

A Tale of two Models: Disabled People vs Unum, Atos, Government and Disability Charities

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(This is a slightly amended copy of an article that appeared on the Disabled People Against Cuts (DPAC) website <http://www.dpac.uk.net/2012/04/a-tale-of-two-models-disabled-people-vs-unum-atos-government-and-disability-charities-debbie-jolly/> March 2012).

One of the main advocates of the bio-psycho-social model, Lord Freud (Westminster's Minister for welfare reform) claims that it is based on evidence. It is not. It is a right wing model led by profit and the market. It incorporates the worst aspects of neo-liberalism. It targets disabled people and ridiculously claims that we can think ourselves out of being disabled. Its underlying theme repeats the mantra that 'work will set you free'. But this is not about work, despite the endless rhetoric; this model is an ideological cover for attacking disabled people and reducing every single right to financial support that has been achieved. Additional fringe benefits are provided to the insurance market of Unum, to the profits of Atos and to the big Disability Charities who all capitalise on the new notions of risk being imposed on disabled people. We can identify a clear pattern for the construction of the bio-psycho-social model, and its advocates. It features:

- 'Academics' in the pay of the insurance company Unum
- The genesis of the Work Capability Assessment guided by Unum and Atos,
- Atos' imposition of mass reassessments
- Successive governments
- Key players in the Department of Work and Pensions
- The big Disability Charities.

We can also identify a clear pattern for the construction and advocates of the social model of disability. The story features disabled activists some of whom were institutionalised in a Leonard Cheshire home, disabled academics, disabled activists and disabled peoples' organisations and groups run and controlled by disabled people who led the political challenges to individual models of disability and who continue to do so. Which model seems better so far?

While successive governments were delivering a stream of white papers apparently dedicated to improving the life chances of disabled people the revenge of the bio-

psychosocial model and welfare reform (read welfare destruction) was quietly being prepared behind our backs by the state and their market partners. The following explains why some disability campaigners were and are wrong to abandon the social model of disability and how the rhetoric behind the bio-psychosocial model is one of the keys to understanding the 21st century ideological attacks on disabled peoples' lives.

Part One

The Social Model of Disability Basics: why it's nothing to do with the bio-psychosocial model

The social model came into being through a letter to the Guardian from Paul Hunt¹, the early work of UPIAS (Union of Physically Impaired against Segregation) a document written by Vic Finkelstein² and other activists. They were institutionalised in a Leonard Cheshire institution. The UPIAS document and its premise were taken forward in the 1980s and 1990s by disabled activists and academics including Mike Oliver³ and Colin Barnes⁴. Paul Abberley⁵ also produced a seminal piece on 'The Concept of Oppression and the Development of a Social Theory of Disability'. The social model of disability was also taken forward by activists, campaigners and those who set up some of the first Centres of Independent Living (CILs).

The social model perspective has been used widely in the UK as answer to the sociological theories and common place mis-understandings on issues of disability being designated as entirely medical/individual attributes without reference to the environment, to the barriers that disabled people face, or the rights that they are being denied. Examples include: the American conservative sociologist Talcot Parsons who theorised the 'Sick Role' in the 1950s, and the International Classification of Impairments, Disabilities and Handicaps (ICIDH). Parsons suggested that 'the sick role' gave individuals the opportunity to 'opt out' of society, and elicit sympathy from others which brought them certain social benefits. However, this was perceived as a deviant role-according to Parsons the individual was at fault, merely exercising a form of deviance for particular rewards-they could quite easily change their attitude and function within society adequately. In addition, the first classification from the World Health Organisation (WHO) produced The International Classification of Impairments, Disabilities and Handicaps (ICIDH). This concentrated purely on medical factors and 'handicaps'. It was later remodelled to include supposed interaction with social factors and renamed International Classification of Functioning, Disability and Health (ICF). Yet, it has never fully achieved the explanation of the interaction between impairment and disability.

In contrast, disability activists using the social model perspective argue it is how society treats disabled people that create the main problem. The experience of disability is not exclusively about the individual or the individual's attitudes. The

experience of disability is an interaction with actions of non disabled people, planners, governments, employers and others. People need educating on what it is really like to be disabled and the many barriers that disabled people face in their everyday lives. They need to understand those barriers which prevent disabled people having the same opportunities and life chances as their non disabled peers.

The social model does not focus on disabled people as victims of their physiology, whether physical, cognitive or otherwise, nor as vulnerable, helpless individuals but as people who are disabled by attitudes, the environment, design, working patterns and by those individuals who see disabled people as unworthy. The social model also offers a way to organise politically against the principles of social and economic exclusion, and oppression in a disabilist society. It gives a critique of all that has gone before based on individualism and the market. It also argues that disabled people must be at the centre of voicing their own experiences. The social model was constructed by disabled people, not medical 'experts', not policy makers, not social workers, not disability charities, not service providers, nor governments, nor private companies profiting from disability⁶.

