related to being disabled or ill health. It also may be because of the inaccessibility of some internet technology which does not consider or take into account the needs of disabled people.⁴

⁴ [Reducing Barriers to Online Access for People with Disabilities | Issues in Science and Technology](#)

According to participants in our Experience Panels, the most negative part of applying for PIP was attending face-to-face assessments with one participant stating that it was “honestly one of the most traumatic experiences of my adult life”. For many, the experience of undergoing a face-to-face assessment was stressful and anxiety inducing with some participants stating that it had an impact on their health.

The Scottish Government has previously committed to reducing the number of face-to-face assessments that will be carried out by Social Security Scotland. The Scottish Government do not believe that a face-to-face assessment is necessary to determine an individual’s eligibility to Adult Disability Payment. Upon delivery of Adult Disability Payment, face-to-face, or in-person, consultations will only happen where they are requested by the clients or to meet accessibility needs of the client.

Once face-to-face assessments are resumed by DWP, the increased use of telephone and video assessments are likely to result in a reduction of face-to-face assessments for PIP in Scotland. Extensive research and engagement undertaken by the Scottish Government has indicated that many people find attending an assessment centre stressful and anxiety inducing. Therefore this policy is likely to have a positive impact on those clients who would otherwise have been required to participate in one.

IIDB

Table 8: First Assessments for Prescribed Diseases and Accidents in 2019 by Percentage Assessment (contains unpublished IIDB admin data and assessments that ended in payment and non-payment)

	All	1-13	14-19	20-24	25-34	35-44	45-54	55-64	65-74	75-84	85-94	95-100
Prescribed Diseases	4,870	22%	11%	6%	6%	3%	2%	1%	1%	1%	0%	47%
Accidents	2,570	29%	28%	11%	16%	7%	3%	2%	1%	1%	1%	1%

Figures may not sum due to rounding, rounded to nearest 10

IIDB is not a living costs benefit, but rather a form of compensation. The assessment determines the percentage disablement caused by a workplace acquired disease or workplace accident. Because some prescribed diseases (referred to by DWP as ‘fast track’ diseases) automatically attract the highest 100% rate of award (£182 pw⁵), DWP do not require a face-to-face assessment for these clients. Their application is considered on paper alone. Fast track diseases are serious, and usually terminal cancers. This means that most clients with the highest level of disablements are not affected by telephone, video or face to face assessments. In the quarter to September 2019, the majority (81%) of new applications were non-Fast Track⁶.

Those making a new application are likely to consider themselves disabled or to have a health condition, regardless of their eventual assessment outcome. Of the 2,570 first assessments for Accidents in 2019, the majority (57%) found a percentage disablement of 1-19 and 1% found a percentage disablement of 95-100⁷. In comparison, 33% of first assessments for Prescribed Diseases in 2019 found a percentage disablement of 1-19 and 47% found a percentage disablement of 95-100. Therefore, people making an IIDB application for an accident are more likely to be assessed as having a lower percentage disablement.

In light of the ONS data on internet usage, because people making new IIS applications for accidents are likely to consider themselves disabled, we can expect a lower level of internet use compared to those who do not have a disability – this may therefore impact their ability to engage with the video assessment element of the multi-channel approach.

Through the Scottish Government’s engagement with disabled people who receive IIDB, a small number of people have suggested that the application and assessment process could be made more straightforward. The introduction of video and telephone assessments will mean that some clients will be able to participate in an assessment from a familiar location without having to travel to an unfamiliar assessment centre.

⁵ Benefit and pension rates 2020 to 2021 [Link](#)

⁶ **Unpublished**, Industrial Injuries Disablement Benefit administrative data, September 2019

⁷ **Unpublished**, Industrial Injuries Disablement Benefit administrative data, 2019

Sex

Data from the Paperworth Trust found that women make up a small majority of disabled people in the United Kingdom (23% of females compared to 19% of males). A report by the Women's Budget Group has also found that overall, women are twice as likely to rely on social security as men.

The information provided by DWP suggest that both men and women will benefit from increased flexibility in the provision of PIP and IIDB assessments. The data in the below section illustrates the gender breakdown of PIP and IIDB.

