



Interview

The Planned Demolition of Britain's Welfare State:

Independent Researcher **Mo Stewart** Is Interviewed by **Richard House**

Introduction

In this exclusive interview, one of Britain's foremost authorities and researchers on recent policy changes to Britain's welfare state, Mo Stewart, gives chapter and verse on a dark neoliberal agenda, which has had – quite literally – death-dealing consequences for some of Britain's most vulnerable citizens.

Richard House (RH): Mo, before we get on to discussing your highly influential work on the welfare state in Britain, can you tell our readers something about your background, and how you came to be perhaps the foremost critic of recent government treatment of Britain's welfare state claimants? After all, in the spirit of this journal, there's clearly an important 'human-interest' story here, as well as a political one, and readers will certainly be interested in your 'personal journey' as well as in the political dimensions of your work.

Mo Stewart (MS): Hello Richard, and thanks for your interest in my work. I am a healthcare professional by training, originally trained in the National Health Service (NHS) in cardiac support during open heart surgery. I then joined the Women's Royal Air Force medical branch for further training in neurophysiology, before being medically discharged in 1984 and awarded a War Pension (WP) for life. During my career as a medical technician I never felt the need to terrify my patients, and I profoundly object to the ongoing psychological tyranny created by the UK Department for Work and Pensions (DWP), as the British welfare state is gradually demolished in favour of American-designed social security policies on route to funding healthcare in the United Kingdom (UK) by private insurance.

I have described the research as my 'personal voyage of research discovery'. What began in early 2009 as a personal battle with the Service Personnel and Veterans' Agency (SPVA) became an all-

consuming mission to expose the atrocities of the UK government – as the DWP adopted dangerous social security policies regardless of how much preventable harm they would create, and regardless of how many people were destined to die when, quite literally, killed by the State (Stewart, 2016a; Elward, 2016).

In 2008 I applied to the SPVA for another review of my WP, as my health had deteriorated. In the previous 20 years, all WP reviews were conducted by former military doctors who all treated me with respect, conducted a detailed medical examination, and always produced an accurate report identifying a deterioration in health, which then increased the WP. However, in December 2008 I was confronted by an unethical staff member from Atos Healthcare, who were the private contractor engaged to conduct assessments on behalf of the DWP. The visitor claimed to be a doctor but refused to offer any ID, refused eye contact, completed a questionnaire which was unrelated to my health, and dismissed all my attempts to ask questions with an offensive wave of his hand.

The result was a letter from the SPVA advising that my WP would not be increased, with a hostile warning not to apply again for future reviews. This decision questioned my integrity, and I 'went to war' to challenge this unacceptable SPVA decision.

I hadn't heard of the Work Capability Assessment (WCA), and I didn't know that the DWP had adopted a fatally flawed assessment model, which disregards diagnosis to resist funding benefits to those in greatest need. A WP is not a benefit, but this 'one size fits all' mentality was applied to all government assessments. During the two-year battle with the SPVA I discovered the disability support groups, and realised that the research I was conducting for my own circumstances would be of benefit to others.

RH: Thanks, Mo. That's all very clear, enlightening – and disturbing. The dates you mention are noteworthy, as these new systems were clearly introduced by the previous Blair/Brown New Labour government. This is important, as it's often assumed that this inhuman assessment regime is a creation of Britain's Conservative government. Of course the latter have no doubt extended and worsened matters since the regime's original introduction, but the historical accuracy of who's responsible for this system is, I think, important to clarify.

In your answer you make what, for some readers at least, will likely be an amazing statement: viz. '...how many people were destined to die when, quite literally, killed by the State'. If there's any truth at all in this finding, then this must surely be a scandal of scarcely imaginable proportions – and almost unprecedented in British political history. You also speak of the DWP adopting 'a fatally flawed assessment'.

Could you explain for our readers how this process of effectively being 'killed by the State' has happened; and also detail for us how the DWP's assessment is 'fatally flawed'.

MS: Yes, Richard, people are often concerned when they access this reality, and the detailed peer-reviewed academic research evidence that I tend to cite when compared with the DWP accusations published in the national press (Hall, 2011). However, regardless of the significance of any research evidence, unless a mass audience learns about this reality very little will change, and this unnecessary human suffering will continue.

