STIGMA IN THE SYSTEM:

Experiences of the UK Social Security system

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turn2US — Tackling financial insecurity together.

STIGMA IN THE SYSTEM: EXPERIENCES OF THE UK SOCIAL SECURITY SYSTEM

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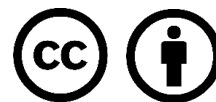**Sara Davies** is Research Co-Director of the Personal Finance Research Centre (PFRC), University of Bristol and an Associate Professor.

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SUMMARY

Stigma in the UK social security system is more than a matter of hurt feelings, it has deep and measurable consequences for individuals, communities, and the system itself. It can push people to delay or avoid claiming the support they are entitled to, worsening financial hardship, fuelling debt, and undermining health and wellbeing. For government and society, this can mean higher downstream costs in healthcare, social services, and crisis support, alongside the economic losses of reduced participation in work and community life.

Stigma operates in multiple, overlapping ways: through the way the system is designed and delivered, through public attitudes and media narratives, and through the internalisation of negative stereotypes by those who need support. These dynamics not only damage individual lives but also erode trust in the social security system, making it less effective as a safety net for everyone.

This research examines how stigma is produced, reinforced, and experienced in the UK social security system; how it shapes perceptions and behaviours; and what this means for financial security and wellbeing. We explore its drivers, its impact on both claimants and non-claimants, and the changes needed to create a system that supports people with dignity and fairness.

To answer these questions, we undertook a three-stage project:

Secondary data analysis of the British Social Attitudes[1] survey (from 2012-2023). This is an annual cross-sectional survey of between approximately 3,000 and 6,500 UK adults, capturing (among other things) attitudes to welfare and benefit claimants. We use this data to explore trends in attitudes over time.

25 online semi structured in-depth interviews with claimants of any age who have experience of the benefits system (n=13), non-claimants on low incomes (n=6), and those working in the welfare advice sector (n=6).

A nationally representative online survey of 4,000 UK adults exploring perceptions of the social security system and the experiences of those who claim benefits. The survey was distributed via YouGov's nationally and politically representative panel in June 2025.

In this summary, we give brief overview of the different forms of stigma produced within and surrounding the social security system, then we explore the wider public's perception of benefit claimants. We then provide a brief overview of the stigmatising experiences had by those in the system and the main impact of them, ending with potential improvements to the system.

We found examples of three broad types of stigma present in the system, which often overlap:

- **Perceived or social stigma:** Social stigma is generally used to describe the way society reacts to stigmatised individuals based on negative attitudes towards a stigmatised population or group,[2] whereas perceived social stigma is where a person recognises and believes that their society holds prejudicial beliefs that will result in discrimination against them.[3] The claimants we spoke with were keenly aware of the negative perceptions that were held in society, and often amplified by the media, about those who claimed benefits and went into the system with these stereotypes in mind.
- **Experienced stigma:** in the case of receipt of benefits, this was largely through the institutional stigma apparent in the social security system itself. The system often confirmed ideas about the value or deservingness of those who claimed, through its design and delivery.
- **Internalised or Self-stigma:** Many claimants internalised the stigmatised beliefs around claimants, and this led to unhappiness and a drop in self-worth for some. This could result in the production of distancing narratives,[4] to differentiate themselves from the negative stereotypes.

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[2] Gov UK (2023) Loneliness Stigma Rapid Evidence Assessment (REA)
[3] Link, B. G. and J. C. Phelan (2001) Conceptualizing stigma. Annual Review of Sociology, 27: 363–385
[4] Shildrick and MacDonald (2013) Poverty Talk: How People Experiencing Poverty Deny Their Poverty and Why They Blame 'The Poor'

The stigma cycle

Each of these elements fed into the other. In this report we explore how the institutional stigma produced within the social security system and experienced by claimants is one of the factors that influence the wider, perceived stigmatising views around benefit claimants. Together, they help form the societal beliefs around benefits which can produce internalised or self-stigmatising views among claimants and potential claimants. The stigma then affects how people interact with the system.
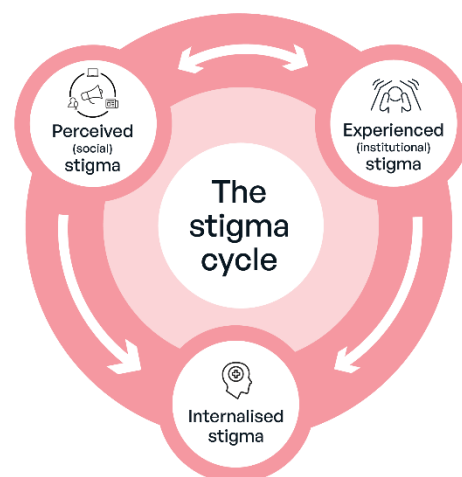
Social Stigma: wider perceptions of benefit claimants

We identified several key social beliefs underpinning the stigmatised views held about benefit claimants:

Firstly, there was a belief that **non-claimants don't get out of the system what they put in**. Non-claimants often saw themselves as contributors to the public purse who pay their taxes but never see much in return for the money they pay in. With the wider cost of living challenges, many working households who don't receive benefits have been struggling financially, which exacerbates this feeling of unfairness.

A second belief was the expectation that **households should fully support themselves through work, so they don't need to rely on the state support**. Having a job, and working as many hours as needed to support yourself, was part of the social contract, positioned as an individual responsibility, with little consideration for any structural or other barriers to doing so. As such, there was an inherent status loss in needing to claim, regardless of the reasons why the claim had come about. Although the more hours worked, the less stigmatised people felt. This belief immediately stigmatises all within the social security system by separating 'us from 'them'.[5] To need to rely on benefits is seen as to have 'failed' in a society that values self-reliance.

The third belief was that **many people who claim benefits are not genuinely in need of them**. This further stigmatises those who need financial support from the state, through the implication that that they may be one of the claimants who are cheating. This also has the effect of forming a further 'us' and 'them' – the deserving versus undeserving claimants. In addition to the three beliefs underpinning stigma towards benefit claimants, we did, however, find evidence from our YouGov survey that despite stigmatising beliefs, many still see **claiming as an important right**. Over two-thirds (71%) of our respondents held the belief that people shouldn't feel ashamed about claiming the benefits they are entitled to, while the majority (79%) said they would encourage a loved one to apply for benefits if they were in financial difficulty. The importance of a social security system to society remains, even in the

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[5] Pescosolido and Martin (2015) The stigma complex. Annual Review of Sociology, 41, pp.87-116

presence of stigmatising discussion about *who* should be entitled to support, and under what circumstances.

Furthermore, our analysis of the British Social Attitudes (BSA) survey demonstrates that public perceptions are not fixed and unchangeable. **Attitudes can, and do, change over time.** Attitudes respond to current events, to political discourse and media commentary, and to the realities that people see in their everyday lives.

Neither are attitudes homogeneous: we conducted analysis to understand which groups of the population were more or less likely to express positive or negative beliefs across four components of stigma[6]. Regression analyses of these constructs found that (when controlling for other factors):

- **Older age groups** held considerably more negative attitudes towards benefit claimants in general than the youngest adults, but older adults were also less likely to exhibit internalised stigma in relation to claiming.
- **Women** were less likely to hold stigmatised views about claimants, and were more likely to score highly on the component related to the support provided by the system not being generous enough or too difficult to access.
- **More educated respondents** had less negative views towards benefit claimants and were also more likely to have a level of trust in the welfare system overall.
- **Those whose social circles didn't include many or any people in receipt of benefits** tended to have less stigmatised views towards claimants in general but were less likely to say the system is ungenerous and were more likely to hold a level of internalised stigma about claiming.
- **People from ethnic minority groups** were more likely than White British respondents to have internalised stigma about claiming but were also more likely to hold broader trust or ideals about the welfare system (such as the belief that the welfare system helps to make the UK a fairer country).

Additionally, we use the four components of stigma to produce a segmentation of the non-claimant population based on their attitudes to welfare, using a statistical technique called two-step cluster analysis:

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[6] See Chapter 3 of the report for full methods

Five segments of the non-claimant population based on their attitudes to welfare
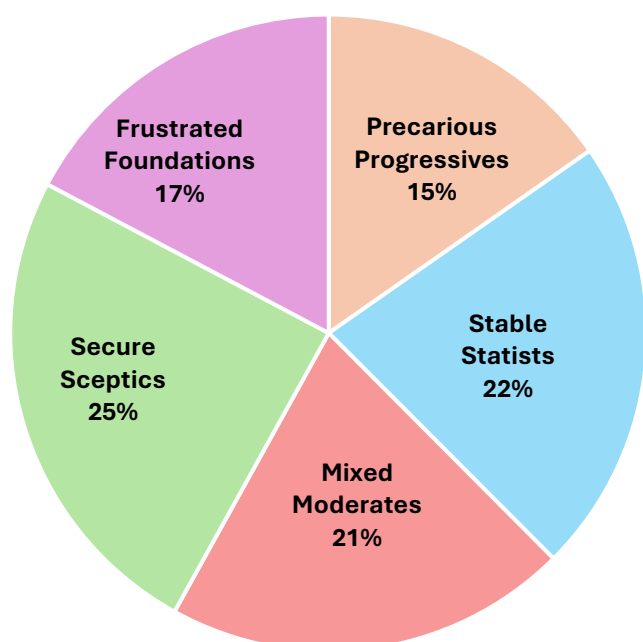
- **Precarious Progressives (15%):** Very pro-claimant; critical of system accessibility and fairness. Younger, often financially insecure, but highly educated.

- **Stable Statists (22%):** Low stigma towards claimants but high personal internalised stigma. Trusts the system but would only claim as a last resort.

- **Mixed Moderates (21%):** Holds balanced views. Low personal stigma but supports conditionality. Average levels of trust.

- **Secure Sceptics (25%):** High levels of stigma. Do not trust the system or see it as fair. Tend to be older and financially secure.

- **Frustrated Foundations (17%):** Most financially insecure group outside of claimants. Highly negative views about claimants and government. Feel forgotten by the system.

Institutional stigma: stigmatising experiences within the system

We identified several mechanisms by which claimants felt they were treated in a stigmatising way, and that seemed to confirm the wider perceptions of claimants detailed above:

- **Suspicion and control in relation to conditionality and PIP assessment:** The extensive requirements to meet certain conditions to receive support highlighted how the system fosters suspicion and diminishes autonomy – the level of monitoring felt intrusive, controlling and mistrustful;

  - three-in-five (64%) of current claimants felt like the benefits system was trying to catch them out.

- **Demonstrating deservedness:** Nearly half (49%) of current claimants agreed that the benefits system made them feel like they weren't deserving of any money.

- **Procedural rigidity and limited adaptability:** the lack of flexibility fed into the belief that the system was not on their side and was not truly interested in supporting people. In the survey data, of those who could recall going through work coaching, only 15% said it had been 'very' or 'quite beneficial'.

- **Untrustworthy system:** The errors encountered within the system, the difficulties experienced to rectify them, and DWP staff who were inadequately trained, all contributed to a lack of trust. Staff conducting PIP assessments could be dismissive and misrepresent what had happened or been said during the assessment process.

- **Unreliability and uncertainty:** Two thirds (67%) of all current claimants agreed with the statement: "I often worry that my benefits could be taken away from me in future".

Mapping stigma in the system
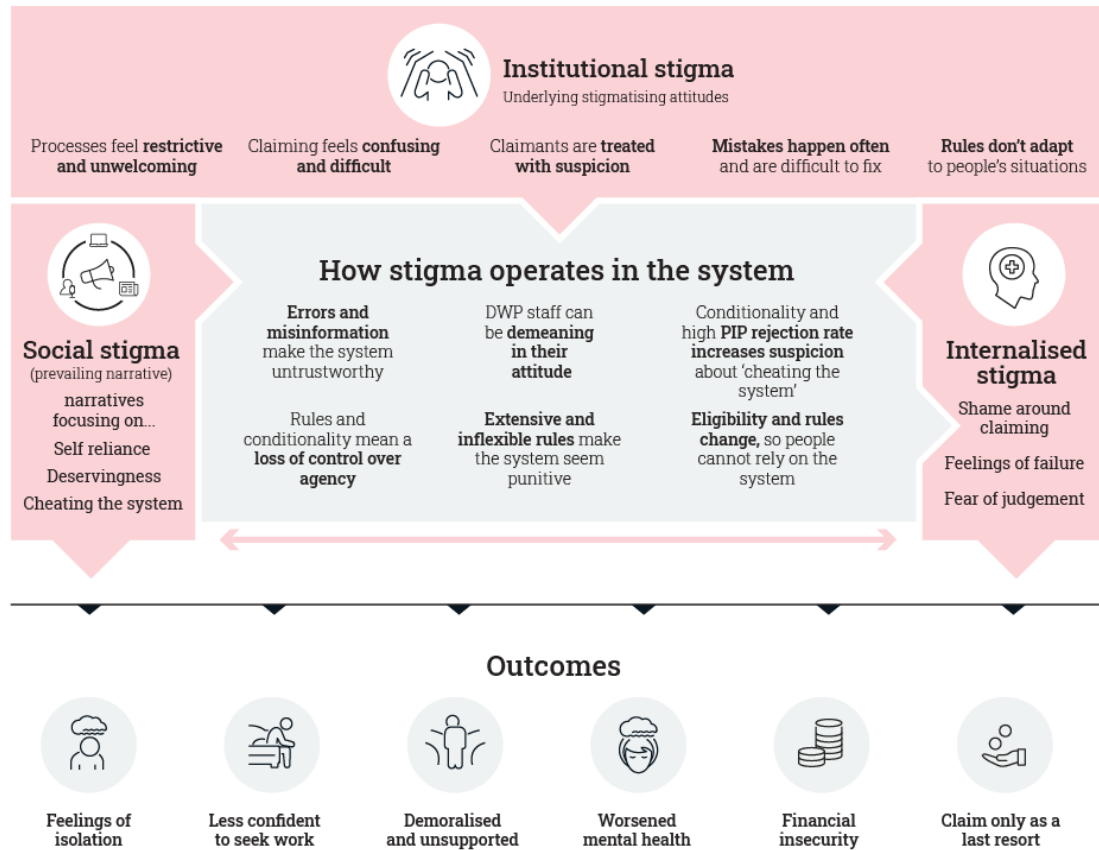
The impact of stigma in the system

We find some evidence that stigma may impact upon people's claiming behaviour. This mostly appears to take the form of delaying their claim or claiming as a last resort, as a response to very constrained financial circumstances, rather than applying more proactively. To a lesser extent, we also found evidence of people being put off from applying at all.

The impact of delaying or avoiding claiming was, unsurprisingly, a greater risk of financial difficulty. Those who had delayed making a claim used a variety of strategies to make ends meet, including cut back on non-essentials, borrowing money on a credit card, overdraft or through other lending, missing bill payments or debt repayments and using a food bank.

The process of applying for benefits took a considerable emotional toll on people, especially the process of applying for PIP, and the impact could be long-lasting. Claimants experienced negative impacts on their physical and mental health when navigating the benefit system; over half (51%) of claimants agreed that applying for benefits made their mental health worse.

How the system could be improved

Our interviews with those working in welfare advice, as well as claimant interviews, highlighted several changes that the DWP could make to help eliminate stigma in the system:

- **Humanise the social security system**
  - **Eliminate the use of sanctions**. The existence of sanctions implies that claimants will *deliberately* not meet the conditions imposed on them, rather than it being a result of events and circumstances.
  - **Demonstrate a better understanding of vulnerability**. A recent Select Committee report[7] has noted many of the issues within the system, particularly around better communicating the support that is available.
- **Provide flexible and supportive systems**
  - **Have the initial assessment conducted by someone trained specifically for the purpose.** This would allow for genuine probing by the assessors to ascertain the level of incapacitation faced by the claimant.
  - **Give assessors greater flexibility** to consider what is needed in terms of evidence (as Social Security Scotland have done).
- **Provide tailored and individualised work coaching**
  - **Tailor support to individual needs.** Claimants particularly valued receiving support from a work coach who listened to them and found the appropriate course of action based on their needs.
  - **Job centres should work more closely with local employers**, to understand their requirements, and to support those who are job seeking to be able to meet those requirements.
- **A better resourced system**
  - **Address the lack of resources in the system**, as any issues arose in part from this.
  - **Investment in the training of staff** across all areas of the DWP.

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[7] Work and Pensions Committee May 2025 Safeguarding Vulnerable Claimants HC 402

1 INTRODUCTION

This report explores the ways in which stigma is embedded in the UK social security system, and in the wider perceptions of those who need to use it. Stigma can play a significant role in how people engage with the system, as well as underpinning the experience of hardship more broadly. It can harm both people's financial security and mental wellbeing. Understanding where and how this occurs is an important first step to redressing the system.

What is Stigma?

Stigma is a process that is 'deeply discrediting' to people.[8] it is a way of attributing negative perceptions or disapproval to certain peoples or behaviours. Four general processes by which stigma occurs have been noted:[9]

- distinguishing and labelling differences
- associating human differences with negative attributions or stereotypes
- separating "us" from "them"
- experiencing status loss and discrimination.

As we explore in this report, these can all be present in the way in which benefits claimants are treated within the UK.

Stigma is not about the individual; however, it is enacted in societal relations. It is not only about a person's characteristics or behaviours, but about how these are perceived within the social context where they occur.[10] How people view certain behaviours or characteristics can and does change over time and in different circumstances: media representation can clearly influence how certain groups of people are perceived, for example. The reasons why certain people or groups are stigmatised is less clear, however, although *who* is stigmatised certainly illuminates where power and inequality lie within a particular context or society;[11] stigmatisation can only occur where the power to do this is exercised.[12] In some instances, however, stigmatising someone can even be a pragmatic response to a perceived threat, real or imagined, that those stigmatised appear to pose to society. This can lead to those who are stigmatised responding by stigmatising others.[13] And it is more than just how people are perceived, or feel they are perceived: it can be described as "practices through which people are othered, devalued and dehumanised in their exchanges with others."[14]

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[8] Goffman, E. (1963). *Stigma: Notes on the Management of Spoiled Identity*. Prentice-Hall
[9] Pescolido and Martin (2015) The Stigma Complex Annu Rev Sociol. 41: 87–116
[10] Yang et al (2007) Culture and stigma: Adding moral experience to stigma theory Social Science & Medicine. 64:7. 1524-1535
[11] Pescolido and Martin (2015) The Stigma Complex Annu Rev Sociol. 41: 87–116
[12] Link, B. G. and J. C. Phelan (2001) Conceptualizing stigma. Annual Review of Sociology, 27: 363–385
[13] Yang et al (2007) Culture and stigma: Adding moral experience to stigma theory Social Science & Medicine. 64:7. 1524-1535
[14] JRF (2024) Poverty stigma: a glue that holds

About this research

Drawing on the above understanding of stigma, and through exploring stigmatising practices, as well as perceptions, this research seeks to clarify the ways in which the social security system produces institutional stigma, often magnifying existing inequalities and biases, and explores the harm this causes to those who need to draw on financial support from the state.

The research addresses four main questions:

1. What role does stigma play in how people interact with the social security system?
   - What are the drivers and mechanisms of stigma?
   - What is the impact of stigmatisation?
2. How does stigma interact with other factors that can help or hinder engagement with the system?
3. What underlies stigmatising attitudes towards those on benefits, and what factors influence perceptions?
4. What needs to change within the social security system to minimise the impact of the stigma and to stop stigma being reproduced and magnified in the system??

To answer these questions, we undertook a three-stage project:

Secondary data analysis of the British Social Attitudes[15] survey (from 2012-2023). This is an annual cross-sectional survey of between approximately 3,000 and 6,500 UK adults, capturing (among other things) attitudes to welfare and benefit claimants. We use this data to explore trends in attitudes over time.

25 online semi structured in-depth interviews with claimants of any age who have experience of the benefits system (n=13), non-claimants on low incomes (n=6), and those working in the welfare advice sector (n=6).

A nationally representative online survey of 4,000 UK adults exploring perceptions of the social security system and the experiences of those who claim benefits. The survey was distributed via YouGov's nationally and politically representative panel in June 2025.

For more details on the methods used, see the Appendix

Each of the above stages was informed by engagement with our Project Advisory Board. The Board consisted of Turn2us staff members, two coproduction partners with lived experience of the social security system from the Turn2us lived experience panel, and members of external organisations whose work relates to the UK social security system. The

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[15] NatCen Social Research. (2024). *British Social Attitudes Survey*. [data series]. *4th Release.* UK Data Service. SN: 200006, DOI:10.5255/UKDA-Series-200006

group provided feedback, verbally and in writing, throughout the process of designing the research and interpreting the results. The Board, plus other welfare rights experts at Turn2us, provided comments on early versions of the YouGov questionnaire to ensure all questions were clear and accurately reflected the wording or terminology that benefit claimants would use.

Definition of social security used in this report

We recognise that the current UK social security system incorporates a wide range of types of support, including the State Pension, Child Benefit and the Winter Fuel Payment, but in this report, we focus on other forms of social security more commonly perceived (rightly or wrongly) as 'benefits' within public discourse. This broadly consists of two main areas: first, benefits designed to support people who are on low incomes – predominantly Universal Credit (UC, for working age people) and Pension Credit (for those of pension age) – and, secondly, benefits designed to support people with long-term health conditions or disabilities, such as Personal Independence Payment (PIP),[16] Carer's Allowance, Attendance Allowance and Employment and Support Allowance (ESA). Some are non-means-tested to cover the extra costs incurred through the disability or ill health. There can be an overlap between the two, as those receiving PIP may also be on a low income and receive Universal Credit as a result of being unable to work or needing to work less due to their health.

Those claiming UC were also subject to Conditionality. Conditionality is a feature of the social security system and refers to requirements to carry out work- related activities. UC, claimants are required to accept a 'claimant commitment', which sets out what they have agreed to do in return for receiving Universal Credit as well as the consequences for not meeting these obligations.[17] Those who are required to look for work, or increase their work hours, as part of their claimant commitment are assigned a work coach, who is supposed to provide tailored support[18] to apply for jobs, access training or help look for work.