PIP

Table 1: Proportion of PIP registrations and caseload by gender

	New registrations (April 2013-July 2020)	DLA to PIP Reassessment registrations (April 2013-July 2020)	Caseload (July 2020)
Male	45%	50%	46%
Female	55%	50%	54%
Total	3,435,000	1,884,000	2,557,000

Table 1 shows there has been more new applications from females than males. However, there has been an even balance of gender for PIP reassessments. This is consistent with the gender balance of all PIP clients (as of July 2020). According to DWP, as of July 2020, 124,186 male and 149,717 female clients were entitled to PIP in Scotland.

The largest proportion of clients entitled to PIP had a 'psychiatric disorder', totalling 108,081. There were slightly more male (56,559) than female (51,521) clients though this was not always the case when looking at individual conditions. Within the category of 'psychiatric disorders', there were significantly more male clients with a behavioural or learning disability such as autistic spectrum disorders (7,324 male compared to 2,128 female) and Attention Deficit Hyperactivity Disorder/Attention Deficit Disorder (1,813 male compared to 412 female). Female clients were significantly more likely to report a mental health condition, with the largest proportion experiencing mixed anxiety and depression (21,675 female compared to 15,698 male).

We also know from engagement with stakeholders that there are specific issues and barriers which arise for disabled women. In their response to our Consultation on Disability Assistance, Engender highlighted, that women are far more likely to experience domestic violence and abuse and that this is compounded for disabled women.

Engender also highlighted that, for many women who attend DWP face-to-face assessments, they face specific barriers due to assessors making assumptions based on stereotypical gendered roles. They noted that there has not been enough research conducted on the topic to provide a detailed analysis. This was linked to research⁸ examining the gendered history of 'incapacity benefits' which demonstrates that awards tended to punish women who engaged in household labour because it was viewed as potential work activity for women, while men undertaking similar activities did not face such scrutiny at an assessment. The research further linked this to DWP data which shows that men are more likely to be awarded the enhanced rate of the daily living component (52%) compared to women (46%).

The Scottish Government will not carry out functional examinations of clients when it commences delivery of Adult Disability Payment. The Scottish Government is also committed to properly applying the 'reliability criteria' to ensure that clients full range of needs is taken into account during an application to Adult Disability Payment. When a client explains the impact of their disability or condition to Social Security Scotland, they will be trusted and believed. It is likely that, where a video or telephone assessment takes place for PIP, women will not be subjected to a functional assessment and therefore will not be subject to some of the assumptions that Engender have highlighted.

ONS analysis of internet use in the UK⁹ found that in 2019, 92.0% of men and 89.6% of women aged 16 years and over had used the internet in the last 3 months. Women were more likely than men to never have used the internet in 2019 (8.7% for women compared to 6.3% for men). According to Engender, 'digital access is a gendered issue' in the UK.¹⁰ A range of barriers exist for women in accessing the internet and digital skills. These include, but are not limited to, women having less digital

⁸ [What do we want from the Government at Holyrood \(engender.org.uk\)](https://engender.org.uk)

⁹ Internet users, UK: 2019 (LFS Data),

<https://www.ons.gov.uk/businessindustryandtrade/itandinternetindustry/bulletins/internetusers/2019>

¹⁰ [Engender-response-to-the-Scottish-Government-Consultation-on-the-Digital-Strategy-for-Scotland.pdf](#)

confidence than men and being more likely to have insufficient financial resources to afford technology and equipment. It should also be noted that women and girls experience online misogyny and gendered harassment which limits the ability to participate in, and make use of, online spaces.

Therefore, women may be less likely to use the internet to undertake a video assessment for PIP. A lack of access to financial resources for women, in particular disabled women, has been frequently highlighted by stakeholders.

Overall the introduction of this amendment is unlikely to disproportionately affect someone requiring a PIP assessment according to their gender. Increasing flexibility in the way PIP assessments are undertaken will benefit both men and women. However research and stakeholder engagement indicates that this may manifest itself in different ways due to social and economic circumstances and cultural assumptions.

