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Structural Inequalities and Food Insecurity Series

Briefing Note #2: Structural Inequality, Disability and Food Insecurity

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Abstract

Disabled people are disproportionately likely to be affected by poverty and also to require help from food banks. There are many reasons why disabled people fall into poverty and become exposed to hunger and food insecurity, with very little or no certainty around the affordability and accessibility of food on a regular basis. New analysis from the House of Commons Library shows that in 2020, not only was the relative poverty rate for individuals in a family where someone is disabled as high as 31% [1], but that from 2010-2020 families where someone is disabled, and in receipt of Universal Credit or equivalent benefits suffered a real terms cut of £676 (before housing costs) in their annual income. This is compared to families with no disabled members, and not in receipt of Universal Credit or equivalent benefits, who saw a real terms increase of £416 [2].

This briefing note makes recommendations based on the combination of written submissions from experts by experience, food bank managers and third sector workers alongside a webinar session held with 139 delegates in February 2021. It finds that existing structural inequalities and government policies around social security payments, assessment processes, and underfunding of services have reduced the incomes of disabled people over several years, forcing many to rely upon food banks. These issues with the social security system must urgently be addressed to eliminate the need for emergency food aid in the UK. The recommendations made include; the reassessment and uprating of benefits for disabled people based on the cost of living, reform of disability benefit assessment procedures, tailored legislation to support disabled people to work and seek work, and a commission (or at least consultation) of disabled people on disability equality policy to tackle food insecurity.

Introduction

In February 2021, the Independent Food Aid Network (IFAN), Feeding Britain, and the University of York ran a joint webinar and call for evidence on food insecurity and its disproportionate impact on disabled people in the UK. We heard from experts by experience, food bank managers and other third sector workers on disabled people's food insecurity experiences and how

these experiences have been shaped by existing structural inequalities in our society - both before and during the Covid-19 pandemic.

The frustration that disability inequality not only still exists but continues to be sufficiently powerful to expose disabled people to hunger and food insecurity, was strongly evidenced in the testimonies we heard and received. As with many areas of disparity in our society, the Covid-19 crisis has thrown new light on deep-seated disability inequality that has long existed. As food bank use soared to new levels over the last year [3], IFAN, Feeding Britain, and the University of York sought to understand the intersection of the food insecurity experiences of disabled people and existing structural inequalities in our society through a focus on three main questions.

1. How does disability shape experiences of being able to afford and access food?

Poverty and destitution are the root cause of the need for emergency food aid in the UK [4], and the evidence that disabled people are among the poorest members of society is stark [5]. Two in three (66%) households referred to a Trussell Trust food bank in early 2020 included at least one disabled person [6]. The recent Mental Health and Income Commission's 'Mind the Income Gap' found that the annual median income for people with common mental health conditions is estimated to be £8400 less than that for the wider population [7]. Ed Hodson of Coventry Citizens Advice, a member of the Feeding Coventry network, informed us that, locally, 59% of people requiring help from food banks in 2020 were either disabled or had a long-term health condition. Among this group, 38% had poor mental health, 30% had multiple impairments, and 20% had physical impairments. Elsewhere, from Feeding Devon, we heard that,

'throughout our rural isolated area we have a lot of young people who have developed mental illness such as severe anxiety, agoraphobia, depression, and suicidal thoughts. They have not been seen by any mental health teams [...] we are getting these reports through our food box support'.

Particularly stark was the evidence we received from Dr Steffan Evans of the Bevan Foundation. Data published just before the pandemic showed that nearly 1 in 4 people in Wales were living in poverty and that nearly half of those in poverty – approximately 330,000 people – were living in a family with at least one disabled member [8]. With the effects of the pandemic, incomes in Wales have fallen for many individuals and families, but the effect of this has not been evenly felt. For example, while approximately 11% of people in Wales have cut back on food for adults, among disabled people, this doubles to 22% [9]. Similarly, 16% of disabled people have fallen behind on bills compared to 4% of non-disabled people [10]. This picture is reflected in the rest of the country; the Joseph Rowntree Foundation estimates that of 14 million people in poverty in the UK, 7 million people are either disabled or live with a disabled person [11].

