Exploring the potential for drawing on the Minimum Income Standard approach to research disabled people's needs and costs: Preliminary work in Scotland

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This paper reports on a study funded by The Robertson Trust. Through a series of consultations with stakeholders, the study aimed to explore: views about conducting research into the needs and costs faced by disabled people; the potential for using the Minimum Income Standard (MIS) approach which focusses on what people need for a socially acceptable standard of living; and the considerations involved in taking forward such research with disabled people, across conditions.

Background

The additional costs of disability are recognised as contributing to the financial insecurity and disadvantage experienced by disabled people and their households, who face higher poverty rates, lower employment rates, and a greater likelihood of experiencing financial difficulty (APPG on Poverty and Inequality, 2025; Evans, Cross and Collard, 2025; JRF, 2026).

UK policy acknowledges that additional costs are associated with disability or health conditions through the provision of social security benefits to help with such costs – the (non-means-tested) Personal Independence Payment (PIP), and in Scotland the Adult Disability Payment (ADP). However, rising numbers of people claiming health related benefits and concerns about the affordability of the current system have fed into heightened policy attention. The UK Government's 2025 proposals to overhaul the disability benefits system drew political and public debate. While changes to the health element of Universal Credit have been taken forward, plans to tighten eligibility for PIP were paused. Instead, the Timms review was set up in October 2025 to examine PIP 'to make sure it is fair and fit for the future' (DWP, 2025), and includes consideration of its role, assessment criteria and the support it provides. The review of PIP also affects Scotland in terms of the amount of funding potentially available to the Scottish Government for devolved disability benefits (McFadyen, Gillan and Jack, 2026). Hence, the need for further understanding of the additional costs of disability is firmly on the policy agenda, reiterated with the inclusion of a specific question in DWP's Areas of Research Interest (DWP, 2026a) inviting evidence on 'what are the additional costs of having a disability?'.

Various approaches have been taken to estimate extra costs associated with disability - which include the need for specialist goods and services as well as higher spending on things that everyone uses but disabled people may need in greater quantity, frequency or different specification. These are briefly outlined below (for a detailed review of different approaches and their application over the last decade see Banks et al., 2025).

The equivalence-based approach uses survey measures to compare standards of living. Estimates of extra costs are based on the additional amount of money that disabled households would require to achieve the same standard of living as non-disabled households at a given level of income - the assumption being that they have to use some of their income on disability-related needs and have a lower standard of living than they would otherwise (e.g. Zaidi and Burchardt, 2005; Morciano et al., 2012). This approach is widely used, and effective in showing that income-based measures underestimate poverty among disabled people if additional needs are not taken into account (for example Morris et al., 2022). Scope's 'Disability Price Tag' (Veruete-McKay et al., 2025) produce figures using this approach which are widely drawn on to highlight the extent of additional costs disabled people face in the UK. While the equivalence-based approach provides broad estimates of the cost of disability, it does not tell us what these comprise of, or account for unmet disability related needs.

The expenditure-based approach estimates costs using data from surveys or detailed interviews on how much households spend on additional disability related goods and services. This direct method provides a useful picture of the extent and types of costs disabled people are covering in different areas. However, actual expenditure is constrained by income (especially relevant given the link between disability and poverty) as well as access to resources and services. Studies have demonstrated that reduced spending among lower income households reflects affordability rather than low levels of need and illustrate the impact on people's lives, including having to go without things that they require (Morris et al., 2026; Veruete-McKay et al., 2024).

Alternatively, the budget standards approach aims to identify what disabled people *need* for a specified standard of living, to calculate the costs of goods and services required – as such it takes account of unmet needs. Budget standards studies have used varying approaches to draw up lists or 'a basket' of goods and services – either through a consensual approach with groups of members of the public or with experts (such as health or social care professionals, or Disabled People Organisations), or through a combination of the two. The budget standards approach has been used in several countries to estimate costs, for example by impairment type and severity/support needs (Banks et al., 2025), with calculations taking account of costs that are likely to be met with state or other support and those faced by individuals. Where a budget standard for non-disabled people is available, it can be used to compare and calculate the extent of additional costs associated with disability. Studies in the UK and Ireland have used a consensual budget standards approach and drawn on existing baselines to capture additional costs associated with some disabilities, for example, vision impairment, hearing impairment, autism and profound intellectual disability (Blackwell, 2023; Hill et al., 2017; Hirsch and Hill, 2016; MacMahon, Boylan and Thornton, 2022). However, these have been condition-specific studies, and in the UK there is not currently a

budget standards approach looking more broadly at what disabled people need, and what meeting those needs may cost according to disabled people themselves.