IIDB

Table 2: IIS new applications in 2019 by gender and IIS Caseload in December 2019 by gender

Gender	IIS Prescribed Disease new applications	IIS Accident new applications	IIS Caseload
Male	95%	74%	79%
Female	6%	27%	21%
Total	9,630	3,950	267,290

Figures may not sum due to rounding

According to DWP data, in 2019 95% of new applications for IIS from people with Prescribed Diseases were from men and 6% were from women. In December 2019, 79% of all IIS clients were male and 21% were female. Compared to new applications from people with Prescribed Diseases, a lower proportion of IIS new applications for accidents in 2019 were from men (74%) and a higher proportion were from women (27%). Although a higher proportion of men than women are likely to be affected by video assessments, the proportion of women in the affected group is higher than among the non-affected group.

Overall, the introduction of video and telephone assessments for IIDB will benefit both men and women who require an assessment for IIDB. However, as IIDB clients are significantly more likely to be men than women, the policy will likely have a greater positive impact on men than women.

Religion and Belief

The DWP data that the Scottish Government has access to about those in receipt of PIP and IIDB does not include information about these protected characteristics. According to latest data published by Scottish Surveys Core Question in 2019, 50% of respondents identified as having “no religion” while 47% identified as Christian (“Church of Scotland”, “Roman Catholic” or “other Christian”), 2% as Muslim, and 2% as an “other religion”.

Once age was taken into account, in comparison to those with no religious affiliation, a lower proportion of “other” religious groups reported good/very good general health and a higher proportion reported having a limiting long-term condition. “Other Christians” reported a higher level of good/very good general health than the “no religion” reference group.

We have not identified any particular barriers resulting from our policy approach which may affect people with the protected characteristic of religion and belief.

Race

DWP do not publish ethnicity data for PIP or IIDB. Although statistics showing the number of people within Scotland who are in receipt of disability benefits and who belong to minority ethnic groups are not available, engagement and research undertaken by the Scottish Government have indicated that they generally make up 3.7% of those with a reported learning disability or developmental disorder.

Just under 4% of Scotland’s population belong to minority ethnic groups, and 7% of Scotland’s total population communicate in languages other than English at home. The Scottish Government is aware that there are particular barriers for individuals from minority ethnic groups in applying for disability benefits, especially those with English as a second language, as there may be difficulties in accessing or understanding their entitlements due to language or other communication barriers. The

introduction of video assessments means that clients who require an interpreter to participate in a DWP assessment can do so remotely. Clients who require an interpreter therefore will not always be required to travel to a face-to-face assessment.

The ethnic minority population also includes refugees. Scotland has resettled 3,180 people under the Vulnerable Persons Resettlement Scheme and Vulnerable Children Resettlement Scheme since Q1 of 2014. Refugees are eligible for benefits such as disability benefits, but typically experience additional barriers to the general population in accessing them. The Scottish Government has undertaken specific engagement with this group to understand better some of the barriers to applying disability benefits.

The issue of language presented a very real challenge for the Syrian refugees in our focus groups who could speak or understand very little English. This was exacerbated by lack of (Syrian) Arabic interpreters at advocacy and/or third sector organisations within their geographical area.

The Scottish Government has heard during our engagements with Vulnerable Person Resettlement Scheme (VPRS) Syrian refugees that accurate information about eligibility to disability benefits was difficult to access, with some being told that refugees are not entitled to benefits at all. All spoke of a lack of knowledge of the benefit system, a fear of government officials and challenges presented by language and dialect.

The introduction of video and continuation of telephone assessments may to some extent lessen the anxiety and stress associated with attending an assessment centre. Research and engagement has indicated that being able to participate in an assessment from a familiar location such as at home can mitigate this fear. It may mean that clients do not have to attend an official government venue that may be traumatic to some people with experience of the asylum system for example.

Marriage and civil partnership

The DWP do not currently collect data on this protected characteristic. Although the Scottish Government does not require assessment against this protected characteristic unless the policy or practice relates to work (for example Human Resource policies and practices), we have not identified any particular barriers resulting from this legislation which may

affect people with the protected characteristic of marriage or civil partnership.