Evidence on the stigma of claiming benefits

Existing evidence of the stigma in the system paints a nuanced picture of how the system is perceived and experienced. In 2012, Turn2us explored in depth the stigma of social security benefits[19], focussing on the different types of stigma present. The research uncovered high levels of perceived social stigma, with around half of those surveyed perceiving at least some social stigma[20]. Levels of reported institutional stigma within the benefits system were even higher: nearly half of survey respondents *strongly* disagreed that people are treated with respect when they claim benefits. However, levels of personal stigma were lower, with only a sizeable minority agreeing that they personally believed that people should feel ashamed to claim benefits.

Over time, however, the nature and level of these views are changeable. In terms of **social stigma,**[21] since 2012, levels of negative attitudes to claimants have decreased, with the

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[16] In Scotland, PIP has been replaced by Adult Disability Payment and Pension Age Disability Payment. Furthermore Scotland has diverged from the UK as a whole in its human-rights approach to benefits
[17] Department for Work and Pensions (2025) Universal Credit and your claimant commitment
[18] Gov UK Work Coach Role
[19] Turn2us (2012) Benefits Stigma in Britain
[20] Based on a nationally representative survey of 2,500
[21] For definitions of type of stigma, see chapter 2

number of people who believe that 'most people who get social security don't really deserve any help' halving from a high of 40% in 2005 to 19% in 2022.[22] Nonetheless, stigma around claiming benefits persists. A recent YouGov survey[23] found that over a quarter of Britons (27%) have a more negative than positive view of benefit claimants and that only 9% believe that all or almost all users of benefits are genuinely in need, widening to just half (49%) believing that at least the majority of people on benefits deserve them.

Personal stigma also remains within the system. The Heath Foundation[24] found a high level of personal embarrassment among people claiming benefits at the start of the COVID-19 pandemic, highest among those who had recently started claiming, with over half of this group reporting that they felt personally embarrassed to claim benefits. The stigma felt by low-income households more broadly, is echoed in other research; over four-in-five people believed that, as a whole, people on low incomes are subject to at least one form of stigma.[25]

Unsurprisingly, given the link between stigma and power, **certain groups may be more impacted by stigma than others**. The Scottish Government has identified a number of vulnerable and less heard groups with experience of the social security system (including mobile populations, people experiencing homelessness and military veterans),[26] and the Joseph Rowntree Foundation (JRF) notes how stigma is often unequally embedded in the experiences of some people, recognising the intersectional nature of poverty stigma with racism, sexism, and ableism.[27] Disabled people feel very stigmatised; over 70% of those receiving benefits agreed that they had been made to feel guilty about doing so.[28] Over half of people claiming disability benefits didn't agree that benefits staff had shown understanding of how their disabilities might affect them.[29] Furthermore, people in some minoritised communities face the 'double stigma' of difficulties in discussing money or mental health.[30]

While public perceptions of the stigma around welfare benefits have been tracked and measured, there has been less in-depth evidence on **institutional stigma**; in particular, the way in which the design of the current social security system engenders feelings of both personal and social stigma. The 2012 Turn2Us research focussed on perceptions of institutional stigma, but there is less data on *experienced* institutional stigma within the system.

Some research has also explored *how* **stigma works within the system,** which can be complex. The 2012 Turn2Us research concludes that stigma is based on the extent to which a claimant is deserving; that it is not the act of claiming benefits that is stigmatised but doing so when they are not deserved. The authors explore the interaction between perceptions of deservingness, need and responsibility as key to understanding how the stigma arises. Others see stigma within the social security system as 'doing the work' of austerity, through

[22] Nat Cen (2023) British Social Attitudes 40: Poverty
[23] YouGov (2024) How do Britons feel about benefits and welfare recipients?
[24] The Health Foundation (2020) Non-take-up of benefits at the start of the COVID-19 pandemic
[25] Inglis et al (2022) Testing the associations between poverty stigma and mental health
[26] Scottish Gov (2022) Social Security Experience Panels - Seldom Heard research programme
[27] JRF (2024) Poverty stigma: a glue that holds
[28] Evans et al (2023) Financial wellbeing of disabled people
[29] Evans et al (2023) Financial wellbeing of disabled people
[30] Evans et al (2023) The intersecting impacts of mental ill-health and money problems on the financial wellbeing of people from ethnic minority communities

"self-discipline, self-blame and through monitoring and governance over others in the form of 'othering'."[31]

Wider understanding (or indeed lack of understanding of) how the benefits system works in practice can also influence negative perceptions of the system, and whether the conditions for eligibility are strict enough: nearly half of Britons think that qualifications for benefits are not strict enough.[32] Even those within the system can judge other claimants harshly: 43% of households receiving means-tested support agreed with the government's decision to retain the two-child limit on benefits.[33]

There is also evidence that the structure of the social security system itself can influence public perceptions of the 'deservingness' of those who claim from it: "*the institutional characteristics of the welfare state are assumed to influence attitudes and opinions at the individual citizen level.*"[34] In a comparative study of Denmark, Germany, and the United Kingdom, participants views reflected the norms that were embedded in each countries welfare system. In the UK, a system seemingly based on financial need, rather than prior contribution, or those who have no control over their circumstances, there was tacit agreement among the research participants that welfare should be distributed on this basis.[35] Other comparative research found that, in the UK, there was a greater focus on individual responsibilities and work ethic, rather than on equality or reciprocity, in terms of how the welfare state should operate.[36] The change from legacy benefits to Universal Credit for people under State Pension Age is therefore likely to have influenced public perceptions around deservingness. Further exploration into how the system produces stigma is a key step in changing public perceptions.

Most importantly, **the impact of benefits stigma is highly consequential**; Policy in Practice estimates that around £23 billion of means-tested benefits and social tariffs remain unclaimed,[37] at a time when there has been a 50% increase in the number of households in 'serious financial difficulties' over the three years from Oct 2021 to Oct 2024.[38] Furthermore, poverty stigma can further worsen mental health outcomes that are already harmed through poverty.[39] Therefore, understanding how to decrease the stigma within the social security system, and increase engagement with it, is vital to improving the financial wellbeing of people on low incomes.

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[31] Bolton, Whelan and Dukelow (2022) State of the Art: What can welfare stigma do?
[32] You Gov (2024) How do Britons feel about benefits and welfare recipients?
[33] Evans et al (2024) Impact of the Budget: Public perceptions of the financial impacts of the 2024 Autumn Budget. Findings from the 11th Financial Fairness Tracker.
[34] Blekesaune, M., & Quadagno, J. (2003) Public Attitudes toward Welfare State Policies: A Comparative Analysis of 24 Nations. *European Sociological Review*, *19*(5), 415–427.
[35] Leanan et al (2019) Why deservingness theory needs qualitative research
[36] Taylor Gooby et al (2019) Moral economies of the welfare state: A qualitative comparative study
[37] Policy in Practice (2024) Missing out 2024
[38] Evans et al (2025) The Financial Wellbeing of UK households: Autumn 2024. Findings from the 11th Financial Fairness Tracker.
[39] Inglis et al (2022) Testing the associations between poverty stigma and mental health

We recognise, of course, that stigma is not the sole reason for the large amount of unclaimed benefits. As Policy in Practice highlights, there are three broad reasons why people might be missing out on their entitlement: **stigma**, **awareness** of what they are entitled to, and the **complexity** of navigating the system.[40] While we did ask survey respondents for views related to each of these, the primary remit of this report is in relation to stigma. As we go on to discuss, we recognise that each of these three barriers can be inter-connected. Stigma, for example, may prevent someone from attempting to find out what they are eligible for; while the complexity of the system may itself be an outcome of stigma, while also reinforcing stigmatised notions.

Why do benefits go unclaimed?

Lack of awareness

Lack of knowledge about what benefits are available and who can claim them.

System complexity

Different ways of applying, different administering bodies & different regimes.

Stigma

Negative attitudes surrounding benefits puts people off from engaging with the system.

Structure of this report

In chapter 2, we begin by giving a brief overview of the different forms of stigma produced within and surrounding the social security system, including perceived / social stigma, experienced / institutional stigma, and internalised/ self-stigma. **In chapter 3**, we present findings from our data related to the wider public's perception of benefit claimants, identifying the themes common to these perceptions which generate social stigma. **Chapter 4** gives the perspective of benefit claimants as they navigate the system, highlighting the ways that they experience stigma at different stages of the process and depending on the type of benefit being claimed. In **chapter 5**, we consider the impact of stigma on people's likelihood of claiming, their feelings of financial and emotional security, and the way they are treated by other institutions. In **chapter 6**, we reflect on the potential improvements that our participants believe should be made to the system. Finally, in **chapter 7** we conclude and discuss the wider policy implications of our findings.

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[40] Policy in Practice (2024) Missing out 2024

2 STIGMA IN THE SYSTEM

In this section, we provide a brief overview of how stigma is produced, reproduced and magnified within the social security system.

Throughout this research, stigma was present across many aspects of the social security system, and in the experiences of those within it. As with previous research, we found examples of three broad types of stigma present in the system, which often overlap:

- **Perceived or social stigma:** Social stigma is generally used to describe the way society reacts to stigmatised individuals based on negative attitudes towards a population or group,[41] whereas perceived social stigma is where a person recognizes and believes that their society holds prejudicial beliefs that will result in discrimination against them.[42] The claimants that we spoke to were keenly aware of the negative perceptions that were held in society, and often amplified by the media about those who claimed benefits and went into the system with these stereotypes in mind.
- **Experienced stigma:** in the case of receipt of benefits, this was largely through the institutional stigma apparent in the social security system itself. The system often confirmed ideas about the value or deservingness of those who claimed, through its design and delivery, ultimately affecting the experience of claimants.
- **Internalised or self-stigma:** Many claimants internalised the stigmatised beliefs around 'being on benefits' or being claimants, and this led to unhappiness and a drop in self-worth for some. This could result in the production of distancing narratives,[43] to differentiate themselves from the negative stereotypes.

These three forms of stigma are described in detail in chapters 3, 4 and 5 respectively, but below we briefly summarise their key elements as they presented in the qualitative interviews.

Perceived or social stigma

Virtually all the people we spoke with were concerned that they may be judged for claiming benefits and were fully aware of the stereotypes and assumptions that surrounded benefits claimants. Although many were critical of the portrayal of benefit claimants in the media, they sometimes echoed them in their own opinions; it was common for the claimants to preface their accounts with distancing narratives, making clear that they were a 'deserving' claimant. They did not want to be judged by these standards and tried to distance themselves from the other 'bad apples', who 'play the system'. One woman commented that she wasn't concerned about being judged, as she believed she didn't 'look' like a benefit claimant. She felt, that as her husband wore a uniform to work every day, her neighbours wouldn't assume they received benefits. Another felt she was treated badly through stereotyping: *"I don't know if because I'm a middle-class woman, whether they think that I'm just playing the system".* As

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[41] Gov UK (2023) Loneliness Stigma Rapid Evidence Assessment (REA)

[42] Link, B. G. and J. C. Phelan (2001) Conceptualizing stigma. Annual Review of Sociology, 27: 363–385

[43] Shildrick and MacDonald (2013) Poverty Talk: How People Experiencing Poverty Deny Their Poverty and Why They Blame 'The Poor'

we discuss further in chapter 3, receipt of benefits was strongly associated in peoples' minds with not working and stigmatised as a result.

This social stigma could impact the way claimants felt about themselves and even affect their behaviour within their locality. One woman, whose experience of claiming PIP was particularly unhappy, felt she had changed how she goes about her life as a result:

> *"…I sort of keep quite a low profile where I live because I don't want to be judged, though. I don't want people knowing too much about me. I mean, I read the Daily Mail every day for the showbiz when I've got the energy and I've noticed that those shift … welfare claimants seem to be second on the target list now. Now it's migrants, you know all the comments about migrants. So, it feels like almost the heat focus has moved from us to them"* (*Older single claimant*)

Experienced stigma

The stigma experienced by our participants was mostly institutional, found within the benefits system, which we discuss in more detail in chapter 4. This included how people were talked to by DWP staff, how depersonalising they felt the process to be, with no attempt to consider their individual circumstances, and having to jump through hoops to claim. However, there were other examples where people felt they had been treated differently by people around them as a result of claiming benefits. One young mother was told by her friend that she should be grateful for her accommodation regardless of whether it was in good condition or suitable for her and her young child, because she received state financial support to pay her rent.

> *"…I've made it nice as it can be, but still, the building's over 100 years old and it's in a big block. And she was like, well, you get it for free, you can't complain." (Single mother)*

The stigma that this woman experienced was underpinned by the stigmatising belief that *'we'* are paying for *'them'*, an example of how stigmatising attitudes divide people into 'us and 'them'; because benefits claimants are being supported by 'us', people who don't claim benefits may feel a sense of proprietorship over the life choices of those who do. Another (working) participant noted that his friends told him he was 'lucky' to be in receipt of Universal Credit, even though he was working, and was only claiming what he was entitled to.

Internalised or self-stigma

While this was less common than social stigma, it was clear that several participants felt the weight of the stigma of claiming benefits heavily. One pensioner wouldn't talk to her children about claiming benefits *"because I don't want to seem to be this needy, worthless person to them"*. In fact, her son had been out of work in the past, but she still didn't want to 'disabuse' him of the idea that she was in control.

Much of this internalised stigma reflected the belief that to rely on benefits was to have failed in some way. One claimant talked about how *"you brought it on yourself. You know, work harder, save more, spend less. You know it, if you're on benefits, it's because you're inadequate in some way. You've done something wrong."* (*Retired single claimant*)

As noted in the introduction, the UK social security system is largely based on financial need, rather than reciprocity via contributions, and therefore to claim was sometimes seen to be reliant on others. Conversely, one single father, who was working 42 hours a week and also received Universal Credit because of his low wages, displayed little internalised stigma, as he didn't feel the need to prove anything. As far as he was concerned, he was honest with the system and therefore entitled to what he was receiving.

Each of these elements fed into the other, affecting the behaviour of people when they engaged with the social security system.

Fig 2.1 – The stigma cycle
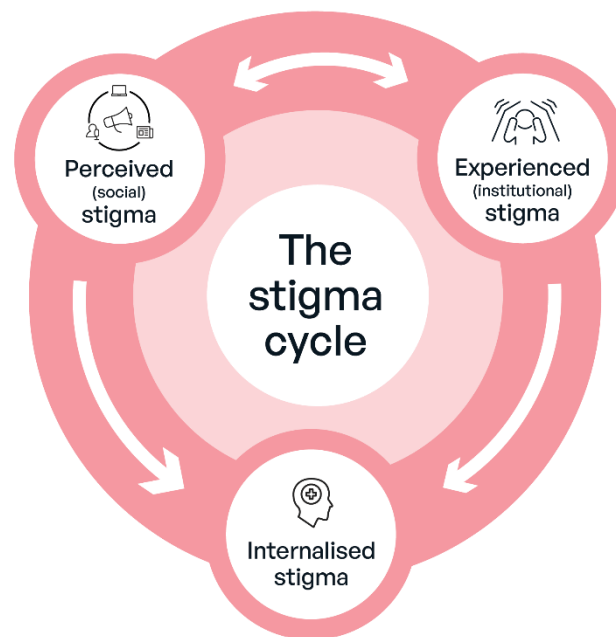
In this report, we explore how the institutional stigma produced within the social security system and experienced by claimants is one of the factors that influence the wider, perceived stigmatising views around benefit claimants. Together, they help form the societal beliefs around benefits which can produce self-stigmatising views amongst claimants and potential claimants. The stigma then affects how people interact with the system.

3 WIDER PERCEPTIONS OF BENEFIT CLAIMANTS

In this chapter, we report on the wider public's perceptions of the social security system and of people who claim benefits. We also explore how these perceptions can feed into the creation of stigma within the system itself. To do so, we draw on all three strands of our research, including the qualitative interviews with non-claimants, secondary analysis of the British Social Attitudes survey, and analysis of non-claimant attitudes captured by our newly commissioned YouGov survey.

Public perceptions of benefit claimants and the social security system matter. Public opinion can influence the policies and reforms that governments choose to pursue, affecting the way that the welfare system itself is designed. Likewise, government and media rhetoric can sway public opinion. A public that views social security recipients with suspicion leads to a system that treats claimants with suspicion – which, as we go on to discuss later, reinforces much of this pre-existing stigma. Public attitudes are also important because benefit claimants do not live their lives in a vacuum – claimants are well aware of the way that benefit recipients are discussed in the media, by politicians and by the general public. Public debate therefore can affect how claimants (or potential claimants) feel both about themselves and about others who receive benefits.

While we recognise that some of the attitudes presented in this chapter may not make easy reading for some benefit recipients or for those passionate about the welfare system, we attempt to present the views as they were expressed, in a non-judgmental way.

Attitudes can, and do, change over time

Our analysis of the British Social Attitudes (BSA) survey demonstrates that public perceptions are not fixed and unchangeable. Attitudes respond to current events, to political discourse and media commentary, and to the realities that people see in their everyday lives. It is no coincidence that 2020 – the year the coronavirus pandemic started – saw the highest proportion of the population agreeing that "the creation of the welfare state is one of Britain's proudest achievements" in any of the last 10 years (60%, up from an average of 55% since 2012) and a dramatic decrease in the proportion who agreed that in their area "most unemployed people could find a job if they really wanted one" (40%, down from an average of 56% since 2012). When people see the system in action, protecting livelihoods during the pandemic, or recognise the external financial challenges that those in receipt of social security benefits face, their views generally become more sympathetic.

Indeed, our analysis of the BSA survey shows that, though stigma does clearly remain, attitudes towards benefit claimants generally softened between 2012 and 2023.[44] As Figure 3.1 demonstrates, there was a substantial increase over time in the proportion of UK adults

[44] While the BSA survey has been running for decades, 2012 was selected as the starting year for the analysis to give us some data on attitudes shortly prior to the introduction of Universal Credit in 2014. 2023 was the latest year of data available at time of analysis.

who agreed that "cutting welfare benefits would damage too many people's lives" (from 47% to 59%) – coupled with significant decreases in the percentage who held negative attitudes, such as "many people who get social security don't really deserve any help" (from 35% to 24%). It is interesting to note, however, that this trend does seem to be reversing (slightly) in the latest year of data available (2023).

Figure 3.1 – Public attitudes to welfare claimants generally softened from 2012-2023. Percentage of British Social Attitudes survey respondents who 'agreed' or 'strongly agreed' with each statement, by year.
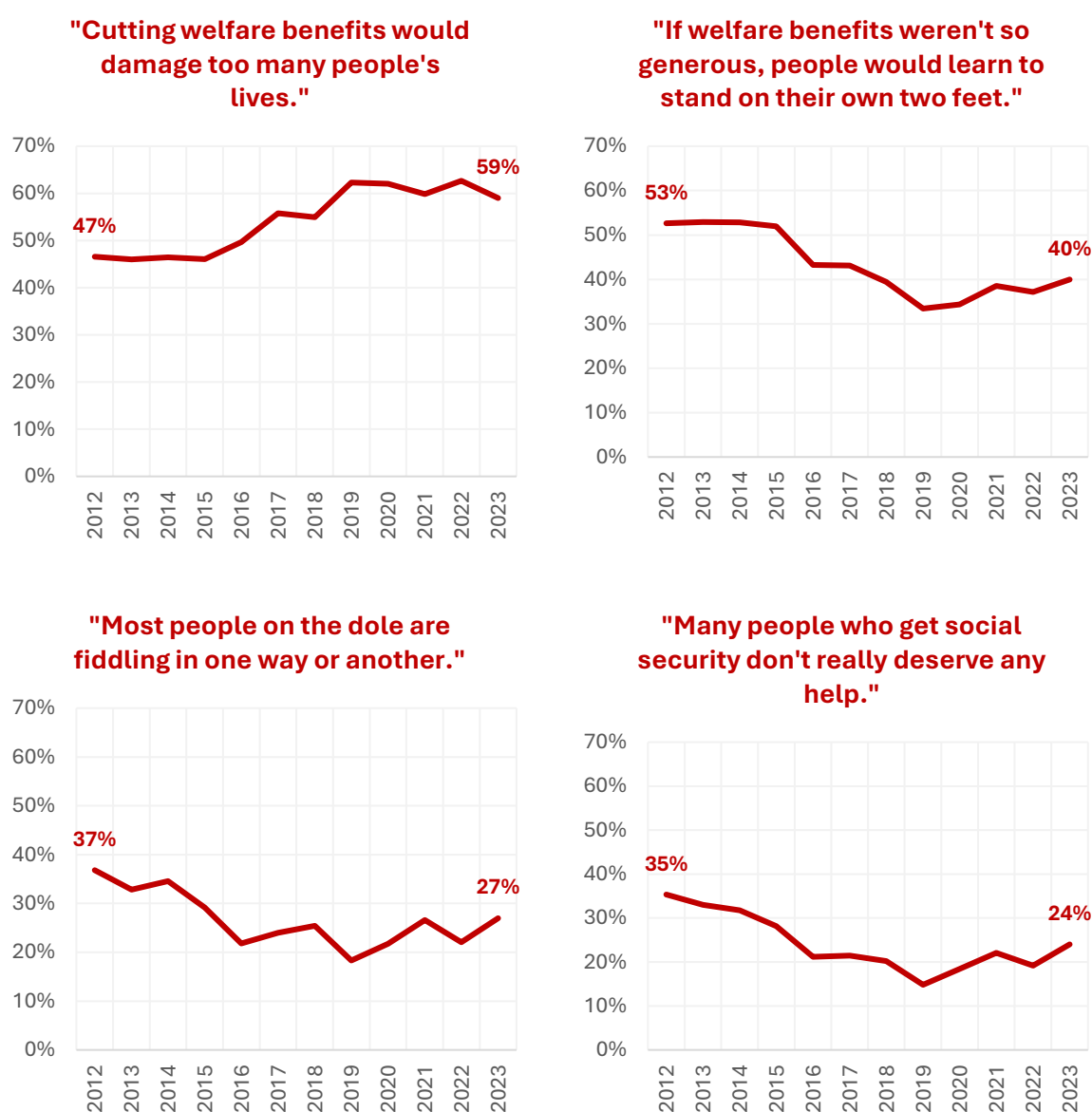
Notes: author analysis of NatCen's British Social Attitudes survey, 2012 to 2023. Sample sizes range from 2,376 (2014) to 6,699 (2022). Sample includes all survey respondents, not just non-claimants.

Figure 3.2 – Change in welfarism score between 2012 and 2023, by group

Higher welfarism score indicates more pro-welfare attitudes. Selected groups shown. Asterisks indicate statistically significant changes between 2012 and 2023.

