**Social Policy Brief**

**Feb 2021**

**Social Policy Abused:**

**The Creation Of Preventable Harm**

**CAPITA ATOS UNUM UC MAXIMUS DWP PIP ESA WORK CAPABILITY ASSESSMENT**

**REST IN PEACE**

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# Executive Summary

The Preventable Harm Project (the Project) ran for ten years and closed in November 2019, with the evidence identified within the Project findings widely promoted during 2019/20. The Project identified the bipartisan political ambition to eventually remove the UK welfare state, to be replaced by private income replacement health insurance. In order to remove the welfare state, it was first necessary to remove the psychological security provided by the welfare state. This was achieved by the adoption of a flawed disability assessment model, and the manipulation of the general public aided by the tabloid press, that successfully demonised claimants of disability benefit(s). Large numbers of suicides linked to the adoption of the Work Capability Assessment are overlooked by the Department for Work and Pensions, and successive Rule 43 ‘*prevention of future deaths’* Coroners’ reports, highlighting the link between the Work Capability Assessment and suicides, have also been disregarded. The Work Capability Assessment was fatally flawed by design and should be abolished, and the departmental intimidation of disability benefit claimants should be outlawed.

# Introduction: The Creation of Preventable Harm

1. Introduced in 2008 to restrict access to the new Employment and Support Allowance long-term out- of-work disability benefit, the Work Capability Assessment (WCA) is a ‘*non-medical functional assessment’* that disregards all clinical opinion. Since 2010, the WCA has been linked to the deaths of thousands of chronically ill and disabled benefit claimants who applied for state financial support when unable to work, yet were deemed to be ‘*fit for work’* by the fatally flawed WCA.**1,2**
2. Twelve years since the adoption of the WCA there is an identified and growing mental health crisis within the UK linked to claimants of disability benefit(s), and a disturbing increase in suicides directly linked to the WCA, as identified by published academic research but dismissed by the Department for Work and Pensions (DWP).**3,4**

“The worst thing, I find, is realising that I am forced into looking for a life that I want but have no chance of having. I seriously feel I may kill myself because being sick, having next to no money, no life, no future, no cure, constant pain and constant disapproval defeats me.”

An extract from the ‘*Fulfilling Potential? ESA and the fate of the Work-Related Activity Group’* project, conducted by Catherine Hale and published by MIND and the Centre for Welfare Reform.**3**

1. In both 2006 and 2007 the government’s own expert medical panel warned the administration not to adopt the WCA, advising that it was ‘*not fit for purpose’* due to the predictable negative impact on public mental health. The expert panel’s clinical opinion was disregarded by the DWP. The removal of clinical opinion from disability assessment using the WCA guaranteed that many of those in greatest need were destined to die, as the state removed the financial and the psychological security of a guaranteed income when unfit to work.
2. There have been two official Rule 43 ‘*prevention of future deaths’* Coroners’ reports linking the WCA to suicides, with other Coroners expressing concern at inquests due to the identified enforced suffering of the deceased by the DWP. Coroners’ official Rule 43 reports and identified concerns are disregarded by the DWP, whose social policy reforms since 2010 created preventable harm to those in greatest need linked to intimidation.**5** The constant threat of sanctions, which removes all disability benefit income, leaves the chronically ill and disabled community in need of state financial support living in fear of the DWP.
3. Regardless of the Jobcentre being advised that a claimant is unable to attend an interview due to ill health, disabled claimants are routinely met with an ‘*institutional reluctance’* to meet their needs, as identified in Coroner’s reports.**6** Jobcentre staff’s decisions to sanction a claimant can cause death by starvation, in C21st UK, when all income is removed for a period of weeks or months. No-one is held to account when some of those in greatest need are starved to death by the state.**7**
4. The WCA is used to limit access to all state disability funding including the Employment and Support Allowance (ESA), Personal Independence Payment (PIP), Universal Credit and the War Pensions for older working-age disabled veterans, which is a military medical pension not an out-of-work benefit.
5. The WCA is regularly and inappropriately referred to as a ‘*medical assessment*’ by the DWP, MPs, academics, policy advisers and journalists. The WCA is not a medical assessment and is totally unrelated to clinical opinion. The adoption of the WCA is identified as being attributed to psycho- coercion by successive administrations, to remove what once was the psychological security of the welfare state for anyone who is unfit to work.
6. Identified in 2008 by the American Association of Justice as being the second worst insurance company in America, the corporate insurance giant Unum (Provident) Insurance have been advisers to the UK government since 1992, and were appointed as the official UK government consultants for ‘*welfare claims management’* from 1994. Concerned by the increase in various conditions that could not be confirmed by blood tests or x-rays, such as chronic fatigue syndrome, Unum Insurance adopted a biopsychosocial (BPS) model of disability assessment, which disregards all clinical opinion.
7. Unum advised the UK government as to how to adopt a similar BPS assessment model in the UK, and funded an assessment centre at Cardiff University for this purpose. The DWP adopted the discredited Waddell-Aylward BPS model of assessment for the WCA, which disregards diagnosis, prognosis, past medical history and prescribed medicines. The human consequences of using the WCA is that many of those in greatest need would die, with many driven to suicide with a common perception that anyone claiming to be unfit to work, and in need of state financial support, will be persecuted by the DWP. The Waddell-Aylward BPS model of assessment failed all academic scrutiny.

# Policy recommendations

* + Since 2009 every clinical authority in the UK have demanded that the WCA should be abolished. This includes the British Medical Association, the Royal College of General Practitioners, the Royal College of Psychiatrists, the Royal College of Nurses and the British Psychological Society. Introduced by the private health insurance industry, disregarding clinical opinion was always dangerous. The WCA is fatally flawed and should be abolished without further delay, to be replaced with a disability assessment that considers clinical opinion, with many assessments being paper-based, so that the chronically ill and disabled community are no longer intimidated by the DWP.

# Research findings

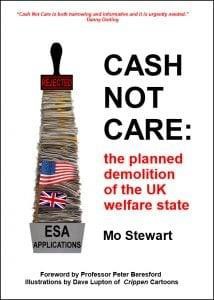
* + In order to remove the past psychological security provided by the welfare state it was necessary to discredit vast numbers of disability benefit claimants, aided by the tabloid press, which helped to manipulate the British public.



* + Social policies were adopted with a fiscal priority whilst disregarding health and wellbeing, which policymakers failed to take into account when recommending policies which were harmful.
  + Since 2010 the social policy reforms, and the additional austerity measures, were destined to have a catastrophic and often fatal consequence for many of those in greatest need. Thousands of chronically ill and disabled benefit claimants have died when ‘*killed by the state,’* with a 2014 NHS Digital Adult Psychiatry Morbidity Survey report that identified that almost 50 percent of ESA disability benefit claimants had attempted suicide at some point.**8**
  + Prosecuted disability hate crimes, including murder, increased by 213 percent between 2010-2016,

during the coalition government’s term in office.

* + The relationship between physical health and mental health is well documented. The numbers of benefit claimants who have perished due to social policies since 2010 will never be known.
  + Published in September 2016 ‘*Cash Not Care: the planned demolition of the UK welfare state’* provides the results of the first six years of independent disability studies research for the Preventable Harm Project. The book is now recommended reading for various social policy, health and legal courses at universities in the UK, Australia, Canada and New Zealand.**9**



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*Mo Stewart is the research lead for the Preventable Harm Project, which ran for ten years from 2009-2019. Evidence from the years of research is available on the website including all official correspondence, professional reports, and a vast array of published papers by academics working in the field of social policy, public health and human geography.*

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