It is cause for serious concern that high calibre professionals in a government working group, created to help design the WCA, had repeatedly advised the DWP against the introduction of the assessment. Consultant Psychiatrist Professor Geoff Shepherd and colleagues alerted the DWP to the fact that the WCA was 'deeply flawed', unfit-for-purpose and was destined to cause damage to claimants' mental health. Yet these warnings were dismissed and the DWP '...were "ruthless" and "reckless" in forcing through their new "fitness-for-work" test and refusing to abandon it even after they were told of the harm it was causing....' (Pring, 2015).

Tony Blair's replacement as Prime Minister, Gordon Brown, introduced the removal of Incapacity Benefit and the adoption of the Employment and Support Allowance (ESA) in October 2008. The ESA requires chronically ill and disabled claimants to make themselves available for the WCA, which resists diagnosis, prognosis and all medical opinion, and is conducted by the unaccountable private sector at huge costs to the public purse (Stewart, 2015). By definition, any assessment that disregards diagnosis, prognosis and medical opinion is fatally flawed, as confirmed by the Work and Pensions Committee in 2014 (W&P, 2014).

The 2006 Green Paper (DWP, 2006) demonstrated that Blair was continuing with the 'Thatcher Legacy', which was

the eventual removal of the UK welfare state (Stewart, 2016a). Although New Labour introduced the WCA in October 2008, it was the 2010 David Cameron Conservative-led Coalition government which significantly increased the preventable harm it was always destined to create. As Secretary of State for Work and Pensions for the Coalition government, Iain Duncan Smith spent over five years demonizing sick and disabled claimants of long-term sickness benefit. He made vicious and totally untrue claims and, when aided by the tabloid press (Little, 2011), he successfully transformed the public psyche regarding chronically ill and disabled people who were unable to work. The nation changed from a sympathetic understanding to a blame mentality, where anyone not in paid employment was challenged.

It is shocking for most people when they learn of the levels of death, despair and preventable harm created by successive UK governments in order to demolish the welfare state (Stewart, 2016a), as identified as possible crimes against humanity (Stewart, 2016b). However, since the national press will not report this reality to the British public, most people don't know about it. So, without the support of the national press, this 'scandal of scarcely imaginable proportions' is easily avoided, because the national press has been silenced and the British public don't know.

This wasn't difficult to achieve.... In 1992 (under the John Major Conservative government) invite a notorious American corporate insurance giant to advise successive UK governments regarding future welfare claims management. Make sure the chosen corporate giant was identified by the American Association of Justice in 2008 (AAJ, 2008, p. 6) as the second-worst insurance company in America, and disregard the many times they appeared in court in America for refusing to honour healthcare insurance claims. Eventually, after much propaganda and rhetoric, claim that the UK can't afford the welfare budget, and justify this claim by making it much tougher to access welfare funding for ill health. Then, in October 2008, introduce a dangerous assessment, which is a replica of the assessment model used by the American advisers that disregards diagnosis, prognosis and past medical history. Claim that the WCA is not a medical assessment but a 'functional' assessment, and appoint a Secretary of State who, when aided by the majority of the right-leaning national press (Hall, 2011), would spend years talking and shouting about the burden of these 'scroungers' on the 'hard-working tax payer'. Job done! (Stewart, 2015, 2016a, 2017)

The WCA presumes all ESA claimants to be bogus. Disregarding diagnosis and prognosis is deadly, and was always guaranteed to kill many people (Stewart, 2017) – and it has done, as claimants must prove they are worthy of State funding, regardless of medical opinion. The DWP resists publishing important statistics, and when there's a public reaction when stats are finally provided, the DWP then refuses to publish updates, such as the ESA mortality statistics (Patel, 2016).

It is deeply concerning that there is still no political movement in the House of Commons to challenge the DWP decision to

refuse to publish updated ESA mortality totals since February 2014 (Patel, 2016). The statistics exposed the fact that from December 2011 to February 2014, a total of 2,380 chronically ill people had died when declared 'fit for work', following the WCA by Atos Healthcare, and were refused access to the ESA by the DWP. These DWP victims were forced to claim Job Seekers Allowance unemployment benefit. They were ordered by the DWP to search for work, forced to demonstrate that they had searched for 35 hours per week, and then died trying within a few short weeks of having access to ESA denied, making an average of more than 80 people per month dying after being found 'fit for work' by the government (Ryan, 2015).

