

CARER

Carers Trust

Janet is 61 and lives in a small housing association flat in Swansea. She cares for her adult son, Tom, who has a learning disability and epilepsy. Tom receives the enhanced daily living and mobility components of PIP, and Janet claims Carer's Allowance for the 50+ hours of care she provides each week. But Janet is also disabled herself. She lives with osteoarthritis, fatigue, and chronic anxiety. She gets PIP at the standard rate for daily living—not because of one overwhelming need, but because she scores 2 or 3 points across several descriptors: preparing food, managing therapy, engaging socially, and mobility. Her total is enough to qualify, but she doesn't hit the 4-point mark in any single category.

Her own PIP award is what allows her to keep going as a carer. The extra money means she can afford ready meals on flare-up days, taxis to Tom's hospital appointments when she can't manage the bus, and occasional counselling to keep her anxiety in check. Without these adjustments, she says she'd risk injuring herself—or burning out entirely. But under the proposed changes in the Green Paper, people who don't score above 4 points in a single descriptor could lose access to PIP. The reforms favour more "high-need" profiles over those with multiple moderate difficulties. Janet worries she could lose her own PIP, despite her conditions being lifelong. And if that happens, the support that sustains her as a carer would disappear.

MENTAL HEALTH

Disability Law Service

Shelia has cPTSD, anxiety, depression, ADHD and dyslexia. She receives PIP and UC LCWRA group. Shelia lives on her own but receives emotional support from her family. They check that she has taken her medication as she doesn't always remember and attend her appointments with her as she struggles to comprehend what is said and retain the information.. Shelia has a friend nearby that goes with her to a day centre where she has a hot meal as the rest of the time she lives on cereal and toast. Shelia's family check her post and bills as she struggles to understand more complex written information and her concentration is poor.

Shelia gets 11 points in the current system and qualifies for PIP but she does not get 4 points in any one category. If the changes go ahead, she will lose £331 per month. She uses her PIP primarily for private therapy as she has exhausted the talking therapy provided by her local Mind who recommended that due to the nature of her cPTSD, she needed specialist support. The waiting list for this was at least 1-2 years. She has been working with a private psychotherapist and if her PIP were to stop, this would set her recovery back and she would suffer a severe deterioration in her mental health. Shelia doesn't meet the threshold for social care. Losing PIP would also mean she'd lose the UC health element in 2028, totalling a loss of £8600 a year. With the cost of living, increased energy bills and the shortfall in her housing element due to LHA freezes, Shelia's outlook is very bleak. DHP's are time limited and a temporary help and she cannot find a cheaper property to rent.

LEARNING DISABILITY

Mencap

Liam has Down's Syndrome and lives at home with his parents. He receives PIP and is in the UC LCWRA group. He works 10 hours a week in his local library. Liam's family assist him in selecting appropriate clothing every day (**2 points**). Liam loves meeting new people but sometimes requires prompting to engage with them (**2 points**). Liam needs tasks broken down into small simple steps, and support to understand complex written information and long sentences (**2 points**). Liam manages his own wages from the library but needs support from his family to make more complex budgeting decisions (**2 points**). Liam can't reliably cook a simple meal using an oven or use knives safely, but he enjoys cooking microwave meals for his family (**2 points**). Due to his health needs, Liam needs to use his heating more often.

Liam uses PIP to pay for food he can cook, attend local day services and to contribute towards his disproportionately high energy bills. Liam's support needs don't meet the threshold for social care so he also uses PIP to pay for a support worker who helps him a few hours a week to develop his skills. Liam gets 10 points in the current system and qualifies for PIP, however he does not get 4 points in 1 category so would miss out on PIP and will also lose the UC health element in 2028, totalling a loss of **£8,600 per year**.

AXIAL SPONDYLOARTHRITIS

NASS (National Axial Spondyloarthritis Society)

Christine is 34 and works full time but is taking an increasing amount of time off due to her health. She was diagnosed with axial SpA at 33. She has chronic pain and severe chronic fatigue. She is prescribed a biologic medication which is immunosuppressant and means she is at increased risk of contracting infections and being more seriously affected by them.