2012   **2023**

More pro-welfare ⬆

Permanently sick or disabled*

Full-time education or gov. training*

Low-income benefits

Health-related benefits

Health-related benefits
Permanently sick or disabled*
Low-income benefits

Male: 18-24*
Aged 18-24*
Female: 18-24*

Really struggling on present income

Really struggling on present income

Aged 55-59
Full-time education or gov. training*

Aged 55-59

Male: 45-59

Male: 45-59

Male: 18-24*
Aged 18-24*
Female: 18-24*

Small employers & own account workers*
GCSE or equivalent*

No qualifications

GCSE or equivalent*
No qualifications

Lower supervisory & technical occupations

Lower supervisory & technical occupations
Small employers & own account workers*

More anti-welfare ⬇

Notes: based on mean welfare score for each group in 2012 and 2023. Asterisks indicate a statistically significant change (at p<0.05) between 2012 and 2023. See appendix for link to full table of results.

The BSA survey produces a 'welfarism score', indicating how positively or negatively survey respondents feel about benefit claimants. This is a composite score comprised of various other attitudinal statements (such as those shown above), where higher scores indicate more pro-welfare attitudes and lower scores indicate more anti-welfare attitudes.[45] Analysis of this suggests that those who are permanently sick or disabled, those in full-time education or government training, those in receipt of low-income or health-related benefits, and young adults had the most pro-welfare attitudes in 2023 of all the socio-economic and demographic groups we looked at (Figure 3.2). Those in lower supervisory or technical occupations or with a lower level of qualifications had some of the most anti-welfare attitudes. The biggest increases in pro-welfare attitudes between 2012 and 2023 were seen among the 18-24 age group, those in full-time education or training, and private renters. Unlike other groups, there was a small (but not statistically significant) decline in pro-welfare attitudes among those who reported 'really struggling' to live on their present income, the 55-59 age group and men aged 45-59.

While perceptions of benefit claimants may have softened (to some extent) over time, views about the right level of spending on welfare (and associated changes in taxation) remain somewhat mixed. The BSA asks respondents about their views on the statement "Government should spend more money on welfare benefits for the poor, even if it leads to higher taxes". Agreement with this statement plateaued from 2017 to 2019 (at 41-43%) but from 2020 onwards started to fall, reaching 32% in 2023. Indeed, more people disagreed with this statement in 2023 (36%) than had done back in 2012 (31%). Similarly, the results of the most recent BSA survey reveal a recent decline in the proportion who think the Government should spend more on disability benefits – from 56% in 2021 to 45% in 2024 (Figure 3.3). Just one-in-ten (11%) think the Government should spend less, but this does represent a significant increase since 2021 (4%). It is plausible that this is tied to increases in both disability benefit expenditure[46] and Government tax receipts as a percentage of GDP[47] in the 2020s – but attitudes are complex, as we go on to discuss.

Figure 3.3 – Support for spending more on disability benefits has declined recently. Percentage of British Social Attitudes survey respondents who said the Government should spend more or spend less on disability benefits, 2011-2024.
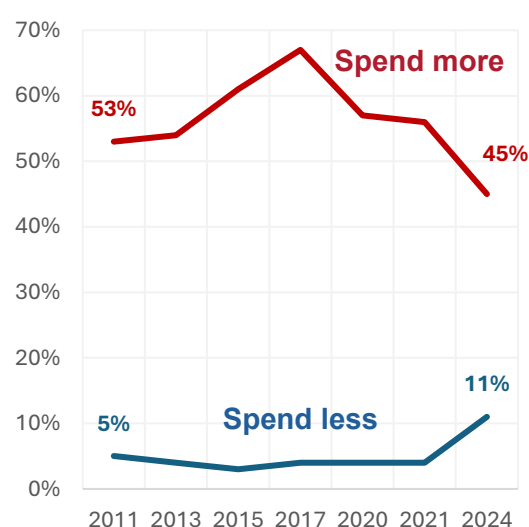
Notes: author visualisation of analysis from Curtice et al (2025) BSA 42 | Repairing Britain: Attitudes towards the economy, taxation and public services. NatCen.

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[45] The original welfarism scale provided by NatCen ran from 1 to 5 with 5 indicating anti-welfare attitudes. In Figure 3.2, we reversed this score so that a rise in the score is associated with more positive attitudes.
[46] See, for example: Office for Budget Responsibility (2025) Welfare spending: disability benefits.
[47] See, for example: House of Commons Library (2024) Tax statistics: an overview.

What beliefs underpin the stigmatisation of benefit claimants and drive dissatisfaction with the current system?

The belief systems of a society are often used to justify or rationalise inequality, and these beliefs can manifest as stigma.[48] From the qualitative data, we identified several key social beliefs underpinning the stigmatised views held about benefit claimants. Firstly, there was a belief that **non-claimants don't get out of the system what they put in**. Non-claimants often saw themselves as contributors to the public purse who pay their taxes but never see much in return for the money they pay in. With the wider cost of living challenges, many working households who don't receive benefits have been struggling financially which exacerbates this feeling of unfairness.

A second belief was the expectation that **households should fully support themselves through work, so they don't need to rely on the state support**. Having a job, and working as many hours as needed to support yourself, was part of the social contract, positioned as an individual responsibility, with little consideration for any structural or other barriers to doing so. As such, there was an inherent status loss in needing to claim, regardless of the reasons why the claim had come about, although the more hours worked, the less stigmatised people felt. This belief immediately stigmatises all within the social security system by separating 'us from 'them'.[49] To need to rely on benefits is to have 'failed' in a society that values self-reliance.

The third belief was that **many people who claim benefits are not genuinely in need of them**. This belief further stigmatises those who need financial support from the state, through the implications that they may be one of the claimants who are cheating. This also has the effect of forming a further 'us' and 'them' – the deserving versus the undeserving claimants.

These values were either tacitly or overtly expressed by virtually all of the claimants and non-claimants we interviewed, and often negatively coloured the way they spoke about their own experiences, as well as their views of others within the system, demonstrating the way that broader social stigma influenced more personal internalised stigma. Furthermore, they were reflected in the design of the social security system. While the idea of the deserving and underserving poor is long standing,[50] the findings from this research reflect the trend in the UK for social security to have moved from being a comprehensive welfare state providing collective assistance to one that is increasingly conditional; a place of last resort, rather than "a social safety net for everyone, as and when they need it".[51]

In addition to the three beliefs underpinning stigma towards benefit claimants, we did, however, find evidence from our YouGov survey that many still see **claiming as an important right** and a belief that people shouldn't feel ashamed about claiming what they are entitled to. The importance of a social security system to society remains, even if many who need to call on it are stigmatised for doing so.

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[48] Hoyt et al (2022) The implications of mindsets of poverty for stigma against those in poverty. *Journal of Applied Social Psychology, 53(5), pp.385-407.*

[49] Pescosolido and Martin (2015) The stigma complex. Annual Review of Sociology, 41, pp.87-116.

[50] Romano (2015) Idle paupers, scroungers and shirkers: past and new social stereotypes of the undeserving welfare claimant in the UK.

[51] Barford and Grey (2022) The tattered state: falling through the social safety net. *Geoforum,* 137, pp.115-125.

In the following sections, we describe in more detail the evidence from our research related to each of the three core stigmatising beliefs, followed by evidence for the more positive rights-based view of claiming.

The belief that non-claimants don't get out of the system what they put in.

The low-income non-claimants in the qualitative interviews (n.6) were often struggling to get by. They sometimes appeared to resent having to work for a relatively modest quality of life, while they perceived that benefit recipients were able to achieve a similar standard of living but with far less effort. While all non-claimants recognised that some people were fully deserving of the benefits they receive – for example, those with severe health conditions who cannot work – they felt that at least some claimants were undeserving of the help they get. There was a sense that non-claimants could broadly be proud of the positive contribution than they are making to society and to the public purse, but that claimants were taking out far more than they put in. Interviewees therefore appeared to draw a mental line between those who try their best to contribute and those who should do more.

This left some with the perception that they were being 'punished' financially for working and that effectively their efforts – and their taxes – were being wasted on paying benefits to others. As one man in his 40s, who had previously received Working Tax Credit but was not eligible for Universal Credit, expressed it:

> "You need to increase the taxes to… pay these benefits or whatever – and who is suffering more again? The people who've been working. Because I have to work more and more to pay more taxes…
>
> "I'm punished because I do work all my life, so I'm punished because you've been working all your life and been contributing to the society." (Single, working age claimant)

Similarly, a working non-claimant in her 20s also expressed the sentiment that people feel frustrated at the idea of their tax contributions being spent poorly by the Government. She felt this money could either be given back to workers in the form of lower taxes or spent on other public services that need it:

> "…I understand why the benefit system is in the way it's in, and it helps parents, and it helps children. But I also understand the frustration of people having their tax money go towards people that have kids unnecessarily… That money could be used elsewhere, like you know to help everyone have a tax reduction, to help the ambulance service, the NHS, that money could be put into a pot somewhere else." (Non-claimant mother)

Those who believed they were just above the threshold for support seemed to particularly resent some of the support provided to benefit recipients. One non-claimant – a woman in her 40s who was working full-time but struggling – felt that people (like her) who work long hours get little or no financial support compared to non-workers:
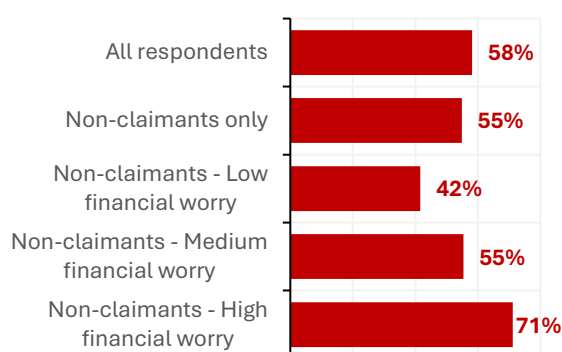
> "…I know if you are working like full-time or whatever, you don't get anything. But, compared to people who is not working, they get treated left, right and centre, which is sad part – people who want to work and working full-time, they don't have nothing, no benefits." (Working, non-clamant mother)

We see from our YouGov survey data that many non-claimants feel that the welfare system doesn't really work for them (Figure 3.4). Over half (55%) of non-claimants agreed that "even if you work hard, it can be difficult to get by without needing benefits or government help" and this rises to 71% among non-claimants who reported being very worried about their financial situation. A quarter (24%) of non-claimants felt they should get more support from the Government than they do, but three-in-five (60%) felt that the conditions for getting benefits meant they were unlikely to ever be eligible. Conversely, only two-in-five trusted that the benefits system would be there for them if they needed it in future. Finally, just a third (34%) believed that "the benefits system helps to make the UK a fairer country", with a similar proportion disagreeing (32%), indicating some scepticism about how fairly the existing welfare state redistributes income between different types of households. Non-claimants who were most worried about their finances were significantly more likely to 'strongly disagree' with this statement (20%), compared with non-claimants with low (14%) or medium (10%) levels of financially worry.

Figure 3.4 – Many non-claimants, especially those financially struggling, expressed concerns about the level of support from Government for households like theirs.

Charts show the percentage of our YouGov survey respondents who agreed (either 'strongly agree' or 'tend to agree') with each statement.

"Even if you work hard, it can be difficult to get by without needing benefits or government help"

All respondents	58%
Non-claimants only	55%
Non-claimants - Low financial worry	42%
Non-claimants - Medium financial worry	55%
Non-claimants - High financial worry	71%

"Households like mine should be eligible for more benefits or financial support from the Gov. than we currently receive."

All respondents	29%
Non-claimants only	24%
Non-claimants - Low financial worry	6%
Non-claimants - Medium financial worry	23%
Non-claimants - High financial worry	48%

"The conditions for getting benefits mean I'm unlikely to ever be eligible for them."

All respondents	50%
Non-claimants only	60%
Non-claimants - Low financial worry	61%
Non-claimants - Medium financial worry	61%
Non-claimants - High financial worry	64%

"I trust that the benefits system would be there to help me in future if I need it."

All respondents	42%
Non-claimants only	40%
Non-claimants - Low financial worry	51%
Non-claimants - Medium financial worry	41%
Non-claimants - High financial worry	33%

"The benefits system helps to make the UK a fairer country."

All respondents	36%
Non-claimants only	34%
Non-claimants - Low financial worry	35%
Non-claimants - Medium financial worry	35%
Non-claimants - High financial worry	32%

Notes: sample sizes as follows: all respondents = 4,191; non-claimants = 3,221; low financial worry = 644; medium financial worry = 1,905; high financial worry = 556. Financial worry scored from 0 – 10, where 0-2 = low, 3-7 = medium, and 8-10 = high.

Analysis of BSA survey data also highlights the sense of injustice that people in the UK feel. Over the last decade, we have seen a rise in the percentage of respondents who agree that "ordinary working people do not get their fair share of the nation's wealth" (from a low of 59% in 2013 to 69% in 2023). Relatedly, more than two-thirds now agree that "there is one law for the rich and one for the poor" (68% in 2023, up from a low of 56% in 2015).

This broadly ties into the idea of a 'social contract'. As Quilter-Pinner and Khan (2023) argue, "it appears that the basic social contract – by which voters pay in tax to a collective pot and government spends this effectively to provide a safety net and enable people to thrive – is now broken".[52]

The belief that households should work to support themselves rather than relying on the state to provide

Throughout the qualitative and quantitative analysis, we saw a clear expression of the value placed on self-reliance: the majority of participants articulated that those who can work, should work, and broadly speaking at a level that means the household does not need to rely on external support. Finding a job is generally seen as an individual's personal responsibility, rather than the responsibility of the state – with the public only taking a more sympathetic view in times of significant external economic challenges, such as the coronavirus pandemic.

Analysis of the BSA survey from 2012 to 2023 shows how persistent this belief has been over time. As demonstrated in Figure 3.5, in every year except 2020 over half of UK adults agreed that most unemployed people in their area could find a job if they really wanted one. This view was more commonly held than other arguably more stigmatised views – for example, related to benefit claimants 'fiddling' their claims (agreed by 27%) – but is perhaps more indicative of the stigma that social security recipients receive. It is a less actively

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[52] Quilter-Pinner and Khan (2023) Great government: A new playbook for public service reform. IPPR.

hostile belief, but still a viewpoint that treats claimants with a certain level of suspicion; that being out of work is either the result of a lack of effort or a failure to be self-sufficient.

Figure 3.5 – The belief in work has been persistent over time (Source: BSA survey)

"Around here, most unemployed people could find a job if they really wanted one."
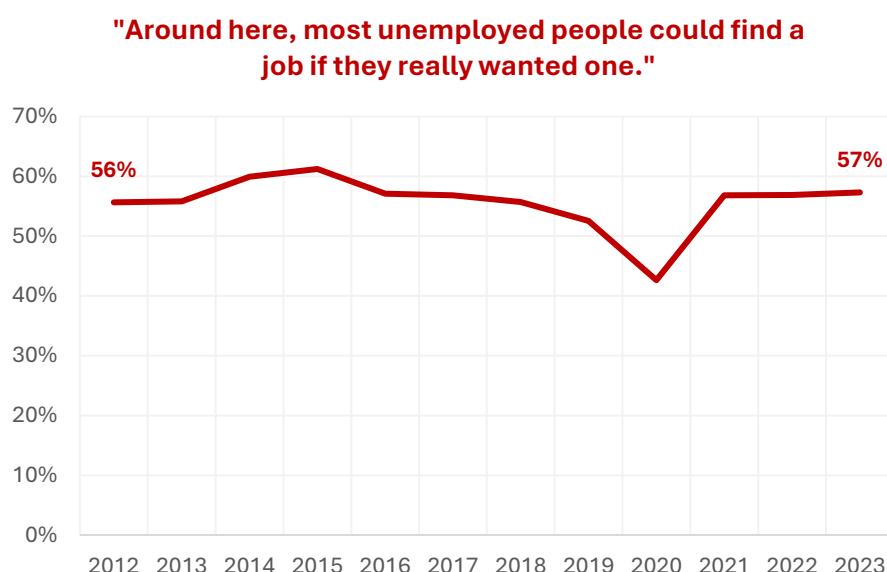
Notes: line shows the percentage of respondents who 'strongly agreed' or 'tend to agree' with the statement.

This wider social stigma clearly affected the claimants that we spoke to in the qualitative interviews. Several current claimants were keen to emphasise that their need for benefits was temporary, that they had been self-supporting in the past, and will be again in the future. One single mother in her early 30s, when asked about her experiences of claiming benefits began by contextualising her work history:

> *"… "prior to the situation that I'm in, I've worked from when I was 16, so I never had to…I've never claimed anything" (Single mother)*

It was important for her to explain that she was not 'work shy', and that circumstances had led her to claim benefits: she was made redundant during the Covid pandemic and suffered mental health issues as a consequence. Her experience with a DWP Work Coach was positive and supportive, in part because they did not make her feel as though she was deliberately avoiding work.

> *"… "I think they were very much the understanding that I've worked all my life. I wasn't there because it was a situation that I wanted to be in or had ever been in. And the work coach I spoke to, he said to me from speaking to you, I can tell that it's not a case that you don't want to work."*

In justifying her reasons for claiming, she repeated the public narratives around benefit claimants and distanced herself from the 'undeserving'.

A retiree, who reluctantly claimed Pension Credit, felt very differently about her State Pension: "*I don't regard my pension as a benefit. Because that's something that that I've worked for."* This highlights how the idea that social security more broadly is something that

we all pay into appears to have been lost, but also that only money you have 'worked for' is valid.

The converse of this was expressed by a mother on a low income who wasn't claiming any benefits, even though it is possible that she and her husband may have been eligible based on her household income. For her, it was a source of pride that both her and her husband worked to support their family.

> *"… "I don't apply any benefits or take anything because I just wanna, you know, go out and do work and then, bring money for my children…that way I can afford my life and things for my children, that's all" (non-claimant mother)*

She had been let go from her job during Covid, as she was on a zero-hours contract, and talked about how 'useless' and 'not worthy' she felt when that had happened.

Fundamentally, all three of these women were echoing the same value: that paid work was a necessity and a societal good, and a valid premise on which to base a social security system. While this does not necessarily mean that not working was stigmatised - the mental health benefits of working were also mentioned by interviewees - the extent to which a value was placed on self-reliance did become so. Those who did claim meanwhile often pointed out that the public at-large seems too often to forget that many people who claim benefits are actually in work.

We captured views on these beliefs in our YouGov survey (Table 3.1). A majority of respondents agreed with the idea that "too many unemployed people don't try hard enough to find work" (57% agreed, c.f. 18% disagreed), while nearly two-thirds felt that "the benefits system should only be there for people who have no other way of supporting themselves" (64% agreed, c.f. 13% disagreed). This belief in self-sufficiency was linked to a wider perception that they would only turn to the benefits system when they had exhausted all other possible options: among non-claimants, 62% agreed that they "would only apply for benefits as a last resort".

Around a third (34%) of all respondents (claimants and non-claimants) agreed that "once you're on benefits it's hard to get off them". One-in-six (17%) were unsure, making this one of the statements that survey respondents were least confident to answer. In the qualitative interviews, a single mother receiving Universal Credit spoke of how she hated feeling dependent on the system, like her life was in someone else's hands, but also that the system can mean people are worse off if they move from benefits into work, leaving them trapped.

The idea of self-reliance was frequently echoed when it came to families and the belief expressed by qualitative interviewees that people shouldn't have children if they wouldn't be able to afford them without government support. One mother who received DLA for her child viewed her claim as 'genuine', while she felt other families who claimed were less deserving:

> *"… "We had a genuine reason why we were claiming benefits. We had a poorly child. There are other people that have 10 kids, continued to have children and don't go to work and just sit at home and do nothing. I personally am not one of those people. I couldn't not work." (Working mother)*

Another mother we spoke to, while believing work to be important, prioritised staying at home while her children were young. However, she wouldn't claim benefits despite possible eligibility, as she thought other people would judge her for claiming benefits instead of working.

Table 3.1 – Attitudes related to the importance of work and self-reliance (Source: YouGov survey). Red shading indicates higher values, blue indicates lower values.

Statement	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	Don't know
"Too many unemployed people don't try hard enough to find work."	29%	28%	17%	11%	7%	8%
"The benefits system should only be there for people who have no other way of supporting themselves."	27%	37%	18%	9%	4%	5%
"I would only apply for benefits as a last resort." (non-claimants only)	31%	31%	15%	13%	7%	3%
"Once you're on benefits it's hard to get off them."	18%	31%	26%	15%	6%	5%
"Families should try to support their children themselves rather than claim benefits."	10%	24%	24%	18%	8%	17%

Notes: sample size= 4,191 for all but the third row (non-claimants only = 3,185).

Around half of our YouGov respondents (49%) agreed that "families should try to support their children themselves rather than claim benefits", while just 21% disagreed with this view. Related to this, some non-claimants we spoke to in the qualitative interviews felt that families with children get disproportionately more support than households without children. One interviewee felt that he faced "*a sort of discrimination*" because he was a single male, while another in a similar position with non-resident children felt that the system tends to be more supportive of mothers or families with (resident) children but less so of everyone else.

As explored in more detail in Chapter 4, when the claimants we interviewed were made to feel as though they could work more than they were, by DWP staff, it was deeply stigmatising. In fact, people capable of working but who are unemployed for a long period make up a very small proportion of benefit claimants. Long-term unemployment[53] has been around one per cent of the working age population for a number of years, decreasing from 2.8 per cent in 2013.[54] This was reflected in our qualitative interview sample, where interviewees had generally not had any long periods out-of-work unless ill health or disability meant they could not work, or they had young children.

