Re: Complaint about the Ministry of Social Development withholding information sought under the Official Information Act 1982 – upon my written request for specified information dated 16 January 2014

Dear Beverley A. Wakem, dear staff at the Office of Ombudsmen

Please accept my request for your assistance to address some serious issues I have with a response from the Ministry of Social Development (MSD) from 27 February 2014, which I received upon a request made under the Official Information Act 1982 (O.I.A.). In my request from 16 January 2014 I asked for certain specified information, of which only some was later supplied by way of an email response on 27 February 2014. Much of the sought information was withheld under section 18 (f) of the O.I.A., stating “the remainder of your request for information is very broad and substantial manual collation would be required to locate and prepare all of the information within scope of your request”.

The response received from Debbie Power (Deputy Chief Executive Work and Income) on 27 February 2014 did answer much of, but not my entire questions 1., 3. and 4. (copies of a survey with information were supplied). I certainly feel that question 3. c) was not sufficiently answered to. While some of questions 2. and 5. appear to have been answered, these questions were not replied to in their entirety. No answers at all were provided to questions 6., 7. and 8., and questions 9. and 10. were responded to quite unsatisfactorily.

I raise the following issues with the response received:

Re question 1. of my original O.I.A. request a completed survey form with results from 2010 was presented by MSD, which provides most of the information I had sought. It does though appear to be only a once off survey that was conducted, and there was no information clarifying my question, whether the information obtained from approached GPs (general practitioners) was delivered for any specified period (e.g. a certain number of weeks, the previous week, month or year), or whether it was delivered randomly, leaving it up to the professional medical practitioner to answer rather subjectively. Of concern is also that the numbers of responses received vary from question to question, which raise questions about how representative the conducted survey really is.

Re question 2. of my original O.I.A. request MSD have referred me to a “position paper” from the ‘Australasian Faculty of Occupational and Environmental Medicine’, called “Realising the Health Benefits of Work”, to find answers to my question. Also was there a mention of another position paper or review, that was commissioned by the ‘United Kingdom Department of Health’ and the ‘Department of Work and Pensions’, by Dame Carol Black, entitled “Working for a Healthier Tomorrow”. Debbie Power also writes that “Dr Bratt’s presentations are designed as interactive workshops with medical professionals. The slides are merely a prompt and do not provide the context of the discussions.”
Therefore MSD have not delivered any scientific reports or sources to deliver clear scientific evidence or findings supporting the specific claims made by Dr David Bratt in the mentioned “presentations”, like for instance that “the benefit” is “an addictive debilitating drug with significant adverse effects to both the patient and their family (whanau) – not dissimilar to smoking”. The position papers referred to are basically nothing but politically motivated policy statements, which were prepared for a range of stakeholders with vested interests, and which have again mostly been signed by the same. The signatories include government agencies, a range of business-, employer- and union organisations (and their delegates), same as a range of health professional organisations. The statements make a few references to quite narrowly selected, controversial “experts” (e.g. Drs Aylward, Waddell, Burton and Beaumont) and their supposed “findings”, but these are the same “experts” - mostly from the formerly ‘UNUM Provident Centre for Psychosocial and Disability Research’ at Cardiff University, that was for years “sponsored” by a controversial health and medical insurance corporation, convicted for fraud in a number of US courts. Reports mentioned contain only selectively gathered information, mostly coming from various statistical and few research reports.

Re question 3. of my O.I.A. request MSD provided much of the information sought by way of that same summary survey report as mentioned above, but no answer was given to my question 3. c).

Re question 4. of my request MSD did at least supply a number of the sources for the information I had sought, but my question whether the statistical information relates to persons to ever return to any work, or whether it may just mean a person may (for health reasons) never return to the same kind of job or work, has not been answered.

Re question 5. I appreciate MSD providing the source of information quoted by Lucy Ratcliffe in ‘NZ Doctor’ on 01 August 2012. In the letter from Debbie Power to me she states that the information came from a presentation by Sir Mansel Aylward in 2012. A study undertaken by Cardiff University is mentioned, but no name or any quoted details of that study are provided. Hence this question has not been responded to satisfactorily. I can do little with a “UK study” that is not clearly identified!

Re questions 6., 7. and 8. no attempt was made by MSD and Dr David Bratt to respond to any of these questions, and I do not accept the refusal to provide at least a reasonable amount of information based on section 18 (f) of the Official Information Act. MSD have not stated that such information does not exist, and therefore I may conclude that such information does exist in the way of reports, possibly presentations and other forms, and it must reasonably expected that the Ministry makes some efforts to locate and present such information, as an organised government agency and their staff can be expected to find and present such specified information without too much time and effort needed.

