



British Lung Foundation

Survey of people affected by mesothelioma 2013

Supported by the Mick Knighton Mesothelioma Research Fund



Thanks and acknowledgements

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Key points

- 240 people affected by mesothelioma completed a survey in spring 2013. Topics covered included diagnosis, asbestos exposure, welfare benefits, the legal process, and medical care, and demographic questions were also included.
- 13% of the respondents had mesothelioma themselves, 6% were the carer/family member of a person with mesothelioma and 80% were the bereaved carer/family member of the person with mesothelioma
- An overwhelming margin of respondents said research was the most important area for improvements, with 94% of respondents deeming it 'absolutely essential' and less than 1% considering it 'unimportant'
- The majority of respondents (70%) saw ultimate responsibility for funding mesothelioma research as lying with the government, although around 15% considered the insurance industry to have ultimate responsibility, and 7% believed responsibility to lie with the charity sector
- 99% of respondents stated their belief that there was a need for further asbestos-awareness raising campaigns warning the public about the risk posed by asbestos
- Improvements in the diagnostic process were also highlighted as an area in need of significant improvement, with 69% of respondents rating improvement as absolutely essential
- 47% of survey respondents highlighted improvements in the compensation claims process to be absolutely essential. Of the 79 respondents who gave qualitative suggestions on how the process could be improved, around half suggested speeding up the process would help significantly improve the process.
- Barely half of respondents had a compensation award agreed within a year of their application, and just 21% within 6 months. For 19%, it took longer than 2 years. Half of those responding to the question '*have there been any delays in your claims process?*' reported having experienced a delay.
- There were delays reported in receiving the compensation even after having been awarded it: nearly a quarter (23%) of those who reported having received their award had to wait over three months before receiving the money
- 44% of those who responded to the question regarding their feelings about the length of the compensation process described it as leaving them either 'unhappy' or 'deeply distressed'
- 55% of the respondents that settled out of court said they were happy with the claims process and felt no changes were required, compared to 39% who said the same having been awarded compensation in court
- Fewer than half of respondents sought compensation immediately following their diagnosis
- Survey responses also imply considerable variation in the quality of legal support provided

Introduction

Mesothelioma is a form of cancer, usually affecting the lining of the lungs (pleura), caused by exposure to asbestos fibres. Although not one of the most common cancers in the UK, mesothelioma is particularly worthy of investigation for a number of reasons.

- Despite a long development period (usually 30-40 years after asbestos-exposure), mesothelioma is particularly fast-acting once symptoms have appeared and been diagnosed: there is no cure, few treatments, and few people survive beyond three years after diagnosis¹
- Although relatively rare and less well-known compared to the most common cancers in the UK, rates of the disease have quadrupled in the last 30 years and, still rising, are expected to peak later this decade¹
- The UK has the highest rates of mesothelioma in the world, with 2,400 people expected to die of the disease in 2013^{1,2}
- In most cases, the cause of the cancer (exposure to asbestos) is work-related, and claims for compensation are common

As a result of these rare characteristics, the needs, opinions and outlook of people affected by mesothelioma in the UK are often very distinct from people affected by other cancers.

The British Lung Foundation (BLF) and Mick Knighton Mesothelioma Research Fund (MKMRF) have long been active in providing support and information to people affected by mesothelioma, and funding research into new treatments. However, until now, neither organisation has endeavoured to systematically survey and report on the views of people affected by mesothelioma regarding how their lives and experiences outside of medical treatment can be improved.

The 'Survey of people affected by mesothelioma 2013' is the first attempt by either organisation to address this. The survey captured the views of 240 people affected by mesothelioma - both patients, and carers and family members of patients (some bereaved).

A range of issues was covered, including exposure to asbestos, the diagnostic process, experiences with the benefits system and claims for work-based asbestos exposure compensation, and views on what can be done to improve the lives of people affected by mesothelioma, both now and into the future.

Analysis of some of the prevailing themes and trends from the survey are outlined in the *Analysis and Discussion* section on p.6. A full overview of the survey method and findings are available from p.12.

