

# Mo Stewart

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Phone:

Email:

Date: 5th March 2018

[https://www.researchgate.net/profile/Mo\\_Stewart/publications](https://www.researchgate.net/profile/Mo_Stewart/publications)  
<https://blackwells.co.uk/bookshop/product/Cash-Not-Care-by-Mo-Stewart/9781785077838>

Mr John Herron  
Team Leader  
Ministerial Correspondence Team  
Department for Work & Pensions  
Caxton House, Tothill Street  
London SW1H 9DA

Ref: TO/18/00361

Dear Mr Herron

## **Re: DWP Correspondence**

I acknowledge receipt of your letter of 16<sup>th</sup> February 2018 which you claim was a response to my detailed letters of 18<sup>th</sup> December 2017 to Sarah Newton MP<sup>1</sup>, the present Minister for Disabled People, Health and Work and to the previous Secretary of State for Work and Pensions, David Gauke MP<sup>2</sup>, as written on 8<sup>th</sup> January 2018. Please note that both those letters have been published online and your recent reply will also be published, to offer public access to this latest attempt by the Department for Work and Pensions (DWP) to justify the unjustifiable. As this response is an open letter, it will also be published to permit public access.

I note with interest that your five page meaningless letter overlooked the fact that I am acknowledged as the lead independent researcher in the United Kingdom (UK) regarding the American corporate influence with the adoption of a discredited model of assessment for the Work Capability Assessment (WCA), as used by the DWP to restrict access to the Employment and Support Allowance (ESA) long-term disability benefit. My research identified the American corporate influence since 1992 with the planned future UK social policy reforms<sup>3</sup> and the predictable deaths, despair and human consequences of using the dangerous and discredited DWP commissioned Waddell and Aylward biopsychosocial (BPS) assessment model for the WCA; which has failed all credibility checks and independent academic scrutiny<sup>3,4,5,6</sup>. Your total failure to acknowledge my expertise, when providing five pages of ideological rhetoric that is easily challenged and contradicted is not appreciated, and is a waste of my valuable time. In no way does your letter address my 'concerns' Mr Herron, that collated very detailed referenced evidence following eight years of research which you disregarded.

1 <http://www.centreforwelfarereform.org/news/letter-to-saabled-people/00352.html>

2 <https://blueannoyed.wordpress.com/2018/01/07/the-letter-david-gauke-will-not-be-expecting-and-wont-want-to-receive/>

3 <http://www.newgeneration-publishing.com/books/reference/cash-not-care-the-planned-demolition-of-the-uk-welfare-state-3/>

4 <http://pf7d7vi404s1dxh27mla5569.wpengine.netdna-cdn.com/files/library/ravetz-Green-Paper-IB-critique.pdf>

5 <https://www.disabilitynewsservice.com/ruthless-dwp-forced-through-wca-despite-knowing-of-harm/>

6 <http://journals.sagepub.com/doi/abs/10.1177/0261018316649120>

Furthermore, in your lengthy ideological rhetoric masquerading as a letter, you make a variety of unsubstantiated claims. The detailed references in my correspondence should demonstrate for you just how easy it is to challenge every word you write and every unsubstantiated claim you make on behalf of the DWP, so I suggest you stop making them as you have lost all credibility.

It seems that in your haste to respond to my letters you have failed to identify with the very detailed evidence referenced in them. This includes the fact that the DWP's own advisory body warned the DWP not to adopt the WCA due to the predicted negative impact on public mental health the WCA would create<sup>5</sup>, and the DWP routinely disregard all independent academic research not produced by the DWP, or by the right-wing think-tank 'Reform'<sup>7</sup>. This reluctance by the DWP to accept peer-reviewed, critically acclaimed academic excellence<sup>6</sup>, as routinely accepted by academics and academic journals throughout the world, challenges the DWP's motivations for the ongoing and unnecessary human suffering enforced by an application for the ESA. Do keep up Mr Herron...

