Primary Care Guidance on Debt and Mental Health

**KEY LEARNING POINTS**

- Debt problems increase the risk of mental illness, and mental illness increases the risk of debt problems.
- Primary care practitioners are not ‘debt experts’. However, they can make a big difference through small actions to help their patients’ financial and mental health.

**A relationship exists between debt and mental health**

- **debt problems increase the chances of poor mental health** – patients with debt problems are twice as likely to develop major depression (as someone without debt). The more debts a patient has, the more likely they will have a mental health problem.

- **it affects many people** – 1 in 2 British adults with a debt problem has a mental health problem. Meanwhile, 1 in 4 British adults with a mental health problem has problem debts.

- **debt can make recovering from a mental health problem harder** – patients with depression and problem debts are four times more likely to still be depressed when contacted 18 months later (compared to those with depression but no problem debts). When talking with patients, listen out for signs of underlying debt problems:
  - major life changes – any large disruption in circumstances can lead to individuals borrowing money, or stopping paying bills, to cope with these changes.
  - onset of illness – this can trigger debt, and result in both drops in income and rising expenditure.
  - low income – this is a key sign of potential debt problems.
  - disclosure of a debt problem – particularly where it relates to the home (e.g. rent or mortgage arrears), disconnection of gas/electricity, or threats of imprisonment. These debts need to be immediately addressed.

**Helping patients to deal with debt can improve their health**

Practitioners are not debt advisers. They can, however, make a large difference through small actions.

1. **Consider debt** as a possible determinant of a patient’s poor mental or physical health (and also consider mental health screening where a patient is indebted).
2. **Ask patients** if they have any money worries as part of routine practice, including biopsychosocial reviews and care planning.
3. **Signpost indebted patients** to free and independent debt advice services (see list overleaf).
4. **Help by not charging for medical evidence** where patients are in serious financial difficulty:
   - medical evidence will allow the patient’s creditors to take any health problems into account
   - this can allow the patient to better manage their debt, with positive benefits for their health
   - however, by virtue of their financial situation, not all patients will be able to pay for evidence.

Practitioners should therefore consider on a case-by-case basis whether to charge an indebted patient (see over).

**Five ways to make a difference:**

1. **spotting problems**
   - When talking with patients, listen out for signs of underlying debt problems:

   - major life changes
   - onset of illness
   - low income
   - disclosure of a debt problem

2. **talking about debt**
   - Ways of raising the issue include:

   - “Do you have any money worries at the moment?”
   - “These are difficult economic times for many people, are you having any problems with money?”

If a patient answers ‘yes’ to either ask:

- “Is this something you feel you need help, or want help, with?”

Helping a patient to recognise and act on their debt problems will help improve their mental and physical health.
3 referring to debt advice
Debt advice services will help patients:
• understand and prioritise their financial problems
• draw up a budget (to maximise income and reduce spending)
• advise patients on the best option to deal with their debt.
Depending on the patient’s needs, debt advisers may also help:
• negotiate with creditors
• fill in forms
• represent patients at court hearings.
Advice services can be delivered in person, over the telephone, or online (see ‘Useful resources’).

4 providing medical evidence
GPs have the right to charge a payment for ‘non-NHS’ work.
This includes requests for medical evidence from indebted patients.

In considering whether to charge for such evidence, GPs (and Practice Managers) could help patients by:
• considering each request on a case-by-case basis (rather than implementing a blanket policy)
• deciding whether the patient can afford to pay (as the request is due to their serious financial difficulty)
• recognising that advice services supporting the patient are often charities with few resources to pay
• understanding that medical evidence could help creating different financial outcomes by taking the patient’s health into account
• reflecting on the potential health benefits that dealing with their debt could have for the patient.
A decision not to charge for medical evidence could significantly help the patient.
When receiving a request for medical evidence, GPs may be asked to complete The Debt and Mental Health Evidence Form.

5 prevention is better than cure
Primary care services can help prevent patient financial difficulties by:
• commissioning debt advice services – there is growing evidence of their health and economic benefits both for the general population and people with mental health problems
• offering space on premises for free to independent local money advice agencies (to help early intervention on debt)
• promoting local credit unions where appropriate (who often charge lower interest rates to savers)
• linking with local fuel efficiency schemes (to reduce heating bills)

Useful resources
Advice UK is a membership association for over 1,000 information and advice centres. I 0300 777 0107 or www.adviceuk.org.uk
Advice NI – leadership, representation and support to independent advice organisations in Northern Ireland. I 028 9064 5919 or www.adviseni.net
Citizens Advice Bureaux I www.citizensadvice.org.uk (England & Wales), www.cas.org.uk (Scotland), www.citizensadvice.co.uk (Northern Ireland)
Mind – debt support when you have a mental health problem. I www.mind.org.uk/debt
Money Advice Scotland provides details of advice agencies throughout Scotland. Call 0141 572 0237 or www.moneyadvicescotland.org.uk
National Debtlime provides free confidential and independent advice on debt. Call 0808 808 4000 or visit www.nationaldebtlime.co.uk
Payplan provides a free debt management service. I 0800 280 2816 or visit www.payplan.com
Rethink Mental Illness – mental health advice line on benefits and debt. I 0300 5000 927 or www.rethink.org
Royal College of Psychiatrists (RCPsych) – guidance on supporting indebted patients. I www.rcpsych.ac.uk/debt
Stepchange provides free, independent, impartial and realistic support regarding debt. I 0800 138 1111 or www.stepchange.org

Authors
Chris Fitch is Policy and Research Fellow, Royal College of Psychiatrists, and runs a programme of research and intervention on financial difficulty and mental disorder.
Emma Mamo is Policy and Campaigns Manager at Mind.
Jonathan Campion is a Consultant Psychiatrist and Director of Public Mental Health at South London & Maudsley NHS Foundation Trust, Director of Population Mental Health at UCLPartners and Visiting Professor of Population Mental Health at UCL.

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15 see www.energysavingtrust.org.uk/