She gets the standard rate for daily living activities (**2 points** for preparing food, **3 points** for washing and bathing, **2 points** for managing toilet needs and **2 points** for dressing and undressing)

She would lose this under the proposed changes amounting to a loss of **£3842 per year**.

The loss of this money would have a serious impact on her ability to manage her condition, her quality of life and her emotional wellbeing.

MOTOR NEURONE DISEASE

Motor Neurone Disease Association

Tom is 52 and lives alone in an adapted bungalow. He was diagnosed with Motor Neurone Disease (MND) two years ago. Tom receives PIP and is in the UC LCWRA group. He uses a mobility aid indoors and a powered wheelchair outside. Tom needs help preparing and cooking meals as he cannot chop food or lift pans safely (**2 points**). He struggles with dressing due to weakness in his arms and relies on assistive devices and occasional support (**2 points**). He needs someone to prompt him to manage medication and meals on time, as fatigue and cognition are affected (**2 points**). Tom can manage basic budgeting but needs help comparing deals and arranging larger purchases (**2 points**). While he can communicate, his speech is slower and occasionally unclear, requiring repetition in unfamiliar environments (**2 points**).

Tom currently scores 10 points but doesn't get more than 2 points in any single activity. This means he will lose PIP and the £331/month it provides. Tom uses this money to pay for ready meals, heating, and a carer who visits thrice weekly to assist with personal care and domestic tasks. His MND is progressing, but he doesn't yet meet the threshold for formal social care support.

Without PIP, Tom risks isolation, malnutrition, and a decline in both physical and emotional wellbeing. In 2028, he also stands to lose the UC health element, resulting in a total loss of around **£8,600 per year**—jeopardising his independence and ability to manage his condition safely at home.

AUTISM & ADHD

Leonard Cheshire

Gemma is 25, lives with her family and currently works part time in a sector that she is hoping to build a career in. She has autism and ADHD and has significant input from her family members with tasks she can often struggle with or find overwhelming which include cooking (**2 points**), dressing (**2 points**) and remembering to take medication (**2 points**). Without this support she would struggle from day to day.

Gemma receives standard rate PIP for daily living, but does not score more than 4 points in any category. Most of the £73.90 a week which she gets is used to pay for regular specialist autism support therapy which is vital for Gemma in helping her to work and communicate. Before she was awarded PIP, she was forced to leave a previous job due to the high number of sick days she had taken.

Losing PIP would amount to a loss of **£3,842 per year** for Gemma, but being unable to afford her regular support therapy could mean that the number of sick days she takes increase again, reducing her income as she is forced to rely on sick pay or potentially meaning she has to leave her job.

STROKE

Z2K

Carlos is 60 years old and has recently had a stroke which has left him needing the support of a walking stick and unable to move his right arm, along with memory problems. He requires round the clock support from his family.

The plans would see his income reduced by around one-third.

PARKINSON'S & ANXIETY

Parkinson's UK

Claire lives alone and was diagnosed with Parkinson's in 2022. She also suffers with anxiety and depression. She receives standard rate PIP but has been waiting a long time for an appeal hearing. She was awarded points for using aids and appliances for preparing food (**2 points**), taking nutrition (**2 points**), washing and bathing (**2 points**), dressing and undressing (**2 points**) and engaging with other people face to face (**2 points**).

Losing PIP means that Claire would have difficulty paying her bills, including greater heating needs due to being in the house for long periods, and would have greater difficulty getting to and from her appointments.

ME/CFS/FIBROMYALGIA

Sheffield ME Group

David has Myalgic Encephalomyelitis (ME) and lives alone. He receives PIP and is in the UC LCWRA group. He is incapable of work as his condition fluctuates and can be unreliable as an employee. David cannot reliably make a meal without aids due to persistent pains in his hands and wrists and fatigue causing him to lose concentration throughout the cooking process (**2 points**), he needs assistance with dressing for the majority of the time due to pains which move from different parts of his body (**2 points**), he needs help getting on and off the toilet due to these joint pains (**2 points**) and needs help remembering his medication due to brain fog (**2 points**).