“The Waddell-Aylward BPS [model] has remained largely unexamined within academic literature, although it has not escaped critique by disability activists (e.g. Jolly 2012, Berger 2014, Lostheskold 2012, Stewart 2013). In this paper we build on these political challenges with an academic analysis of the model and the evidence used to justify it.

“We outline the chief features of the Waddell-Aylward BPS[model] and argue that, contrary to Lord Freud's comments above, there is no coherent theory or evidence behind this model. We have carefully reviewed claims in Waddell and Aylward's publications; compared these with the accepted scientific literature; and checked their original sources, revealing a cavalier approach to scientific evidence. In conclusion, we will briefly outline the influence of the Waddell-Aylward BPS [model] on contemporary British social policy, and the consequent effects on disabled people”.

*Blaming the victim all over again: Waddell and Aylward's  
biopsychosocial (BPS) model of disability*<sup>6</sup>

Critical Social Policy Journal, Volume 37, Issue 1, May 2017

Tom Shakespeare, Nick Watson and O A Alghaib

For example, as previously identified in my detailed correspondence that the DWP Ministers are clearly incapable of responding to, the independent academic peer-reviewed research conducted by Professor Tom Shakespeare and colleagues exposed the Waddell and Aylward biopsychosocial (BPS) model of assessment, as adopted by the DWP for the WCA, as having “*no coherent theory or evidence behind this model*”<sup>6</sup> and the DWP commissioned research created by Waddell and Aylward<sup>8</sup> to justify the use of the BPS model by the DWP had no peer review prior to publication and has been totally discredited by all reviews since publication<sup>3,4,5,6</sup>. Mr Herron, the WCA is dangerous and bogus.

3 <http://www.newgeneration-publishing.com/books/reference/cash-not-care-the-planned-demolition-of-the-uk-welfare-state-3/>

4 <http://pf7d7vi404s1dxh27mla5569.wpengine.netdna-cdn.com/files/library/ravetz-Green-Paper-IB-critique.pdf>

5 <https://www.disabilitynewsservice.com/ruthless-dwp-forced-through-wca-despite-knowing-of-harm/>

6 <http://journals.sagepub.com/doi/abs/10.1177/0261018316649120>

7 <http://www.reform.uk/publication/working-welfare-a-radically-new-approach-to-sickness-and-disability-benefits>

8 <https://www.tsoshop.co.uk/bookstore.asp?FO=1279028&DI=607598>

I note with interest that your lengthy letter mentions that there have been five independent reviews of the WCA, yet fails to acknowledge that recommendations suggested by Professor Harrington and Dr Litchfield have yet to be fully adopted by the DWP. Furthermore, you seem to be suggesting that all is well, claiming that there are very few appeals (8%) when compared with the 2.6m ESA (post WCA) decisions made between April 2014 and June 2017. However, your selective use of evidence fails to acknowledge that many claimants are unable to move forward to appeal not least due to the “*scale of on-going welfare reform, removal of legal aid, reduced funding for welfare rights agencies, the winding up of relevant oversight bodies and recent reform of the appeals process*”<sup>9</sup>, as identified in the Executive Summary of the Decision Making and Mandatory Reconsideration study by the Social Security Advisory Committee<sup>9</sup>. These changes are all designed to limit access to justice, especially for chronically ill and disabled people whose only crime is that they are unfit for work, but the DWP doesn’t want to fund them when social policy is guided by corporate America<sup>3</sup>.

The constant DWP claim that successful appeals are due to claimants offering more evidence is not substantiated, with Tribunal Judges identifying the fact that the main difference is that Tribunals are prepared to listen to the claimants, and to actually believe them, unlike the DWP who presume that

“Britain’s most senior tribunal judge says most benefits cases that reach court are based on bad decisions where the Department for Work and Pensions has no case at all. Sir Earnest Ryder, senior president of tribunals, also said the quality of evidence provided by the DWP is so poor that it would be “wholly inadmissible” in any other court...