This morning, the government released mortality statistics – or rather, was forced to after several freedom of information requests – that show more than 80 people a month are dying after being declared 'fit for work'.

These are complex figures but early analysis points to two notable facts. First, that 2,380 people died between December 2011 and February 2014 shortly after being judged 'fit for work' and rejected for the sickness and disability benefit, Employment and Support Allowance (ESA). We also now know that 7,200 claimants died after being awarded ESA and being placed in the work-related activity group – by definition, people whom the government had judged were able to 'prepare' to get back to work....

Today's mortality statistics do not simply point to the death of disabled, poor, and ill people but of the system that was meant to protect them. Before our eyes the principle of a benefit system being reduced from opportunity, respect, and solidarity to destitution, degradation and isolation...

The welfare state was built on the idea of 'from the cradle to the grave'.

Now for thousands, all they receive is help to the grave.

Ryan, 2015 (online)

The identified preventable harm is vast, as the WCA has removed what was once the psychological security of the safety net of the welfare state. The welfare state was designed to be a guaranteed minimal income so that long-term ill-health would not mean destitution. Now there is no guarantee, and now destitution is very likely. Administrative errors and delays mean that those least able to defend themselves often wait weeks or months for payment, and many survive via food banks or waste bins; but this is more detailed evidence that is not widely known by the British public, as government-funded tyranny prevails (Berghs, 2017).

The psychological harm created by the removal of guaranteed income has had a profound impact on public mental health, and there are various academic papers demonstrating this, such as the 2015 paper 'First do no harm' by Ben Barr and colleagues (Barr et al., 2015); but any research not commissioned and funded by the DWP will be disregarded. This is how this ongoing tyranny is permitted to continue.

'The scientific and conceptual basis of incapacity benefits' by Gordon Waddell and Mansel Aylward (Waddell and Aylward, 2005) was commissioned by the DWP in 2005. It recommended the use of a biopsychosocial (BPS) model of assessment, as adopted by the DWP for the WCA.

In his 2016 paper 'Blaming the victim, all over again: Waddell and Aylward's biopsychosocial (BPS) model of disability' (Shakespeare et al., 2016), the academic excellence of Professor Tom Shakespeare and colleagues identified the Waddell and Aylward BPS model as being 'policy-based research' and not 'evidence-based research' when referencing the 2010 publication 'Models of sickness and disability applied to common health problems' (Waddell and Aylward, 2010).

RH: Well in that brilliantly comprehensive answer, Mo, you've anticipated and already answered some further questions I was going to ask you! – thank you. You might be interested to know that while I agree that there has been a 'deafening' (and shameful) silence in the national press in relation to this modern scandal, some colleagues and I have been writing letters to the local and regional press exposing some of this, and many if not most of our letters have been printed. So it could be that mobilizing people across the country to start writing to local and regional newspapers on these issues might be one way of raising the public's awareness of what its own government is doing in their name. Of course these papers have significantly lower circulations than the nationals, but we have to start somewhere, and to find ways of getting under the radar of the Establishment media's silencing of what's really going on in the welfare system.

You mention Tom Shakespeare's important work. I'm interested in the extent to which academics are prepared to research into, and write about, these issues in the academic literature. It's well known that academics are far more likely to be left-wing than right-wing, so I would have hoped that there would have been radical-left academics literally queuing up to get stuck into these issues and write papers about it. What's been your experience of this to date? And to the extent that there's been a paucity of such academic writings and research, why do you think this is so?

And more generally, can you say what response you've had to your published research to date, both from the academic community but also more widely — including, or perhaps especially, those who've been most affected by this heartless regime?

MS: Good luck with writing for the local and regional press, Richard, although I confess I have no idea how you'd express the enormity of this ongoing government-funded tyranny in a letter.

I have enjoyed a great deal of welcome support from academics, who are very willing to assist me with any queries, and willingly share their research findings with me. The sick and disabled community has always supported my work, not least because I am conducting the research on their behalf, and many disability support groups publish my research online for their readers (BT, 2016).