The Social Model: misunderstandings, misuse and other detractions

Disabled People against Cuts (DPAC) advocates the social model as do many others. Yet, DPAC has received criticism for insisting on working from the perspective of the social model. For example, the coalition governments' use of the term social model in consultations regarding the proposed change from Disability Living Allowance to Personal Independence Payment (PIP) has caused some people to reject the social model: what's the point of supporting something that is being used to limit our rights-but the coalition government don't understand, care or really know what the social model is. This was evident to anyone that read through the questions in the first PIP consultation.

The social model has been rejected by some academics as being out dated or not quite fashionable enough: they claim it is better to write of discourse, and embrace the 'subject' (individual). From the 'ivory towers' it may be, but how can this version ever realistically contribute directly to social policy or to peoples' lives? The social model is rejected because it is considered masculine, it talks about this thing called society, and it talks about 'social oppression'-perceived as an outdated Marxist term. The social model is rejected because it talks about impairment, people don't like to think of themselves as impaired, and anyway, some say: isn't the social model all about physical impairments? What about mental health? What about learning difficulties? Disabled feminists also criticised the social model for what they suggested was the social model's exclusion of the body, but it is in the body politic that this model has its greatest power. At times criticisms are academic (in both senses), overall it's extremely damaging, as the criticisms are often based on misconceptions of the social model and miss what the perspective offers for changing disabled peoples' lives (see Barnes⁷).

The Coalition and New Labour before them had some very fertile ground to make their attacks on a set of people who were divided on their own histories, who

appeared to be against their own founding activists and their own collective political identity. At the same time, as noted, neither new Labour nor the Coalition understood, cared or really knew what the social model really meant. They did know that the social model was used as successful tool to establish rights for disabled people.

This is why recent governments and government departments have used the term without any notion of the motivation, history, or content nor any care for the outcomes. Governments claim they speak with some disabled peoples' organisations, some disabled activists, but mainly governments' speak with the multi million pound disability charities. The big disability charities also use the term social model to give the illusion that they understand disabled people and can speak on behalf of disabled people. They never could and they still can't. It is for disabled people to speak for themselves individually, through their own user-led organisations and through their own grass root groups.

What the Social Model Perspective did for Disabled People

The social model perspective was used very successfully by campaigners, protesters, advocates, activists and Centres for Independent Living (CILs) to move disabled people in the UK to a position that was the envy of many European countries in terms of UK support for disabled people.

Was it this perspective and its promotion that brought us:

- The Independent Living Fund (ILF) –now closed to all new applicants since 2010 by the Coalition, while existing applicants are left wondering what will happen to their support
- Disability Living Allowance (DLA) to pay for the extra costs of being disabled -now being replaced by Personal Independence Payment and rounds of reassessment by the Coalition government
- Incapacity Benefit -now changed to Employment Support Allowance and rounds of reassessment by Atos put in place by New Labour and made more stringent by the Coalition government
- Access to Work to help with extra costs of working and to, in theory, provide extra support to those that needed it –recently we have seen cut-backs on Access to Work with the tightening of criteria and more costs transferred to the employer rather than the government under the Coalition.
- Direct Payments to pay for personal assistants to aid independent living through financial support from local authorities (L.A.s) -now cut back as L.A.s restrict access through more punitive eligibility criteria because of central government cuts of up to 40% to L.A. budgets
- The Disability Discrimination Act (DDA) –now we have a diluted replacement including all discriminated groups called the Equality Act (2010) put in place by New Labour and further diluted by the Coalition government.

These things originally opened up independent living for disabled people; social model arguments affected social policy, housing, information, education, transport, design, peer support, advocacy and attitudes towards disabled people. Few would claim that the social model was a panacea for all the problems that disabled people faced, disabled people were still fighting for better rights, improvements on what we had, and better access before the current onslaught from the Coalition. However, to say that the social model and the social model perspective did nothing to change the lives of disabled people is an insult to the generations of disabled activists before us that fought for change. All those that pushed those extra rights forward were social model advocates who wanted more independence for themselves and for disabled people, they wanted to educate on a better understanding of the social and economic oppression that disabled people faced. Yet, New Labour, the Conservatives and a host of other actors were working on removing those gains and more from disabled people and disabled children from as early as 1992.

Those disabled people that now have a public platform and criticise or dismiss the social model are disparaging the very thing that gave them that platform in the first instance. We can identify a clear pattern for the advocates and history of the social model: disabled people, some of whom were institutionalised, disabled academics, disabled activists and disabled peoples' organisations run and controlled by disabled people. We can also identify a clear pattern for the bio-psychosocial model rhetoric and its advocates.

Part two

The Bio-psychosocial Model Basics: why it's nothing to do with the social model

There are a few references explaining where the original version of the bio-psychosocial model came from. Some cite George Engel⁸ others claim that it is an outcome of the International Classification of Functioning and Disability (ICF)⁹ Gill Thornton¹⁰ describes the model from a medical approach, while clearly identifying the vulgarisation of its later use as a tool in getting disabled people back to work

Briefly put, it is a theory that seeks to broaden the perspective on illness, by taking into account not only the biological, but also psychological and social factors which may have an influence on sickness, and consequently on the course that healing takes. The acknowledged value of this approach, when used for the benefit of the patient, is that it allows for the identification of non-biological influences which may interfere with an individual's capacity to heal.