“Benefits assessments have been mired in controversy since being outsourced to private companies who are encouraged to cut claims. Ryder said the situation was putting people who had been wrongly assessed for benefits through unnecessary stress and wasting judges’ time...

“Brooke said one former benefits adviser at a Citizens Advice office that has now closed told him that he had succeeded in all dozens of appeals he had helped people with. He described the adviser as telling him: “This wasn’t because I was some sort of super advocate, but because the decision-making was so bad; medical evidence from the practitioners actually treating the client was usually ignored or marginalised, in favour of ‘assessments’ by a disability assessor, who was usually a nurse with no specialist knowledge of the client’s condition, but who had undertaken a short course on assessing disabilities and had examined the client for 30 minutes” ”.

*A senior judge has suggested charging the government for every “no-brainer” benefit case it loses in court*<sup>10</sup>.

BuzzFeed News  
Emily Duggan  
November 2017

<sup>3</sup> <http://www.newgeneration-publishing.com/books/reference/cash-not-care-the-planned-demolition-of-the-uk-welfare-state-3/>

<sup>9</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/538837/executive-summary-decision-making-and-mandatory-reconsideration-ssac-op18.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/538837/executive-summary-decision-making-and-mandatory-reconsideration-ssac-op18.pdf)

<sup>10</sup> [https://www.buzzfeed.com/emilydugan/most-dwp-benefits-cases-which-reach-court-are-based-on-bad?utm\\_term=.nyznzaDnZ#.atOr3PJra](https://www.buzzfeed.com/emilydugan/most-dwp-benefits-cases-which-reach-court-are-based-on-bad?utm_term=.nyznzaDnZ#.atOr3PJra)

every ESA claimant is making a bogus claim<sup>3</sup>, with many political claims that the WCA would resist the “malingerers”<sup>3</sup> when, at the time of the ESA introduction, bogus claims were only 0.5 per cent.

In October 2018 it will be ten years since the introduction of the ESA and the enforced fatally flawed WCA when using the dangerous<sup>5</sup> and totally discredited<sup>3,6,11</sup> Waddell and Aylward BPS model of assessment<sup>8,12</sup>. The fact that after ten years your letter still claims that the assessment “is looking at the impact of a disability or long-term health condition on an individual”, whilst admitting that the assessment “is not designed to diagnose or give a prognosis” but totally failing to comprehend that one is meaningless without the other, demonstrates your blind obedience to DWP rhetoric. You totally fail to accept detailed evidence that the WCA, by design, was always destined to cause preventable harm<sup>13</sup>, death, suicides and despair<sup>3,14</sup>, with NHS stats identifying that 50% of ESA claimants had attempted suicide in one given year<sup>15</sup>. That statistic alone should give you a very large clue that

“The flaws in the Employment and Support Allowance (ESA) system are so grave that simply “rebranding” the assessment used to determine eligibility for the ESA (the Work Capability Assessment (WCA) ) by appointing a new contractor will not solve the problems, says the Work and Pensions Committee in a report published today...

“One of the reasons for this is that the outcome of the ESA claims process are too simplistic. Claimants can be found to be “fit for work” and are then ineligible to claim ESA. Claimants found to have such limited functionality that they cannot undertake any work-related activity are placed in the Support Group, where they are subject to no work-related conditionality. This leaves a large and disparate middle group of claimants who are not yet fit for work, and may even have a deteriorating condition, but who are required nonetheless to undertake activity which is meant to help them find work in the longer term. These claimants are placed in the Work-related Activity Group (WRAG). The WRAG covers too wide a spectrum of claimants with very different prognoses and employment support needs...

“The changes we recommend include ensuring that, where possible, paper-based assessments are used to place people in the Support Group, rather than requiring them to go through the WCA, where their health condition or disability clearly has a severe impact on their capability to work. Unnecessary and too frequent reassessments should also be avoided”.

