

Unsuccessful Employment and Support Allowance claims – qualitative research

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Employment and Support Allowance (ESA) was introduced in October 2008, to replace old incapacity benefits. It provides financial support and personalised help for people who are unable to work, because of a health condition or disability.

This qualitative study, commissioned by the Department for Work and Pensions (DWP), was designed to provide a detailed understanding, from a customer perspective, of the views and subsequent experiences of people who apply for ESA but whose claim is unsuccessful – either because their claim was closed by Jobcentre Plus or withdrawn by the customer before it was assessed, or because the customer was found Fit for Work and not entitled to ESA. Together, these groups make up 75 per cent of all ESA claim outcomes.¹

It is important to note that only customers who had not reported moving into work after their ESA claim ended – i.e. they had claimed another benefit, or were neither in work nor claiming benefits – are included in this research. In broad terms, the research explored why people withdrew their claims, or had them closed by Jobcentre Plus, as well as their activities and circumstances after the end of their claim. For those who claimed Jobseeker's Allowance (JSA), the research examined their views of the support they were receiving from the JSA regime.

Sixty people who had recently made an unsuccessful ESA claim were interviewed in March 2011 in two areas in the South East and West Midlands. They were broadly divided equally between the following four groups:

- found Fit for Work – went on to claim JSA;

- found Fit for Work – did not claim JSA;
- claim closed/withdrawn – went on to claim JSA;
- claim closed/withdrawn – did not claim JSA.

Making a claim for ESA

Triggers for an ESA claim came in two main forms: a worsening health status; and loss of another income source, whether through job loss, the ending of Statutory or Occupational Sick Pay, or loss of a partner's income.

The ESA claim was often initiated on the advice of, or with the assistance of, a Jobcentre Plus adviser; often following a referral from the individual's GP or healthcare professional, a letter from an employer around the end of Statutory Sick Pay, or on the advice of an advocacy agency such as Citizens Advice Bureau. In other instances, people were advised to look into claiming by family or friends. Customers generally reported feeling that the advice they received from Jobcentre Plus when making a claim to ESA was limited and often inadequate, leaving them confused about their situation.

ESA claim experiences

Most people reported that with hindsight, the early stages of their claim were fairly smooth. There was a lack of clear recall and inability to articulate the details of the initial ESA claim process amongst many, particularly regarding the sequence of events or particulars of any stage.

Customers who had a previous work background and whose health did not affect their ability to complete an ESA50 form found it reasonably straightforward and unproblematic. Those who struggled with

¹ http://statistics.dwp.gov.uk/asd/workingage/esa_wca/esa_wca_27042011.pdf

reading, writing, or whose health makes completing paperwork a problem, tended to report finding the process more challenging, but still not a major cause for concern.

The majority of customers who struggled with the ESA50 sought help from people close to them, such as friends or family, and occasionally assistance was received from professional organisations such as the Citizens Advice Bureau. However, for the most vulnerable people the questionnaire caused difficulty, usually because they had no-one they felt they could ask for assistance. In these cases, it could take a long time to complete and cause difficulties.

Some customers reported being deterred from continuing their claim by the ESA50 form. There was a general feeling surrounding the wider claim process that the amount of paperwork was excessive and correspondence was often poorly managed, particularly between different parts of Jobcentre Plus, resulting in duplicated or conflicting paperwork.

Communications with ESA departments could be frustrating, with difficulty in contacting staff over the phone who could answer questions about their claim.

Those who had expected to receive benefit, and had been told that they were not entitled, tended to be unhappy about this. Those who were claiming benefit for the first time tended to be most dissatisfied, both with the amount of benefit, and with the way they had been treated while claiming.

Customers who had attended a Work Capability Assessment (WCA) tended to express concerns about the nature of the assessment itself. These centred on the apparent absence of input into the WCA from Healthcare Professionals currently treating them, the reportedly 'tick-box' nature of the assessment process, and viewing the questions asked during the WCA as often unrelated to their condition.

ESA claims closed by Jobcentre Plus, or withdrawn by the customer

Most of the interviewees in this research whose claim had been closed or withdrawn before it was fully assessed said they had ended their ESA claim as their health condition had improved. Examples of

the types of conditions that had improved included diabetes, mental health problems including stress and depression and conditions alleviated by routine operations. These people tended to be working or looking for work, often in the same type of work as they had done before, though not commonly with the same employer.

Some had proactively withdrawn their claim, informing Jobcentre Plus of this, while others simply stopped submitting medical certificates or did not return their ESA50, in the knowledge this would prompt Jobcentre Plus to close their claim. Nobody interviewed consciously ignored an invite to a WCA as a means of closing their claim.

A smaller number of customers had their claim closed by Jobcentre Plus because they had difficulty completing and returning the ESA50, submitting medical certificates, or attending a WCA, even though they did not really want to end their claim. In some cases, this was because the customer's condition made co-operating with the assessment process difficult, while in others, other life events, such as bereavement, made it difficult for them to progress their claim.

Views on being found Fit for Work and appealing this decision

Some of those interviewed strongly disagreed with the decision to find them Fit for Work, while others accepted this to a greater or lesser degree, agreeing they were now able to work. Not all of those who disagreed with the Fit for Work decision had appealed.

