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Nadine Dorries MP Minister of State Department of Health and Social Care 39 Victoria Street, Westminster London SW1H 0EU

VIA EMAIL

Dear Ms Dorries

Re: A Catastrophic Indifference to Human Need: The Mental Health Crisis Created by the DWP British Journal of General Practice, 2021⁸

At the request of some of your backbench colleagues who follow my research and are concerned with the published findings, I am writing to you today in my capacity as the research lead for the Preventable Harm Project (the Project) which ran for ten years and closed in November 2019.^{1,2}

I spent a year promoting the often disturbing Project findings. This was achieved with papers published in academic journals,^{3,4} chapters in academic texts,^{5,6} and a conclusion to the Project promotion held on 27th November 2020 when I presented an online seminar hosted by the Centre for Welfare Reform.⁷ Evidence from the research continues to be published.⁸ Your colleague and my constituency MP, Steve Barclay, is familiar with the research and supports the research findings.

Like yourself I am a former healthcare professional and, given your past experience as a nurse, it is my understanding that the evidence demonstrated by the Project should raise very serious concerns in your capacity as the Minister of State for Patient Safety, Suicide Prevention and Mental Health.

The Project exposed the devastation created by the adoption of the Work Capability Assessment (WCA), as first introduced in 2008 to restrict access to the Employment and Support Allowance (ESA). The WCA guaranteed a negative impact on public mental health, with UK social policy reforms influenced since 1992 by a corporate American insurance giant,¹⁻⁸ who were identified by the American Association of Justice in 2008 as being the second worst insurance company in the US.⁹

The question remains as to why this American corporate giant's influence and advice, to successive UK governments on future 'welfare claims management,' was accepted? Extreme UK social policy reforms adopting a fiscal priority guaranteed death, despair and preventable harm of those in greatest need. Thousands have died when linked to the dangerous WCA, and this demonstrated catastrophic indifference to human need by successive UK administrations must now end.⁸

The WCA was adopted in 2008 against the advice of the government's own advisory body.¹⁰ Every clinical authority in the UK insisted that the WCA should be abolished due to the identified preventable harm it was always destined to create. The British Medical Association, The British Psychological Society, The Royal College of Nurses, The Royal College of General Practitioners, The Work and Pensions Select Committee and the President of the Social Entitlement Chamber all advised that the WCA should be abolished. They were all disregarded. Regardless of very predictable catastrophic human consequences,^{8,11,12} every UK government since 2008 has continued to use the dangerous, fatally flawed WCA which totally disregards all clinical opinion.¹³

Whilst the world has been preoccupied with the Covid pandemic, and the UK is preoccupied with Brexit, there is an ongoing mental health crisis in the UK which is being overlooked.^{3,8,14,15} This identified mental health crisis is causing death, despair and preventable harm to the benefit dependent disabled community, who live in fear of the Department for Work and Pensions (DWP); whose persecution and intimidation of those in greatest need seems to know no limits.¹⁶⁻²² Relentless, hostile DWP letters to disability benefit claimants, all threatening sanctions, is linked to a serious deterioration in the mental health of those who are too ill to work and who live in dread of yet another WCA;¹⁸ which was demonstrated as being unfit for purpose long ago and is linked to an increasing number of deaths and suicides which are constantly disregarded by the DWP.

"Our <u>peer-reviewed study</u> revealed a clear and striking link between the Department for Work and Pension's work capability assessments and increases in suicides and other mental health problems. This raises concerns that the WCA process is severely damaging to mental health. Unfortunately, the DWP has not, as yet, taken these concerns seriously (<u>Report</u>, 16 November). Suicides and other mental health problems continue to increase in the UK. It is crucial that we understand why this has occurred and take action to reverse this situation. In order to facilitate this the DWP should make any relevant data they hold available to researchers, to allow further analysis of the health impact of the WCA." Professor Ben Barr *et al*, The Guardian letters, 24th November 2015¹⁵

The DWP commissioned Waddell-Aylward research,^{23,24} which introduced the biopsychosocial (BPS) model of assessment, as adopted for the WCA, was totally discredited when identified by academic excellence as being based on policy-based evidence, and it does not represent evidence-based policy. The Waddell-Aylward researchers provided *'no coherent theory or evidence behind this model'*²⁵ and exposed *'a cavalier approach to scientific evidence.'*²⁵ This was a damning exposure of government commissioned research, adopted to justify social policy reforms. Essentially, ******the WCA disregards diagnosis, prognosis, past medical history and prescribed medicines, which is a recipe for death, despair and preventable harm when all clinical opinion is disregarded,^{8,13} as confirmed by DWP correspondence with this researcher.

