Traps, gaps and benefits distress

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Overview

- Background to study
- Rationale and design of study
- Findings: *psychosocial impacts of welfare reform*
- Personal Reflections on Benefit Distress
- Policy and political action
- Conscious Cruelty by Trish Stoll
Part of wider H2020 funded project RE-InVEST http://www.re-invest.eu/

Involves 19 organisations across 12 European countries (ENG, SCO, IE, NL, BE, DE, AT, FR, IT, PT, LV, RO)

ENG Team at Liverpool Hope has conducted 3 connected studies related to MH:

- Impact of Austerity (Greener and Lavalette, 2016)
- Welfare Reform (Moth and Lavalette, 2017)
- Liberalisation (marketisation) of MH Services (Moth, Neary & Lavalette, 2018)
Background to study

- Shift in UK welfare policy from Keynesian to neoliberal principles since 1980s

- In UK, focus on ‘activation’ comprised of two interacting elements:
  
  A. Reform of social protection (i.e. benefits)
  
  B. Increased emphasis on active labour market policies (ALMPs) i.e. ‘welfare to work’
A. Reform of social protection

Quantitative...

- Reduction in UK government working age welfare spending > 2010-16 total loss to claimants £14.5bn (Beatty & Fothergill, 2018)

And qualitative shifts in welfare reform:

- Increasing welfare conditionality:
  - Behavioural conduct (Dwyer & Wright, 2014); and psychological conditionality - ‘psychocompulsion’ (Friedli & Stearn, 2015)

- Reductions in eligibility for and levels of social security support (‘Gaps’)...
  - Redrawn disability category (Roulstone, 2015)
    - DLA > PIP intention to reduce claimants by 25%; PIP claimants with MH needs 2.5 more likely than those with other conditions to be ineligible (Pybus et al, 2019)
    - Invalidation of mental distress (not ‘really disabled’ - George Freeman re PIP/High Court discrimination ‘mobility’ ruling 2018)
B. Emphasis on ‘welfare to work’ (ALMPs)

- Work Programme (WP) employment services targeting either Jobseeker’s Allowance (JSA) or Employment and Support Allowance (ESA) claimants.

- Key aim: to reduce disability employment gap (only 51% disabled vs 81% non-disabled adults employed in 2018)

- Transition to Work and Health Programme (WHP) since 2017 - ‘work as a health outcome’ (also a focus within FYFVMH - alignment of mental health with welfare policy)
Welfare reform having particularly detrimental impacts on claimants with mental health needs

- WCA: Additional 590 suicides, 279k extra cases of self-reported MH problems, additional 725k antidepressants px (epidemiological study by Barr et al, 2016)

Therefore we selected two social protection measures frequently claimed by people experiencing mental distress:

- ESA - out of work/income replacement benefit intro’d 2008 (51% of ESA claimants primary condition > MH)
  - Assessed via Work Capability Assessment (WCA) [WCA retained in Universal Credit - planned ESA > UC migration 2019-2023]

- PIP - non-means-tested extra-costs benefit intro’d 2013 (35% PIP claimants primary condition > MH)
Methodology

Research questions

- What has been the impact on claimants with mental health needs of the introduction of two ‘activating’ welfare benefit reforms: ESA and PIP?
  - Are these benefits accessible to and adequate in meeting the needs of this claimant group?
  - Do these benefit reforms enhance the human rights and capabilities of claimants with mental health needs?

Methods/Sample

- Exploratory study of every-day experiences of people experiencing mental distress engaged with welfare system
- Qualitative data gathered through 4 group interviews and 9 individual in-depth semi-structured interviews
- Sample (purposive; convenience; snowball)
  - 19 claimants: 18 ESA; 1 JSA and 16 PIP/DLA (10 female, 9 male)
  - 6 welfare rights advocates (3 female, 3 male)
- Thematic analysis
Findings: psychosocial impacts of welfare reform

1) Retraumatisation
2) Invalidation of testimony
3) Entrapment
4) Instilling fear
5) Shaming and blaming
1) Retraumatisation

Evidence that questions regarding topics such as suicide attempts routinely posed in WCAs (Pring, 2017)

When I was, was it early 20 or something, I made a suicide attempt and I had to go in quite a lot of detail about that [...] I feel really sick after that, really sick.