However, it seems that Parsons' 'sick role' and of the disabled person as deviant comes closest to the rhetoric of the Coalition government. So rather than identify who or what the original source of the bio-psychosocial model might be, we need to look at its promotion and how it has been used to justify the rhetoric that 'work makes you well' and that 'work is good for you'. A DWP Press release from October 2011¹¹ shows the ways in which Freud (Minister for welfare reform) justifies the new era of the bio-psychosocial. He is speaking from the perversely titled 'Health and Well- Being' conference.

Key speakers at the conference included Dr Catherine Hannaway trained in the U.S. in 'improvement methodologies' by the Institute for Healthcare Improvement whose former President and Chief Executive Officer was Donald M. Berwick administrator for the [Centers for Medicare and Medicaid Services](#) insurance. Dr Bill Gunnyeon CBE, Director for Health, Work and Wellbeing and Chief Medical Advisor at the DWP: a regular 'expert' in House of Commons groups, and like Freud an apologist for Atos testing and the change from DLA to PIP. Also Samantha Wortley, Health and Safety Advisor at the University of Derby: a university running accredited courses for Atos health practitioners, and Disability Charity RNIB to name just a few.

Freud's rendition was surely a case of 'preaching to the converted' as it was delivered to those connected to insurance, disability accreditation, disability charities (who are still using the language of rehabilitation) and various apologists for the current regime. He also uses academics Waddle and Burton who, like many others supporting this rhetorical model are connected with the Centre for Psychosocial and Disability Research directed by Mansel Aylward, (former Chief Medical Officer at the DWP) at the University of Cardiff: a department bankrolled by Unum. Freud happily declares:

Not so long ago employers were frightened of ill health. Good employers were concerned that being in work would cause some harm. Responsible employers acted to protect people, keeping them off work until they were fully recovered. But perversely they may have been doing more harm than good. We now understand that work is not necessarily bad for you.

People with physical or mental health conditions do not need to be protected from work and sometimes maintaining some form of working life can aid recovery. This understanding was first put forward by Aaron Antonovsky. It was expanded upon by Waddell and Burton. And helpfully formed an evidence base upon which I developed my welfare reform report.

Work provides more than just an income. Employment can also give people a sense of purpose, some structure to their lives. It can also be an important part of people's social lives.

Quite simply good work is good for you.

Quite simply 'good work' is in short supply under the Coalition. Their promotion of the deeply unpopular workfare and the limited supply of temporary (including contract work), part-time, precarious jobs, and job insecurity for those in work have all been found to have adverse affects on mental and physical health. In addition, poor quality work can affect mental health in the same way as no work. The growing gap in inequality between the richest and the poorest affects the nation's health and remains intergenerational.

The Construction and Deconstruction of a model for Private Profit

Aaron Antonovsky, one of the academics mentioned in Freud's rendition, put forward the idea of the concept of sense of coherence (SOC) in 1979¹². It is not related to the bio-psychosocial model but ironically identifies one of the reasons why the current

regime imposed on disabled people will make them more susceptible to stress, anxiety and individual deterioration.

Collingwood claims¹³: The SOC is defined as: “The extent to which one has a pervasive enduring though a dynamic feeling of confidence that one’s environment is predictable and that things will work out as well as can reasonably be expected.” It has three components – comprehensibility, manageability, and meaningfulness. Comprehensibility is the extent to which events are perceived as making logical sense, that they are ordered, consistent, and structured. Manageability is the extent to which a person feels they can cope. Meaningfulness is how much one feels that life makes sense, and challenges are worthy of commitment. All these things are based on financial security, upbringing, social networks and natural ‘coping’ styles. Unremarkably, those in higher social classes who are more financially secure are deemed to have higher SOC levels, yet it is also likely that they have better health outcomes too, as they are more likely to come from financially secure backgrounds.

As Antonovsky died in 1994 he will be unable to sue Freud for what seems to be a complete misinterpretation of SOC. Later we’ll compare the Antonovsky theory to the Waddell and Burton (Unum) scenario which exhibits a ‘blame the individual’ approach developing individualistic themes on illness and disability in which the social is completely erased.

Of course, the Health and Well- Being conference is just one in a long line of such conferences. In 2001 a conference with the charming title of ‘Malingering and Illness Deception’ was held at Woodstock near Oxford. It covered old ground for the insurance industries. Amongst the participants were Malcolm Wicks, then Parliamentary Under Secretary of State for Work, and Mansel Aylward: Chief Medical Officer at the Department of Work and Pensions (DWP) and a number of academics like Waddell and Burton who would come to add academic credibility to Unum and government protestations on disability and illness.

