Helping doctors and their families in times of hardship: can we do more?





## The Royal Medical Benevolent Fund

The RMBF is the UK charity for doctors, medical students and their families. We provide financial support, money advice and information when most needed due to ill health, age, disability and bereavement. We also have a telephone befriending scheme for those who may be isolated and in need of support.

## The RMBF in numbers In the past five years the RMBF has:

Helped over Some Solution of the Solution of t

Paid over **E2.5m**in grants to individuals in need

Provided online money advice to a further

550
medical students

Helped over 1,600 g

with confidential support for issues including anxiety, depression and burnout, via DocHealth, a service supported by the RMBF and the BMA

In recent years, more young doctors have approached us for help – three quarters of new beneficiaries in 2022/2023 were under the age of 40. Mental health issues now represent the most common reason for seeking help, accounting for nearly half of our new beneficiaries.

#### The research

While we are proud to have helped so many individuals, we were also concerned that there may be many more doctors and medical students in hardship who were not coming forward to access the help we can offer. It is important that we continue to meet the changing needs of the profession, and so we asked University College London (UCL) Medical School's Research Department of Medical Education to investigate:

- 1. Who is experiencing financial difficulties and why?
- 2. Where do doctors and medical students go for help and advice?
- 3. What can prevent, or support, help seeking?

#### How was the research done?

During 2021 and 2022 the research team at UCL:

- Reviewed a wide range of publications.
- Interviewed 25 experts in the field.
- Interviewed 16 beneficiaries of RMBF support and 6 people who did not receive support but who might have been eligible (potential beneficiaries).
- Surveyed 442 doctors and medical students in the UK.

#### What did the UCL research team find?

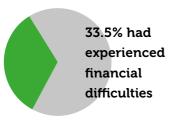
## 1. Who is experiencing financial difficulties and why?

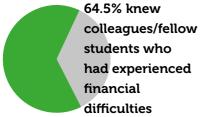
The reasons doctors and medical students experience financial difficulties:

- 1. Physical illness, disability.
- Psychological mental health, bereavement, perceived stigma.
- Social caring responsibilities, being new to the UK, domestic abuse
- Financial low-income background, education-related fees and debt.
- Professional being under investigation by the regulator, contractual issues.

Those with particularly high levels of need were:

- Medical students, particularly those from less affluent backgrounds or overseas students.
- Medical trainees because of student debt and training costs.
- Overseas doctors.
- Doctors working as locums and those out of work not due to ill-health (e.g., under GMC investigation).
- Doctors and medical students who were affected by the Covid pandemic.



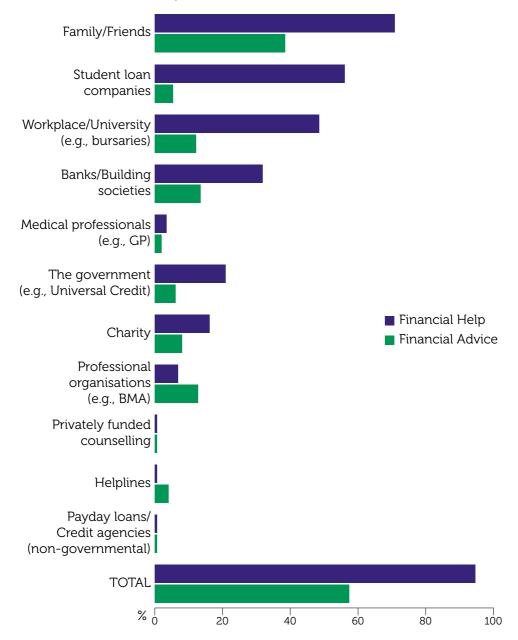




Nearly 4 out of 10 survey respondents would have been eligible for RMBF support (due to illness, bereavement, caring responsibilities). Other reasons for experiencing financial difficulties were related to high costs of living and study (e.g., exams and membership), unexpected bills, delays in pay, contractual issues (e.g., zero-hour contracts), and poor financial planning skills.

## 2. Where do doctors and medical students go for help and advice?

Most of the survey participants experiencing financial difficulties sought help and advice from their family/friends:



## When choosing sources of support, doctors and medical students said they pick and prefer to seek support from services that:

Are well known

Are easy to access

Do not require interest payments

Are confidential

For some – focus specifically on medics/medical students For some – are not connected to their work or personal networks

#### Reasons given for not seeking support include:

Stigma

Shame

Sense of personal responsibility

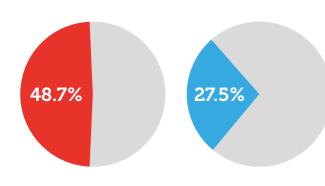
Unaware of where to go for help

Unsure they would be eligible

Potentially complex and time-consuming process

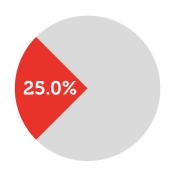
36.9% 63.1%

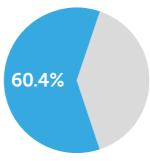
said they have been made aware of available financial support for them



More so **medical** students than doctors, 48.7% vs **27.5%** had been made aware.