David uses his PIP to pay for additional heating and so that he can use baths at home to alleviate some of his constant pain. On bad 'days' (which often turn into weeks or months), he needs help around the house and pays for a cleaner and gardener. He pays extra food costs as he needs to use delivery services - when he is alone, he cannot cook safely and will rely on takeout, but even when he is feeling better, he will only use microwave meals. To make sure he is eating healthily (which is needed to regulate his condition at all) he needs to eat fresh food - this comes at a premium. If he loses his PIP, in 2028, he will also lose his UC health element, this amounts to a loss of over **£8,600 per year**.

AMPUTATION

Z2K

Anatoli has had his left foot and the toes on his right foot amputated. His wife has to help him with dressing, using the toilet and bathing.

He stands to lose over £300/month under the government's plans, which would leave him struggling to afford food and bills.

ME & DIABETES

Stripy Lightbulb CIC

Karen lives with the daily challenges of Myalgic Encephalomyelitis (ME) and Diabetes, conditions that significantly impact her energy levels and ability to manage everyday tasks. Her assessment highlights difficulties with fundamental activities: preparing food (**2 points**), washing (**2 points**), dressing (**2 points**), and managing toilet needs (**2 points**), resulting in a total of 8 points for Daily Living.

Karen experiences fatigue and weakness from both conditions, which means basic self-care is a significant struggle. Karen's cognitive difficulties associated with M.E make it harder for her to manage the complex demands of diabetes care, such as meal planning and medication management. Karen is mostly housebound and experiences difficulties washing and dressing herself and managing toilet needs due to restricted energy levels and extreme exhaustion.

Karen's monthly income comprises £443 in UC, £552 in ESA, and £406 in PIP, totalling £1401. Her income is carefully allocated, with a significant portion spent on essential heating due to being homebound, and on prepared meals, a necessity for managing her diabetes given her energy limitations.

The proposed cuts pose a severe threat to Karen's financial stability and well-being. Karen's total monthly income would plummet to £859. This drastic reduction of **£6513 per year** would force Karen to make impossible choices. The ability to adequately heat her home, crucial for her health, and maintain a diet that meets the complex needs of her diabetes, would be jeopardized. These reforms risk pushing Karen into increased hardship.

SIGHT LOSS

Royal National Institute of Blind People

Alice has sight loss and lives alone. She gets PIP and works for a local sight loss organisation. Alice uses magnification software to read information on her smart phone and laptop (**2 points**) and aids, including tactile bumps on kitchen equipment and talking scales, to support with cooking, and a liquid level indicator when making hot drinks (**2 points**). She uses colour contrasting crockery and plates with raised edges to help her identify different foods and reduce spillages (**2 points**). When washing, Alice uses grab rails to help her get in and out of the shower and bath safely (**2 points**).

Alice uses PIP to pay for assistive technology and stay up to date with the latest technology. Her smartphone and laptop need bigger screens than standard sizes, which also adds costs. She also uses PIP to pay for support around the house, including support with cleaning and paperwork, and personal care treatments she can't do herself, such as going to a podiatrist. As well as sighted support when she does her weekly shop.

She will lose **£3,842 per year** making it difficult to maintain her independence and meet the extra costs of sight loss. Many of these things also make it possible for Alice to work and taking PIP away could jeopardise this.

PSYCHOSIS

Z2K

Mohammed has psychosis and experiences hallucinations and delusional thinking. He is under the care of a social worker and a psychologist.

He faces a significant cut to his income under the government's plans, which threatens to destabilise him and jeopardise his mental health treatment.

MULTIPLE SYSTEM ATROPHY

Multiple System Atrophy Trust

Ruth has Multiple System Atrophy (MSA) – a rare, progressive and terminal neurological condition. This can result in progressive problems with movement, balance and autonomic functions of the body such as bladder and blood pressure control.