Pregnancy and maternity

DWP do not have any data on the number of disabled people that fall under this protected characteristic. Joint research¹¹ carried out by Engender and Inclusion Scotland looked at the issues facing disabled women.

Engender have discussed instances where disabled women's entitlement to disability benefits has been impacted by carrying out tasks relating to caring for children.

The introduction of greater flexibility in the application and decision making process for disability benefits will likely increase the ability of pregnant disabled women and women with caring responsibilities to participate in a consultation. The introduction of video and telephone assessments by DWP for PIP and IIDB is a step towards a more flexible system which will benefit those included by this protected characteristic.

Sexual orientation and gender reassignment

In 2017, 2.4% of people in Scotland identified their sexual orientation as "Lesbian, Gay, Bisexual or other." A report by the Equality Network found that Lesbian, Gay, Bisexual, Transgender/Transexual (LGBT+) disabled people were more likely to experience discrimination than LGBT+ non-disabled people with 59% reporting experiencing prejudice or discrimination within the last month at the time of the report compared to 47% of non-disabled LGBT+ individuals.

There is no robust data relating to the proportion of people in Scotland to whom the gender reassignment protected characteristic applies and DWP do not collect data on this protected characteristic.

The Scottish Government recognises that a potential barrier to trans and non-binary people accessing disability assistance is a requirement for individuals to provide their gender when making an application for disability benefits.

¹¹ [GM \(engender.org.uk\)](http://engender.org.uk)

During our engagement with individuals, those who had undergone gender reassignment discussed feelings of being 'outed' by this process as they had to reiterate that they had changed gender and often felt disparaged by assessment staff. They also expressed frustration that the system could not cope with their attempts to amend their existing identity information, such as name and gender, within the current system.

Some people we engaged with who had undergone a PIP assessment in the current system reported experiencing homophobia/ transphobia by assessors. They also spoke of dismissive and disrespectful attitudes towards their shared living arrangements with same-sex partners.

The Scottish Government has heard from people with experience of PIP how face-to-face assessments for PIP has felt humiliating and does not treat them with respect or dignity. The introduction of remote for PIP and IIDB introduce greater privacy and a more dignified experience. This is particularly relevant to people who have experienced harassment or discrimination.

Fairer Scotland Duty

United Kingdom wide, disabled people have higher poverty rates than the general population with disabled people making up 28% of people in poverty. In Scotland 410,000 households in poverty (42%) include a disabled person. Disabled young adults in the United Kingdom aged 16-24 years have a particularly high poverty rate of 44%.

There are higher rates of food insecurity among disabled people (18%) compared to non-disabled people (5%). There is also a higher likelihood of living in relative poverty after housing costs with a disabled person in the household (24% of families with a disabled person compared to 17% of families with no disabled members). If disability benefits are not counted towards household income, this rises to 30%. 'Family' in these circumstances referred to the core family in a household, comprising one or two adults and children, if any.

Although DWP pay travel expenses to clients who are required to attend a face-to-face assessment, it is possible that this requirement places additional financial burdens on clients. For example, clients may need to pay to cover caring responsibilities including childcare to enable their attendance at a face-to-face assessment. Clients may also experience a loss of earnings depending on their employment circumstances in order to attend an assessment.

The proposed policy introduces a degree of flexibility into the way DWP carry out PIP and IIDB assessments. It makes it more likely that clients will be able participate in an assessment remotely and therefore not face some of the additional financial burdens related to attending a DWP face-to-face assessment.

What might prevent the desired outcomes being achieved?

No barriers have been identified.

Recommendations and conclusion

The proposed amendment ensures fairness and an increased sensitivity to the needs of clients of PIP and IIDB.

The Scottish Government has carried out extensive engagement and research in developing Adult Disability Payment which will replace PIP. The proposed amendment brings current practice closer to the Scottish Government's proposed approach for determining entitlement to Adult Disability Payment in that it introduces a multi-channel approach to assessments.