

**THE IMPACT OF WELFARE
REFORM ON DUAL-DIAGNOSIS
DISABILITY CLAIMANTS AND
THEIR REPRESENTATIVES:
LESSONS FROM THE DISABILITY
DENIALS PROJECT AT GREATER
BOSTON LEGAL SERVICES**

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In the 1990s, driven in part by widely publicized concerns about government benefits funding or enabling substance abuse, Congress implemented sweeping reforms of the nation's welfare system ("Welfare Reform") that included stricter eligibility rules for Social Security disability benefits. Starting in 1997, dual-diagnosis claimants with co-occurring addiction and mental health disorders faced a heightened standard when applying for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI). Under the Social Security Administration's new rules, claimants had to demonstrate that their functioning

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would not improve to the point of non-disability if they stopped using drugs or alcohol. The new rules led to a loss of benefits for more than 100,000 beneficiaries in the first year, and they continue to pose challenges for claimants and their representatives today. Between 2019 and 2020, the Disability Denials Project at Greater Boston Legal Services (GBLS), a non-profit legal aid provider, revealed that GBLS had been losing an estimated 80% of its SSDI/SSI cases involving substance abuse, in contrast with a roughly 34% loss rate across all SSDI/SSI cases handled by the organization. Closer examination of GBLS's addiction cases highlighted the following four potential areas for further study 25 years after Welfare Reform: an emerging circuit split over the burden of proof in dual-diagnosis disability cases; a parallel evolution of medical and legal views on substance abuse; the 1996 reforms' driving assumption that disability payments incentivize addiction; and the reforms' impact on practitioner decision making in cases involving substance abuse.