Visit by the United Nations Special Rapporteur on extreme poverty and human rights to the United Kingdom of Great Britain and Northern Ireland from 5 to 16 November 2018

Submission by

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### Preface

The author is a disability activist investigating genocide crimes towards persons with disabilities by the European Member States of United Kingdom of Great Britain and Northern Ireland.

The 'hostile environment' was implemented by the Conservative political party to reduce the number of persons with disabilities and other minorities. The hostile environment is a strategy vis a vis the government's austerity measures and deliberate destruction of the welfare state. The purpose to introduce a private insurance-based system.

Abuses such as institutionalised indifference and using the media to create a negative image of persons with disabilities has had a profound long-term impact with many deaths. Cultural attitudes and the normalisation of the far-right politics have made disability hate crime now common place. This area is now a two-tier society between the able and disabled, with the abled bodied having automatic rights to suspicion of persons with disabilities.

The author has titled this document in German as he has concerns for his safety as a person with disabilities.

## **Death Spot Specification**

Location: Stoke-on-Trent

Program Name: Together We're Better

Local Authority (LA): Stoke-on-Trent city council, Staffordshire county council

Clinical Commissioning Group (CCG): Stoke-on-Trent CCG

Healthwatch: Healthwatch Stoke-on-Trent

Media: Stoke Sentinel <a href="https://www.stokesentinel.co.uk">https://www.stokesentinel.co.uk</a>

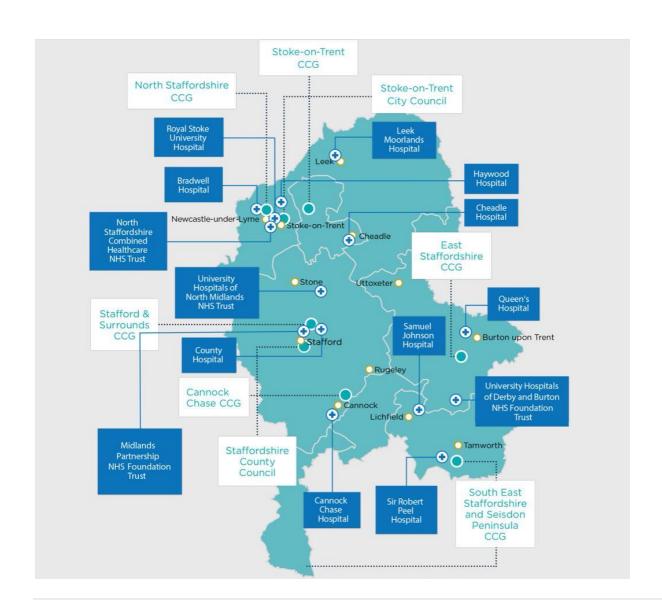
Law Enforcement: Staffordshire Police

Law Centre: Unavailable

Disability Assessor: Capita, CHDA

Advocacy: Unavailable

Disability Support: Unavailable



Member organisations are: Cannock Chase CCG East Staffordshire CCG North Staffordshire CCG Stafford and Surrounds CCG Stoke-on-Trent CCG South East Staffordshire and Seisdon Peninsula CCG Staffordshire County Council Stoke-on-Trent City Council University Hospitals North Midlands NHS Trust Midlands Partnership NHS Foundation Trust University Hospitals of Derby and Burton NHS Foundation Trust North Staffordshire Combined Healthcare NHS Trust NHS England Healthwatch Staffordshire Healthwatch Stoke-on-Trent Support Staffordshire **VAST** Local Victims "Valerie Grant, 73, walked in front of a train near Stafford on 23 April 2017." https://www.bbc.co.uk/news/uk-england-stoke-staffordshire-41112924 Ms Burns, 51, "She killed herself on 17 January 2017. Her inquest in April recorded a verdict of suicide." https://www.bbc.co.uk/news/uk-england-stoke-staffordshire-40099987 Geoffrey Elwell, "Theresa May challenged over disabled man's death – two days before winning benefits appeal." https://www.stokesentinel.co.uk/news/stoke-on-trent-news/theresa-challenged-over-disabled-mans-613569