We now look at the established Minimum Income Standard methodology and how this could be drawn on to potentially help address this gap.

Drawing on the Minimum Income Standard approach

The Minimum Income Standard (MIS) – based on research carried out by the Centre for Research in Social Policy (CRSP) – provides a detailed description of minimum living standards across different household types in the UK, but does not currently take into account where someone in the household is disabled or has a health condition.

What is MIS?

The Minimum Income Standard uses a consensual budget standards approach to establish the income households in the UK need for a minimum socially acceptable standard of living — not simply to survive, but to live with dignity and participate fully in society. It does this through bringing together members of the public to discuss what different households need to reach this standard of living and the types of goods and services required to meet these needs, in order to calculate household budgets and the income required to reach this standard of living. MIS research began in 2006, it is regularly rebased and reviewed with new groups, and the annually reported figures are adjusted for inflation. These regular updates show changes over time and ensure that the research remains relevant to the current UK context.

MIS and Disability

MIS can provide a useful methodology for thinking about disabled people's needs and costs. The approach is 'bottom up', meaning that research would be grounded in discussions with disabled people who decide what is needed based on lived experience. The baseline of budgets for households in existing MIS research without disability, provide a comparison to establish additionality: what different or additional items or services are needed and the extra costs these incur. Moreover, the MIS baseline can be built on to capture additional needs and costs, not only for specialist goods and services but for non-specialist everyday items and spending which can be difficult to quantify otherwise.

The team at CRSP has used the MIS approach to capture additional costs associated with some disabilities, but so far these studies have been condition specific. Understanding the needs of a broader range of disabled people is unrealistic with this condition-by-condition approach and moreover it does not reflect the reality that many people experience multiple conditions. Hence, a pan-disability MIS study would provide important evidence about disabled people's needs and costs. Such a study would involve many considerations, for example to take into account heterogeneity of needs within and between conditions, complex or fluctuating conditions, co-occurring conditions, and changes in needs over time. However, the gap in evidence combined with the current policy context makes this an important time to consider how such research could be taken forward.

The Consultative Process

With funding from The Robertson Trust, researchers from CRSP held a series of consultations to explore the potential of a pan-disability MIS study. The consultation was Scotland focussed, as Robertson Trust is a Scottish organisation, but findings are relevant more broadly to the UK too.

Four workshops (two in-person and two online) were held with experts by experience, academics in Scotland and stakeholders from Scottish support organisations representing and working with a range of disabilities and health conditions. Workshops were led by researchers at CRSP who introduced the MIS approach and its key principles. Stakeholders discussed their thoughts on the feasibility of drawing on the approach for a pan-disability study of disabled people's needs and costs, potential challenges and suggestions for overcoming them. Some stakeholders also provided additional feedback via email or opted to take part in an online interview.

Consultation was finalised with an online advisory session with UK-wide experts from disabled people's organisations and charities, organisations working more generally to support people facing poverty and disadvantage, and academics. The research team collated and presented themes from the workshops and offered a potential research approach for discussion.

Participating organisations are listed in the Acknowledgements section at the end of this paper.

Consultation Feedback

This paper synthesises the key areas explored during consultations, outlining the main topics and themes that emerged.

Overall, there was considerable support for a MIS pan-disability study to help fill an important evidence gap on the level of resources needed. Stakeholders noted that greater knowledge of disabled people's needs and costs could support disability organisations' campaigns and responses to policy consultations – and that being able to demonstrate the extent of additional costs disabled people face could help 'ram home' messages. They felt that such research would be valuable in informing discussions about what would help to bring people up to an identified minimum acceptable living standard - whether through increasing income, cutting costs or improving services.

Stakeholders noted that research on disabled people's needs and costs was policy relevant and timely, given current debates about disability benefits. It was suggested that being able to illustrate the additional costs people face could provide a counterbalance to oversimplified policy narratives: however, any research findings in this area would also have to be sensitive to the political context. Methodologically, MIS research would provide a valuable starting point as a needs-based benchmark in the UK and could make an important international contribution in this area.

