Reply to letter from Naomi Agius via email, 17th April, 2023 ministers@dwp.gov.uk

Attention please Naomi Agius:

Dear Naomi,

Ref: TO2023/25034

Thank you for your letter of 11th April 2023, now attached, which you advise was in response to my email of the 27th of March to the Secretary of State and the Minister for Disabled People, Health and Work. Please be advised that my email included very detailed letters written to the Minister on 21st November 2022 and to the Secretary of State on 6th December 2022, as also attached.

May I remind you that you are writing to the research lead for the <u>Preventable Harm Project</u> that I've led since 2009, and I am a healthcare professional by training. Hence, repeated DWP rhetoric doesn't work, and I strongly suggest you stop using it.

As is usual with the civil service, your letter content disregards the detailed content of both letters to Ministers and my email and is therefore unhelpful. I must also advise that your claimed 'vision in the White Paper is to help more disabled people and people with health conditions to start, stay and succeed in work' will not happen as long as the DWP continue to terrorise those in greatest need. The so called 'vision' is based on right-leaning ideology, has been influenced by corporate America since 1992 and is totally unrelated to the health, wellbeing or to the survival of the chronically ill and disabled community.

I note you have used your past experience as a journalist to good effect but, in reality, disregarding detailed peer-reviewed published research and repeating the standard DWP rhetoric about how social policies are to 'help' disabled people into work, whilst disregarding the volumes of published evidence demonstrating the public health crisis generated by adopting a fatally flawed assessment to limit access to disability benefit is very unwise and is a waste of my very valuable time. Unless and until DWP Ministers begin to benefit from the volumes of peer-reviewed published academic papers, by real experts from universities throughout the UK, exposing the relentless persecution and identified preventable harm of those in greatest need by the DWP, nothing you have to say to me will be of note.

I will therefore tell you what I told your predecessor in great detail in 2021, which is please do not contact me again.

Regardless of the 4,500 people and organisations who contributed to a DWP consultation regarding the Green Paper at over 40 public events, that number pails into insignificance when compared with the numbers of chronically ill and disabled people, and their support groups, who are in contact with each other via social media. They do not agree with your many claims. My response to the public consultation for the Green Paper is also attached FYI and was published online:

"What is constantly overlooked is the fact that the disabled community's experience of this DWP "help and support" is via the politics of fear using the WCA. The assessment is conducted by an unaccountable American corporate giant, with the fatally flawed WCA using a discredited BPS model

which failed all academic scrutiny. Every clinical lead in the UK demanded that the WCA should be abolished, including the Royal College of Psychiatrists, the Royal College of General Practitioners, the British Medical Association, and the British Psychological Society, who all identified the WCA as being unfit for purpose. They were all disregarded by the DWP, as is the growing mental health crisis directly linked to the fear of the next WCA, and the constant DWP threat of sanctions. To date, the DWP have disregarded all published, independent academic research which identifies the ongoing and inevitable public health crisis created by social policies adopted since 2010." (p7)

Happily, the WCA is to be (finally) abolished. However, once again your letter content, and the DWP rhetoric contained within it, demonstrates the DWP obsession with finding paid employment for the disabled community whilst totally disregarding the numbers who are catastrophically ill, will never be fit enough to work, and are relentlessly persecuted by the DWP who adopted a preconception of guilt for all benefit claimants.

Many have died by suicide as their mental health suffered due to relentless DWP persecution, and relentless demands for endless flawed assessments for health conditions that can't EVER improve. That was always the danger of adopting the <u>totally discredited Waddell-Aylward BPS</u> assessment model for the WCA which disregards clinical need. And, lets not forget the numbers of those in greatest need who <u>were starved to death</u> by the DWP, whose excessive use of sanctions is both unethical and immoral.

There is also the identified <u>'cultural problems within the DWP extend far beyond the assessment system',</u> which the DWP continue to disregard.

Please be further advised that by using the PIP assessment for all claimants, you are using another assessment model that is fatally flawed and failed all academic scrutiny. So, this removal of the WCA to be replaced by a compulsory PIP assessment for those in greatest need does not bring any comfort. Furthermore, work coaches who have no clinical training are not competent to decide what, if any, work-related activities the chronically ill can or should undertake. Chronically ill claimants should be left alone as they are already very ill, can't recover, and endless worries about the DWP constant threat to remove their only income via a sanction is and remains totally unacceptable, unjustifiable and morally reprehensible.

Regardless of the stated 'ambition', the DWP do have a <u>tendency to disregard the influence</u> of one of the most discredited health insurance American corporate giants with UK social policy reforms since 1992 and, until you and Ministers are much better informed, nothing can or will improve for those in greatest need in the UK. Regardless of pending primary legislation, you will not gain the trust of the chronically ill and disabled community until the DWP stops punishing them for being too ill to work.

And let's not overlook the fact that a third of the UK adult population do not use the internet, so making benefit applications digital by default guarantees an impossible situation for many of those in greatest need, as identified in the (attached) briefing relating to UC:

"UC claimants describe the digital claims process as complicated, disorientating, impersonal, hostile and demeaning. Claimants reported being pushed into debt, rent arrears, housing insecurity, and food and fuel poverty through UC. System failures, indifference and delays in receipt of UC exacerbated the difficulties of managing on a low income. The threat of punitive sanctions for failing to meet the enhanced conditionality requirements under UC added to claimant's vulnerabilities and distress. Staff

reported concerns for claimants and additional pressures on health services, local government and voluntary and community sector organisations as a result of UC. The findings add considerable detail to emerging evidence of deliterious effects of UC on vulnerable claimants' mental health, increasing the risk of poverty, hardship, destitution and suicidality." BMJ p5

I therefore strongly suggest that you become much better informed, resist the temptation to attempt to justify the unjustifiable whilst overlooking the fact that all evidence of a moral compass disappeared from the DWP a long time ago.

Thank you for your time, but please do not contact me again.

My correspondence is with Ministers and senior executives, not civil servants. Sooner or later, they do respond.

Sincerely

Mo Stewart

Fellow, Centre for Welfare Reform Research Lead, Preventable Harm Project



"Our lives begin to end the day we become silent about things that matter." Martin Luther-King Jr

Author of <u>'Cash Not Care: the planned demolition of the UK welfare state'</u> Creator of <u>The Preventable Harm Project</u>

Consequences <u>Influences and Consequences</u>