'Throughout our rural isolated area we have a lot of young people who have developed mental illness such as severe anxiety, agoraphobia, depression, and suicidal thoughts. They have not been seen by any mental health teams...'

There are many reasons why disabled people so often fall below the poverty line. Unemployment and underemployment, fixed incomes that do not respond adequately to the cost of living (especially after a four-year benefits freeze), higher living costs and care needs all impact the ability of disabled people to build the necessary financial resources that would protect against financial crisis and the need to use emergency food aid. Among the extra living costs are food that meets specific dietary requirements, medication, travel, heating, housing adaptations, and care. When someone is on an income so small that it is impossible to build savings, as expressed by Mary Collier of Reaching People in Leicester, 'even a low-cost expense can trigger a financial spiral.' Indeed, disabled people's access to food appears most vulnerable to any change of circumstance or income, triggered by new benefit processes and forms, as well as new timetables or a broken cooker or fridge, for example.

Reaching People – a member of the Feeding Leicester network which delivers ‘Pathways From Poverty’ with clients from four Leicester food banks – have found that disabled people constitute the majority of their clients. More than 60% of people they have supported through ‘Pathways From Poverty’ reported health issues that contributed to financial hardship. They observe that, just as disability inequality produces insufficient incomes that can easily push disabled people into financial crisis, there are also significant barriers for disabled people in accessing the support needed to lift themselves out of poverty. A lack of form-filling and advocacy help, and with many financial support agencies only available in city centres with inaccessible or unaffordable public transport, it is far more likely that a disabled person would need to turn to emergency food aid.

The growing digital divide is another barrier in equal access to information and advice. The closure of libraries and job centres in the pandemic, Mary Collier reported, often removed the only digital access clients at Reaching People in Leicester had. Being able to access online information and address financial issues independently is made much harder by the unaffordability of IT equipment and broadband and lack of IT skills and confidence. This creates a digital divide that has been further exacerbated by the drive for benefit applications to be made and managed online. Additionally, if financial support is not person-centred and meaningful, it is increasingly difficult for disabled people to access the support they need – and the numbers reflect this. Half of adults in problem debt, for example, also have a mental health problem and people with severe mental illness are 2.3 times more likely to experience money or debt issues than those without a severe mental illness [12].

Even before the pandemic, statistics from the Family Resources Survey for 2019-2020 have found that 19% of households with one or more disabled adults have marginal, low or very low food security, compared to 10% of households with no disabled adults [13]. It is within this context that Shirley Widdop, a disabled lone parent and participant in the Covid Realities Project described the experience of the sudden emergence of the pandemic as feeling like ‘survival of the fittest’; she explained,

‘you go to the supermarket and the shelves are empty and if you can’t get there in time you miss out on things you and your household need.’

She found that her weekly budget for food was suddenly no longer enough, with the combination of rising prices and the minimum spend and delivery fees that she was made to pay whilst shielding from the virus.

This sense of 'survival' over dignity and choice was also observed by another (anonymous) food bank worker, saying, 'we continue to skirt around the issue of nutrition and to give out survival rations.' For disabled food bank clients, who may have specific dietary requirements, there is limited choice due to the nature of relying on donated food for survival. Food banks are not an alternative to adequate health and social care, and the limits of this support were outlined by another food bank manager who described that, when delivering food parcels in order to keep volunteers safe from Covid-19, they were unable to enter people's homes and 'help lift things onto counters', which disproportionately affected disabled clients; 'This is not something we are happy with', the food bank worker explained.

However, with little regulation over supermarkets, the marginalisation of disabled people's needs leaves little surprise that so many need to turn to food banks. One disabled food bank volunteer found that priority shopping slots at supermarkets often took place very early in the morning; 'I struggle with pain and mobility issues in the mornings and just cannot get to the shops early in the day.' Instead, necessity dictated using out-of-date food from the food banks 'to keep my personal food stocks viable.'

'We continue to skirt around the issue of nutrition and to give out survival rations.'

These experiences seem to be common. A voluntary survey conducted by the Disability Benefits Consortium found that 67% of 1,400 respondents had gone without essentials at some point within the first 10 months of the pandemic. Additionally, 44% had been unable to meet their financial commitments [14].