The research sample excluded those awaiting an appeal outcome. Therefore, these views on appeals come from those who did not appeal, those who had been unsuccessful at appeal, and those who had withdrawn their appeal.

The view that it was 'pointless' to appeal was fairly widespread; some felt they were too far away from the threshold set for ESA; others felt 'powerless in the face of officialdom'; others did not see themselves as the kind of person who would appeal, or felt uncomfortable with appealing in some way.

For some people, their circumstances at the time, including their own ill-health, family illness, bereavement or homelessness, meant that appealing had not been a priority for them.

Some people who had withdrawn their appeal decided they could no longer carry on with it as it entailed several stages and an increasing amount of paperwork.

For some people, ensuring their immediate financial stability was the primary concern in making these decisions. The longer-term implications of moving from ESA to JSA were not always fully considered. Some people were also deterred by a misconception that appealing would leave them without benefit income.

JSA claim experiences

For some of those who had claimed JSA after being found Fit for Work, deciding to claim JSA was an ambivalent or anxious experience, as people needed to establish availability for work in order to secure an income, but sometimes had restrictions because of their health.

Some people felt unable to claim JSA at the point when they were found Fit for Work, as they felt unable to comply with the work search requirements of claiming the benefit. The availability of some other income source was also an important factor in these decisions.

Most of those moving from ESA to JSA were fairly indifferent about the general back-to-work support from Jobcentre Plus while on JSA, as they reported that they had received little individualised support that took into account their health problems.

Financial pressure

Many interviewees reported that they were under financial pressure because of recent changes to their household incomes, for example, because they had stopped working. In the worst cases, these pressures were very severe.

Financial coping strategies reported by those with working partners, but who were struggling financially, included borrowing money, spending savings, going without prescriptions and changing to interest-only mortgages.

A number of customers without working partners relied on family members, in the absence of any independent income. Some who had no family support lived solely on either other benefits (particularly DLA), or their own savings.

Post-ESA claim experiences and circumstances

This report attempts to draw together different facets of the claim experiences and characteristics of customers, to explore different motivations and rationales and the different types of support which might be helpful. More detailed information on these can be found in Chapter 4 of the main report. The typologies can be broadly described as:

- Marginal claims for ESA – who generally readily accepted their non-eligibility if found Fit for Work.
- Short-term recovery – some of whom left benefit of their own volition as their health improved and others who needed a trigger such as a Fit for Work decision to start actively seeking work.
- Reluctant claims to JSA – including those who felt that they had a work-limiting health condition and felt compelled to claim JSA for financial reasons, but did not feel able to discuss their health and therefore receive appropriate support.
- Cycling between benefits – those who had moved between incapacity benefits/ESA and JSA in the past and present, who tended to think of themselves as having very limited fitness for work.
- Not eligible for ESA payments – for financial or other reasons, some of whom accepted their position and others who did not understand their ineligibility. Some were receiving National Insurance credits but no payments, as they were claiming Income Related ESA but the level of their household income meant they were not entitled to any payments.
- Vulnerable customers – including those who seemed to be potentially eligible for ESA but, because of their condition or lack of information had not appealed when found Fit for Work. Some of these people were socially isolated.
- Outside the system – including those being supported by (for example) another family member, but also those in what appeared to be unsustainable financial circumstances.

Future expectations of work

Interviewees generally had an expectation that they would return to paid employment of some kind in the future. Some were hoping to build up slowly to full-time work. Interviewees commonly described patterns of boredom and isolation in their daily lives, due to their unemployment and lack of money.

Those who had closed or withdrawn their claim and had immediately moved on to JSA seemed closest to the labour market and motivated to get into work. Interviewees who had been found Fit for Work and who had gone immediately on to claim JSA were also motivated to look for work, however, they were somewhat more inclined to view their health as a barrier to work.

Customers who closed or withdrew their claim and were not claiming JSA tended to consider employment for them as something further in the future. Those who were found Fit for Work but did not claim JSA were generally less positive about their job prospects; they thought it would be difficult to move into work for a range of reasons, and some found it difficult to stay motivated.

Conclusions

An important reason why ESA claims in this sample were withdrawn or closed before they were fully assessed was because the person recovered and either returned to work, or claimed a benefit more appropriate to their situation.

At present some people in receipt of JSA are seemingly diverted onto ESA by personal advisers when a limiting health condition becomes apparent. A better understanding of the qualifying threshold for ESA might potentially discourage some of these claims.

Many people were confused about the current situation with their ESA claim and did not know where they stood.

The research found that some people are likely to be vulnerable and unable to access appropriate support, both in order to make an initial claim for benefit and to comply with the ongoing requirements of the benefit.

There are some people who fail to meet the threshold for ESA entitlement who nonetheless find it difficult to establish a JSA claim and comply with the requirement to be actively seeking work due to health reasons.

Some customers described moving between JSA and ESA relatively frequently, over both the shorter and longer-term. This meant the back-to-work support they were receiving was fragmented and rather inconsistent.

People who were claiming JSA and had ongoing health issues generally reported that they were not receiving the support they required, which took into account their health condition whilst also helping them to move back into work.

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The full report of these research findings is published by the Department for Work and Pensions (ISBN 978 1 908523 05 1. Research Report 762. July 2011).

You can download the full report free from: <http://research.dwp.gov.uk/asd/asd5/rrs-index.asp>

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