Re question 9. there was no satisfactory answer provided by MSD. No research sources or reports that Dr Bratt has apparently used for selected - and at times quoted - information in his “presentations” have been presented. No percentage rate - or at least general indication - was given, of the amount that would be from certain named “experts” - like Dr Aylward and others from the ‘Centre for Psychosocial and Disability Research’ at Cardiff University in Wales, UK. The presentations I mentioned, same as others from Dr Bratt, do not give much - if any – proper information on the exact sources (apart from only the odd surname of his “sources”).

Re question 10. MSD have only provided a general summary of ‘Dr Bratt and Other Practitioners’, and not disclosed the exact times, dates and types of contacts Dr Bratt had with the listed professionals - like Professor Aylward and Dr Beaumont. I accept that he never had contact with Professor Waddell. While I do not expect every single email or phone call being listed, it must be reasonably expected from MSD to provide the information I sought, by listing times or at least dates, and a frequency of phone calls or emails sent on certain days. I would certainly expect dates for face to face conversations and meetings to be provided, for the whole period of Dr Bratt’s employment as Principal Health Advisor for MSD and Work and Income.

Given the unsatisfactory responses received, I ask you at the Office of the Ombudsmen to examine and assess the O.I.A. request and questions I sent (on 16 Jan. 2014), and to do the same with the responses I received from Debbie Power at MSD (on 27 Feb. 2014), and to then take the necessary action by approaching the Ministry of Social Development, in order to instruct them to provide the information that I should reasonably be able to expect and receive in this matter.

In view of the fact that we are talking about rather serious matters, where a Principal Health Advisor for MSD is making in part controversial and disputed comments and claims in presentations that he
gives to professional medical organisations and other groups, I trust that you will give my request in this matter serious considerations. This is also in view of the fact, that I still have another complaint before your Office, which was dated 09 August 2013, and which was also about MSD refusing to disclose certain information about Dr Bratt. I take liberty to insert an extract from that letter, which gives some further aspects to consider – also in this complaint matter:

Extract from letter to the Office of Ombudsmen, dated 09 August 2013:

“Dr David Bratt has continuously made bizarre claims in his presentations, that benefit dependence is like “drug dependence”, is “addictive”, and therefore harmful for the beneficiaries’ health. He has most strongly advocated for the acknowledgment of the value and supposed “health benefits” of work. He makes these claims in a wider, general way, commonly meaning open employment, and his statements are also based on a selected few “reports” and “findings” by a small number of medical “experts” from one school of thought, mostly from the United Kingdom.

One such expert is a Professor Mansel Aylward, who has been widely criticised in the UK for his involvement with the controversial work capability tests used by ATOS Healthcare as sole assessor for the Department of Work and Pensions. It has been reported that the assessments, which he was involved in designing, are unsuitable, ill designed and do not give sufficient consideration for mental health sufferers. This criticism has also come from organisations of the medical profession in the UK. Professor Aylward, and a few of his colleagues, are based at a research department called ‘Unum Centre for Psychosocial and Disability Research’ at Cardiff University in Wales. It has been established and funded with the support of controversial US insurance giant Unum Insurance. Professor Aylward and his colleagues (like for instance Gordon Waddell), portray many illnesses as being nothing more than “illness belief” the sufferers adhere to, which is an irresponsibly dismissive approach, taken to particular physical and certainly many mental health conditions.

To summarise my complaint, Dr Bratt is making unproved claims, is making comparisons between benefit dependence and “drug dependence” which are not scientifically proved, and which can only be seen as a highly questionable, and even a biased way of dismissing other aspects that may explain that many beneficiaries suffer ill health, and conditions that do often not improve. One may fairly ask, is Dr Bratt not confusing cause and result, and with his influence making statements that are untrue and can lead to serve only to justify the Ministry of Social Development to apply approaches and pressures on sick and disabled beneficiaries that will cause more harm than benefits to those affected. The question may also be asked, is wage and salary receipt then also not “addictive” like “a drug”?

Dr Bratt is increasingly being criticised and challenged, as certain media reports show. I will provide some information on his controversial, disputed presentations and comments by others in PDF files attached to the email carrying this letter.” (See the information then presented with that letter!)

It is my position that it is in the public interest that I obtain the information I still seek with my O.I.A. request from 16 January 2014, as the public and I have an interest that Dr Bratt bases his presentations, his own research, professional decisions and actions only on truly evidence based science and information. He has a responsibility to do so in his role as a qualified and registered medical practitioner acting as Principal Health Advisor for MSD. I am also concerned as an individual, who was very adversely affected by a general practitioner acting as a “designated doctor” for Work and Income on xx xxxx 20xx. Like all designated doctors used by Work and Income he had been “trained” or at least indirectly instructed by Dr David Bratt and MSD, and he made an appalling recommendation as part of a medical assessment, which led to very serious consequences and caused very harmful effects on my mental and physical health. I was pushed to even end up with suicidal ideations, after a wrong decision by Work and Income staff led to serious harassment. That matter was only resolved after enduring settlement negotiations following filing of legal proceedings.

I look forward to your decision and response in this matter in due course.

Yours thankfully and sincerely

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