

UK: More deaths of those ruled “fit to work”

Paul Bond
7 February 2017

Lawrence Bond, a 56-year-old man deemed “fit to work” by the Department of Work and Pensions (DWP), collapsed and died in North London after attending a Jobcentre on January 12.

According to his sister, Iris Green, Bond, who was appealing the cut to his benefits, had gone to the Kentish Town Jobcentre in obvious “physical distress.” After the visit, he suffered a fatal heart attack as he boarded a bus.

Bond had suffered from long-term mobility and breathing difficulties associated with being overweight. In regular employment from the age of 16, he had lost his last long-term job two years ago.

Green told the *Camden New Journal* her brother had felt reasonably secure in that job fixing computers, photocopiers and cash tills, although his diet was poor. But when he lost it, his weight and unfitness prevented him from getting work.

Green said she thought he had “suffered from anxiety all his life.” This was not an issue while he was in work, but losing his last job had an impact on his health: “His anxiety was getting worse as he could not pay bills and was afraid to leave home to go to the shops.”

Bond’s GP had made two referrals for mental health services that had gone astray, creating further stress.

Bond was claiming Employment and Support Allowance (ESA) introduced by the then Labour government in 2008. The Work Capability Assessment (WCA), brought in at the same time, is a computer-generated test to place a claimant into one of three groups—fit for work, fit for work at some point in the future (and thus on reduced rates of ESA) or supported.

Initially intended to reduce the number of new benefit claimants, the WCA was subsequently applied to reassess and reduce existing claimants. The tests are administered by US-based Maximus, which took over testing from the French firm Atos Healthcare in March

2015. Each test costs the government £190.

In July 2015, a second WCA decided that Bond was “fit to work.” His first appeal against the decision was rejected, and he was awaiting the outcome of his second appeal. In the meantime, he had to attend the jobcentre to sign on.

The tragedy of Lawrence Bond was that it was not a personal crisis. Iris Green said her brother “functioned very well when he had a job, and money, and a van and functioned as a productive tax-paying member of society, but he was frustrated that, although he was an intelligent person, he could not seem to get his needs met.”

“The main thing,” she said, “is that they [the DWP] have the means to make sure this doesn’t happen again.”

That is not the DWP’s concern. As the *World Socialist Web Site* noted at the time of Labour’s 2008 Welfare Reform Act, which introduced the ESA and the WCA, “A critical element in slashing access to benefits ... is to facilitate the privatisation of both welfare and employment service. Over the past decade, the private sector has been utilised to step up attacks on the welfare state and to profit from providing services.”

This has intensified. As a National Audit Office study last year revealed, the government is spending more on assessing whether people are fit to work than it will save in benefit reductions. The dismantling of any social provision is the priority.

The government’s measures are part of a brutal class war against the working class, targeting the most vulnerable first.

Just after Christmas, for example, it was revealed that a Birkenhead Jobcentre manager had written to a local GP announcing that the ESA of a patient, James Harrison, had been cut following a WCA.

The letter stated, “We have decided that your patient is capable of work from and including 10 January 2016.

“This means that you do not have to give your patient any more medical certificates for Employment and Support Allowance purposes unless they appeal against this decision.

“But you may need to again if their condition worsens significantly or they have a new medical condition.”

Like Lawrence Bond, Harrison had worked for 30 years before the community centre where he worked was closed down. His daughter Abbie said he “had worked all his life and wasn’t the kind of guy who knew anything about benefits,” but his health had deteriorated badly. He had a serious lung condition and had developed a hernia, and “there just wasn’t any chance that he could do a job.” Like Bond, he developed depression and anxiety because of his situation.

Throughout this period, Harrison required medical support and had to visit his doctor regularly. Abbie Harrison describes the Jobcentre letter, which she found when she asked to see her father’s medical records, as “basically telling his doctor not to give my dad sick notes for the very serious health problems that he had been suffering from.”

In November, 10 months after being found “fit to work,” 55-year old James Harrison died of a heart attack.

Medical concerns are not the DWP’s priority. “I do feel really sorry for the people who dealt with [Lawrence],” Iris Green said. “They face an awful dilemma of being the people responsible for collecting signatures for people signing on as fit for work, even when they can see people are very sick.

“I realise that the reception staff have no clinical knowledge or responsibility for doing it, but the rules need to be changed so that they have the right and discretion when they see a human being turning up in physical distress to flag the situation up and ask for urgent re-assessment.”

Abbie Harrison made a similar point: “Dad was not well. Who knows, maybe he could have improved if he had been given some support, rather than subjected to suspicion and scepticism at every turn.

“I think it is a disgrace that managers at the Jobcentre who know nothing about medicine should be interfering in any way in the relationship between a doctor and a patient.

“When the Jobcentre starts to get involved in telling doctors about the health of their patients that is a really slippery slope to be on.”

The DWP’s responses are bland defences of these policies. After Lawrence Bond’s death, a DWP spokesman claimed, “The local Jobcentre had been supporting [him]”. ESA decisions, he said “are made following a thorough assessment and after considering all of the evidence, including that provided by a claimant’s doctor or other medical professionals. Anyone who disagrees with a decision can ask for it to be reconsidered, and if they still disagree they can appeal.”

That was exactly the situation Bond was in when he died.

The deaths of Bond and Harrison are added to a list of sick or disabled people who have died after losing their entitlement to sickness benefit and being declared fit for work. A Freedom of Information request in 2015 forced the disclosure that 2,380 (and possibly nearer 4,010) had died between 2011 and 2014. A further 7,200 claimants died after being awarded ESA and being placed in the separate work-related activity group. This category identifies claimants who are unfit to work but may be able to return to work in the future.



To contact the WSWS and the
Socialist Equality Party visit:

wsws.org/contact