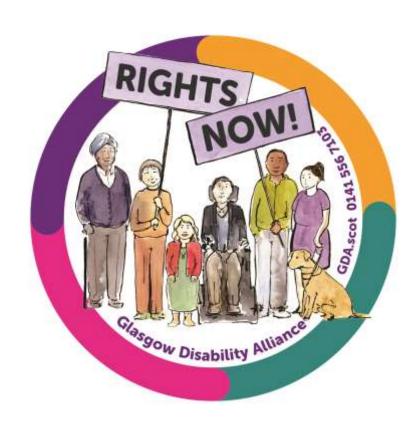
Glasgow Disability Alliance

Adult Disability Payment – Mobility Component Consultation Response





Glasgow Disability Alliance

Adult Disability Payment: Consultation on the Mobility Payment

About our organisation

GDA is a disabled people-led organisation (DPO) controlled by our 5500+ disabled members. We are the largest groundswell of disabled members in Europe and a leading, celebrated example of a grassroots community of identity driving improvements to disabled people lives in parallel with wider changes to policies, services and society.

Our vision is a world where disabled people participate fully and lead our own lives with our human rights upheld, connecting with peers and opportunities; contributing to families, communities and wider society on a full and equal basis alongside non-disabled people.

Our mission is to promote equality, rights and social justice with and for disabled people and we do this through programmes which build confidence, connections and capacity of disabled people. Indeed, GDA is built on foundations of individual and collective community empowerment, and based on peer support, developing and drawing on disabled people's own strengths by:

- ✓ Building individual capacity through holistic programmes including learning & development, wellbeing, digital coaching and connections, support to navigate Social Care and provision of welfare rights information, advice and representation through Rights Now.
- ✓ Amplifying diverse voices & perspectives of disabled people, supporting them to articulate and shared lived experience, building capacity to participate in dialogue, deliberation and collective advocacy which challenges inequality and exclusion.
- ✓ Collaborating for change with local and national government, communities and third sector, sharing insights and evidence and translating grassroots lived expereince to shape policy and co-design more accessible services and solutions to poverty, inequality & exclusion.

Over the last 3 years, GDA has transformed our delivery model to respond to the urgent and pressing needs of disabled people. Programmes are now all available online, by phone and in person.



Consultation Event

This response was informed by the lived experience of GDA members, disabled people who have a range of impairments and conditions including those with physical impairments, mobility impairments, people who are neuro-diverse, those who have learning difficulties, disabled people who are blind and deaf or who have visual or hearing impairments, people who experience mental health conditions and distress and people who have experienced head injuries among others. The age ranges were from 17+ - 65.

65 disabled people attended a specific online event, held in April 2023, including members representing the views and experiences of younger disabled people, Black, Asian and minority ethnic disabled people and LGBT disabled people.

This response also draws on GDA's significant dialogue and intensive engagement and supports with and for disabled people over two decades, most notably over the duration of building SSS which GDA has been closely involved with. The Report therefore draws on the lived experience shared by thousands of disabled people and reported to us.

1. Do you agree or disagree that the moving around activity criteria for Adult Disability Payment are easy to understand?

Agree / Disagree / Don't know

1(a). Please give reasons for your answer, outlining which parts you think are easy or difficult to understand and why.

GDA members had difficulty both imagining the distance and understanding why this would be used as a way of measuring their some mobility as it is arbitrary and one dimensional.

The 20 metre rule was reported by respondents as hard to visualise or to equate to in their daily lives and journeys.

For example, some disabled people reported being able to walk to the end of their street some days and were unsure of what this distance would equate to. On the other hand, other people described being able



to walk certain distances some days, but on other days they were unable to leave bed due to pain and / or fatigue. In particular, for those with fluctuating conditions, members found it hard to see themselves fit neatly into these criteria.

In addition, other members felt it was misrepresentative and indeed unfair to say they were able to walk 20 metres because of the impact of walking either while they were walking or afterwards.