There is a growing concern with a number of significant experts that the ultimate political goal is to eventually remove the UK welfare state, and replace it with the American healthcare system using private health insurance.^{1,2} And, whilst it was the Blair New Labour government who created 'an

active welfare state, ²⁶ with the adoption of American social and labour market policies in 1997, the evidence suggests that the outcomes will soon horrify the wider public irrespective of partisan support. The Liberal Democrats disregarded their values in exchange for a seat at the top table when joining the coalition government in 2010. The subsequent adoption of brutal austerity measures were guaranteed to create preventable harm for those in greatest need, as more academic excellence identified the adoption of the austerity measures as being 'a political choice, not a financial necessity', and were 'adopted without ethical approval'.²⁷

Furthermore, please be alert to a 2016 NHS report, which identified the fact that almost 50 per cent of ESA claimants had attempted suicide at some point, demonstrating a disturbing increase in suicides linked to the WCA, as many thousands have been despatched to an early grave when persecuted by the DWP.^{28,29} There is a catalogue of published academic papers demonstrating the ongoing preventable harm created by the social policy reforms, as combined with austerity measures since 2010, with suicide notes which regularly identify the DWP and the WCA as being the cause of anguish and despair for disability benefit applicants.³⁰ There is also evidence that the DWP failed to show WCA reviewers evidence of links to benefit deaths,³¹ and that the DWP disregarded Coroners' warnings about the WCA.³² Over time, Coroners have attempted to alert various administrations to an identified causal link between the WCA and suicides; with all Coroners' reported concerns disregarded by the DWP, including alerts under the 'Rule 43' Coroner's alert to prevent future deaths.³³ Minister, this is an ongoing gross dereliction of duty by the DWP.

Created by the DWP, this identified ongoing mental health crisis was aided by a former Secretary of State for Work and Pensions who demonised claimants of disability benefits, making many unfounded claims to manipulate the public; which was guaranteed to be reported by the tabloid press and was very successful.^{34,35} Indeed, prosecuted disability hate crimes, including murder, increased by 213 per cent during the coalition government's term in office.³⁶ Also, despite reassurances by the DWP that *'further medical evidence'*³⁷ would be accessed by the DWP when considering disability benefit claims, six years later there was no progress in this regard, and that was in 2016.³⁷ This demonstrates yet again that the DWP go through the motions of improving the WCA experience when, in reality, the DWP fail to demonstrate any concern regarding the suffering created by their social policies, and disregard the identified catastrophic and often fatal human consequences created when using the fatally flawed WCA.³⁸

Minister, the public are constantly reassured that social policy reforms were designed to help the disabled community access employment. Yet, the reforms over the past ten years have successfully terrorised the most vulnerable people in the UK, with disturbing evidence of Jobcentre staff revelling in their undoubted authority. Hence, when dutifully contacting the Jobcentre to advise they aren't well enough to attend a planned interview, the caller can find themselves routinely sanctioned for months, with disabled claimants sanctioned the most, and some starve to death. This is a political decision. It is shameful, is "*a stain on the national conscience*," ³⁹ and it is totally unacceptable that the DWP refuse to conduct a cumulative impact assessment regarding the adoption of the WCA.

This evidence is linked to the public manipulation by the coalition government. The public suspicion knowingly created by totally false press claims is now firmly fixed within the public psyche.^{34,35} The past psychological security of the UK welfare state has been successfully demolished, and those in greatest need now live in fear of the DWP, who continue to cause relentless preventable harm.⁴⁰ This is the reality of living with an often catastrophic chronic illness and profound disability, when in need of state financial support. Quite literally, Minister, many of those in greatest need are dying when *'killed by the* state',⁷ due to the impact of DWP social policy reforms with, as yet, no-one held to account for this government induced persecution of those in greatest need.

The Minister for Disabled People justifies disregarding the growing amount of deaths and suicides linked to the WCA due to five outdated reviews, conducted by Professor Malcolm Harrington and Dr Paul Litchfield. This is not considering like with like. Those reviews didn't consider the critically challenged government commissioned research used to justify the use of the WCA,^{23,24} which failed all academic scrutiny demonstrating that the WCA is totally unfit for purpose. ^{7,8,13,14,15,16,18,19,25}

It is very dangerous to continue to disregard mounting published research evidence that identifies the ongoing preventable harm created by the WCA, which disregards clinical opinion with an administration that routinely fails to adopt Coroners' recommendations,^{31,32} and refuses to publish reviews relating to benefit-related deaths.^{40,41} Minister, please be further advised that DWP staff also repeatedly fail to follow suicide threat guidelines⁴² which are only necessary due to the DWP's politics of fear. This identified crisis in public mental health continues with the roll-out of Universal Credit,⁴³ which is unrelated to what will be the mental health impact of the Covid pandemic.

