

Shaping Future Support: The Health and Disability Green Paper ¹

This is a consultation Green Paper addressing specific areas of social policy in the guise of offering support towards 'independent lives' (sic). 'This is NOT the same idea as Independent Living defined by Disabled people. **The tone of the paper is clear from the beginning:**

“My priority as Minister for Disabled People is to make sure that disabled people and people with health conditions can lead the most independent lives possible and reach their full potential. As this Government’s 2019 manifesto set out, we must empower and support disabled people and be an ally. The benefits system is one important lever we have to achieve this. Shaping Future Support: The Health and Disability Green Paper asks for your views on how the Government can help people to live more independently, including support to start, stay and succeed in work and ways we can improve the experience people have of the benefits system.”

The decision to collapse into a single category disabled people and people with health conditions is highly problematic and goes against the position taken within *Improving Life Chances for Disabled People*. Whilst both groups face certain social restrictions in common, the nature of their overall experiences are very different. The decision to do this is ideological and political. We will return to this in due course.

The focus of this paper is clear as well:

“This Green Paper, the National Disability Strategy and the Health is Everyone’s Business consultation response each form part of our holistic approach to supporting disabled people and people with health conditions to live independent lives and start, stay and succeed in employment.”

The Right to work has always been part of the demand for social inclusion, but at the same time recognising alternative lifestyles not negatively judged by normative values. The Neoliberal agenda remain firmly in place: “.... Health is Everyone’s Business consultation is being published with the Department of Health and Social Care. This will set about improving the support provided to employers and employees, to

¹ <https://www.gov.uk/government/consultations/shaping-future-support-the-health-and-disability-green-paper/shaping-future-support-the-health-and-disability-green-paper#executive-summary> x

reduce the number of people we see leaving employment because of a disability or health condition.” Unfortunately, we have been down this road before where ‘medicalisation’ of our bodies becomes a disciplinary tool. The government’s approach is anything other than holistic; it is limited in scope. “Throughout this Green Paper, we are guided by three priorities. These are:

- Enabling independent living;
- Improving employment outcomes; and
- Improving the experience of people using our services.”

The paper does NOT provide much in the way of enabling independent living rather it is about keeping people in the labour market. The Green Paper considers how to address some of the short- and medium-term issues in health and disability benefits. “These include:

- Improving signposting to wider services at an early stage. In particular, we want to improve signposting to health services, so that people are better able to access treatment and support;
- Testing advocacy for people who struggle the most to access and use the benefits system;
- Continuing to improve our employment support so that more people can start, stay and succeed in work. This is particularly important given the challenges we are seeing in the wider economy as a result of the coronavirus pandemic. This work includes exploring greater join-up between employment support and health services; and
- Improving the support for, and expectations of, employers, to help prevent people with a health condition or disability falling out of work;
- Exploring how to conduct assessments in different ways. This includes through the use of telephone and video assessments;
- Continuing to reduce repeat assessments where a person’s health is unlikely to change;
- Continuing to increase the quality and accuracy of the decisions we make on benefit entitlement;
- Exploring further improvements to our mandatory reconsideration and appeal processes; and

- Improving the information we use to make decisions. This includes securing better medical evidence to increase the speed and likelihood of people getting the correct level of support at the outset.”

Remember the attack on Invalidity Benefits? Here we go again, but this time couched within ‘positive language’. What worries the Government is:

“Currently one in three people aged 16-64 in the UK has a long-term health condition and one in five people aged 16-64 in the UK is disabled. The number of working-age people reporting a disability increased by 20% between 2013 and 2019 and is forecast to continue to grow¹⁹. The number of older working-age people has increased and, typically, people’s health declines with age.

However, changes in the age of the working-age population do not fully explain the increase in the number of people claiming health and disability benefits. There are likely to be many factors, including the increase in the proportion of people reporting a mental health condition. In 2020 50% of working-age people receiving ESA and 41% of working-age people receiving PIP/DLA had a mental health condition as their main condition.”

What adds insult to injury is this:

“At present, we enable independent living mainly through the payment of benefits and the provision of employment support. People who receive higher-rate PIP or DLA mobility payments can also swap their payments to access mobility support through the independent Motability Scheme.

At Green Paper events people said that we could do more to make sure disabled people have equal access to the same opportunities as non-disabled people. People asked us to provide better and broader support to help meet the specific needs of disabled people and people with health conditions. This includes help to overcome obstacles to independent living, such as difficulties in accessing healthcare, issues with transport and a lack of suitable local jobs. People told us that government services need to be more accessible for disabled people, so that people can get the support they need. People said that we need to work harder to provide reasonable adjustments to the services provided by this Department. The support we offer could also be better joined-up, both internally (between different benefits) and externally (with services

offered by other government departments and agencies, the NHS, local authorities and charities).”