Multiple people described walking with symptoms including constant pain, muscle spasms, fatigue, burning, heaviness, incontinence and some people described being unstable, particularly on surfaces like stones or gravel.

Others described being able to walk but as a result were in bed with pain or fatigue or unable to leave the house due to physical exhaustion or mental ill health after.

"You can't just fit us into these wee boxes – we're real people with changing needs and abilities. Why does it feel like we need to prove ourselves to get the smallest bit of support?"

"I would struggle to tell you how far 20 metres is but I can tell you I struggle to make it to the toilet some days by myself"

"I feel like I'm constantly repeating myself, describing the pain, the fatigue, how it will affect me the next day – technically I can do these things but I'll be in bed with the pain for days after"

"I can manage to walk 20 metres but need a stick or someone to hold onto- this can even be in the house"

1(b). How could we make the moving around activity criteria easier to understand?

GDA has found from disabled people's self reports, that it is easier for someone to discuss how far they can walk in terms of something that is tangible to them. For example, the length of their hall in their home or to the end of the street.

In addition to being easier to understand, more importantly, these distances more accurately represent people's ability to live their lives and be in their community, leave their home or their street.



It would be more effective to ask someone to describe *how* they move around including consideration of all the related factors – e.g. fatigue, pain, continence, balance, anxiety, sensory issues, risks of falling and extreme anxiety.

GDA members call for the 20 metre rule in the mobility descriptor to be removed immediately and the SSSA should take into consideration the additional factors involved in 'moving around' i.e. the impact or the expereince *while* walking: a more useful question is definitely how far or how long can you walk without pain / discomfort / consideration or fear of the effects of walking? Furthermore, disabled people collectively felt that the measurement of 20 metres is not only unreliable and meaningless but it flies in the face of the values set out by SSS of dignity, fairness and respect.

2. Are there any other issues with the moving around activity that we have not captured above?

Yes / No / Don't know

2(a). If you said 'yes' what other issues with the moving around activity do you think need to be considered?

Relying on measureable distances was felt to be an ineffective and therefore not a sensible way of understanding someone's mobility or related needs. GDA's view is that the most appropriate way to assess eligibility for mobility assistance is to revert to the original DLA self-assessment questions around how far or how long someone can walk without pain / discomfort / consideration of the effects of walking. It would be more effective to ask someone to describe how they move around including consideration of all the related factors — e.g. fatigue, pain, continence, balance, anxiety, sensory issues, risk of falls and so on.

In addition, GDA have consistently raised concerns that the moving around criteria might not work for people with a progressive or changeable condition or disability, such as heart disease, asthma or multiple sclerosis. This is particularly important in conditions that may impact people less than 50% of the time, which is denoted as the bench mark for measuring the impact of fluctuating conditions within ADP, which we will comment on further later in this response.



Indeed, several GDA members highlighted that the criteria is one problem but even moreseo is that the questions are open to interpretation, dependent on how they are asked, how they are assessed and understood. It is therefore critical to make sure that assessors have the right training and support.

2 (b). In your view, what are the positive aspects of the moving around activity that we have not captured above?

Some disabled people reported that the visual aids and images in the form are helpful to increase understanding of the criteria, although many still struggled.

Some members found it helpful to specify the difference between aided and unaided movements although others described needing the support but not getting it limiting their ability/ capacity to go anywhere.

3. How effective do you think the moving around section of the application form is at helping us understand a person's mobility needs?

Very effective / effective / somewhat effective / not very effective / not effective at all

Please give reasons for your answer- see answers already given.

The form does capture impact "how you feel" which is positive but the position of continuing to capture distance renders this less helpful than it otherwise could be.

Scotland is unfortunately hampered by inheriting descriptors and the points system devised by a right wing rather than rights based ideology. The section of the form dealing with moving around will elicit some information but is extremely limited and continues to present challenges.



4. What impact do you think the changes to how we make decisions on the moving around activity have on understanding a person's mobility needs?