What linked many of them together, including Aylward, was their association with the giant US insurance company UnumProvident (later Unum), represented at the conference by John Lo Cascio. The goal of the conference was the transformation of the welfare system¹⁴ in particular the reduction of payments to disabled people which was perceived to be a key problem for successive governments. Unum were perfect for such a project as they had a very useful track record of reorganising exactly what health problems were in order to avoid insurance payouts. John Lo Cascio was no stranger to such events or to working with Westminster governments. As second Vice chair of Unum he had been brought in by Conservative Peter Lilley (Secretary of State for Social Security 1992-1997) to ‘manage claims’ of incapacity benefit. Both Lo Cascio and Aylward joined the government medical advisory group to devise the All Work Test, a forerunner of the Personal Capability Assessment (PCA) and a forerunner to the more recent Work Capability Assessment (WCA) used by Atos. The All Work Test awarded points for different descriptors and ignored GP evidence. Instead a set of adjudication officers who were trained in a theory set out by Mr Lo Cascio were employed to aid the management of claims - sounds familiar doesn’t it? Unum Provident was at the centre of UK welfare reform as early as 1992 under the Thatcher government, but they worked with New Labour too.

Unum Provident continued to build its sphere of power and influence, in 2001 launching: New Beginnings, a public private partnership between charities, including Disability Charities, NGO's and government ministers with the express intention of furthering the company's power in policy making. The New Beginnings advisory group included some of the academics from the Woodstock conference as well as major disability charities such as the Shaw Trust, Disability Alliance, and the Employers Forum for Disability¹⁵ Unum went further stretching their tentacles into the university sector with the help of Mansel Alyward formally of the DWP.

Mansel Aylward, began directing the Centre for Psychosocial and Disability Research at Cardiff University in 2004: a department that Unum Provident paid 1.6 million pounds for. A department set up to provide an academic credibility and a new political slant to the bio-psychosocial model¹⁶ allowing Freud to claim that welfare reform for disability benefits was backed up by evidence that 'work was good for you'. The department included Alyward, Professor Peter Halligan and Gordon Waddell. One year later Alyward and Waddell produced *The Scientific & Conceptual Basis of Incapacity Benefits* published by the DWP. As Rutherford¹⁷ notes:

In their declarations of interest at the beginning of the text neither man cites their association with UnumProvident. This matters, because the monograph provides the unacknowledged intellectual framework for the 2006 Welfare Reform Bill [originally passed by New Labour]. And the methodology used by Waddell and Aylward is the same one that informs the work of UnumProvident. In a memorandum submitted to the House of Commons Select Committee on Work and Pensions, UnumProvident define their method of working: 'Our extended experience ... has shown us that the correct model to apply when helping people to return to work is a bio-psychosocial one'.

Peter Halligan, and Derek Wade of Oxford University (another Woodstock academic) explained the model in the British Medical Journal as something that needed to make a break from old understandings of the bio-psychosocial. 'The old biomedical model of illness, which has dominated health care for the past century, cannot fully explain many forms of illness.' What they really meant was that it was not helping reduce the number of applicants for incapacity benefit.

The old model 'assumes a causal relation between disease and illness, (?) and fails to take into account how cultural attitudes and psychological and social factors shape illness behaviour. In other words it allows someone to report symptoms of illness, and for society to accept him or her as sick, without their having pathology'-a throwback to Parsons' 'sick role' theory. They add that: '*Personal choice plays an important part in the genesis or maintenance of illness*'.

Alyward and Wadell moved this rhetoric up several gears: Arguing that adopting this new version of the model would lead to a 'fundamental transformation in the way society deals with sickness and disabilities' (p123). The goal and outcome of treatment is work: 'work itself is therapeutic, aids recovery and is the best form of rehabilitation'. Work can set you free, in fact worklessness now transforms into a bizarre serious risk to life. It is announced as:

'one of the greatest known risks to public health: the risk is equivalent to smoking 10 packets of cigarettes per day' (p17).

Halligan and Wade also tap into theories of Talcot Parsons to argue: 'Our model suggests that illness is a dysfunction of the person in his (or her) physical and social environment'. Like Parsons, they suggest that the 'sick role' is no more than an individual deviance: a choice. The solution is to change people's behaviour by transforming the language and culture of welfare, and by using incentives as a 'motivational tool' to prise people out of their sick role (p166). The motivation tools were later renamed sanctions. That is sanctions to those people refusing to work for their benefits on programs such as 'workfare'¹⁸, sanctions through which their benefits can be removed from weeks up to three years leaving them without income if they dare indulge in any 'wrong thinking'.

Influence and Profit: Unum, ATOS and complicit Disability Charities

In July 2007 The Personal Capability Assessment (PCA) was redesigned by two technical working groups, one for 'physical impairment and another for mental health issues. Representatives from Unum and Atos were present in both groups¹⁹. The redesign would be one step closer to the hated and much maligned Work Capability Assessment to be delivered by Atos

Technical working groups on the WCA also hosted the views and input of some of the big Disability Charities including: MENCAP, MIND, the National Autistic Society, Parkinson's Disease Society, RNIB, RNID and the Disability Benefits Consortium including some of those already mentioned, as well as Leonard Cheshire Disability, Sense, RADAR, SCOPE, Sue Rider and the Papworth Trust²⁰.

