



**Royal Medical
Benevolent Fund**
The Doctors' Charity



Dr Richard Stevens
RMBF Trustee



The RMBF has been helping doctors, medical students and their families for over 180 years.

In 2016 we provided support to 255 members of the medical profession and their dependents who had been facing hardship as a result of accident, illness, injury and bereavement.

Types of support

**Regular monthly
grants**

**Back to work
awards**

**Medical student
grants**

**Refugee doctor
grants**

Money advice

PhoneFriends

Stress, burnout and mental health awareness

Mental health issues are experienced by over 50% of doctors seeking our support

Why people
turn to us,
2017-18

Mental illness

53%

Physical illness

37%

Refugee doctors

5%

Carer/age/bereavement

5%



RMBF surveys indicate that doctors are unlikely to seek support

RMBF What's Up Doc? campaign survey, 2016 (1,300 responses)

- **8 out of 10 doctors knew of other doctors experiencing mental health issues such as depression and anxiety**
- **8 out of 10 doctors unlikely to talk to colleagues about personal problems for fear of discrimination or stigma**

RMBF Together for Doctors campaign survey, 2017 (1,800 responses)

- **75% think there is a lack of sympathy within the medical profession for doctors who seek support and help for stress and mental health issues**

Recognising the early signs as a Trainee

Introduction

- GP for 30 years
- Coach with Professional Support Unit (PSU), Supervisor and Associate Director
- Trustee of the RMBF and author of *The Vital Signs* guides



Wanted – medical staff

**High academic achievers only
with strong perfectionist and
self-critical traits preferred.**

Successful candidates will have had:
5+ years training in party-fuelled
student culture followed by sleep
deprivation and long hours in their
twenties; regular exposure to death,
loss and human misfortune; never-
ending exams and lifelong study;
constant onerous responsibility for
other people's health and wellbeing;
strict, hierarchical, conservative training
with a hint of bullying and intimidation.

Easy access to pharmaceuticals.



Being a doctor is a wonderful life!



Being a doctor is wonderful if you like:

medicine, people, explaining medicine to people, doing things your way, understanding people, helping people understand, doing what's right and good, people's stories, humour, teaching, seeing things through, making a difference, working with people, meeting people you would not normally meet, developing a special interest – in or out of medicine, finding out about human nature (including your own!), travelling and global health, occupational medicine, writing a book ...

Doctors are different

- Long training
- Exposure to death, disease, loss
- Responsibility
- Poor support
- Unsocial hours
- Highly regulated
- Litigation threat

... and a unique culture where being ill or needing support is a 'weakness'



Doctors are the same

Doctors at times feel anxious, frightened, depressed, deluded, suspicious, irritable, bored, martyred, unappreciated, bullied, tired, taken for granted and every other emotion. Just like everyone else.



Reactions to the stress of being a doctor

- Survival personality
- The 'seven signs'
- Burnout
- Medical narcissism

Survival Personality

‘...many develop a psychological strategy to cope by shutting off the parts of themselves that would otherwise find some aspects of the work unbearable. This ‘survival personality’ allows them to function well in the work setting, but at a cost to other parts of their life. This process is seen in other settings too – the military in combat, and staff in long-term institutions, for example.’

- RMBF Vital Signs 2016



Seven key early warning signs (Paice 2006)

'Disappearing act'

Low work rate

'Ward Rage'

Rigidity

'Bypass Syndrome'

Career problems

Insight failure

Burnout

Burnout is a state of chronic stress that leads to:

- physical and emotional exhaustion – characterized by feelings of emptiness and emotional blunting
- depersonalization - manifested by cynical attitude, negativity and detachment
- reduced personal accomplishment – doubts about personal and professional effectiveness

Risk factors for burnout

- Lack of control
- Unclear job expectations
- Dysfunctional workplace dynamics
- Mismatch in values
- Poor job fit
- Extremes of activity
- Lack of social support
- Work-life imbalance

Medical narcissism

- Coined by John Banja in *Medical Errors and Medical Narcissism* who suggested that “medical narcissism” ... helps physicians do their difficult work.
- medical narcissists may find the disclosure of an error to be too much of a challenge to their self-image of competence, control, and “treatment-oriented focus.” Hence, they have a tendency to rationalize the error as unavoidable, unimportant, or unnecessary to reveal because it will not change the outcome.

Acquired situational narcissism

“It is not the case that narcissistic individuals enter medicine. Banja says that physicians find themselves in extremely stressful conditions, in which innumerable medical errors buffet physicians’ self-esteem that push them to become *narcissistic as a defence mechanism* for their “professional self confidence.” Additionally, physicians find themselves in a state of gratuitous adulation.”

What can we do?

Helping ourselves

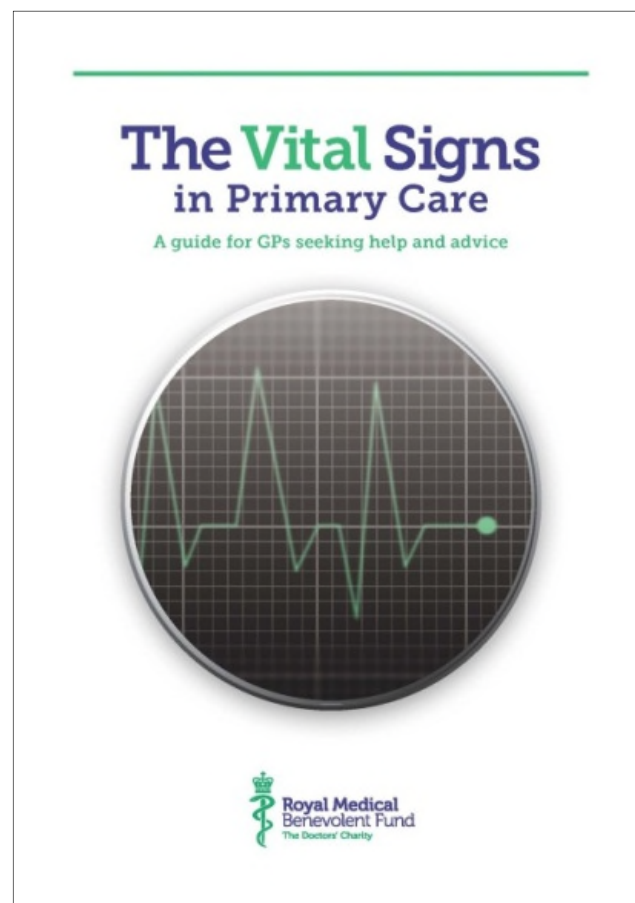
Key areas (Balme, Gerada and Page, BMJ Careers, 2015)

- Intellectual interest
- Self awareness
- Time management
- Support
- Continued professional development
- Mentors



Knowing when and where to seek outside help

- Guides for doctors seeking help and advice
- Signposting external sources of support and the different forms of help they offer
- Versions available for GPs, specialty doctors and medical students



DocHealth

- Confidential psychotherapeutic service for doctors, supported by the BMA and the RMBF
- Exclusively self-referral, with no report writing unless specifically requested
- Up to six face-to-face sessions, flexibly applied, with signposting to longer term support and other health services where needed





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Thank you

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