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**Versus Arthritis’ response to the Department of Work and Pensions’ consultation *Shaping future support: The Health and Disability Green Paper***

**August 2021**

Versus Arthritis welcomes the opportunity to provide input into Department of Work and Pensions’ consultation Shaping future support: The Health and Disability Green Paper.

Versus Arthritis is the charity formed by Arthritis Research UK and Arthritis Care joining together. We work alongside volunteers, healthcare professionals, researchers, and friends to do everything we can to push back against arthritis. Together, we develop breakthrough treatments, campaign for arthritis to be a priority and provide support. Our remit convers all musculoskeletal conditions which affect the joints, bones and muscles including osteoarthritis, rheumatoid arthritis, back pain, and osteoporosis

This submission provides policy recommendations and supporting evidence related to the following themes outlined in the consultation:

* Providing the Right Support
* Improving Employment Support
* Exploring Ways to Improve the Design of the Benefits system

**Theme 1: Providing the Right Support**

* What more could we do to improve reasonable adjustments to make sure that our services are accessible to disabled people?
* What more information, advice or signposting is needed and how should this be provided?

**Recommendation**

Communications campaigns targeting employers should include content specific to musculoskeletal conditions and how to protect good musculoskeletal health in the workplace, whilst also emphasising the co-dependency between physical and mental health. Given the impact of COVID-19 on people’s working patterns, specific guidance should be provided on how employers can support the musculoskeletal health of employees working from home.

**Context**

* Employers have a legal duty to provide safe workplaces that do not adversely affect employees’ health (under the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999).[[1]](#endnote-2)
* Musculoskeletal conditions fall within the scope of disability as defined under the Equality Act 2010, as they can have a substantial and long-term adverse effect on people’s ability to carry out normal day-to-day activities, even when the condition is fluctuating.[[2]](#endnote-3)
* Musculoskeletal conditions are the single biggest cause of pain and disability in the UK, and it’s estimated that 1 in 10 employees in the UK have a musculoskeletal-related problem.[[3]](#endnote-4)
* The prevalence of musculoskeletal conditions in the workforce is also set to increase as the populations ages.3
* In 2018, 27.8 million working days were lost due to musculoskeletal problems; the highest number for any long-term health condition measured.[[4]](#endnote-5)
* Many musculoskeletal problems can be avoided through taking effective preventative measures, including actions employers can take to support their employees’ musculoskeletal health and stop long-term musculoskeletal problems from developing.
* Although a range of resources are available on how to maintain good musculoskeletal health in the workplace and support those with existing musculoskeletal conditions, such as the Musculoskeletal Health in the Workplace Employer Toolkit,[[5]](#endnote-6) interventions such as line-manager awareness training and workplace health champions are much less common for musculoskeletal conditions than some other conditions such as cancer.
* Part of this may be driven by a lack of awareness of the impact musculoskeletal health has on a person’s ability to work; a study in 2014 found that 28% of working people with arthritis felt their employer was not fully aware of their rights, and 29.5% of people with rheumatoid arthritis felt their employer did not understand enough about their conditions or support needs.[[6]](#endnote-7)
* Given the current prevalence and projected increase in musculoskeletal conditions in the working age population, more employer guidance and support from bodies like the Health & Safety Executive needs to actively highlight the importance of supporting musculoskeletal health in the workplace, and to sign post employers to existing information and resources to improve their awareness of the issue.
* A stronger focus in guidance to employers on supporting people with comorbid physical and mental health conditions is also needed, as nearly four in ten people with multimorbidity are living with both a physical and a mental health condition.[[7]](#endnote-8)
* It is well established that musculoskeletal conditions and mental health are closely linked; those living with musculoskeletal problems are significantly more likely to report experiencing poor mental health, often as a result of living with chronic pain,[[8]](#endnote-9) and are at an increased risk of developing a comorbid long-term mental health condition, such as anxiety or depression.3
* The 2018 data on sickness absence in the UK shows that after musculoskeletal problems, mental health conditions were the next largest cause of lost working days, with over 17.5 million days lost to mental ill health.4
* However, current guidance for employers on supporting health and wellbeing in the workplace is largely siloed based on condition, and doesn’t acknowledge the ways that mental and physical health interact and influence each other. This makes it more challenging for employers to properly address the needs of their employees.
* Specific advice and information on the interdependency of mental and physical wellbeing should be developed to better equip employers in this regard.
* Our survey Back Pain Britain was conducted between 25 August – 1 September 2020, among 1,040 UK workers who worked from home over the lockdown during the COVID-19 pandemic. 81% of desk workers who switched to home working had developed musculoskeletal pain, and 23% reported that pain affected them either often or all the time.[[9]](#endnote-10)
* These findings also align with an impact assessment carried out by the Scientific Advisory Group for Emergencies, which estimated that the burden of musculoskeletal conditions is likely to increase in response to COVID-19, principally due to the guidance for employees to work from home, often without suitable ergonomic office equipment.[[10]](#endnote-11)
* It is therefore important that all employment information and advice acknowledges the increase in home working, sets out employers’ legal obligations to their remote working employees in areas like equipment provision, and signposts to specific resources on how they can support the musculoskeletal health of employees working from home.

