

How beneficial is work-related activity for one's mental health? A thematic analysis of experiences of conditionality in receiving employment and support allowance among disabled people placed in the work-related activity group.

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Table of Contents

| | |
|--|----|
| Acknowledgments | 2 |
| Abstract..... | 7 |
| 1. Introduction Chapter..... | 9 |
| 1.1 Chapter Summary | 9 |
| 1.2 Development of Welfare Policy and Reform: 1600's-Present Day..... | 9 |
| 1.3 Dominant Ideology and Discourses within Welfare Policy and Reforms | 11 |
| 1.4 Employment and Support Allowance Work-Related Activity Group, Conditionality and Sanctions | 15 |
| 1.5 The Role of Psychology Within Welfare Reform: Psycho-Compulsion | 18 |
| 1.6 Work and its Relationship to Psychological Wellbeing | 20 |
| 1.7 Biopsychosocial Model vs the Social Model of Disability..... | 22 |
| 1.8 The Role of Community Psychology and Liberation Psychology..... | 26 |
| 1.9 Overview of Qualitative Studies Exploring Conditionality and Sanctions..... | 28 |
| 1.10 Current Research..... | 35 |
| 2. Method Chapter | 37 |
| 2.1 Chapter Summary | 37 |
| 2.2 Ontology | 37 |
| 2.2.1 Critical realist philosophy. | 37 |
| 2.2.2 Critical theory paradigm..... | 39 |
| 2.2.3 Alternative ontological positions..... | 40 |
| 2.3 Epistemology | 40 |
| 2.4 Methodology | 42 |
| 2.4.1 The need for a qualitative methodology..... | 42 |
| 2.4.2 Thematic analysis. | 43 |
| 2.4.3 Ensuring a credible methodology..... | 43 |
| 2.5 Researcher Position Statement..... | 45 |
| 2.6 Participant Recruitment..... | 47 |

| | |
|---|----|
| 2.7 Setting | 47 |
| 2.8 Research Procedure..... | 48 |
| 2.9 Measures | 48 |
| 2.10 Sample..... | 50 |
| 2.10.1 Sample size..... | 50 |
| 2.10.2 Inclusion and exclusion criteria..... | 50 |
| 2.11 Analysis..... | 51 |
| 2.12 Ethical Considerations | 52 |
| 2.12.1 Ethical approval..... | 52 |
| 2.12.2 Participant consent. | 53 |
| 2.12.3 Anonymity and confidentiality..... | 53 |
| 2.12.4 Managing possible distress..... | 53 |
| 2.12.5 Impact on researcher. | 54 |
| 2.13 Dissemination | 55 |
| 3. Results Chapter..... | 56 |
| 3.1 Chapter Summary | 56 |
| 3.2 Demographic Information..... | 56 |
| 3.3 Analysis..... | 57 |
| Table 1. Themes and sub-themes from the thematic analysis | 58 |
| 3.4 Themes and Sub-Themes | 60 |
| 3.4.1 ESA WRAG: the good, the bad and the ugly..... | 60 |
| 3.4.1.1 “Time to get well”. | 60 |
| 3.4.1.2 “A convenient slot to get people off benefits”..... | 61 |
| 3.4.1.3 “I don’t quite understand”. | 63 |
| 3.4.2 Ruled by conditionality. | 65 |
| 3.4.2.1 “Beat the competition, promote yourself”..... | 65 |
| 3.4.2.2 “I don’t want to rock the boat”. | 67 |

| | |
|---|----|
| 3.4.2.3 “I felt under control”..... | 68 |
| 3.4.3 Sanctions and suicidality..... | 69 |
| 3.4.3.1 “When your mental health disappears overnight”..... | 69 |
| 3.4.3.2 “It’s black and white”..... | 71 |
| 3.4.4 The importance of relationships..... | 71 |
| 3.4.4.1 “The work advisors are pretty decent”..... | 72 |
| 3.4.4.2 “He didn’t quite understand”..... | 72 |
| 3.4.5 Adaptation and defences..... | 73 |
| 3.4.5.1 “I’m an adult, I’m capable”..... | 74 |
| 3.4.5.2 “Your whole life depends on it”..... | 75 |
| 3.4.5.3 “I’m a bit of a lost cause”..... | 76 |
| 3.4.6 Power and politics..... | 78 |
| 3.4.6.1 “Work or die”..... | 78 |
| 3.4.6.2 “Government is trying to pressurise you”..... | 79 |
| 3.4.6.3 “Divide and rule”..... | 80 |
| 3.4.7 Fighting back..... | 82 |
| 3.4.7.2 “Co-operating for the common good”..... | 83 |
| 3.4.7.3 “These people tried to support me”..... | 83 |
| 3.4.8 Workplace values..... | 84 |
| 3.4.8.1 “Low paid, precarious work”..... | 85 |
| 3.4.8.2 “They will exclude you at once”..... | 86 |
| 3.4.8.3 “I miss working and miss being strong”..... | 89 |
| 4. Discussion Chapter..... | 91 |
| 4.1 Chapter Summary..... | 91 |
| 4.2 Summary of Findings..... | 91 |
| 4.2.1 ESA WRAG: the good, the bad and the ugly..... | 93 |
| 4.2.2 Ruled by conditionality..... | 95 |

| | |
|---|-----|
| 4.2.3 Sanctions and suicidality..... | 96 |
| 4.2.4 The importance of relationships..... | 97 |
| 4.2.5 Adaptation and defences..... | 99 |
| 4.2.7 Fighting back..... | 104 |
| 4.3 Critique and Directions for Future Research..... | 107 |
| 4.3.1 Strengths..... | 107 |
| 4.3.2 Limitations..... | 109 |
| 4.4 Implications..... | 112 |
| 4.4.1 Wider Implications..... | 112 |
| 4.4.2 Clinical implications..... | 114 |
| 4.5 Self-Reflexive Comments..... | 120 |
| References..... | 126 |
| Appendices..... | 140 |
| Appendix A: Participant information sheet..... | 140 |
| Appendix B: Participant information sheet, easy-read version..... | 143 |
| Appendix C: Participant consent form..... | 150 |
| Appendix D: Participant debrief resource sheet..... | 152 |
| Appendix E: Interview topic guide..... | 153 |
| Appendix F: Example of coded transcript..... | 154 |
| Appendix G: Key used for code during data analysis..... | 155 |
| Appendix H: University ethical approval letter..... | 156 |
| Appendix I: Two ethics amendments approval letters..... | 157 |

Abstract

This research begins with an introduction to the history of welfare and reforms in the U.K., related to political, societal and ideological structures. It highlights the link between work and mental health. This is considered through a psychological lens, by discussing the debate between Waddell and Aylward's biopsychosocial model versus the social model of disability and how ideas from community and liberation psychology can be applied to the current research. A brief overview of the literature is also discussed.

This research aimed to explore the experiences of claiming benefits, conditionality and sanctions for those who had been placed within the Employment and Support Allowance Work-Related Activity Group. It also aimed to explore concepts of employment in this sample.

This research took a critical realist ontological position and a contextualist epistemological position. Semi-structured interviews were conducted with 15 participants, who were recruited through an organisation which works with deaf and disabled peoples' organisations. Interviews were analysed using thematic analysis.

Eight themes (and 22 sub-themes) were constructed: ESA WRAG: the good, the bad and the ugly; ruled by conditionality; sanctions and suicidality; the importance of relationships; adaptations and defences; power and politics; fighting back; workplace values.

Results are discussed in the context of historical, social, ideological and political power structures as it is argued that the individual cannot be separated from their environment. There is further exploration of how participants' mental health is impacted by their experiences, which is linked to theory and previous research. Strengths and limitations, dissemination and the researchers' reflections are discussed as well as clinical

implications of the findings, which provides specific examples of implications linked to the findings.

1. Introduction Chapter

1.1 Chapter Summary

This chapter describes the history, ideology and concepts of work in relation to the development of welfare policy and reform in the United Kingdom (U.K.), and considers the impact on mental wellbeing. It introduces and defines concepts of Employment and Support Allowance (ESA), conditionality and sanctions, which the current research will focus on. It links this with psychologically informed thinking in relation to vulnerable and discriminated against groups, through the use of models of disability and community and liberation psychology principles. An overview of the literature within this topic area will follow with a conclusion on the focus of the current research and its aims.

1.2 Development of Welfare Policy and Reform: 1600's-Present Day

Current U.K. welfare policy developed from the Poor Law of 1601, which grouped people based on their ability to work. Work and punishments (for non-compliance) were made compulsory for those who were believed to be able to work (Beresford, 2016). The Poor Law and future policies were based on two main values. The first was “less eligibility”: living conditions for those supported by the government should be worse compared to those who were supporting themselves. The second was “deterrence”: to deter re-seeking of support (Fraser, 2010). In 1834 the New Poor Law was developed, further magnifying the divide in society by placing the poor and unemployed in asylums, workhouses and institutions. In 1869, welfare policy was shaped by key principles including the promotion of self-help and investigations to identify the “underserving” (Beresford, 2016). The label of the undeserving poor and the use of punishment to deter dependency is still prevalent in today’s welfare policies.

In 1942 the Beveridge report significantly shaped social policy and included

national insurance contributions as a financial safeguard during sickness, unemployment and retirement (Kynaston, 2008). Beresford (2016) highlights how the report defined problems as social and the government was responsible for those most in need. However, from the late 1970's Thatcherism, was applied to welfare policies, promoting individual responsibility and accountability for unemployment. "Means-testing" gained public support to deter fraudulent claims (Beresford, 2016, p159). In 1998, the New Labour government constructed the "work-first" discourse (Fletcher & Wright, 2017) and contracted private companies to enforce work training schemes and activities for the long-term unemployed. Southwood (2011, p49-51) notes how such "work-first" strategies reduce the claimant to personality traits (based on human capital) to be fixed.

The coalition government of Liberal Democrats and Conservatives which held power from 2010-2015 capped both the amount of benefit individuals could get and the government budget allocated to welfare (Tyler, 2013). These decisions were defended through the media by attacking claimants as fraudulent and falsely promoting independence and equality (Beresford, 2016), in effect denying the right to any ordinary dependency (Bell, 1996). A study by Geiger, Bell and Gaffney (2012) analysed media coverage between 1995-2011. They found, stigmatisation of benefits claimants grew rapidly under the coalition government. During this time the dominant narrative introduced the terms "malingering" and "benefit scrounger".

In 2012 the U.K. government produced the Welfare Reform Act (2012), which replaced Incapacity Benefit by Employment and Support Allowance (ESA), which is financial support for those who are unable to work due to illness or disability. To claim ESA one must undergo a work capability assessment (WCA) and claimants are then placed into one of two groups: work-related activity group (WRAG) or support group (SG) (Department for Work and Pensions, 2012). Since 2012, the receipt of ESA for

those in the WRAG is time-limited to 12 months (Kennedy et al, 2016). These changes were based on the Wisconsin Model of Welfare Reform which was employed in the U.S.A. and embraced by the coalition government in the U.K. to reduce welfare expenditure and unemployment. This model places conditionality and self-sufficiency at its centre and aims to reduce dependency through caps and time limits; ideas which have been carried through from the Poor Law. From April 2017 the Welfare Reform Act (2016) legislates that any new claimants placed in the ESA WRAG will receive the same amount of money as those claiming Job Seekers Allowance (JSA) (HM Treasury, 2015), a decrease of approximately £28 a week. In 2015/2016 approximately 2.5 million people in the U.K. were in receipt of benefits, primarily ESA, costing approximately £14.7 billion (Kennedy et. al, 2016). Although the term ‘cost’ implies that the economy faces a financial loss, an alternative perspective would be to consider that this industry is ‘worth’ that same amount. This would be in terms of viewing the benefits system as a business in itself, where companies responsible for carrying out assessments, and recruiting and employing job advisors and work coaches can profit from the benefits system, for example through contracts and commission.

This historical and political context to welfare policy is shaped by ideas of self-reliance, labelling and emphasis on deterrence and punishment and at the expense of social responsibility and collectivist approaches.

1.3 Dominant Ideology and Discourses within Welfare Policy and Reforms

To recognise ideas and narratives which are under-represented within welfare policy one must first highlight the dominant ideology and discourses which have taken centre stage over time. Neoliberal discourse was generated in the 1980’s in the U.K. under the Thatcher government, and stated that poverty was due to individual factors rather than social and environmental influences and this ideology continues to the present

day (McKenzie, 2017). This government developed a dominant narrative stating that only the individual could bring themselves out of poverty by addressing factors within themselves, similar to Smail's (1993) concept of "magical voluntarism", which is a critique of this ideology. This meant that socialist and collectivist ideas were undermined and concepts of self-sufficiency and personal gain were promoted (Smail, 1993).

In 2010, the U.K. was the fourth most unequal country (out of developed countries) (Wilkinson & Pickett, 2010) and Stiglitz (2013) notes that in such unequal societies, political policies and the media maintain the level of inequality. Marks et al (2017) found that benefits claimants felt stigmatised due to the media portrayal of them. Mills (2017) highlights the importance of analysing how media coverage can contribute to stigmatisation. In her study she found newspaper reports of 30 suicides (2009-2015), which were linked to welfare reforms, highlighted individual factors associated with the deaths, ignoring social or environmental factors. She also found the families of the deceased internalised labels such as "worthy" reinforcing such stigma and divisions. Within the U.K. austerity policies have been upheld through the dominant discourse of "benefit scroungers" since the recession of 2008, further promoting the neoliberal ideology that individuals are responsible for using up limited resources and therefore cuts to welfare are necessary. This effects how society sees the government as serving the larger public good, rather than the "shirkers". Therefore, power and coercion are used to reinforce dominant ideas of truth and continue to suppress alternative realities (Smail, 1993).

Neoliberal ideology creates a society that feels under attack: an "us and them" divide. This is exaggerated by competition for material goods (Paxton, 2017) where individuals can only identify in concrete ways with their groups, creating "social distance" (Stiglitz, 2013, p.200). Wilkinson and Pickett (2010) summarise how studies

have shown that individuals living in materially wealthy countries felt less focus on community and collectivism and more focus on material gain. These concepts of division and competition then reinforce the move towards individual responsibility and away from social responsibility. The early divides between the classes resulted in fear, paranoia and suspicion which manifested among the wealthy and middle classes towards the poor (Beresford, 2016; Fromm, 1995). This means the realities of the others' lives are not perceived accurately, and currently the dominant discourse of "benefits scroungers" could be viewed as such a group. By dividing society (through highlighting material differences), less time is spent in the company of those who may be dissimilar resulting in a lack of empathy for those in the out-group (Wilkinson & Pickett, 2010). This sense of suspicion is present in conditionality, whereby claimants are required to account for how their time is spent. Such suspicion and lack of dialogue between groups can eliminate the possibility of discovering alternative truths and sharing of common values.

The use of language can also de-skill individuals and take away their strengths as noted by Southwood (2011) who provides an example from a study conducted in the United States by Korteweg et al (1999) looking at unemployed mothers. He highlights how the mothers were labelled as unemployed rather than full-time mothers. The skills necessary to be a mother are undermined, and individuals are instead viewed in terms of business and capital. The way that business culture uses language to reduce complex individuals into cost and profit can also impact on those who are in receipt of benefits, who may be seen as a cost (Smail, 2005). This simplification of the individual diverts attention away from a complex and connected human being with morals and values and the individual may internalise the concepts of cost and benefit, causing mental distress and feeling like a failure.

In his book *The Welfare State*, Adam Perkins (2016, p.37) separates individuals

into two groups based upon the Big 5 Personality traits: “high employability” (those who score highly on personality measures of agreeableness and conscientiousness) and “employment resistant” (those who score low on these two measures). He describes highly employable individuals as “polite and cooperative” with high levels of motivation towards their work, whereas employment resistant individuals have low motivation and are deemed to be uncooperative. Another way of considering this is that those who Perkins views as employment resistant may in fact be creative, flexible and unique in their approach to what they view as work and employment. Their low agreeableness may in fact be a challenge to the negative aspects of work (such as lack of control/ choice, low job security and low wage). Some individuals in the ESA WRAG can be seen as neuro-diverse (i.e. have learning difficulties or mental health support needs) and Perkins’ idea of employability would mean that neuro-diverse individuals could not conform to such a concept due to their impairments. What can further impact on ones’ mental health is the use of punishment and reward to secure the happiness of some groups over others. The use of punishment is supported by Perkins (2016, p.32) who states that individuals with an “employment resistant personality profile” will only be compliant if faced with the impact of poverty.

Through examining the ideology, use of language and divisions within society we can see how these impact on a sense of self, both as an individual and as a member of that same society which is seen as rejecting. This further creates negative views towards those who are already vulnerable and further marginalises them. Opportunities for enquiring into alternative truths can help to develop an alternative reality; that of those who are discriminated against in society.

1.4 Employment and Support Allowance Work-Related Activity Group, Conditionality and Sanctions

Definitions of terms related to the current research and their relevance within the current political sphere will be discussed. ESA is a form of income to cover daily living costs for those unable to work due to a health condition (Kennedy et al, 2016). To be placed in the ESA WRAG claimants must first undergo the WCA, which assesses ones' ability to be able to be in employment. The WRAG is for claimants who the Department of Work and Pensions (DWP) consider (following a WCA) to be able to take up employment in the near future and begin work-related activities. Barr et al (2015) found that undergoing the WCA reassessment resulted in increases in suicides (5%), mental health problems (11%) and anti-depressant prescriptions (15%) across England. Further evidence highlighting the detrimental effects of the WCA comes from the research of Kaye, Jordan and Baker (2012) who describe an increase in stress and worsening health due to the WCA and 87% of welfare advisors believed that the WCA process had a negative impact on claimants' health. Assessments led to disabled people feeling fear, anxiety, distress, experiencing suicidal thoughts and becoming isolated due to benefit cuts. Further qualitative research by Earl (2015) found that participants felt disempowered, shamed, stripped of their individuality and experienced psychological distress by undergoing the WCA process.

The term conditionality is defined by the DWP (2018) as “work–related things an eligible adult will have to do” in order to claim benefits. When this definition is applied to the real-world this means that those in the ESA WRAG will need to work with staff in the Job Centre Plus to create a claimant commitment setting conditions for receipt of ESA. Conditionality can involve regular interviews with Job Centre Plus work coaches, attending training, completing work experience, applying for jobs, attending interviews

and possibly taking up employment immediately (Citizens Advice Bureau, 2017). The DWP (2011) justify imposing such conditions by stating that they “... can help the claimant understand more about their career options and skills, increase confidence, and provide valuable experience that makes them more attractive to an employer.” Some qualitative research has shown this to be the case and participants have found aspects of conditionality to be helpful in terms of maintaining motivation and activity levels, increased confidence and enhancing their skills (Rolfe, 2012; Weston, 2012; Patrick, 2017). Such conditions are also supported by the international Organisation for Economic Co-operation and Development (OECD, 2010) which has also influenced welfare reform policies globally. However, the values and language used such as “attractiveness to an employer” echoes the capitalist ideology noted in the previous section whereby individuals are defined by what skills they can sell to businesses. If during regular reviews the conditions are not met then claimants are sanctioned and ESA can be reduced or suspended.

National and international evidence shows the most disadvantaged of claimants (such as people with learning difficulties, low levels of work experience and/or education and the homeless) are more likely to be sanctioned (Joseph Rowntree Foundation, 2014). A qualitative study conducted in Scotland by Marks, Cowen and MacLean (2017) found participants placed in the ESA WRAG were faced with unrealistic demands on their work-related activities which did not take into account their mental health. Furthermore, participants with less contact with the Job Centre and activity requirements felt fear and concern that they would be placed in the JSA group or be sanctioned. Geiger (2018) reports that since 2010 over a million benefit sanctions have been applied to disabled people. He also reports the findings of Hale (2014 as cited in Geiger, 2017), where work related activity did not meet the needs or was unsuitable for the capabilities of 500

claimants and that inappropriate conditions are placed on those with mental health or learning disabilities (Work and Pensions Committee, 2015 as cited in Geiger, 2017).

A personal and detailed account of conditionality is provided by Southwood (2011). He notes how the “Jobsearch diary” is similar to that of a child’s homework record and creates a sense of feeling patronised. His account of meeting with the Job Centre and justifying the use of his time creates “irrational guilt” and how labels such as fraudulent and lazy can be internalised as a result. A review of international evidence (including in the area of grey literature) concluded conditionality and sanctions leave disabled people in a worse position compared to non-disabled people, resulting in poor long-term employment rates, inappropriate and unrealistic conditions and poor job-matches. Sanctions can leave individuals in further poverty and this situation is worse for disabled people due to already present barriers. This increases anxiety, financial worries and has a negative impact on mental wellbeing (Geiger, 2017). Such experiences are also described in qualitative research by McNeill, Scullion and Stewart (2017).

In a recent response paper entitled “Green Paper – Improving Lives” (2016) the BPS highlights the distress and disempowerment that sanctions and conditionality causes. The rationale as to the continued use of sanctions is unclear as a report by the National Audit Office (NAO, 2016) found that the DWP has no conclusive evidence that sanctions are an effective deterrent to non-compliance with conditionality. The report also highlighted inconsistency in the use of sanctions, short-term benefits of moving individuals into employment following the use of sanctions, and a lack of evaluation by the DWP. However, the detrimental impact of sanctions is evidenced by a report by the Joseph Rowntree Foundation (2014). Geiger (2017) identifies national and international studies which highlight the negative long-term impact of sanctions, including an increase in crime rates and a decrease in job quality, with maintenance of short-term employment.

The findings outlined in this section provide some evidence for the negative impact of conditionality and sanctions and how such methods are framed within the neoliberal ideology.

1.5 The Role of Psychology Within Welfare Reform: Psycho-Compulsion

One would question how psychology is used as a tool to enforce the ideologies and welfare reforms described above. A need for psycho-compulsion strategies emerges due to the neoliberal ideology of individual responsibility and behavioural and positive psychology are crucial to this. For some individuals to receive benefits they must undergo psychological interventions which are designed to change attitudes and characteristics into positive and work-friendly ones. Future psycho-compulsion practices will include psychometric testing, assessments of resistance to work and attitude profiling. Individuals deemed to be “less mentally fit” will face coaching to change such characteristics (Friedli & Stearn, 2015). These labels and simplistic definitions of people produce the stigma and devaluation that disabled people experience within society.

Such psycho-compulsion practices reinforce the end goal as paid employment, leaving little room for alternative ideas of employment, instead focusing on increasing claimants’ levels of compliance and conscientiousness. Fromm (1955, p.164) argues such psych occupations are seen to be a “tool in the manipulation of men” with psych professionals defining what is “normal”, identifying what is wrong with the individual and advising them on how to change. Friedli and Stearn (2015) note that the use of positive psychology and psycho-compulsion through the form of positive texts and emails sent on a daily basis to some claimants can result in individuals feeling angry, depressed and ashamed. An example of this comes from the Improving Access to Psychological Therapies (IAPT) scheme which is used as a form of psycho-compulsion to increase return to work and was created by an economist in 2007: Richard Layard (Riddell, 2014).

This scheme has been applied to welfare reforms and since 2014, individuals have been threatened with sanctions after refusing to attend cognitive behavioural therapy (CBT) sessions (Davies, 2016). Davies shares his concerns about the effectiveness, ethics and validity of psychological therapy when coercion and threat are used as motivators for engagement. In line with the social model of disability, Wilkinson and Pickett (2010, p. 31-33) promote addressing and changing inequality rather than “mass psychotherapy”. A way to do this would be to assist the individual to identify the material circumstances which have led to positions of powerlessness rather than the use of CBT and the focus on the individuals’ perception of their situation (Smail, 2005).