Significant positive impact / a **positive impact** / neither positive nor negative / a negative impact / significant negative impact

Please give reasons for your answer

While GDA members welcome the changes made to how the moving around criteria are described within the ADP application form, concerns remain about the criteria themselves and how these are interpreted by assessors.

5. If there was an opportunity to change the moving around activity criteria, what changes would you make (if any)?

ADP has taken PIP as a starting point rather than DLA, despite PIP replacing DLA during a period of harsh welfare reform. There are still people in Scotland on DLA, as such there will be new ADP claimants who will get a lower award than those already on DLA with comparable conditions. We are also concerned that some people will lose out when moved from DLA to ADP as a result, either having their mobility award lowered or losing it all together.

As mentioned above, GDA urge Social Security Scotland to scrap the 20 metre rule and put measures in place to ensure assessors take into account more meaningful factors such as the impact of movement on people.

Disabled people unanimously agree that the 20 metre rule is a meaningless and arbitrary measure of mobility,

"So I might be able to walk a few steps more than 20 metres one day but not the next. Or manage in one direction but not the way back – this is bonkers!"

As mentioned above, GDA members felt it would be more effective to ask someone to describe how they move around including consideration of all the related factors and impact, for example: fatigue, pain, falling, continence, balance, anxiety and sensory issues.



5(a). If you proposed changes, what positive impacts could these have, and for who?

The above proposed changes, would allow disabled people to more accurately reflect their ability to move around in assessment forms, the first time round. It would also more accurately represent disabled people who have fluctuating conditions, for example MS, asthma, fibromyalgia and their ability to move around safely, comfortably and without detrimental impact.

GDA members spoke about having to 'tick boxes' and the anxiety of trying to make complex conditions fit into criteria that does not represent them. Inevitably, even with the best intentions in the world, criteria inherited from a system which has caused trauma and hurt to disabled people was always going to have reverberations.

A more person-centred approach to moving around criteria would alleviate anxiety and concerns that disabled people have towards the process and feel more seen and believed.

5(b). If you proposed changes, what negative impacts could these have, and for who?

N/A

6. Do you agree or disagree that the planning and following journeys activity eligibility criteria is easy to understand?

Agree / **Disagree** / Don't know

6(a). Please give reasons for your answer, outlining which parts you think are easy or difficult to understand and why.

GDA members broadly found the planning journeys criteria easier to understand than the mobility criteria and this was a welcome change from previous forms.

However there were still residual concerns about how the criteria could be interpreted.



Many members felt that the criteria does not take into account individuals who may be able to plan and follow a journey, but need companionship to make a journey comfortable or bearable, but perhaps would not describe it as "overwhelming psychological distress" for example for those with dyspraxia, dyslexia or anxiety.

Disabled people said they were also confused why being unable to undertake any journey due to psychological distress (e) is awarded less points than being unable to follow the route of a journey without another person, assistance dog or orientation aid (f), when in both cases the person is unable to leave the house without and aid or assistance. This seemed illogical and disabled people reported being confused by this.

Some members also said that they may eventually be able to undertake a journey unaided after several practice tries with someone helping them. As such this preparatory work to be able to travel independently should be considered when assessors are interpreting the criteria to reflect an individuals' needs.

Moreover, having discussed this with members indepth, there were reflections that the questions in the form do not seem suitable or adequate to drawing out information needed for points to be awarded e.g. if you require prompting before you leave the house (b).

We understand that points would be awarded if another person was required to assist undertaking a journey if an impairment meant the individual would get disorientated or lost without it. However, we feel that if prompting and/or companionship is required to undertake a familiar or unfamiliar journey then this should be enough for 12 or 10 points to be applied respectively.

"They don't realise how quickly the familiar can become the unfamiliar, and the anxiety and disorientation this can cause"

"For me to go somewhere, I have to learn all the routes, I have to go several times with my partner on different buses to cover all bases for change so I know and feel comfortable with where I'm going."