As Marc Francis of Z2K states:

‘the pandemic has made a big impact on disabled people’s ability to keep their head above the breadline...more people have needed to rely on food banks or having to make the impossible choice between eating or heating their homes over the winter months.’

We know that there is a direct link between poverty, disability and people’s ability to afford food. We also know that disability can be a determining factor for falling into financial crisis, and shape how an individual experiences food insecurity. The second question (below) asks how these trends have been created and exacerbated by government policy.

2. How do Government policies create and exacerbate disability inequality in terms of being able to afford or access food?

A

Welfare reform agenda

The Coalition government’s programme of welfare reform, launched in 2010, is an important marker in understanding how and why social security benefits have failed to provide people who are unable to work with a dignified and financially stable life. While there were significant issues with the social security system in the UK preceding this, it was the caps on local housing allowance, the under-occupancy penalty (widely known as the ‘bedroom tax’), the benefit cap, and the removal of the discretionary social fund that have had a particularly detrimental impact on disabled people.

New analysis by the House of Commons Library shows that in the decade between 2010 and 2020, families with at least one disabled member and in receipt of UC or equivalent benefits suffered a real terms cut of £13 before housing costs, and £12 after housing costs, in their weekly income. This equates

to cuts of £676 and £624 respectively in their annual income [15]. In contrast, families where nobody is disabled, and not in receipt of UC or equivalent benefits, saw a real terms *increase* equating to £416 and £728 respectively in their annual income [16]. Disabled people's income was disproportionately impacted over this period. From 2010 to 2020, poverty rates after housing costs fell by one percentage point, to 19%, for individuals in a family where nobody is disabled, but increased by two percentage points, to 31%, for individuals in families where someone is disabled [17].

Since 2015, the freeze on working age benefits, including Employment Support Allowance (ESA), and the removal of the Work Related Activity Group element from ESA claims have driven many disabled people below the poverty line and towards food bank use. These policies lie at the heart of disability inequality and food insecurity.

B

Disability assessment and appeals process

The complexity of the social security system, in particular the eligibility criteria, application, assessment and appeals process can be overwhelming for the person navigating them. Based on experience with clients as part of the Feeding Leicester project, Mary Collier emphasised how the assessment process of the Universal Credit Work Capability Assessment and disability benefit process - particularly for Personal Independence Payment (PIP) - 'has been found to be extremely superficial and a huge source of anxiety for clients who were not given the opportunity to fully share information relevant to the impact of their condition on their daily lives.'

Tribunal statistics show a consistently high rate of success at appeal for PIP, indeed approximately 73% of decisions taken to appeal are overturned in favour of the claimant [18]. Yet there is usually longer than a year taken between claim and tribunal decision. Furthermore, many other claimants are unable to access the support to challenge an unfair decision in the first place or endure the stress that this process entails. Shirley Widdop's experience of the assessment and tribunal processes reflected this, throwing her into a period of financial crisis leading to:

'borrowing off friends, family, credit cards, and moving further into debt.' 'Nobody minds being assessed for what their needs are, as long as this process is fair, valid and reliable. For me, that has not been the case.'

One individual recounted feeling 'like a criminal being cross questioned' at her tribunal, where she lost use of her mobility car. The complexity and culture of the assessment process often precludes disabled people from claiming their entitlements. A food bank worker from West Yorkshire wrote about a 50-year-old man with a learning disability who had been living alone since the death of his mother. The fear and anxiety that he would lose his benefits or had 'done something wrong' prevented him getting the help he needed, causing further isolation and a worsening situation. A survey conducted by Z2K in April 2021 reflects these experiences; of 1,420 respondents, 70% felt that "the assessor DWP contracted to carry out their assessment did not understand their condition [19]."

The fear and anxiety that he would lose his benefits or had 'done something wrong' prevented him getting the help he needed, causing further isolation and a worsening situation.

The issues at the heart of the disability social security system have been endured by disabled people for many years. All too many disabled people, and others with long-term health conditions, are struggling to access their benefit entitlement without support. We received evidence to suggest that assessments are a source of great anxiety and that the process can feel superficial, with people finding it difficult to share fully the information that is felt to be relevant to their claim, and initial decisions not reflecting the reality of everyday life and the challenges it presents claimants.