The belief that many people who claim benefits are not genuinely in need of them

As with the importance of working, nearly all of the qualitative interviewees commented at some point that some, if not many, people who claimed social security support were claiming

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[53] Defined as unemployed for over 12 months.
[54] The Health Foundation (2024) Trends in unemployment and long-term unemployment

fraudulently or somehow taking advantage of the system.[55] This belief was repeated by current claimants as well as those who were not, although non-claimants appeared to have stronger feelings on the matter. Migrants were mentioned more than once, as were those with disabilities or mental health conditions, as people who were more likely to be fraudulently or unfairly receiving benefits. One non-claimant noted that claiming fraudulently was not a new thing:

> *"… "That people are getting benefits that maybe aren't necessarily entitled to them, or claiming for half a dozen children that don't exist or that sort of thing, you know, or are abroad … I'm sure there's a lot of people who are genuine claimants. But sometimes, perhaps on the disability things as well that you hear of people being videoed doing sports and things and then saying they can't walk and that kind of thing, you know, to get extra benefits. So, there's always people that that exploit the system, isn't there?". (Older single non-claimant)*

Benefit claimants also talked about people claiming when they felt they shouldn't be. Often these were people that they knew: one man talked about how he knew people who worked 'on the books' for 16 hours, but the rest was cash-in-hand, so they would qualify for Universal Credit; others referred more generally to people that they knew who 'played the system'. One adviser noted that they heard this from people they were supporting, and the impact that it had on their faith in the system.

> *"… people say, I just hope they believe me because I'm genuine. I know there's lots of people that are screwing the system, but I'm genuine". (Adviser)*

The complexity of the system meant that many sought help to complete the PIP assessment, and then this could be interpreted as 'cheating the system'. Those who asked for help via peer support were then party to accusations that they were being 'coached' or that the forums were there to help people 'tick the right boxes'.

The qualitative data shows that some of the negative narratives and perceptions around benefit receipt could be deeply hurtful to claimants. Even those who expressed a concern about fraudulent claims were quick to point out that this was the exception, not the rule; the emphasis placed on people who made fraudulent claims was disproportionate to the numbers who actually did so. In fact, those closest to the system, and living in low-income areas, noted that people were often not aware that they might be eligible for help.

> *"… I used to be one of the bitter ones who wondered how people claimed them and thought it was full of people committing fraud. So, it wasn't until I looked into it more for my dad that I realised that that's not the case". (Mother with health issues)*

As Table 3.2 shows, nearly seven-in-ten (69%) respondents to our YouGov survey felt that "people often take advantage of the benefits system", highlighting the wide prevalence of the above attitudes. A third (36%) meanwhile agreed that "many people who get social security don't deserve the help they get". More positively, over half (52%) of respondents did agree that "benefit claimants are unfairly stereotyped by the media and politicians".

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[55] Overpayments due to Fraud were 2.2% (£6.5bn) in FYE 2025, compared with 2.7% (£7.3bn) in FYE 2024. Overpayments due to Claimant Error were 0.7% (£1.9bn) in FYE 2025, compared with 0.6% (£1.6bn) in FYE 2024. Overpayments due to Official Error were 0.4% (£1.0bn) in FYE 2025, compared with 0.3% (£0.8bn) in FYE 2024.

Related to the concept of people taking advantage of the system – but not necessarily acting fraudulently – some survey respondents were concerned that it had become too easy to apply for certain health-related benefits. For example, 27% agreed that "the threshold for getting mental health-related benefits has been set too low" – though the largest response category was "don't know". Opinions appeared mixed on this point; one non-claimant interviewed thought that "the disability element of it now has become so broad" and cited the example of her relative who claims for anxiety but, in her opinion, doesn't exhibit any symptoms. More broadly, interviewees varied in terms of how they viewed mental health conditions; while some were sceptical of the severity of certain conditions, such as anxiety or depression, others saw these as very debilitating conditions.

Table 3.2 – Attitudes related to fraudulent or 'weak' claims (Source: YouGov survey). Red shading indicates higher values, blue indicates lower values.

Statement	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree	Don't know
"People often take advantage of the benefits system."	39%	30%	14%	8%	4%	6%
"Many people who get social security don't really deserve the help they get."	12%	23%	26%	16%	8%	13%
"Benefit claimants are unfairly stereotyped by the media & politicians."	12%	15%	19%	11%	9%	34%
"The threshold for getting mental health-related benefits has been set too low."	22%	30%	24%	12%	5%	7%

Notes: sample size= 4,191.

However, as with the importance of demonstrating a work ethic, the social pressure of perceived stigma appeared to produce distancing narratives around legitimacy within the system. Reflecting the way in which stigma can work by dividing people into 'us' and 'them', those who were claiming benefits were clear to place themselves on one side of the divide: they were 'genuine' even if others weren't.

Some felt this stigma also reflected ableism. One claimant in the qualitative research, receiving PIP and ESA, spoke about the lack of empathy and understanding towards those with illnesses:

> *"… "I totally took my health for granted until it was suddenly whipped from me… and, like, I think that can happen to anybody… Some of the people I've spoken to have said similar things… They didn't know it was going to happen to them, and it just impacts your whole life. And I just think, there's a bit of a lack of empathy from everyone… I understand it because if you haven't been through it, you can't. You can't even begin to imagine what it's like. And even my friends who know how restricted I am on a day-to-day basis; they still can't feel what it's like….*
>
> *"I don't judge people for not understanding. But I do judge them for judging".*
> *(Single, non-working claimant)*

Claiming remains an important right

While the beliefs described above demonstrate the longstanding division between who is perceived as 'deserving' and 'undeserving' benefit claimants, which is perhaps where the stigma lies, there remains broad support in theory for the idea that people should claim what they are entitled to. Seven-in-ten (71%) respondents to our survey agreed that "people shouldn't be ashamed about claiming the benefits they are entitled to". Similarly, when asked if they would encourage a friend or family member to apply for benefits if they were in financial difficulty, two-thirds (67%) of non-claimants said that they would 'probably' (35%) or 'definitely' (33%) encourage them to apply – while just 6% said 'no' (Figure 3.6). Around a quarter meanwhile said 'maybe' (20%) or 'don't know' (7%), which implies that it might be situation-dependent or that they would encourage them to exhaust other options first.

Four-in-five (79%) benefit claimants said they would 'definitely' (44%) or 'probably' (35%) encourage a family member or friend to apply, with a further 15% saying 'maybe'. A very small minority (2%) of claimants said they wouldn't encourage someone they knew to apply.

Figure 3.6 – Most non-claimants and claimants would encourage loved ones to apply
Responses when asked "If a close friend or family member was experiencing financial difficulty, would you encourage them to apply for benefits?" (Source: YouGov survey)
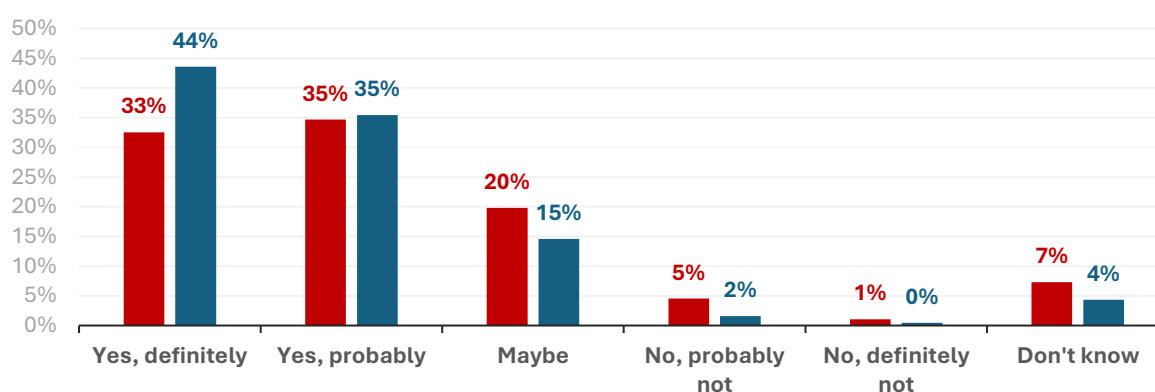
Notes: sample sizes as follows: non-claimants = 2,944; claimants (including those currently receiving benefits or who had received them within the past 10 years) = 1,247.

A sizeable proportion of the population acknowledges the challenges that benefit claimants face navigating the system. As previously mentioned, over half (52%) of our survey respondents agreed that "benefit claimants are unfairly stereotyped by the media and politicians" (with 17% disagreeing). In addition, the survey respondents were also more likely to agree (38%) than disagree (20%) that the "Government have made the process of claiming benefits more difficult than it should be" (with 20% neither agreeing nor disagreeing and a further 21% who were unsure). This implies that many respondents simultaneously hold pro- and anti-welfare attitudes, reflecting the nuance of their views. Indeed, we see that over half (54%) of those who 'strongly agree' that 'too many unemployed people don't try hard enough to find work' also agreed that 'people shouldn't be ashamed about claiming the benefits they are entitled to', while a quarter (26%) also agreed that benefit claimants are unfairly stereotyped. Similarly, three-in-five (61%) of those who 'strongly agree' that 'people

often take advantage of the benefits system' said that they would still 'definitely' or 'probably' encourage a family member to apply for benefits if they were experiencing financial difficulty. Just 8% of this group said they 'probably' or 'definitely' wouldn't encourage this. This suggests that some of the stigma relates to a greater extent to 'other' claimants, rather than oneself or one's family. More broadly, these conflicting attitudes often appear to relate to the idea that those 'fraudulently' claiming ruin things for 'genuine' claimants, forcing the system to be harsher than it should be in an ideal world.

Which groups hold more, or less, stigmatised views?

Our survey data helps us to understand which groups of the population hold more or less sympathetic attitudes towards benefit claimants and the wider welfare system. We asked respondents a total of 18 attitudinal statements in our YouGov survey, but to aid understanding of these attitudes, we conducted Principal Components Analysis (PCA), enabling us to reduce these 18 questions to four key components, each of which are associated with a separate underlying construct captured by the questions.[56] These four components are as follows:

1. The biggest underlying construct measures a respondent's **general stigma** towards benefit claimants. It captures how likely a respondent was to agree with statements such as "too many unemployed people don't try hard enough to find work" or "people often take advantage of the benefits system".
2. The second component relates to a respondent's views on the **generosity or complexity** of the current benefits system. This does not just relate to the generosity of the system for existing claimants but also speaks to the level of support provided to working households who are struggling but currently fall outside of the system.
3. The third component captures **internalised stigma** about claiming and is driven by responses to statements about only claiming benefits as a last resort, not wanting others to know if you were claiming, and feeling bad about yourself if you needed to claim.
4. The final component measures **broader ideals** and the extent of the respondent's **trust** that the system would be there for them if they needed it; it is driven by statements such as "I trust that the benefits system would be there to help me in future if I need it" and "the benefits system helps to make the UK a fairer country".

Every survey respondent receives a score on each of these four components, which we then included in regression analyses to identify which socio-demographic and economic groups of respondents had more (or less) positive attitudes on each component. These results are summarised in Table 3.3 (with only statistically significant findings included).[57]

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[56] We provide more detail on the PCA results in the appendix.
[57] Full regression results are given in the appendix. Each group is compared to a reference group; for example, each age band is compared against the under 30 age group, while each income band is compared against those with an annual income of less than £20,000.

Table 3.3 – Summary of regression models, showing which groups had more negative or positive attitudes on each of our four components of welfare stigma

Component of stigma and attitudes that drive the result	Groups with more negative attitudes	Groups with more positive attitudes
1. General stigma towards benefit claimants		
"Too many unemployed people don't try hard enough to find work." "People often take advantage of the benefits system."	More stigmatised attitudes: Older age groups Couples with children Working households	Less stigmatised attitudes: Those receiving health-related benefits Females Those with higher-level qualifications Those who don't know many people receiving benefits
2. Support provided by the system		
"Even if you work hard, it can be difficult to get by without needing benefits or government help." "The Government have made the process of claiming benefits more difficult than it should be."	Doesn't want more support / easier support: Outright homeowners Those with apprenticeships or vocational qualifications Higher income households Those who don't know any/many people receiving benefits	Does want more support / easier support: Those receiving benefits (especially health-related benefits) Lower income households (<£30k) Females
3. Internalised stigma about claiming		
"I would only apply for benefits as a last resort." "I would feel bad about needing to claim benefits."	Higher internalised stigma: People from ethnic minority backgrounds Mortgagors Those living with parents/family Those who don't know anyone receiving benefits.	Lower internalised stigma: Older adults
4. Trust in the system		
"I trust that the benefits system would be there to help me in future if I need it." "The benefits system helps to make the UK a fairer country."	Lower trust: Those aged 30-49 Mortgagors	Higher trust: Those receiving benefits People from ethnic minority backgrounds Those with degree-level education Those on higher incomes (£50k+)

The findings related to the first component – general stigma towards benefit claimants – largely match those previously discussed in our analysis of the BSA survey. We find, for example, that older age groups held considerably more negative attitudes towards benefit claimants than the youngest adults (component 1). But interestingly, older adults were less likely to exhibit internalised stigma in relation to claiming (comp. 3). So, while over half (53%) of non-claimants under 30 agreed that they would feel bad about themselves if they needed to claim benefits, this fell to 37% among the over 65s. Other notable differences are that:

- **Women** were less likely to hold stigmatised views about claimants (comp.1), but also more likely to score highly on the component related to the support being provided by the system not being generous enough or too difficult to access (comp. 2). This means they felt that households like theirs should receive more support and that they are critical of how difficult the Government has made it to access benefits.
- **More educated respondents** had less negative views towards benefit claimants (comp. 1) and were also more likely to have a level of trust in the welfare system overall (comp. 4).
- **Those whose social circles didn't include many or any people in receipt of benefits** tended to have less stigmatised views towards claimants in general (comp. 1), but were less likely to say the system is ungenerous (comp. 2) and were more likely to hold a level of internalised stigma about claiming (comp. 3).
- **People from ethnic minority groups** were more likely than White British respondents to have internalised stigma about claiming (comp. 3) but were also more likely to have broader trust in the system (comp. 4). Over half (55%) of ethnic minority respondents said they "would feel bad about [themselves] if [they] needed to claim benefits", compared to 43% of White British respondents. Conversely, 46% of ethnic minority respondents agreed that "the benefits system helps to make the UK a fairer country", whereas this falls to 34% among White British respondents.

Additionally, we use the four components of stigma to produce a segmentation of the non-claimant population based on their attitudes to welfare, using a statistical technique called two-step cluster analysis[58] (Figure 3.7). We identified five key segments of the non-claimant population and assigned each group a name based on the attitudes they held (Table 3.4) and their socio-economic characteristics (Table 3.5). Any efforts to tackle stigmatised views of the benefits system would do well to recognise the diversity of the different attitudes held by these segments. The groups are as follows:

1. Precarious Progressives (15% of non-claimants) – this group comprises people who are very pro-benefit claimant and show very little stigma towards them. They believe that claimants are unfairly stereotyped (92%) and are highly critical of the support currently provided by the welfare system; for example, 70% agree that the Government has made the process of claiming benefits too difficult, and 82% agree that even if you work hard, it can be difficult to get by without benefits or government help. This group is typically younger and more financially insecure[59] than most other groups, despite being quite highly educated. They are the group most likely to be self-employed or work in the charity/voluntary sector.

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[58] For more information on the analyses conducted, please see the Appendix.

[59] As measured by answers to the question: "Overall, how worried are you about your and your family's economic security?" where 0 = Not at all worried and 10 = very worried. Question based on previous question developed by the Joseph Rowntree Foundation.

2. Stable Statists (22% of non-claimants) – this group is slightly older than the Precarious Progressives but still younger than most other groups and they tend to be more financially secure. They are characterised by fairly low stigma towards benefit claimants, though a majority (71%) do still think that some people take advantage of the system. They generally trust that the system would be there for them if they needed it (61%) and they don't think the process of claiming is too difficult (23%). They trust the Government and Government bodies more than any other group. But they would only claim as a last resort (96%) and would feel bad about themselves if they needed to claim (86%).
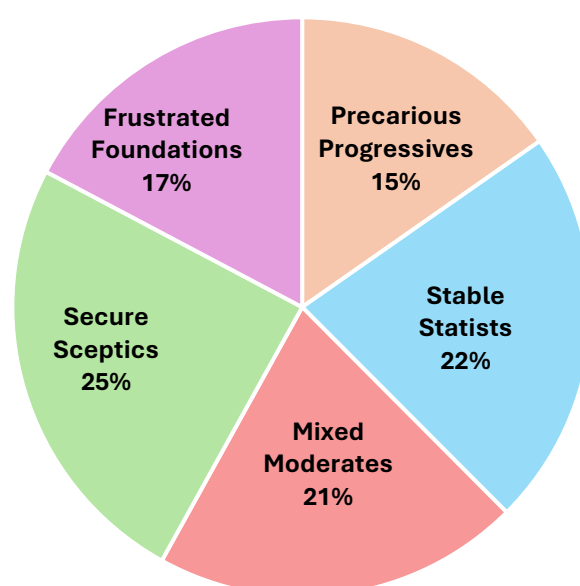
3. Mixed Moderates (21% of non-claimants) – this group is relatively average in terms of levels of stigma towards benefit claimants. For example, 60% agree that "too many unemployed people don't try hard enough to find work". They are relatively financially secure and slightly older than the previous two groups. They don't think that households like theirs need more financial support (13%), but they would have no qualms about claiming if they needed to – just 10% said they would feel bad about themselves if they needed to claim. They generally believe that the welfare state would be there for them if they needed it (75%). They show the second highest levels of trust in Government but the highest levels of trust in their neighbours and in the general public.

4. Secure Sceptics (25% of non-claimants) – this group has fairly high levels of stigma towards benefit claimants; for example, three-in-five (62%) believe that "many people who get social security don't deserve the help they get". They are relatively financially secure and don't think households like theirs need more support, but they are highly critical of the system. Just 5% think that the benefits system helps to make the UK a fairer country, and only one-in-five (19%) believe that the benefits system would be there for them if they needed it. They are the second oldest group and the only group that is disproportionately male.

5. Frustrated Foundations (17% of non-claimants) – this group show highly negative views towards benefit claimants, with almost all (96%) of this group agreeing that people often take advantage of the benefits system. They feel forgotten, believing that it is difficult to get by even if you work hard (86%) and being more likely than any other group to say that households like theirs should get more financial support from the Government than they currently do (69%). Demographically, they are not a homogeneous group. This segment does have the highest proportion of pensioners, but it over-represents every age group except for the under 30s. These respondents were most likely to have children and were also disproportionately female. It is the group with the lowest level of financial security (other

Figure 3.7 – Five segments of the non-claimant population based on their attitudes to welfare

than benefit claimants), despite being the most likely to be working full-time. They are the least politically engaged segment and least likely to trust Government or people in their neighbourhood.

Table 3.4 – Agreement with different attitudinal statements, for each segment of non-claimants and for current claimants. Red shading indicates higher values, blue indicates lower values.

Attitude	Precarious Progressives	Stable Statists	Mixed Moderates	Secure Sceptics	Frustrated Foundations	Current claimants
People shouldn't be ashamed about claiming the benefits that they are entitled to	90%	70%	92%	31%	76%	79%
Benefit claimants are unfairly stereotyped by the media and politicians	92%	54%	53%	11%	46%	70%
I trust that the benefits system would be there to help me in future if I need it	25%	61%	75%	19%	22%	46%
The benefits system helps to make the UK a fairer country	65%	48%	49%	5%	15%	42%
The Government have made the process of claiming benefits more difficult than it should be	70%	23%	26%	7%	55%	57%
Even if you work hard, it can be difficult to get by without needing benefits or government help	82%	49%	58%	22%	86%	70%
The conditions for getting benefits mean I'm unlikely to ever be eligible for them	61%	51%	52%	64%	82%	17%
Many people who get social security don't really deserve the help they get	2%	28%	30%	62%	62%	30%
Too many unemployed people don't try hard enough to find work	6%	57%	60%	79%	86%	50%
Families should try to support their children themselves rather than claim benefits	17%	60%	49%	70%	61%	37%
Households like mine should be eligible for more benefits or financial support from the government than we currently receive	28%	11%	13%	12%	69%	46%
The threshold for getting mental health-related benefits has been set too low	11%	26%	29%	30%	39%	27%
The benefits system should only be there for people who have no other way of supporting themselves	26%	84%	75%	74%	78%	50%
People often take advantage of the benefits system	17%	71%	77%	85%	96%	64%
Once you're on benefits it's hard to get off them	23%	41%	37%	36%	43%	25%
I would only apply for benefits as a last resort	47%	96%	40%	63%	61%	49%
I would prefer people not to know if I received benefits	43%	87%	24%	44%	59%	47%
I would feel bad about myself if I needed to claim benefits	30%	86%	10%	43%	48%	68%

Notes: question wording for the final three statements was different for current claimants: "I only applied for benefits as a last resort"; "…prefer people not to know I receive benefits", and "I felt bad about myself for needing to claim benefits".

Table 3.5 – Socio-economic characteristics, by non-claimant segment. Red shading indicates higher values, blue indicates lower values.

Characteristics	Precarious Progressives	Stable Statists	Mixed Moderates	Secure Sceptics	Frustrated Foundations	Current claimants
Confident not eligible for benefits?	65%	71%	71%	72%	53%	N/A
Benefit receipt common within social circle?	14%	11%	15%	15%	22%	33%
High levels of financial worry?	21%	14%	9%	13%	36%	37%
Aged under 30?	27%	25%	14%	12%	10%	11%
Aged over 65?	12%	19%	25%	23%	27%	25%
Homeowners?	53%	60%	70%	76%	66%	39%
Children in household?	17%	26%	20%	21%	26%	26%
Degree or higher degree?	53%	46%	39%	33%	29%	21%
Trust people in your neighbourhood completely or somewhat?	77%	76%	84%	74%	66%	51%
Trust Government completely or somewhat?	36%	43%	42%	24%	13%	23%

4 STIGMATISING EXPERIENCES WITHIN THE SYSTEM

In this chapter we explore benefit claimants' experiences of the social security system. We consider how the institutional stigma in the system reinforces the social stigma around claimants, creates discrimination and negative experiences and increases claimants' internalised stigma.