"The criteria need to take into account the impact of distress on you, not leaving the house, the fatigue but also the physical pain and distress this causes"



6(b). How could we make the planning and following journeys activity eligibility criteria easier to understand?

GDA members called for a revision or clearer definition of the criteria "overwhelming psychological stress". Particularly in relation to that criteria, any distress that prevents someone from leaving the house should be treated with the same seriousness.

GDA have concerns that defining it as "overwhelming", may deter people from identifying with it, even if that distress stops them from living the life they want to live or planning or following journeys. This is because disabled people report experiencing stigma and judgement if they are seen as overwhelmed or unable to cope. Sometimes too, it was stated that people can be in denial about how bad their reality is and do "downgrade" or "under-report" the severity and impact.

7. Are there any other issues with the planning and following journeys activity that we have not captured above?

Yes / No / Don't know

7(a). If you said "yes", what other issues with the planning and following journeys activity do you think need to be considered?

Several GDA members raised that the definition of a "familiar journey", may be subject to change because of obstacles such as road works or diversions. Many examples were given of street cafes and related "street furniture" appearing during the pandemic which made people unable to cope as they could neither recognise nor navigate the places and spaces with which they had previously been familiar.

As a result, GDA members suggest that the ability to cope with changing circumstances in a previously familiar journey should be taken into account within the criteria.

Similarly, additional consideration must be paid to those with fluctuating conditions who may be able to plan, particularly conditions that may impact people less than 50% of the time, which is denoted as the bench mark for measuring the impact of fluctuating conditions within ADP, as stated previously.



7(b). In your view, what are the positive aspects of the planning and following journeys activity that we have not captured above?

GDA welcome many of the research findings within the consultation document itself around the planning and following journeys activity and find it resonates with our members experiences. In particular, the acknowledgement that using fixed eligibility criteria does not assess the way in which a mental health condition can impact a person's mobility. Similarly we welcome the acknowledgement of the shortcomings in the descriptors for those with mental health conditions or neurodiverse people.

Unfortunately, acknowledgement is not enough and changes to the criteria and the points-based system within ADP to reflect these findings would be welcome.

8. How effective do you think the planning and following journeys section of the application form is at helping us understand a person's ability to plan and follow journeys?

Very effective / effective / somewhat effective / not very effective / not effective at all

Please give reasons for your answer

GDA members welcome the clear definitions between familiar or unfamiliar journeys and found these useful to distinguish their ability to move around. However, the criteria themselves are still too open to interpretation and liable to differentiating factors – such as changes to the environment, e.g. roadworks, diversions etc., or changes to someone's condition and impact or levels of anxiety and related impact around leaving the home.

In particular, GDA believe the "overwhelming psychological distress" marker is set too highly and will actively confuse and complicate assessors attempts to understand a person's ability to plan and follow journeys, as people will be discouraged to identify with it. Any level of distress, physical or mental, that is stopping an individual leaving their home should be treated with the same severity.



9. What impact do you think the changes to how we make decisions on the planning and following journeys activity has on understanding a person's ability to plan and follow journeys?

Significant positive impact / a **positive impact** / neither positive nor negative / a negative impact / significant negative impact

Please give reasons for your answer

Broadly, the changes will provide some positive impact to individuals navigating the application process. The removal of stigmatising and invasive procedures such as the "Mental State Examination" and ensuring those conducting mental health consultations have relevant experience is welcome.

However, while the criteria themselves remain the same point-based system, GDA believe that is too much is open to interpretation and the criteria does not adequately reflect the reality of people's needs and abilities. In particular, those with fluctuating conditions, mental health conditions or neurodiverse people.

10. If there was an opportunity to change any specific aspects of the planning and following journeys activity, what changes would you make (if any)?