Suitability of the MIS approach

The MIS method and the principles behind the approach were seen by stakeholders as very relevant for exploring needs and costs associated with disability and health conditions. MIS principles include:

- **MIS is based on what people agree is needed, rather than on what people actually have or spend which is limited by income and access to services.** As such, the method is able to capture unmet need – this was seen as particularly relevant for disabled people, for example, who may be using disability benefits to cover everyday living costs rather than disability-specific expenses, or who experience inadequate provision and are not able to access what they need.
- **It considers what people need for a socially acceptable standard of living that enables participation in society and to live with dignity, indefinitely.** It is not a bare minimum, survival-level or short-term measure. Stakeholders noted the importance of this aspect of the approach which emphasises a standard for people to thrive, whereas disabled people often do not have what they need - they may participate but with difficulty, and feel that they have to accept or tolerate a situation where their needs are not met.
- **It consults members of the public through discussion groups on needs and what meeting those needs would look like.** MIS disability research would be grounded in the views of disabled people, deciding what is needed, based on lived experience. As the research is produced through qualitative discussions, it will also provide rich information from conversations behind the decisions and costs – such as why something is included, what it brings to someone's life, how it relates to inclusion and living with dignity. This provides valuable insight into disabled people's needs and lives, and can help inform understanding, especially for those not in that situation.
- **A MIS disability study would cover a wide range of needs and costs, beyond what might be considered specific disability-related items or expenditures.** The UK MIS research provides an up-to-date baseline and detailed records of costed items that various household types without a disability or health condition need. This could be used in a systematic way to identify, not just specialist or additional goods and services needed, but also differences in the quality, amounts and replacement rates of general items and services. This was highlighted as crucial to providing a full picture of peoples' needs and costs, as these ongoing everyday costs can for some add even more to budgets overall than specialist items such as equipment which, whilst requiring large outlay, may be purchased less frequently.

The definition of a minimum acceptable standard of living, developed with members of the public and used in all UK MIS research to date, was seen as suitable to use in disability studies. The definition states that:

> '*A minimum standard of living in the UK today includes, but is more than, just food, clothes and shelter. It is about having what you need in order to have the opportunities and choices necessary to participate in society'*.

Stakeholders said that it will be important to contextualise and discuss the definition, its meaning and terminology with participants. They noted that people may have different understandings and experiences of 'participation', and the use of the term 'minimum' would

need to be clearly explained within the context of what is socially acceptable (i.e. not the 'bare minimum' or subsistence level).

Intersectionality and the wider context

Throughout the consultation groups, stakeholders reiterated that income must be seen alongside the broader structural and societal landscape and barriers that disabled people encounter. Costs are shaped through interaction between disability and wider social, economic and environmental factors, such as: access to transport, services and support which can intersect with location and rurality; household circumstances and family support; ethnicity and English as a second language. Furthermore, stakeholders highlighted the broader context of 'patchy' provision, cuts to social care funding and the impact of client contribution. As MIS research is grounded in peoples' lived experiences and day-to-day realities, it should reflect a current picture of what people feel is actually available or can reasonably access, which can sometimes differ from what people perhaps should have access to.

It should be noted that this exploratory study was focussed on Scotland, and any differences in provision, funding and contribution systems from other parts of the UK will be relevant to how needs and costs may be met. Such differences would need to be taken into account in any MIS research whether in Scotland or UK-wide.

A needs-based approach

Developing a pan-disability MIS study involves deciding how to usefully frame and think about disability. Rather than focusing specifically on types of disabilities or conditions, stakeholders supported a needs-based approach across different areas of life. Reflecting the social model of disability, a needs-based approach would frame discussions around what people need to have and do, and what would get them there. One participant described the importance of a 'can do approach' focussing on what enables participation, rather than what someone can't do in the context of inhibiting societal barriers.

Stakeholders identified areas where needs may be similar across different disabilities or health conditions, for example for taxis or support with travel, or higher energy use. They also noted the wide variation – both across and within disabilities and conditions – that impacts on needs in certain areas of life. Some examples raised in the workshops are outlined in the table below.