Please note, the survey findings covered in this report should only be held to represent the views of those surveyed, and not the views of all patients, carers and loved ones affected by mesothelioma across the UK.

Analysis and discussion

Overall, 240 people affected by mesothelioma were surveyed in early 2013. 13% of the respondents had mesothelioma themselves, 6% were the carer/family member of a person with mesothelioma and 80% were the bereaved carer/family member of the person with mesothelioma. A full breakdown of patient gender, occupation and location can be found on pages 14-17.

Although the views expressed by survey respondents on some of the issues varied considerably, there was clear consensus on certain areas. The prevailing themes and trends from the survey are outlined below.

Research

Survey respondents were asked to rate a range of areas according to how necessary they considered improvements in those areas to be for people affected by mesothelioma. The area in which improvement was deemed most important by an overwhelming margin was research, with 94% of respondents deeming it 'absolutely essential' and less than 1% considering it 'unimportant'.

This aligns with data published by the National Cancer Research Institute (NCRI), Medical Research Council (MRC) and National Institute of Health Research (NIHR), which suggest that investment in mesothelioma research lags considerably behind other cancers with comparable mortality.

For example, in 2011 (the most recent year for which complete figures have been released), NCRI data suggest that an estimated £400,000 was invested by NCRI partners.³ The BLF invested around £850,000 the same year. By comparison with other forms of cancer that kill similar numbers of people, NCRI data show myeloma research investment of over £5m a year, and melanoma investment of nearly £6m.^{4,5} For both cancers, the prognosis for those diagnosed is already considerably better than for mesothelioma.

Figures published recently by the MRC suggest more has been invested in mesothelioma research over recent years than is detailed in the figures above, but these totals still lag behind other cancers of comparable mortality.⁶

There is currently no cure for mesothelioma, and the few available treatments are largely aimed at slowing the disease's progress. Mesothelioma survival rates are consequently amongst the lowest of any form of cancer, supporting the survey respondents' calls for investment in research to be prioritised.

Responsibility for funding mesothelioma research has been the topic of much discussion recently, with an amendment to the Mesothelioma Bill aimed at introducing a levy on the insurance industry with which to create a sustainable mesothelioma research investment fund rejected by the House of Lords by a total of 199 votes to 192 in July 2013.⁷

Although this survey was conducted prior to the introduction of this amendment and the subsequent parliamentary debates, respondents were asked who they considered responsible for the funding of mesothelioma research. The majority of respondents (70%) saw ultimate responsibility lying with the government, although around 15% considered

the insurance industry to have ultimate responsibility, and 7% believed responsibility to lie with the charity sector.

Exact figures on the respective contributions from the government and the charity sector are difficult to ascertain. What is known is that, in 2010, a £3m donation was made by members of the insurance industry to the BLF, the majority of which was stipulated for use for mesothelioma research.

However, this funding expires this year (2013). Charity resources across the sector are significantly squeezed in the current economic climate, and no plans have yet been agreed, either jointly or individually, by the three parties considered responsible by survey respondents (government, insurance industry and charity sector) as to how to fund mesothelioma research on a sustainable basis. It is therefore feared that the investment in research required for these “essential” improvements may, in contrast to the wishes of those affected, decline.

Asbestos-awareness campaigning

In a question specifically about awareness, 99% of respondents stated their belief that there was a need for further campaigns warning the public about the risk posed by asbestos.

Asbestos was banned from use in new construction and industrial projects in 1999, but remains present in millions of buildings built or renovated before this time. Although safe if left undisturbed, there is still a risk to people conducting DIY or tradespeople who disturb it when working on a building.

The BLF and Health and Safety Executive (HSE) have both run asbestos awareness campaigns in recent years. The BLF launched the ‘Take 5 and Stay Alive’ campaign targeting people conducting DIY within the home in March 2012; the HSE has previously targeted awareness-raising largely at people likely to be exposed in the workplace. The BLF will be extending its campaign to tradespeople later in 2013.