As mentioned above, GDA would welcome a redefinition of the term "overwhelming psychological distress" to "psychological or physical distress". The current definition is too high a marker that may exclude many disabled people from identifying with the criteria – despite being unable to leave the house due to the distress, emotionally and physically, it would cause

GDA would also welcome greater consideration to those with fluctuating conditions, whose ability to plan and follow a journey may vary, the preparatory time, work and support it may take for someone to undertake a journey and the impact of unexpected events, such as roadworks, on a persons' ability to follow a once familiar journey.

Moreover, GDA believe that necessary prompting or any companionship required to undertake a journey in any circumstances should be given full points.



10(a). If you proposed changes, what positive impacts could these have, and for who?

This proposed change would mean people with fluctuating conditions, neurodivergent people and people with mental health conditions are not disadvantaged and indeed see themselves as potential entitled to ADP, therefore accessing their entitlement and related benefits.

10(b). If you proposed changes, what negative impacts could these have, and for who?

N/A

11. Do you agree or disagree that the criteria for fluctuating conditions is easy to understand?

Agree / Disagree / Don't know

11(a). Please give reasons for your answer, outlining which parts you think are easy or difficult to understand and why.

GDA members found the concept of measuring the impact of their conditions, in relation to the 50% rule, difficult to understand and to apply to their own lives. In particular, members were concerned as to how the rule applies to people with multiple fluctuating conditions that impact them on varying ways at different times (e.g. M.S and anxiety, U.C and depression, asthma and epilepsy etc.).

Members also raised some confusion around the criteria: "If they meet some criteria on different days that add up to more than half their days, they get the number of points they score on the most days. Or, if they meet different criteria for the same number of days, they get the criteria that scores the highest number of points". Members found this wordy, overcomplicated and difficult to apply to their personal experience.

Moreover, members felt that if their condition impacts them enough of the time to prevent them from moving around, undertaking journeys or living the lives they want to live, they should score points for this regardless. For example, if a condition impacts someone 30% of the



time, this is still a significant detrimental impact on their daily lives that should be taken into account when assessing disabled people's needs.

"If my endometriosis stops me from getting out of bed, from working, from living my life, for a week every month- and has a knock on effect on my mental health – how do you measure that?

"So if my condition only impacts me 40% of the time – that's still 12 days a month of my life. Is that not enough?"

"I know that I start off with ok energy everyday but as the day goes on I lose core strength, I feel weaker, more tired and my walking and functioning gets impaired. It's actually really hard to calculate a percentage of time – partly because I like to think of myself as more well than I actually am. This outlook helps in life but not in relation to this benefit!"

11(b). How could we make the fluctuating conditions criteria easier to understand?

GDA would welcome a revision of the 50% rule as the benchmark for measuring the impact of fluctuating conditions. The use of percentages and numerical values to measure the impact someone's condition has on them is inaccessible, arbitrary and does not accurately reflect the complexity and the consequential impacts of fluctuating conditions on physical and mental health and ability to carry our certain tasks.

GDA calls for and supports the scrapping of the 50% rule in favour of a more person-centred, flexible set of criteria that values self-assessment and supports the perspective that people are more likley to under-report than overstate.

If Social Security Scotland are fixed to the idea of a percentage measure being used, this must be significantly lower. The impact of a condition/ impairment two days a week is still significant barrier, with financial implications to overcome and a significant impact on people being able to live the lives they want to live.



12. Are there any other issues with the fluctuating conditions criteria that we have not captured above?

Yes / No / Don't know

12(a). If you said "yes", what other issues with the fluctuating conditions criteria do you think need to be considered?

As previously mentioned, GDA members have called to scrap the 50% rule in favour of a more dignified, flexible system that is person-centred, focusing on the holistic, overarching impact a condition has on someone's life rather than the amount of time it impacts them.

GDA would like to see greater flexibility and trust that disabled people are the experts in their own lives, removing the arbitrary 50% measure that cannot accurately reflect conditions that are unpredictable, variable and often trigger other conditions, e.g. mental health conditions.

12(b). In your view, what are the positive aspects of the fluctuating conditions criteria that we have not captured above?