44.3% knew about the RMBF





More so doctors than students, 60.4% vs 25% had known

## 3. What can prevent, or support, help seeking? Three main things

# **Eligibility** criteria

- Criteria as gatekeeper
- Presenting the criteria

# rocesss of applying

- Burden of proof
- Stigma
  - Sense of candidacy

## • Impression

- Advertising
- Word of mouth
- Early awareness

## **Eligibility criteria**

The eligibility criteria act as a gatekeeper:

- People are generally bad at reading criteria, and may miss important details.
- Assumption that the RMBF only helps people at "rock bottom".
- Confusion about key terms e.g. what counts as ill-health?
- Considering applications on a "case-by-case basis" and having an option for "other" or "exceptional circumstances" might encourage people to apply even if unsure of their eligibility.

#### Presenting the criteria:

- Experts felt transparent detailed criteria might help people know whether they would be eligible.
- Beneficiaries more concerned with the criteria being accessible to those feeling unwell.

"It might have been helpful to have some kind of flow chart to help you decide if you're eligible or not." [Beneficiary]

## Process of applying

#### Applicants can feel a burden of proof:

- There is a general understanding that detailed information is necessary.
- Challenging to compile the required evidence, especially when unwell.
- Charity caseworkers are key for helping applicants through the process.

## Stigma around ill-health and financial need:

- Financial difficulties associated with shame, failure, and personal responsibility.
- Fear that ill-health and/or financial difficulty could lead to fitness to practise concerns with the regulator.

## Applicants may have an insufficient sense of candidacy:

- Not feeling deserving of support.
- Concern that they would not be successful if they applied.

"The thought of actually having to get all this stuff together and fill out forms is often such a big barrier that they don't do it." [Expert]

"The caseworker I had ... she was very experienced and I had her for several years, was really kind."
[Beneficiary]

"It's the pride and ego and being part of this medical profession that shouldn't show too much weakness." [Potential beneficiary]

"I just kept on thinking that my [problem] isn't severe enough." [Potential beneficiary]

#### **Awareness**

#### Creating the right impression:

- A charity run by doctors for doctors can be seen as trustworthy.
- A charity run by doctors for doctors might cause concern around anonymity.

Advertising can be challenging:

- Target audience (medics) is busy.
- Medics do not notice advertising unless they are in need.

Word of mouth can spread awareness:

- Informally through peers.
- Formally through the workplace.
- Needs to be from trusted and respectful figures.

Early awareness is critical for timely support-seeking:

- At sensitive points in the medical career e.g. job transitions.
- Prevent development or worsening of financial crisis.

"Perhaps it's the 'medical'

– all our clients almost
without exception are
worried about issues of
confidentiality – and the
worse their circumstances,
the more worried they are."
[Expert]

"It's the respect of another fellow professional and the feeling that another doctor will understand the years and years of training and how they've got to where they are." [Expert]

"It's about trying to get to people before something bad occurs, so that when something bad does occur you're at the forefront of their mind." [Expert]

## How is the RMBF responding?

The RMBF has carefully considered these valuable insights and recommendations. Some will take time to implement, but work already underway includes the following:

1

### Clarifying the Eligibility Criteria

We are:

Developing an interactive online eligibility checker to help people to understand more easily whether they will be eligible for support. Having a series of steps to follow instead of a large amount of information should help to make it more manageable and easier to use.

We have:

Reviewed our medical student grants programme and increased our support levels to ensure we are meeting the needs of those in the last two years of study.

2

# Refining the Application Process

We are:

Reviewing the tone of voice and language of our application forms. The copy is being reviewed and refreshed with colour and illustrations.

Producing short animated videos to feature on the website. These will explain the application process in a friendly, informative and accessible way. 3

## Raising Awareness

We are:

Developing a new communications programme to create the right impression, using a range of stories and testimonials to engage more widely with the profession.

Building a stronger social media presence to reach a more diverse audience.

Developing an enhanced volunteer strategy to engage with diverse groups across the profession and establish credibility and trust in applying to the charity for help.

#### About the research team

This research was conducted by the research team in the Research Department of Medical Education (RDME). RDME sits within UCL Medical School, part of the Faculty of Medical Sciences at UCL. RDME is an internationally recognised, interdisciplinary team of academic and research staff from a variety of backgrounds (education, social science, psychology, and healthcare practitioners). RDME's aim is to create high-quality research evidence and ensure its translation into policy and practice to improve medical education, patient safety, and quality of care.

www.ucl.ac.uk/medical-school/research-department-medical-education

#### Acknowledgements

We would like to thank the advisory group members who supported this study and those who took part in the research project and supported us with participant recruitment.

#### Funding

Study commissioned and funded by the Royal Medical Benevolent Fund.



#### **Publications**

Please find the full research report here: www.ucl.ac.uk/medical-school/sites/medical\_school/files/rmbf\_research\_into\_unmet\_need34.pdf

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## How you can help

The RMBF relies on voluntary donations and we receive no government funding.

Please support this vital work by making a donation at: https://rmbf.org/donate

We would also like to hear from colleagues who would like to help us to deliver this ambitious programme. Please do contact us on info@rmbf.org

#### If you – or someone you know – needs help

Please contact us on: help@rmbf.org

020 8540 9194 (select option 1)

https://rmbf.org/get-help