*Employment and Support Allowance needs fundamental redesign, say MPs*<sup>11</sup>

Commons Work and Pensions Select Committee

July 2014

3 <http://www.newgeneration-publishing.com/books/reference/cash-not-care-the-planned-demolition-of-the-uk-welfare-state-3/>

5 <https://www.disabilitynewsservice.com/ruthless-dwp-forced-through-wca-despite-knowing-of-harm/>

6 <http://journals.sagepub.com/doi/abs/10.1177/0261018316649120>

8 <https://www.tsoshop.co.uk/bookstore.asp?FO=1279028&DI=607598>

11 <http://www.parliament.uk/business/committees/committees-a-z/commons-select/work-and-pensions-committee/news/esa-wca-report-substantive/>

12 <http://www.webility.md/praxis/downloads/Models-of-Sickness-Disability-Waddell-and-Aylward-2010-2.pdf>

13 <https://www.crimeandjustice.org.uk/resources/preventable-harm-government-policy>

14 <http://jech.bmj.com/content/70/4/339>

15 <https://www.disabilitynewsservice.com/shocking-nhs-stats-show-nearly-half-esa-claimants-have-attempted-suicide/>

the ESA application process using the dangerous WCA is demonstrably and fatally flawed Mr Herron. The WCA doesn't need any more reforms, it needs to be removed for public health and safety as the WCA is causing ongoing identified preventable harm<sup>3,13</sup> to those who are often too ill to challenge yet another incorrect decision by the DWP.

At the time of the introduction of the ESA in October 2008 the incompetence of the DWP staff was costing the Department a great deal more than the minimal (0.5%) identified fraudulent claims and, now that the Senior President of Tribunals, Sir Earnest Ryder, has identified the ongoing incompetence of the Department in a recent speech to the Bar Council<sup>10</sup>, I strongly suggest you look closer to home before sending out any more five page meaningless letters when attempting to justify the unjustifiable preventable harm created by the DWP.

Psychological tyranny is a crime Mr Herron. Sending intimidating DWP letters to disabled people relentlessly threatening to remove funding is totally unacceptable. Despite a national charity, supported by the DWP, attempting to suggest that all is well<sup>16</sup> clearly all is not well, as often desperately ill people live in fear of the infamous brown envelope from the DWP<sup>17</sup> and suicides linked to the ESA application process using the fatally flawed WCA remain disturbingly high<sup>14</sup>.

“However, despite the increased moral panic over the amount and calibre of people receiving sickness benefit, evidence from the DWP (2011a) suggests that fraud levels are, in fact, very low. The latest available figures from the DWP state that the fraud rate for sickness benefit is just 0.5 percent, meaning that 99.5 per cent of claimants are not fraudulent, with figures for official error actually higher than the level of fraud at 1.7 per cent. By focusing on this issue as if it were one of the most important features of the system is completely unbalanced and thus manufactures an entirely flawed impression of sick and disabled people receiving benefits...

“Some respondents specifically mentioned their fear over receiving the official-looking brown envelope through their letterbox – a possible indicator of communication from the DWP... The fear of the brown envelope was also in Shaun’s narrative... Similar fear of the brown envelope was reported by de Wolfe (2012:9) in her study of people with myalgic encephalomyelitis (ME) who were receiving sickness benefits...

“Ministerial talk of ‘sick-note Britian’ has led to an abundance of media coverage excoriating benefit ‘scroungers’ (Briant *et al* 2011)”.