(Matt* claimant)

*All names are pseudonyms
1) Retraumatisation

For Louise (claimant), who had accompanied Matt, this mode of examination:

[C]aused [Matt] to relive some of the worst experiences of his life [...] it’s as if they were almost trying to really uncover the most appalling events of your life and see if they could push some buttons, it was shocking, I thought. [...] It felt like a personal attack, didn’t it, but done with a smile.
2) Invalidation of testimony

Frequent questioning of veracity of participants’ testimony regarding their mental health and supporting evidence from professionals:

We [DWP] haven’t got a letter signed from the doctor, you haven’t got this evidence, … so… we don’t believe you

(Gill, Welfare rights advocate)
2) Invalidation of testimony

Impact in relation to childhood trauma/abuse:

That’s one of the points over adults with mental health problems who’ve been sexually abused as kids [...] [I] say, ‘look, we will put this in [the form], but you might get refused, that doesn’t mean they don’t believe you, I do and it’s the important thing, that I believe you and if need be, we’ll go to tribunal and we can prove it there’. But that actual decision where they [DWP] said no, as much as you try to reassure them [...] that should not be happening to people who have been abused as children, because it compounds it, doesn’t it, makes it worse.

(Jack, welfare rights advocate)
3) Entrapment

**Sense of system as constructed to entrap claimants:**

[WCA is] designed to trip up [applicants]  
(Paul, claimant)

- Perception that DWP view capacity to travel distances to assessments as indicating capacity to work:

  [I]f you go over to Eastville, I know someone [claimant] who went over there, I mean, obviously she went to Eastville, [the DWP] said, ‘thank you very much, you're not getting it’ [benefit]  
(Dave, advocate)
4) Instilling fear

‘Fear of the brown envelope’ & sanctions:

People who are starting to feel okay, you know, starting to look forward and then, bump, the brown envelope lands [...] and next minute it’s back down

(Dave, advocate)
5) Shaming and blaming

Shaming

- Many references to impact of benefits stigma

In my recovery, I've never felt so ashamed, so excluded and so out of sync with how I've been treated by the benefits system and my shame and the sense is that you're not worthy predominantly comes from how we access our benefits systems [...] the system that’s supposed to be helping us to feel less ashamed and more included is excluding us and knocking us back to miles gone back to centuries ago, like. I was thinking it’s a bit like Charles Dickens times, isn’t it, worse, you know, food banks and everything

(Starr, claimant)
5) Shaming and blaming

**Blaming (ALMPs)**

Paul (claimant) offered a number of courses through his Job Centre on “how to motivate yourself, how to be positive”. He was however highly critical of these, describing them as “patronizing” and explaining:

> [M]y own perception of it was as well, you're at fault for being unemployed, you're at fault for being ill, you have to change the way you are, you have to be more positive. It’s like this nudge fairy that, well, you're at fault, you need to correct yourself, which doesn’t seem right. No matter what the circumstances are of how I've come to this, if they're of no fault of my own, then how can I change it?

- Louise (claimant) described such courses as: “blame workshops”
Outcomes: Destitution

Food poverty linked to benefit rejections, delays and sanctions was a common theme amongst participants.