The impact of this failure on disabled people is both financial and psychological, with lengthy appeals processes and little consistency between some decisions being overturned at the first appeals hurdle and others taking longer, with people facing up to a year of hardship, anxiety, and distress to appeal successfully against an incorrect decision.

Yet, still no meaningful change has been made. As long as disabled people are subject to this kind of assessment regime says Marc Francis of Z2K, 'they will continue to find themselves losing the benefit that parliament says they are entitled to.' No reform should be considered off limits in an attempt to get as many initial decisions as possible correct after an initial assessment.

C

Legacy benefits and exclusion from Universal Credit uplift

Disabled legacy benefit claimants have faced multiple challenges during the Covid-19 pandemic, challenges which have been exacerbated by their exclusion from the £20 a week uplift to Universal Credit. There are 2.2 million 'legacy benefit' claimants, three-quarters of these are disabled people on Employment Support Allowance [20]. As summarised by Ed Hodson of Coventry Citizens Advice, it needs to be recognised that:

'those most affected by the government's decision not to uprate legacy benefits are not those who haven't yet migrated to Universal Credit from ESA because their circumstances haven't changed sufficiently to warrant a new claim, but the disabled people who have been left until last to migrate to Universal Credit because their claims are likely to be so complex and migration so fraught with risk to the claimants themselves.'

No justification has been given for this decision which discriminated against many already experiencing higher rates of inequality and poverty. Notably, in April 2021, following legal action by two disabled people represented by Osbornes Law, the High Court granted permission to challenge the DWP's decision not to increase their benefit in line with Universal Credit [21]. A decision on this is set to take place later in the year.

In addition to failures in the social security system on a national level, failures in local public services and decisions made by local authorities have also detrimentally impacted disabled people across the country. Disabled people rely on public services, such as public transport, more than the wider population, yet public transport is under-resourced and too expensive for many people to use [22]. In a similar vein, the lack of adequate social housing means that many people are living in the more expensive private rental sector, facing additional stress around the possibility of eviction [23]. Putting money back into people's pockets through improved transport services and social housing could ease the pressures pushing many people into financial crisis.

3. What can be done to confront structural inequality in the face of an increasing need for emergency food aid disproportionately impacting disabled people?

The below recommendations in response to this question are based on the combination of written submissions from experts by experience, food bank managers and third sector workers alongside our webinar session. Whilst this list is not exhaustive, these recommendations would contribute towards maximising the financial resources of disabled people, preventing a spiral into financial crisis and food insecurity.

- **Reassess and uprate benefit rates for disabled people based on the cost of living**

It is clear that incomes received by many disabled people are too low to build adequate financial resources and to be able to afford the essentials for themselves and their families with choice and dignity.

One food bank manager in Devon wrote about their experience of supporting a deaf elderly woman with mobility issues, whose pension barely covered her basic expenses. Forced to choose between food and heating her home she was very underweight, living mainly off 'toast and cake'. The woman had 'no idea how she will manage and she gets weaker and weaker, isolated through deafness and unable to use a phone – the Aid call button is her only means of communication and she lives in fear and anxiety every day'. Why, asks the food bank manager, is a food bank expected to try and put together the help she needs; 'Surely this should be a social prescription?'

- **In the meantime, the £20 a week uplift in Universal Credit must be retained and extended to legacy benefits**

Doing so would allow disabled people on Employment Support Allowance – 75% of the 2.2 million 'legacy benefit' claimants – access to their 'lifeline' that has helped millions of people to afford basic essentials throughout the pandemic [24].

Following legal action, the High Court has granted claimants of ESA permission to challenge the DWP on their decision to not provide the same uplift given to those on Universal Credit. This represents a significant step in the campaign to correct the 'two tier' social security system created through excluding disabled recipients of ESA, with this case to be decided on later in the year [25].

- **Removal of the benefit cap and 2-child limit**

The two-child limit and benefit cap have disproportionately affected families with children. It is estimated that as of April 2021, at least 350,000 families and 1.25 million children in the UK are affected by the two-child limit – a figure which includes many disabled parents and children [26]. As with the wider population, the pandemic has had an adverse effect on family budgets for disabled people. A Disability Benefit Consortium survey of 224 legacy benefit claimants found that almost all (95%) had increased costs as a result of the Covid-19 emergency [27]. The perpetuation of these measures throughout the pandemic, especially considering the additional expenses of living with a health condition or disability, further impacts the financial resilience of disabled people and should be removed [28].