Psychological coercion, within the context of welfare reform, is seen to involve two stages, both of which draw on neoliberal ideology. The first stage involves the use of CBT and psycho-compulsion strategies to get the individual to accept responsibility for their situation which is regarded to be due to a lack of effort and/or a lifestyle choice. The second stage involves psychological reform, through training and classes, which shapes the individual to be the right kind of person (optimistic, competitive, driven) with the right kind of aspirations (employed, materialistic, self-promotion) (Frayne, 2015). Related to the issues of conformity and difference, individuals who choose not to or are unable to conform are punished and this is what leads to mental distress which psychological therapies then attempt to address through looking at and trying to change individual factors (Smail, 1993).

It is therefore important for those in the psych disciplines to remain critical in their questioning of such strategies. By looking beyond such activities, one can question the impact and the outcome for those who are made to internalise and accept responsibility, disregard contextual factors and to reject difference.

1.6 Work and its Relationship to Psychological Wellbeing

Some philosophies associated with work and economy defined business as working for man rather than man working for it. Social balance was a priority and economic progress was unhealthy if it negatively affected any one group (Fromm, 1955). However, as capitalist societies have developed, the employee has lost the ability to “think and move freely”, to be creative, curious and in control. This results in a form of “psychic regression” where the employee feels threatened and will respond with either “apathy or destructiveness” (Fromm, 1955, p.122). This results in the worker being “part of a machine rather than its master as an active agent”, (p.175). As evidence for the above theories, Fromm (1955, p.280) describes the findings of a Harvard study from 1952 conducted by Walker and Guest. The findings show that employees whose jobs involved “high mass production” had higher levels of absenteeism compared to employees whose jobs had “low mass production”. He also reports the results of an experiment by Mayo which shows that absenteeism, fatigue and low productivity are caused by alienation of the employee. When employees were able to have a voice and be part of the whole work situation in a meaningful way they had a more positive relationship to their work.

More recently, a government consultation paper of work, health and disability (DWP & Department of Health, 2016) cites work as being good for mental health and wellbeing and that the government are keen to increase support for claimants with regards to increasing confidence and motivation to seek employment. In the “Improving Lives” response paper (BPS, 2016), the BPS and associated bodies strongly urge the DWP to promote good quality employment rather than “compulsory short-term quick fixes” which they suggest can lead to further difficulties for those with pre-existing mental health issues and an occurrence of mental health problems for those who may not have experienced such problems before. In this report, they also identify international studies

which highlight employment factors which can negatively affect mental health (Butterworth et al, 2013; McManus, Butterworth, Leach and Stansfield, 2013; Yoo et al, 2016 as cited in BPS, 2016). These include high job insecurity, low pay, high job demands, task complexity and lack of control. These factors were associated with more mental health difficulties in participants compared to unemployment. The Whitehall I and Whitehall II studies (Marmot, Rose, Shipley & Hamilton, 1978; Marmot et al, 1991) showed that low job status, lack of control and job stress can lead to various physical health conditions with long-term consequences.

In 2011, employment rates were at a low of 70%, however, currently employment rates are at an all-time high of 74.6%. The labour market structure has changed rapidly in this time. Compared to 13% in 2007, currently 15% of the workforce are defined as self-employed and since 2007 there has been a 13% increase in the number of self-employed part-time workers. Zero-hour contracts (or similar) are currently held by 5% of the workforce (Dobson, 2017). McKenzie (2017) highlights the work of Shildrick, MacDonald Webster and Garthwaite (2012) who have found that low pay and zero hours contracts result in low job security and therefore poverty in the U.K and these are associated with poor health. In fact, since 2012 stress has been the leading cause of workplace absence (Davies, 2016). However, work which is regarded as good and can promote well-being includes the following: job security; safety in the workplace; a sense of fairness; inclusive work practices; work as meaningful; level of control and choice; opportunities for development (Coffey and Dudgill, 2013 as cited in Beresford, 2016).

There is an argument that the consequences of worklessness (such as poverty, isolation and stigma) lead to poor health, rather than unemployment itself (Frayne, 2015). Alternatives to conformity, such as creativity, difference and flexibility are under-valued but which may be necessary for disabled people in the workplace. A form of

discrimination was highlighted by Kaye, Jordan and Baker (2012) who found that 72% of unemployed disabled respondents reported that employers' attitudes towards their conditions made securing work difficult. Also, 81% of employed disabled respondents reported being limited in their ability to complete a range of different tasks as part of their job due to barriers that did not take into account their disability.

Interestingly, some of these ideas date back to the time of Freud. Wollheim (1991, p.226) quotes Freud as noting the divide in society, where one group will only be satisfied due to the suppression of another group. He goes on to describe how the suppressed group "will develop an intense hostility towards a culture whose existence they make possible by their work, but in whose wealth they have too small a share". Freud describes how such hostility is latent within the social structure, but finishes by stating: "It goes without saying that a civilization which leaves so large a number of its participants unsatisfied and drives them into revolt neither has nor deserves the prospect of a lasting existence".

The fact that so many studies have highlighted the changing face of work and how this impacts negatively on an individuals' mental and physical wellbeing should be taken into account when considering concepts such as conditionality. It appears that quality of work is replaced by quantity and there is a drive to show that unemployment is low due to stricter sanctioning and by moving people off benefits, but one would question at what cost? Clearly the above studies highlight that quality in the workplace has been lost, resulting in increased stress, physical and mental health difficulties, low motivation and an overall sense of unease.

1.7 Biopsychosocial Model vs the Social Model of Disability

The Waddell and Aylward biopsychosocial model was developed by Waddell an orthopaedic surgeon and Aylward, a chief medical officer for the DWP. The model shifted

away from the original Engell biopsychosocial model which was anti-reductionist, and argued for an approach that was holistic and considered the impact of different systems on mental distress. Engell developed the model to help provide explanations for mental distress, however Waddell and Aylward turned this into a model of causality, based on individual factors such as poor work values or negative attitudes (Shakespeare, 2016). This model promotes the use of both medical and psychological interventions by placing responsibility in the individual ignoring political, environmental and social factors (Shakespeare et al 2016) and conceals various forms of “exploitation and deprivation” (Smail 1993, p.84). They use the model to divide those with severe conditions and those seen to have common conditions, reinforcing the “deserving” and “undeserving” rhetoric discussed earlier (Shakespeare, Watson & Alghaib, 2016). Waddell and Aylward also use language in a way reinforces the idea that the difficulty lies within the individual and their relationship with their impairment, which is in stark contrast to the social model of disability espoused by Mike Oliver (1996) and others. Furthermore, they appear to normalise physical difficulties such as chronic pain, cardio-respiratory problems and mental illness, suggesting these to be so common as not requiring social security support. This invalidates the experience of the disabled person and their impairment.

One could argue that what underlies the Waddell and Aylward biopsychosocial model is a position which further separates and devalues what disabled people have to offer and insists on conforming to work norms which can have further detrimental effects on one’s physical and mental health. Specifically, with regards to disabled people within the ESA WRAG, the model defines work-related activity as a form of “support” (Shakespeare et al, 2016). This is an example of more powerful structures defining crucial concepts such as support, leaving little agency to the disabled person to seek support in a way that would be most helpful for them. If said support is not taken up then

the individual is seen as difficult and lacking in work values and ethics. Burton and Kagan (2006) warn that this model and concept of disabled people is a false reality. They advise that current policies based on an idealised and simplistic view of an individual (with the idea of least impairment in mind) do not consider complex health needs (both physical and mental), which is closer to lived reality.

An example of the negative application of the Waddell and Aylward biopsychosocial model comes from Southwood (2011, p.53-54) who described how the head of one of the private companies who are paid by the government to run work activity courses described attendees as “aggressive, with low self-esteem and low confidence”. Southwood notes how this stigmatizes individuals who are viewed as “mentally weak and a physical threat”. The perceptions of claimants does not consider the relational frame and how these same individuals may present in other contexts, that are perhaps less threatening and judgemental. This shows a lack of willingness to be reflexive in how they relate to individuals and how and why those individuals may be relating to them in the way they are. Therefore, one could argue that the factors present in monthly or weekly claimant commitment meetings (such as stigmatisation, lack of power and control, focus on problems, lack of support) is not a fair representation of the individual compared to if they were in a different empowering and supportive context.

As an alternative, many disabled people have called for a social model of disability which states that the organisation of society and obstacles within it excludes and discriminates against them, causing disability. This model considers individual differences, and argues that trying to change the individual further discriminates and excludes them (Oliver, 1996). If we consider the conditions placed on ESA WRAG claimants this intervention goes against what the social model of disability stands for, by enforcing specific work-related activity which does not incorporate flexibility according

to each persons' needs, strengths and barriers. Conditionality assumes that those who are not in work do not have the right attitude and that the threat of sanctions, monitoring and a strict regime of improving one's ability to sell oneself will result in an improvement of ones' economic position within society and ones' mental and physical health.

Oliver (as cited in Beresford, 2016) makes a distinction between an impairment (difficulty with functioning of a limb or sense) and disability (the response of society towards people with such impairments, such as discrimination and barriers imposed). This model states that the main cause of disability is exclusion, discrimination and other negative responses from society towards the disabled person. Barriers are manifested through negative attitudes and beliefs towards disabled people and through environmental factors. The social model of disability has enabled disabled people to re-gain a sense of equality and confidence and to diminish feelings of guilt.

By removing discriminatory attitudes, physical barriers and communication barriers and increasing appropriate support the social model of disability can be promoted (Inclusion London, 2015). A document which further promoted a social model of disability was published by the BPS's Division of Clinical Psychology in 2014. This promoted a social materialist view of distress and highlighted that social vulnerabilities, issues of power and resource availability, social inequalities, lack of opportunities and the interaction between biology and social circumstances are important factors to consider. More recently the BPS has released the Power, Threat Meaning framework which is more in line with a social model of disability and appears to attempt to balance both social barriers but also individual factors (Johnstone & Boyle, 2018). This framework may provide a helpful way in which clinical psychology can work with disabled people by promoting an alternative understanding of experience which takes context into account and moves away from one-dimensional views of behaviour. What is most applicable from

this framework is the fact that difference from cultural and societal norms and belief systems can impact on how any one person copes and it is the exploration of this that is at the forefront of understanding mental distress. This exploration can be achieved through dialogue with those most affected (Johnstone & Boyle 2018). The framework outlines four main areas for exploration: how power operates in ones' life considering political, economic, ideological, social and cultural influences of power; the threat of this power in ones' life with emphasis on the emotional impact and consideration of biological factors; how the impact of power and threat shape ones meaning by considering dominant discourses; how one responds to the threat through physical reactions and language in order to develop some form of survival strategy (Johnstone & Boyle, 2018).

Johnson et al (2012) recognise that mental disorders and distress may be in part due to social ranks and where one is placed within social hierarchies. Relative poverty can also cause distress due to comparisons which creates a sense of being inferior and triggers anxiety with regards to status, resulting in depression (Davies, 2016). These social factors play an important role in understanding the development, maintenance and increase in mental and physical health difficulties. What is highlighted is the important role that social factors play in the development of mental distress and the explanatory power of the social model of disability.

1.8 The Role of Community Psychology and Liberation Psychology

A suggested way to apply the social model of disability to welfare reform and to promote an understanding for the barriers that disabled people face would be through the use of community psychology praxis. Community psychology is defined as a collaborative process that considers contextual factors of power and unequal political structures. It aims to work with groups of marginalised people with a focus on strengths and social action (Kagan, Burton, Duckett, Lawthom & Siddiquee, 2011). An example of

this is from a paper by Taggart, McCauley and Smithhurst (2017) and the application of a community psychology model, which focuses on social rather than individual factors, is used to explore fathers' experiences of public services. They discuss making social factors explicit and placing these at the forefront of formulation, so that new concepts of the self can be understood within the wider political and social context. They found that through this awareness there was scope for community action and participation in political areas. This is an idea that can be supported by psychologists through research such as this project hopes to do. Liberation psychology can be combined with community psychology in order to develop on both concepts to further work with oppressed groups. Burton and Kagan (2005) advise on working within a social remit rather than a mental health focus. Psychologists are therefore seen as a resource with knowledge of groups, organisations and research, developing these areas through interaction with the community and the marginalised groups.

Liberation psychology developed in Latin America during the mid-90's and was based on the ideas of Ignacio Martin-Baró and then Maritza Montero (Burton & Kagan, 2005). The context within which liberation psychology developed was based on people's experiences of civil war, repression and migrant groups in Latin America. Liberation psychology developed to address on-going problems within social psychology which included a lack of knowledge of social problems, problems with generalising social psychology research findings (studies were usually conducted with student populations in "artificial settings"), and a lack of acknowledgment of morality. This meant that liberation psychology could be applied both theoretically and practically when working specifically with marginalised and discriminated groups (Martin-Baró, 1994).

Liberation psychology is dynamic, involves different processes and is defined as a "movement" within this theory. Such a "movement" comes between the interactions of

two groups of people: those who are oppressed in some way (benefits claimants) and facilitators based on the periphery of the oppressed group (clinical psychologists). For these two groups to interact there needs to be an “active process of dialogue” for people to understand how they are oppressed (Montero & Sonn, 2009). Through this process new forms of action can be taken through the development of knowledge of ones’ past and options for the future (Burton & Kagan, 2005).

Liberation psychology critiques the individualistic focus of psychology in countries such as the U.K. and instead calls for a social approach, which emphasises conflict and power and how these are used to organise societies (Moane, 2003), which would counter the current neoliberal ideology of welfare reforms and promote the social model of disability. This shows how discrimination can occur through societal factors and how liberation psychology could be based on opening this dialogue with such groups.

1.9 Overview of Qualitative Studies Exploring Conditionality and Sanctions

To ensure that the primary researcher was aware of qualitative research in this topic area and so that the current research did not duplicate existing studies a broad review of qualitative research was undertaken. This review provides a simple description of the studies and the findings which relate to the current research followed by a general critique of the studies. Six articles were included in the review.

Some of the studies discussed how employment was experienced by participants (Weston, 2012; Reeve, 2017) and the results highlighted that participants shared their relationships and readiness to work and the costs and benefits of taking up work. All but one (Manji, 2017) of the studies included findings where participants either identified themselves as feeling positive towards gaining employment in the near future (Rolfe, 2012; Weston, 2012; Shefer, Henderson, Frost-Gaskin & Pacitti, 2016; Patrick, 2017; Reeve, 2017) or those who felt this was not part of their future plans (Weston, 2012;

Reeve, 2017). Both these positions related to experiences of their health problems and disabilities. Those who believed that employment was not currently a possibility felt that their health conditions were a priority due to the level of disruption it caused. They believed that focus needed to be on managing long-term and unstable health with the view that access to employment included barriers which would not consider such health factors (Weston, 2012; Reeve, 2017). Although they were aware of such obstacles, they still pursued work using their own strategies and using local community and social resources, but still prioritising their own health needs. This group tended to view conditionality as undermining of their own strategies and their sense of autonomy and choice was essentially taken away leaving them to feel de-motivated (Patrick, 2017; Shefer et al, 2016; Rolfe, 2012; Reeve, 2017). Specifically, they experienced conditionality as being unrealistic and ignoring barriers and disabilities (Patrick, 2017; Shefer et al, 2017; Weston, 2012, Rolfe, 2012; Manji, 2017; Reeve, 2017).

Those who felt positive about employment felt their health conditions were transitory and believed significant improvement was in the near future (Weston, 2012; Shefer et al, 2016; Patrick, 2017; Rolfe, 2012; Reeve, 2017). This group were generally in agreement with conditionality and described positive experiences due to increases in the following: success in finding work; activity; confidence; skills; social prospects (Weston, 2012; Rolfe, 2012; Reeve, 2017).

Participants appeared to experience employment as exploitative, lacking in job security and low paid with little understanding of the skills that the individual had (Rolfe, 2012; Patrick, 2017, Weston, 2012). This seemed to have the effect of increasing stigmatization and discrimination within already discriminated against groups (Rolfe, 2012; Patrick, 2017; Shefer et al, 2016; Weston, 2012). However, there seemed to be a strong work ethic among many of the participants from the studies reviewed and this was

evidenced through long-term histories of employment (Reeve, 2017; Rolfe, 2012; Patrick, 2017; Weston, 2012).

Conditionality was an aspect of most of the studies and it was viewed as either helpful or unhelpful (Rolfe, 2012; Weston, 2012; Patrick, 2017; Manji, 2017). There was an aspect of conditionality being used as a means to create sub-groups among claimants and of the findings related to conditionality being used to identifying those who were not being honest when claiming benefits (Weston, 2012). The studies all discussed how conditionality was seen as ignoring the barriers that vulnerable and disabled people face (Reeve, 2017; Manji, 2017; Shefer et al, 2016; Weston, 2012) which seemed to mirror similar barriers faced by disabled people within the job market (Manji, 2017). The focus on training courses and seeking employment was felt to divert attention away from barriers that disabled people face (Rolfe, 2012), perhaps reinforcing the Waddell and Aylward biopsychosocial model. Conditionality was also viewed as unsuitable according to their skills and health conditions and involving practical barriers (Reeve, 2017; Rolfe, 2012; Weston, 2012). This seemed to further exacerbate health conditions, and created a sense of uncertainty leading to increasing anxiety (Patrick, 2017; Weston, 2012). Participants also spoke about feeling threatened, controlled and intimidated (Manji, 2017; Rolfe, 2012; Patrick, 2017; Weston, 2012).

There was a feeling among participants that conditionality was veiled and they felt judged about their life choices and decisions (Manji, 2017; Patrick, 2017). There was also felt to be a lack of choice and control in what forms of conditionality were taken up by participants; what they felt they needed (Manji, 2017; Rolfe, 2012; Patrick, 2017; Weston, 2012). Participants highlighted that relational factors were important for them and this was lost because of the control and threat that conditionality brings (Rolfe, 2012; Patrick 2017; Weston, 2012). Furthermore, the control that came from external sources

(society, job advisors) seemed to be internalised and one study reported how participants increased their own self-monitoring and self-surveillance (Manji, 2017).

However, participants also believed there was a need for conditionality, perhaps a sense that participants wanted to continue to feel as though they were ‘earning’ in some way, rather than ‘taking’ (Reeve, 2017; Rolfe, 2012; Weston, 2012). Some spoke about the increase in confidence, activity levels and skills that conditionality brought (Rolfe, 2012; Weston, 2012; Patrick, 2017), but this was mainly relevant among participants who felt they had a sense of control over conditionality (Weston, 2012; Rolfe, 2012).

The experience of sanctions was reported in all the studies reviewed (Rolfe, 2012; Weston, 2012; Shefer et al, 2016; Patrick, 2017; Manji, 2017; Reeve, 2017). The findings highlighted the impact of sanctions, how participants made sense of being sanctioned and what feelings were elicited in them as a result of sanctions or from the possibility of being sanctioned. There was also a sense that sanctions were applied in a concrete way with little consideration for the complexity of participants’ lives.

Sanctions were seen as a punishment for those who did not conform to conditionality (Weston, 2012; Reeve, 2017) or who were not able to adhere to the unrealistic demands placed upon them (Reeve, 2017) and were not effective in ensuring compliance (Rolfe, 2012). Sanctions appeared to have a major impact on participants’ social and support systems (Shefer et al, 2016; Patrick, 2017; Rolfe, 2012), on their mental and physical health and on their ability to meet their basic needs of food and safety (Shefer et al, 2016) with long-term effects on pushing families into poverty (Patrick, 2017). Life appeared to become a matter of survival after being sanctioned and participants spoke about having to turn to crime to survive and gain access to essentials such as food (Rolfe, 2012; Patrick, 2017; Shefer et al, 2016). There was also an element of self-rationing where studies reported participants having to reduce their food intake

from three meals a day down to one (Shefer et al, 2016; Patrick, 2017). These rations impacted on participants' mental and physical health, leaving them sick and malnourished with significant weight loss (Shefer et al, 2016; Patrick, 2017). Some studies also reported increased levels of anxiety following sanctions, an increase in suicidal thoughts and a sense of insecurity (Weston, 2012; Shefer et al, 2016; Patrick, 2017).

The lack of financial security encouraged a further divide among participants who felt unequal within society (Patrick, 2017). Furthermore, sanctions appeared to impact on participants' support systems, friendships and family relationships as participants became increasingly dependent on such systems. This meant relationships broke down or became strained; in effect having to decide between losing the emotional and social support in favour of being able to meet their basic needs such as food and shelter (Shefer et al, 2016; Rolfe, 2012).

An aspect of the studies that was particularly prominent was the divisions and use of labels which were both experienced and reinforced by participants. The studies highlighted a conflict where conditionality and sanctions were seen as necessary and appropriate but for those who were seen as "work shy" or "scroungers" (Reeve, 2017; Rolfe, 2012; Shefer et al, 2016; Weston, 2012; Patrick, 2017). Participants were keen to separate themselves from such labels by discussing support for such workfare interventions, which seemed to voice their negative view of such people, but reinforcing the dominant discourse and media narrative, but also encountered internalisation of such labels (Reeve, 2017; Manji, 2017; Rolfe, 2012; Weston, 2012; Patrick, 2017). However, they also spoke about the stigma that they themselves faced from the media, society and their local communities, particularly due to being disabled and in receipt of benefits and this led some participants to limit their interactions with their local communities and self-isolate (Manji, 2017; Shefer et al, 2016; Weston, 2012; Patrick, 2017; Rolfe, 2012). Some

participants even reported facing discrimination, harassment and bullying (both physical and verbal) which linked to some of the barriers to gaining employment but also the sense of being harassed as part of conditionality and the bullying imposed on people through sanctions (Manji, 2017; Rolfe, 2012; Patrick, 2017).

A further area that was common in all studies was that participants felt they had to prove and exaggerate their impairments (Manji, 2017; Shefer et al, 2016; Patrick, 2017). The genuineness of their disability was questioned by advisors and assessors but exaggerating their illness was in conflict with their personal values (Manji, 2017; Shefer et al, 2016; Weston, 2012; Patrick, 2017). Most participants spoke about the “invisibility” of their impairment and having to magnify their difficulties must have been difficult to do especially when facing stigma and discrimination because of those same impairments (Manji, 2017; Shefer et al, 2016; Patrick, 2017).

The studies included in the review were evaluated using different qualitative methodology evaluative tools (Greenhalgh, 1997; CASP, 2002; Johnson & Waterfield, 2004) and the findings are described below.

The majority of the studies provide adequate information about their sample (Shefer et al, 2016; Patrick, 2017; Rolfe, 2012; Manji, 2017; Reeve, 2017) including the following: demographic information; impairments; benefits and employment history; qualifications; location and the relation to deprivation and the job market. The information provided about the samples helps to increase the quality of the research, improving on credibility and applicability. However, most of the reviewed studies seem to provide minimal information on recruitment processes (including inclusion/ exclusion criteria) (Rolfe, 2012; Manji, 2017; Patrick, 2017; Reeve, 2017). The lack of information about recruitment processes reduces transferability. Although all studies recruited participants who had experience of conditionality, none of the samples were recruited

solely from one particular benefits group and this could have impacted on the implications of the findings.