This evidence is identified as the consequences of adopting social policy reforms over the past ten years which were exclusively based on fiscal priorities, when disregarding health and wellbeing.^{14,16}

Clearly, Minister, given the thousands of deaths linked to the adoption of this dangerous assessment model, together with disregarded Coroners' Rule 43 alerts, the WCA needs to be abolished without further delay to end this mental health crisis imposed by the DWP.^{3,7,8,14,16,18,43,44,45}

Yours sincerely

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Fellow, Centre for Welfare Reform



Mo Stewart Independent Disability Studies Researcher Author of 'Cash Not Care: the planned demolition of the UK welfare state.' New Generation Publishing, 2016 <u>https://www.mostewartresearch.co.uk</u>

Enclosed: Preventable Harm: creating a mental health crisis Journal of Public Mental Health, December 2019

Copied to:

Professor Tim Kendall, National Clinical Director for Mental Health, NHS England Dr Frank Atherton, Dr Michael McBride, Dr Gregor Smith, Professor Chris Whitty UK CMOs Stephen Barclay MP, Matt Hancock MP, Jo Churchill MP, Alex Norris MP, Vicky Foxcroft MP, Munira Wilson MP, Rosena Allin-Khan MP, Jonathan Reynolds MP, Jonathan Ashworth MP, Wendy Chamberlain MP, Justin Tomlinson MP, Edward Agar MP, Alex Norris MP, Sharon Hodgson MP, David Lammy MP; Stephen Timms MP, Chair Work and Pensions Select Committee, Dr Stephen Brien, Chair Social Security Advisory Committee Jeremy Hunt MP, Chair Health and Social Care Committee Caroline Nokes MP, Chair Women & Equalities Committee Sir Robert Neill MP, Chair Justice Committee; Prof Stephen Powis, National Medical Director NHS England; HH Judge Edward Thomas Teague QC, Chief Coroner; Paul Farmer, CEO MIND Senior Coroner, Tom Osborne; Asst Coroner, Dr Elizabeth Didcock Lee Knifton and Neil Quinn, Editors, Journal of Public Mental Health Mike Adams, RCN Director, England; Dr Jo Morling, Co-Editor in Chief of the Public Health Journal Alison Pickup, President Public Law Project; Dr Nicholas Thomas, Clinical Research Lead RCGP HH Judge Mary Clarke, Social Entitlement Chamber; Equality and Human Rights Commission Baroness Falkner of Margravine, Chair Equality and Human Rights Commission Baroness Armstrong of Hill Top, Chair Public Services Committee Sir Harry Burns, President British Medical Association; Dr Euan Lawson FRCGP, Editor BJGP, Professor Danny Dorling, Halford Mackinder Professor of Geography, University of Oxford Professor Karen Soldatic, School of Social Sciences and Institute for Culture and Society Professor Grainne McKeever, Professor of Law & Social Justice, University of Ulster Professor Kamaldeep Bhui CBE, Editor-in Chief, The British Journal of Psychiatry Professor Lord Patel of Bradford OBE, President Royal Society for Public Health Professor Peter Beresford, School of Health & Social Care, University of Essex Professor Gerard Quinn, Director of the Centre for Disability Law and Policy Professor Maurice Sunkin, Professor of Public Law and Socio-Legal Studies Professor Amanda Howe, President Royal College of General Practitioners Professor Sharon Wright, Professor of Social Policy, University of Glasgow Professor Martin Marshall, Chair Royal College of General Practitioners Professor Sir Michael Marmot, Director UCL Institute for Health Equity Professor Peter Dwyer, Professor of Social Policy, University of York Professor Henry Giroux, Chair for Scholarship in the Public Interest Professor Ben Barr, Professor in Applied Public Health Research Professor Louis Appleby, National Suicide Prevention Strategy Professor Tom Shakespeare, Professor of Disability Research Professor Roger Kirby, President Royal Society of Medicine Dr Jay Watts, Consultant Clinical Psychologist Dr Simon Duffy, Director Centre for Welfare Reform Dr Adrian James, President Royal College of Psychiatrists Dr Hazel McLaughlin, President British Psychological Society Dr Angharad Beckett, Associate Professor of Political Sociology Dr Kayleigh Garthwaite, Birmingham Fellow in Dpt of Social Policy, Sociology and Criminology Social Security Advisory Committee, Work & Pensions Select Committee, Women & Equalities Committee, Health & Social Care Committee, Justice Committee, Public Services Committee

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