Overall, experiences of the social security system were varied, depending on the type of benefit someone was claiming and their individual circumstances. However, from both our qualitative interviews and the results of our survey, many claimants found the experience of navigating the system to be difficult, overly complex, and demoralising. This difficulty, in itself, could be deeply stigmatising and, in some cases, traumatising.
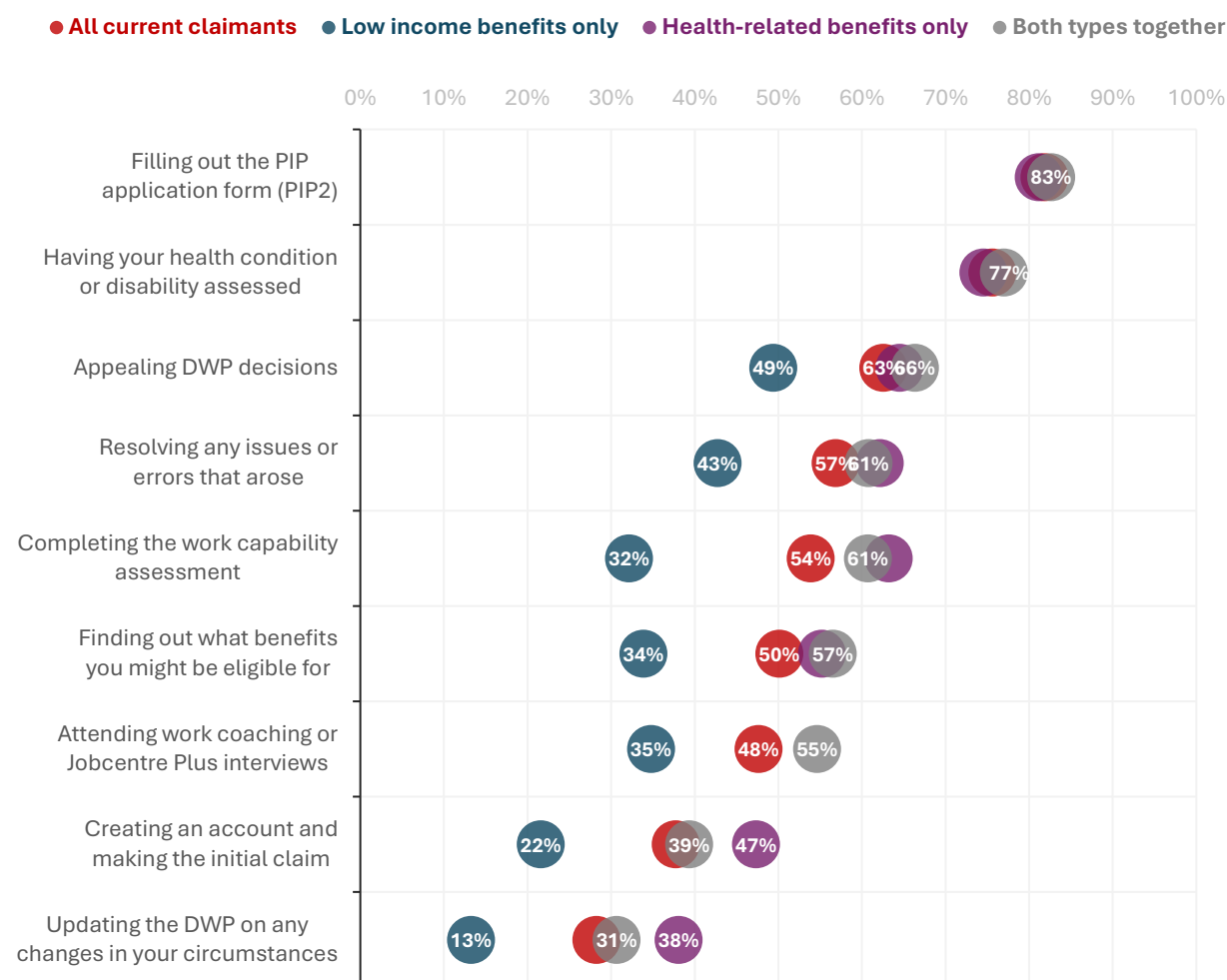
Figure 4.1 gives an overview of how difficult an experience claimants found each of the main stages of applying for benefits (among those who could recall going through that stage). It reveals that claimants generally had less difficulty with making the initial application (38% of current claimants found this 'very' or 'quite difficult') and updating the DWP on any changes in their circumstances (28%). Other aspects were more challenging. For example, half (50%) of current claimants found it difficult to know what benefits they might be eligible for and 57% of those who had experienced errors or issues with the DWP struggled to get these resolved.[60] The most difficult stages of the process were: filling out the PIP application form (82% of PIP claimants found this difficult); having their health condition assessed by an Independent Assessment Provider (76% of PIP claimants); and appealing DWP decisions (63% of current claimants).

What is also clear immediately from Figure 4.1 is that, across all stages of the process, those who were currently claiming health-related benefits (such as PIP) were more likely to find each stage of the process difficult than those solely claiming low-income benefits, such as Universal Credit. For example, two-thirds (65%) of those receiving only health-related benefits found appealing the DWP's decision a difficult experience, as opposed to 49% of those only receiving low-income benefits.

In the qualitative interviews, our interviewees spoke of how applying for UC *could* be a straightforward process, and claimants were often notified of decisions quickly. The difficulties within UC tended to arise when the claimant's situation was more complicated, when mistakes occurred within the system, and when part of the claim involved conditionality and work requirements. Claiming for PIP, as noted, was a more complicated process: the forms were longer, and it was less clear how to answer them; it was harder to provide the evidence requested, and there was a high chance of refusal on the initial application. This increased the emotional strain of the application considerably, as we discuss below. Applying for Pension Credit, as an income-based benefit, was a fairly straightforward process, but with some difficulties arising from low digital capability and increased likelihood of holding savings over the threshold.

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[60] 50% of current claimants could recall having to resolve any issues or errors that arose.

Figure 4.1 – Some stages of applying for benefits were more challenging for claimants
Percentage of claimants (who could recall going through each stage) who described this stage of applying as a 'very' or 'quite difficult' experience (Source: YouGov survey)

- ● All current claimants ● Low income benefits only ● Health-related benefits only ● Both types together

Stage	Value(s)
Filling out the PIP application form (PIP2)	83%
Having your health condition or disability assessed	77%
Appealing DWP decisions	49%, 63%, 66%
Resolving any issues or errors that arose	43%, 57%, 61%
Completing the work capability assessment	32%, 54%, 61%
Finding out what benefits you might be eligible for	34%, 50%, 57%
Attending work coaching or Jobcentre Plus interviews	35%, 48%, 55%
Creating an account and making the initial claim	22%, 39%, 47%
Updating the DWP on any changes in your circumstances	13%, 31%, 38%

Notes: sample sizes range from: all current claimants = 359 to 871; low income claimants = 69 to 229; health-related claimants = 49 to 340; both = 154 to 302. Missing circles indicate question not asked of this group.

There were groups of people, however, for whom even the UC system was more difficult to access: older people, and recent(ish) immigrants (particularly those for whom English was an additional language) could struggle with the forms. Those from other countries also lacked knowledge or familiarity of the UK social security system. One father only claimed for UC when he lost his job, but in doing so, discovered that he would have been eligible for some support beforehand, due to low income, and continued to receive some once he was back in work. He had assumed that the support available would be similar to that provided in his home country.

Clearly, the complexity of the system was a key factor, however, as we discuss in the next section, inherent in this complexity are features and mechanisms that seem designed to confirm the underlying stigmatising beliefs and values discussed in the previous chapters; that is not a universal system of reciprocity, based on contributions or citizenship, designed to support all in society, but a strictly needs based system, that should be accessed only if absolutely necessary, and under stringent conditions. In this respect, the system appears to work to make it difficult and, at times, humiliating to claim.

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What are the drivers of institutional stigmatisation?

We identified several mechanisms by which claimants felt they were treated in a stigmatising way, and that seemed to confirm the wider perceptions of claimants, as described in chapter 3. Fundamentally, the system demonstrated what can best be described as institutional indifference – it could be rigid, unresponsive, and blind to individual circumstances. Seemingly designed around fraud prevention, the system often treated claimants with suspicion rather than support. Claimants could be subject to strict controls over job-seeking behaviour and medical certification. This combination of **surveillance**, and **suspicion**, combined with **inflexible rules** and **difficulty correcting administrative errors**, created an environment in which users – especially those with complex needs – experienced systemic depersonalisation and stigma.

Suspicion and control in conditionality and PIP assessment

The extensive requirements to meet certain conditions to receive support highlighted how the system fosters suspicion and diminishes autonomy. There were several examples given of the system either implicitly or explicitly prioritising checking if a claimant was genuine over treating them with respect; a number of claimants said they felt like the system was trying to 'catch them out'. While pretty much all we spoke to agreed that there did need to be some assessment of need in the case of PIP, or efforts to find work in the case of Universal Credit, the level of monitoring felt intrusive, controlling and mistrustful. The high rejection rate for PIP on first application was one of the key mechanisms that made people feel as though they were fraudulent. Some claimants we spoke to had been to a tribunal before they were awarded PIP and this had contributed to the stress involved with applying for benefits.

> *"… "They just scored no points on everything… It's a point system and you have to have so many to get it and then more for if you give the enhanced rate. But this is what they do … it's just a tactic, I feel, just to delay and stop people carrying on because they know how stressful it is." (Single non-working man)*

While many saw this as a way of the DWP reducing the number of people who claimed disability benefits, implicitly, the rejection also denied their own lived experience of disability, and the level of incapacity that they were suffering. In some cases, this was felt explicitly by those who were claiming.

> *"… it's things that should be giving me the fair few points on the PIP system and they've awarded nothing on everything, and without much explanation. Just basically saying, well, if you can't produce evidence, we don't believe you." (Non-working mother)*

Those who were turned down for PIP could then also be expected to work at a level that wasn't necessarily possible given their health, as without eligibility for PIP, they may not be placed in the LCWRA category for UC. One adviser noted that he would warn people to expect to be rejected initially, to prevent those with mental health issues from feeling even more stigmatised.

> *"… "I always tell people about all three [stage of applying for PIP]. You know, that this week we're doing the mandatory reconsideration. But don't get upset*

when it's turned down, because it will. If you're one of the few per cent which is accepted, just go whoopee or something. But don't get upset, especially. If you got mental health problems, don't get upset and give up" (adviser)

In the case of conditionality, on the occasions when the staff at the Jobcentre didn't seem to trust that they would look for work, the experience felt deeply stigmatising. The threat of sanctions could remove trust and make it hard to build a relationship with the work coach, leaving claimants feeling disbelieved about their motivation to get back into work and tightly monitored through compliance with the system.

Some claimants noted that their experience of work coaches during the Covid pandemic was very different, feeling less pressured and more supportive. During Covid, the requirements to find a job were lowered, as clearly it was very difficult to find work during that time. It allowed the work coaches to focus on supporting the needs of that person (i.e. providing the tailored support that the Government says work coaches offer), rather than checking they were meeting their commitments. There were other examples, however, of when work coaching had been effective, which we discuss in chapter 6, which illustrate why the 'tick box' approach is ineffective.

Furthermore, both conditionality and work coaching contributed to a sense of proprietorship over how people who claimed benefits spent their time, as a trade-off for receiving financial support. There is little evidence that people do not try and get work if they can,[61] but on occasions, the system appeared designed to suggest otherwise. Claimants were asked to demonstrate that they were putting in a requisite amount of effort to find a job, regardless of whether it was productive or not. At least one adviser suggested that this was tied to the targets and performance indicators that work coaches/DWP job centres have to meet. There were many examples of people who felt that the support they were given at the job centre was not aimed at helping them into a job, but to 'tick boxes' in a system designed to demonstrate conformance to proving that you are trying to find work.

> *"… "I was undergoing some form of training, however much of that training wasn't relevant. [didn't need training] Not on the things like to use the computer, right. I think it was, you know, pointless, but they were sort of insisting upon it for quite a long time… at least six months that if I didn't engage, they were going to stop my benefits…, eventually they accepted that that wasn't the best use of my time to go on this course because of my health conditions. They accepted that I wouldn't be required to do it.. but they did insist that I go along to the job centre every two weeks to sign on." (Single non-working man)*

Another woman told of how her father was struggling to complete the work diary, which felt like a waste of time, that could be better spent actually looking for work.

> *"… It's ridiculous stuff that he's been asked to put on his journal. He's having to put explanations of how he's spent his time, how he's applied for jobs, how many jobs he's applied for. It is just a tick box exercise because he said to me "I've spent so long applying for these jobs, because it takes me about two hours to fill out what they ask him each week and he said to me well, but by the time that I've done all of that, I could have been applying for more jobs"*

[61] Shildrick and Macdonald (2013) Poverty Talk: How People Experiencing Poverty Deny Their Poverty and Why They Blame 'The Poor'

By offering training that is not of use, or by calling people in for meetings even if they were in work, and would need to take time off to attend, the impression was of a system aiming to exercise control of those within it, rather than support them productively. At least one of the non-claimants explicitly rejected the idea of claiming as she didn't want to be told how to use her time. The institutional stigma therefore feeds into social stigma, through the implication that benefits claimants need to be controlled to prevent them from cheating the system.

We asked current claimants about some of these issues in the YouGov survey (Table 4.1). This found that three-in-five (64%) of current claimants felt like the benefits system was trying to catch them out, with just 13% disagreeing with this view. Half (49%) were made to feel like they weren't deserving of any money. Just one-in-five (22%) meanwhile felt that the application process was easier than expected, while nearly half (47%) disagreed with this – suggesting that many found the process more challenging than (or as challenging as) they thought it would be.

Table 4.1 – Three-in-five claimants felt the system was trying to catch them out
Percentage of current claimants who agreed or disagreed with each statement related to the process of applying for benefits (Source: YouGov survey)

Statement	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree
"It feels like the benefits system is trying to catch you out."	38%	26%	24%	7%	5%
"The benefits system made me feel like I wasn't deserving of any money."	24%	25%	24%	18%	9%
"The process of applying for benefits was easier than I expected."	5%	18%	31%	25%	22%
"The staff assessing my application lacked empathy for people in my situation."	20%	21%	31%	18%	9%
"The Department for Work and Pensions made errors when handling my claim."	13%	13%	30%	22%	22%

Notes: based only on responses of current claimants. Sample sizes range from 744 to 905. We exclude those who answered 'not applicable'.

Procedural rigidity and limited adaptability

The second key mechanism was the lack of flexibility in the system to account for individuals' circumstances when they did not align with predefined categories or expectations. This happened most frequently during work coaching (which as noted above is meant to offer 'tailored support'). In the survey data, of those who could recall going through work coaching, only 15% said it had been 'very' or 'quite beneficial'.

As noted above, contrary to being provided personal and tailored support, some participants felt that they were only attending meetings as a tick box exercise to comply with the conditions of their Universal Credit entitlement. Negative experiences highlighted by claimants typically centred around staff not making any attempt to understand the specific

requirements of the claimant and how to tailor the support to them. This not only made claiming harder, but diminished trust in the system, as one adviser noted:

> *"… It just makes people feel like, you know, they're not a real person…just got this set of questions which you're asking to everybody and you've got to tick your boxes. You just feel like you don't matter" (adviser)*

One young mother, whose child was aged under three, had already gone back to work by the time she attended one Jobcentre, although at that point, there was no UC obligation to do so. She was therefore enraged when the expectations on her increased, seemingly unnecessarily.

> *"… When I went back in to work 7 hours a week, they then insisted on weekly Jobcentre appointments with the work coach. I think it started every week. Then it went to every two weeks to which I got quite irritable with, I will be honest because from my point of view … I don't have to work at this stage if I didn't want to. I've gone into work because I needed to for my mental health, and now you're pushing me to go in and for more hours" (single mother)*

She also struggled to claim back the payments for childcare she was entitled to, as although she was working seven hours, she was only able to get the childcare needed by paying for 14 hours. Her treatment within the system left her feeling very negative towards the system; powerless and unsupported by it.

> *"… I don't particularly trust any of it, and the sooner I'm out of the system, the better for me. As soon as I can go back to work full-time and not be dependent upon because I hate being dependent upon the system. Because I do feel like your life is in somebody else's hands and I know they can stop the money at any stage if they wanted to for no reason. So yeah, I just hate it."*

She had also informed the work coaches of her working days, nevertheless appointments were made for then, meaning she would need to take time off from work to look for work. Another mother was allocated a work coach appointment while she was still in hospital after giving birth and had to spend time phoning up to try to sort it out.

In some cases, when applying for Universal Credit, the DWP would not accept pay slips as evidence of earning. The claimant may not have wished to disclose their need for UC to their employer but would not qualify without doing so. The PIP application form was also considered inflexible by some, in that the nature of the questions were limited and wouldn't necessarily help the assessor to understand how the disability was impacting on daily life.

This inflexibility stretched to savings limit rules in the benefits system, which can delay people receiving the support they need, or reducing the amount of support they get, typically if they have between £6,000 and £16,000 in savings or investments[62]. This impacts pensioners more than most, as they are more likely to have built up savings. This was more likely for older women in particular, who may not have built up sufficient National Insurance contributions to qualify for a full state pension. In 2022, nearly around 1.8m pensioners were receiving under £100 pw from the state pension, of which 1.3m were women.[63] As was the case for two woman we interviewed, they may not have had access to a workplace pension, and so any money they have put aside in saving for old age now reduces the amount of

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[62] Money Helper: How do savings and lump sum payouts affect benefits?
[63] State pension gender gap remains 'stark' despite improvements Pension Age 15/11/22

additional state support they can receive. That those who own their own houses with a mortgage were also unable to receive the housing element of UC was also raised by interviewees. Overall, this structural inflexibility fed into the belief that the system was not on their side and was not truly interested in supporting people.

Dismissive attitudes, errors and uncertainty

The errors that claimants encountered within the system, and the difficulties experienced to rectify them, were perceived to be disempowering. Although generally easier to apply for Universal Credit initially, when issues arose, they could be difficult and time-consuming to resolve, and claimants could also be subject to rude treatment from DWP staff in the process.

There was evidence of this from both the YouGov survey and the qualitative interviews. As Table 4.1 shows, a quarter (26%) of current claimants felt that DWP had made errors when handling their claim and, while a quarter (28%) disagreed – suggesting negative experiences weren't universal – two-in-five (42%) current claimants agreed that "the staff assessing [their] application lacked empathy for people in [their] situation".

One claimant we spoke to had had their account closed because the DWP stated that they failed to attend a meeting. This meeting had never existed for the participant, in fact, and their account had been wrongly closed. Eventually they were able to get their account and benefit payments re-instated, however, when dealing with the staff at DWP, the assumption was that the mistake was their fault.

> *"… I spoke to someone on the phone and they were quite rude. They were like 'well you should have gone, you should have kept up with everything and went to the meetings' and I said you can check my account. There was never a meeting. And then they did find out, luckily, that the person who closed our account, closed the wrong account." (non-working mother)*

And while it was eventually rectified, the money they lost during this time wasn't refunded, despite it being incorrectly withheld.

Some DWP staff also appeared inadequately trained in their role, which could feel belittling to the claimants. For example, one woman noted she had to explain things to the staff at the Jobcentre that they should have known, claiming they were 'nothing but unhelpful' and just 'ticking boxes'. She felt they made unhelpful suggestions not suited to her circumstances. Their attitude was also demeaning, believing '*they speak down to you*' and that they were '*really quite derogatory, they try and teach you how to suck eggs*'.

> *"… She was like, 'so have you made a CV?' and I literally looked at her, and I said, 'I worked in recruitment for seven years, please don't ask me if I've made a CV'. I said if you spent 30 seconds getting to know me, then you would know my previous history." (single working mother)*

The attitude of the staff may even be self-defeating, as she felt that being spoken to in this way could have put her off getting back into work, as it made her feel she '*wasn't good enough for anything*'.

This also illustrated how depersonalising applying for benefits can be. While the application form for Universal Credit was considered intrusive by some, mostly it was a matter of giving details of income. Clearly, providing support to help someone into work requires delving into

the complexity of individual lives; their skills and previous experience, their caring responsibilities, their support network, their access to transport, and any health issues that might limit their capacity to work. The support offered would need to consider all these factors, and yet it rarely appeared to do so. This could leave claimants feeling dehumanised.

The process of applying for benefits could take a considerable emotional toll on people, especially the process of applying for PIP. To achieve the requisite points to be eligible for PIP involved focusing on the worst days, and talking about the most debilitating aspects of their impairment or ill condition could be very mentally draining - whereas interviewees wanted to try and stay positive about their health conditions.

> *"… [it's] soul destroying having to focus on what you can't do." (survey quote)*

The process of applying for PIP was described as "*ridiculous and degrading*", and as one participant put it, it "*is a major ordeal for people*", especially as claimants are already struggling (both financially and with their health).

The PIP assessment was also an area where claimants felt that the staff were dismissive, misrepresenting what had happened or been said during the assessment process. One woman had it noted that she was "very mobile" as she walked quickly through the assessment room. In fact, the woman was feeling dizzy and wanted to get to her seat quickly. Another felt the whole process was hostile, and that the assessor had made up her mind before she even arrived. The claimant felt that the assessor *"didn't believe me from the moment I walked in the room".* Furthermore, some of the information on which the assessment was based was not accurate.

> *"… Some of it wasn't even true, like she had basically lied by saying I had made my own way there when that wasn't even asked, and I hadn't made my own way there. My husband had taken me." (non-working mother)*

The adversarial nature of the system was clear in the language used by our interviewees. They described themselves using words such as strong, as a "fighter" or having a strong "mindset" which allowed them to get through the emotional difficulties associated with applying for benefits. Others commented on feeling "helpless", because no matter how difficult they were finding the process, they needed the support and had to keep going. Furthermore, participants often felt deflated during the process, for example after receiving 0's from the DWP on all of the descriptors, meaning they wouldn't be eligible for PIP.

Both the lack of concern about the information that formed the basis of eligibility, and the attitude of the staff towards those who claim suggested a disregard for those in the system, thereby potentially reinforcing the stigmatising belief that they are 'second class'. Furthermore, during one of the aforementioned in-person assessments, the fact that the assessor was observing the claimant without her consent, and using this information, true or not, to decide her eligibility furthered the perception of the system as one typified by surveillance and mistrust.

Finally, the system was also seen as unreliable and inherently uncertain. This was reflected in our YouGov survey: two thirds (67%) of all current claimants agreed with the statement "I often worry that my benefits could be taken away from me in future" (Figure 4.2). This rises slightly to 73% among current UC claimants, but even more so among PIP claimants (80%).

Pension Credit claimants, on the other hand, were slightly less likely to be concerned about losing their benefits, though three-in-five (61%) were still concerned.

