

Social Security Committee Inquiry on Social Security Benefits Take-Up – See Me Response

See Me is Scotland's national programme to end mental health stigma and discrimination. Our vision is to enable people who experience mental health problems to live fulfilled lives.

We are working to change negative behaviours towards mental health, by creating a movement for change, bringing people together all over Scotland who are all passionate about tackling stigma, to work as one. Currently we have nearly 10,000 people signed up, including supporters, volunteers and champions, who are leading the way in making real changes in communities across the country.

We want to change the culture around mental health so people feel confident enough to speak about how they are feeling and can ask for help if they need it, without the fear that they will be stigmatised and discriminated against. To do this we are targeting key settings where people face stigma and discrimination; in work, education, health and social care, and in their local communities.

What do we know about how much is unclaimed and why?

From See Me's perspective, there are three important causes for unclaimed benefits; complexity of the system, names of the benefits and stigma:

The benefits system is difficult to navigate and this acts as a barrier to people taking up benefits. For example, the Big Benefits survey of 2017¹ reported on claimants' experiences of Personal Independence Payments (PIP) and Disability Living Allowance (DLA). Over 70% of respondents found the PIP application form 'hard' or 'very hard' and 11% of respondents were unable to complete it at all. Almost 60% of respondents found providing supporting evidence 'hard' or 'very hard'. These statistics demonstrate that applying for benefits can be extremely difficult and this places barriers in the way of accessing benefits. This report also highlighted difficulties for people with mental health problems in accessing benefits as causing increased anxiety and having a negative impact on people's mental health.

See me is also concerned that the names such as 'Disability Living Allowance' and 'Disability Allowance' act as a barrier to people with mental health conditions accessing benefits. Evidence suggests that people with mental health conditions and learning disabilities often do not think of themselves as being disabled. For example, evidence from a DWP study in 2013 showed that only 25.9% of people who fit the DWP's definition of disability described themselves as 'disabled' with a further 11.4% describing themselves as 'sometimes disabled'.² From See Me's consultations we know that not everyone with a mental health problem considers themselves disabled.

¹ Supporting those who need it most? Disability Benefits Consortium, 2017 <u>https://disabilitybenefitsconsortium.files.wordpress.com/2017/09/supporting-those-who-need-it-most-full-report.pdf</u>

² DWP Ad Hoc Analysis (table 10) 2013



Stigma around benefits is an enduring problem that imposes barriers to take up of benefits and imposes a cost on people who are claiming. For example, a study of benefits stigma in Britain found a significant detrimental impact on people's self-worth and mental health as a result of benefits stigma.³ See Me knows that mental health stigma also acts as a barrier to help-seeking and can lead to people being less likely to engage in wider society. People may also be less likely to disclose a mental health problem due to the stigma, and this means they do not claim benefits.⁴

What are the gaps in knowledge/research and how can they be improved?

Further research is needed on the role stigma plays in restricting people with mental health problems for access benefits they may be entitled to. More research is needed to explore the interplay and interaction between mental health stigma, benefits stigma and other types of stigma, which we know are likely to have a detrimental effect on people's life outcomes and decisions to engage with public services.

How can the administration of benefits be improved to maximise take-up? Specific examples would be welcomed.

There should be a focus on clear inclusive communication using a range of methods to accommodate different and specific needs. Providing clear and accessible processes and pathways that are flexible and responsive to individual's needs will improve the person's experience of applying for benefits. Having a personalised approach would take account of the individual's circumstances; for many people their mental health problems are episodic and with the right support they recover over time. For some people who experience more severe and enduring mental ill health it would be beneficial to limit the number of times they are required to re-apply.⁵ In addition, the entire social security system should reflect the standards for being mental health accessible.⁶

A significant barrier for people taking up benefits is that assessors lack knowledge about their conditions. Assessors often lack knowledge about mental health conditions and the impact these may have on people's lives. For this reason, we welcome the Scottish Government's commitment to Specialist Advisors and case managers with knowledge of specific conditions, and look forward to further detail on how these will be recruited and coverage across Scotland. See Me would suggest that the Specialist Advisors and case