Tom Shakespeare's paper, 'Blaming the victim all over again: Waddell and Aylward's biopsychosocial (BPS) model of disability' (Shakespeare et al., 2016) was the answer to my prayers. At last, academics, including a high-calibre world-renowned academic expert, who is himself profoundly disabled, totally disintegrated the claims by government advisers Waddell and Aylward, and completely discredited the BPS model of assessment used for the WCA.

There are various academic papers regarding certain aspects of this ongoing torment. Ben Barr's notable 2015 paper, 'First do no harm: are disability assessments associated with adverse trends in public mental health?' (Barr et al., 2015), was another critical peer-reviewed academic paper that was disregarded by the DWP. The research is very significant, and challenged the validity of assessing people with long-term mental health problems. However, regardless of the research findings, the DWP will disregard all academic research if not commissioned by the DWP, especially when it challenges DWP policies, as Ben Barr's paper did: 'For each additional 10,000 people reassessed by the WCA, there were an additional six suicides, 2,700 cases of reported mental health problems, and the prescribing of an additional 7,200 antidepressant items.' (Barr et al., 2015)

Anne Daguerre of Middlesex University produced very significant research regarding the 'Policy Transfer of Social and Labour Market Policies from the USA to Britain under New Labour' (Daguerre, 2004), and published a number of significant papers regarding the American-influenced UK welfare reforms (Daguerre and Etherington, 2014) and the moral case for benefit sanctions (Daguerre, 2015), which removes all claimant income for weeks, and results in some chronically ill people actually starving to death in 21st-century Britain (Gentleman, 2014).

I see no evidence of 'radical-left academics literally queuing up to get stuck into these issues', Richard. Academics are very restricted in their research, as it all depends on who funds it, and their research guidelines, as to what they research and where it will be published.

RH: That's very interesting and sobering, Mo. I will certainly quote chapter and verse from this Ben Barr research in future press letters! That peer-reviewed research has shown that nearly 600

suicides of our most vulnerable citizens over a three-year period are directly linked to the Work Capability Assessment leaves one feeling ashamed of a country that used to be renowned for its compassion and fairness. Dark times indeed.

Tell us about your book, *Cash Not Care*, Mo (Stewart, 2016a). When did you first get the idea that a book was needed, and that you were the person to write it? And what has the experience been like for you?

MS: Ben Barr's significant paper (Barr et al., 2015) has been cited regularly in welfare reform debates. Perhaps of even more significance are the recently revealed 2014 NHS statistics (NHS Digital, 2016), which were never reported to the national press, and which identified that in a 2014 study almost 50 per cent of ESA claimants had attempted suicide. The DWP refused to comment about the NHS statistics, and claimed that staff were given guidance for any claimants expressing a wish to self-harm (DNS, 2017).

Written with colleagues, Tom Shakespeare's paper (Shakespeare et al., 2016) was profound, not least because it supported my own research findings and exposed the biopsychosocial (BPS) model of assessment, as adopted by the DWP that I'd been writing about for several years. In just two short sentences, Tom's 2016 paper disintegrated the Waddell and Aylward BPS model of assessment, as adopted by the DWP for the WCA to justify terrorizing the most vulnerable people in society:

We outline the chief features of the Waddell–Aylward BPS (model) and argue that, contrary to Lord Freud's comments above, there is no coherent theory or evidence behind this model. We have carefully reviewed claims in Waddell and Aylward's publications; compared these with the accepted scientific literature; and checked their original sources, revealing a cavalier approach to scientific evidence.

(Shakespeare et al., 2016)

Yet the New Labour government had used earlier discredited research when adopting the Waddell and Aylward BPS model for the WCA: *The Scientific and Conceptual Basis of Incapacity Benefits* (Waddell and Aylward, 2005). This research was used to manipulate the British public when enforcing the adoption of welfare reforms that were destined to negatively impact on the wellbeing of 2.68 million sick and disabled people (Freud, 2007, p. 5), who were claiming Incapacity Benefit when the ESA and the WCA were introduced in October 2008.