Possible areas of similarity in needs across conditions	Possible areas of variance in needs within and between conditions
• Additional costs where people are unable to meet travel needs through public transport. • The need for a support person to help people go out. The physical presence of another person can be important, rather than just relying on technology. • Paying for accompanying people e.g. admission and refreshments for a Personal Assistant or someone providing informal help. • Principles around food e.g. specific food or dietary requirements or the need for more convenience food. • Different quality, quantity or lifetimes of clothing or household goods. • Home energy e.g. higher energy use to run equipment, for extra washing, or for heating where people may need warmth or are in the home more.	• The extent of need for, and type of specialist aids and adaptations. • Significant variations in independence and need for support, for example some people with complex needs may need 24/7 care. • Participation in working life. • Differences in how adept people are with technology, which can link to how needs are met and independence.

However, reflecting heterogeneity was reiterated as a key factor in any research, with diversity and complexity linked to needs across and within disability or condition. Points raised by stakeholders included, severity, lifelong or acquired, changing and fluctuating conditions, age-related differences and the presence of co-occurring conditions, as well as household circumstances (if someone lives alone or with others), and location (rural or urban settings and/or varying service provision).

Identifying needs

Identifying needs (before ultimately establishing how they are met and the associated costs) is central to the research approach. Stakeholders felt that some research participants may find it hard to identify needs and the goods and services required as a consequence of long-term unmet needs, restricted opportunities and current lack of access to support and services. Likewise, discussing formal care requirements could be challenging for participants who do not make these arrangements themselves, for example, where someone organises formal support for them or their needs are met through informal networks.

It may also be hard to identify what one stakeholder described as 'those things in the background you may forget about' and do not think of as support needs. For example, help with admin or with repairs may be less obvious than tasks like shopping, cleaning or personal care. Reciprocation costs associated with informal help (e.g., buying lunch for a friend when they assist with shopping) would also be important to capture.

Ways to support deliberation in these areas were discussed:

- **The MIS approach uses 'case studies' or example scenarios.** This could be very helpful for facilitating discussion and decisions. Participants can draw on their own experiences while depersonalising the conversation by thinking about what another similar, but not identical, household would need.
- **Triangulation of knowledge.** A range of perspectives can be drawn on to consider needs and the availability of different goods and services. In addition to discussions with disabled people, the research can include consultation with specialists and professionals working, for example, in occupational health to gather more information on specialist equipment, or fuel experts to estimate the costs of running equipment or heating homes adequately. Research with carers would also provide another perspective on meeting the needs of people with higher support needs. This could be fed back into focus groups or interviews with disabled people to help inform the discussions in some areas.

Research scope – setting a starting point

Stakeholders recognised that research covering every scenario and type of household would be hugely challenging given the diversity of disabled people's needs and situations, and it would be necessary to refine the scope for manageability. Suggestions for a realistic and useful starting point included:

- **Focussing on the needs of a working-age household.** Multiple scenarios or 'case studies' could include different household compositions (e.g. a disabled adult living alone, in a couple or with parents) and variations in support needs.
- **Developing realistic and relevant 'case studies' would be an important first phase.** These would need to be developed with disabled people and organisations that work with disabled people to consider needs across different areas of life informing the context around given scenarios. Existing information or survey data could also be drawn on to support the development of relevant of scenarios.
- **Considering costs at the household level.** While MIS research is based on the needs of individuals, it combines these to produce household level budgets. This complements a disability study because the financial realities of disability are often experienced at a household level. Stakeholders highlighted the importance of carers in terms of unpaid care, informal support and the needs of carers (who may also be disabled or have a health condition themselves). It was felt that the research should consider ways to include the views of co-resident carers and/or the potential for designated research with carers on the needs and additional costs they face as a separate study in its own right.

Bringing people together and supporting participation

The consultation process reiterated the need for a flexible and inclusive research design. It seemed feasible to keep the core principles of the MIS approach, while also offering broader options for participation, meaning a MIS disability study would differ somewhat from the usual MIS focus group format and process. Key considerations and suggestions are outlined below:

- **Bring disabled people together in a variety of ways.** Hold pan-disability focus groups to base discussions on exploring shared experiences and support needs and, alongside these, run condition-specific groups. Organising and formatting groups in this way

acknowledges that peoples' preferences will vary in how they wish to contribute in different group arrangements – for example, for accessibility and communication needs or because some people would feel more comfortable in a group of people who share similar conditions.