**Recommendation**

Department for Work and Pensions in partnership with the Government’s Equalities Office and the Disability Unit should work to clarify the meaning and scope of reasonable adjustments, as set out in the Equality Act 2010,[[11]](#endnote-12) ensuring that people with musculoskeletal conditions are consulted, so that both employees and employers have a stronger understanding of what support employers are responsible for providing.

**Context**

* In 2018, Versus Arthritis conducted a survey of over 1,500 people with musculoskeletal conditions, which focused on the impact of musculoskeletal conditions on people’s ability to work. This survey found that only 29% of respondents said their employer had made all possible adjustments to support them in their role. 25% said their employer had made some adjustments but that there were additional things they would benefit from and 25% said their employer had not made any of the reasonable adjustments they needed.[[12]](#endnote-13)
* Qualitative research conducted by Versus Arthritis in 2017, which collected the experiences of over 260 people, consistently showed that employees are often unclear of their rights at work, and of the types of adjustments that might best help them stay in their role and work safely.[[13]](#endnote-14)
* Equally, as previously highlighted, employers can also be unfamiliar with the impact of musculoskeletal conditions on employees’ ability to work, are often unclear on their legal responsibilities to provide support, and frequently are not aware of the types of adjustments that might be beneficial.6
* Employers should be made aware of available resources such as the [Musculoskeletal Toolkit for Employers](https://www.bitc.org.uk/wp-content/uploads/2019/10/bitc-wellbeing-toolkit-musculoskeletal-mar2017.pdf) and other guidance and best practice in this area, in keeping with their legal duty to employees.5
* These research findings highlight the issues that arise as a result of the ambiguity in the current guidance and information provided on reasonable adjustments. In order to address the problem, the language used in reference to what does and does not qualify as a reasonable adjustment should be made more specific, and be supported by real world case studies and practical examples to help provide employers with clarity on their obligations.

**Recommendation**

The Government should consider improving the definition of disability in the Equality Act, or provide more supporting information on the practical application of the definition in regard to eligibility for employment support, so that it is clear how it applies to people with health conditions like arthritis.

**Context**

* In 2020 Versus Arthritis research conducted a survey of a representative sample of over 2,200 people with musculoskeletal conditions, to better understand the impact of these conditions on various aspects of people’s daily lives. The findings of this survey found that only 42% of respondents considered themselves to be disabled, and only 19% said they were formally registered as disabled to receive support.[[14]](#endnote-15)
* However, the same research found that over half (53%) of people with a musculoskeletal condition who were in paid employment said that their symptoms negatively impacted their ability to do their work.14
* People with musculoskeletal conditions and their employers may not understand whether they meet the definition of disability as set out by the Equality Act, and so are often unsure about what their rights are regarding disability employment support. This is especially true for people who experience fluctuating symptoms or have a condition which is not obviously visible, as they often report feeling that they are not eligible for additional support and resources, even though these types of conditions are covered by the Act.
* A clearer definition of disability, or more information and guidance detailing how it should be applied in practice when assessing people’s needs, is needed to help provide clarity and assurance for employees with long-term health conditions on what support they can expect and ask for.
* The Government could also consider working with third sector organisations to share this information with the communities they support, and signpost to resources on employment and disability benefits to help improve awareness.

**Theme 2: Improving Employment Support**

* What more could we do to further support employers to improve work opportunities for disabled people through Access to Work and Disability Confident?

**Recommendation**

The Department of Work and Pensions (DWP) should significantly expand the data they collect on the Access to Work scheme including: more detailed demographic information on the scheme’s users, use of the scheme across different sectors and types and sizes of employer, the proportion of recipients receiving support for more than one condition, and data on job retention. DWP should also commit to routinely seeking feedback directly from a wide range of people who have experience of navigating the Access to Work scheme. This additional information should be used to fully assess the effectiveness of the current scheme, establish which groups are currently underserved by the system, and identify aspects that can be improved moving forward.