In 2007 Professor Jonathan Rutherford identified that 39 per cent of Incapacity Benefit claimants had a mental-health problem, which was almost one million people (Rutherford, 2007, p. 40). With constant claims that one million more sick

and disabled people should find work, it seems that the DWP decided that anyone with a mental-health illness was not in need of sickness benefit, regardless of very predictable human consequences.

This was the ambition of American government advisers, UnumProvident™ Insurance, who had been advising the UK government on welfare claims management since 1992, and who fully expected to gain from the planned changes to the UK social security system (Stewart, 2016a). The company gave evidence to the Work and Pensions Select Committee, advising that the UK government were being 'guided by our thinking', and highlighted the fact that the former DWP Chief Medical Officer, Mansel Aylward, was the new Director of the UnumProvident™ Centre for Psychosocial and Disability Research (W&P, 2006). The company anticipated a large growth in the purchase of their private Income Protection Insurance policies (Stewart, 2016a) as more and more people realised that the psychological security of the safety-net of the British welfare state no longer existed.

Prime Minister David Cameron took the welfare reforms to an entirely new level in 2010 when adding austerity measures to welfare reforms that has since seen relentless human suffering, with countless thousands of deaths linked to the dangerous WCA. The Cameron Cabinet Office actually attempted and failed to 'incentivize' me to stop the research.... Alarm bells were ringing in the disabled community. The Cameron government disregarded the 2014 report by the Work and Pensions Committee, which identified the fact that the WCA was fatally flawed (W&P, 2014), and the DWP will disregard any and all evidence against the WCA.

That is why we will never know the real death totals of those who've died following a WCA, or because of the threat of the WCA. Many of the 2.68 million former claimants of Incapacity Benefit (Freud, 2007, p. 5), as replaced by the ESA from October 2008, gave up trying to access the ESA.

What remains cause for serious concern is that important academic research as demonstrated in Tom's paper (Shakespeare et al., 2016), which exposes the totally discredited BPS model of assessment, is hidden in an academic journal; and the people who need to know, who are the British public, are never informed. With the one significant exception of Ben Barr, I know of no other academic researching the impact of welfare reforms who identified their research findings via the media, which brought it to the attention of the public via BBC News (Buchanan, 2015), and with articles in the national press (Bennett, 2015); the same national press who refuse to expose the influence of corporate America with British social security policies.

I'm not sure about your question as to why I thought I was the person to write the book, Richard. The book is a continuation of my own research, so no-one else was capable of writing it. As for the experience of writing *Cash Not Care* (Stewart, 2016a), what I

would say is that despite living in desperately dark times, writing the book confirmed the fact that decent people do still live in our country. No-one I asked for access to their research refused. Without exception, I've had very valuable academic support, including a favourable book review published in *Self & Society* journal (Berghs, 2017), and Policy Press kindly provide access to anything they publish.

The academic world tells me that they value the fact that I write for the lay public, and on behalf of the sick and disabled community in particular. Academics value the fact that I disregard the limitations imposed by academic writing, so making the significance of academic research available to a much wider potential audience, even if the academics don't tend to make any effort to alert the public about their often very significant research discoveries. I hope that will soon change.

RH: You've taken us on a bracing – and shocking – journey, Mo. I have no doubt that history will look back with great gratitude that you have done this work, and opened up a space for a future left-inclined government to, at the very least, halt these policies, and hopefully reverse them. Thank you for this great contribution, for being so generous with your time, and for enlightening our readers about this modern scandal.

About the contributors

Mo Stewart is a former healthcare professional and a disabled veteran of the Women's Royal Air Force medical branch. She works as an independent researcher and is acknowledged as being the lead researcher in the UK regarding the planned demolition of the welfare state, to be eventually replaced by American-style social-security policies. Mo's research exposed the influence of a corporate American insurance giant since 1992 with British welfare reforms and her book, *Cash Not Care: The Planned Demolition of the UK Welfare State*, was published in September 2016, and has since received wide critical acclaim.

Richard House is former editor of *Self & Society*, a former counsellor/psychotherapist and senior university lecturer, and now works as a full-time left-green political activist, campaigner and writer in Stroud, Gloucestershire, UK.

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Publications by Mo Stewart

Resource list: the research of Mo Stewart

New website: www.mostewartresearch.co.uk