*Fear of brown envelope: exploring welfare reform with long-term sickness benefit recipients.*<sup>17</sup>

Social Policy and Administration Journal  
Volume 48, Issue 7, pp 782-798, December 2014  
Kayleigh Garthwaite

3 <http://www.newgeneration-publishing.com/books/reference/cash-not-care-the-planned-demolition-of-the-uk-welfare-state-3/>

10 [https://www.buzzfeed.com/emilydugan/most-dwp-benefits-cases-which-reach-court-are-based-on-bad?utm\\_term=.ddWPEYOpj#.rmkZ4dwZX](https://www.buzzfeed.com/emilydugan/most-dwp-benefits-cases-which-reach-court-are-based-on-bad?utm_term=.ddWPEYOpj#.rmkZ4dwZX)

13 <https://www.crimeandjustice.org.uk/resources/preventable-harm-government-policy>

14 <http://jech.bmj.com/content/70/4/339>

16 <http://www.centreforwelfarereform.org/news/serious-concnyty-for-all/00345.html>

17 <http://dro.dur.ac.uk/13629/1/13629.pdf>

The many claims in your letter have been demonstrated to be totally inaccurate by the most recent Work and Pensions Committee inquiry of the ESA and Personal Independence Payment (PIP) assessments. Your exaggerated claims that: “*We ensure our assessors who conduct work capability assessments attend extensive training in Mental Health matters, removing the need for a specifically trained psychologist to undertake assessment and we require professionals to have a broad training in disability analysis, as well as training in specific conditions, including multiple and complex conditions*” are demonstrably incorrect<sup>18</sup> and, whilst such DWP rhetoric may work for those less well educated, they fail completely when writing to the UK’s lead researcher on this subject<sup>19</sup>.

“Behaviour change is not difficult to achieve when there is full access to the national press and media and when unfounded political claims, which are guaranteed to be reported, can manipulate public opinion. Over time this eventually creates a behaviour change in society.

“This has come to pass in recent years within state-funded welfare in the UK. Welfare reform, together with austerity measures introduced by the Coalition government in 2010, and the preventable harm created by government knowingly **demonising claimants** of long-term disability benefit by suggesting widespread welfare benefit fraud, now sees welfare dependent chronically ill and profoundly disabled service users living in fear of the British government and the British press. In reality, the published government figures have demonstrated welfare fraud **at 0.7%**, not 75% as claimed in **the national press** to influence public opinion.

“The political manipulation of public opinion was at its most fierce during the Coalition government’s term in office, for five years from 2010. As the introduction of austerity was destined to cause distress, so it was necessary for the government to offer the public someone else to blame. The very easy targets of a quickly evolved **political smear campaign** were the long-term chronically ill and disabled people, who were totally dependent upon welfare funding for their financial survival.

“This relentless **political attack** against those in greatest need was created to suggest that the UK could no longer justify the welfare budget, that following the 2008 banking crisis suddenly the UK was required to ‘live within our means’, with the suggestion that the public sector deficit should be completely removed. In reality, this situation was planned many years ago to justify the eventual **removal of the welfare state** en route to the adoption of private healthcare insurance”.

*Demonising disabled people: public behaviour and attitudes during welfare reforms*<sup>19</sup>

Welfare Conditionality: Sanctions, Support and Behaviour Change  
The University of York  
Mo Stewart  
July 2017

<sup>18</sup><https://www.parliament.uk/business/committees/committees-a-z/commons-select/work-and-pensions-committee/news-parliament-2017/pip-esa-full-report-17-19/>

<sup>19</sup> <http://www.welfareconditionality.ac.uk/2017/07/demonising-disabled-people-public-behaviour-and-attitudes-during-welfare-reforms/>

As an example of the preventable harm that the ESA and PIP claims process has created, I'll offer you just one example by a very experienced palliative care social worker<sup>20</sup>, from the thousands of testimonies provided for the most recent Work and Pensions Committee ESA and PIP inquiry:

"I have worked as a palliative care social worker for 28 years with people facing life threatening and life limiting illnesses... and lately as a welfare rights worker in a charity which supports people aged 50 and over. I have extensive experience in supporting people to claim a wide range of benefits including both Personal Independence Payment and Employment and Support Allowance and in helping them appeal when they have been denied access to these benefits, following the assessment process, and in representing them at appeal when the mandatory reconsiderations have (almost inevitably) been refused. I have represented around 30 people at appeal tribunals when their ESA or PIP (or both) have been refused, and have so far been successful in every case in having the benefit allowed or restarted.

