

Disability benefits under threat in UK

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Under the guise of getting people back into employment by calculating their “fitness to work”, the Conservative/Liberal-Democrat coalition is reassessing disabled recipients of benefits in an attempt to slash the social security budget.

Over the next three years, one-and-a-half million people will be put through these tests. To carry out this attack, they have engaged Atos Healthcare, a branch of a huge multinational conglomerate on a £500 million contract.

Atos uses its IT skills to train doctors to judge claimants’ disabilities, using a Lima tick box computer programme that condenses complex medical conditions and their effects on daily life into simple yes-or-no answers.

To be found too unwell or incapacitated to work, individuals need to achieve 15 points during the 45-minute assessment. If a person cannot pick up a £1 coin with either hand, for example, he or she is given 15 points. If one cannot learn or understand how to complete a simple task, the individual is likewise given 15 points. If strangers have difficulty understanding a person’s speech, only 6 points are given.

Under the old system, questions would have been asked, and a statement would be written by the assessor that the claimant would be asked to sign after hearing it read aloud. Now, questions are asked, but not relating to their illnesses or disabilities. Enquiries as to whether a claimant watches TV programmes such as the popular soap *Eastenders* can give a tick that the individual can concentrate for 30 minutes or sit still for that length of time.

A survey by Compass, which used official Department for Work and Pensions (DWP) statistics, says 300,000 claimants won their tribunals when they appealed. This means that many are left in limbo without their disability payments while these appeals are heard. If the required points are not gained, £25 a

week is lost from income. Appeals tribunals cost an estimated £50 million.

Numerous anecdotes illustrate the harshness with which claimants are treated. One had her legs deliberately moved by an assessor, even though she reported that it would cause her intense pain. Others with terminal lung cancer and brain tumours have been deemed fit to work. A youth with learning disabilities who left home two hours early and asked numerous passersby the way was congratulated on finding the centre by having his benefit stopped as he was said to be capable of getting to work.

On its web site, Atos lists the assessment centres and the facilities available. Many are not wheelchair-accessible. For example, the Barnstable office is on the first floor with no lift. It regularly overbooks appointments by 20 percent as policy, meaning a long wait for people without any heed of the facilities needed. Parking spaces are another problem. A trawl through the list shows many instances where basic facilities that high street shops must have are not available. Eighteen centres are more than a five-minute walk from public transport; present Disabled Living Allowance benefits hinge on whether a claimant can walk 50 metres.

Advocates pointing out these problems have been targeted for attack. A Carerwatch forum’s web site was forced to close after a legal threat from Atos for alleged libel. The forum’s American host was not prepared to risk a legal action with the multinational giant to keep the site online.

Carerwatch offers carers news of upcoming demonstrations and on what government actions mean to the disabled and sick. At first, they were not told which post was libelous. It turned out to be one that linked to another site. After an outcry, during which the forum was hosted elsewhere, Atos withdrew its threat if the post was deleted. This was done, and the site is up

and running again. This is reportedly the third web site threatened in this way. An Atos spokesman said in future it would take its concerns directly to the web site concerned.

This year, disabled people and their campaigning groups have occupied Atos offices in Glasgow and Cambridge and picketed the corporate offices in London. They have also targeted recruitment days for doctors to join the assessment teams. In an article for the *British Medical Journal*, Dr. Margaret McCartney detailed her experience after she attended an Atos recruitment seminar. She concluded that she did not feel it was possible for a doctor to work as an Atos assessor “and simultaneously adhere to their professional responsibility to place the needs of the patient first at all times.”

A reply to the article stated that this was not an instance where the usual “duty of care” had to be extended to the patient. The company’s attitude has forced the General Medical Council to issue guidance that these assessments remain “a doctor-patient interaction and that doctors have to make the interests of their patients their first concern at all times” and to insist on claimants being patients first and foremost.

One Atos employee posted on her Facebook page that she had to spend more time “with the down and outs” and wished for the weekend to come so she didn’t have to spend any more time in “this god forsaken place”.

Atos assessors are not required to be familiar with disability and only receive eight days’ training for the job. Many are doctors, but some are physiotherapists and nurses.

Although Atos is better known for its health care technology rather than its expertise in primary health care, this has not stopped it gaining a 10-year contract to run a National Health Service General Practitioner surgery, Saint Paul’s Way in Tower Hamlets—one of the poorest districts of London. In 2007, it was handed the contract in the face of fierce opposition from concerned doctors, who passed a motion of no confidence in Tower Hamlets Primary Care Trust because of the decision.

Barely three years on, the company has walked away from the contract, and the local doctors whose knowledge was overlooked previously have been handed temporary control of the surgery.

Tower Hamlets has the third highest level of multiple

deprivation in England, large numbers of children in families on benefits, the highest rate of overcrowding in London and a 49 percent non-white population. Anna Livingstone, a GP who opposed Atos’s takeover, stated, “St Paul’s Way is a very cautionary tale. There’s an unavoidable contradiction between running something to maximise profit as opposed to running a service designed to meet the needs of patients.”

The government’s strategy inviting “any willing provider” to tender for services puts people’s lives at risk and reduces the most vulnerable in Britain to pawns in a bidding war. Clare Gerada, chair of the Royal College of GPs, says the saga raises troubling questions about how health care now operates. She asked, “What will the failure regime be for private providers? What will happen if such providers go bankrupt and can’t deliver services they promised?”



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