- **Provide disability benefit awards for a longer duration than the usual current 2-years in what are long-term conditions**

This would give the claimant both greater financial security and minimise the anxiety and distress of frequent reapplication and reassessment.

- **A reappraisal and reform of disability benefit assessment procedures; including shortened time frames for decision challenging processes, and the immediate introduction of an automatic right to recorded assessments for all claimants**

Disability benefit assessments are not currently fit for purpose, whether this is the work capability assessment itself or assessments for the Personal Independent Payment. Too many people are having their benefit claim denied, taken away in reassessment, or put through a long and stressful reassessment and tribunal process. Countless times before, disabled people have voiced their concerns and experience of stressful and marginalising assessment procedures. What is needed, as summarised by Marc Francis (Z2K), is 'a fundamental reappraisal of the philosophy within the Department for Work and Pensions.' This being the belief, at a default level, that people are 'swinging the lead' and therefore need to be weeded out. Instead, assessments must be undertaken by staff who have a full understanding of how different disabilities can impact the support someone requires.

What is needed is 'a fundamental reappraisal of the philosophy within the Department for Work and Pensions'

Staff should be fully committed to making this assessment a meaningful and person-centred opportunity for the client to share their experience. And the risk of application/claim failure should be moved onto the State and away from the claimant.

One delegate at our evidence session commented that: 'Over the past four years I have attended three tribunals for PIP, one going to the upper tribunal and I have to say I was embarrassed about the whole process. From lies by the assessor, I attended one assessment and the report bore little resemblance to the actual event, through to Tribunals officers who seemed set to prevent benefit payment (the role of the Tribunals officer used to be friend of the court and designed to ensure all aspects were considered).'

- **Support for disabled people to work and seek work, through tailored legislation such as a 'Disability Industrial Policy'**

The government must ensure that disabled people who are seeking employment opportunities are provided with high quality, person-centred and meaningful support in their search for work. As work patterns are shifting after the pandemic, it must be ensured that disabled people can take advantage of modern trends such as working from home, while still protecting against the assumption that this approach is suitable for everyone.

Access to Work grants and reasonable adjustments under The Equality Act of 2010 should be sufficiently promoted and easily available and there should be a mandate for all employers to follow a disability access procedure for all new recruitment (to be followed by disability worker training, supervision and retention procedures) to verify good practice.

Whilst support to work is important it must be remembered that there are many people, including disabled people, who are both in work and below the poverty line. We believe there is an important role for flexible employment guarantee programmes, built on the same principles as Kickstart, to ensure all disabled people looking for work are protected from long-term unemployment.

- **Funding for social welfare advice and advocacy services, including debt advice**

This support should be available in local communities at accessible venues. It is vital that debt advice is included in this support if links between long term disability, debt and mental health are to be addressed.

- **Investment in universal basic services such as transport and social housing**

Putting money back into people's pockets through improved transport services and social housing could ease the pressures pushing many people into financial crisis and provide disabled people with more flexibility.

- **A 'cash first' approach to food insecurity**

Where 'cash first' approaches have been prioritised as a response to food insecurity, disabled people have benefitted from an increase in resources at their disposal. For example, in 17 of the 22 local authorities in Wales, cash was given in lieu of free school meals. For disabled people, this allows freedom to shop locally where transport access can be limited, allowing for choice and flexibility [29]. Income maximisation strategies can also help prevent an overreliance on donated or surplus food to tackle food insecurity. As expressed by one food bank worker: 'We cannot let that become an acceptable way to feed sectors of our society, including a disproportionate number of disabled people and people with mental health issues. What does it say about how we value [disabled] people?'

- **A 'green paper' on health and disability**

The DWP's assessment processes and decision-making for Employment Support Allowance, Universal Credit, limited capacity for work and Personal Independence Payment need fundamental reform. Ministers have been promising a Green Paper on Health and Disability, including with proposals for that reform, for the past two years. But we are still waiting and each year we wait, tens of thousands of disabled and seriously unwell people are wrongly denied the financial support they need to live on and meet the additional costs they incur. The Government must now prioritise publishing this Green Paper and listen to the voices of disabled people during the consultation phase.