"I have long ceased feeling shocked and amazed when extremely sick and vulnerable people are denied access to these two benefits, and now regard it as almost automatic that they will have their benefits refused or cut off and have to appeal. In my experience people with mental health problems are probably the most likely to fail to access these benefits or have them stopped, but other groups, such as people with life limiting illnesses, can be just as likely to have this happen unless they qualify under the 'Special Rules' for terminally ill people and their benefit can be fast tracked.

"I find it extremely hard to come to any conclusion other than there is an ideological motive to ensure that people have great difficulty in accessing either of these two benefits, particularly after the Capability for Work Questionnaire was introduced in 2008 and the replacement of Disability Living Allowance with Personal Independence Payment started in 2013...

"The cruelty of expecting a life-long delivery driver who is disabled through osteoarthritis to seek office work, or a 60 year old woman who has had cancer to try and find work is absolutely incalculable. The fact is that most people I have met are desperate to return to work, and often fool themselves they can do so, only to find that it is impossible because they are so unwell or disabled. However, the attitude of the Department for Work and Pensions seems to be that people will avoid working at all costs and the assessment forms and decision making that results are designed to prove so...

"It is as though the claimant exists in a vacuum and if they do not meet the eligibility criteria of the assessment process then they cannot be ill or disabled despite any evidence to the contrary. People are consistently refused benefit, whatever the history of their illness or whatever their GP or other doctor has stated or confirmed about their illness...

"The level of suffering and despair this causes cannot be underestimated. I am sure it would be more than possible, and probably not that difficult, to devise a more appropriate and fairer way of determining eligibility to sickness and disability benefits... However, to do so would require a sea change in the culture and thinking of politicians and policy makers who hold the reigns of power".

Written evidence to W&P Committee: PEA0115<sup>20</sup>

Anonymous for professional reasons.

October 2017

<sup>20</sup><http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocument/work-and-pensions-committee/pip-and-esa-assessments/written/72187.pdf>

Having denied any influence of the insurance industry with the ongoing welfare reforms since 1992, as the DWP watched thousands die when ‘*killed by the State*’<sup>3,21</sup>, since 2016 the government now welcome the insurance industry in their long held plan to demolish the welfare state. The 2016 Green Paper discussion on Work, Health and Disability<sup>22</sup> openly invited the insurance industry to step in<sup>23,24</sup>, and this was welcomed by both the DWP and the Department of Health.

“Remember, the Green Paper was co-authored by the DWP and the Department of Health. With the NHS struggling as a result of deliberate underfunding, and sickness and disability benefits less generous and harder to access, here are both the responsible government departments, openly calling on the insurance industry to step in and fill the gap that has been deliberately created.

“To anyone who has been a close observer of welfare reform, this won’t come as a surprise. The insurance industry has been highly influential in shaping government policy on sickness and disability benefits. This has been documented comprehensively by Mo Stewart in her book *Cash Not Care: the planned demolition of the UK welfare state*. But whereas in the past the government has been reluctant to acknowledge such influence, they are now openly seeking to offload the ‘burden’ of people who are long-term sick or disabled...

“There are several significant dangers inherent in such private insurance cover. First, there will always be some people who won’t be able to access it, because they aren’t in work, their work is too insecure, or they have a pre-existing condition which makes private insurance prohibitively expensive.

“Second, a profit-driven company has an implicit incentive not to pay out when a claim is made. This is why the offices of one of the biggest insurance companies in the United States became known as ‘disability denial factories’ as workers who became sick or disabled found they would not pay out when they needed to claim.