No doubt this was good preparation for the Disability Works UK launch in 2011 another charity consortium exercising their muscle as 'experts in disability employment' involving SCOPE, MENCAP, MIND, Leonard Cheshire, and Action for Blind People (a part of RNIB) with a healthy turnover value of 654.4 million and a cumulative surplus of 15.6 million²¹. All corporate disability charities were more than prepared to take maximum advantage of workfare type schemes recently announced as having unlimited time scales for disabled people²².

We should note that so far we do not see any user-led disabled peoples groups involved in any positions of power or profit in this wholesale transformation of welfare or in partnership with the government. The charities were speaking for us because there were profits to be made from lucrative government contracts designed to get disabled people back to work- they are in the disability business too after all. They continue to 'help' by advising on mental health issues and producing publicity against the WCA that they were involved in, and publicity against Atos, who they sat at the table with- I guess that's part of the social model bit they adopted, plus of course their partnership with user-led groups in the Hardest Hit protests which protested against the WCA and welfare reform-oh the irony or is it duplicity?

Atos were also on board the welfare transformation gravy train before the WCA. Atos bought out SchlumbergerSema in 2003 for 1.3 billion Euros. Through this, they

gained access to key SchlumbergerSema public sector contracts in the UK, including one with the Metropolitan Police, a deal with the Department for Work and Pensions, and the Government Gateway project²³. This was a significant move as DWP contracts included the Personal Capability Assessment and the buyout gave Atos (renamed as Atos Origin in 2004) access to the Logical Integrated Medical Assessment (LIMA) and 100 million per year from the DWP for delivering it with the proviso that they speed up claim and processing times. Another Disability Charity: Shaw Trust announced their pleasure at future work in partnership with Atos in 2010. Shaw Trust would also profit through the misery of disabled people by delivering the euphemistically titled 'work programs' for disabled people. Sally Burton, CEO²⁴ at Shaw Trust gushed:

Shaw Trust is delighted the consortium has qualified to bid for the opportunity to supply seven Lots of the Government's Work Programme. As the UK's largest third sector provider of employment services, our partnership with Atos Origin and Pinnacle People can ensure *the charity sector remains at the heart of welfare-to-work*. [My emphasis]

But let's move from income driven Disability Charities to failed bankers (apparently they do exist). In 2006 New Labour chose David Freud, a senior banker at UBS AG to conduct a review of New Labour's welfare to work policies. Freud later defected to the Conservatives on a promise of a peerage. Invest in ME²⁵ expose Freud's mistakes in banking and other areas explaining his own incapacities in some detail:

The "To Banker from Bankies" 2009 report (which was supported and funded by Oxfam) states, in 2007 Freud was appointed as the key Government advisor on welfare reform by Labour's John Hutton and was commissioned to produce a report "*Reducing Dependency, Increasing Opportunity*" on the "*Welfare to Work*" programme. This was despite the fact that, in his own words, Freud "*didn't know anything about welfare at all*" (Daily Telegraph, 4th February 2008). Despite the great complexity of the welfare system, Freud researched and wrote his welfare "shake-up" plan in just three weeks (Daily Telegraph, 1st May 2006). It recommended that the existing role of private firms (such as UNUM and Atos) in the Government's "Welfare to Work" programme be dramatically increased; he acknowledged that there was no evidence to suggest that private contractors were any better than the Department for Work and Pensions, but he still concluded that it would be "*economically rational*" to pay them tens of thousands of pounds for every person they removed from benefits.

In his report Freud constantly misquotes studies and uses over 170 references to 'models' citing the zars of the Unum financed Centre for Psychosocial and Disability Research at Cardiff University consistently. While Freud openly acknowledges a useful partnership between two of the most hated private companies and their involvement in welfare to work issues, the company's themselves have been much more unwilling to acknowledge any links between them.

Links between Unum and Atos

In the 2004 Atos report, Atos appears to use the language of Unum and the academics of Centre for Psychosocial and Disability Research unreservedly, with sex thrown in for good measure:

Psychosocial factors...are at least as important as physical factors in the onset and maintenance of these conditions. Patients can make a number of 'secondary gains' with these unexplained illnesses, such as...turning a socially unacceptable disability into a more acceptable 'organic' disability caused by injury or disease beyond their control. They can blame their failures on the illness; elicit care, sympathy and concern from family and friends; avoid work or even sex; and there are financial rewards associated with disability.