- **A commission - or at least consultation - of disabled people on disability equality policy to tackle food insecurity**

It is imperative that disabled people are at the heart of decision making on the design and delivery of government and private sector policies that affect them the most – for instance, policies surrounding supermarket access for disabled people. For change to be meaningful, disabled people and grassroots organisations should be listened to. ‘What is upsetting me’ said Shirley Widdop at our joint webinar session, ‘is that I have already given evidence to APPG poverty groups back in 2018 and 2021. It’s time to stop talking about things and to start implementing policies that will ensure everyone is fed.’

Conclusion

All too many disabled people are placed in a disadvantaged position by inadequate incomes from the social security system, barriers to applying for, and retaining, social security payments, and limited access to employment.

This makes it exceedingly difficult to retain the necessary shock absorbers in household budgets that can effectively prevent financial crisis and food insecurity. Ed Hodson from Coventry Citizens Advice argues that ‘Only a fundamental re-

orientation of the failing “safety net” can reverse a situation which worsened with the pandemic, and will worsen still once the pandemic is over.’

All of the above recommendations would contribute significantly towards maximising the financial resources of disabled people, preventing them from falling into poverty and food insecurity. They reflect the calls on major issues that the disability equality and anti-poverty movements have been making for years. The percentage of disabled people below the poverty line who rely on food banks is disproportionately high. Emergency food aid is not a solution to poverty and, despite their incredible levels of care and dedication, food bank teams cannot be relied upon to fulfil the role of underfunded health and social care services. Eliminating hunger and the need for emergency food aid is essential to achieving a fairer society, and it is not possible to accomplish this without meaningfully tackling the extent of the UK’s disability inequality and the poverty it produces.

Acknowledgement

We would like to thank everyone who participated in the webinar and all the individuals who submitted evidence from their own experience before and after the event. We would also like to thank the panellists Mary Collier (Feeding Leicester), Dr Steffan Evans (The Bevan Foundation), Marc Francis (Z2K), and Shirley Widdop (Covid Realities Project Participant) and chairs Dee Woods and Chris Stephens MP, without whom the webinar and this accompanying briefing note would not have been possible.

For further information please contact admin@foodaidnetwork.org.uk

Endnotes

[1] Before housing costs.

[2] <https://www.gov.uk/government/collections/households-below-average-income-hbai--2>

[3] <https://www.foodaidnetwork.org.uk/ifan-data-since-covid-19>

[4] 94% of people referred to Trussell Trust food banks met the definition of 'destitute'. <https://www.stateofhunger.org/wp-content/uploads/2019/11/State-of-Hunger-Report-November2019-Digital.pdf>

[5] Data from the Food Foundation has found that "people with severe disabilities have five times greater levels of food insecurity than those without" https://foodfoundation.org.uk/wp-content/uploads/2021/03/FF_Impact-of-Covid_FINAL.pdf

[6] <https://www.trusselltrust.org/wp-content/uploads/sites/2/2021/05/State-of-Hunger-2021-Report-Final.pdf>

[7] <https://www.moneyandmentalhealth.org/mental-health-income-gap/#:~:text=The%20second%20report%20from%20the,it%20shows%20that%3A&text=When%20people%20with%20mental%20health,in%20accessing%20higher%20paid%20jobs>

[8] <https://statswales.gov.wales/Catalogue/Community-Safety-and-Social-Inclusion/Poverty/peopleinrelativeincomepoverty-by-whetherthereisdisabilitywithinthefamily>

[9] <https://www.bevanfoundation.org/wp-content/uploads/2021/02/Differing-Experiences-of-Poverty-in-Winter-2020-1-1.pdf>

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- [28] <https://disabilitybenefitsconsortium.files.wordpress.com/2021/01/appg-on-poverty-2021.01-submission-by-dbc-v3-final.doc>
- [29] For more on how increased income has a measurable effect on children's outcomes, see: <http://eprints.lse.ac.uk/103494/1/casepaper203.pdf>