“And third, if all the people in secure, well paid jobs become privately insured against sickness or disability, they will have little or no stake in the continuation of state provision. Their interests, and the interests of people who can’t access private insurance, will inevitably begin to diverge...

“If a growing section of the population begins to feel they have no need of the welfare state, that it is merely provision for an uninsured underclass, then there will be very little impetus to defend it against cuts, and very little desire to pay taxes to support it”.

*Does Green Paper reveal government’s lack of commitment to the welfare state?*<sup>23</sup>

Ekklesia  
Bernadette Meaden  
November 2016

3 <http://www.newgeneration-publishing.com/books/reference/cash-not-care-the-planned-demolition-of-the-uk-welfare-state-3/>

21 [https://www.researchgate.net/publication/314045256\\_STATE\\_CRIME\\_BY\\_PROXY\\_corporate\\_influence\\_on\\_state\\_sanctioned\\_social\\_harm\\_An\\_independent\\_report](https://www.researchgate.net/publication/314045256_STATE_CRIME_BY_PROXY_corporate_influence_on_state_sanctioned_social_harm_An_independent_report)

22 <https://www.gov.uk/government/consultations/work-health-and-disability-improving-lives>

23 <http://www.ekkleisia.co.uk/node/23562>

24 <https://www.disabilitynewsservice.com/disabled-researchers-book-exposes-corporate-demolition-of-welfare-state/>

As you can see from the above very detailed and referenced evidence, there is no justification for the deaths, despair and human suffering created by this government and its predecessor<sup>3,13,19,21</sup> against those least able to defend themselves, having successfully demonised them first to influence the British public<sup>19</sup>, as the welfare state is deliberately destroyed when aided by the DWP en route to private healthcare insurance in the UK; as recommended by the first female Prime Minister in 1982<sup>3</sup>

In the UK there are three words that identify the government enforced suffering of sick and disabled people, and they are: Work Capability Assessment (WCA). This report identifies the influence of an American healthcare insurance giant with successive UK governments since 1992, the influence of a former government Chief Medical Officer and the use of the WCA, conducted by the private sector, as the government permit state crime by proxy when justified as welfare reform.

*State Crime by Proxy:  
corporate influence on state sanctioned social harm<sup>21</sup>*

ResearchGate 2017  
Mo Stewart

Your contempt for the chronically ill and disabled people who must suffer the enforced WCA was demonstrated in your letter Mr Herron. They are nothing more than numbers to you, as you celebrate how few of them manage to take their inaccurate DWP decision, following a bogus WCA, as far as a Tribunal. As demonstrated by the Senior President of Tribunals, the DWP “incompetance”<sup>10</sup> is nothing to be proud about. The many thousands of deaths <sup>3,14,16,21,25</sup> linked to the ESA application, when quite literally ‘*killed by the State*’<sup>21</sup> have been identified, even if the DWP refuse to publish updated ESA mortality totals. This is the complete abandonment of all moral and ethical responsibility for disabled people by the British government<sup>24,25</sup>. Welcome to Little America<sup>26</sup>.

Given this evidence and previous Ministerial correspondence, I suggest you don’t contact me again.

Yours sincerely

Mo Stewart

Disability studies researcher

Author of ‘*Cash Not Care: the planned demolition of the UK welfare state*’. New Generation Publishing 2016

[https://www.researchgate.net/profile/Mo\\_Stewart/publications](https://www.researchgate.net/profile/Mo_Stewart/publications)

3 <http://www.newgeneration-publishing.com/books/reference/cash-not-care-the-planned-demolition-of-the-uk-welfare-state-3/>

10 [https://www.buzzfeed.com/emilydugan/most-dwp-benefits-cases-which-reach-court-are-based-on-bad?utm\\_term=.nyznzaDnZ#.atOr3PJra](https://www.buzzfeed.com/emilydugan/most-dwp-benefits-cases-which-reach-court-are-based-on-bad?utm_term=.nyznzaDnZ#.atOr3PJra)