None of the studies described using respondent validation or triangulation as part of the analysis (Weston, 2012; Shefer et al, 2016; Patrick, 2017; Rolfe, 2012; Manji 2017; Reeve, 2017). Patrick (2017) describes the use of iterative processes but does not elaborate on this. This lack of information from the reviewed studies impacts on the credibility and dependability of the findings.

None of the studies (Weston, 2012; Shefer et al, 2016; Patrick, 2017; Rolfe, 2012; Manji 2017; Reeve, 2017) present any information on the position of the researcher, their relationship to the topic of research or any reflexivity. One could argue that because the studies are published in peer reviewed journals there is minimal scope for reflexivity to be discussed. However, this then means that truth value is lost as the context of the study is not made explicit.

All the studies provide helpful background information regarding social policies and welfare reforms and link these with the aims of their research ((Weston, 2012; Shefer et al, 2016; Patrick, 2017; Rolfe, 2012; Manji 2017; Reeve, 2017). However, Weston (2012), Shefer et al (2016) and Rolfe (2012) provide no information about the theoretical lens through which their studies were developed. Manji (2017) and Reeve (2017) also do not explain their rationale for using qualitative methodology or for their choice of analysis. The lack of information about decision making processes (such as theoretical lens, methodology used and choice of analysis) reduces dependability and auditability of the studies.

This review provides a broad overview of six qualitative studies which look at experiences of conditionality and sanctions. The findings of the studies highlight experiences and participant views on employment, conditionality, sanctions, impairments

and stigma. The general critique identified areas of strength among the studies such as providing contextual information relevant to the sample and explicitly describing the rationale for the methodology and choice of analysis. However, these strengths were not consistent across all studies. Furthermore, areas of improvement included a lack of respondent validation and triangulation processes used in the analysis stage and no information of the researcher position or reflexivity. In addition, most of the studies did not provide full information on recruitment processes. These areas for improvement can be thought about in application to the development of the current study.

1.10 Current Research

The current research aims to address gaps identified in the qualitative literature by focusing on recruiting participants from a specific population: individuals with experience of being in the ESA WRAG. The research aims to adopt principles of a joint liberation and community psychology approach to research. Specifically, Burton and Kagan (2009) argue for a “really social psychology”. This approach does not discount individual factors but crucially looks beyond this. However, they emphasize that such social factors need to consider the structure and ideology which shapes the wider society as well as interpersonal relations. Within the realms of the current research, this would mean considering the unconscious power structures and historical narratives to understand the experience of disabled people.

Burton and Kagan (2009) go on to identify 6 characteristics which define a “really social psychology”: “values based on equality and empowerment”; theoretical knowledge being constructed from the viewpoint of the oppressed; reality of a materially made world; aim to work alongside those oppressed through their journey of “social transformation”; historical knowledge of societies which are understood to be structured according to “power and wealth”; using a number of available resources to achieve its’

aims. This research aims to address all six of the above characteristics through its design, qualitative approach, aims and implications which are described below and in the next chapter. The research aims are as follows:

- To understand participants' experiences of being in the ESA WRAG.
- To understand participant's understanding and experiences of conditionality, including experiences of work-related activity.
- To understand participants' experiences of sanctions.
- To understand the physical, psychological, material, emotional and social impact of the above.
- To explore participants' views and perspectives on work/ employment, helpful and unhelpful aspects of it and alternative concepts of work/ employment.

By using a qualitative approach, the researcher hopes to draw on the subjective experiences of those most directly affected by welfare policies and reforms (Beresford, 2016). The researcher hopes to understand how materialist and neoliberalist concepts of work and welfare reform are made sense of by participants and how alternative truths and new meanings can be developed.

2. Method Chapter

2.1 Chapter Summary

This chapter details the ontological and epistemological positions of the current research and draws on the philosophical background to the critical realist position. It considers alternative positions arguing for a qualitative methodology and outlines the rationale for undertaking thematic analysis. The primary researcher reflects on her own position in relation to the development of the research topic. Areas related to recruitment, measures used, sample, research procedure, ethics and dissemination are detailed.

2.2 Ontology

The ontological position is based in philosophy and thought about in terms of “the form and shape of reality” (Guba & Lincoln, 1994) and what can be known (Pocock, 2013). This research takes a critical realist ontological position, whereby subjective experiences (and how we investigate and theorise these experiences) are based within some form of objective reality. This reality has been shaped over the years through social, political and economic lenses (Guba & Lincoln, 1994; Pilgrim & Bentall, 1999; Burr, 2003) and this position is considered to be dedicated to human emancipation (Bhaskar & Collier, 1998). Guba and Lincoln (1994) recognise that within this ontological position, it is believed that reality can never be fully known.

2.2.1 Critical realist philosophy. Critical realism is a philosophy based on the work of Roy Bhaskar (Bhaskar and Lawson, 1998), which developed as a critique to positivism. Bhaskar recognised that individuals experience the world around them as material beings in the presence of constant change, which means that history is transitory. From these ideas developed the concept of transcendental realism, where it is believed that knowledge accumulates but also takes shape through recognition of structures and powers brought into conscious attention. Bhaskar argued that to gain knowledge, one

would also have to understand, learn about and name the structures that knowledge is based within (Bhaskar & Lawson 1998).

This philosophical position is developed further by Archer (1998) when applied to the social sciences. She highlights the importance being based in the interactions between the researcher and the participants. She argues for the recognition of both “agency and structure” as being central to critical realism, placing emphasis on both the individual and on the collective. The structural factors can influence an individuals’ agency, either positively or negatively, and these structures may be unconscious. Archer (1998) argues that bringing these unconscious structures into awareness is what defines critical realism and provides the possibility to de-marginalise certain groups of people. The way an individual is positioned and what activities they take up form a pattern of social relations which can only be fully understood when considering the historical context.

Bhaskar and Collier (1998) explain the process of explanatory critique and how it is applied to the philosophy of critical realism: that values can be discovered by social science research. They argue that such explanatory critiques mean the uncovering of “false beliefs” (p. 389) which have led to discrimination, marginalisation and inequality of certain groups of people. This ontology then brings morality into social science research.

Dialectics was introduced into critical realist philosophy and this led to a focus on social and global power relations which Bhaskar and Noorie (1998) believe to be present in all social structures and which impact on agency. They go on to highlight that the silencing of certain ideas echoes a much more profound silencing in the history of a society.

2.2.2 Critical theory paradigm. According to Guba and Lincoln (1994) critical realism falls into the critical theory paradigm which is seen to be value-determined. They focus on the implications with adopting a critical theory paradigm. Each of the issues they describe will be discussed here briefly from the viewpoint of this paradigm and its link to the current research:

- Aim of enquiry: to critique historical structures which disadvantage benefits claimants and to consider changing these structures through research with those most affected by them.
- Nature of knowledge: knowledge is based on historical structures which can be transformed through research inquiry.
- Accumulation of knowledge: knowledge will continuously grow and reform through challenging of historical structures.
- Criteria for evaluating research: to place the research in the appropriate historical context (i.e. introduction chapter) and through knowledge gained from the research to result in change (i.e. dissemination).
- Role of ethics: requires the researcher to be explicit (i.e. reflexivity) and to foster change from historical structures which are based on ignorance and power.
- Voice of the researcher: the ability to transform and effect change through bringing historical structures into consciousness and working with those most affected by these.
- Implications for new researchers to the paradigm: to learn alternative views of science, whilst holding knowledge of other paradigms and to be informed of the context of the inquiry.

2.2.3 Alternative ontological positions. Critical realism is thought to be located at the mid-point of a philosophical spectrum, where social constructionism is at one end and positivism is at the other (Pilgrim and Bentall, 1999). The positivist ontological position states that what is being observed or measured can be done so objectively and results in one truth; a position which usually applies to quantitative methodologies (Miller, 1999; Bhaskar & Lawson, 1998). Beresford (2016) identifies that research which has formed the basis of social policies has prioritised and celebrated its positivist position, however with the consequence being that the priorities of those in power were placed above those who the policies would most affect.

A critique of positivism and quantitative methodology is provided by Guba and Lincoln (1994) who describe this approach as reductionist and lacking in context, meaning and application. They go on to address how scientific investigation can be enhanced by considering the following factors: that reality is shaped by a theoretical lens; that reality or truth can have multiple meanings; that such reality is shaped by values; that the researcher will interact with the research and the participant in ways that cannot be ignored.

At the other end of the spectrum lies social constructionism (which is also termed a relativist position) (Parker, 1999). This states that reality is made sense of through social discourse, history and interactions. The position emphasises the role of language in meaning making (Gergen, 1985). The position also holds the view that there are ever-changing multiple realities, and these realities are understood when researcher and participant communicate allowing new realities to emerge (Guba & Lincoln, 1994).

2.3 Epistemology

Epistemology is defined as being concerned with how knowledge can be acquired (Pocock, 2013; Coyle, 2007), but this can only be done within the limits of the answer to

the ontological question (Guba & Lincoln, 1994). Therefore, the epistemological position of this research is contextualism which acknowledges that subjective experiences can only be understood when the context (social, historical, power, political) it also considered (Willig, 2012). This position aligns with some of the theoretical concepts discussed in the introductory chapter which highlight the context (e.g. social model of disability, Oliver, 1996) of individuals' experiences (power, threat, meaning framework, Johnstone & Boyle, 2018). Guba and Lincoln (1994) note that this position also recognises the value based nature of the research enquiry and the understanding that the researcher and participant hold their own values which are interacting and influencing how knowledge can be acquired.

By taking up a contextualist position, the research is in keeping with an emancipatory disability research paradigm (Beresford, 2016) which was highlighted by Stone and Priestley (1996). They describe this as involving: a social model of disability basis for research; recognition of difficulties for disabled people; research undertaken to benefit disabled people; control given to disabled people in the development of research; to highlight individual experiences with equal weight given to the influencing contextual factors; variety of data collection and analysis methods used. Specifically, the current research was developed in conjunction with the supervisors, one of whom identifies as a disabled woman and also works with and for disabled people's organisations.

Bhaskar and Collier (1998, p. 390) note that knowledge is acquired in the "context of a social structure" where ongoing practices may have been occurring for long periods (such as the benefit system and welfare reform). Through acquiring knowledge, such structures and practices can be critiqued and altered. Burr (2003) references the work of Leibruks (2001 as cited in Burr, 2003) who provides a helpful understanding of differing perspectives of the same phenomena. Leibruks notes that the phenomena being

explored is the same thing but is experienced differently by each individual, depending on their social, historical and political perspectives.

Systemic ideas can also help to focus on contextual factors and they can be thought at both the “micro-social level” (e.g. family, friends, work) and the “macro-social level” (e.g. disability, class, socio-economic status). Coyle (2007, p.17) states that contextual methods should attend to both these levels. This is felt to be reflected in the topic guide for this current research.

2.4 Methodology

2.4.1 The need for a qualitative methodology. Guba and Lincoln (1994) define methodology as the third question which is shaped by the answers given to the ontological and epistemological enquiries. Methodology is concerned with how the researcher will proceed with the investigation and acquire knowledge. They argue that methods of investigation (based on critical realist ontology and contextualism epistemology) would be qualitative in nature and involve an exchange of ideas and different viewpoints which would help to bring conscious awareness to different realities, but also address structures which have been shaped by history and left unchallenged.

Qualitative research is defined as a method which focuses on understanding meaning and subjective experiences (Willig, 2012). It provides a deeper understanding (compared to quantitative methodology) of context, and results in descriptive and interpreted findings. The current research hopes to complement quantitative findings (discussed in the introductory chapter) to draw out participants’ experiences. The role of qualitative research can be utilised within the political domain and using this type of methodology can empower, give voice and collaboration with those who are most marginalised or discriminated against in society (Willig, 2012; Beresford, 2016).

Burton and Kagan (2005) note that within liberation psychology, theory develops from an interaction between “action and reality” and that by removing the “layers” of ideology, theory can be developed according to reality. Its methods include the use of interviews and more traditional methods such as thematic analysis. They also highlight the use of liberation psychology to conduct research to report what people think within marginalised groups to challenge the dominant discourse and ideas which support the mainstream ideology and the more powerful groups.

2.4.2 Thematic analysis. Braun and Clarke (2006) define thematic analysis as a way of organising and reporting themes from data, which can be analysed further and interpretations applied. They see this form of qualitative data analysis as being a good basis for developing qualitative methodological and analytical skills, especially for those new to qualitative research. However, they highlight that the researcher needs to make several decisions about the data, aims, and epistemological position prior to beginning analysis. This research holds a critical realist (contextualist) theoretical position which considers the social, material and power context that the research is carried out in and how this shapes an individuals’ reality. This means that the experiences and meaning making of participants is made sense of through this context (Willig, 1999 as cited in Braun and Clarke, 2006). The themes will be identified through an inductive approach, where analysis will be data-driven rather than based on specific theories or aims. Themes will be described at the semantic level whereby, the themes will be identified, described and then interpreted by considering the results within the social, historical and political context as well as making links to previous literature and theory (Willig, 2012).

2.4.3 Ensuring a credible methodology. Madill, Jordan and Shirley (2000) recognise that evaluation criteria such as objectivity and reliability within the positivist (and therefore quantitative) position are not concepts which can be easily transferred to

qualitative research, particularly ones that take up a contextualist epistemological position. In contrast, Stiles (1993 as cited in Madill et al, 2000) notes the importance of “permeability” in research, which means that the researchers understanding of phenomena and theories can be changed through inquiry.

The contextualist position means that the results of any research will be understood within that context and therefore findings can vary depending on context, which can make it difficult to develop evaluation criteria. The context of researcher, participant and social world mean that research findings will be influenced by four factors: participants understanding; interpretations that the researcher draws; meaning structures and systems that influence these; evaluation of the researcher as judged by science (Pidgeon & Hendwood, 1997 as cited by Madill et al, 2000). Madill et al (2000) further state that a strength of the contextualist position is the triangulation method where new and counter-findings can be brought to light and discussed within the wider context of what is known.

Coyle (2007, p 22) highlights various criteria which have been developed over the years to evaluate qualitative methods, however recognises that there is no consensus. He states that one of the most important questions that the researcher must ask is how the research will contribute to the field of clinical psychology and practice. Further criteria that he considers to be important, and which this research aims to follow include: clearly describing context; commitment and rigour to the research and data; transparency of all aspects of decision-making and analysis and coherence of the findings to theory and research aims; impact and importance of the findings on the immediate and wider context.

2.5 Researcher Position Statement

Berger (2013) reports on the importance of reflexivity in research and the position of the researcher when studying unfamiliar (to the researcher) phenomena, particularly with disadvantaged groups. Braun and Clarke (2006) specify that the researcher should reflect on and acknowledge their active role in the research process. The contextualist position, which the critical realist approach is embedded in, suggests that the context of the researcher is also an important factor to the development of the research, how it is approached and the analysis. However, there is acknowledgment that some aspects of the researchers' position could be unconscious and therefore remain unexplored (Pilgrim, 2017). From this critical realist viewpoint reflexivity in research is thought to produce knowledge of structures which are brought into consciousness through the influence of the researcher's interests and tendencies (Bhaskar and Lawson, 1998).

I am an Indian, Hindu, 35-year-old British female. I am an only child, however come from a collectivist culture where extended family and community is equal to and as important as immediate family. After completion of my A levels I worked in retail management for five years. Aged 21 I decided to go to university as a mature student to study psychology. I completed an access course and then completed my BSc in psychology over four years. I worked during the day and attended evening classes to achieve this, so that I could pay off my tuition fees as I studied. I then worked in the private sector for one year as a care worker. I then worked in high secure services (NHS) for five years and during this time also completed my MSc in research methods in psychology, again continuing to work full-time whilst studying. Following this, I worked in an older adult psychology service (NHS) for one year and then in a neurorehabilitation service (NHS) for four months before gaining a place on the clinical training programme.

I am currently on my specialist placement within the adolescent and young adult

services at the Tavistock Clinic. I believe that my decisions to work and study during completion of my BSc and MSc have been due to the values instilled in me from a young age by my parents. They have always held strong beliefs about never placing one-self in debt or asking for money from others and that money should be earned *first* for anything that one would want in life. I believe these views also interact with religious views which I hold one of which is that if one cannot afford certain things in life, they are not part of one's destiny or God's plan. These are values that I still uphold, both in terms of my life goals and also with regards to everyday decisions I make, and I feel a sense of pride that I have achieved what I have through my own self-determination and will. This has made me consider my reasons for wanting to work in the field of clinical psychology and how this relates to working with people who are largely excluded from the labour market and from engaging in the activities which are so integral to the values I was taught. I consider this particular issue to be perhaps less conscious but beginning this research has made me aware of the aspects of clients' lives that I may have paid less attention to due to my own biases.

In terms of the research topic, I was allocated this area as my original thesis idea could no longer be taken up. This was an area that I was completely unfamiliar with and felt I have had to educate myself on policies, acronyms, procedures as well as the qualitative methodology used; at times it has felt like learning a new language. This has been a challenging process for me and at many times it has felt overwhelming, in terms of just how much new knowledge I have had to acquire before I could even start thinking about how this research would be conducted.

Therefore, because of my own background, upbringing and values I felt a sense of guilt when I was introduced to this topic area and began to read about the difficulties that people on benefits have faced. That sense of guilt and shame seems to have come from

an internal conflict as my knowledge in this area has grown. This conflict and the feelings raised in me during the course of this research is discussed further in the discussion chapter and links are made as to how this may have affected the data analysis process.

2.6 Participant Recruitment

Participants were recruited via the external supervisor through an organisation which works with over 90 Deaf and Disabled People's Charities (DDPOs) throughout London. The external supervisor and other members of staff were provided with criteria and information sheets about the study, to share and pass on to DDPOs and individuals. Potential participants were provided with the contact details of the external supervisor. Once potential participants contacted the external supervisor expressing their interest, they were asked if their details could be forwarded onto the primary researcher.

Once the primary researcher received the details of the participants they contacted them (via email or telephone/ text message) and forwarded on (electronically or through the post) two versions of the participant information sheets (one was the fully detailed version and one was the easy-read version) (Appendix A & B) and the consent form (Appendix C). The researcher informed the participants that they would be contacted in 2-3 days to follow-up with them if they had any questions and to see if they wanted to take part and if so to schedule an interview time.

2.7 Setting

Participants were recruited through the organisation which works with the DDPOs and the offices are based in South London. Participants who consented to taking part in the research were invited to attend the offices or for the researcher to meet them at their local DDPO (which was arranged through the external supervisor). For participants who

found it difficult to travel or who lived outside of London, telephone interviews were conducted.

2.8 Research Procedure

Once participants provided informed consent an interview time was arranged. Interviews either took place face to face or via telephone (for participants that did not live in London). Interviews followed a topic guide and lasted between 38 to 84 minutes. Following completion of the interviews participants were asked to complete payment receipt forms (to provide them with the £20 Tesco voucher) and were provided with a debrief resource sheet (Appendix D) which the researcher also explained to them verbally. Participants were also asked about demographic information (age and ethnicity) and if they could be contacted again during the analysis stage to comply with respondent validation processes.

2.9 Measures

An interview topic guide (Appendix E) was developed to follow the aims and objectives of the research and to address the research questions. The first stage of developing the topic guide involved using previous literature in qualitative research design (Smith, 2007) to help structure the questions: to sequence topics; to use open-ended question; to consider prompts. This also involved shaping the interview which involved the introduction (covering consent, confidentiality and aims of the interview), setting the context, main interview questions and a final question to lead into closing the interview and debriefing. The first stage of the development of the topic guide also included consideration of the types of questions and how they related to the overall research aims (Sradley, 1979 as cited in Willing, 2001). Introductory questions to each separate area were descriptive, where participants were asked about their experiences. Questions which sought to understand what the participants' thoughts were about a

particular area (i.e. claimant commitment and work) were structural. Questions which looked at the impact of certain experiences (i.e. sanctions) were thought to be contrast questions and those which asked how the participant was left feeling following certain experiences (i.e. sanctions, work-related activity) were evaluative. The second stage involved developing the topic guide and receiving feedback through a focus group involving disabled people. The aims and objectives of the research were explained to the group and a draft topic guide was also shared with them. They were informed that some participants may have learning difficulties and therefore as the topic guide was developed we could consider alternative language and communication aides which could be used. The focus group was also invited to provide feedback on both versions of the information sheets. A final topic guide was agreed, providing the researcher with enough flexibility for participants to discuss experiences which were relevant and important to them. The aim in developing the topic guide through feedback from disabled people was in keeping with the principles of emancipatory disability research (Berersford, 2016), where there was an equality of power and knowledge by involving disabled people in the development of aspects of the research.

The topic guide was split into four main areas: experiences of being in the ESA WRAG; experiences and impact of the claimant commitment (and therefore conditionality); experience of sanctions; views on work, barriers to work and what one might look for in employment. Furthermore, an additional prompt involved asking participants about positive experiences since joining the ESA WRAG or what they found to be helpful. The researcher also applied flexibility with the language used as some participants had communication or learning difficulties. When asking follow-up questions, the researcher also used language that was used by the participants to ensure

that the questions were appropriate and relevant. A digital voice recorder was used to record interviews.

2.10 Sample

2.10.1 Sample size. The aim was to recruit 15-20 participants through the organisation and from DDPOs. This range is recommended by Braun and Clarke (2013). The relatively large number of participants is due to the analysis method being used which draws on themes across interviews rather than focus on the details of the language. Convenience, purposive sampling was used, which aimed to recruit participants which were easily accessible (Patton, 2002 as cited in Flick, 2009). The rationale for this sampling method was due to the time and resource limitations for this research. The limitation of this sampling method means that new theoretical understandings cannot be developed but rather understanding and analysis of the features of the sample can be identified and discussed (Flick, 2009). Although the organisation recruited through DDPOs in London, participants from across the U.K. were recruited, as some of the DDPOs used social media to identify potential participants.

2.10.2 Inclusion and exclusion criteria. Inclusion criteria included the following:

- Aged over 18 years
- Capacity to consent
- Self-identify as disabled
- Experience of being in the ESA WRAG
- English speaking

During recruitment it became clear that potential participants were unable to identify which benefits group they had been placed in (i.e. ESA WRAG, ESA SG or JSA). If participants could not identify with certainty that they had experience of being in

the ESA WRAG, they were excluded from participating. The rationale for this was to minimise the research focus from becoming too generalised and to ensure that experiences were focused on the context of the ESA WRAG.

By using inclusion and exclusion criteria the social group was defined in advance of recruitment (Flick, 2009): individuals who self-identify as disabled and have experience of being in the ESA WRAG.

2.11 Analysis

Thematic analysis was used to analyse the transcribed interviews and the analysis was completed manually (Appendix F & G). This followed Braun and Clarke's (2006) six step procedure. Rather than moving through the six steps of analysis outlined below in a linear fashion, analysis was recursive where steps were re-visited and data was re-analysed. The six steps are outlined below.

Step one: The researcher familiarised themselves with the data during transcription where certain points of discussion were held in the researchers' mind. The researcher repeatedly read the transcripts, noting initial patterns and meanings. The aims and purpose of the research were re-visited, so the reading of the transcripts could be focused.

Step two: Initial codes were applied to interesting extracts and those which related to the aims of the research. In this step, Braun and Clarke (2006) advise equal attention is paid to all data to notice inconsistencies and not to focus solely on the dominant story.