...if a patient believes their illness was caused by a virus and there's nothing they can do about it, their prognosis is not likely to be positive. But if the patient believes...that the symptoms won't last long and they have control over them, then the prognosis will be better....We need patients to understand their situation, so they are more likely to go back to work

(Except from the powerful letter from Douglas Frazer to the House of Lords reproduced on the Invest in ME web site)

Despite being linked in the chain of the key players at the DWP, successive government ministers, a string of conferences, the Centre for Psychosocial and Disability Research and involved together in the PCA and WCA. Atos and Unum continue to deny that they have any links with each other. However, they appear to swap CEOs and often share the same platforms at conferences and on government groups as noted. As DPAC's sister campaign group Black Triangle posts show: MP Norman Lamb, (special political advisor to Nick Clegg) also seems to have trouble recollecting links with Unum. He denied any knowledge of a company named Unum going as far as to write to our very own minister Maria Miller. Lamb wrote:

xxxx xxxxxxxx informs me that a company called Unum Provident "has been convicted of major fraud and banned from trading in many States in the US" up until 2008. He states that this company has been advising the DWP on welfare reform since the early 1990s. He also states that the current Atos Chief Medical Officer, Mike O'Donnell, had been Chief Medical Officer of Unum from March 2000 to September 2010. Is all this true? Can you let me know exactly what the Government knows about the position relating to Unum Provident and its relationship with Atos healthcare?

The post on the Black triangle site continues:

Imagine my surprise and shock then considering the above to discover this morning while doing some research online about connections between Atos & Unum, particularly the relationship between Mike O'Donnell – Chief Medical Officer – Atos Healthcare and Peter O'Donnell – Executive Director, Chief Financial Officer – Unum Insurance, (brothers perhaps? Anybody know?), to find out that good old Norman last Tuesday was a guest speaker at a Unum hosted fringe meeting at the LibDem Conference speaking alongside Peter O'Donnell, the Chief Financial Officer of Unum Insurance –

Speaker/Artist(s) Info: Norman Lamb MP; Teresa Perchard, Director of Public Policy, Citizens Advice; Nick Pearce, Director, IPPR; Peter O'Donnell, Chief Financial Officer, Unum. Chair: Patrick Hennessy, Sunday Telegraph.

Time: Tuesday September 20, 2011 6:15pm – 7:30pm

Venue: Hyatt Regency: Fortissimo2 Bridge Street, Birmingham B1 2JZ

Type: LibDem → Panel

Host Organization(s): IPPR, *Unum*

It's also worth recognising the media representation at this too. As noted Unum continue to deny any involvement with Atos and vice versa, yet Unum was providing insurance for Atos workers up until 2009. On Unum's rather amusing 'Ask Unum' site, clearly set up so that they can continue denying what is a matter of record in many instances, they state 'Unum UK currently has no relationship with ATOS Ltd. Until September 2009, it provided Income Protection to ATOS Ltd for ATOS's staff'. Should they also add that the previous chief medical officer of Unum installed at Atos in 2011 had nothing to do with Unum before that time too?

Additional information on Atos partners has been requested through a Freedom of Information request to the DWP by P. Wilkinson (2011)²⁶ this asks which third parties Atos works with. The response states:

Atos Healthcare have advised that to release the name of the private company they have appointed to investigate the handling of complaints would affect the basis of the contract between Atos Healthcare and that company and would have contractual and commercial implications for Atos Healthcare.

As part of their preparation for Independent Tier (IT) arrangements under the new Contract, Atos Healthcare proposed and DWP agreed that details of the private company they have appointed to investigate the handling of complaints be withheld to ensure independence. This proposal and agreement took the form of an entry in the contract as follows: "*The name of this firm will not be divulged to any third party to ensure continued independence*".

Can we guess who it is yet? The phrase 'all in it together' comes to mind –maybe this is what Cameron was actually talking about. But, what of Unum's own useful criminal record to the Coalition?

Disability Denial: an alliance between Unum and the State

When the links between the profiteers in the misery of disabled people and the ideologies of denial are exposed what we are left with? First this is not about getting people into work, whatever the Tories and previous governments claim they don't care if you work or not. Media rhetoric²⁷ on scroungers, workshy and other protestations of undeserving poor were part of the strategy to change public opinion

helped along by misleading DWP press releases. This is about denying benefits, denying illness and denying incapacity. It is not about even about 'thinking yourself well' or tortured nonsensical models shored up by dubious academics: It's about something Unum have a successful history of: it's about denying pay outs and capitalising on fear and risk.

The denial of pay outs may be through Unum's insurance policies or it may be through denying pay outs after an individual has paid a life-time of national insurance contributions to the state-but is put on time limited Employment and Support Allowance- the outcome will be same. Who better to work with ex-banker Freud and MP's in denying people their rightful entitlements than a company which has been publically named as: "an outlaw company- It is a company that for years has operated in an illegal fashion²⁸" by California Insurance Commissioner John Garamendi in 2005, where Unum were charged with more than 25 violations of state law and fined \$8 million. Among the charges were:

....that the company knowingly applied the wrong legal definition of disability in denying claims or ruling claimants were able to go back to work, targeted high-cost claims for denials to save the firm money, misused claimants' medical records and even the opinions of in-house medical personnel to deny benefits and wrongly sought to file cases under a federal benefits law that severely limits claimants' ability to successfully sue their insurers.