Ruth lives with her husband and three children. Her husband acts as her carer. Ruth receives PIP, is in the UC LCWRA group and works 15 hours per week. Ruth has had to reduce her hours (from 22 hours per week) recently as her MSA has progressed. Ruth is attempting to work as long as possible to financially support her family. Ruth needs help with daily living tasks due to issues with her balance, dexterity and fatigue. She needs to use aids when preparing a main meal (**2 points**) when washing (**2 points**) with her toilet needs (**2 points**); and when dressing and undressing (**2 points**); Ruth cannot walk more than 50 metres, aided or unaided.

Ruth uses PIP to pay towards her travel to work and to cover her high energy bills, including laundry and heating costs. MSA affects autonomic functions, including the body's ability to regulate temperature and people living with MSA often feel the cold more than others.

If Ruth loses PIP, this means a loss of £320 per month but she will lose the UC health element from 2028. Ruth will lose the 'work allowance' when calculating her wages for UC, so more of her wages will reduce her UC payment. Ruth's UC loss is **£7,788 per year**. Ruth's PIP loss is **£3,842 per year**. Overall, Ruth's loss is **£11,630 per year**.

CARER

Carers UK

Ellie cares for her adult daughter, Hope, who has autism and other learning difficulties. Ellie's daughter currently receives PIP and Ellie receives Carer's Allowance. Ellie used to work but gave up to care for Hope and her other children.

Hope enjoys cooking with her Mum but often forgets to eat and so Ellie has to remind her to make food (**2 points**). Hope has started taking shifts at a local theatre and has some income, which she enjoys and helps her independence. However, Ellie has to help her with complex budgeting decisions as she does not always understand the best way to spend her money (**2 points**). Hope requires constant reminders to do basic tasks and so without Ellie's care she would struggle day to day.

Under the current proposals, Hope would lose her PIP and Ellie would lose Carer's Allowance. The combined loss of income would be **£8,174 per year**. This money currently helps the family to pay for a high food bill due to sensory issues, aids in their home and their car, as Hope often gets overwhelmed on public transport. Ellie is worried that without these payments she would really struggle to pay for essentials and her bills. She is worried about what will happen to Hope if she has to go back to work to compensate for the loss of income. She has struggled to get social care support for Hope, and without her care or alternative support Hope's health will suffer and she will become isolated.

HUNTINGTON'S DISEASE

Huntington's Disease Association

Sarah is 36, has two young children and has started to experience cognitive symptoms of Huntington's disease. Her family have noticed recent changes in her behaviour, such as missing appointments and being late in dropping her children to school. Sarah works as a teaching assistant at a primary school, but is struggling to concentrate and maintain focus, leaving her upset and frustrated. Her employer is understanding and wants to give Sarah the support she needs to stay in work but is finding this challenging. Sarah applied for PIP and was awarded the standard rate of the daily living component.

Sarah uses PIP to get help from a support worker who reminds her how to prepare and cook food (**2 points**), prompts her to take medication she has been prescribed to relieve symptoms of anxiety and depression (**2 points**), helps her buy groceries online (**2 points**), prompts her to engage with other people, such as when she needs to call her GP or speak to teachers at her children's school (**2 points**) and helps her understand complex written information, such as household bills (**2 points**).

If Sarah were to lose PIP, this would have increased the risk of her being unable to look after her children safely or to live independently.

MULTIPLE SCLEROSIS

MS Society

Nadia has multiple sclerosis and lives with her husband Dave who is her full-time carer, and her two young children. She's the sole wage earner for the family, working from home. Nadia gets help from Dave to get dressed and undressed every day as she struggles with her balance and has muscle weakness (**2 points**). He also helps her wash below the waist, as she struggles to bend down (**2 points**). Nadia is unable to safely use a cooker due to experiencing tremors, however she can heat up microwave meals (**2 points**). The family's toilet is fitted with a raised seat and grab bars, which Nadia always uses to allow her to go to the toilet, due to her issues with balance. (**2 points**)

Nadia gets the standard rate of the daily living component of PIP and Dave gets Carer's Allowance. This enables him to care for her and for her to be able to pay for weekly private physiotherapy - as she can't get this on the NHS in her area. This support allows her to manage her symptoms and stay in a job.