Step three: Codes were analysed and grouped together to generate broader themes. Sub-themes also begin to emerge, although these are not fixed at this point in the analysis.

Step four: This involved a review of the themes and identification of themes that had enough data to support them. If themes were felt not to have enough data they were collapsed into other themes. This involved working at two levels: with the coded data extracts which were identified during step two and with the entire data set, and steps one to four were reviewed at this point.

Step five: Naming and defining the themes meant noting what was of interest from each theme and observing the internal consistency within the data. This step was completed at two levels: discussing the theme and its content but also in terms of the overall aims of the research.

Step six: The final step involved writing the results section and selecting data extracts which represented the themes and sub-themes.

During the analysis, the researcher aimed to identify themes which were contradictory or seen to be outliers so that the dominant narrative could be questioned.

An iterative approach was applied, whereby the topic guide was reviewed following the first three interviews and following data collection and analysis themes were checked by the internal supervisor. Respondent validation was sought, and some participants were contacted following data analysis and provided with a summary of themes to ensure that their experiences were adequately captured.

2.12 Ethical Considerations

2.12.1 Ethical approval. Ethical approval was sought and granted from the University of Essex School of Health and Human Sciences (Appendix H). Two further amendments were also granted: requesting interviews could take place via telephone if needed; requesting interviews could take place at the offices of DDPOs (Appendix I). The British Psychological Society Code of Human Research Ethics (BPS, 2014) and the

Health and Care Professionals Council Standards conduct, performance and ethics (HCPC, 2016) were adhered to throughout.

2.12.2 Participant consent. Informed consent was obtained from each participant after they had the opportunity to read through the information forms and ask any questions. Participants were also asked at every point of contact if they were still happy to continue taking part in the research and reminded that they could withdraw from the study at any point.

2.12.3 Anonymity and confidentiality. Anonymity and confidentiality were maintained at all times, with data protection guidelines being adhered to. Data was anonymised during the transcription process. Interview recordings were password protected and placed on an encrypted USB to be kept locked on the University campus. The USB files and transcriptions will be destroyed following a period of 10 years, in accordance with University guidelines.

2.12.4 Managing possible distress. As participants were speaking about their difficulties related to employment, their role in society and their impairments, it was deemed that taking part in interviews had the potential to cause distress. Bhaskar and Collier (1998) recognise that through human emancipation research, individuals can experience empowerment and control, but that an emerging knowledge of discriminatory structures can also have the potential to cause distress. However, they also state that for an individual to feel equal, some form of unhappiness will have to be faced first. It was felt that there was a small risk of participants experiencing psychological distress, from having reflected on these issues. However, it was also recognised that the level of any potential distress would be no greater than what participants would be facing on a day-to-day basis, when having to cope with the impact of sanctions and financial difficulties. Psychological distress was monitored and managed throughout the interview, using the

primary researchers' clinical skills. Any interviews where a participant showed significant levels of distress would be stopped, however none of the participants experienced this.

A full debrief was completed with all participants following the interview to ensure they felt stable and ready to re-engage with activities of their day. The debrief ensured that the participant had coping plans and support, and could be signposted to relevant organisations if necessary via a resource sheet.

The external supervisor and link people within the DDPOs where interviews took place also acted as mediators should any issues have arisen or further support needed, however no such circumstances arose.

2.12.5 Impact on researcher. It was recognised that the interviews also had the potential to cause the researcher some distress, through hearing about participants' difficulties. Considering the researchers' position coming into this topic area, as stated above, the interviews did have some impact on how the researcher felt about their original position and how they felt about themselves for holding such beliefs. This was managed through reflective logs, supervision and personal therapy.

Issues such as the researchers' role and their relationship with the organisation was recognised to be a potential issue. Therefore, the researchers' role was explained to the participants during the introduction stage of the interviews.

It was also acknowledged that there was felt to be a power differential between the researcher and the participants. Factors such as age, gender, socio-economic status and perceived status were important to consider. The importance with recognising and being aware of this particular power differential helped the researcher to use reflective skills to try to minimise any impact this would have during the interviews.

2.13 Dissemination

Participants were asked at the end of the interview if they would like to receive a copy of the final thesis and if they agreed it was discussed whether this would be via email or if they would have access to a print copy. A copy and summary will also be provided to the organisation to distribute, where appropriate, to DDPOs. It is hoped that this research will be presented at appropriate conferences and through publication.

3. Results Chapter

3.1 Chapter Summary

This chapter outlines the findings of the current research. It begins by describing demographic information and contextual information about the participants. It then describes each of the themes and sub-themes and gives examples from the data.

3.2 Demographic Information

Fifteen participants were interviewed in total. Two further individuals had shown an interest in being interviewed, however chose not to take part.

Participants were recruited through the organisation and DDPOs who sent out information to individual participants and through online and email sources. The participants who were recruited through the organisation via social media or individually contacted, lived in many different areas across the country. However, participants who were recruited through one particular DDPO were based in London.

Interviews lasted between 38 to 84 minutes, with the average length of interview being 53 minutes. The majority of interviews with participants who were from the London area were conducted face to face either at the organisation or DDPO offices. Some interviews with participants from the London area and all interviews with participants from outside London were conducted via telephone.

Age of participants ranged between 29 and 63 with a mean age of 42. The age of one of the participants was unknown and one of the other participants chose not to disclose their age. Of the 15 participants, ten described their ethnicity as White-British, one as White-English, one as White-Scottish, one as Black-African, one as British-Asian and one of the participants' ethnicity was unknown. Of the 15 participants, nine were male and six were female. In terms of location of the participants, ten were based in

London, one in Scotland, one in the Midlands, one in Wales, one in Somerset and one was unknown, however they were based outside of the London area. This information was useful as it provided further contextual information regarding employments histories in relation to participants' local job markets. With regards to participants who were in the ESA WRAG at the time of the interview, 13 of the 15 participants were in the ESA WRAG and two had been moved out of the ESA WRAG in the previous 4 months.

3.3 Analysis

As outlined in the Method Chapter, a six-step thematic analysis (Braun and Clarke, 2006) was used to analyse the interview transcriptions. A total of eight themes and 22 sub-themes were constructed, which are detailed in Table 1 below. The themes will be discussed in detail below.

Table 1. Themes and sub-themes from the thematic analysis

| THEMES | SUB-THEMES |
|--|--|
| ESA WRAG: the good, the bad and the ugly | "Time to get well" "A convenient slot to get people off benefits" "I don't quite understand" |
| Ruled by conditionality. | "Beat the competition, promote yourself" "I don't want to rock the boat" "I felt under control" |
| Sanctions and suicidality. | "When your mental health disappears overnight" "It's black and white" |
| The importance of relationships | "The work advisors are pretty decent" "He didn't quite understand" |
| Adaptation and defences. | "I'm an adult, I'm capable" "Your whole life depends on it" "I'm a bit of a lost cause" |
| Power and politics | "Work or die" "Government is trying to pressurise you" "Divide and rule" |
| Fighting back | "Unite with people" "Co-operating for the common good" "These people tried to support me" |
| Workplace values | "Low paid, precarious work" "They will exclude you at once" "I miss working and miss being strong" |

To adhere to the contextualist epistemological position descriptions of the context of the participants is provided to help the reader to understand important details about how the data is embedded in the real-life experiences of participants. In keeping with the focus of the current research the following information will be provided (where given):

impairments; history of benefits claims; how participants came to be on benefits; brief description of areas of employment.

3.3.1. Impairments. Participants described a range of impairments, encompassing both mental and physical health. Such impairments related to mental health included anxiety, depression, panic, personality disorders, PTSD, history of substance misuse, learning difficulties and Asperger's. Impairments related to physical health included myalgic encephalomyelitis/ chronic fatigue, arthritis, diabetes, epilepsy, chronic pain, scoliosis and neuropathy.

3.3.2. History of benefits claims. Most of the participants described claiming Job Seekers Allowance before being moved onto Incapacity Benefits and then eventually onto ESA following welfare reforms. The length of time that participants had been claiming benefits ranged from approximately 18 months to 30 years and all of the participants had experience of being in the ESA WRAG for a period of at least 12 months.

3.3.3. Journey to being on benefits. Most of the participants reported being unable to work due to their physical or mental health impairments and therefore having to claim benefits. In some cases their impairments were noticed either through work (where they had difficulty functioning) and they were subsequently advised (usually by healthcare professionals) to take time to focus on their mental or physical health. A small proportion of participants were made redundant and then found it difficult to find permanent and secure work and therefore had to claim benefits.

3.3.4. Qualifications and employment histories. Some of the participants had completed undergraduate or post-graduate degrees, and they had worked alongside studying for those qualifications. Some had maintained regular work until they became unwell or until they were made redundant. Most of the participants spoke about working in teams and in customer based roles, such as retail, healthcare or in restaurants. They also described working in areas which they found stimulating and connected to their personal interests such as electronics or academic research. Some participants also had experience of supported employment which they found to be valuable.

3.4 Themes and Sub-Themes

The 8 themes and 22 sub-themes are described below and examples from the data are provided.

3.4.1 ESA WRAG: the good, the bad and the ugly. This theme describes how participants experienced being in the ESA WRAG. However, participants also spoke about the WCA and similar sub-themes were found in both areas. The three sub-themes show how participants' experiences differed, which ranged from feeling that being in the ESA WRAG has been helpful to finding the grouping confusing and inappropriate.

3.4.1.1 "Time to get well". This sub-theme focuses on some of the participants who felt that being placed in the ESA WRAG was helpful, as it gave them time to concentrate on their health and they also felt this to be an appropriate group for them as they hoped to return to work. The time they were given felt as though it was done in a supportive way, also allowing some participants to pursue areas of further education and employment that they felt were appropriate for them: "Because they haven't really put any pressure on me I am able to concentrate on those issues and it's given me time to get well" (Charlie, 192-193) and "Being in a WRAG benefit employment thing is more... it keeps us more stable" (Hannah, 62-63) and "I've been so grateful. It feels cheeky, it feels

wrong. But also, it's the first time, in ever really, I've been able to think about my health" (Meg, 210-211).

It's been pretty positive so far. They're quite pleased that I'm doing a part time college course which is just a couple hours a week at the local centre. I've not really been sanctioned, they just send for me every 6 months at the minute. (Ed, 15-18).

Kevin also felt that his experiences of being in the ESA WRAG were helpful and that he had found it to be a relatively easy process, "It's always been alright with me, I've found its okay, I've never had any troubles with it" (Kevin, 19-20).

3.4.1.2 "A convenient slot to get people off benefits". This sub-theme brings together the views and experiences of participants who have found being in the ESA WRAG unhelpful or inappropriate. Participants described how the ESA WRAG was a re-labelling of previous benefit groups or that impairments and needs were not considered. For example, "I thought, well it's like a watered down JSA for disabled people" (Alice, 5-6) and "What might be suitable for the Job Centre is certainly not suitable for me. But the people there don't have a clue about my access needs or emotionally what I need" (Dipesh, 51-53) and "It didn't suit me because I'm long term ill and I've got no prospects to go back to work" (Frank, 261-262).

Liam described how he was attempting to complete work-related activity, however through his own means and through a social inclusion organisation. He felt this was used as evidence that he should be in the ESA WRAG rather than the ESA SG, which he felt was more appropriate for his current circumstances: "I feel like I've been penalised for trying and that's been the hardest thing to get my head round. Where I'm coming here, it's almost like it's been held against me" (Liam, 121-122).

Charlie held conflicting views about being in the ESA WRAG, and although he found it helpful as described in the sub-theme above, he also found elements of it to be controlling. For example, “Your whole time, everything you’re doing revolves around the Job Centre and what they require from you” (Charlie, 366-367).

Some participants also spoke about the inappropriateness of the WCA and that there was a lack of understanding during this phase. For example, “You can get your words out so you come over as quite well, you come over as quite articulate. They mis-read this as actually there’s not that much wrong with you “ (Daniel, 13-15).

Participants’ views about the inappropriateness of the WCA, a lack of understanding and of being placed in the ESA WRAG also seemed to link with the invisibility of mental health conditions. For example, “The condition I’ve got, like people don’t really understand. Even if I told them about it they would think I’m faking it” (Ben, 50-51) and “It’s not an accurate reflection of a condition at all. And then on top of that to say touch your toes and do some physical stuff is utterly irrelevant” (Greg, 46-48).

Nailah described how the WCA, other health professionals and the public can mis-understand the invisibility of her chronic pain impairment, “They are seeing you physically able, they are not seeing your inside, they are seeing your outside, so they make their conclusion about you already” (Nailah, 163-164).

Kevin described the invisibility of his impairment and how society was unable to recognise or acknowledge his difficulties, but also that gender stereotypes were imposed upon him: “A lot of them look at you and think you’re all right, strapping lad, there’s nothing wrong with you. But they don’t see what’s inside” (Kevin, 201-202).

However, he was the only participant who felt that the WCA was an appropriate assessment and was able to take into account the impact of his mental health conditions.

For example, “When you go for the WCA they can see the signs by the questions so they must have understood what was what”. (Kevin, 202-203).

3.4.1.3 “I don’t quite understand”. Most of the participants described a complex points-based system as part of the WCA. This system was felt to be confusing and perhaps pre-determined with an all or nothing element to it.

They work the points out. And for my ESA assessment I didn’t get any points. And then for my PIP which I received, a lot of the questions were more or less the same. I got points for that. It’s really confusing. (Imogen, 178-180).

It just seems like, it’s done on this points system, which I don’t quite understand. From being in the same situation in one part of the year, then 6 months later receiving no points where there’s been no significant changes to my situation. (Liam, 110-113).

Daniel described how his social class was unhelpful during the WCA as it made him appear more able:

As you can probably tell from my voice, I’m middle class, quite well educated, white man. So normally the system works in your favour in every part of life but from this it worked to my disadvantage because you come over as a bit more in the world. (Daniel, 10-13).

However, for him the stress of the WCA appeared to counter the perceived ‘wellness’ as described above, “So, although the meeting was very stressful and I did get very distressed it sort of worked in my favour because she accepted I was ill.” (Daniel, 32-34).

Hannah spoke about how saying one wrong answer can affect which group you will be placed in or whether you will receive any benefits at all, “Because I said I walk there and walk back I’m okay to go to work” (Hannah, 14-16).

Some of the participants described how parts of themselves had to be magnified as part of the WCA but this conflicted with their values. For example, Greg described how his mental health condition meant that he would always be at appointments on time or early, however this lost him points during the WCA:

They said that’s crucial, if you say you can keep appointments, that wipes out a lot of, it’s the way the computer operates. I was told to kind of fill it in as though I was having a bad turn. (Greg, 37-39).

Nailah described how her resilience to seek support to manage her impairment is held against her during the WCA. She described how she felt that she could not deviate from her personal values and would speak the truth regardless of the possible consequences: “I will never lie. If they says bend down and reach, even though it’s painful I will bend and reach for something because that was what my therapist told me to be doing if I want to regain things” (Nailah, 144-146).

However, participants also felt that a more implicit system was in place as part of the ESA WRAG and that they were required to play their role alongside the role of the job advisor or Job Centre. Daniel describes his regular meetings at the Job Centre:

I saw it on a card, they want you to be saying that you haven’t cut yourself off from everybody, that you’re eating properly, that you’re doing exercise when you can, that you’re still within the world. That you’re not isolating yourself, so long as you say that you’re doing as much as you possibly can in those ways, and I

have been because I need to for my own sanity, once they found out that you're doing those sorts of things they kind of leave you alone. (Daniel, 77-82).

Greg also describes his experience of the implicit rules of his regular Job Centre meeting as part of being in the ESA WRAG. But there was also a sense that there was a lack of understanding and one had not been listened to. From Greg's language the terminology used indicates that Greg may feel a lack of control:

The guy who's running me, supervising me, who I sign on with every month. He lets me talk for about half an hour then presses a button and then prints out a form for my next appointment, which is usually 28 days after that one. And that means the talk is over, off you go, you're sort of safe for another month. (Greg, 374-377).

3.4.2 Ruled by conditionality. This theme developed through participants' descriptions of their experiences of conditionality, what they felt to be inappropriate and how they responded to these rules. Some of the participants described an underlying neo-liberal ideology and psycho-compulsion which seemed to form the basis of the courses. Three sub-themes formed this theme.

3.4.2.1 "Beat the competition, promote yourself". Most of the participants who had experienced conditionality described mandatory attendance at courses. These courses seemed to further label and stigmatise participants where the sole responsibility for lack of employment was focused on internal factors. Although some participants experienced it as positive, it also seemed to have a negative impact of their sense of self. For example:

The other was around interviews, just having confidence, speak up and what people are looking for, how to attend an interview, find out information about the company, questions you would like to ask. Practise it before you go to the interviews. (Frank, 64-67).

Other participants described the courses as too basic to meet their needs, with a lack of acknowledgement of their achievements to date. This seemed to create feelings of anger among participants:

They told me how to do role play exercises and how to sit up and answer questions at interviews, look for work, job searches. But I've done all of this. The last job I chose to help people in positions like me to get work. So, I'm probably an advocate for people with disability. (Dipesh, 150-152).

The trainer says I'm more advanced than what they are teaching so they don't want me in the class. I explained that back to, what I want Job Centre can't provide it. Anything higher, they don't, they are below. (Nailah, 119-121).

The sense that participants' achievements, experience and qualifications were not acknowledged was present as in the above examples. However further to this, participants reported that they were told or encouraged to remove those accomplishments from their CV's which further impacted on their self-esteem. For example, "They also tell people to leave off their qualifications on CVs and things, so we don't look overqualified for the jobs they're sending us for" (Ben, 171-173).

They told me to remove it and if I didn't I would be punished and would be sanctioned. They said I had to develop different CVs. So first of all they'd seen the CV I'd written and told me to remove the degree. Then they developed that conversation and said you should have 2 or 3 CVs for the different types of jobs you're applying for. Now I can see the sense of having different CVs but removing my degree, that was a painful thing. It's just, when you've put all that effort, all that time into things. I think if you decide to do it yourself then that's fine, it's when you're told to do it, being told to do it is different. This is the way that the Job Centre chip away at your confidence and all those sorts of things. (Charlie, 155-161).

Some participants also described self-employment being encouraged. This could perhaps be seen as a ploy to re-categorise people so that unemployment figures can be manipulated in some way:

They said well I think the first tactic here is make the looney imagine that he can be self-employed. So, my first counsellor sent me upstairs to a self-employment specialist. (Greg, 261-262).

3.4.2.2 “I don’t want to rock the boat”. This sub-theme encapsulates the implicit aspects of conditionality and the threat of sanctions, but also how a lack of conditionality was experienced by participants. Participants described feeling as though they had to defend themselves but also that their lives were somehow controlled by conditionality:

They’ve never sort of explicitly said that we’ll be expected to do X, Y and Z. But the letters would sort of say, along the lines of, if your work advisor suggests a course and you do not attend without a good reason your benefits may be sanctioned. (Ben, 27-30).

There was also a sense of a lack of conditionality which was experienced by participants, who described feeling uneasy because of this. This created a constant anxiety about what might happen. For example, “They’ve left me alone since I’ve claimed but there’s always been a feeling that I’m next on the list for them to punish in some way” (Ben, 8-9) and “They’ve not told me and I don’t want to rock the boat”. (Ed, lines 20-21) and “It is like a cloud hanging over you all the time. It is always in the back of your mind” (Alice, 304).

3.4.2.3 “I felt under control”. This sub-theme shows how participants’ experiences of conditionality, fear of sanctions and worries about the consequences of disobeying those in power could impact on them and how they felt forced to comply. For example, Alice describes how she felt she didn’t have any choice when going to work in a supermarket, as this is what the Job Centre had told her to do, but also because of the economic position that she found herself to be in: “I had debts at the time and my benefits weren’t covering the gas bill so I had to do it”. (Alice, 279-280).

She also spoke about the impact this had on her mental health:

The mental health problems that I had were so severely exacerbated by that experience, it was ridiculous. I relapsed big time. And the depression just enveloped me. And the anxiety and paranoia and agoraphobia were just magnified. (Alice, 200-203).

Charlie described how he experienced a lack of control and choice within his relationship with staff at the Job Centre:

So, you have to quickly change the way you’re doing things to correspond to how the advisor likes things to be done. So, you’re constantly adapting to them rather than them adapting to your needs. That’s how I felt, so I felt under control, I didn’t feel I was in control at all. (Charlie, 372-375).

Other participants also described their fears and concerns if they did not comply, and there was a sense that coercion was used, perhaps unconsciously, as part of conditionality. For example, “If I didn’t attend that then my money would have been stopped. I had to look for work” (Frank, 23) and “I’ve no choice to try and go through with it otherwise I’ll end up with having nothing” (Hannah, 134-135).

Greg shared his experience of contradictory messages from some staff, but also the implicit messages that meant he felt he did not have a choice with regards to attending a course and an employment specialist group:

At the Job Centre, he said 100 times at least this is voluntary on your part. As soon as I then went to the first meeting it was made clear to me that it wasn't voluntary at all. I said hang on a minute, last week the bloke said it was voluntary for me. He said well he shouldn't have said that. (Greg, 212-215).

3.4.3 Sanctions and suicidality. This theme looks at the short and long-term impacts of sanctions on participants' physical and mental health. Participants spoke about the experience of being sanctioned and further to this, the worry of sanctions and what they do and have done to prevent this from happening. The theme is divided into two sub-themes.

3.4.3.1 "When your mental health disappears overnight". This sub-theme looks at the experience of sanctions and the impact on the participants who have experience of being sanctioned. They describe the impact on both their mental and physical health and how their basic needs were not met.

Charlie spoke about being sanctioned three times in total, but two of those had been overturned. He described how the Job Centre had advised him to attend a self-employment course for two weeks, which he had done. However, on his return to the Job Centre, he was met with a new advisor who made the decision to sanction him due to the course not being an approved course for his area. He described having no electricity and therefore his food going off and how he coped:

So after that I started to go, I was on a work programme but was never called in, so I'd go in anyway and there were oranges and apples in a fruit bowl, so I would

just go in there and steal the oranges and bananas so I would have something to eat. (Charlie, 84-87).

Charlie recalled a memory during this time of being sanctioned:

On Christmas day I was sat alone, at home just waiting for darkness to come so I could go to sleep and I was watching through my window all the happy families enjoying Christmas and that just blew me away. And I think I had a breakdown on that day and it was really hard to recover from and I'm still struggling with it. And so on the Saturday after Christmas, the first postal day, I received £20 from my aunt and so then I could buy some electricity and food. I was then promptly sick because I'd gorged myself, because I ate too quickly. (Charlie, 91-98).

Charlie then described meeting with the same advisor who had sanctioned him following the Christmas break:

She said that being sanctioned had shown her that I didn't have a work ethic. Now I'd been working pretty much solidly since I was 16 and it was only out of redundancy that I was out of work. (Charlie, 106-108).

Charlie described how the experience of being sanctioned and this interaction impacted on him and how he had tried to commit suicide:

To me that was the last straw and I went home and I just emptied the drawer of tablets or whatever and I ended up in A&E for a couple of days after they'd pumped my stomach out. (Charlie, 112-114).

Dipesh spoke about being sanctioned following failure of a WCA and describes the impact of sanctions on his mental health. For example, "the thing is emotionally inside it sort of drains me. I feel like someone's put a knife through my stomach. I feel emotionally depressed and not happy." (Dipesh, 26-27).