Over the last thirty to forty years, successive governments have employed disablist narratives to recycle this pathetic meaningless garbage which blames our impairments rather than the disablement created by the nature of society. New bottles but filled with same old shite. This shows how twisted these people are:

“Our first priority is to support disabled people and people with health conditions to live independently and achieve their potential. This means that people should be provided with the right amount of financial support, given the opportunity to make their own choices, have equal access to services, be supported to access healthcare and treatment, and be able to participate in society on the same basis as other people. Improving employment outcomes”

We could go on and on, but let us focus on a few issues.

Personal Independent Payment (PIP)

“Unlike UC and ESA, PIP aims to help people with the extra costs of a disability or long-term health condition. PIP is paid regardless of income or savings. The amount paid depends on the impact of a disability or health condition.”

This proves the Tories work against the social model of disability and that Lord Freud and Esther McVey LIED to Parliament when PIP was introduced. First, they claimed the assessment process was using social model, then changed it to the bio-psycho-social one – truth is seen above. The body fascism of the Benefit System remains oppressively in place. Until the oppressive definition of disability in legislation is removed, institutionalised disablism will continue. A Rights Now Briefing Paper said this in 1994.

Employment

“Our second priority is to reduce the difficulties disabled people and people with health conditions can still face in starting, staying and succeeding in employment. We want to offer better and more tailored employment support, whether people are in or out of work. We want to help prevent disabled people and people with health conditions from falling out of employment. We want to work with employers to improve

employment outcomes wherever people may be able to work, now or in the future.”

Same failed solutions recycled since 1980s; without addressing the nature of work and labour market nothing will fundamentally change; Equality Act is ignored.

A disturbing issue is how they view advocacy:

How advocacy support might look

“We suggest that advocacy support could be based on these principles:

- Advocacy could help people find information and provide practical support (such as filling in forms) but would also help people to have their voice heard on matters affecting them.
- This support would not be available for everyone; it would only be offered to the people who need it most. It could be for people who do not already have the support of charities and other organisations. Evidence suggests that advocacy could benefit disabled people in particular⁵⁵ but it would not need to be limited to disabled people. It could also be offered to other people who are not able to find their way through the benefits system without extra support.
- It should be delivered in a way that ensures it offers advice that people can trust.
- Advocacy should not duplicate existing support but fill gaps in provision. It should complement the help other organisations provide.
- It should be flexible enough to support people whenever they need help, and not just at the beginning of their claim. This will help meet the needs of vulnerable claimants.
- Advocacy should aim to help people to achieve certain outcomes rather than being openended, so that it helps people to become independent from the service⁵⁶.
- Advocacy could do more than just help people to access and use the benefits system. It could also provide support to address wider issues in people’s lives (such as access to health and care services, and housing)

which we know can affect people's ability to manage their health condition or disability.

We want to hear from people who could benefit from advocacy and their representatives to help us develop this test. We are keen to hear views on the proposed test.”

We support independent advocacy, but this picture painted here does not sit well with how support is given.

Bob Williams-Findlay

22nd July 2021

A taste of the Green Paper. To summarise, it is laid out thus:

“The three priorities of enabling independent living, improving employment outcomes and improving the experience of people using our services will be considered in each of the following chapters:

- In Chapter 1 we will explore ways to provide more support to help meet the needs of disabled people and people with health conditions and allow them to more easily access and use benefits and services.
- In Chapter 2 we will consider how to continue to improve employment support for disabled people and people with health conditions, and how to encourage people to take up that support, where possible.
- In Chapter 3 we will look at short-term improvements to our current services such as improvements to assessments and decision making, to improve the experience of disabled people.
- In Chapter 4 we will describe how we have been working with disabled people and people with health conditions, medical professionals, charities and academics to consider changes to future assessments, and explore alternative approaches.
- In Chapter 5 we will explore changes that could be made to the structure of the main benefits claimed by working-age disabled people and people with health conditions.

In each chapter, we want to hear your views on the areas for consultation. This Government and this Department have bold ambitions for disabled people and people with health conditions. This Green Paper is a crucial part of the action we are taking under the National Disability Strategy.”

<https://www.gov.uk/government/consultations/shaping-future-support-the-health-and-disability-green-paper/shaping-future-support-the-health-and-disability-green-paper#executive-summary> (section 69)