She is very likely to lose over **£3,800 per year** in PIP, while Dave would lose over **£4,300** in Carer's Allowance; a loss totalling over **£8,100 per year**. Dave would no longer have the support that enables him to care for Nadia, and she wouldn't be able to pay for her therapy. This is likely to lead to her falling out of work completely, which would lead to an additional loss of work income of £40,000 a year - having a devastating impact on the family's finances and their ability to support themselves.

ME/CFS & LONG COVID

Sheffield ME & Fibromyalgia Group

Sarah has Long Covid and lives alone. She receives PIP and is in the UC LCWRA group. She works 6–8 hours a week at £14/hour, but her condition severely limits her capacity. She was awarded 2 points each for using aids to prepare food, washing and bathing, managing toilet needs, and dressing/undressing—totalling 8 points.

Although she struggles significantly with cooking safely, Sarah didn't challenge the decision due to anxiety and exhaustion. Her symptoms fluctuate, but she regularly requires extra time, aids, and significant rest to manage basic tasks. Her mother supports her for at least 35 hours a week and receives Carer's Allowance due to Sarah's PIP award. Sarah also receives a council tax reduction through the PIP premium which helps her manage living costs on a very limited income.

For Sarah, losing PIP would mean an immediate loss of around £300 per month, her weekly £12.50 council tax reduction, and her mother would lose Carer's Allowance—totalling a loss of over £4,000 a year. Sarah also risks losing the LCWRA element of UC in 2028, bringing the total loss to more than **£8,600 per year**.

Sarah relies on PIP to pay for essential support not covered by the NHS, including massage, physiotherapy, lymphatic drainage, and hyperbaric oxygen therapy. These help her manage her condition, stay independent, and remain in part-time work. Without this essential support, her health will likely deteriorate, increasing her need for NHS care and reducing her ability to work or live independently.

CYSTIC FIBROSIS

Cystic Fibrosis Trust

Ivan is single and has a carer who lives nearby. He is in the UC LCWRA group, and receives PIP based on needing assistance with preparing a meal (**2 points**), washing and bathing (**2 points**), dressing (**2 points**) and managing treatments (**2 points**). He previously had a DS1500, but he is feeling better due to new treatments. He is having very frequent infections, and has oxygen therapy at home, when he exercises. On balance he doesn't have an infection for 50% of the time (this is when he is very unwell), but the rest of the time, he is still breathless and fatigued. When he has an infection, he has percussion from a carer but independent the rest of the time, with prompting. Ivan could score more points, as he gets very breathless, but he doesn't want to risk his current award.

He uses his PIP for food, managing higher heating costs, and travel to hospital as his nearest Cystic Fibrosis team is a 40 mile round trip. Losing PIP would have a detrimental effect on his ability to look after himself, and his nutritional needs. It would also mean his carer would lose eligibility for Carer's Allowance and from 2028 Ivan would lose the UC health element.

RHEUMATOID ARTHRITIS

National Rheumatoid Arthritis Society

Sally is 45 and receives the higher rate of PIP. She is employed part-time. Sally has significant joint damage in her hands, knees and hips. She is unable to stand for long periods and struggles to use her hands to open things.

Sally needs to use an aid or appliance when cooking (**2 points**) and eating (**2 points**). Sally needs support from her husband to get in and out of the bath (**3 points**) and an aid to get on and off of the toilet (**2 points**). Sally is unable to do buttons due to the damage in her hands and therefore needs assistance or an aid when dressing (**2 points**). She also requires support or an aid to get her medication (**1 point**).

Sally receives 12 points and is entitled to the higher rate of PIP, but as she does not score more than 4 points in any one category, she will lose **£5,600 per year** as a result of the changes.

Sally uses PIP to pay for food that she can cook, adapted clothes and to contribute towards housework (cleaning, laundry etc) so that she can continue to work. If Sally were to lose PIP, her husband would need to take on additional hours at work and would not be able to be her carer. Sally may need to give up her job as she is no longer receiving care from her husband and cannot pay for domestic help.