Alice described how she felt as though she was being punished when her money was stopped: “When you deny somebody cash, money it’s almost like it makes it dirty” (Alice, 468-469).

Liam was the only participant who described a different response to those above when he was sanctioned following failure of a WCA. For example, “The funny thing is the two months they stopped my money, I felt free for the first time in a long time”. (Liam, 336-338).

3.4.3.2 “It’s black and white”. This sub-theme describes fears and worries in relation to being sanctioned or the threat of it. Hannah explains her perspective of how she might be sanctioned, the sense that there is no space for discussion, but rather that decisions are made on small amounts of information which are taken out of context:

If they don’t see that you’re doing enough on job searches and that, they can sanction you when they feel like it. There’s no ifs or buts, its black and white, this way or that’s it. There’s no leniency with anybody. (Hannah, 284-288).

Jenny and her support worker also described the great lengths that Jenny would go to prevent herself from being sanctioned. This was at a time when she was recovering from pneumonia following a hospital stay and had arthritis in her knees. For example, “Because the benefits were the sole source of income, she would do anything to maintain that income flow, even climbing stairs when you’re in pain or your breathing is bad”. (Jenny’s support worker, 260-262).

3.4.4 The importance of relationships. This theme relates to participants’ descriptions of the Job Centre and their relationship with staff. Participants provided reflections of how they view the Job Centre in comparison to historical perspectives and experiences. They seemed to understand and take account of systemic pressures on the

staff and the how this might manifest negatively in their interactions. This theme contains two sub-themes.

3.4.4.1 “The work advisors are pretty decent”. Within this sub-theme, participants shared positive experiences that they had had with Job Centre staff, which included assessors and work advisors as well as some of the staff they met on the courses as part of conditionality. They described in what ways they found the experiences to be positive, which included viewing staff as caring, kind, understanding, flexible, respectful, supportive and relaxed by not placing too much pressure on participants. For example, “I would say my meetings so far with these advisors, they have been reasonably okay. They have been fairly understanding and everything and they have switched to the phone for me”. (Daniel, 66-68). Liam described how it was important for him that his job advisor tried to understand his mental health impairments: “Before I thought the whole thing was just a real unfair system. But more recently, when someone shows you respect in that way, it sort of makes you think different about things” (Liam, 306-308).

He was rooting for me so much because that was his job, but also he was so good at his job, and he really cared as well, cause he could see that I still had potential. The reason because I wasn't in work was because of illness and he understood that. (Alice, 260-262).

3.4.4.2 “He didn't quite understand”. This sub-theme is in contrast to the previous one. Participants described their experiences of staff not understanding their difficulties, barriers that they face and their impairments. For example, sometimes this was present within the same relationship with one member of staff. In the quote above from Alice, she described part of her relationship with the employment specialist as being positive, however she also described a lack of understanding on a deeper level. For

example, “He didn’t quite understand where I was coming from and the long term mental health thing I’ve had from childhood, he didn’t really understand that”. (Alice, 266-267).

Liam described feeling as though he was not listened to. For example, “It was almost like they wasn’t listening. I’ve got my job to do, this is how things are, you’re doing it this way or there’s no way. That’s how they were with me”. (Liam, 295-297).

Hannah and Imogen described their experiences and worries about more immediate inconsistencies which impact on their relationships with Job Centre staff. They described how rather than feeling like they are moving forward with the same advisor they remain stuck due to the changes in staff. For example, “But then you can go, circumstances change or you have another appointment with someone else and it can be completely different” (Imogen, 278-279) and “I’m going to try and have to explain things, no not this, not that. They’re going to try and put me on new courses, you’ve got to do this and that. It’s going round in circles all the time” (Hannah, 158-162).

Further to the above, Charlie described his perspective on how the Job Centre, staff and the values that surround it have changed over the years. He described discussing this with his family and sharing their different experiences and how its place in the local community has changed over time:

They were supportive, they had the skills and were professionals who had been in those jobs for 20/30 years. So, they know not just their jobs but also what was going in the community and that’s all gone, it’s all been stripped away and that’s one of the real problems. They are all problems that go with it and they all link in, in some way. (Charlie, 425-430).

3.4.5 Adaptation and defences. This theme explores how participants made sense of and cope with being on benefits, reactions from society and, stigmatisation as well as wider power influences. This theme contains three sub-themes, each of which

explores a different element of how participants have understood and managed their experiences of conditionality, the threat of sanctions and being in the ESA WRAG.

3.4.5.1 “I’m an adult, I’m capable”. This sub-theme focuses on how some of the participants described feeling disrespected, which occurred mainly through meetings with advisors, during courses as part of conditionality or during assessments. This disrespect, and lack of connection with staff made them feel infantilized and therefore minimised or left no room to acknowledged participants’ life experiences, strengths and achievements:

People asking me if you wet your pants, or if you need help to get washed and dressed in the morning or if you fall over in the street, just really horrible things, they treat you like children. They treat you like, you feel like you’re in infant school, like you’ve been called up in front of the school nurse or head mistress. (Alice, 98-102).

I went the wrong day, I don’t know how, I had the date written down and I went the day after. I had a young girl who was really rude to me. She said you know I can suspend you cause you came the wrong day, they’re really horrible. I said look I’m sorry I made a mistake. But to be spoken to when you’re in your mid-60’s, nearly 64 by a young girl like I was a naughty little schoolgirl is really hard to take. Cause you have to keep your mouth closed. (Imogen, 257-262).

This infantilization seemed to occur alongside a sense that they had to be monitored, in case they made mistakes, there seemed to be little allowance for human error. For example, “They can sign on to your account to see what you’ve been up to. It’s like they’re constantly watching you. They’re waiting for you to make a mistake to say no that’s it”. (Hannah, 260-262) and “Other people are afraid of uploading photos on Facebook. DWP have found photos before saying oh this person’s smiling, they’re not depressed take them off. People get scared that someone’s watching” (Ben, 205-207).

3.4.5.2 “Your whole life depends on it”. This sub-theme highlights how participants are left feeling due to being on benefits, conditionality and the threat of sanctions. Some spoke about a lack of security due to welfare reforms, impairments and the threat of sanctions but also in relation to how they felt about taking up employment which was likely to be temporary, on zero-hours contracts and with little security:

The new payments for ESA from this year are £73 a week as opposed to £102. If you go back to work and it turns out you’re not well enough to carry on then you’re coming back at the new rate of £73 per week. That’s going to make you more cautious and its counter-productive and it increases the stress. (Daniel, 249-254).

After 13 weeks if the job doesn’t last, or if I get made redundant, or if I get terminated or the contract stops, I then have to go into starting all over again. Reassessment etc. So, I’m worse off. (Dipesh, 67-69).

Some of the participants also spoke about how they feel preoccupied with worries about having their benefits cut or stopped: worry about the worst-case scenario. They described how they heard such stories through the media or have known of friends experiencing such difficulties. Frank described how he copes with this worry, “I started drinking because of it”. (Frank, 137-138) and “Every single day we’re battling with our own selves and then we’ve got to battle with the world and battle with the government and battle with everything. It’s really hard” (Hannah, 360-361).

I can’t sleep without the sleeping pills. I never took sleeping pills in my life. Simply because it goes round and round in your head and you can’t plan for the future cause you don’t know what’s going to happen, and you think of the worst scenarios, what the hell, that’s the temptation. (Greg, 102-105).

Due to participants' worries and lack of security, some of them then seemed to feel that they had to defend themselves, due to reactions from society, that they may be fraudulently claiming or underserving in some way. Defending ones' rights to claim benefits took the form of justifying ones' existence and why they were in receipt of benefits and they gave the sense that they were not entitled to privacy. Examples from Alice and Ed are provided: "They said look he's not daft, he's got this, this and this and they went sorry I didn't realise" (Ed, 190-192).

People are always going on about oh but you don't have to pay this and that because you're not earning, I pay tax that goes in your pocket, blah blah blah and I try and explain to people that I live on less than £7000 and that covers everything, everything! That covers food, my very existence. (Alice, 348-351).

3.4.5.3 "I'm a bit of a lost cause". This third sub-theme highlights how participants were left feeling and what they thought about themselves due to the stigma of being on benefits and their experiences of being in the ESA WRAG and conditionality. Some participants spoke about feeling de-personalised either due to the assessment process, the fact that they are disabled or because of wider business ideology which is imposed on them. Most of the participants described how they felt that they were somehow to blame for the position they were in. Some of this was in the sense that they had not been competitive or career-focused enough, or they did not have the right qualities. For example, "and then you read all these stories in the press about any job is a good job and then you feel really bad for not wanting to take this job" (Charlie, 179-180). Imogen also provides an example of this, "When you're my age you're not able to physically do that anymore. So that's probably my fault for not getting a career and learning something when I was younger" (Imogen, 91-92).

Some participants described how the experience of being on benefits was internalised and how this left them feeling about themselves, which seemed to impact on their mental wellbeing. For example, “But also there’s a feeling that you don’t want to take more than what you think you’re worth” (Jenny’s support worker, 293-294) “Because I told you I’m not greedy. I’m not a greedy person. I’m quite happy what I get” (Jenny in response, 295) and “It’s the money I collect from the ESA. You don’t feel proud to spend it cause you know you’re sitting indoors. But I know I can’t do nothing about it” (Kevin, 85-86).

If someone is constantly telling, you should try harder. Have you done this, and this. Honestly, you’ve got to put yourself out there, you’ve got to apply for more jobs, they make you feel unvalued, like there’s something wrong with you actually (Dipesh, 166-169).

Meg described experiencing a panic attack when her payments were stopped for a short period. She explained how she felt that the stigma of “shame” due to being on benefits had built up and at this point she could no longer cope, resulting in a panic attack:

Yeah sure I’ve always in the back of my mind the things I explained earlier about being on the dole, not having a job, not being good enough in life, but panic, no. I sort of, it just presented itself in such a way that was so frightening to me, so totally unexpected. (Meg, 259-262).

My experience with the PIP is registration and for disability and I believe that I’m able. I may have been having this pain, I might have been falling and something, I am still able. I don’t need PIP, I just need to go out there and work. Even though they were saying, yeah you can still work and get PIP, I don’t want to hear anything to do with benefits. I just want to go out and earn. (Nailah, 264-267).

Nailah also described how being on benefits made her question why she was in this position and she began to doubt and blame herself, “I can do this, what is stopping me from doing this. Then you end up questioning yourself. What changes, what have I done wrong, how come I’m here” (Nailah, 348-350).

The internalisation of dominant narratives was also present when participants spoke about seeing themselves as a lost cause in some way, a sense that they were beyond help. This brought up the sense that they were somehow seen as outsiders and this may also have resonated with how they felt themselves to be placed in society and their local communities. An example of this comes from Daniel:

I think partly they don’t see any mileage in putting time into me. They’ve seen I’ve been ill for a long time, they’ve seen that I’ve been assessed and spoken to me as advisors and really there’s not much they can do for me, so why waste. No, no, this is just conjecture now but possibly management would say to people don’t waste time on people who aren’t going to get back to work. (Daniel, 68-72).

3.4.6 Power and politics. Participants spoke about the wider power structures which they felt impact on how they receive benefits, how they are viewed in society and how these structures have contributed to welfare reforms. The power structures were named as being present at three different levels, which relate to the three different sub-themes.

3.4.6.1 “Work or die”. The construct of ideological power structures emerged from descriptions of machine imagery when participants spoke about employment, business and concepts of work, society and of the benefits system. Meg described her limited experiences of the job market, “I don’t have a great knowledge of the working world out there, the corporate world, that big grown-up official world” (Meg, 24-25).

Dipesh spoke about the idea of a production line with reference to the job market but also how this was placed within society and spoke about a desire to be part of this:

At the end of the day you go to work, make the product, the company sells the product the customer buys the product, the customer then uses the product then the customer then goes out to buy that product again. The company makes the product again. It's a working cycle. I want to be part of that working cycle but I feel that I've been kicked in the teeth because of my disability. (Dipesh, 250-256).

Other participants referred to the process of claiming, conditionality and the benefits system as well as the companies that work within this as part of a machine and business culture:

I think of myself as a victim of a machine. This system that is just a huge machine that has been put on overdrive and it's hopefully about to come crashing down to the floor, grind to a halt, spectacularly, explode! Nuts and bolts flying everywhere. (Alice, 328-330).

They were saying in that article how they want to be supportive and work in a partnership, those buzzwords you often hear with businesses, being supportive of the claimant, I just wish that was true, but it isn't. That isn't how it works. (Charlie, 400-402).

The government is trying to pressurise you, the company you're attending have got their statistics and they've got their money. It just feels like a machine and you're being ground down and spat out the other end. (Frank, 251-253).

The above references to machine imagery appeared to be related to capitalistic ideology and business culture which dominate current concepts of employment.

3.4.6.2 "Government is trying to pressurise you". The participants also referenced their views of current political systems which they felt to have influenced and

shaped the changing face of welfare and reforms, “The Tory attitude is get the deadwood out the way, people like me” (Greg, 248).

Dipesh spoke about how they viewed political agendas impacting on how disabled people are viewed and treated by others, “The people behind the powers will never understand me or people with disabilities. They see a wrong look, where they are problems, they are lazy”. (Dipesh, 256-258).

Ed and Hannah shared their views on how political powers have impacted on society and created divisions. For example, “In other words, these Tory’s... They’ve gone too far with all these cuts and they’ve hurt a lot of deserving people” (Ed, 244-246) and “I think the government make the world very judgemental about people” (Hannah, 356-357).

3.4.6.3 “Divide and rule”. Some of the participants discussed reactions from other’s in society or their local communities and how they tend to avoid social situations, which can influence who holds the power in such relationships. These reactions from others is because of participants being on benefits:

I keep it quiet from other people a bit because some of the people I do know they tend to look down on me because of what do you call it. But they don’t know and they don’t understand and I just dismiss them as ignorant. (Ed, 169-171).

All participants spoke about the divisions in society that they have observed, which seem to occur through ideological and political power structures. They describe how this divide leaves those who are already in a vulnerable position with a lack of power. For example, “They are penalising and persecuting the lowest denominator in society which is the most vulnerable people, who they think cost the most, they don’t actually, they only want the minimum amount to get by on” (Alice, 513-515) and “You’re watching them going to work and you think why ain’t that me. I should be able to go to

work now. But you know there's something stopping you so it's pointless letting it fester over in your mind" (Kevin, 213-216).

If you're going, if you meet a new person one of the first things they ask is what do you do? I can't join in that conversation so I'll just sit over here. It does make getting to know people harder. It's that sense of judgement you get from people. (Ben, 100-102).

However, there were also occasions when some participants seemed to reinforce and support the dominant rhetoric. For example, "People that actually need the help are not getting it, because they are saying the truth. But those who doesn't need it and because they are lying are the ones that are getting the support" (Nailah, 311-312).

I don't like the way our country is used by economic migrants and stuff but at the same time I don't like the way it's used by English people who just take for the sake of it. Or lying or cheating but I don't know if that's a minority, but who would like that. In any country in the world, so it's not right. We are lazy, not me personally but a lot of people now. (Meg, 230-234).

Some participants spoke about how the divisions and power structures within society are created and maintained through dominant narratives projected through the media: "It's just being labelled part of this benefit sort of business. But at the end of the day I didn't ask to have these things wrong with me" (Liam, 199-201).

The above social power structures and divisions seemed to be in direct conflict with some of the more community-based values and ethics that some participants felt were important to them and that society seemed to be void of a sense of humanity. For example, "Everybody seems to be disheartened. There doesn't seem to be much common courtesy". (Frank, 437-438).

Greg noted his views on the interplay between the power of the business culture and its contrast with a value which is felt to be common to all human beings, one which he felt should be at the forefront of society: “The kind of idea that we are survival of the fittest through competition. And this misses the point that actually the human race above all has been able to survive through mutual aid” (Greg, 164-166).

3.4.7 Fighting back. This theme relates to descriptions of how participants have challenged the positions they have been put in, either through the stigma attached to benefits claimants, power dynamics or discrimination and inequality associated with impairments. This is done through three sub-themes.

3.4.7.1 “Unite with people”. This sub-theme highlights how some participants described a sense of comradery with peers who had been through similar experiences as themselves, which brought to mind a sense of a battle, “You don’t want to hear about another person dying because they’ve had their benefits cut but at the same time you suffer alongside them as a comrade almost, as an equal member of the same bracket in society” (Alice, 344-346).

Nailah described how her position now has helped her to connect and gain a deeper understanding of the issues that her previous clients faced, “I’m in health and social. Now I understand more what I’ve been saying to my clients. Now I’m in their shoes, I understand what they are going through” (Nailah, 329-331).

Other participants explained that working with others helped to create a social group for them as well as a way to challenge societal powers and stigma. It seemed strength in numbers and solidarity is a priority for groups who face inequality. For example, “Nobody feels isolated, we help each other, that is good.” (Dipesh, 222-223) and “I meet people with similar experiences and the reason they’ve joined campaigning groups is because of their experiences under this government” (Charlie, 227-228).

3.4.7.2 “Co-operating for the common good”. This sub-theme highlights how some of the participants used their experiences and skills as motivation to become more politically active. This was achieved through various means such as political activism, research and raising awareness. For example, Alice and Daniel spoke about becoming more politically active through protests and campaigns, “Going up to places like the house of commons and blocking the doorway (laughs) with my friends in their wheelchairs” (Alice, 63-64) and “I am also a bit involved with patients who are campaigning for better understanding of the illness and against the correct treatments and things like that” (Daniel, 265-267).

Ben and Frank discussed how they have used their academic and research skills to find out more about benefits, welfare reforms and others’ experiences. For Ben especially, this seemed to help him maintain his sense of self, “I suppose that’s important for my identity as well. To be able to use the skills I feel are important is important for my self-esteem whether the DWP likes it or not” (Ben, 188-190) and “They were making people wait for PIP and things like that. People were killing themselves and leaving suicide notes because money was getting stopped and people couldn’t help themselves” (Frank, 145-147).

Charlie spoke about how raising awareness of his experience of sanctions and his suicide attempt was helpful for him: “One of the reasons I use social media, is to alert people to these sorts of issues now and it’s my way, it helps me but it also helps other people” (Charlie, 33-34).

3.4.7.3 “These people tried to support me”. The final sub-theme identified when participants had spoken about sources of support. Participants spoke about some form of support they had received and why they had found it helpful. The sources of support were

either from professional services or from personal relationships, such as family and friends. For example, Alice and Imogen described various sources of professional support such as support workers, supported employment and DDPOs: “People checked up on you and made sure you were okay and if there were any problems they got dealt with” (Alice, 184-185) and “If it wasn’t for the DDPO I don’t think I’d be able to deal with it, they take a lot of pressure off. Cause they support you, make the phone calls” (Imogen, 22-24).

Daniel and Greg shared how their family and friends were their support systems and felt that they could turn to them in times of need, “It’s only a handful, only about 4 or 5 people, but that’s all you need to not feel alone and abandoned in the world, they would help in any way they could” (Greg, 419-420).

I have some family locally and I know if I got into problems I could say I haven’t got enough to feed myself this week so can you lend me some money and they’d give it to me, they’d say come round and I’ll feed you. I’m actually quite fortunate in that respect but it’s still very distressing. (Daniel, 48-51).

Hannah shared how she had created her support system through her local community:

But I have been living round my area for over 10 years. So, I know everyone there. All the shopkeepers know me. If I get in trouble they all know what I’m like. So, if anything they all help me out so I feel comfortable to quickly pop to the shop. You build your own network around things to make yourself feel comfortable to be able to do some sort of day to day things. (Hannah, 23-26).

3.4.8 Workplace values. This theme encompasses three sub-themes where participants’ experiences of employment are described, both through conditionality and also prior to being in the ESA WRAG. It also looks at barriers to employment and general views with regards to the job market.

3.4.8.1 “Low paid, precarious work”. This sub-theme focuses, in the first instance, on participants’ experiences of employment through the ESA WRAG conditions as well as aspects of work that they have found to be unhelpful. Common descriptions include work which involves low pay, low job security, jobs which were not in line with participants’ qualifications and work which involved a lack of autonomy. For example: “So, then you get an interview for one of those rubbish jobs you’ve applied for and you don’t want it because you’ve applied for it just to fill the quota. And that made me feel even worse (Charlie, 177-179) and “all I was doing was making someone else richer. Like they had no value for us. I didn’t get any fulfilment from it, it didn’t have any social impact” (Ben, 258-259).

However, all participants also spoke about aspects of work which they found to be helpful or which they valued and therefore sought. This came from past experiences of work, their own interests and motivations as well as current employment or voluntary work through their local DDPOs. Many of the participants spoke about having social value to their work. For example, “I’d love to be a support worker, to give back to someone who’s given something to me”. (Kevin, 43-44) and “My experience of being in work, it makes me feel happy, it makes me feel valued, it makes me feel like I’m contributing and doing my bit for society and helping others” (Dipesh, 189-190).

Some participants spoke about the importance of an understanding work environment which included a flexible and supportive approach: “Everyone sort of helps everyone when you might have bad days, small things like even just to talk to someone when you feel really low” (Liam, 89-90).

Working as part of a team, which was driven by the individuals who made up that team, was also an important aspect. Participants referred to these environments as a community, which gave them and the team a sense of shared values, autonomy and

ownership for their work, “You’re part of a team here, which I find is, it helps me immensely. Its good cause you can set targets and goals here which when you sit down and speak in a team, I don’t know. I just feel more valued as a person” (Liam, 83-85) and “the comradery, and they know what’s wrong. So, anything you say, like a viewpoint, they’re actually sharing what you’ve said to them, they know and understand” (Kevin, 337-340).

Meg spoke about the journey that her and her long-term employer had been on together, and that she had felt valued and noticed by her employer. This seemed to represent how important a personal connection was: “It was also later on, realising through old customers which in my local area I often bump into in the street, having discovered what my boss actually thought of me after all those years” (Meg, 315-316).

Some participants also spoke about gaining confidence, routine and a sense of purpose from their work: “I seem to be more happy and content. But as I said I was very isolated. Soon as I come here and then I could do the courses in here, I felt more happy” (Jenny, 232-233).

3.4.8.2 “They will exclude you at once”. This sub-theme attends to barriers to finding or maintaining employment. Most participants spoke about the interactions between their impairments and the lack of flexibility in the workplace which meant they could not maintain the job they had or struggled to find suitable employment that can offer them the flexibility and understanding that they need. Such reasonable adjustments seemed to be lacking in participants’ lived experiences of the job market: “because I told them that, I would be going out to get physio they stopped me. They says I didn’t tell them that during the interview” (Nailah, 197-199).

So if I’m having a bad day, if I had a proper job. I’ll ring, sorry boss I can’t come in cause I can’t get out of bed this morning. And then it will be like the next day

I'm either feeling down because I can't get myself up to be able to get to work so I might feel down so I won't go in that day. And you'll end up losing your job. (Hannah, 58-61).

Nailah then described how the above experience left her feeling and the impact it had on her mental health:

I was so, so, so depressed because that was supposed to be permanent after 6 months. I think it also allowed my pain to kick in very fast because it's like I energise myself, this will help me to pull through, regardless and for somebody to squash your dreams like that. (Nailah, 217-221).

In addition to the above barriers some participants referred to the current job market, their experiences of difficulties in finding a job and the aspect of competition in finding work. Ed described how the precarious nature of employment can impact on his self-confidence, "When you get laid off people don't realise, it seriously dents your confidence, even though it wasn't your fault and it perhaps wasn't the employers fault" (Ed. 167-168).