Figure 4.2 – PIP claimants were most worried about their benefits being taken away. Percentage of respondents who agreed with the statement "I often worry that my benefits could be taken away from me in the future", by type of benefit received (Source: YouGov survey)
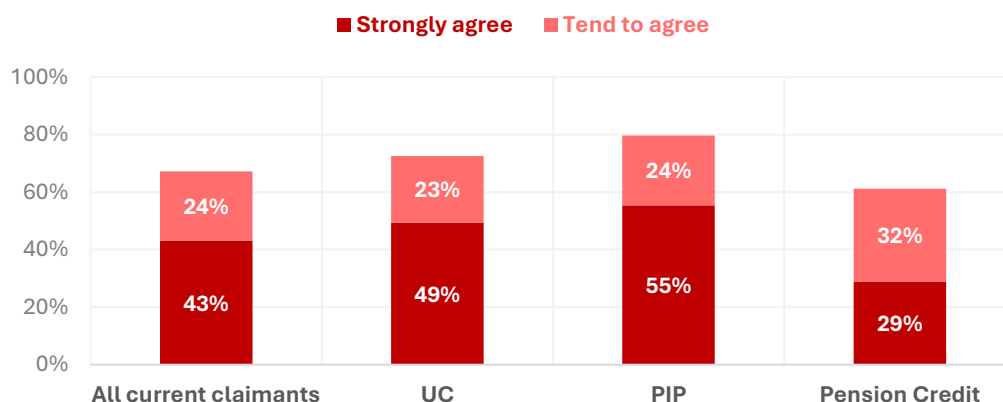
Notes: sample sizes as follows: all current claimants = 970; UC = 427; PIP = 440; Pension Credit = 81.

PIP claims were time-limited, and for the claimants we interviewed generally involved re-assessment after two or three years. Someone whose health was exactly the same as when they successfully claimed could be turned down at their next assessment. This caused a huge amount of worry, and potential financial hardship, among our interviewees who were either receiving disability benefits or trying to claim them. These interviews were conducted around the time that the government had announced the 'Pathways to Work' Green paper,[64] which had considerably increased this anxiety and uncertainty.

> *"… It's been the constant worry because of the awards not been long enough that at any moment my whole life can just be taken away because I am solely reliant on these benefits… if they change things like the PIP requirements or whatever and I lose a substantial amount of what I'm getting, I might have to give up those carers. I mean, I didn't have a hot meal for four years because I'm unable to cook anything" (Single non-working claimant)*

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[64] Gov UK (March 2025) Pathways to Work: Reforming Benefits and Support to Get Britain Working Green Paper
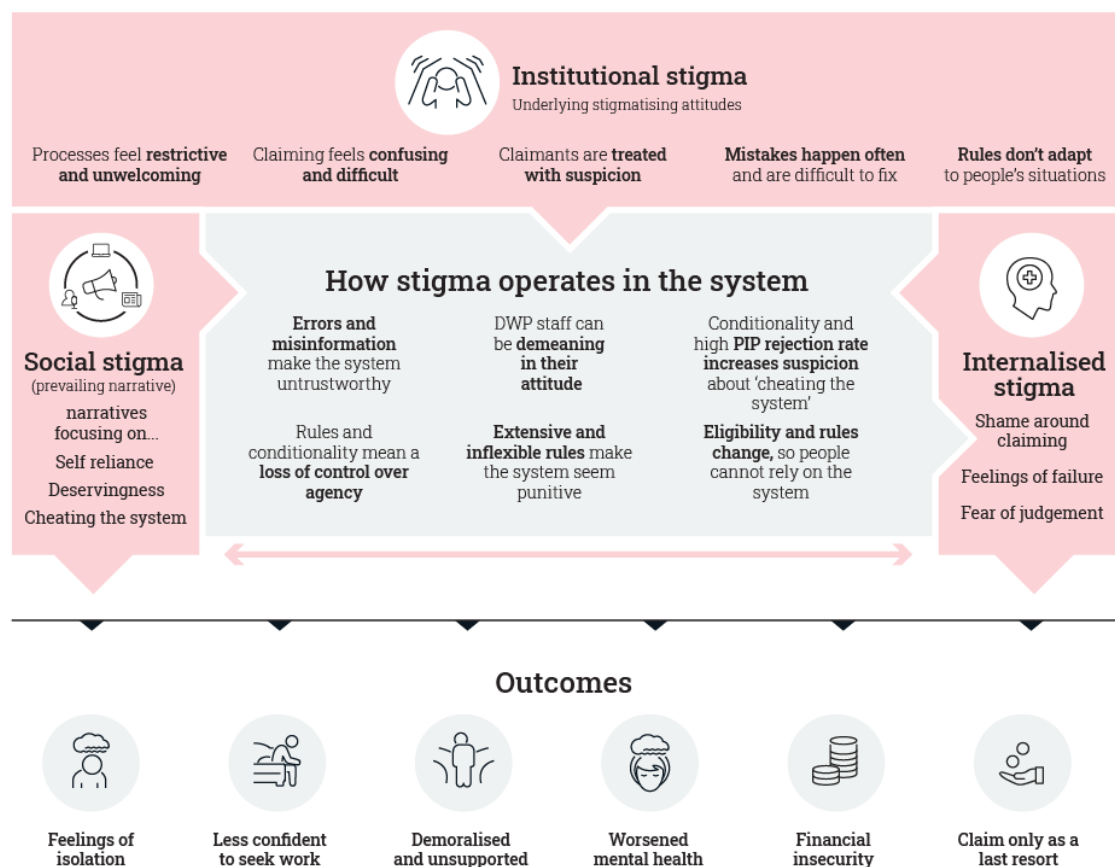
5 THE IMPACT OF STIGMA

In this chapter, we use the interview and survey data to examine the ways in which social and institutional stigma surrounding the benefits system and benefits claimants creates internalised stigma, and the consequences for people in low-income households.

The stigma described in previous chapters can have a material impact on the lives of people who do or should claim. It may mean that people either don't claim at all or delay making a claim because they feel ashamed or embarrassed, which can exacerbate financial insecurity. Applying for benefits can have a negative emotional impact on self-esteem and affect both mental and physical health.

Figure 5.1 below maps how these various factors combine, to produce mechanisms by which stigma operates in the UK benefit system. These mechanisms impact both the experiences and decisions of claimants and non-claimants across the UK. The production of internalised stigma was one of the outcomes of the perceived and institutional stigma experienced within the system.

Figure 5.1 – Mapping stigma in the system

Institutional stigma
Underlying stigmatising attitudes

Processes feel **restrictive and unwelcoming**

Claiming feels **confusing and difficult**

Claimants are **treated with suspicion**

Mistakes happen often and are difficult to fix

Rules don't adapt to people's situations

How stigma operates in the system

Social stigma
(prevailing narrative)
narratives focusing on...
Self reliance
Deservingness
Cheating the system

Errors and misinformation make the system untrustworthy

DWP staff can be **demeaning in their attitude**

Conditionality and high **PIP rejection rate increases suspicion** about 'cheating the system'

Rules and conditionality mean a **loss of control over agency**

Extensive and inflexible rules make the system seem punitive

Eligibility and rules change, so people cannot rely on the system

Internalised stigma
Shame around claiming
Feelings of failure
Fear of judgement

Outcomes

Feelings of isolation

Less confident to seek work

Demoralised and unsupported

Worsened mental health

Financial insecurity

Claim only as a last resort

The impact of stigma on claiming behaviour

We find some evidence that stigma may impact upon people's claiming behaviour. This mostly appears to take the form of delaying their claim or claiming as a last resort, as a response to very constrained financial circumstances, rather than applying more proactively. To a lesser extent, we also found evidence of people being put off from applying at all.

Many claimants delayed claiming

Many claimants in our YouGov survey had not applied for benefits immediately after encountering the circumstances that ultimately led to their application. While 46% of current claimants had claimed immediately or within a month, a third (33%) waited between two months and a year, and one-in-five (21%) waited more than a year. Breaking this down by type of benefits claimed, we see that households receiving UC were more likely to claim straightaway. Those receiving only health-related benefits were more likely to delay claiming; a third (33%) had waited more than a year after first experiencing a change in circumstances. Demographically, claimants over 65 were the most likely age group to delay applying, with a quarter (26%) waiting more than a year to apply.

We asked claimants who had waited two months or more to apply why they had delayed claiming. The results are shown in Table 5.1 and include not just reasons related to stigma, but also other factors – such as a lack of awareness of their entitlement or issues related to the complexity of the system. We discuss each of these in more detail below.

Table 5.1 – There were a variety of reasons why people had delayed making a claim
Of those who had waited two or months to apply, what percentage gave each reason for doing so, by type of benefit received. Red shading indicates higher values, blue indicates lower values.

Reason why claimants had delayed applying	Of those who waited 2+ months to apply...			
	Current claimants	Low-income benefits only	Health-related benefits only	Both types together
EITHER wasn't aware I was eligible until told OR not entirely sure what I was eligible for	61%	46%	69%	54%
I wasn't entirely sure if I was eligible or what I was eligible for	40%	29%	45%	38%
I wasn't aware I was eligible until someone told me	35%	25%	42%	29%
EITHER embarrassed what people would think OR didn't see myself as someone who would claim benefits	29%	25%	26%	38%
I didn't see myself as someone who would claim benefits	21%	18%	22%	22%
The application process seemed too complicated or overwhelming	21%	8%	23%	26%
I thought I'd be able to manage okay without benefits	20%	28%	14%	25%
I was embarrassed what people would think if I claimed benefits	16%	19%	10%	24%

I didn't have anyone to help me apply	11%	4%	10%	18%
I didn't know how to apply	11%	9%	10%	13%
I was put off by previous bad experiences of applying (or experiences I'd heard about)	11%	7%	10%	15%
I thought applying for benefits would be more trouble than it is worth	10%	7%	10%	10%
Sample size	410	83	211	116

Some non-claimants were potentially eligible but hadn't yet claimed

While assessing benefit eligibility is not a simple process, we wanted to gauge approximately how many non-claimants thought that they may in fact be eligible for some form of benefits. We found that most (64%) were 'confident [they] were not eligible for any benefits', while a further 14% believed that they were 'just above the eligibility threshold for benefits'. One-in-six (17%) non-claimants, however, gave an answer which implied either they were unsure what they might be entitled to or hadn't applied despite being believing themselves to be eligible:

- 'There's a chance we might be eligible but we haven't really checked' = 5%
- 'We tried to check if we were eligible but didn't manage it' = 1%
- 'We think we might be eligible but we don't plan to apply' = 1%
- 'We think we might be eligible and plan to apply soon' = 1%
- 'Don't know' = 9%

Answers to this question were of course correlated with household income. While one-in-six of all non-claimants gave one of the above answers, this rises to 43% among households on less than £10,000 per year and 25% among those on £10,000-14,999 per year. It falls to 16% for the £15,000-19,999 group but then rises to 21% among those earning £20,000-24,999.

Following this question, we then asked those who gave one of the answers above their reasons for not yet claiming (Table 5.2) – in a similarly-worded question to that asked of claimants who had delayed claiming. In the sections that follow, we draw attention to some of the more common reasons given.

Table 5.2 – There were a variety of reasons why people hadn't yet claimed
Of those who thought they might be eligible for benefits, what percentage gave each reason for not yet applying? Red shading indicates higher values, blue indicates lower values.

	Of those non-claimants who think they might eligible…	
Reason for delaying applying	**All**	**Those with high financial worry**
EITHER not entirely sure what eligible for OR wasn't aware I was eligible until recently	45%	43%
I'm not entirely sure if I'm eligible or what I'm eligible for	39%	41%
I wasn't aware that I was eligible until recently	8%	3%

EITHER embarrassed about needing to claim OR don't see myself as someone who would claim benefits	29%	39%
I don't see myself as someone who would claim benefits	19%	20%
I am embarrassed about needing to claim benefits	13%	28%
I think I should be able to manage okay without benefits	24%	14%
The application process seems too complicated or overwhelming	22%	27%
I think applying for benefits is more trouble than it's worth	19%	18%
I don't know how to apply	12%	18%
I'm put off by previous bad experiences of applying (or experiences I've heard about)	10%	18%
Being on benefits comes with too many restrictive conditions	10%	16%
I don't have anyone to help me apply	9%	23%
I haven't got round to it yet, but I plan to apply	9%	16%
I need to spend more of my savings before I'm able to apply	5%	9%
Sample size	*218*	*50*

Notes: 'high financial worry' indicates a score of 8-10 on a scale from 0-10 when asked about their level of financial worry.

Lack of awareness of entitlement

This was the most common reason why claimants had delayed claiming and why potentially eligible non-claimants had not yet claimed. Three-in-five (61%) claimants who had delayed making a claim said they didn't apply straight away because they weren't confident of their eligibility (Table 5.1). This comprises 40% who weren't entirely sure if they were eligible or what they were eligible for, and 35% who said they weren't aware they were eligible until someone told them (with some overlap between the two groups).

While low awareness delayed the application, other factors – such as stigma – may drive the desire for someone to determine their eligibility or not. For example, one claimant we spoke to in the qualitative interviews delayed applying for PIP for around 10 years because she didn't realise she was eligible; however, stereotyped views also fed into this decision. She didn't see herself as 'disabled', and therefore eligible, as she was suffering from a long-term illness. It was only when she saw in a magazine that someone else with a similar condition had received benefits that she realised she may also be eligible.

Those receiving health-related benefits were more likely to cite a lack of awareness of eligibility as a reason for delaying claiming (69%, compared to 46% of those receiving low-income benefits only) (Table 5.1). This was also true of older people, with evidence of this mentioned by advisers and claimants in the interviews as well as in the survey: three-quarters (74%) of those aged 65 plus who had delayed claiming gave a reason related to awareness of entitlement – compared with 49% of those aged under 30 and just 38% of those aged 30-39.

Complexity of the system

It was commonly mentioned within our qualitative interviews that various complexities of the system either put people off applying or had caused people to delay their claims. As mentioned in chapter 4, applying for benefits can involve filling out long forms (although some people find this easier than others) and be a very difficult process (especially applying for PIP). This was clearly off-putting: two-in-five current claimants in our YouGov survey (43%) agreed that they 'didn't want to apply for benefits because [they] knew how hard it can be to apply'. Around one-in-five (21%) current claimants who had delayed claiming did so because they felt the application process was too complicated or overwhelming and around one-in-ten felt they either didn't have anyone to help them (11%), didn't know how to apply (11%) or thought it would be more trouble than it was worth (10%).

Similarly, one-in-five non-claimants hadn't yet claimed despite thinking they might be eligible because they thought 'the application process seems too complicated or overwhelming' (22%) or because they thought 'applying for benefits is more trouble than it's worth' (19%). 12% said they didn't know how to apply, while 9% said they didn't have anyone to help them apply; interestingly, the latter rises to 23% when looking only at those most worried about their finances.

As discussed in chapter 4, it was clear how much hassle and stress applying added to people's lives (again especially for PIP), and some non-claimants in the interviews said they hadn't applied because it seemed more bother than it was worth, particularly those who felt that they wouldn't be given much financial support anyway. It seems that people may make a trade-off between the level of effort they think it will take to apply, and whether they think they can manage without financial support. Indeed, one-in-five (20%) claimants said they delayed claiming because they thought they would manage okay without.

Stigma

Stigma, either alone or tied to other factors, could also lead people to not claim or to delay their claim; for example, either feeling embarrassed about claiming, or hearing negative views from others about the system that put them off, or feeling like they would be judged or shamed for their circumstances and concerns over how they might be treated when claiming.

There were instances where complexity overlapped with perceptions of institutional stigma. Some people in the qualitative interviews didn't apply for benefits because they were reluctant to give up control of their lives. They worried there would be too many conditions and too much pressure, if they felt they could manage without. Part of this pressure came from having to justify their choices – and a fear of being judged for those choices. For example, as one non-claiming parent of a pre-school child said:

> *"… it's [going to the job centre] a lot of back and forth again and again, and you have to justify yourself and you have to do a lot…for me to get to the job centre to do that, like I'll have to either walk it or bus it or you know, and it's quite far from me. So it's just it'd be more hassle for me to get that money than it would be for me not to… The amount of time and effort it would take me to go there again and again, I might as well go work. Just having to justify my decision making of staying home. It wouldn't be a good feeling."*

As a result, people often only claimed as a 'last resort', when they had exhausted all other means of supporting themselves. Clearly, this can leave people in a financially vulnerable position.

Over half (53%) of current claimants in our survey agreed that they 'only applied for benefits as a last resort' (while 25% disagreed). At the same time, more than half (57%) also said that they 'applied for benefits very soon after finding out [they were] eligible'. This suggests that stigma and awareness of eligibility are somewhat inter-connected; while most will claim fairly soon after discovering they are eligible, a significant proportion may be delaying the process of checking their eligibility until they have exhausted all other options, leaving themselves in a more vulnerable position

Among those who had delayed claiming, around one-in-five did so because they didn't see themselves as someone who would claim (21%); around one-in-ten were put off by a previous bad experience of claiming (or a bad experience they had heard about) (11%), and 16% delayed because they felt embarrassed about what people might think of them (Table 5.1).

The qualitive interviews confirmed that embarrassment about claiming benefits could put people off applying. One non-claimant was worried that others would judge her for choosing to stay at home to look after her child full-time; that people would think that *"if you can't afford to have children you shouldn't have them"* knowing that was how she previously judged people in this situation. One PIP claimant stayed in work a lot longer than she should have over worry that she would be judged if she no longer worked. This delay resulted in a deterioration of her physical health condition.

Fears about disclosing personal information, and the possible consequences of doing so, was another factor that put people off claiming. One woman we spoke to was worried about applying for PIP, because she feared that discussing her mental health difficulties with benefits staff might lead them to question her suitability as a parent and potentially take her children away. Homelessness could also be an issue; one couple delayed claiming because they were living in a hostel at the time and wanted to be in permanent housing before they applied; they were embarrassed about their position. This highlights that there can be circumstances where people feel that applying for benefits is too exposing, exacerbated by a lack of trust in the system.

Box 5.1 – What reasons do the general public give for billions of pounds of benefits going unclaimed?

As well as understanding the reasons why those in and around the benefits system had put-off claiming, we also explored what reasons the wider public give for people not claiming what they are eligible for. In our YouGov survey, we explained that over £20 billion of benefits goes unclaimed each year and then asked respondents why they thought this was. The diagram below gives the most common responses, which largely match the views of claimants and potential claimants. Most believe that a lack of awareness of eligibility is the main reason people don't claim. This is followed by finding the system hard to understand and then reasons related to the stigma of claiming, such as worried what others would think or being 'too proud' to apply.

Why do people in general think that benefits go unclaimed?

■ **All respondents**   ■ Current claimants
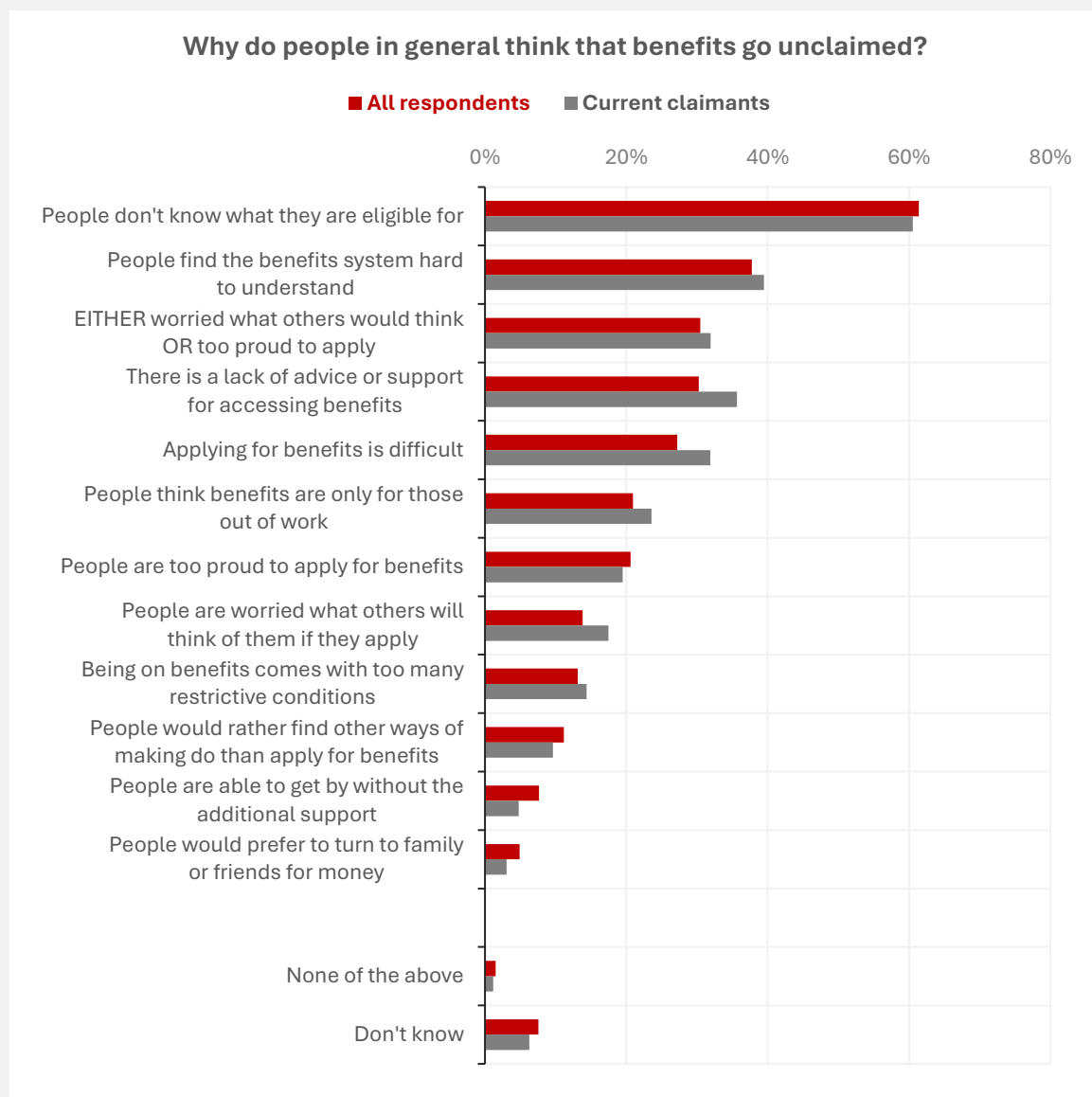
Notes: sample sizes as follows: all respondents = 4,191; current claimants = 970. Respondents could select up to three reasons.
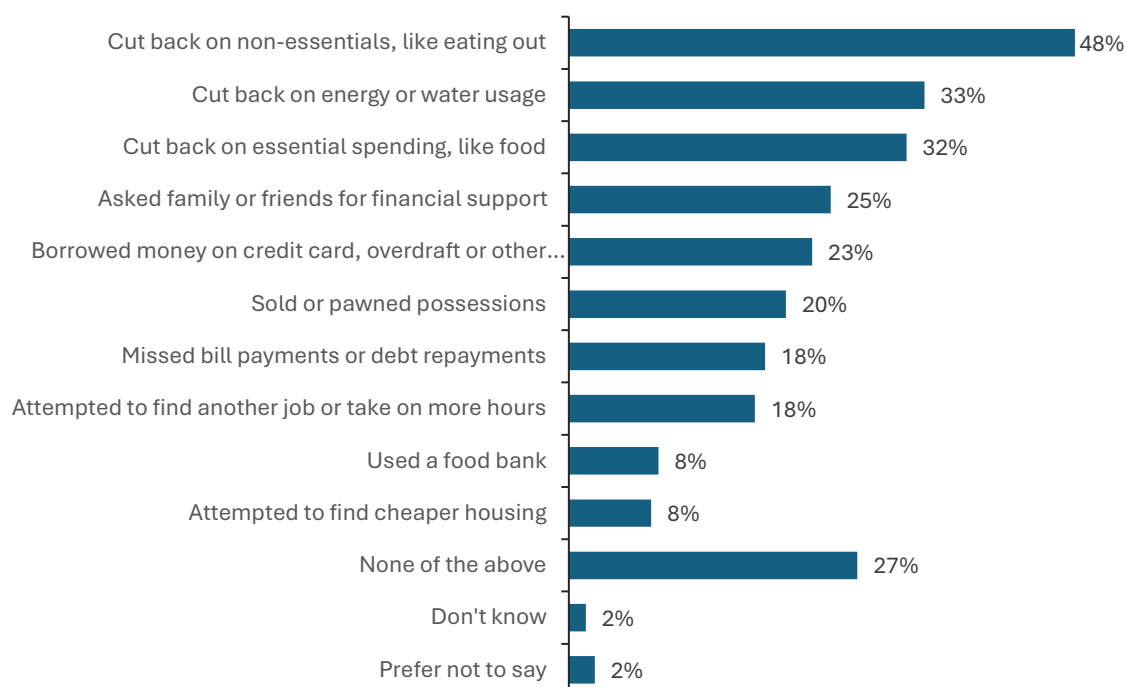
The impact of stigma on financial security

The impact of delaying or avoiding claiming was, unsurprisingly, a greater risk of financial difficulty. One woman that we interviewed, for example, had lost her job during Covid and struggled to find a new one, due to health issues that required surgery. She did not apply for benefits, or even check her eligibility, as she worried it would be too confusing. Despite her health conditions, she didn't have a formal diagnosis, and when she went to her GP to ask for the form for the evidence she would need to apply, she claimed the GP gave her a 'bad look' and told her he 'didn't deal' with that kind of thing. She didn't want to claim income replacement benefits as she felt an obligation to support herself. At the time of the interview, her poor health meant she was still unable to work full-time and so her family struggled financially. The perceived stigma of claiming benefits, coupled with a bad experience continued to prevent her applying for financial support.