*It’s surprising what you can survive [on], I mean, you can go without for a long time [...] I know what it’s like to go without food for three, four days.*

(Matt, MH Service User)
Outcomes: ‘Benefits distress’

Interaction of these processes and experiences perceived as *exacerbating* or *generating* mental distress:

- Matt (claimant): demands on claimants are escalated:
  
  
  `[T]o such a degree that it’s, I mean, people who don’t suffer from depression find it exasperating, but people who just find it so difficult to cope with day to day, things like that, it’s simply impossible`

- Gill (advocate):
  
  
  `[P]eople who didn’t have a mental health condition to start with as well, I think […] The way it goes on, there’s a lot of people who’ve ended up becoming ill, just going through it [benefits claim].`
‘Benefits distress’

I know a few people have took their life because of the impacts [of benefit reforms] and I’ve been to their funerals and that’s heart breaking, that you’ve lost friends. They’re already poorly [mental health], but with the extra added on debt or bills or threat of homelessness or losing your dole [...] it’s just cruel really [...] I do think it’s wrong to do that to people who are already vulnerable and hurting and struggling anyway.

(Starr, claimant)
Mechanisms: Gaps, traps and double binds

- **Gaps** in coverage (redrawn disability category)
- **Traps**: Respondents’ describe conflicting messages in the system
  - Some take form of ‘double binds’ or contradictory injunctions from powerful others
    - The intrusive questioning combined with a smile in Matt’s WCA
    - Claimant required to attend neighbouring town for WCA, but presentation there perceived by advocate as potentially undermining claim
- **These processes generate ontological insecurity** for claimants
  - Existential disruptions to person’s social and material environment which undermine secure sense of self, identity and place in the world (Giddens 1990, Laing 1965)
  - This constitutes ‘state-corporate harm’ by the punitive state and its corporate proxies (Laslett, 2010; Hart, Greener & Moth, 2019)
Personal Reflections on Benefit Distress

1. Why put myself through this?
2. Welcome back to the Victorian era
3. No paid employment = no worth
4. I Daniel Blake and CONSCIOUS CRUELTY
5. Benefits Street and the 0.7%
6. My PIP journey
Mental health workers and political action

**Policy**

- Concerns in context of increasing integration of MH and welfare policy (FYFV-MH > ‘employment as a health outcome’) - ‘work cure’
- Mental distress as industrial injury of C21 (‘Back-to-work workers’)
- Need to value social activities beyond paid work e.g. caring, volunteering

**Practice**

- Acknowledge harmful impacts of welfare reform and ‘benefits distress’ in services/teams & with service users
- Offer support with benefits issues (supporting letters, advocacy, attend assessments or referrals to advocacy/supporters to attend assessments).
- RiTB: Need for ‘double speak’ when supporting service users (deficits/counter-narrative) (Watts, 2018)

**Politics**

- Raise with trade unions/BPS/other professional networks
- Lobby MPs
- Get involved in political campaigning alongside Disabled People Against Cuts (DPAC)/MH Resistance Network (MHRN)/Recovery in the Bin/Social Work Action Network (SWAN)
CONSCIOUS CRUELTY by Patricia Stoll

Such terror I can't explain
Equilibrium I can't regain
I fear I'll never be the same
I KNOW THE SYSTEM IS TO BLAME.

How can the arrival of an envelope produce such an extreme reaction?
It induces so much fear in me I am unable to take any action
Other than to sit and cry, a blubbering wreck with letter in hand
How can I be reduced to this? I find it hard to understand.
The suicidality sneaks back and I start questioning my worth
My dark thoughts tell me I am useless and have no purpose on this earth.

The shame is so intense my mental wellbeing is crumbling
Through this maze of obfuscation I am teetering and fumbling
It's so hard to ask for help and admit my vulnerability
Foolish pride makes asking for it an anathema to me
The 39 page form too difficult for my stressed brain to attempt
This failure on my part fills me with self loathing and contempt.

The psychiatrist and psychologist write me letters to support my claim
To help in my quest for benefits their only motivation and aim
Yet when I read their words I was retraumatised and memories made raw
Which made my hatred of myself consume me even more.

The actual assessment reduced me to floods of tears
And proved to be confirmation of all my worries and fears
I was a professional, a teacher, a valued member of society
But now I'm a benefit claimant and a blight on the economy
The process made me feel depressed, stressed, ashamed and small
It's unconscionable that vulnerable people are put through this torture at all.
References