2938.cdn.hybridcloudspan.com/T2UWebsite/media/Documents/Benefits-Stigma-in-Britain.pdf ⁴ The Benefits Assault Course, Money and Mental Health Policy Institute,

³ Benefits Stigma in Britain, Turn2Us, <u>https://wwwturn2us-</u>

https://www.moneyandmentalhealth.org/wp-content/uploads/2019/03/MMH-The-Benefits-Assault-Course-UPDATED.pdf

⁵ The Benefits Assault Course, Money and Mental Health Policy Institute, <u>https://www.moneyandmentalhealth.org/wp-content/uploads/2019/03/MMH-The-Benefits-Assault-Course-UPDATED.pdf</u>

⁶ Mental Health Accessible, Money and Mental Health Policy Institute, https://www.moneyandmentalhealth.org/mentalhealthaccessible/



managers are appropriately trained to respond compassionately to mental health disclosure.

Furthermore, See Me welcomes the Scottish Government's commitment to offer claimants choice on dates and times of assessments, and to ensure that home visits are available when required. The setting of the assessment is important to people's experience of the benefits system. Collocating future Social Security Scotland premises in libraries, community hubs, or places where other services are readily available, should be explored. Independent advocacy is also important in supporting people to engage with the benefits system and to increase benefits take-up by minimising inaccurate decision making.

How far is it possible for technology to create a more automated system, that uses information gathered for other reasons to award benefits automatically? What would the advantages/disadvantages be of greater automation?

We know that people with mental health problems face significant barriers to accessing benefits and the uncertainty and difficulty of the process causes anxiety and distress. For this reason an automated system may be beneficial for people who are entitled to benefits. However, it is hard to envision how that system would work, given current problems in communication between public services. Many benefits are highly complex, requiring information on household income, job status and type of accommodation. More detail on how all this information would be accessed, coordinated and be GDPR compliant would be welcome.

See Me is concerned about the Scottish Government's commitment to one website for applications for social security and the DWP's 'Digital by Default' approach to Universal Credit. People with mental health problems experience 'digital first' as a clear barrier to applying for benefits. The barriers are around access to IT equipment and support, difficulty in accessing alternative application procedures and overall digital literacy.⁷ We would advocate that any prioritisation of digital be scrapped and instead focus on the means of contact that the person chooses. That would also chime well with the ambition of the new social security system being person centred.

What can we learn from previous campaigns to increase take-up? Specific examples of projects or approaches that improved benefit take-up, particularly those that were evaluated, would be welcomed.

N/A

Are different approaches required for different benefits and different client groups?

N/A

⁷ SAMH, 'It was a confusion', 2018

https://www.samh.org.uk/documents/ItWasAConfusionReport_ONLINE_VERSION.pdf



What kinds of eligibility criteria ensure better take-up?

N/A

How might the development of Scottish social security impact on take-up of both reserved and devolved benefits?

See Me welcomes the approach the Scottish Government has taken to social security thus far. The focus on people being able to choose the date and time of their assessments; providing home visits, where required; the right to be accompanied at assessments; and the commitment to accessing Specialist Advisor who has familiarity with a person's conditions are all welcome. If all these are fulfilled, we anticipate that the Social Security system in Scotland would be more person-centred and more likely to increase benefits take-up.

The future impact of having two parallel benefits systems is less clear, however. It will be important for this committee to consider the future impact of having two different systems with different messaging and policy drivers on benefits take-up. It may cause unnecessary confusion for people who have to interact with the two different services.

See Me welcomes the focus on increasing benefits take-up and the reference to this in Social Security legislation. The committee and Scottish Government ought to further explore the interaction between benefits stigma and mental health stigma, as well as mechanisms for combatting these. More knowledge in this area would contribute to better informed campaigns and policies around benefits take-up.

Are there other questions you think the Committee should consider as part of this inquiry?

The Committee should consider how best to promote existing resources to people looking for advice on benefits, money and mental health. For example,

- <u>https://www.mentalhealthandmoneyadvice.org/scot</u>
- <u>https://www.supportinmindscotland.org.uk/mental-health-and-money-advice-line</u>