Nearly 10 years since its ban, the dangers of asbestos and the need to be able to recognise what asbestos looks like and when it might pose a danger, are at risk of slipping from public knowledge. A 2012 BLF survey revealed two thirds of people couldn’t confidently identify asbestos.⁸ These results support the views professed in the ‘Survey of people affected by mesothelioma 2013’ that there is an on-going need for asbestos awareness campaigns into the future.

Improving the diagnostic process

Improvements in the diagnostic process were also highlighted in the survey as an area in need of significant improvement, with 69% of respondents rating improvement as absolutely essential.

The survey revealed that while two thirds of respondents said they or the mesothelioma patient they cared for were diagnosed within 6 months of first showing symptoms, a further 19% of cases took up to 6 months longer for diagnosis, 9% took 1-2 years and 7% took over 2 years. Although the average age of the mesothelioma patients responding to,

or referred to by a loved one, in this survey was 51-65 years old (younger than the national average age of diagnosis), this is unlikely to have significantly impacted on the length of time taken from the identification of symptoms to diagnosis.

With a disease as fast-progressing as mesothelioma, a swift diagnosis is essential. Not only does an earlier diagnosis allow for the effective relief of symptoms at an earlier stage, it can also give the patient longer to get their affairs in order, to claim any compensation due, and to spend their remaining time accordingly.

Research may, of course, help develop ways of identifying the condition earlier and speeding up the diagnostic process, although as detailed earlier, the future for sustainable mesothelioma research funding is currently uncertain.

Compensation claims process

Although many respondents reflected that no amount of money awarded as compensation could make up for the loss of their loved one, compensation awards can make a huge difference. This sentiment was summed up by one respondent, who commented, *“Money gave us security - that is all my husband wanted for me. But it does nothing to help the pain and torture my husband suffered”*.

47% of survey respondents highlighted improvements in the compensation claims process to be absolutely essential. Of the 79 respondents who gave qualitative suggestions on how the process could be improved, around half suggested speeding up the process would help significantly improve the process.

Barely half of respondents had a compensation award agreed within a year of their application, and just 21% within 6 months. For 19%, it took longer than 2 years. Half of those responding to the question *‘Have there been any delays in your claims process?’* reported having experienced a delay.

Furthermore, there were delays reported in receiving the compensation even after having been awarded it: nearly a quarter (23%) of those who reported having received their award had to wait over three months before receiving the money. Nearly one in ten (9%) waited over 6 months, while 4% had to wait over a year. In response to the question about how long it took to receive payment after the award had been agreed, one respondent commented, *“I almost gave up, as it had taken so much time and my husband had already died. I just wanted an end to the process”*. Another respondent commented that the *“claims process was very good”* and that the only point for improvement was in the *“delay from insurers in payment”*.

For a disease as fast-progressing as mesothelioma, such delays have a significant impact, and a number of respondents mentioned that the individual with mesothelioma had died during the claims process. 44% of those who responded to the question regarding their feelings about the length of the compensation process described it as leaving them either unhappy or deeply distressed. A request by one respondent - *“Speed up the process so that those suffering with mesothelioma can benefit before they die”* - was echoed in a number of other responses.

Several survey respondents reported what they saw as delaying tactics being implemented by defendants or the insurance industry in order to prolong the process. One respondent stated that “*the defendant’s insurers constantly delayed responding to letters*”; another commented that the defendant “*[left] responses to the last minute so that the process [was] drawn out longer than necessary*”; another felt the insurance company were “*trying to find delays to put in the way of paying out*”. Such claims should be investigated by the Ministry of Justice and, where appropriate, the compensation claim process should be reviewed and revised to ensure that such tactics are not rewarded.

It has been suggested that incentivising more out of court settlements could help speed up the compensation process, as well as reducing the strain on the judicial service. It is likely that more out of court settlements would result in quicker compensation awards. It is also noticeable from the survey that 55% of the respondents that settled out of court said they were happy with the claims process and felt no changes were required, compared to just 39% who said the same having been awarded compensation in court. The survey data on this issue may be skewed by respondent interpretations on what constitutes an out-of-court settlement - some cases that are litigated, but in which the settlement was not decided in the courtroom, may have been classified as out-of-court settlements by respondents. However, the results do suggest that settlements agreed out of the courtroom are more likely to result in better experiences for claimants than the full court process.