We would agree with the consultation findings that it would **not be** effective to provide condition-specific descriptors, as these would reflect a medical, deficit model of disability and would not take the fact that many people have multiple impairments or conditions into account.

How disabled people feel their condition impacts them in themselves, holds more value in being able to accurately assess people's needs. People are best placed to describe their situations and this often provides rich information which can be used to determine fit with the criteria.



13. How effective do you think the fluctuating conditions section of the application form is at helping us understand the needs of people with fluctuating conditions?

Very effective / effective / somewhat effective / **not very effective** / not effective at all

Please give reasons for your answer

While GDA members welcomes the clarification provided by an introduction of a legal definition of what it means to carry out an activity to an acceptable standard, the criteria itself is still based on an arbitrary percentage measure that is difficult to understand and does not accurately capture people's needs.

As a result, there is a risk that due to confusion and complex criteria, people's needs will be underrepresented/ under-reported and as a result, they could lose out on support.

14. Thinking about the changes we have made to how we make decisions about fluctuating conditions, what impact do you think this is having on understanding the impact of a person's fluctuating conditions?

Significant positive impact / a positive impact / neither positive nor negative / a negative impact / significant negative impact

Please give reasons for your answer

While GDA welcome Social Security Scotland's intent to move towards greater flexibility when measuring fluctuating conditions and improving people's experience of the application process, the continued use of a points-based criteria system, with a 50% rule to measure fluctuating conditions, does not accurately reflect the complexity of many people's conditions and the impact on their lives.



15. If there was an opportunity to change any specific aspects of the fluctuating conditions criteria, what changes would you make (if any)?

As stated above, GDA members support the removal of the 50% rule in favour of a person-centred approach that trusts disabled people as the experts in their own lives and takes into account the overall impact of a fluctuating or unpredictable condition, rather than focusing predominantly on the amount of time it impacts them.

For example, asking people the impact their condition has on them on their worst day or allowing space for people to reflect on the complex impacts their condition has on them for the rest of their time, for example triggering other conditions, fatigue, mental health, might be more helpful to better measure the impact of a fluctuating condition.

GDA members also report that there are differences in fluctuating conditions where some might vary greatly over a week and others are more consistently fluctuating based on exertion and related fatigue. This is why a more person-centred approach is needed- to capture these perspectives.

15(a). If you proposed changes, what positive impacts could these have, and for who?

Removing the 50% rule and implementing more flexible, person-centred approach that takes into account the full complexity of the societal barriers disabled people face, would better capture and measure the impact of fluctuating conditions.

More importantly, it would likely mean many more people would be able to access the support they need, the first time round.

15(b). If you proposed changes, what negative impacts could these have, and for who?

N/A



16. If there was an opportunity to consider alternative approaches to a points-based system to understand disabled people's needs, what alternatives would you propose (if any)?

GDA members have consistently called for the points-based criteria to be urgently scrapped. We believe that maintaining a similar points-based system to the DWP, which has overseen cruel, dehumanising and unfair assessments, is not congruent with any proposals to make the social security system fairer or more humane for disabled people in Scotland. Furthermore it flies in the face of SSS values and principles- dignity, fairness and respect.

GDA members feel that a points-based system creates a 'tick box' exercise that is often too narrow to reflect the complexities of individual people's situations. GDA members have consistently reflected that disabled people are best placed to know how their condition(s) affects them, the barriers they face and the support they need to live the lives they want to live alongside non disabled people.

Indeed, it is vital that those interpreting the information provided are adequately trained and are given flexible criteria that allow them to accurately represent an individual's needs, priorities and wishes in the Social Security System.

16(a). If you proposed changes, what positive impacts could these have, and for who?

Removal of the points system and implementing a person-centred approach that values self-assessment and trusts that disabled people are the experts in their own lives would break the cycle of decision – reconsideration – appeal that is seen in the DWP system and may transfer to SSS. This would have positive implications fiscally for Scotland.