Participants also spoke about how they were discriminated against due to a variety of reasons. This was experienced by some participants both explicitly and more implicitly but was also a worry for those who had not experienced it. Some of the discrimination was due to age and older participants felt that they were discriminated against: "You look at the staff, there's not very many people of my age. They all seems to be middle aged or younger. But people in their 60's or 70's, unless they've been in the job long-term" (Imogen, 85-87) and "I was told in no uncertain terms that there were no jobs for people like me and people were finding that anyone over 40 were struggling and I was over 60 so there was no way in hell. (Greg, 224-226).

Dipesh, Frank and Greg spoke about how they felt discriminated against because of other protected factors such as their physical or mental impairments or because of race. For example, “Just because I have a disability they treat me unfairly, just because I am Indian they treat me unfairly” (Dipesh, 115-116) and “If they see that somebody’s got a mental health record for being a danger to himself and others, that will exclude you at once” (Greg, 343-344) and “To feel like that as if you’re being persecuted because of I’m a minority, not ethnic but because of my disability I was gonna be treated that way. As if they were trying to force me to give up” (Frank, 140-142).

Ed discussed how he felt employers were aware of the discrimination act, but it was not adhered to and discussing impairments is simply avoided when one is unsuccessful in a job application. “Discrimination laws which are fantastic in theory, but in practice an employer will give another excuse as they’re not allowed to give disabilities as an excuse not to employ. In other words, certain employers will lie about it” (Ed, 33-35).

The barriers and discrimination seemed to result in a sense of inequality among the participants which also reinforced their sense of divisions within their communities and wider society. For example, “We’re treated as shit, weren’t treated as 2nd class citizens. Just because we have a disability doesn’t mean we don’t deserve some respect”. (Dipesh, 162-164).

The way society punish you for being unemployed, for example, poverty and isolation, those things aren’t inherent to not having a job. The way society punishes you for those is what makes you unhealthy. So, you don’t get to go out and have fun if you’re unemployed so you’re isolated and so on. (Ben, 251-254).

Frank spoke about how he reacts in response to this sense of inequality, where his vulnerabilities are exposed and attacked by others:

I liken it to like a cat or any animal. If it has an injury it hides because it's vulnerable. It's just the same as humans. If people see you're vulnerable in any way, shape or form. They will pick on you, whether its sexual abuse or kicking you up and down the street because they see you're walking on crutches. I used to be quite tired looking but not now. When I go out my front door I have to seem like I'm strong. I really stand upright. I make it look as if I'm quite tough. Just because I know every time I walk out the door its dangerous. (Frank, 400-405).

3.4.8.3 “I miss working and miss being strong”. This final sub-theme focuses on participant perspectives on work and how this might be different from the more dominant ideas of competition, Waddell and Aylward's biopsychosocial approach and business culture. For example,

I don't call it giving people work, I call it exploiting them. You have capital, you see human capital and you say how can I exploit this human capital to my advantage and I think that's a terrible way of looking at human beings. (Greg, 152-155).

They also described how work fits into their lives, what role it plays for them and their own personal work ethics:

Cause my dad's always said when you start working, you have to start working at the bottom and then work your way up, cause then you know every aspect of the job. So, he sent me out when I was like 8/9 years old in a café, Saturday job, that's when it started. (Hannah, 84-86).

Their current relationships to work were explored and how this involves a balance between their health and finding suitable employment:

I do honestly think employment, being unemployed for a long-time really does affect your mental health, absolutely, 100%. Just, even anything is better than nothing in that sense. Where I spent so many years doing nothing, and festering, feeling worthless and then you join a place like this and you realise maybe I can become someone. You just get that self-belief. (Liam, 399-404).

This chapter has provided data extracts to support the themes and sub-themes identified during analysis. The themes and sub-themes will be considered further in the next chapter and expanded on by providing further interpretations and drawing on theory and research findings as well as further context in which to place the results.

4. Discussion Chapter

4.1 Chapter Summary

This chapter provides a summary of the thematic findings of the research. It draws on theory and previous literature to provide a context in which to place the findings, providing a deeper understanding of the themes. It then considers the strengths and limitations of the present research and suggests future directions of research. It considers both wider and more immediate clinical implications, specific to the field of clinical psychology. The chapter closes with a self-reflexive statement by the primary researcher.

4.2 Summary of Findings

Within critical realist ontological and contextualist epistemological positions, the aim of this study was to ascertain the experiences of disabled people who had been placed within the ESA WRAG. The study also aimed to understand how the participants made sense of and negotiated conditionality and sanctions and what impact this had on them. The study also aimed to explore participants' views and experiences of employment and employment support, which included aspects that they had found helpful and motivating as well as barriers within the workplace.

Following completion of thematic analysis, eight themes and 22 sub-themes were co-constructed. These themes and sub-themes illustrated the participants' emotional experiences, meaning making and ways of coping. They also focused on how such experiences were based within wider power structures and historical contexts, which the participants themselves spoke about. Interestingly, from the contextual information gathered from the participants, the majority of them began to claim benefits after long periods of sustained employment. The reasons were mainly due to redundancy and

difficulty with finding appropriate and secure work or due to physical health issues which appeared later in their working lives. These portraits contrast with Perkins' (2016) "employment resistant personality profile", where claimants are seen to have low motivation to seek work. This aspect of the "personality profile" does not appear to be present in the participants interviewed for the current research, therefore questioning the validity of Perkins' (2016) "personality profile" and welfare trait theory.

ESA WRAG: the good, the bag and the ugly represented how the sample was divided in their experiences of being in the ESA WRAG and of the WCA. They described a sense of time and focus on their health that this position gave them, but others also spoke about the inappropriateness of the work-related aspect of being in the group and that this optimism was detached from the reality that they faced. Overall, there was a sense that the groupings and assessment decisions were confusing and unpredictable.

Ruled by conditionality focused on how conditionality was experienced: through the more explicit experiences of courses which were based on ideas of psycho-compulsion, to more implicit rules of conditionality which created a sense of constant anxiety and a lack of autonomy. *Sanctions and suicidality* highlighted the experiences of participants who had been sanctioned but also how the threat of sanctions was managed. This theme drew out the constant anxiety, uncertainty and worries that participants experienced and the impact of this on their mental and physical health.

Interpersonal and relational aspects of experiences within the ESA WRAG were shared and *the importance of relationships* was one of the themes where this was further explored. Participants found staff to be either helpful or unhelpful, however also spoke about their perceptions of the evolution of the Job Centre through history as part of their community. They showed a level of understanding and compassion regarding wider political and economic pressures that staff faced. *Adaptation and defences* was a theme

that was constructed to represent how participants responded to being on benefits and facing conditionality and sanctions. It seemed that there was a constant threat to ones' sense of security with a need to conform and disregard ones' own values, principles and ethics for the sake of survival. Participants spoke about feeling infantilized and a lack of independence. However, it seemed some participants had internalized the neoliberal ideology that dominates welfare reform, as evidenced by individual responsibility and the idea of competition seeming to be at the forefront of their minds which then impacted on their mental health. *Power and politics* was a theme that was constructed through participants' discussions about ideological, political and societal power dynamics which interact at various levels to impact on how participants experience being on benefits and their position in society. Perhaps as a response to such power structures, participants also spoke about *fighting back* where finding support through sharing experiences, group identification and activism was seen as helpful in the face of discrimination and a sense of powerlessness. Finally, in thinking about barriers and change, *workplace values* was a theme that developed. This theme encompassed participants' thoughts in relation to what they wanted from being employed, how this linked with their own work ethics and jobs that they were being asked to apply for through conditionality as well as experiences of discrimination due to their impairments.

4.2.1 ESA WRAG: the good, the bad and the ugly. This theme was formed through participants' polarised descriptions of being in the ESA WRAG. Some of the participants seemed to find meaning, purpose and time in being in the WRAG and felt that regaining their health could be prioritized. This would suggest that these participants were appropriately placed in the WRAG according to their needs to both be able to take time to concentrate on their health but to also maintain some links with work-related activities (Kennedy et al, 2016; DWP, 2011). The results of the current research support

the findings of Kaye et al (2012) where some participants found being in the ESA WRAG to be a supportive and helpful experience. Some of these participants found the work-related activity aspects of the group helpful, particularly when they felt autonomy to pursue their own educational or employment interests and their descriptions of positive aspects of such activities are in line with the government narrative that work is good for one's mental health (DWP & DoH, 2016). These results reiterated the findings from the literature review in the introduction chapter (Rolfe, 2012; Weston, 2012; Shefer et al, 2016; Patrick, 2017; Reeve, 2017). However, the position that these participants are put in, whereby they feel the need to change something within themselves to improve their health shows an internalisation of Waddell and Aylward's biopsychosocial model (Shakespeare, 2016) and minimises how a lack of flexibility within the workplace, environment or society has prevented adaptations being made (Oliver, 1996). The internalisation that occurs is also linked to Foucault's theory of governmentality, whereby in this case the participants begin to self-regulate, conduct and evaluate themselves according to the dominant neoliberal and capitalist ideology (Lemke, 2002).

The counter argument from this theme was raised by other participants who felt that they were inappropriately placed in the ESA WRAG (Geiger, 2017) and how their attempts to be autonomous was undermined or punished (Weston, 2012; Reeve, 2017). These participants highlighted how the new groups of the ESA had been re-labelled and provided their own historical perspectives on this process, and this idea of re-defining and re-labelling has been evident since the Poor Law of 1601 (Beresford, 2016). Participants spoke about how the invisibility of their impairments meant that the WCA was unsuitable and resulted in them being placed in an inappropriate group. Research by Barr et al (2015), Kaye et al (2012) and Earl (2015) has shown the extent of the negative impact that the WCA and inappropriate placement can have on claimants. Marks et al (2017) had

also described how participants spoke about the invisibility of mental health conditions. Furthermore, DWP staff have also described the inappropriateness of the WCAs (Garthwaite et al, 2013).

The confusion that the WCA system caused and the worry of being inappropriately placed meant many participants felt they would have to exaggerate their impairments to ensure they received a fair assessment. There was also a sense of playing a role and compliance with the rules when it came to attending appointments as part of the WRAG. Three areas from the current results: invisibility of impairment; the need to exaggerate impairments; how this conflicted with own values and ethics, were also described in the literature review (Manji, 2017; Shefer et al, 2016; Weston, 2012).

4.2.2 Ruled by conditionality. This theme focused on participants' experiences of conditionality. They described various forms of mandatory work-related activity and these seemed to highlight how elements of Waddell and Aylward's biopsychosocial model (Shakespeare et al, 2016) and psycho-compulsion (Freidli & Stearn, 2015) were incorporated into the activities. There was evidence that the language used by staff leading the work-related activities was focused on highlighting how the individual's relationship with their impairment was what needed to be changed, invalidating and minimising the lived experience of disabled people. Work-related activities incorporated elements of psycho-compulsion (Freidli & Stearn, 2015) where participants were told to "think positive" to overcome their impairments and that they needed to change parts of themselves (i.e. confidence, competitiveness and how to present oneself) (Frayne, 2015). By engaging in such activities, it seemed that participants were being told that they could be a part of the masses again, if only they subscribed to the idea of "magical voluntarism" (Smail, 1993) and be reintegrated into society (Fromm, 1955). One of the significant results from this theme was that two participants had spoken about being told to minimise

or remove their achievements and qualifications from their CVs and how distressing this experience was for them (Smail, 1993). One can see how such interactions and pressures would negatively impact on individuals' mental health, a loss of connection to ones' strengths, resilience and achievements, leading to apathy and alienation from self and others (Fromm, 1955). Furthermore, some participants felt the courses were not at the appropriate level to meet their needs, which was also found in previous studies (Reeve, 2017; Rolfe, 2012; Weston, 2012). They also spoke about pressure to identify themselves as being self-employed which mirrors the self-employment statistic changes over the last seven years (Dobson, 2017) and the re-defining and re-labelling of welfare recipients throughout history (Beresford, 2016).

Within this theme some participants described how conditionality was not felt to be discussed explicitly but rather implied. They described feeling high levels of anxiety and uncertainty with regards to what they felt they could or could not do and how it would affect their benefits (BPS, 2016; Geiger, 2017). This led to feeling like there was a lack of control and autonomy over one's choices (Patrick, 2017; Shefer et al, 2016; Rolfe, 2012; Reeve, 2017). Implicit conditionality was described as a waiting game, where participants would suddenly be faced with conditions and this created further anxiety (Marks et al, 2017; Patrick, 2017; Weston, 2012). The implicit nature of conditionality can draw on neoliberal ideology (McKenzie, 2017; Smail, 1993; Fletcher & Wright, 2017) where those in power are seen to coerce the more vulnerable in society (Manji, 2017; Rolfe, 2012; Patrick, 2017; Weston, 2012).

4.2.3 Sanctions and suicidality. This theme was constructed from participants' descriptions of sanctions. This was in relation to some of the participants who had spoken about how being sanctioned had affected their mental health, leaving them feeling isolated, depressed, anxious and in one case, resulting in an attempt to take ones' life

(Barr et al, 2015; Disability News Service, 2016). Sanctions also left participants unable to meet their basic needs, and they therefore could not afford food or heating which further effected their physical impairments, for example increasing pain from arthritis. The above findings show support for the position that the BPS outlines in its paper in reference to conditionality and sanctions (BPS, 2016) and also on the conclusions of the Joseph Rowntree Foundation (2014) and Geiger (2017). The above findings also provide further support for the findings discussed in the literature review (Shefer et al, 2016; Patrick, 2017; Rolfe, 2012; Weston, 2012).

This theme was also formed from the experiences of participants who had not been sanctioned, but faced the threat of sanctions. There was felt to be a lack of flexibility in how they perceived the Job Centre with little or no leniency for mistakes or missed appointments. There were occasions when participants would do everything they could to ensure they would not get sanctioned and at times this meant putting their physical health in jeopardy, as Jenny's support worker described. The threat of sanctions and the fear and uncertainty that participants described may be due to the inconsistent and ineffective use of sanctions (NAO, 2016). The fear and worry on the financial repercussions has also been described in research by Marks et al (2017), Geiger (2017), Weston (2012) and Reeve (2017). This feelings that sanctions and conditionality can invoke is also a concern for those who work for the DWP as job advisors or welfare-to-work providers (Garthwaite et al, 2013) and they have spoken about their reluctance to use sanctions and instead being able to sympathise with claimants (Grant, 2013).

4.2.4 The importance of relationships. This theme was formed from participants' accounts of the Job Centre on two levels, one was from the immediate experiences with staff and the other from experiences of the wider benefits system. There seemed to be a clear difference in these experiences which were either helpful or

unhelpful, supporting the findings of Reeve (2017). However, even though some participants reported having experienced a lack of understanding, lack of respect or inconsistency from the Job Centre and from staff they seemed to be able to take up the position of the individual employee and consider the pressures that they faced, providing a complex understanding of their experience with the staff. This seems to be in contrast to the neoliberal ideology of welfare reform, where difficulties are associated with individual factors rather than considering wider systemic issues (McKenzie, 2017). The identification of external and systemic pressures seemed to reduce the divide and social distance between staff and participants (Paxton, 2017; Stiglitz, 2013). A historical and social perspective of the Job Centre was also provided by one participant, which helped to identify the context of the Job Centre and the staff currently and how this may have changed over time (Willig, 2012). This description of a changing Job Centre has also been described through the eyes of Job Centre staff themselves, whereby the work has been experienced as increasingly target-focused and involving short-term contracts (Grant, 2013).

An article by Fletcher (2011) describes how welfare reform changes are implemented by Job Centre staff. Within this there are descriptions of how conflict arises between more needs based complex assessments and meetings with claimants versus target-driven and tick-box tasks, including implementing sanctions and the focus to move claimants into work. The article also highlights the systemic pressures, with significant reductions in staff as well as low staff morale. These conflicting pressures on staff would possibly impact on how they interact with claimants as this theme has highlighted.

In terms of helpful aspects participants spoke about flexibility, a sense of humanity, respect and understanding from the staff. This is further evidenced in the qualitative findings from interviews with job advisors, highlighting resistance to the

system (Grant, 2013). They described employing flexibility in their work by using discretion and calling claimants to remind them of appointments.

4.2.5 Adaptation and defences. This theme was constructed from how participants made sense of their experiences of being on benefits, conditionality and sanctions but also how they coped, either through their behaviours, feelings, sense of self and interactions with society and people in their communities. Participants spoke about how they felt infantilized, but also about how this included having to be watched and monitored with immense pressure to always do things right and according to how the DWP or Job Centre wanted things done (Patrick, 2017; Manji, 2017; Southwood, 2011). When they felt as though they were dis-respected or spoken to in a way that was not appropriate they seemed to be powerless to highlight this for fear of the consequences of sanctions. Participants' fear of speaking up highlights how the "authoritarian body" (Fletcher & Wright, 2017) maintains power over those who are vulnerable. The coping mechanisms and distress of participants could also be understood as a reaction to the lower social rank that they are positioned in by society (due to being claimants) and then manifesting in the interaction with the Job Centre staff, whereby there may be unconscious social comparisons during such interactions (Johnson et al, 2012; Davies, 2016). The findings also echo those reported by Wilkinson and Pickett (2010) whereby those placed in lower social positions are seen as less able, which is perhaps reinforced through how participants report being treated as children and having to be monitored. An alternative view to understanding such experiences of negative interactions with Job Centre staff involves understanding the pressures that the staff also face as discussed above by Fletcher (2011). He describes how the Job Centre staff have felt a lack of autonomy, and being constantly monitored themselves through business targets and the findings from the current research could show how this pressure is then filtered down to

claimants. Furthermore, Grant (2013) described how job advisor staff try to focus on claimants' needs and ensuring support is provided rather than being target-driven, and that some staff took up the position of defying the targets, which is similar to the aspects of the *fighting back* theme.

Participants also described how they felt a sense of constant anxiety and worry through the lack of security due to being on benefits and from the fear of sanctions which has also been described in the literature review (Patrick, 2017; Shefer et al, 2016; Rolfe, 2012; Reeve, 2017; Manji, 2017; Weston, 2012). Interestingly, participants seemed to be internalising the 'deserving' versus 'underserving' labels which have been the dominant narrative from the time of the New Poor Law in 1834 (Beresford, 2016; Garthwaite et al, 2013). Bell (1996) describes this as a defence where the more vulnerable parts of the self are split off and projected while identifying with a more powerful internal object, which denigrates any sense of ordinary dependency. This internalisation was also observed through participants' explanations of the money they received and how minimal this was, which they seemed to use to distance themselves from the media narratives of claimants living lives of luxury, which is also a narrative that Perkins (2016) reinforces through his "employment resistant personality profile". During the time of the interviews it was felt that participants were providing examples of how they justified and defended their existence not only within their communities but also to the primary researcher, perhaps feeling that this was necessary due to the power differences. Recognising and drawing attention to such important power differences and the context in which the data was collected maintains the epistemological position of this research and highlights how the data may have been shaped through participant-researcher interactions.

This theme also highlighted how participants felt de-personalised with little value, which supports the findings of other studies in this area (Earl, 2015; McNeill et al, 2017).

Participants described internalising the dominant narrative of individual responsibility for their impairments and lack of employment. Some of this was in the sense that they had not been competitive or career-focused, or that they did not possess the right qualities. It seemed that they had internalised (Southwood, 2011) the neoliberal ideology (McKenzie, 2017), psycho-compulsion strategies used as part of conditionality (Freidli & Stearn, 2015) and aspects of Waddell and Aylward's biopsychosocial model (Shakespeare, 2016), such as responsibility being solely placed in the individual. Furthermore, participants also seemed to internalise that they were beyond help, which conveyed a sense of hopelessness. One could argue that due to the way that benefits claimants are stigmatised and undermined at every level they perhaps have lost hope and become alienated not only from society but also from themselves (Fromm, 1955). A similar finding has also been shown in a study which interviewed welfare-to work providers and job advisors (Garthwaite et al., 2013). In this study, some participants spoke about how the pressure to tick boxes and meet targets meant that people without long-term health conditions were more likely to be helped and supported, and individuals with long-term conditions were overlooked as a result.

The findings from this theme also highlight the importance of social factors and wider political pressures which impact on the treatment of marginalised groups which is a crucial orientation within community and liberation psychology (Kagan et al, 2011; Burton & Kagan, 2005). The findings regarding conforming to the requirements of the Job Centre, internalisation of the biopsychosocial model and neoliberal ideology also show how mental distress can increase due to the pressure that one may feel to conform to the more dominant powers. However, Fromm (1955) argues that this can lead to further mental distress and that instead these power structures should be named rather than just accepted and conformed to.

4.2.6 Power and politics. This theme developed through the construction of participants' perceptions of wider power structures which influence and shape their immediate experience of benefits. These power structures were described on three levels: ideological, national and social. They described how the individual was lost and replaced by a business culture which seemed to be represented through descriptions of machine imagery such as when Frank described feeling like "being part of a machine". This sense of a dominant business culture and machine imagery is discussed by Smail (2005) and Fromm (1955). For the participants this seemed to create a lack of value or worth in themselves if they did not conform to be a part of the machine. Friedli and Stern (2015) also highlight how the objective of psycho-compulsion and therefore conditionality is to create an individual who can be a part of the dominant business culture. The "apathy and destructiveness" that Fromm (1955) describes as a result of this dominant business culture can be seen in the descriptions that participants provided of the machine grinding down the individual (as described by Frank) or by the violent and angry reactions in response to a malfunctioning machine, and one could hypothesise, system (as described by Hannah). Jessop (1996) describes how society is structured around a capitalist culture with a focus on mass production, also known as Fordism. He describes how economy can overcome the barriers of Fordism with post-Fordism which is viewed as a more flexible machine. The sense of a "conveyor belt" and the ever changing and precarious nature of employment is also manifested within the Job Centre, where there is seen to be little difference between the Job Centre staff and the claimants (Fletcher, 2011). This is further discussed in the findings of Garthwaite, Bambra and Warren (2013) who highlight how job advisors and welfare-to-work staff have described a highly competitive environment where different companies within the benefits system compete to meet targets.

The second level of power structures were described as political and participants paid particular reference to welfare reforms and austerity cuts. They also appeared to attribute blame for welfare reforms with the Conservatives (who brought about neoliberal ideology into welfare reform). Participants spoke about feeling that false political agendas created division, pressure and discrimination for those in receipt of benefits. As discussed in the introduction chapter, divisions in society were created through the development and re-shaping of the welfare state (Beresford, 2016) and through political agenda. However, Baumberg-Geiger et al, (2012) and Tyler, (2013) had shown how these reforms and divisions were exacerbated by the politics of both the Liberal Democrats and New Labour governments. Smail (1993) also highlights how the discourse of austerity cuts are seen to be the saviour for the majority of society, further discriminating and criminalising those most in need. What the participants are highlighting here are the unspoken political powers that drive and shape societal and media discussions about people in receipt of benefits and further place responsibility within the individual rather than recognise social or political factors (Smail, 1993). The divisions in society through media coverage and political agendas has also been described in a study by Mills (2017).

The third level of power structures were seen as a result from both political powers and media forces and participants saw this as resulting in a division within society and within their local communities, where dominant discourses were internalised by the larger group (Stiglitz, 2013). An example of this came from Alice who spoke about a “polarized society” because of how claimants were portrayed by media as “cheats” and through a “false austerity” narrative. These divisions were due to participants being in receipt of benefits and their impairments and their employment status (Beresford, 2016).