- **Offer in-person and online participation** to suit different needs and preferences. Online formats would enable people to participate remotely, making it easier for some people to follow and join in. A hybrid option combining in-person and online was seen as more challenging to manage and balance inclusion – but suggestions to help included running as two groups in one with separate facilitators for the in-person element and for the online element.
- **Offer group and individual participation.** Interviews should be used in combination with groups and provide an alternative for those who would prefer an individual rather than group setting.
- **Provide appropriate and flexible group format and questions.** This includes considering the phrasing of questions (e.g. question length and language) and reducing topics and length of discussions were appropriate. It can be important to ensure time for suitable pacing of discussion and to include the opportunity for follow up responses after focus groups or interviews, allowing people time to reflect. Including smaller breakout discussions might be helpful for people who may find larger groups overwhelming or harder to follow.
- **Support participation with appropriate preparation and resources.** Time and resource should be built in for sufficient preparation, to understand people's accessibility and communication needs, and to enable better participation. Preparation could include advance contact to discuss participation needs, participant information in more detail or in different formats, or sending questions and topics in advance of fieldwork.

Partnership with disability organisations

The importance of co-production and strong partnerships with disabled people and disability organisations was emphasised throughout the consultations. Partnership should feature from the proposal stage and continue throughout the research process, with sufficient resources and funding built in to support this. Stakeholders noted that these partnerships would be particularly crucial for accessing and working with participants and building trust and credibility. Their established networks and trusted relationships position them well to support preparatory 'capacity building' work, introduce groups, and contribute to facilitation and co-production.

Outcomes and presenting disability-related costs

Stakeholders agreed that variance and complexity in needs and costs would mean that a single figure or 'answer' would be unrealistic and inappropriate. An option could be to present findings within a framework to reflect the diversity of disability and how this can impact differently on types of needs, and the routes or resources to meet those needs across different areas of life.

The importance of having different ways of presenting the research was discussed in the advisory session. It would be useful to consider a range of modes for people to engage with the findings and data. This could include online and interactive formats that could

potentially be used to select and combine different areas of needs and costs. While recognising that policymakers may be looking for headline figures, a more nuanced approach was seen as useful for individuals and households, a powerful way of presenting the diversity of needs and costs, and could be used to highlight that needs can be met, not just through income, but through services or policies working to reduce costs.

Conclusion

Consultative workshops provided valuable advice that can help inform research to deepen understanding about disabled peoples' needs and costs. In this exploratory phase of work, stakeholders demonstrated strong support for adapting the MIS approach for a pan-disability study. There is potential for significant added value from this approach which is needs-based, grounded in lived experience and focused on dignity and participation. Stakeholders drew attention to important practical and conceptual considerations, including diversity and fluctuation of needs, the role of informal support, and the complexity of social care systems. The consultations were valuable in reiterating both the shared and highly variable requirements of disabled people. In terms of taking forward further research the consultation reinforced the importance of a flexible and inclusive research design, ensuring genuine collaboration throughout and, linked to this, the need for sufficient time and resource.

The findings suggest significant potential for a pan-disability MIS study that would aim to provide robust evidence on the income and wider resources that disabled people require for a minimum socially acceptable standard of living. Such evidence could also be drawn on to consider how the availability and affordability of relevant goods and services influence the income households need, as well as the difference that reductions to additional costs could make to disabled people's household budgets.

Evidencing disabled people's needs and costs has always been important, but in the current context of debates around potential changes to the UK benefits system, it is ever more relevant. Since the consultation meetings took place, the Timms Review has published interim findings with the message that while PIP can be a 'vital lifeline' in helping with extra costs and participation in everyday life, the system, in particular the claim process, is 'not working' for many and needs 'fundamental change' (DWP, 2026b). This signals that there is much discussion to come on the needs and costs disabled people face and the role of social support in meeting those needs. In the Timms Review, the co-chairs' comment that PIP's aims should emphasise 'supporting independent living and participation in society' (DWP, 2026b) chimes strongly with the MIS approach discussed in this paper, where need encompasses access to 'the opportunities and choices necessary to participate in society'.

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- Change Mental Health
- Citizens Advice Scotland
- Disability Benefits Consortium
- Disability Equality Scotland
- Dyslexia Scotland
- Enable Communities
- Epilepsy Scotland
- Fraser of Allander Institute
- Glasgow Centre for Inclusive Living
- Glasgow Disability Alliance
- JRF Scotland
- Mind
- MS Society Scotland
- Poverty Alliance
- Quarriers
- RNIB Scotland
- Scope
- Scottish Autism
- Spina Bifida Hydrocephalus Scotland
- Stirling Carers Centre
- University of Glasgow
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