Reads like the work theory of Atos doesn't it? These charges followed a financial settlement in the previous year in which 48 other U.S states raised critical issues on Unum's working methods.

Rutherford argues: in the 1980s Unum, and insurance companies Provident and Paul Revere were in trouble in the U. S. They had increased profits by sharing similar policies on disability and sickness insurance and selling to professionals. A combination of falling interest rates and the growth of diagnosed illnesses which were not subject to the insurance sector's tests appeared to be increasing, affecting the professionals who had taken out policies with the companies, and in turn affecting company profits. These illnesses included: Myalgic Encephalomyelitis (ME) or Chronic Fatigue Syndrome (CFS), Fibromyalgia, Chronic Pain, Multiple Sclerosis, Lyme disease.

An aggressive 'Chronic Fatigue Syndrome' plan followed, with claims being managed in a way that continued to maximise profits. The insurance industry called on the academics, Professor Simon Wessely of King's College and Professor Michael Sharpe of Edinburgh University (both participants in the Woodstock conference) in an attempt to reclassify those conditions that were costing money, and lobby the medical profession on such conditions so they fell outside the remit of 'pay outs'. It meant that specific illnesses were targeted in order to discredit the legitimacy of claims. This 'strategy' was to prove useful in dealing with the UK's welfare reform and in overriding the basis of medical opinion on a whole set of conditions. As the state joined in the denial with its set of private companies and supporting academics Unum achieved more market returns while disabled people began to see their own welfare support rapidly diminishing.

Capitalising on Fear: how the denial of state support improves Unum's profit margin

Unum couldn't lose, as early as 1997 with the roll out of the All work Test, in which Lo Cascio had had played a major part, Unum launched an expensive advertising campaign. One ad ran:

April 13, unlucky for some. Because tomorrow the new rules on state incapacity benefit announced in the 1993 autumn budget come into effect. Which means that if you fall ill and have to rely on state incapacity benefit, you could be in serious trouble²⁹.

Lo Cascio replied in the negative when *Private Eye* asked if he was concerned about the conflict of interest involved in his company's advertising campaign, which sought to gain from benefit cuts that he had helped to initiate. However Unum Chairman Ward E. Graffam did acknowledge the 'exciting developments' in Britain. Unum's influence in government was helping to boost the private insurance market: 'The impending changes to the State ill-health benefits system will create unique sales opportunities across the entire disability market and we will be launching a concerted effort to harness the potential in these.'³⁰

In 2012 the worst aspects of welfare reform were pushed through by multi-millionaire ex-banker Freud: including over a million disabled people expected to be completely removed from Incapacity benefits and unable to qualify for Employment Support Allowance (ESA) through more stringent testing by Atos, 12 month time limits on ESA to include those with terminal illness, and an additional half a million set to lose Disability Living Allowance and be ineligible for Personal Independence Payments amongst the regime. The fraud of the government rhetoric claiming to be supporting 'those in most need' was almost complete with the closure to new applicants for the Independent Living Fund (ILF) in 2010 and ILF's expected closure in 2015. To celebrate Unum happily launched another set of advertising campaigns in 2012 advising people that the state wouldn't support them and that they should take out insurance against sickness and disability.

A Tale of two Models: Disabled People vs Unum, Atos, Governments and Disability Charities

The social model and the bio-psychosocial model have each had powerful affects on disabled peoples' lives. However they are two completely different animals and we must never succumb to the government's attempts to conflate them. It's quite clear which model gives most to disabled people and which is being used to take away disabled peoples' rights and their right to dignity . It is quite clear why we should continue to rage against the current imposition of the market regime of misery. It is quite clear why we should continue to support and use the social model of disability: a model which is rooted in the experiences of those incarcerated in a Leonard Cheshire Disability Charity institution: One of the disability charities that continue to profit from disabled peoples' misery by sitting at the table with governments, Atos and Unum 'helping' the progress of the WCA and gaining from lucrative government

contracts for work programs- with their and other charity support disabled people don't need enemies.

The increases in the recorded suicides of disabled people brought about by the fear and misery imposed on disabled people through the current neo-liberal regime is likely to grow. Yet, the worsening situation of the many being denied support to which they are entitled to through national insurance contributions, through the most basic notion of human rights, the UN Convention on the Rights of Disabled Persons, and the European Convention on Human Rights will not affect the income or profits of the private companies or the disability charities involved .

This is not about getting people into work- there are no jobs, much less jobs for disabled people. It is not about even about 'thinking yourself well' or tortured nonsensical models shored up by dubious academics in the pay of Unum. This is about denying benefits, denying illness and denying disability: It's about something Unum have a successful history of: denying pay outs for disabled people while capitalising on fear and risk. It's about an ideological regime of misery and austerity in the twelfth richest country in the world.

It amounts to the biggest government benefit fraud in social welfare and human rights in contemporary history.