MULTIPLE SCLEROSIS

Citizens Advice

Graham has multiple sclerosis. In the kitchen, he can't stand for long and has to use a stool. He also bought plastic grip aids and uses specially adapted lightweight pans (**2 points**). He uses adapted cutlery due to weakness in his wrists and hands (**2 points**). He has a habit of forgetting to take medications or overdosing, so his son has to remind him every time (**1 point**). He will only shower when someone's home and agrees to keep guard in case he falls (**2 points**). He has grab rails by the toilet and can't balance without them (**2 points**). He uses a sock puller and has Velcro sewn into his clothes as he can't use zips and buttons (**2 points**). Because of his blurred vision, he needs a magnifying glass to read (**2 points**).

When Graham first applied for PIP, he was awarded 0 points. Citizens Advice supported him through a reconsideration, but the decision was upheld. At a subsequent appeal, Graham was awarded 13 points - enough to qualify for the PIP daily living component at the enhanced rate. He took on a part-time job and used PIP to fund taxis to work and other necessary expenses. Anything leftover was used for utility bills. Graham receives the enhanced rate despite not scoring 4 points on any descriptor, so would lose his entire PIP award under the new proposals, a loss of **£5,600 per year**.

ME/CFS

Sheffield ME & Fibromyalgia Group

Jenny has ME/CFS and lives with her partner, who works full time and provides unpaid care support. She currently works 35 hours a week, but her condition has made that level of work unsustainable. With support from her PIP award, Jenny reduced her hours to 20 per week—balancing her health needs with her ability to remain in employment.

She receives standard rate PIP for daily living for needing aids to prepare food (**2 points**), for washing and bathing due to fatigue (**2 points**), for managing medication (**2 points**), for dressing and undressing (**2 points**) and for toilet use (**2 points**). Her symptoms include post-exertional malaise, pain, and cognitive fatigue. Without the flexibility and financial buffer provided by PIP, she would not be able to continue working at reduced hours without risking her health and stability. PIP allows her to manage her condition and avoid total withdrawal from work.

The loss of PIP would force Jenny to increase her working hours back to unsustainable levels in order to cover essential costs, worsening her condition and potentially leading to a full collapse in health. Without PIP, Jenny risks falling into debt, missing mortgage payments, and being unable to cover rising energy and food bills. The loss of this financial and practical support would also increase pressure on her partner, who already provides informal care. Ultimately, this change could lead to Jenny being unable to remain in work at all, reversing years of progress in self-management and independence, and increasing her reliance on NHS and other public services.

PTSD & AUTISM

Scope

Anthony gets PIP, and scored 13 points in Daily Living component, from **6 questions with two points** and **1 with one point**. If he scored the same on the proposed scheme, he wouldn't get PIP despite currently being on the enhanced rate.

Anthony is terrified about the effect the proposed changes would have if they went through. He's only able to work part time, and has done for 30 years, getting ESA, but he would lose his support group and Severe Disability Premium. He wouldn't be able to pay his mortgage and would be homeless.

EDS & CHIARI MALFORMATION

VoiceAbility

Sarah has a Ehlers-Danlos syndrome & Chiari malformation, where any part of her body can come easily out of socket and dislocate. She is currently employed but can only work part-time and needs regular days off to rest, recover and have physio. Sally tried working 3 days in a row before but couldn't work properly on the third day as she couldn't talk and had brain fog.

As it is a chronic, degenerative condition there is no support provided by the NHS and she has to pay for physical aids & support/treatment to be able to work. This includes: paying for her own physio session 1x per week at a cost of £60; plug-in heat pads; ring splints on every finger; a leg brace which costs £170 and though feasibly could last up to 10 years but fastener made of Velcro and tends to wear out within 4 months if brace used constantly/regularly. Due to abrasions caused by physical aids she also has to use expensive skin cream.

She needs the PIP support to pay for the physio and aids that enable her to work, but the £73.90 per week is almost entirely used up for her weekly physio.