Nevertheless, these figures still show that 45% of people who received what they considered an out-of-court settlement still felt improvements were required to the claims process. This suggests that incentivising out-of-court settlements alone would not be sufficient in addressing the concerns of claimants over the speed of the process and other issues.

Furthermore, before actively deploying measures to encourage more out-of-court settlements, it should be determined as to whether such settlements tend towards lower compensation awards than those decided in court. While speeding up the process is clearly a priority, such improvements should not compromise the scale of compensation payments received by claimants.

The survey revealed that fewer than half of respondents sought compensation immediately following their diagnosis. A factor in this delay is hinted at in the survey, through the wide variety of sources of legal information used (in terms of who first advised them to seek compensation, and how they found their solicitor).

Survey responses also imply considerable variation in the quality of legal support provided. This might also have contributed to delays, with a number of respondents reporting inefficiencies in the collation and processing of the information required for the claim.

It should be investigated as to whether revisions - potentially including greater standardisation - to the way that information about the compensation process is compiled, presented and disseminated might help people begin the claims process earlier, be able to find an appropriate solicitor earlier, and do so confident that their

legal representation is of sufficient quality to not occasion unnecessary delays. A revised process could potentially be incorporated to help with the dissemination and availability of health information, which respondents also received from a wide variety of sources.

29% of those who responded to the question about where their court proceedings began stated that it was in the Royal Court of Justice through the Mesothelioma Fast Track. This total is lower than would be expected and desired, although this could be a result of the respondent's solicitor not explicitly advising them of the legal technicalities regarding the nature of their claims process.

It is nevertheless important to note that, for claimants to benefit from opportunities such as the Fast Track system, it is crucial that they are able to recognise the importance of hiring solicitors with significant previous experience of mesothelioma compensation claims, rather than unselected personal injury claims. Information on where and how to find such legal firms is equally crucial. Of those who responded, only 5% believed their solicitor was not a mesothelioma specialist, although there is no way of verifying whether these beliefs are correct. Given the qualitative responses, it seems probable that the actual figure was higher.

Limitations

It should be noted that survey respondents were not selected to constitute a representative sample of the wider mesothelioma population across the UK. With mesothelioma being a relatively rare condition, identifying a sufficient number of people affected by mesothelioma, who were both willing and able to undertake the survey, proved very difficult. Weighting the population would have placed further restrictions on this recruitment.

Although the gender breakdown of the sample was broadly similar to the population as a whole, the age and geographical location profiles were notably different. It is particularly notable that a higher number of survey respondents came from the North East of England (where the Mick Knighton Mesothelioma Research Fund is based) than would be expected from a representative sample. Due consideration should therefore be paid to the demographic information provided on pages 14-17 when interpreting the survey results.

It should also be noted that the length of time that has elapsed since the experiences of some survey respondents means that not all survey responses reflect the current situation. Again, the inclusion of a number of cases that are several years old was necessitated by the difficulties experienced in recruiting a sample population of sufficient size.

However, comparison of the responses provided by patients with those provided by family members and carers (both current and bereaved) revealed no significant differences in opinions and perceptions, even in areas, such as the compensation claims process, where efforts have been made to bring about improvements in recent years. For instance, it is widely accepted that the claims process is faster now than was the case a decade ago. However, survey responses from recent cases, as well as discussions with current patients and carers, and consultation with doctors actively involved in

mesothelioma cases (both in clinical and medico-legal capacity), indicate that delays in the process undoubtedly continue to cause distress. Therefore, while the age of some of the experiences should be taken into consideration when interpreting the survey results, they are not significant enough to invalidate the overall findings.

Overview of the survey and its findings

1 Survey method

Topics covered

The self-completion survey comprised 57 ‘closed’ questions, for which patients were asked to choose a response option. Many questions had an open ended response box for additional comments. The topics covered included experiences of:

- Diagnosis
- Asbestos exposure
- Welfare benefits
- The legal process
- Medical care

Where possible, additional comments submitted by respondents have been included in the relevant section of this report. Demographic details were also collected.