It would also benefit disabled people by preventing them going through unnecessary distress, upset and trauma and by maximising their income and that of their families. This would also be a more effective poverty reduction measure for the country amongst a raft of other approaches and actions needed e.g. scrapping social care charges.



16(b). If you proposed changes, what negative impacts could these have, and for who?

N/A

16(c). If you proposed changes, which of these would you prioritise?

Scrapping the points-based criteria for ADP in favour of a more flexible, person-centred system that puts trust and value in disabled people's self-assessment of their needs is a priority. This would signal to disabled people that Scottish Government and Social Security Scotland are willing to try to overturn decisions made by the UK Government during a period of harsh welfare reform. Failure to consider this change can be interpreted as tacit consent to decisions which severely worsened the poverty and inequality experienced by disabled people. This would chime with successive policy initiatives both at UK and Scotland levels which have failed to meaningfully address disabled people's poverty and inequality and in fact have worsened these confirming our belief that disabled people have been increasingly deprioritised.

17. Other than changes to the eligibility criteria, are there any changes you think we could make to Adult Disability Payment to support people's mobility needs (if any)?

Acknowledging that the support, prompting and companionship required in order to take a journey are essential for some people by increasing the points awarded from 4 to 10 or 12. We have lots of members who would not be able to leave the house at all without this sort of support, this was not properly acknowledged by the PIP criteria, but Social Security Scotland have a chance to acknowledge this.

17(a). If you proposed changes, what positive impacts could these have, and for who?

See Question 16



17(b). If you proposed changes, what negative impacts could these have, and for who?

N/A

17(c). If you proposed changes, how would you prioritise these? N/A

18. How can the independent review ensure that any recommendations it makes are both deliverable and affordable? Please give reasons for your answer.

Affordability will be the result of political choices and priorities combined with progressive taxation which is a commitment of the new FM.

19. How can the independent review consider the impact of any recommendations on existing "passporting" arrangements? The effect on passporting arrangements of changing the ADP criteria away from PIP, is often cited as a reason not to change the criteria. Yet, currently there are people in the UK and Scotland on DLA, PIP and AA, all with different criteria and this does not seem to have caused any issues. We would want SSS to explore with DWP the likley issues and then if there are issues, work to mitigate these and find solutions. We can think of many hypothetical solutions to this hypothetical problem such as making an ADP award under any new improved criteria but also noting what the award would be under the PIP or DLA criteria for passporting purposes. Even this would be a concession, so we would first want the Scottish government to argue for full parity for any new criteria, if this is not agreed then other solutions could be explored.

Glasgow Disability Alliance members would be extremely disappointed if this issue was used to pre-emptively limit a vision for a Scotland which improved the lives of disabled people, starting with improving this criteria.

We have accepted a phased approach to improving Disability Assistance because this was logical and made sense: safe and secure transition WAS the right priority for disabled people in Scotland. But now we must stretch our ambitions and aspirations to improve lives and reduce disabled people's poverty and inequalities through an improved Disability Assistance and mobility component which lives up to the values of the Act and Social Security Scotland.



19(a). How much of a priority to you is maintaining the current "passporting" arrangement?

Very high / high / medium / low / very low

19(b). Please explain why you chose this answer.

GDA's top priority is a disability benefits system that meets the real needs and goes further toward the extra costs faced by disabled people, thus reducing poverty of disabled people. Our goal is to improve the adequacy of disability benefits. We also call for SSS to build on the approaches taken so far which avoid unfair or inhumane processes, ensuring disabled people in Scotland get the support from SSS they need and the outcomes they are entitled to.

The removal of a points-based PIP system is integral to this as is a reform of the eligibility criteria, including the suggested changes mentioned throughout this response.

A plan is now needed detailing actions and timescales towards these changes.

As a result, we would echo the above point that disability benefit criteria must be changed and we would urge the Scottish Government to prioritise this and any action required to do so.