Sarah's hands dislocate easily, meaning it is hard to chop vegetables or anything requiring pressure, as there is huge pain if fingers dislocate. One solution she has is to buy pre-paid cut vegetables, which are more expensive. It is hard to prepare fresh meal with fresh food, but important as otherwise she will use more processed and microwaveable food and poor diet can lead to obesity and other complications for her existing disability/health impairment.

CARER

Carers Trust

Lisa is 42, and lives in Derby. She's a single mum and a full-time carer for her 20-year-old daughter, Ellen. Ellen currently receives Personal Independence Payment (PIP)—8 points in total across several descriptors, mostly related to mobility, fatigue, and managing therapy, and Lisa receives Carer's Allowance for looking after Ellen.

Lisa manages Ellen's medication, helps her with dressing and moving about on bad days, and handles appointments and paperwork when Ellen's anxiety spikes. Ellen losing PIP would be catastrophic for both her and Lisa. The £83.30 a week she receives is their financial anchor, allowing Lisa to remain at home as Ellen's primary support. The household faces losing two vital sources of income. Lisa is exhausted, juggling unpaid labour, bureaucratic hoops, and looming threats to her only source of income. She fears a future where she'll be pushed into low-paid work—while Ellen's care is compromised and her own health deteriorates.

AXIAL SPONDYLOARTHRITIS

NASS (National Axial Spondyloarthritis Society)

Daniel is 36 and diagnosed with axial SpA at 35. He also has autism spectrum disorder and ADHD as well as significant stoop caused by curvature of the spine where it has fused. His balance is affected, and he suffers chronic pain in his spine and sacroiliac joints as well as severe chronic fatigue. He gets the enhanced rate for daily living activities (**2 points** for preparing food, **2 points** for washing & bathing, **2 points** for managing toilet needs, **2 points** for dressing and undressing, **2 points** for mixing with others and **2 points** for making budgeting decisions) He would lose this under the proposed changes as well as the UC health element in 2028, amounting to a loss of £10,821 per year.

This will make huge difference as PIP allows him to pursue things that help him to manage his condition as well as benefit his life. He pays for long term psychotherapy sessions which help him massively as he is neurodivergent. Having this support enables him to work through his relational difficulties safely and to cope with serious life events such as getting his diagnosis of axial SpA. Without this support he becomes overwhelmed and depressed and it would be impossible for him to manage a serious long term health condition like axial SpA. He pays for this as access to NHS mental health services is and has been for some time very limited. His PIP also allows him to go to and from medical appointment without difficulty (paying for cabs etc.) He also uses it to pay for water based exercise classes at his local leisure centre which are therapeutic for his axial SpA. Without PIP he would be much more isolated and demoralised and feels he would just be existing.

CHRONIC KIDNEY DISEASE

Kidney Care UK

Fatima is 42 and, as her chronic kidney disease has progressed to kidney failure, she is an in-centre haemodialysis patient. She has returned to work as a secondary school teacher. She finds work tiring but is building back up to working full-time. Her husband works away a lot, so is not always around to support her. Fatima struggles with fatigue, weakness, breathlessness, unsteadiness, neuropathy, pain, brain fog, and anaemia.

She does not have the energy to cook and relies on using a microwave (**2 points**). Her husband helps her to cut up her food, so it is easier to eat (**2 points**) and regularly reminds her to take her medications (**2 points**). She worries about showering alone because she feels unsteady and weak, so her husband or sister supervises (**2 points**). Fatima has several aids to help her get dressed because of neuropathy in her hands. Fatima has withdrawn into herself since starting dialysis, so her friends and family support her to engage with other people and prompting her (**2 points**). Fatima can no longer make budgeting decisions on her own, and needs to discuss everything with her husband (**2 points**).

Fatima receives the Enhanced Rate of PIP, but stands to lose £5740 per year. PIP helps pay for aids that she uses daily, including cooking, washing and dressing aids. Her renal dialysis diet, means she needs to purchase healthy and specific microwaveable meals for when she does not have the energy to cook. She feels the cold because of CKD, and anaemia, and uses her PIP to put the heating on for longer. Losing PIP would cause her great hardship, likely cause her to become more unwell and stop working