Similarly, the YouGov survey results find that those who had delayed making a claim used a variety of strategies to make ends meet (Figure 5.2). Nearly half (48%) cut back on non-essentials, over one-in-five borrowed money on a credit card, overdraft or through other lending (23%), around one-in-six missed bill payments or debt repayments (18%), and around one-in-twelve used a food bank (8%). Only a quarter (27%) didn't need to make any adjustments to make ends meet.

Figure 5.2 – Households used a range of strategies to make ends meet prior to claiming
Percentage of respondents who took each action in the period before applying for benefits (among those who delayed claiming for two or more months)

Strategy	Percentage
Cut back on non-essentials, like eating out	48%
Cut back on energy or water usage	33%
Cut back on essential spending, like food	32%
Asked family or friends for financial support	25%
Borrowed money on credit card, overdraft or other…	23%
Sold or pawned possessions	20%
Missed bill payments or debt repayments	18%
Attempted to find another job or take on more hours	18%
Used a food bank	8%
Attempted to find cheaper housing	8%
None of the above	27%
Don't know	2%
Prefer not to say	2%

Welfare rights advisers also commented on the links between unmanageable debt and serious financial difficulty among people who do not claim benefits they are entitled to. The

frequent delay in receiving a PIP award, after going through mandatory reconsideration and then a tribunal, was also felt to be wholly unacceptable, as one adviser noted:

> *"… "It can be a two years or so after the original claim, before the Tribunal award. They say 'Well, they got their money" but I say "yeah, you can't go down to Sainsbury's or whatever and said I'll pay in two years' time when I get my PIP'…[in the meantime] they get into debt, which is they borrow money, they borrow money from friends. They use their credit cards, and it's just stacking up a lot of grief. Yeah, I get quite angry at times over the system."* (adviser)*

In the qualitative interviews, one woman temporarily gave up on her PIP application when after a traumatic face to face assessment "[I was] *sent a letter afterwards saying it still hasn't been awarded, so I gave up for a while"*. She only reapplied when she and her family could no longer manage. The couple who erroneously had their UC award stopped also noted that it *"got us in a bit of debt that we're still paying off now".* For one man, the delay in receiving PIP resulted in temporary homelessness when he was evicted due to rent arrears.

As mentioned earlier, many claimants were also left with a feeling of long-term uncertainty about whether the benefit system would support them sufficiently in future. Two-thirds (67%) said they often worry that their benefits could be taken away from them in future, rising to 80% among PIP claimants (Figure 4.2).

The emotional impact of stigma

The adversarial nature of the system was clear in the language used by our interviewees. They described themselves using words such as strong, as a "fighter" or having a strong "mindset" which allowed them to get through the emotional difficulties associated with applying for benefits. Others commented on feeling "helpless", because no matter how difficult they were finding the process, they needed the support and had to keep going. Furthermore, participants often felt deflated during the process, for example after receiving 0's from the DWP on all of the descriptors, meaning they wouldn't be eligible for PIP.

The emotional impact of this institutional and experienced stigma could be long lasting: one woman found the process so emotionally difficult that she felt she had become a very different, much more guarded person, as she described:

> *"… I expect to be judged by doctors. I expect to be judged by everyone. That's the norm. Sorry to get emotional but you suppress it because you can't think about it to get through your daily life, but it's grim, you know, it's changed my personality. It's just, I mean, obviously the illness changes you as well, but I just used to be really open and think the best of people and not be suspicious about their intentions, you know, and not feel like when I'm talking that you know that I'm saying something that could be used against me, you know, that's what it feels like. Yeah, you kind of have to guard yourself, which you didn't do before."* (*Single non-working claimant*)

Her experience within the system put her off looking for work: she worried that if she was able to work a few hours, the Jobcentre would expect her to do more, and this reinforced her mistrust of the system: *"they've misinterpreted things I've said in the past. I'd be terrified that*

they would think, well, she's well enough to consistently work a few hours a week, then why can't you do more".

The impact of navigating a challenging and stigmatising system on health

Given people's poor experiences, it was unsurprising that in our qualitative interviews and survey we found evidence that claimants experienced negative impacts on their physical and mental health when navigating the benefit system.

In the YouGov survey, 51% of current claimants agreed (either strongly or tend to agree) that applying for benefits made their mental health worse, rising to nearly two-thirds (64%) of those who were receiving PIP at the time of the survey (Figure 5.3). This increase further among claimants whose disability or health condition was related to their mental health (67%).

Figure 5.3 – Claimants (especially of PIP) said claiming worsened their mental health
Percentage of respondents who agreed/disagreed with the statement 'The process of applying for benefits made my mental health worse', by type of benefit received.
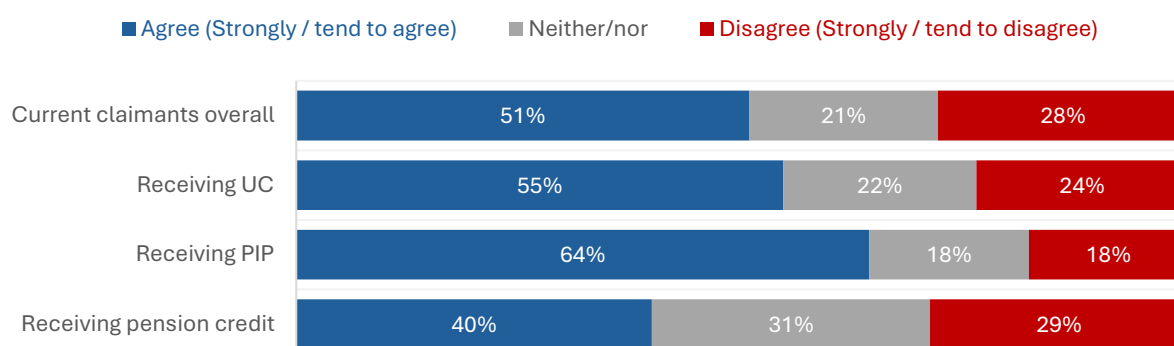
Notes: excludes those who answered 'not applicable'. Sample sizes as follows: current claimants = 853; UC = 397; PIP = 405; pension credit = 68.

Given claimants applying for PIP already have health conditions, the stress of applying could impact their physical health. For example, as one interviewee with fibromyalgia mentioned, it is a condition "*caused by being in flight or fight…so any stress will make it worse.*". For one man, the process exacerbated his mental health issues to the point of needing in-patient healthcare, as he described:

> *"… I did actually have an inpatient mental health issue. So I was taken in for a month into a mental health institution because I just couldn't cope any longer with that constant treadmill… I think that* [3rd PIP application] *tipped me over the edge. If you like, from being able to function with my mental health to a point whereby, you know, I was suicidal that point because I thought I just can't continue to fight every single time. And I think part of the issue was giving the same information every time."* (single non-working man)

The man in question had been employed full time until his illness, and part of the toll was around his feelings of disappointment that he could not rely in the system as he expected.

> *"… I thought it would be very straightforward…I've had to give up work because of [my physical and mental health] issues? I thought it would be a case of just telling them that really, and providing few bits of paperwork … I'd always thought that, during my lifetime, certainly up until that point, I'd heard, you know, benefits are there as a safety net and things, but I certainly didn't think that they were there as a safety net when I needed them most".*

This was not an isolated incident, and the impacts on health (particularly mental health) were especially severe where the process ended up being drawn out over a long period of time:

> *"… The whole process took 18 months and was stacked against the applicant at every turn. I have multiple issues and use a wheelchair, but I had my application rejected twice and had to go to a tribunal which was incredibly stressful and aggravated my mental health".* (survey respondent)

> *"… So long winded… by the time it was processed I had another job but no income for 4 weeks so lost a stone in weight as a result".* (survey respondent)

Experiencing benefits stigma at other institutions

We also investigated whether the stigma associated with being on benefits had any impact on interactions with other organisations, or areas of life, such as housing or financial inclusion. Overall, there was relatively little evidence of institutional stigma in most areas, and in fact some felt that claiming benefits could have a positive impact.

We asked claimants in our YouGov survey about these positive and negative impacts of claiming benefits. Overall, among the issues asked about, claimants were more likely to report positive impacts of receiving benefits than negative ones:

Positive impacts:

- Able to access free dental treatment (16%, rising to 24% of UC claimants)
- Able to access other free or discounted services (11%, rising to 14% of UC claimants)
- Able to access discounted tariffs on one or more utility bills (8%, rising to 12% of UC claimants)
- Able to access Free School Meals for your children (6%, rising to 12% of UC claimants)

Negative impacts:

- Issues getting a tenancy in rented accommodation (5%, rising to 10% of UC claimants and 13% of claimants in private rented accommodation)
- Issues with banks or other financial firms (4%, rising to 5% of UC claimants)
- Issues with utility companies (4%, rising to 7% of UC claimants)
- Issues with employers or potential employers (3%, rising to 5% of UC claimants)
- Difficulty applying for a mortgage or switching your rate (2%)

Over half of claimants, however, reported no positive or negative impacts in relation to their treatment by external institutions outside of the benefit system (55%). When asked a follow-up free-text question about the above and other impacts, we received a wide range of comments. Many of these focused on the claimant's poor treatment within the benefits system, rather than poor treatment outside of the system. Some did, however, point to challenges accessing additional services they should have been entitled to; for example, dentists not taking on new patients and being told that no dentist would take them on because they were on benefits. Another mentioned that many internet providers don't offer a social tariff scheme, while they felt that support from water companies was too limited, making it 'nearly impossible to obtain'.

The qualitative interviews gave a similarly mixed picture, with some positive and some negative experiences with other institutions – some actual, some perceived – as a result of receiving benefits:

- Claimants in social housing generally felt social housing providers were set up well for those who receive the housing element of Universal Credit. One observed that social housing providers might even prefer those who received housing benefits as tenants, as their rent was guaranteed.
- In the private rental sector, however, there were many issues for claimants; one single mother was unable to find a private flat to rent, as they wouldn't accept tenants in receipt of housing benefits, and she ended up homeless for around a year before she was allocated social housing.
- Another woman, who had recently started receiving pension credit, had not told her private landlord that she had claimed for this, as she was concerned that they may ask her to leave.
- There were also one or two mentions of struggling to get credit, or to renew a mortgage at a good rate, but this was largely a consequence of low credit scores, not necessarily because of benefit receipt.

However, perhaps the most obvious positive impact of receiving benefits was that it opened the opportunity to qualify for social tariffs, and other financial support where appropriate. One claimant received extra support from their council to help pay their gas bills. Not only was this of financial benefit, but in general, the attitude of other organisations to these tariffs stood in contrast to the treatment received by the DWP. One woman was pleased to be put on the priority services register by her energy provider but was particularly pleased that *"[they] did not make me feel inadequate or hopeless, or worthless or anything"*. As we discuss in Chapter 6, many lessons could be learned from the work that some utility companies and financial institutions have done with vulnerable customers.

6 IMPROVEMENTS TO THE SYSTEM

In this chapter, we discuss the changes that claimants and advisers believe would decrease the level of stigma in the system, and how these changes may be implemented.

Decreasing the level of stigma within the system requires looking beyond making changes to how the system is implemented, to rethinking the aims of the system. As noted in the introduction, the wider public perceptions of benefit claimants often reflect the structure and underlying aims of the social security system in a particular country. Our research certainly found this to be the case: the reported beliefs about benefits claimants were supported by the treatment that claimants received within the system. By changing the way the system is implemented, therefore, the wider perceptions may also start to alter.

> *"… "It starts with a vision. It starts with "what does Social Security need to look like in a modern-day society, in modern day Britain?" and I think it just needs to be more personalised, more flexible, more human, more kind, more compassionate, more supportive. And that's how you build a new story, it's how you build a new narrative"* (Adviser)

First and foremost, people need to be put at the heart of the system. That is not to say that there doesn't need to be any expectations of work, or of demonstrating the impact of ill health or disability on working capacity, but the way that this is done sends a strong message about the value placed on those who need to turn to the system for support. Flexibility and personalisation are key to doing this, fundamentally an acceptance that people's lives are often too complex to fit easily into systems neatly, and below we explore some of the ways in which this may be achieved.

Humanising the social security system

The idea of humanising the social security system has already been adopted in Scotland, who have taken a human rights approach,[65] and as their system beds in, more evidence will emerge on the impact of this approach. However, within the current system in England and Wales, there are ways to make it more human.

Firstly, **eliminating the use of sanctions** would remove one clearly stigmatising factor from the system. The existence of sanctions implies that claimants will *deliberately* not meet the conditions imposed on them, and yet the experiences of claimants from the interviews, and from speaking to advisers, it is clear that it is events and circumstances that mean that people miss appointments, or are unable to increase their working hours, rather than deliberate non-compliance. Sanctions work primarily as a stigmatising, control action, with little evidence of positive impacts; the evidence suggests that use of sanctions results in as

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[65] Scottish Human Rights Commission: Right to social security

many negative as positive impacts; encouraging people into work,[66] but lower paid (and poorly suited) work, and with increasing likelihood of economic inactivity. The DWP itself estimates that sanctions have a negative impact on earnings, and increase exits from benefits but not necessarily into a job.[67] Sanctions are not frequently used; none of our participants had been subject to one, and in general, use of sanctions was estimated at around 3% in 2023, but the impact that sanctions have on positioning social security as punitive and stigmatising is substantial.

Secondly, it is important to recognise that people turn to social security as a last resort, generally when something has gone wrong in their lives; a new or worsening illness or disability, or job loss or loss of hours. Only around a quarter of the YouGov sample had claimed purely due to low income. **Many people were in a more vulnerable situation than they were used to**, and yet the system showed no recognition of this. Those whose situations were perhaps more straightforward, or they had good support at home, or with close friends and family, were able to navigate the system. It was those who were most vulnerable, and most in need of a supportive system that find the system most stigmatising and ineffective.

> *"… The people that have the most challenges are the ones ultimately the system has the least grace and support for ….in the most challenging cases where people got so much going on, they just can't do it. They don't have enough energy themselves or capability sometimes, but certainly capacity at the time. But then they run into even more hurdles than the usual hurdles that other people run into because the system doesn't know what to do with these people"* (Adviser)

Demonstrating a better understanding of vulnerability is a key element in destigmatising the system. In recent years, within financial services,[68] and the energy sector,[69] there has been a greater emphasis placed on supporting customers in vulnerable circumstances, and the DWP could look to these sectors for learning. The recently published Select Committee report[70] has noted many of the issues within the system, particularly around better communicating the support that is available to people. With the changes proposed in the 'Pathways to Work' Green paper[71] imminent, these recommendations as well as wider learning on vulnerability should be carefully considered.

Provide flexible and supportive systems

Applying for PIP (or other disability benefits)

The application for PIP was perhaps the most problematic and unhappy part of applying for benefits. Those who had been through the system noted the lack of understanding of their disability, the difficulty in knowing how to complete the form in a way that would convey the level of daily incapacity, as well as the 'misinformation' added by assessors on occasions.

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[66] Pattaro et al (2022) The impacts of benefits sanctions: A scoping review of the quantitative research evidence
[67] DWP (2023) The impact of benefit sanctions on employment outcomes
[68] FCA (2021) Guidance for firms on the fair treatment of vulnerable customers
[69] Ofgem Consumer vulnerability protections
[70] Work and Pensions Committee May 2025 Safeguarding Vulnerable Claimants HC 402
[71] Gov UK (March 2025) Pathways to Work: Reforming Benefits and Support to Get Britain Working Green Paper

From the perspective of advisors and claimants, changing to having the initial assessment conducted by someone trained specifically for the purpose would streamline the process considerably. It would allow for genuine probing by the assessors to ascertain the level of incapacitation faced by the claimant, which should have a number of positive outcomes. Firstly, it would reduce the stigma felt, if the process was designed to be supportive, rather than hostile. If claimants went into the process feeling trusted, it would reduce many of the harms that we have detailed in this report. Secondly, it should reduce the number of claims that were forwarded for mandatory reconsideration and to appeals. The lack of understanding of the impact of the specific disabilities of the person in question casts doubt on the accuracy of the assessment submitted.

> *"… When I was actually physically assessed. I saw a physiotherapist. And I thought, well, what, how is this woman trained in complex PTSD, which I suffer from, to understand a large part of what my claim is"* (Non-working woman)

By better training first line assessors, it would be possible to produce a more representative assessment, with a decreased need to move to mandatory reassessment and eventually appeal. Giving assessors a greater flexibility to consider what is needed in terms of evidence could also speed up a system that can be held up by delays in obtaining evidence from the NHS. There is a fairly strong argument for the removal of mandatory reconsideration (MR) fully, with the resources for this allocated elsewhere. At last count, fewer than one-in-five decisions were changed at MR,[72] making this to an extent, a rubber-stamping exercises. The comparison with Social Security Scotland illustrates the possibility of assessing people's disability in another way, although it should be noted that the Scottish system is not without its own issues, notably that the process can take a long time. In terms of reducing the stigma in the system, however, it is an improvement.

> *"… it's a different process and but I think it's probably fair to say that claimants in Scotland feel they're better treated."* (Adviser)

Furthermore, the system in England and Wales, once the time taken for MR and appeals is taken into account, the Scottish approach may still be quicker, if eventually successful. Only 56% of PIP assessment are awarded on first applications. However, the drawn-out nature of the process means that while over a third (38%) of those whose claims are rejected register for MR, ultimately approximately two-in-five of these (40%) will actually receive a PIP award at all.[73] This outcome is clearly less the result of stigma than of the complexity of the system, but it is the *cause* of much stigma, as discussed previously. As evidence emerges from the Adult Disability Payment system in Scotland, this will hopefully shed light on both the financial and health outcomes from taking this approach.

Receiving work coaching / job centre support

The experiences of those who had received work coaching was very variable, and as a result, illustrates how work coaching can be delivered in a supportive and destigmatising way. Claimants that were happy were those who had received support that was tailored to their needs, from a work coach that listened to them, and found the appropriate course of

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[72] Gov UK (2024) Personal Independence Payment statistics to October 2024: Customer Journey Statistics
[73] Ibid

action for their individual needs, adding something that the claimant wasn't already aware of. Those who weren't working and hadn't received this level of support, actively wanted something like this.

Receiving support in this way can leave claimants feeling more confident and positive with their situation, and of their likelihood of finding work. For example, as one current non-claimant noted, he had a 'fantastic experience', he felt 'heard' and 'validated' and it helped give him confidence. Having someone to talk to made him feel like he could achieve something, a sentiment that stands in opposition to the experience of the woman on quoted on p.41, who was left feeling that she wasn't good enough for anything after her appointment. He specifically mentioned that it was the personal nature of the conversation which had created a positive experience for him.

Another man, after having to leave work through severe mental health issues was placed in the Limited Capability for Work and Work-Related Activity (LCWRA) class. His work coach was very supportive and has supported him back to part time work.

> "… They paid for him to have his SIA course so that he could do security. They've offered support with writing CV's or contacting places for work and such like that… just having the stress removed of having to earn a certain amount of money, that's helped massively."