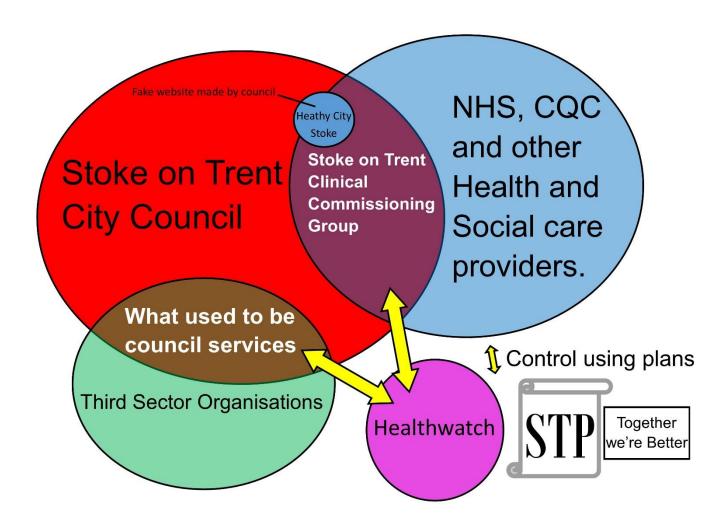
## Scope of Report

This report considers the human rights abuses of persons with disabilities using the government's 'hostile environment' program.

The hostile environment is a multi-government agency 'war on the disabled' to drive persons with disabilities into extreme poverty and in some cases suicide. It is a deliberate action taken on persons with disabilities to have a detrimental effect on their lives. The offenders work for the government and are above the law. This report will explore the linguistic strategies and techniques of neuralisation used when destroying the lives of persons with disabilities.

The program is area, or LA dependent and each death spot has a plan called a Sustainability and Transformation Plan (STP) < EXHIBIT 5 > created by the LA and the CCG. Not all LA's are the same and so far, I can confirm Dudley and Greater Manchester are similar disability death spots.

The STP's or 'death plans' are a framework used to remove disability from society and create a cleaner gene pool. This is promoted using popularist phrases such as 'Together we're better without disabled' and removing all mention of persons with disabilities. These plans filter down to organisational policies documents completed on a regular basis concluding with findings of a very large font number preceded by a £ symbol and the phrase 'tough choices'.



### Linguistic Strategy

Use of ambiguous and untrue phrases to conceal the real program objectives, many terms are used as deflection for evidencing performing duties and commitments, examples are:

Disability Confident Disability Unconfident

Healthwatch Deathwatch

Work and Health Program Work and Death Program

Health Economy Privatised NHS

Making Work Pay Economic slavery

Sustainability and Transformation Plan Death Plan

PIP is a better benefit PIP neglects persons with disabilities

Tough choices Amazon pay less tax

DLA is out of date

We want to start a disability genocide program

The NHS Equality Delivery System (EDS2) Equality Avoidance System

Improving lives: the future of work, health and Destroying lives: the future of work, health and disability

disability

Destroying lives. the juture of work, health and disability

Sustainable welfare Removing support for persons with disabilities

Personalised employment support No employment support

Supporting those furthest from the labour

market

Abusing those furthest from the labour market

Support to help individuals realise their

potential and ambitions

Make a human catastrophe for persons with disabilities

## Techniques of Neuralisation

"The idea of techniques of neutralisation was first proposed by David Matza and Gresham Sykes during their work on Edwin Sutherland's Differential Association in the 1950s. Matza and Sykes were working on juvenile delinquency, they theorised that the same techniques could be found throughout society and published their ideas in Delinquency and Drift, 1964.

They identified the following psychological techniques by which, they believed, delinquents justified their illegitimate actions, and Alexander Alverez further identified these methods used at a socio-political level in Nazi Germany to "justify" the Holocaust:

- 1. Denial of responsibility. The offender(s) will propose that they were victims of circumstance or were forced into situations beyond their control.
- 2. Denial of harm and injury. The offender insists that their actions did not cause any harm or damage.
- 3. Denial of the victim. The offender believes that the victim deserved whatever action the offender committed. Or they may claim that there isn't a victim.
- 4. Condemnation of the condemners. The offenders maintain that those who condemn their offence are doing so purely out of spite, 'scaremongering' or they are shifting the blame from themselves unfairly.
- 5. Appeal to higher loyalties. The offender suggests that his or her offence was for the 'greater good', with long term consequences that would justify their actions, such as protection of a social group/nation, or benefits to the economy/ social group/nation.
- 6. Disengagement and Denial of Humanity is a category that Alverez added to the techniques formulated by Sykes and Matza because of its special relevance to the Holocaust. Nazi propaganda portrayed Jews and other non-Aryans as subhuman. A process of social division, stigma, scapegoating and dehumanisation was explicitly orchestrated by the government. This also very clearly parallels Gordon Allport's work on explaining how prejudice arises, how it escalates, often advancing by almost inscrutable degrees, pushing at normative and moral boundaries until the unthinkable becomes tenable. This stage on the scale of social prejudice may ultimately result in genocide.

Any one of these six techniques may serve to encourage violence by neutralising the norms against prejudice and aggression to the extent that when they are all implemented together, as they apparently were under the Nazi regime, a society can seemingly forget its normative rules, moral values and laws in order to engage in wholesale prejudice, discrimination, exclusion of citizens, hatred and ultimately, in genocide." Kitty Jones (2018)

#### Communication

Communication with organisations concerning equality and diversity issues is not possible. As an example, I have just (21/8/2018) made three attempts to contact the equality and diversity department at Public Health England (PHE) by phone. The calls either go straight through to an answer phone or never get answered quite a contrast to the duties stated:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/593090/PHE\_Equality\_objectives\_2017\_to\_2020.pdf

- eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Equality Act 2010
- advance equality of opportunity between people who share a protected characteristic and people who do not share it
- foster good relations between people who share a protected characteristic and people who do not share it

This institutionalised indifference is common in all ruling state party departments and person with disabilities are not allowed to communicate with them. Most disability departments use the excuse of 'not being customer facing' and only allow restricted communication.

The restricted communication follows the same pattern:

Record of communication taken and a future call back, no direct communication allowed A period for response the maximum time being the actual time if at all A bullying intimidating phone call at a random time essentially refusing to answer Shut down of all communication saying "we have already replied to this"

Or a response by letter, let's examine a letter of 17 August 2018 from NS Accountable Officer – Marcus Warnes NHS NS CCG and S-o-T CCG, Hanley < EXHIBIT 1>:

#### para. 5

"You have also asked us about the Joint Strategic Needs Assessment (JSNA) currently published on the Stoke-on-Trent City Council website which carries the CCG logo, in particular you enquired what input we have had in its development. I can confirm that the JSNA is a report which is jointly commissioned by social care and health. It is monitored and approved through the Health and Wellbeing Board which includes senior representatives from Stoke-on-Trent CCG."

The disjointedness of statements immediately raises my suspicion of denial, Mr Warnes then misdirects by referring to different organisations "social care and health". It is deliberately ambiguous, are these new organisations? or Stoke-on-Trent City Council and the CCG? Then the reference to the "Health and Wellbeing Board", which organisation/s does that belong to?

The main parts of my original enquiry were not mentioned in this letter. When I kept contacting them for a response they instructed law enforcement to issue a Community Protection Notice stopping me from contacting them again<

EXHIBIT 2>.

#### Disability Denial

Disability denial is used throughout legislation implemented since 2010 as a tool to reduce the size of the welfare state. Endless assessments with dishonest assessors using denial techniques to remove support. Other ruling state party organisations use excessive disability evidencing as a form of abuse.

In November 2016, the UN Committee on the Rights of Persons with Disabilities (UNCRPD) wrote in a report "The UN said the government should conduct a cumulative impact assessment; one that measured the effect of all welfare reforms since 2010 relating to three UNCRPD points: Article 19, the right to live independently and be included in the community; then Article 27, the right to Work and employment, and Article 28, the right to an adequate standard of living and social protection."

Yet most organisations required to provide this information are unable to because it would expose the true level of genocide < EXHIBIT 3 > (no response by submission) < EXHIBIT 4 >.

Then key policy documents disregard or are institutionally indifferent to persons with disabilities < EXHIBIT 5 >< EXHIBIT 7 >. Even the words 'disability' and 'disabled' have been removed from all these strategic policies.