13 <https://www.crimeandjustice.org.uk/resources/preventable-harm-government-policy>

19 <http://www.welfareconditionality.ac.uk/2017/07/demonising-disabled-people-public-behaviour-and-attitudes-during-welfare-reforms/>

21 [https://www.researchgate.net/publication/314045256\\_STATE\\_CRIME\\_BY\\_PROXY\\_corporate\\_influence\\_on\\_state\\_sanctioned\\_social\\_harm\\_An\\_independent\\_report](https://www.researchgate.net/publication/314045256_STATE_CRIME_BY_PROXY_corporate_influence_on_state_sanctioned_social_harm_An_independent_report)

24 <https://www.disabilitynewsservice.com/disabled-researchers-book-exposes-corporate-demolition-of-welfare-state/>

25 <http://www.centreforwelfarereform.org/news/spartacus-re-green-paper/00319.html>

26 [https://www.researchgate.net/publication/316545213\\_WELCOME\\_TO\\_LITTLE\\_AMERICA](https://www.researchgate.net/publication/316545213_WELCOME_TO_LITTLE_AMERICA)

Copied to:

The Rt Hon Sir Earnest Ryder ~ Senior President of Tribunals  
Professor Mayur Lakhani ~ President, Royal College of General Practitioners  
Professor Wendy Burn ~ President, Royal College of Psychiatrists  
Professor John Middleton ~ President of the Faculty of Public Health  
Professor Sir John Temple FRCSE ~ President, British Medical Association  
Professor Nicola Martin ~ Professor of Social Justice, London South Bank University  
Professor Peter Beresford ~ Professor of Citizen Participation, Essex University.  
Professor Danny Dorling ~ Halford Mackinder Professor of Geography, Oxford University  
Professor Tom Shakespeare ~ Professor of Disability Research, Norwich Medical School  
Professor Paul Bebbington ~ Emeritus Professor of Social and Community Psychiatry, UCL  
Professor Kenny Coventry ~ Professor of Psychology, University of East Anglia  
Professor Nick Watson ~ Professor of Disability Studies, Glasgow University  
Professor Martin McKee ~ Professor of European Public Health, LSHTM  
Professor Jonathan Portes ~ Professor of Economics and Social Policy, Kings College London  
Professor Gregory Philo ~ Professor of Communication & Social Change, Glasgow University  
Professor Clare Bamba ~ Professor of Public Health, Newcastle University  
Professor Henrietta L Moore ~ Director of the Institute for Global Prosperity, UCL  
Professor Helen Stokes-Lampard ~ Chair, Royal College of General Practitioners  
Professor Woody Caan ~ Editor, Journal of Public Mental Health  
Baroness Tanni Grey-Thompson ~ the House of Lords  
Baroness Jane Campbell ~ the House of Lords  
Dr Anne Daguerre ~ Associate Professor in Work, Employment and Welfare  
Dr David Etherington ~ Principal Researcher, Middlesex University  
Dr Sarah Carr ~ Associate Professor in Mental Health, Middlesex University  
Dr Emma Briant ~ Associate Professor in Journalism, Essex University  
Dr Jon Warren ~ Senior Research Associate, Institute of Health & Society, Newcastle University  
Dr Kayleigh Garthwaite ~ Birmingham Fellow, Dpt of Social Policy, Sociology & Criminology  
Dr Ruth Patrick ~ Postdoctoral Research, School of Law & Social Justice, Liverpool University  
Dr Chris Nightingale ~ Lecturer Practitioner, School of Health Sciences, University of East Anglia  
Dr Kesia Reeve ~ Principal Research Fellow, Sheffield Hallam University  
Dr Alex Scott-Samuel ~ Senior Lecturer in Public Health, Liverpool University  
Nicola Gale ~ President, British Psychological Society  
Kate Bullen ~ President elect, British Psychological Society  
Celia Anim CBE ~ President, Royal College of Nursing