**Context**

* Our Working it Out survey (2018) highlighted some key areas where the current Access to Work scheme can be improved upon:[[15]](#endnote-16)
  + **Communication**: One in four who had applied for the Access to Work support said they found it difficult to communicate with the scheme. Having more regular contact with the scheme, for example through a local named Access to Work advisor, could help address this issue.
  + **Equipment**: 4 in 5 said equipment had been provided to assist with their working lives, but one in five who needed their equipment upgraded or repaired said they found this difficult or very difficult to do.
  + **Travel**: Almost half said they found it harder to travel to and from work due to their arthritis, and more than 1 in 3 said they found it harder to travel as part of their job role. A third of those who received travel support through the Access to Work scheme said they found it difficult or very difficult arranging their travel.
  + **Reviews**: The current review process does not adequately meet the fluctuating and evolving needs of a person with arthritis. Three quarters of people supported by Access to Work told us they did not know they would be reviewed every three years.

**Recommendation**

Additional promotion of the Access to Work scheme was confirmed by the DWP to be carried out in January 2021, and DWP recommitted to improving awareness of the scheme as part of the National Disability Strategy in July 2021.[[16]](#endnote-17) DWP should commit to carrying out specific, ongoing promotion of Access to Work targeted to reach more people with musculoskeletal conditions and their employers. They should also confirm the previous and planned upcoming level of spend on awareness raising efforts, and provide specific detail on how the success of these campaigns will be assessed.

**Context**

* Despite being the leading cause of disability in the workforce, only 11.9% of the total Access to Work spend for 2017/2018 was allocated to support people with musculoskeletal conditions.[[17]](#endnote-18)
* Our Working it Out survey (2018) provided some insights into the experience of applying for support from the Access to Work scheme, and identified a lack of awareness of the programme as a key issue; 59% of respondents with musculoskeletal conditions had never heard of Access to Work, and an additional 10% had heard of it but were not sure what it did.15
* This insight is supported by the Sayce Review, which found that awareness of the scheme particularly among smaller employers and certain groups of disabled people meant that the scheme helped far fewer people than the total number who qualify for support.[[18]](#endnote-19)

**Recommendation**

To prepare and support young people with musculoskeletal conditions moving into employment, the Department of Education and Department of Work and Pensions should work collaboratively to ensure young people with disabilities and health conditions are aware of the full range of support options available to them, including the Access to Work scheme. This information could be provided as part of the careers guidance that schools are legally required to provide to children from years 8 to 13.

**Context**

* While the most common forms of musculoskeletal conditions are significantly more prevalent as people age, there are over 12,000 children in the UK who are living with a diagnosed musculoskeletal condition, and one in seven young people report having low back pain.3
* Young people with musculoskeletal conditions who are on a work placement as part of a Department for Education-supported internship programme or a BEIS traineeship can apply for support grants from the Access to Work scheme, along with young people who need support during the job interview process.

**Theme 5: Exploring Ways to Improve the Design of the Benefits system**

* While continuing to focus financial support on people who need it most, how could we more effectively support disabled people with their extra costs and to live independently?
* Should we explore options to make it easier for disabled people to access practical support such as aids, appliances or services, and why?

**Recommendation**

DWP should work with Ministry of Housing, Communities and Local Government (MHCLG) and the Local Government Association to signpost people receiving benefits or employment support to information on accessing aids and adaptations designed to maintain independence, which they may also be eligible for.

**Context**

* To help empower people with disabilities and long-term health conditions to live independently, under the Care Act 2014 local authorities are obligated to ‘promote…an individual’s wellbeing’ and ‘provide or arrange for services intended to prevent, reduce or delay care and support needs for adults and carers’. It is important to note that, in this context, the definition of wellbeing includes the ability to participate in work, education, and training.[[19]](#endnote-20)
* This prevention duty encompasses both primary prevention, which is designed to stop people developing support needs, as well as secondary and tertiary prevention, which focuses on avoiding further deterioration and minimising the impact of a person’s condition on their life.[[20]](#endnote-21)
* Local authorities under this legislation are also required to provide accessible information and advice about the care and support services they provide.19
* A key part of this legislation for people with musculoskeletal conditions is the provision of aids and adaptations that are designed to facilitate independent living. People with eligible needs are entitled to community equipment, defined as aids of any value and adaptations that cost less than £1,000, for free by their local authority.19
* While home aids and adaptations can be transformative for people living with a musculoskeletal condition, lack of awareness of this service is an ongoing challenge; Versus Arthritis research found that only two in ten people who were eligible for support were aware of their local authority’s duty to provide equipment.[[21]](#endnote-22)
* It is likely that individuals who require reasonable adjustments at work, or qualify for employment support and disability benefits, would also be eligible for and benefit from access to aids and adaptations to help them maintain their independence in their daily lives.
* Having better support outside of work settings designed to maintain independent living can also indirectly help ensure individuals remain well enough to stay in work. Therefore, promoting and signposting this source of support through the DWP could help ensure people with disabilities and health conditions are supported in a holistic and more effective way.

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