#### Hostile Environment

This communication from the Ministry of Justice identifies the hostile environment for persons with disabilities. (available at <a href="https://www.cps.gov.uk/legal-guidance/disability-hate-crime-and-other-crimes-against-disabled-people-prosecution-guidance">https://www.cps.gov.uk/legal-guidance/disability-hate-crime-and-other-crimes-against-disabled-people-prosecution-guidance</a>)

#### "Common Factors in Disability Hate Crime

When building cases, it may assist prosecutors to be aware of a number of common features in disability hate crimes:

- Incidents escalate in severity and frequency. There may have been previous incidents, such as: financial or sexual exploitation; making the victim commit minor criminal offences such as shoplifting; using or selling the victim's medication; taking over the victim's accommodation to commit further offences such as taking/selling drugs, handling stolen goods and encouraging under-age drinking.
- Opportunistic criminal offending becomes systematic and there is regular targeting, either of the individual victim or of their family/friends, or of other disabled people.
- Perpetrators are often partners, family members, friends, carers, acquaintances, or neighbours. Offending by
  persons with whom the disabled person is in a relationship may be complicated by emotional, physical and
  financial dependency and the need to believe a relationship is trusting and genuine, however dysfunctional.
  Where perpetrators are partners, or live with the disabled person and are either members of the same family
  or have previously been partners, the offence of Controlling or coercive behaviour may apply: see legal
  guidance on Controlling or Coercive behaviour in an Intimate or Family Relationship.
- Carers, whether employed, family or friends, may control all or much of the disabled person's finances. This provides the carer with opportunities to abuse, manipulate and steal from the disabled person.
- There are a number of common triggers for crimes against disabled persons, for example: access or equipment requirements, such as ramps to trains and buses, can cause irritability or anger in perpetrators; perceived benefit fraud; jealousy in regard to perceived "perks", such as disabled parking spaces.
- Multiple perpetrators are involved in incidents condoning and encouraging the main offender(s) for example, filming on their mobile phones and sending pictures to friends or social networking sites.
- False accusations of the victim being a paedophile or "grass".
- Cruelty, humiliation and degrading treatment, often related to the nature of the disability: for example, blindfolding someone who is deaf; destroying mobility aids.
- Barriers to, and negative experience of, reporting to criminal justice agencies, which leads disabled people to feel that they are not being taken seriously.
- Disabled people have a tendency to report incidents to a third party rather than to the police."

Interestingly similar controlling or coercive behaviour in an intimate or family relationship is being used by the ruling state party to abuse person with disabilities.

The option for a person with disabilities to use a representative or advocate has also been removed by the state party <<u>EXHIBIT 8</u>>.

#### Conclusion

Disability genocide and other unlawful behaviour by the ruling state party is a deliberate strategy operating throughout departments. Welfare communication is a good example of this as persons with disabilities are unable to communicate with departments as this is 'not possible'. Communication is restricted to specific functions only and discussion outside of this context is not allowed.

Government contractors such as Capita are able to coordinate abuse of persons with disabilities using multiple business operations such as: TV Licensing, energy, policing, health, education and many other sectors.

Applications for state disability support now includes taking legal action against the state as part of the claims process. The party officials justify this disability genocide by providing large financial numbers and slogans like 'tough choices'.

Party officials responsible:
Theresa May MP
Ian Duncan Smith MP
David Cameron
George Osborne
Damian Green MP
David Gauke MP
Justin Tomlinson MP
Penny Mordaunt MP
Esther McVey MP
Sarah Newton MP, Minister for Disabled People, Health and Work
Baroness Williams of Trafford, Minister for Equalities
Jackie Doyle-Price MP, Parliamentary Under Secretary of State for Mental Health and Inequalities
Heather Wheeler MP, Parliamentary Under Secretary of State for Housing and Homelessness
Nadhim Zahawi MP, Parliamentary Under Secretary of State for Children and Families
Nusrat Ghani MP, Parliamentary Under Secretary of State for Transport
Richard Harrington MP, Parliamentary Under Secretary of State, Minister for Business and Industry

Oliver Dowden CBE MP, Parliamentary Secretary (Minister for Implementation)

Elizabeth Truss MP, Chief Secretary to the Treasury