In general, the outcomes of those who received this kind of supportive, individualised help were more positive than those who didn't. Having a system that recognises that people are not always in a position to work, or to work full time, can prevent people from moving further away from being in a position to work, in part through the stigma they experience within the system. In our interviews, there was at least one example of someone who declined to the extent of needing in-patient mental health treatment and who was temporarily homeless. They may have avoided both of these outcomes if the system had offered support when they had first sought support. Besides, supporting people into suitable employment, rather than any job may be more cost effective for the state in the long run. As noted already, conditionality has primarily led to an increase in low paid and insecure work. Supporting people into work with career progression could mean longer term savings for the government.[74]

Furthermore, most agreed that for work coaching to be effective, the job centres need to work more closely with local employers, to understand their requirements, and to support those who are job seeking to be able to meet those requirements.

> "… "The DWP need to work more closely with employers …if you have a disability, you may not be able to do 40 hours a week, an hour away, but you may be able to do 15 hours a week at home. And so it's trying for the DWP to almost become a conduit between what employers want, need, and can offer and what people who are on benefits want, need and can offer… I mean it would be especially difficult for somebody like me now …I would probably be completely wrong in what I thought I might be looking for now because things have moved on so much. So, I would also want some kind of reassurance for

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[74] New Economics Foundation (2024) Helping people into good jobs rather than just any job could save the government billions

*them to say 'At the moment we've got 20 jobs and most of them are looking for xyz, because then it would encourage me, perhaps more to do that particular course or something. Because I would say, well, you know this is going to give me the best opportunity of getting a job because so many employers are looking for that." (*single non-working man*)*

While some job centres did appear to support people into appropriate work, others were less effective; one man felt his experiences in one job centre was *"a total waste of time… I'm going through it because it will give me the money to pay for petrol to go to look for my own jobs"* but after moving areas was helped successfully into a good job with a local employer. Few mentioned the Access to Work fund[75] A consistent emphasis on working with local employers would be *beneficial*. A recent report from the Resolution Foundation[76] addresses many of these concerns, suggesting that improving the Access to Work scheme, incentivising employers to reintegrate existing workers, and enacting a 'Return-to-Work Recruitment Incentive' would all go some way to address the current disappointing record on disability employment. Any reform of the system, that increases people's employment, is clearly of benefit to the economy more widely, and should be seen as an investment.

Finally, there were other areas for improvement within the system, that could help support claimants. Our participants noted issues with childcare payments, and making preschool childcare free at source for working parents on UC, pay 100 per cent of childcare costs through UC, and offer a one year run on of access to free childcare may go some way to better supporting working parents with young children.[77] The impact of marginal effective tax rates and 'cliff edges' can reduce the incentive to work more. Simplifying and standardising entitlement rules, increasing earnings thresholds and uprating entitlements, changing the Administrative Earnings Threshold (AET), along with increasing eligibility for 'passported' benefits may all encourage and support people to work.[78]

A better resourced system

Many of the behaviours and issues that we have identified as problematic or stigmatising arise in part through a lack of resources in the system. In particular, the mistakes made, or misinformation given often came from lack of training, or lack of time. DWP staff not responding in a timely manner was also an issue related to lack of capacity. This feeds into the idea that benefit claimants are not deserving of a functioning social security system.

> *"… National Audit Office saying that, you know, there's a shortage of work coaches, they've all shortening their appointment times, they're sort of sending them through, they're not getting them as often whatever and it just feels like it's just a bit like a conveyor belt"* (Adviser)"

Furthermore, to achieve the changes suggested above would involve investment in the training of staff across all areas of the DWP. To equip staff with the knowledge and skills needed to exercise autonomy, and to treat claimants with flexibility, would require substantial training. However, in the case of work coaching, in particular, where claimants were treated

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[75] GOV.UK Access to Work

[76] Baumberg Geiger & Murphy (2025) Opening doors, Resolution Foundation

[77] Wood, Griffiths & Pearce (2025) 'A big, vast, grey area': Exploring the lived experiences of childcare for parents on Universal Credit Institute for Policy Research. University of Bath

[78] Griffiths and Wood (2024) Cliff edges and precipitous inclines, Institute for Policy Research, University of Bath

flexibly the outcomes were often better than when the rules were applied rigidly. As noted above, training work coaches to support people into better paid work could even save money. It is important to recognise that the capacity for the system of work coaching to be effective is already there, with examples of good practise, and to ensure that staff are incentivised to provide tailored support, rather than to box tick.

The system also needs to offer appropriate channels for people to engage with. For the majority of people, the current online Universal Credit application and journal was good; it was easy to access, and an efficient way of keeping in touch. However, for others (e.g. the elderly, who may have less digital capacity, or those with learning disabilities or severe mental health issues) access via other channels is needed. What's more, actual support and advice to complete applications was lacking from within the DWP. While external advice services can and do offer support with benefits applications, there appeared to be little support from DWP staff themselves, to the extent that this could feel actively unhelpful.

7 CONCLUSIONS AND POLICY IMPLICATIONS

Stigma is not just a byproduct, but a structural feature of the UK social security system in 2025. It is operationalised through conditionality and surveillance, reinforced through public perceptions and societal discourse, and experienced through punitive or impersonal practices.

The current system is understood, from within and without, as a place of last resort; dependent on eligibility rather than entitlement. The founding vision of the UK welfare state, and therefore the basis of the social security system articulated by William Beveridge in 1942 was "first and foremost a plan of insurance – of giving in return for contributions benefits up to subsistence levels, as of right and without means test, so that individuals may build freely upon it".[79] Fundamentally, this means a system that is understood as a universal safety net that people would contribute to during good times (through taxes), so they could draw from it in hard times. Changes since the 1970s have seen the introduction of various non-contributory benefits, and while some contributory benefits remain, for now – Jobseekers Allowance and Employment Support Allowance – Universal Credit, as the main income replacement benefit, is means-tested based on income and savings. This lack of reciprocity has perhaps seeped into the wider perceptions of the system and contributed to the stigma around claiming. Nonetheless, the majority still believe that, even within this system, people should have the support they are entitled to. When a system is not contribution-based, however, the discussion becomes about *who* should be entitled to support, and under what circumstances, and it is in this space where we see stigmatising attitudes appear.

The different types of stigma explored in this research are interrelated and increase the intensity of each other. As noted above and in the introduction, the structure of the system can influence public perspectives of and reactions to beneficiaries, but it is not the only factor by any means. Neither the media nor the governmental narrative on welfare has been a focus of this research, but the impact that these have had on wider perceptions of claimants should not be underestimated. The frequency of media discussion on benefits fraud, for example, has been demonstrated to track the national trend in reported concern over fraud[80] and this correlation raises questions about the extent to which other particular concerns overlap media representation. Political discourse can also sway both public and media attitudes towards who is deserving and who is not; a study examining parliamentary discourse over time noted how successive governments create public opinion by swinging dramatically between the *"poverty, need, and rights"* and the *'work, reform, and fraud'* discourse, depending on which best suits the political agenda.[81] All of these will impact on the attitudes that we have detailed in Chapter Three and need to be addressed to reduce stigma. Both within and outside of the social security system, we need to demonstrate why social security is important for everyone.

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[79] House of Commons Library (2020) Contributory benefits and social insurance in the UK
[80] Gavin, N (2021) Below the radar: A U.K. benefit fraud media coverage tsunami—Impact, ideology, and society The British Journal of Sociology 72 (3)
[81] O'Grady, Tom (2022) 'Political Discourse', The Transformation of British Welfare Policy: Politics, Discourse, and Public Opinion

Tackling stigma outside of the system

Firstly, as noted previously,[82] attitudes towards those claiming benefits are ambivalent, and not homogeneous. To try and influence these perceptions means recognising the differences and examining what lies behind them. Our analysis, for example, identifies the 'Frustrated Foundations' segment of non-claimants. This group is comprised of people who are often financially insecure, feel most disengaged from the system and least trusting that the state will be there for them. They are among those who hold the most stigmatising views of those receiving benefits. Notably, those who believe that they should be eligible for financial support from the government are, perhaps understandably, aggrieved at those who have been given some, regardless of how challenging it may have been for them to obtain it.

Ensuring that those within this group are receiving all that they are eligible for may help to change their minds. Potential claimants need good access to income maximisation and welfare rights advice. Removing some of the other barriers to claiming would also enable this. For example, the Government could reform capital rules in relation to Universal Credit, where the savings limit of £16,000 has been frozen since 2006. Over time, more households have been affected by this limit, leading to a greater sense of injustice. As the Resolution Foundation has called for, this limit could be increased in line with inflation or potentially tapered to reduce the existing cliff-edge effect.[83] Other cliff edges also appear to cause resentment among those who just miss out. While it is positive that more is being done to lower the cost of essentials for those in receipt of benefits – such as the provision of free dental treatment and social tariffs – these add to a perception that those on benefits receive lots of support, whereas those who just miss out on benefits receive little. Where possible, organisations providing such schemes should consider widening or tapered eligibility criteria to avoid such effects.

More broadly, other groups appear to hold stigmatised views about claimants despite themselves being relatively financially secure; for example, our 'Secure Sceptics' group. Age is also a big divider, with perhaps the different experiences of subsequent generations impacting on their perceptions. While influences such as media portrayal or politicians' rhetoric are hard to counteract, the nuances between groups may give some indication of what type of messaging could be most effective. Turn2us has written guidance for parliamentarians on the kinds of language that might help to tackle some of the harmful narratives that currently persist.[84] This includes recommendations to focus on relatable experiences we all might face (such as illness), focusing on the positive impact of the social security system, and "painting a picture of hope, not fear".

Tackling stigma within the system

Within the system itself, there is much that can be changed that might also tackle harmful perceptions and improve the claimant experience.

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[82] Orton, M., & Sarkar, S.(2022) COVID-19 and (mis)understanding public attitudes to social security: Re-setting debate. *Critical Social Policy*, *43*(1), 3-28

[83] Broome *et al.* (2025) Saving penalties. Reforming the capital rules in Universal Credit. Resolution Foundation

[84] Turn2us (2025) Talking about social security: a guide for Parliamentarians

The 'Pathways to Work' Green paper has much to offer, as there was a strong desire among claimants in our research for more support into employment, albeit if the work was appropriate to their circumstances.[85] And it is important to note that 'appropriate' was generally not about the type of work, or the level of pay, rather the capability to work a certain number of hours, or work in a particular location. However, unless the underlying attitude towards those receiving benefits changes, it is likely that the system will continue to stigmatise those within it, with similar impact; as it is, it can harm the self-confidence and self-belief of those who would otherwise welcome the chance to gain paid employment. The inflexibility and fear of punitive sanctions can prevent people from even trying to work.

Reforming PIP assessment, by using trained and sympathetic assessors, would not only make it less stigmatising process for claimants but may also make it easier to demonstrate the fairness to wide society. The current system seems designed to position those who apply as 'frauds' or 'trying it on'; a system that relies on qualified assessments may have more authority and standing, particularly when coupled with a system that is overtly supporting people to work where possible. The disparity between the difficulty that most have in qualifying for disability benefits and the perceptions of the general public is striking, and reforming this system is an opportunity to address this.

The adequacy of benefit level was not a focus of this research, however, it was evident that those who had found the process of claiming more straightforward and had received what they were eligible for, had greater faith in the system, and its fairness, as well as being better able to manage financially. Those who had been subject to delays, or had had their claims rejected, were obviously struggling financially, but also felt let down by the system, impacting their feelings of security within society. A quicker, fairer system is as important as ensuring that the level of financial support is adequate for those who need it. It should also be noted that public perceptions often overestimate the amount currently received.[86]

It is also clear that an insurance-based system, while perhaps reducing stigma by increasing 'buy-in' to the system, and persuading people that their contributions to the system are for their benefit as well, may bring other issues. A review of international best practices in social security systems[87] found different benefits to different approaches, for example, the targeted policies of Germany or Denmark involved more administrative burden, whereas the tax credits in New Zealand stood out in terms of operational efficiency and high take-up rates. Moving forward, rather than looking back to Beveridge's vision of insurance, may involve greater unconditionality, in the form of universal benefits.[88,89]

The Wider Context

Finally, the social security system does not operate in a vacuum; those who are claiming for temporary disability or ill health will require support for longer if they are not able to receive treatment. Similarly, part of the difficulty in the current PIP assessment is the delays in seeing specialists or receiving treatment in the NHS, to be able to provide the evidence needed. The rising cost of living crisis, and the impact of the Covid pandemic will have

[85] DWP (2025) Pathways to Work: reforming benefits and support to get Britain working green paper
[86] NEF (2024) The politics of "welfare" has distorted public perceptions of social security
[87] International best practices in social security systems
[88] New Economics Foundation (2022) Social security for all universal credit auto-enrolment and a weekly national allowance
[89] Chrisp, Pearce, Richiardi & van de Ven (2025) UBI-eh? Institute for Policy Research. University of Bath

impacted on numbers with ill health or disability, who need extra financial support to manage.[90] As we have found, people generally only claim as a last resort, and more people will be reaching that level of need.

Moreover, the drive to get people back to work needs to take account of regional labour markets. It is unjust and deeply stigmatising to insist that people should look for work that isn't there,[91] or that they do not have the capacity to do.[92] Understanding the potential negative impacts of employment programmes prior to implementation is vital.[93] A system based on expecting people to do what they can is fair, punishing them for matters outside of their control is not.

[90] New Economics Foundation (2025) What's behind the rise in disability benefit claims?
[91] JRF (2025) Health-related benefit cuts will deliver higher poverty, not employment Figure 3
[92] Ibid Figure 4
[93] Bernstead, S (2018) Predicting policy performance: Can the Work and Health Programme work for chronically ill or disabled people? Critical Social Policy 39:4. 643-662

APPENDIX

For more detail on the British Social Attitudes survey data please see the UK Data Service: https://beta.ukdataservice.ac.uk/datacatalogue/series/series?id=200006

Sample obtained for qualitative interviews

The qualitative sample was recruited via an independent fieldwork company to ensure a broad sample among claimants, and non-claimants.

East of England	4	Retired	2	18 - 30 years	3
Mids/ South West	4	Single adult	6	31 - 40 years	4
South England	3	Single Parent	4	41 - 50 years	4
North West England	3	Couple with children	7	51 - 65 years	4
Scotland	2	Disability in household	6	Over 65 years	2
Wales	2	Experience of homelessness	4		
NI	1	Born outside the UK	3		

The advisers we interviewed were based in relevant local authority and independent advice roles across England, Wales and Scotland.

The semi structured interview template was developed by the full research team and included lived-experience input from the advisory board. Participants were asked about their experiences within the system, where relevant, and how it made them feel; how they view benefit claimants, and how they thought others saw them, and what would make the system work for them. Advisers were asked about how the system threated those in it, and again, what changes would improve it. Each interview lasted between 50-70 minutes. Interviews were conducted by trained researchers, recorded (with consent), transcribed verbatim, and anonymised. Interviews were analysed using the framework approach to thematic analysis, using a coding matrix informed by the topic guide, via Excel and NVivo 14

YouGov survey analysis

All analysis of the YouGov survey data was weighted, based on a weight constructed by YouGov to ensure the data better reflects the wider UK adult population on known characteristics, such as age, gender, education and voting patterns.

We predominantly ran descriptive statistics and cross-tabulations of different variables. Where we use the term 'significant', we are referring to statistically significant differences between groups at the 95% confidence level ($p<0.05$). In some places, figures may not appear to add up to 100% or the expected total, due to rounding.

More information on the sample obtained can be found in our online appendix tables.

We employed a technique called Principal Components Analysis (PCA) to identify four underlying components of stigma from an initial list of 18 attitudinal statements. Each statement initially ran from 1 to 5 with 1 representing 'strongly agree' and 5 representing

'strongly disagree'. As most variables were negatively worded and some were positively worded, we opted to reverse code the positively worded statements so that 1 was equal to 'strongly disagree' and 5 was equal to 'strongly agree'. This ensures that across all variables entered into the PCA, a value of 1 would reflect a more negative view of welfare whereas 5 would reflect a more positive attitude. All variables originally had the response 'don't know' coded separately, but for the purposes of maximising the sample size used within the PCA we opted to code these responses to the middle category ('neither agree nor disagree').

These recoded variables were then entered into a PCA, with varimax rotation. Initially five components were identified as having Eigenvalues over 1; however, the fifth component appeared to add relatively little and was quite conceptually incoherent, so was excluded from further analysis. This left four key components. Rotated component loadings are shown below, indicating which components are driven (positively and negatively) by which variables. From this we were able to establish broadly what underlying construct each component is displaying. Component 1 had an Eigenvalue of 4.6, while the second biggest was 1.9, suggesting that the first component was the most dominant component, giving an overall measure of 'stigma' against benefit claimants.

Appendix Table 1 – Loadings of each attitudinal statement against each component identified within the PCA

	Component 1: Low levels of stigma towards claimants	Component 2: Thinks system should be more generous	Component 3: Low levels of internalised stigma about claiming	Component 4: Trusts that the system would be there for them
People shouldn't be ashamed about claiming the benefits that they are entitled to (reverse coded)	0.139	0.525	0.232	0.346
Benefit claimants are unfairly stereotyped by the media and politicians (reverse coded)	0.479	0.564	-0.041	0.239
I trust that the benefits system would be there to help me in future if I need it (reverse coded)	-0.115	-0.091	0.085	0.792
The benefits system helps to make the UK a fairer country (reverse coded)	0.463	0.244	0.006	0.567
The Government have made the process of claiming benefits more difficult than it should be (reverse coded)	0.326	0.645	-0.028	-0.047
Many people who get social security don't really deserve the help they get	0.773	0.185	0.023	0.186
Too many unemployed people don't try hard enough to find work	0.823	0.153	0.018	0.104
Even if you work hard, it can be difficult to get by without needing benefits or government help	-0.116	-0.729	0.025	0.016
Families should try to support their children themselves rather than claim benefits	0.531	0.261	0.196	0.042
Households like mine should be eligible for more benefits or financial support from the government than we currently receive	0.166	-0.601	0.036	0.301
The threshold for getting mental health-related benefits has been set too low	0.481	-0.017	0.036	-0.166

The benefits system should only be there for people who have no other way of supporting themselves	0.576	0.164	0.207	-0.193
The conditions for getting benefits mean I'm unlikely to ever be eligible for them	0.148	0.005	-0.023	0.310
People often take advantage of the benefits system	0.828	0.092	0.012	0.085
Once you're on benefits it's hard to get off them	0.204	0.000	0.037	-0.022
I would / did only apply for benefits as a last resort*	0.058	0.105	0.730	-0.039
I would prefer people not to know if I received / that I receive benefits*	0.067	-0.024	0.753	0.068
I felt bad / would feel bad about needing to claim benefits*	0.047	-0.068	0.798	0.074

* asterisks indicate that these statements were worded differently when asked of claimants and non-claimants.

Factor scores were produced for each component for every respondent in the dataset, indicating whether they had a more positive or negative score for each type of stigma identified by the components. These scores were then used in two forms of analysis: two-step cluster analysis to identify groups of non-claimants based on their attitudes; and a series of regression models to identify which characteristics were associated with which components. The full results of these regression models are given in Appendix Table 2.

Appendix Table 2 – Regression results – characteristics associated with each component of benefit stigma

Values shown are regression coefficients. Figures in bold indicate statistically significant effects. Red = more stigma; blue = less stigma.

	Component 1: Low levels of stigma towards claimants	Component 2: Thinks system should be more generous	Component 3: Low levels of internalised stigma about claiming	Component 4: Trusts that the system would be there for them
Benefit receipt (Ref =No benefits)				
Low income benefits only	0.05	**0.27**		**0.43**
Health-related benefits only	**0.19**	**0.43**		**0.19**
Low income plus health-related benefits	**0.28**	**0.44**		**0.21**
Age group (Ref = <30)				
30-39	**-0.24**	0.09	0.07	**-0.27**
40-49	**-0.21**	0.00	0.14	**-0.18**
50-65	**-0.36**	-0.06	**0.22**	-0.02
Over 65	**-0.80**	0.16	**0.45**	0.17
Gender (Ref = Male)				
Female	**0.07**	**0.18**	-0.04	-0.03
Ethnicity (Ref = White British)				
Ethnic minority group	-0.04	0.01	**-0.14**	**0.09**
Family type (Ref = Single, with no children in household)				
Single, with children in household	-0.04	0.01	0.13	-0.05
Couple, no children in household	0.00	0.01	-0.03	-0.07
Couple, with children in household	**-0.23**	**0.12**	-0.08	-0.07
Tenure (Ref = Own outright)				
Own with mortgage	-0.02	**0.13**	**-0.13**	**-0.23**
Private rent	0.05	**0.24**	-0.12	0.05
Social rent	0.05	**0.35**	-0.09	-0.07
Live with family	0.13	0.09	**-0.23**	-0.12
Other	0.04	**0.20**	0.01	0.05

Highest education level (Ref = GCSE or lower)				
A-Level or equivalent	**0.17**	-0.02	0.10	0.05
Apprenticeship or vocational qualification / diploma	**0.10**	**-0.10**	-0.01	0.00
Degree or equivalent	**0.47**	0.02	0.01	**0.18**
Other technical or professional qualification	**0.17**	-0.01	0.00	-0.06
Household income (Ref = <£20,000)				
£20,000-29,999	-0.05	-0.06	-0.09	0.10
£30,000-39,999	-0.01	**-0.14**	-0.11	0.03
£40,000-49,999	0.06	**-0.29**	-0.08	0.02
£50,000-69,999	0.02	**-0.32**	-0.11	**0.14**
£70,000-99,999	0.01	**-0.43**	-0.09	**0.16**
£100,000+	0.04	**-0.56**	-0.12	**0.34**
Prefer not to say	0.00	**-0.20**	-0.13	0.00
Household working status (Ref = Not working age)				
Working household	**-0.25**	0.22	0.19	0.13
Workless working age household	-0.14	0.20	0.31	0.16
Benefit receipt in social circle (Ref = Very / extremely common)				
Not that common / rare	**0.15**	**-0.14**	-0.10	**0.10**
Don't know anyone receiving benefits	0.03	**-0.37**	**-0.31**	0.04
Don't know / don't talk about this	**0.31**	**-0.16**	-0.05	-0.02
Constant	0.15	-0.15	0.06	-0.18
Sample size	3,847	3,847	2,938	3,847
R-Square	0.106	0.140	0.044	0.053