Negative reactions from society resulted in participants avoiding interacting, withdrawing, feeling judged, alienated and isolating themselves (Fromm, 1955). Such

isolation and withdrawal leaves little space for stories and experiences to be shared between groups and for the opportunity for dialectic enquiry to uncover different truths (Bhaskar & Noorie, 1998; Fromm, 1955). The above results of the divide in society and the resulting mental and emotional impact echoes the quote by Freud (as cited in Wollheim, 1991) described in the introduction chapter, whereby Freud notes latent fragmentations within social structures and divisions based on wealth, resulting in discord between groups. This divide also reduces complexity and creates a primitive split of “deserving” (good) and “undeserving” (bad) (Bell, 1996). Furthermore, the divisions, social positioning of disabled people and judgments of society and within communities due to impairment are in direct conflict with the social model of disability (Oliver, 1996; Davies, 2016) and have also been evidenced in other qualitative studies (Garthwaite, 2015; Charmaz, 1983). Bell (1996) provides an explanation for such divisions, whereby feelings of vulnerability and helplessness are projected into marginalized groups, protecting those who project such feelings from experiencing them.

The above results are also in line with those of Marks et al (2017), McNeill et al (2017) and Mills (2017) as described in the introduction chapter and with studies discussed in the literature review (Reeve, 2017; Manji, 2017; Rolfe, 2012; Shefer et al, 2016; Weston, 2012; Patrick, 2017) which described the stigmatisation that participants faced. The above results, whereby participants label the submerged structures is an example of “consciousness-raising” (Fisher, 2017) whereby such exposure of structures highlights their causal powers in relation to mental distress and therefore lessening the individual responsibility that is usually the product of neoliberal views.

4.2.7 Fighting back. This was a theme which highlighted the ways in which participants located resources and challenged dominant power structures. From their above experiences of being made to feel stigmatised, alienated and isolated, they found

strength in their shared experiences. This finding adds to the current literature as the researcher has not encountered such a finding in research in this area. This shared understanding seemed to bring with it a determination to voice ones' experiences and needs and to highlight how this was being ignored by the majority. The various forms of activism that participants describe are considered to be based on the social model of disability (Oliver, 1996), where social, environmental and wider systemic factors are highlighted which results in the individual being disabled. Furthermore, what underlies these forms of social action could also be understood through the lens of a combined community and liberation psychology perspective (Burton & Kagan, 2005; Moane, 2003), whereby the focus and work is guided by the priorities and needs of marginalised groups and viewed as a social problem rather than an individual one. Priorities such as raising awareness, naming various power structures that influence reform, identifying barriers, generating new narratives and bringing these into the publics' awareness are considered to be at the forefront. Groups such as Psychologists Against Austerity have highlighted how such connections to others and agency are representative of a strong community (McGrath, Griffin & Mundy, 2015). However, at the most basic level this theme represents what David Smail (1993, p170) describes as "The *first* move to be made in confronting outrageous fortune is to stand shoulder to shoulder with others in contemplation of its effects" and in effect this theme highlights the importance of this type of action for the participants in this study.

4.2.8 Workplace values. This was a theme which was constructed through an understanding of how participants viewed employment and seeking work, barriers that they faced and how this related to their experiences of employment through conditionality. Participants described how, through conditionality, they were required to apply and take up posts which did not contain the elements of work they were seeking

(Rolfe, 2012; Patrick, 2015). Such work had low job security, was repetitive and offered no autonomy, decision-making or influence (Geiger, 2017). The type of work that was offered as part of conditionality contained elements which participants had found to be unhelpful and de-motivating in previous work they had had, prior to claiming benefits. This led to a negative impact on participants' mental health, where they were left feeling anxious, low and with a lack of security. Instead participants seemed to value jobs which were tailored to meet their ability levels, were challenging and had social value. Although the DWP (2011) argue that such conditionality and work experience will lead to increased equality for disabled people, one would argue that offering such precarious work to those in the ESA WRAG reinforces inequalities: it defines their worth as being placed within this type of work only, rather than in the work that *they* would find meaningful and valuable. This reinforces the position of the BPS response to the "Improving Lives" green paper (BPS, 2016), which states that precarious work can exacerbate mental and physical health impairments (Marmot et al, 1978; Marmot et al, 1991; Beresford, 2016).

Participants also spoke about the discrimination in previous employment and within the job market currently, due to their impairments and barriers to employment that they have experienced (Oliver, 1996; Beresford, 2016). These findings supported those of Kaye et al (2012), Weston (2012), Patrick (2015) and Manji (2017). The discrimination was not made explicit but was instead alluded to or felt to be present by participants. The discrimination and lack of jobs (based on location), are important barriers that have also been highlighted by welfare-to-work providers and job advisors (Garthwaite et al., 2013).

What did seem important to participants, was that most of them wanted to be part of the working masses and still held onto their work ethics and values. However, this then seemed to cause them distress when they faced the fact that they were having to

claim benefits, perhaps because they had internalised the meaning behind this and the stigma from society, perhaps leading to low self-esteem and self-hatred. These results provide new data on how this particular sample view work and how their values influence engagement with the job market, although Reeve (2017) does highlight the desire to return to work in his sample. Again, we see that these results challenge Perkins' (2016) "employment resistant personality profile", where participants described a motivation and desire to be working, but due to barriers in the workplace, inappropriate work or their health needing to take priority they were unable to (Stiglitz, 2013).

4.3 Critique and Directions for Future Research

Sampling, methodological and theoretical strengths and limitations of the current study will now be considered. The limitations help to illustrate directions for future research which will also be discussed.

4.3.1 Strengths. It was felt that this study added to the existing literature on experiences of conditionality, sanctions and benefits. It brought a specific focus to the sample, in terms of experiences of the ESA WRAG. It also added further exploration of concepts of work and employment, which has not necessarily been a focus for previous research, but was felt to be important in considering barriers but also wider influences on how ideas of work can be restricting and the impact of deviating from such ideas.

Further to this, the methodology was deemed appropriate as it gave a voice to oppressed and discriminated against groups and brought into view a complexity to the aims that can otherwise be ignored or become lost in populism. The qualitative methodology allowed for political pluralism to emerge and this involved multiple values to be discussed, allowing for reason and for ideas to be generated about complex resolutions encompassing diversity and difference (Baggini, 2016).

It was felt that the methodology and researcher attempted to maintain a critical realist position which allowed for the lived reality of participants to be thought about in the context of social factors and power structures (Smail, 1993). As discussed above, the contextualist epistemology was maintained throughout as the primary researcher considered their own impact of power during the time the interviews were conducted and considered this was reflected in how participants appeared keen to not be seen as work-shy. This may have therefore, shaped the data that was collected and what participants felt comfortable to speak about.

The number of participants was felt to be appropriate and within the guidelines for qualitative research using thematic analysis (Braun and Clarke, 2013). The current study also provides sample and recruitment information which is important to the context of the aims of the study and provides credibility and applicability (Johnson & Waterfield, 2004). Further to this, the current research explicitly defines the rationale for the choice of methodology and analysis and is explicit in the process of analysis, increasing the auditability of the research (Johnson & Waterfield, 2004).

There was felt to be an appropriate representation of men and women and this was important in the understanding of how gender stereotypes impacted on how participants experienced being on benefits and being unemployed. Specifically, the results were made sense of within the context of social pressures for men to be providers and seen as strong in the face of significant traumas (as described by Kevin). This seemed to manifest through male participants reflecting on how difficult it was for them to share their anxieties and distress with others. They recognised that doing this, resulted in a breakdown of the dominant ideas of what it means to be man and they were left with uncomfortable feelings. Furthermore, some of the female participants described how being a single-mother and raising a family had taken priority when they were younger

and this meant they felt that their employment and working life had not been as focused or developed as other “career-driven” people (as described by Imogen).

Furthermore, deviant case analysis was felt to be used and was valuable in understanding alternative and conflicting experiences which were not in line with the majority of participants (as discussed by Liam and Alice). Such deviations were thought about and this was felt to highlight the complexity of such an area of research.

Self-reflexivity was also felt to be used to help provide context to the primary researcher’s relationship to the topic. It was also felt that relevance both clinically and in wider contexts was highlighted and discussed, as in the implications section and this was felt to be important to the truth value and transferability for the research (Johnson & Waterfield, 2004). This was also an area that was not explored in the studies identified in the literature review and therefore this was felt to be an important part of the development and process of the current research.

A final strength of the study was that although the participants were based in different parts of the U.K, the bulk of the sample came from the capital. This was felt to highlight issues related to barriers to employment and help understand how this was experienced differently according to location where employment rates and job opportunities may vary.

4.3.2 Limitations. It is recognised that this study has limitations in a number of areas, one of which is sampling. This sample was recruited through the organisation which works with DDPOs to promote equality and inclusion. It is recognised that participants who showed an interest and were recruited to this study may represent a group of disabled people who are politically active and motivated to share their experiences and stories. However, there may also be disabled people who are perhaps less vocal, less motivated or more isolated from such opportunities and who may represent a

group of people who are perhaps significantly affected and perhaps cautious about voicing their experiences for fear of this impacting on their benefits. Future studies could perhaps consider alternative recruitment strategies, which involve identifying individuals who may be socially isolated (and perhaps not engaging with DDPOs) or those who may be at the start of their journey in receiving benefits. One way to achieve this would be for primary researchers to recruit directly from Job Centres, either by waiting outside or working with Job Centres to complete recruitment.

Only two of the participants were non-White and this highlights that further complexity of discrimination could not be explored, as well as an over-representation of White participants in this research. Data from 2016 (DWP, 2017) shows that in the U.K., 4% of white people were unemployed compared to the highest rate, which was 11% among Indian/ Bangladeshi people. Therefore, this study was limited in that it did not reach out to Black and Asian Minority Ethnic (BAME) groups during the recruitment process. This meant that BAME participants were under-represented in this research. Participants described how they felt marginalised by society due to being on benefits and had been discriminated against due to their disabilities. Perhaps having a more ethnically diverse sample would have contributed to the understanding of how the above issues interact further with issues of race and ethnicity. Therefore, a potential future study could explore the experiences of BAME individuals who are in receipt of benefits, as this might add further complexity and understanding to the current literature and research. This could involve reaching out to these groups specifically during the recruitment process and ensuring they are adequately represented in future samples.

The inclusion criteria for the study stated that potential participants had to self-identify as disabled. The language used may have been problematic in that some people who had considered participating may have felt they did not self-identify as disabled and

perhaps preferred to use alternative language and this may have presented a barrier to them participating. In effect, the inclusion criteria imposed a label on people which they may not have been comfortable with. For example, during her interview, Nailah spoke about finding it difficult to come to terms with the label 'disabled' and that she still viewed herself as 'able'. Future studies in this area could involve focus groups on issues such as this and on the language used in the development of information leaflets and inclusion criteria. Although the current study did conduct a focus group to help with developing the topic guide for interviews and to provide feedback on participant information sheets, it may have been helpful to work alongside the focus group in designing these from the beginning, to include recruitment processes, rather than seeking feedback once they had been developed.

In terms of data analysis, although the research initially aimed to use respondent validation with all participants who consented, this was not achieved due to time pressures and only a small number of participants were contacted. Perhaps if all the participants were contacted, then the themes would have encompassed a more complex understanding. Furthermore, triangulation process were not utilised during the analysis and again due to time limitations, the primary researcher completed the analysis independently. These two limitations, were also limitations of the studies in the literature review and this raises questions about the confirmability and dependability of the findings (Johnson & Waterfield, 2004).

The above links to the next limitation, where it is felt that due to time restrictions the current research was not felt to be fully user-controlled (Beresford, 2016). Although the research was developed collaboratively with the external supervisor, who self-identifies as a disabled person and the focus group helped to develop the topic guide, other areas of the research could have been user-led. For example, the design and

development, including recruitment, method of data collection and analysis could have been led by disabled people. From the participant interviews it was clear that within this sample there were some people who would have been willing to undertake such roles and this could be a consideration for future projects.

A final consideration is that this research took a critical realist ontological position and thematic analysis was used to present the results. Another way of conducting the research would have been to explore the role of language and its' use in areas such as this. Although this research did attempt to highlight some of its' uses and provide historical context, there is scope for future research to adopt a social constructionist position or to utilise analytic methods such as discourse analysis to take up and interrogate the role of language within this topic area.

Further areas for future research would be to explore a more causal link between resistance and outcome for participants. One example of this could be to identify if there are any associations between individuals who actively resist dominant power structures within welfare reform and the outcomes (mental wellbeing, sense of control and power) for those individuals. An alternative to this approach may be to see if individuals who express a need to change themselves and are therefore more compliant with the approach promoted by welfare reform have more positive employment outcomes through being in the WRAG or whether there is no indication that taking this approach does directly lead to better employment prospects.

4.4 Implications

This section will discuss implications for the findings both within the wider context and within the field of clinical psychology.

4.4.1 Wider Implications. The current research hopes to add to the expanding literature and evidence base on the effects of welfare reforms both on claimants

immediate physical and mental health. It also hopes to contribute to developing an understanding of the roles of various power influences, which may otherwise go unnoticed. For example, the historical rhetoric and role of media in influencing how vulnerable groups are positioned within society; how ideological structures shape political reforms and in turn remove opportunity, diversity and individuality for members of society; how this then forms a divide and creates separate groups within society, heightening paranoia and suspicion, removing opportunities to engage in conversation and open up dialogue.

There are current plans to launch the findings in Parliament and to use it as a platform for discussion with groups involved with ESA WRAG, conditionality and sanctions. There are also plans to disseminate through national press agencies and to edit the findings for publication in *Disability and Society*. Further discussions will be held with supervisors to identify other appropriate platforms for the research to be disseminated. This may involve classing the research as 'grey literature', where it would be distributed and freely accessible on websites related to welfare reform research. The researcher also hopes to attempt to publish the research in a relevant and appropriate journal such as the *Journal of Poverty and Social Justice* or *Critical Social Policy*. The researcher also aims to present the research at relevant conferences and to possibly publish in appropriate BPS Clinical Psychology Forum publications.

It is also hoped that the current research findings will in some way be able to contribute to the ongoing welfare reforms in the U.K. and at the very least, to create space for policymakers and those who contribute to such policies to think and discuss some of the experiences which have been highlighted here. In particular, it is hoped that special attention will be paid to the impact of sanctions, conditionality and the importance of an appropriate job market for disabled people. It is hoped that the findings may also be

shared amongst those involved in raising awareness of barriers that disabled people face, such as in areas of employment, local communities and mental health.

There is also scope for the findings to be utilised in communications by Psychologists Against Austerity and BPS response papers, which focus on possible mental health impacts of welfare reforms. Specifically, professionals' bodies such as the BPS are regularly asked to comment on suggested reforms and it is hoped that this research will assist those working within the BPS to consider wider social factors and the long-term effects of aspects of welfare such as conditionality and sanctions. The research also would be of benefit to the DWP as participants have described aspects of work that they find to be beneficial and which aligns with their values. This could help to contribute to supported work programmes for those who feel this would be appropriate in their journey, rather than allocating claimants to jobs that they find to be detrimental to their mental and physical wellbeing. The findings also add weight to the questioning of the effectiveness of the Waddell and Aylward biopsychosocial model in its aim of moving people into employment through locating the problem within the individual and trying to push people to change.

4.4.2 Clinical implications. There have also been a number of implications which can be considered within the field of clinical psychology, specifically. When working with clients either as part of assessment for therapeutic services, or intervention, it is suggested that clinical psychologists should inform their assessment and formulation by considering wider social issues. At a more immediate level, psychologists could use tools such as power maps (Hagan & Smail, 1997) or ecomaps (Hartman, 1978). Power maps (Hagan & Smail, 1997) help the individual to work with the psychologist to represent different forms of power in their lives, to identify how they are conceptualised and how change can be brought about through identifying areas which the individual

would want to focus on. Hagan and Smail discuss how proximal influences (such as family relationships, work and education) are more easily thought about and effected through therapy but that distal influences (such as political, economic and cultural power structures) are less accessible and less easy to change. However, as described in the results section and above, the forming of groups and activism can bring about change in these areas.

Ecomaps (Hartman, 1978) are also a helpful tool to visually represent an individuals' relationships, the strengths of such relationships and whether they are a source of stress. Ecomaps not only look at close personal relationships such as family and friends but also map out wider influences such as employment, education, welfare, legal systems, religious groups and healthcare. They can be detailed and importantly highlight the direction of influence. These maps can prove helpful in generating thinking and discussion about the importance of the individual in context but also in identifying supportive relationships which may have been overlooked.

At a wider level, working with clients individually or within multi-disciplinary teams, supervision or research, McLelland (2013) provides a model of formulation which encompasses how inequalities exist through unequal resource distribution and how ideological powers and discourses privilege one group over another. This model also calls for psychologists to take a critical stance towards so called "evidence-based" practice and interventions which favour quantitative methods over qualitative ones which can distort the complexity of issues related to mental health. It also focuses on identifying difference and individuality which should be encouraged and focuses on how social action can be a form of treatment for mental health difficulties.

Another alternative is the social action model, developed by Sue Holland (1992), which can be thought about as stages of treatment, which can be worked through in a

linear fashion or dynamically, where an individual may move back and forth between stages and may not experience all stages. This model encompasses four stages. The first is that the individual agrees to take medication and therefore passively treats their mental distress, reinforcing the neoliberal ideology which lies behind this type of treatment. The second stage involves the individual engaging in psychotherapy which helps them to attribute meaning to their experiences and therefore begin to consider what factors may be contributing to their distress. The third stage involves group therapy which brings together those in similar positions and who may also be viewed as vulnerable or discriminated against groups and similarities in experiences begin to emerge. The final stage is where from the group social action can take place. By having identified the power structures which impact and exacerbate mental distress, the group can target such forms of oppression and discrimination to bring about change. The results of the current research highlight an area which is overlooked where psychologists may of assistance through the application of this model. For example, psychologists working with clients on an individual basis could use the formulations described above to help identify those who recognise how factors of discrimination and oppression may be contributing to their mental distress (i.e. those who have difficult experiences of ESA or the WCA). Alternatively, individuals could be identified or invited to groups through working with local DDPOs. The individuals could then be invited to meet as a group, led by the psychologists within the local area/ service, opening a space for experiences to be shared. This could then result in social action by the group in the forms described in the interviews of this study (i.e. campaigning, raising awareness).

Extending the above ideas further, the Power, Threat, Meaning Framework (Johnstone & Boyle, 2018) which was described in the introduction chapter is a framework which can be used by clinical psychologists when working with individuals.

In terms of the findings of the current research, aspects of power can be thought about in participants' discussions of power structures which they identify as influencing their levels of security and mental wellbeing through welfare reforms. Power is further highlighted when participants describe how coming together and fighting back changes the power balance at an individual level. Threat is thought about through descriptions of how conditionality, sanctions and being in the ESA WRAG is experienced and how influences of distal power seem to increase the levels of threat that participants experienced. Participants seemed to bring meaning to their experiences through their interactions with Job Centre staff and with this came a sense of humanity and understanding to why they were being treated as they were. They also seemed to try to bring meaning to threat experiences by internalising or withdrawing from society, which reinforced the power and therefore levels of threat. However, participants also responded by creating their own groups, sharing experiences and challenging the powers as well as placing their values and at the forefront of what they were involved in.

The Framework (Johnstone & Boyle, 2018) lends itself to Smail's (2005) concept of proximal and distal powers and tries to consider how both forms of power operate and can cause distress. For example, the distal power influences of ideology, culture and division (as highlighted in the theme *power and politics*) is considered to be enacted through some of the proximal influences such as conditionality, sanctions and interactions with Job Centre staff (as highlighted in themes *ruled by conditionality, sanctions and suicidality* and *the importance of relationships*). This results in meaning of such experiences being attributed to the self (due to the power influences) and resulting in internalisation of the ideology, such as feeling like a failure, self-blame/ self-hatred, a sense of giving up and increased anxiety and low mood (as highlighted in the themes *sanctions and suicidality* and *adaptation and defences*). However, from the results

(particularly the theme *fighting back*) a survival strategy also seems to be mobilised in some of the participants resulting in actions which aim to resist the distal power influences and consider a new way of making sense of experiences.

A final implication of the current research is in considering its' contribution to community and liberation psychology practices and how these approaches may be a useful way for psychologists to engage with communities affected by welfare reform.

The current research has involved working with participants who have been marginalised and discriminated against and identified context and social factors which maintain this marginalisation (Kagan et al, 2011). During the interviews some participants spoke about how they had become conscious of more distal influences which they had not been aware of before and how taking part in such research had helped them to process and make sense of the impact that certain experiences had had on their mental health. In addition, by interviewing participants, a dialogue has emerged which has helped both the researchers and participants to understand how such marginalisation has occurred and how social action has been helpful to counter this (Burton & Kagan, 2005). It is suggested that further research within the remit of community and liberation psychology could help to elaborate on the themes identified here, specifically if such experiences are similar in other sub-groups of the welfare system. By working collaboratively with marginalised groups (such as disabled people and/or those in receipt of benefits) psychologists could help to identify distal power influences but also identify strengths and systems of support which have been helpful for such groups. Strengths could be then utilised in a way that the group feel would be most beneficial for them. Within the context of the current research this took the form of supported employment, but also groups involved in raising awareness and political activism and highlighting the relevance of the social model of disability (Oliver, 1996). Further to this, the focus behind

community and liberation psychology is focused on the importance of the social and collective level of working rather than at the individual level. With this in mind, psychologists could also work collectively with each other in their local geographical areas to help to identify marginalised communities where support may be needed. By working collectively this may further empower psychologists who are working in increasingly solitary and under-resourced environments.

When considering the above implications, one must consider the role of the psychologist as an individual working in the clinical field or within research and the role of psychology more widely. McLelland (2013) highlights the importance of the self-reflexive practitioner and this is never more important when undertaking work with marginalised groups. Being able to consider how psychology can be viewed as a powerful tool in reinforcing neoliberal ideological views about mental distress and about where responsibility is placed for worklessness is considered important to acknowledge if we are to move forward. Furthermore, the sense of power that an individual may feel the psychologist holds would also need to be thought about and included in tools such as power maps and ecomaps. This will help the individual and the practitioner consider their influences. For example, during the interviews some of the participants spoke about how they had found individual work with psychologists (mainly in the form of CBT) to have been helpful. However, when this was explored further, they identified the work being able to address more social factors and distal influences which had contributed to their increased mental distress and how directions for further support in these areas were highlighted to them. This shows that psychologists may need to increase their awareness of local community forms of support (such as DDPOs) but that also the focus of the individual work may actually be on exploring social factors with their clients.

4.5 Self-Reflexive Comments

As noted above and in the method chapter, there is a level of significance placed on reflexivity of the researcher and what follows is a continuation of the researcher position statement as described in the method chapter. Warren and Garthwaite (2015) describe the work of Howard Becker when in 1967 he highlighted that researchers undertaking social research would not be objective and would indeed have to consider which side they were on. The argument has been for researchers, especially when conducting research with minority or discriminated groups to take up their side and help with their social action echoing the principles of Liberation Psychology. Madill et al (2000) also highlight the importance of the researcher to state their own position and recognise that this is in fact what is important in research, especially when taking up the contextualist position, and further to this can be helpful when analysing data. Miller (1999) notes that the researchers' aims and tools may be influenced and biased based on the social reality of the researcher. Qualitative research holds the assumption that the researcher is clear about their "speaking position" and that this is part of how research is shaped, the analysis completed and the data interpreted. Coyle (2007) argues that this makes the research transparent for future researchers to evaluate and understand the context of the researcher.