Post script:

Comment from the DPAC site where this article originally appeared:

Whilst social model thinking may indeed have led to the DDA and the DDA itself is now replaced by watered down legislation it is worth noting that disabled activists, of whom I include myself, never ever campaigned for the DDA.

We campaigned for a civil rights bill which was inclusive in that it covered all disabled people, comprehensive in that it covered all aspects of our lives and enforceable in that you could afford to go to court and the law would penalise appropriately. The DDA failed all tests.

It is also worth noting that on the day the DDA was created in parliament, whilst disabled people were outside campaigning against it the six charities, MIND, MENCAP, RNIB, RNID, Leonard Cheshire and RADAR were inside launching a press statement welcoming the DDA. On hearing this the campaigners created a poster showing their exasperation at this betrayal and calling the charities traitors

Acknowledgements

With thanks to Ann Whitehurst for sending me Jonathan Rutherford's excellent piece in Soundings (on which some of this is based) and other pieces explaining how poverty and disability were being remade as an individual attributes rather than a societal failings by the right wing. Thanks to Bob Williams Findlay for his comments. Thanks also to Julia Cameron for her comments, sending numerous links and information and urging that this (or something like this) should be written, and to all

those activists past and present who will continue to fight for the rights of disabled people using the social model and the call for 'Rights not charity' -You know who you are.....

For online texts on the social model and disability issues see:

<http://www.leeds.ac.uk/disability-studies/archiveuk/>

For grass root campaigns see Disabled People against Cuts (DPAC)

<http://www.dpac.uk.net>

¹ <http://www.leeds.ac.uk/disability-studies/archiveuk/Hunt/Hunt%201.pdf>

² <http://www.leeds.ac.uk/disability-studies/archiveuk/finkelstein/UPIAS%20Principles%202.pdf>

³ Oliver, Mike The Politics of Disablement

<http://www.leeds.ac.uk/disability-studies/archiveuk/archframe.htm>

⁴ Barnes, Colin DISABLED PEOPLE IN BRITAIN AND DISCRIMINATION A Case for Anti-Discrimination Legislation <http://www.leeds.ac.uk/disability-studies/archiveuk/archframe.htm>

⁵ <http://www.leeds.ac.uk/disability-studies/archiveuk/Abberley/chapter10.pdf>

⁶ <http://www.leeds.ac.uk/disability-studies/archiveuk/Oliver/in%20soc%20dis.pdf>

⁷ The Social Model of Disability: Myths and Misconceptions

<http://www.leeds.ac.uk/disability-studies/archiveuk/archframe.htm>

⁸ http://www.democraticgreensocialist.org/wordpress/?page_id=1716

⁹ <http://www.esds.ac.uk/government/los/faq/>

<http://dsq-sds.org/article/view/885/1060>

¹⁰ http://www.democraticgreensocialist.org/wordpress/?page_id=1716?

11 <http://www.dwp.gov.uk/newsroom/ministers-speeches/2011/06-10-11.shtml>

12 <http://psychcentral.com/lib/2006/your-sense-of-coherence/>

13 <http://psychcentral.com/lib/2006/your-sense-of-coherence/>

14 <http://www.lwbooks.co.uk/register.php?r=journals/articles/rutherford07.html>

15 <http://www.whywaitforever.com/dwpatosbusinessunum.html>

16 http://www.guardian.co.uk/commentisfree/2008/mar/17/epluribusunum?CMP=tw_t_gu

17 <http://www.lwbooks.co.uk/register.php?r=journals/articles/rutherford07.html>

18 <http://www.digitalvoice.eu/?p=172>

19 <http://www.lwbooks.co.uk/register.php?r=journals/articles/rutherford07.html>

20 <http://www.dwp.gov.uk/docs/work-capability-assessment-review.pdf>

21 <http://www.disabilityworksuk.org/>

22 <http://www.guardian.co.uk/society/2012/feb/16/disabled-unpaid-work-benefit-cuts?commentpage=32#start-of-comments>

²³ <http://www.silicon.com/management/cio-insights/2003/09/22/atos-origin-buys-schlumbergersema-for-e13bn-10006107/>

²⁴ http://uk.atos.net/en-uk/newsroom/press_releases/2010/2010_11_30_06.htm

²⁵ <http://www.investinme.org/Article-441%20UK%20Welfare%20Reforms.htm>

²⁶

<http://www.whatdotheyknow.com/request/84163/response/213090/attach/html/2/FoI%202549%2026.09.11.pdf.htm>

ITo P. Wilkinson [[FOI #84163 email]]

²⁷ <http://www.dpac.uk.net/2011/12/scapegoats-sinners-and-political-strategies-the-media-and-disability-cuts-debbie-jolly/>

²⁸ <http://www.latimes.com/business/la-fi-disability3oct03,0,6931969.story>

²⁹ <http://www.lwbooks.co.uk/register.php?r=journals/articles/rutherford07.html>

³⁰ <http://www.lwbooks.co.uk/register.php?r=journals/articles/rutherford07.html>