My family background could be defined as working class. My father was born in India, moved to Kenya when he was a child (at the time of independence in India) and was the eldest of 5 siblings. My paternal grandparents passed away before I was born but my family describe my grandfather as a strict disciplinarian and my grandmother as kind-hearted. My father came from relative poverty and had to leave school when he was still a teenager (as they could not afford the fees) and had to work to buy the family food and to help raise the school fees for his younger siblings. My father built a successful electronics

business in Kenya.

My mother, who is Indian but was born in Kenya, also came from an impoverished background and is one of eight. Her father died when she was three years old and so my maternal grandmother was responsible for all the children when she was aged just 21. My mother also had to leave school (as they could not afford the fees) and work to bring in some income for the family. In 1973, my parents had to suddenly come to the U.K. following Idi Amin's declaration, evicting those who held British passports. This meant that they had to leave, their belongings, homes, friends, relations, businesses and material goods behind. My parents have spoken about how Amin's army took control of all banks, which meant that they lost the money they had saved over their lifetimes.

They described how the week after they arrived in the U.K. they had found jobs and were working, with little time to acclimatise to a new culture or to process what had happened. Since that time both my parents have continuously worked until the time they retired and have also instilled in me the importance of working despite any setbacks that one may encounter. As an example of this, my mother worked as a cashier in Sainsbury's until the age of 73 despite suffering from arthritis and experiencing two TIA's whilst at work. She felt forced to retire due to her ill health, but feels this was not a choice that she would have made. My family have explained to me on numerous occasions that self-determination and willpower are important in gaining employment and have highlighted the struggles they have endured and how they have continued to work throughout their lives despite the enormous setbacks they have had to face and I feel deeply connected to their life experiences and history.

Another key family member who I feel influenced my thinking about the benefit system is my aunt, who has been working for the DWP in a Job Centre since 1988. She has described how she has tried to accommodate the needs of the people she sees and

tries to think holistically about them but also holds a similar view to my parents about autonomy and self-determination. I have had conversations with my family about “benefit cheats” and I would say that I have held a neo-liberal view on work, benefits and poverty.

The way I understand my own personal conflict is ever-changing as this research has developed but although I can view alternative discourses and perspectives and listen and feel compassion for those who have been marginalized, I also find it difficult to let go of my values and beliefs that I have grown up with and that have shaped my life.

While I have used a reflective log, peer reflective groups, personal therapy and supervision to consider my personal position and to try to keep some of those values and beliefs somewhat separate from the research, I have no doubt that ultimately, they may have played an important role in shaping this research and the findings. In this way I have found myself aligned with different sides throughout.

Interestingly, my position has felt as though I have somehow been responsible for sharing the voices and stories of the participants who do belong to a group of the population that is discriminated against. I have at times felt that I have needed to argue the case for why welfare reforms and any work-related activity are negative. This has meant that I have had to stop and consider my position as a researcher and to not only give examples to such negative experiences but also be able to find the examples of positive experiences in work-related activity; to be able to provide the whole complex picture rather than a biased view. I noticed that this bias towards the negative was present especially when conducting the analysis and being able to notice this, step away from the work and then return to it with some distance was helpful.

However, it is also clear that this research has been subjective and that my influence is evident from the choice of literature reviewed and discussed in the introduction chapter through to the analysis and interpretations of the themes. My lack of

knowledge in this area has meant that I have had 18 months to familiarise myself with reading recommended by those with more knowledge in the area. Much of this has been of a critical nature towards welfare reforms. I feel that at many times I have thought about my naivety when I first started this research: to the point where I was unaware of what acronyms such as ESA, WCA and WRAG stood for. This is still a topic area in which I do not feel confident in and perhaps my resistance (at the time of writing this) to discuss dissemination with my supervisors' highlights this. My concerns lie with what I see as an amateur level of knowledge in this area and at times throughout the process I have wondered what I am unaware of what I am missing, and how this has influenced my perspective of welfare reforms and of the analysis.

Therefore, I acknowledge that perhaps the literature and policies covered in the introduction chapter and the links of the themes to theories and research may be limited due to my own limited knowledge in the topic area. Furthermore, I also acknowledge that participants' interviews may have reflected this limited knowledge and perhaps my lack of confidence in this area prevented me from deviating from the certainty and security of the topic guide and therefore meant that I missed areas of further exploration which may have been helpful to consider and provide further depth to the analysis.

In addition, the feelings of guilt and shame that I described in the methods chapter have remained throughout the research project and this has impacted on my levels of motivation and being able to engage with the work, particularly when writing up the chapters and when transcribing the interviews. However, undertaking this research has made me realise that the position I hold and my views towards benefit claimants and the benefit system have become more complex. My views from those discussed in the method chapter have not changed entirely, however I have been able to understand that these issues are multi-layered. It has been difficult to admit that my position towards

welfare and claimants has not changed completely as this somehow makes me feel as though I am part of the 'other team' and it has been harder for me to maintain my new position, particularly in times of increased stress.

Over the course of this project I have also been personally affected by welfare reforms and my mother has had her blue badge re-application rejected. Over the last year I have seen how cut backs to welfare have resulted in my mother losing her independence and how the injustice of this feels as well as the degrading and inappropriate nature of the assessments. Alongside undertaking this project, I have been fighting the councils' decision to take away my mothers' blue badge and have had a somewhat different experience of my local disabled peoples' organisations, which I have found to be unhelpful and unreliable. Therefore, this fight is one I have had to undertake on my own but it has helped me to relate to the anxiety, stress and mental distress that participants have spoken.

In terms of my increasing confidence in research skills, I have found it particularly stimulating and thought-provoking to learn about social issues, to consider wider influences and to think about critical and community psychology principles and models. This has been a new area of learning for me but I feel that I have incorporated this into my clinical practice with clients but also within wider professionals' meetings by observing and naming the neoliberal stance that professionals seem to automatically take and to be mindful of when I might also do this. This has made me think about my future as a clinical psychologist and the impact I can make in the areas of community psychology, especially being from a minority ethnic group.

I have also increased my knowledge of epistemology and how the position of the research needs to be thought about. For example, prior to beginning this research I felt that I held a positivist position, whereby I rarely questioned reality, how knowledge was

acquired or what was seen as the “truth”. However, since having the opportunity to think about the position that this research took and to read and increase my knowledge in this area I have discovered how significant this aspect of the research process is. Admittedly, this was the part of qualitative research that I was least keen to learn and write about, however feel that I have made considerable progress in this area and have valued the opportunity to do this.

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Appendices

Appendix A: Participant information sheet

Participant Information Sheet

Would you like to take part in my research?

My name is Jaimini (Jay) Mehta. I am a trainee clinical psychologist and I work with XXXX at the XXXX and with XXXX at XXXX.

I would like to talk to you if:

- You are over 18
- You self-identify as being disabled
- You are in the ESA WRAG
- You have had your benefits cut or stopped by the Job Centre

I would like to talk to you about:

- What it is like to be in the ESA WRAG
- What it is like to have your benefits cut or stopped
- What your thoughts are about work in general.

I would like to talk with you on your own at a time and date that is convenient for you either face to face or over the telephone. We can meet at the XXXX offices in XXXX or the XXXX offices in XXXX. This should last approximately 60 minutes and will be tape recorded so that I can compile the results afterwards. I would also like to contact you after I have gathered all the results to check that your views and experiences are represented.

We hope to learn a lot from you and we will then write articles to share what we have learnt with many others, including people like you. In this way our project will give organisations and the public a better understanding of what the experiences of assessments, conditions and sanctions are like from your point of view.

Once the interviews are finished, in order to thank you for your time, contribution and travel we would like to offer you £20 in high street vouchers.

Some questions that you may have:

- Do I have to say 'yes'?

No. It is your choice. No one will mind if you don't want to take part. You can also change your mind at any time. To make it easier I will check with you if you are still happy to take part in the project each time I contact you.

- What if I feel upset when we talk?

Usually people find that taking part in research like this to be helpful and empowering. However, if you do feel upset then I will have some information that I can give you to find support and someone to talk to. You can also give me the name and number of someone who supports you so that I can contact them if you would like me to after we meet.

- Will you tell anyone what I say?

Everything that you say will be kept confidential. Some of what you say might be used when we write up the project but we will use a different name so that no one can identify that it is you. It will go into an archive so that people in the future will be able to understand your experiences. The tape recordings will be accessed by myself, XXXX and XXXX (if necessary) and will be securely stored for ten years. Your identity will be protected at all times.

- Will anyone reading the articles be able to recognise me?

No, because you'll have a different name. I would like to make it clear that what you say will remain anonymous. This means that even though we might use some of the words you have said, other people will not be able to tell that you have taken part in the research. One of the ways we do this is by changing your name and any other information which can identify you.

- Who is organising and funding the study?

This project is organised jointly by the XXXX and XXXX. It is funded by the Economic and Social Research Council (ESRC).

- What happens now?

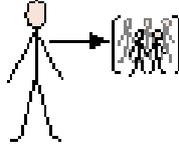
I will contact you in approximately one week to discuss this further, to answer any questions you may have and if you would like to take part to make sure I have asked for your consent.

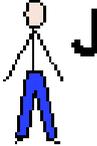
How can I get in touch?

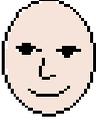
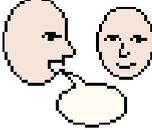
You can email me: XXXX or you can also contact XXXX at XXXX who will pass on your details to me.

Thank you.

Appendix B: Participant information sheet, easy-read version

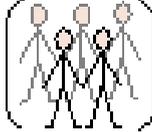
  
WOULD YOU LIKE TO TAKE PART IN MY RESEARCH?

 
HI, MY NAME IS JAY

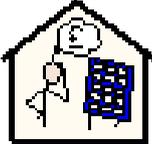
  
I WOULD LIKE TO TALK TO YOU IF:

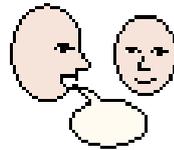
18

● **YOU ARE OVER 18**

● **YOU ARE IN THE ESA WRAG GROUP.** 

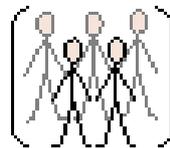
● **YOU HAVE HAD YOUR BENEFITS CUT**  

 
OR STOPPED BY THE JOBCENTRE



I WOULD LIKE TO TALK TO YOU ABOUT:

- WHAT IT IS LIKE TO BE IN THE ESA

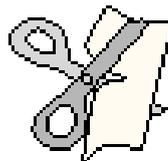


WRAG GROUP

- WHAT IT IS LIKE TO HAVE YOUR



BENEFITS

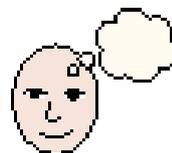


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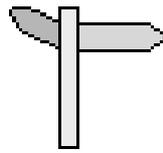


- WHAT YOUR THOUGHTS ARE ABOUT WORK



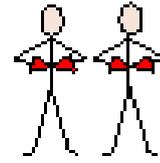
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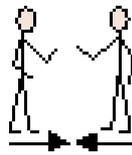
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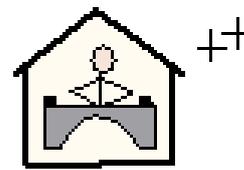
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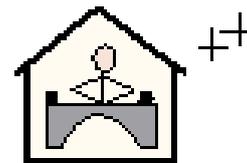


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OR

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OFFICES

IN

XXXX



OR

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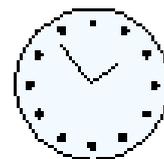
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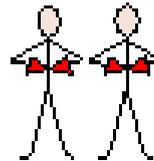
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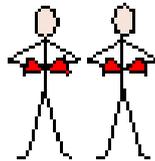
WHAT WILL HAPPEN WHILE



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● WE

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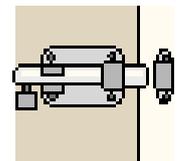
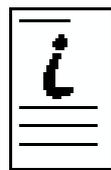


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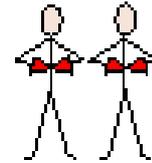
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WHAT

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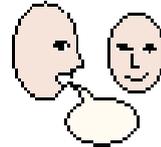
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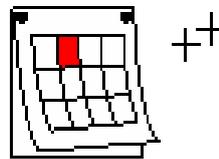
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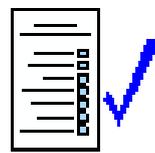


● I WILL CONTACT YOU AFTER A FEW



MONTHS

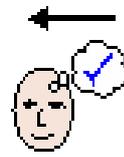
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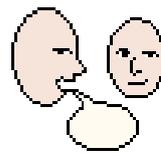
CHECK

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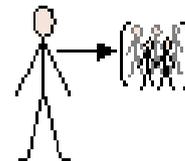
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WHAT YOU



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● IF YOU DECIDE TO TAKE PART, AS A



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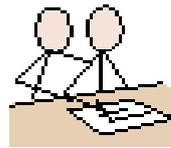
GIVE YOU



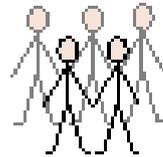
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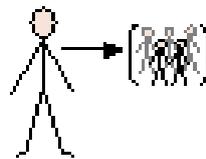
HIGH STREET VOUCHER



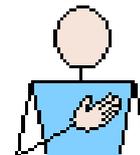
HOW I CAN SUPPORT YOU



● SOMETIMES PEOPLE FIND IT HELPFUL TO



TAKE PART IN RESEARCH



● SOMETIMES THEY MAY ALSO FEEL UPSET,



TALKING ABOUT THINGS.



● I WILL GIVE YOU INFORMATION ABOUT



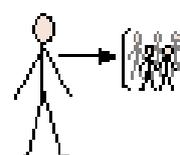
WHO YOU CAN CONTACT IF YOU FEEL UPSET.



WHAT HAPPENS NOW?



● I WILL CONTACT YOU IN ABOUT 1 WEEK



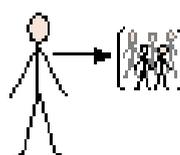
TO SEE IF YOU WANT TO TAKE PART IN THE

RESEARCH.



● YOU CAN ALWAYS CHANGE YOUR MIND AT ANY

POINT AND I WILL KEEP CHECKING THAT



YOU ARE HAPPY TO TAKE PART.

Appendix C: Participant consent form**Participant Consent Form***Consent Form for*

How beneficial is work- related activity for one's mental health? Experiences of the conditionality of the claimant commitment in receiving employment and support allowance among disabled people placed in the work-related activity group.

Please tick the appropriate boxes

Yes **No**

Taking Part

I have read and understood the project information sheet

I have been given the opportunity to ask questions about the project.

I agree to take part in the project. Taking part in the project will include being interviewed, being recorded (audio) and providing my feedback on the findings.

I understand that my taking part is voluntary; I can withdraw from the study at any time and I do not have to give any reasons for why I no longer want to take part.

Use of the information I provide for this project only

I understand my personal details will not be revealed to people outside the project.

I understand that my words may be quoted in publications, reports, web pages, and other research outputs.

I understand that my real name will not be used

Use of the information I provide beyond this project

I agree for the data I provide to be archived at the UK Data Archive for a duration of ten years.

I understand that other genuine researchers will have access to this data only if they agree to preserve the confidentiality of the information as requested in this form.

I understand that other genuine researchers may use my words in publications, reports, web pages, and other research outputs, only if they agree to preserve the confidentiality of the information as requested in this form.

So we can use the information you provide legally

I agree to assign the copyright I hold in any materials related to this project to Jaimini Mehta.

Name of participant [printed] Signature Date

Researcher [printed] Signature Date

Project contact details for further information:

Jaimini Mehta , Trainee Clinical Psychologist
School of Health and Social Care,
University of Essex
Wivenhoe Park,
Colchester, Essex, CO4 3SQ

jumeht@essex.ac.uk

Appendix D: Participant debrief resource sheet**Participant Debrief Resource Sheet**

Thank you for taking part in this research.

I hope it has generally been a positive experience for you and that you feel that you have been able to share your experiences. However, sometimes talking about things that are difficult can leave us feeling upset. I wanted to provide you with some information on ways to cope if you are feeling upset.

If you feel like you want someone from your organisation to contact you then please let XXXX know. She will be able to arrange this for you. Her contact details are XXXX or XXXX

You can contact your GP if you feel like speaking to them would be helpful.

If you have someone who is supportive and helpful then you could ask them to sit with you if you are feeling upset.

You can also speak to someone at MIND over the telephone on 0300 123 3393 (lines are open Monday to Friday, 9am-6pm).

You can also speak to someone at the Samaritans over the telephone on 116 123 (lines are open 24 hours a day, everyday).

Appendix E: Interview topic guide**Interview Topic Guide**

Introduce research, aims and researcher.

Discuss ethical issues (consent, confidentiality, support info and recording).

Wording will be adapted according to participants' needs. Terminology will be explained if necessary.

- What is your experience of being in the ESA WRAG?

- What is your understanding of the claimant commitment?
- What is your experience of the claimant commitment? Would you be able to share some personal examples?
- How does having to follow the claimant commitment leave you feeling? What is the emotional/ psychological impact of this?
- What is the physical impact? What is the social impact?
- Does having to follow the claimant commitment affect your sense of autonomy? In what ways? Does this affect other parts of your life?
- Do you think there is a link between the claimant commitment and being able to make decisions independently? In what way?

- Have you ever been sanctioned?
- What was this like? What impact did it have on you?

- Have you ever been in work/ employed? What was this experience like for you?
- What are the barriers to work that you might face?
- Do you think working is helpful for you? In what way?
- Do you want to find work? Why?

Appendix F: Example of coded transcript

FRANK

Pt – I had to put in that I was willing to do things to get back into work. I was going to be held to my word. If felt like you were signing a legal document and if you hadn't done what you said you would you would be held to account. There wasn't a lot to understand. Are you capable of this, is this something you can achieve, it's not going to make your illness worse. This is what you need to do, this is what you have to commit yourself to. That was the first one. Later on the interviews were a bit easier. I think it's been five/ 6 months since the last. Think they just got fed up with me or they realised my long-term illness is up and down and my illness holds me back and it's not achievable.

But in general I'm getting better. If I look at myself every year over the last 20 years I'm definitely getting better but I don't think I've got that much life expectancy to get better. But in the time y illness had disappeared there is no lasting effect. If this illness disappeared tomorrow I wouldn't be able to go back to work or go rock climbing. Beacsue people say you look okay they don't see me as ill.

R – I'm wondering about in terms of your condition and your illness but also being in the WRAG, how has that affected how you see yourself in society or how others respond to you?

Pt - I don't think society, really you know you're not contributing to the system, you're that bad that you're having to be taught basic skills as an adult. So I feel disadvantaged, like an outsider. The government is trying to pressurise you, the company you're attending have got their statistics and they've got their money. It just feels like a machine and you're being ground down and spat out the other end. It wasn't advantageous to me but was to other people. It's about being part of machine and want getting results and was making people miserable that had to attend.

R – so did you say that it made people who had to attend the course miserable?

Pt -yeah there were people like me who were long-term ill who didn't have any prospect of getting back into work. They had been put on the course.

Appendix G: Key used for code during data analysis

| | Initial Codes | Key |
|----|--|-----|
| ④⑩ | = light green = impact of conditions. | |
| ④⑪ | = lack of clarity/knowledge. pen highlighter | |
| ① | | |
| ② | = Lightest blue = mental impact of | |
| ③ | = 2nd blue = how ESA is viewed by p's. | |
| ④ | = 3rd blue = wide influence of wider political systems. | |
| ⑤ | = 4th blue = support for systems. | |
| ⑥ | = 5th blue = points system not really sense. | |
| ⑦ | = not pink = political action/own research. | |
| ⑧ | = Positiv = interaction impact. | |
| ⑨ | = peach = treated like a child | |
| ⑩ | = 2nd darkest pink = feeling uneasy re to conditionality. | |
| ⑪ | = darkest pink = exp of conditionality/courses. | |
| ⑫ | = lightest green = what code p's writes | |
| ⑬ | = 2nd green = stereotype of work code offered. | |
| ⑭ | = 3rd green = no choice. | |
| ⑮ | = 4th green = empower even demands of conditionality. | |
| ⑯ | = 5th green = machine injury | |
| ⑰ | = red. = de-personalised. | |
| ⑱ | = 2nd red = knowing own strengths. | |
| ⑲ | = 3rd red = internalisation / responsibility on individual. | |
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Appendix H: University ethical approval letter

11 October 2018

MISS J. MEHTA

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Dear Jaimini,

Re: Ethical Approval Application (Ref 16067)

Further to your application for ethical approval, please find enclosed a copy of your application which has now been approved by the School Ethics Representative on behalf of the Faculty Ethics Committee.

Yours sincerely,

XXXX

Ethics Administrator

School of Health and Human Sciences

cc. Research Governance and Planning Manager, REO
Supervisor

Appendix I: Two ethics amendments approval letters

Ethics Approval: Amendment Request

Name: Jaimini Mehta

Date: 27/06/2017

Signature: 

Description of Amendment:

There are two amendments to be made:

- 1) That interviews may need to take place via telephone, rather than face to face.
- 2) That the primary researcher and the external supervisor will meet with up to five disabled people in order to develop and finalise the interview topic guide to be used in the research project. Verbal consent will be sought for them to advise and consult with the primary researcher and external supervisor in order to address issues such as language used in the topic guide. This meeting will take place at an agreed date and time at the Inclusion London offices with the external supervisor and primary researcher.

Reason for Amendment:

- 1) Due to anticipated scheduling and travel difficulties it was thought that the option of being able to conduct interviews via telephone may be a helpful option. Although the primary researcher will endeavour to meet participants face to face, the option of allowing telephone interviews would also help to complete the project in the time limits available and also to allow those less able to travel to participate if they wish to.
- 2) Due to potential participants possibly having learning difficulties it was discussed that it would be helpful to review and finalise the interview topic guide with disabled people in order to make the interview topic guide accessible to those participating in the project. In addition, the area of welfare research is laden with complex terminology that is not always helpful in communicating with those affected by it. Therefore, it was also felt that feedback would be helpful in how areas are explored with reference to language and terminology used.

(For office use only)

The amendment has been approved The amendment has not been approved Resubmission require

Signature:

Name (in block capitals)

Department: S. H. NS

Date: 6/07/2017

Ethics Approval: Amendment Request

Name: Jaimini Mehta

Date: 11/09/2017

Signature: 

Description of Amendment:

There is one amendment to be made:

- 1) That interviews will need to take place in various different locations: offices of [redacted] and also at the offices of other Disabled People's Organisations (DPOs) (in London) which [redacted] works with and will recruit from.

Reason for Amendment:

- 1) Due to potential participants having a number of different physical and mental health difficulties, they are unable to travel to the two locations identified in the original ethics form [redacted]. Therefore the primary researcher will need to travel to DPOs which are local to participants and which they are familiar with.

(For office use only)

The amendment has been approved

The amendment has not been approved

Resubmission required

Signature:

Name (in block capitals): *W*

Department: *S.H.S.C.*

Date: *29/09/2017*