Invitations to participate

The survey was conducted by post and via the internet.

- Paper copies of the questionnaire (with Freepost return envelopes) were sent by post on 6th March 2013. A closing date of 4th April was given although responses received later were accepted.
- The web survey was: disseminated on a number of mesothelioma dedicated Facebook pages; included in the Mesothelioma UK members’ newsletter; emailed directly to BLF supporters; and emailed to members of the Mick Knighton Mesothelioma Research Fund.

Compilation of responses

Although 240 survey responses were received in total, not all respondents answered all questions. In addition, some questions were not applicable to some respondents. The numbers of not answered and not applicable are shown below each table where relevant.

Percentages shown are rounded to the nearest whole percentage point, so do not always add up to 100.

2 Who completed the survey?

In total, 240 responses were received, 179 by post and 61 online.

13% of the respondents had mesothelioma themselves, 6% were the carer/family member of a person with mesothelioma and 80% were the bereaved carer/family member of the person with mesothelioma.

Do you have mesothelioma?	Number of respondents	%
Yes	31	13
No, I am the carer/family member of the person with mesothelioma	15	6
No, I am the bereaved carer/family member of the person with mesothelioma	188	80
Total	234	100

Not answered: 6

Table includes all respondents.

3 About the person with mesothelioma

Gender

Overall, 82% of the people with mesothelioma were male and 18% female.

What is the gender of the person with mesothelioma?	Number of respondents	%
Male	192	82
Female	42	18
Total	234	100

Not answered: 6

Table includes all respondents

Where the person with mesothelioma was male, the response was more likely to come from family/carer (92%) than where the person with mesothelioma was female (66%).

Occupation

The occupations most frequently given were electrician (15%), shipyard worker (9%) and plumber/pipe fitter (8%).

The occupation of the person with mesothelioma?	Number of respondents	%
Other	93	43
Electrician	32	15
Shipyard worker	19	9
Plumber/pipe fitter	18	8
Joiner	12	6
General builder	8	4
Carpenter	7	3
Teacher	7	3
Motor mechanic	5	2
Power station worker	4	2
Armed services	3	1
Health Care worker	3	1
Plasterer	2	1

Lagger	2	1
Painter/decorator	2	1
Total	217	100

Not answered: 23

Table includes all respondents

Of the 42% that gave the occupation as “Other”, the following were given:

“Other” occupation

Accountant	Engineer: heating	Metallurgist assistant
Accounts clerk and secretary	Engineer: industrial	Moulder core maker
Administrator	Engineer: marine	Office and family employed
Architect and artist	Engineer: mechanical	Office worker
Architect and surveyor	Engineer: refrigeration	Pipelines inspection
Asbestos factory worker	Engineer: telephone	Power station worker
Asbestos salesperson	Engineer: type not specified	Printer
Asbestos sheeter	Fabricator	Publisher
Bakery, Bank worker and secretary	Factory worker	Research technician working on gas turbines
Boiler-maker	Farm estate maintenance worker	Sales manager for engineering company
Car assembler	Fireman	Scaffolder
Chartered surveyor	Foundry Stereotyper (Printing)	Secretary
Chief Engineer	Fund Manager	Ship's Engineer
Cleaner	General Manager	Small holder
Cleaner and Shop assistant	Geophysicist	Soap and detergent manufacturer
Coach builder	Glass cutter	Sprayer
Company Director	Hairdresser and housewife	Steel erector

Company Secretary and Head of Finance	Head of New Products in Asbestos company	Steel worker
Customs Officer	Housewife	Technical researcher
Docker	Housewife of carpenter	Theatre lighting technician
Electrician and power station worker	IT consultant	Train driver
Engineer and miller	IT salesman	Underground government office worker
Engineer: apprentice	Joiners mate	Wages clerk
Engineer: chemical industry	Manager in sorting office	Waitress
Engineer: electrical	Managing Director	Warehouse worker
Engineer: electrical design	Manufacturing and mining company worker	

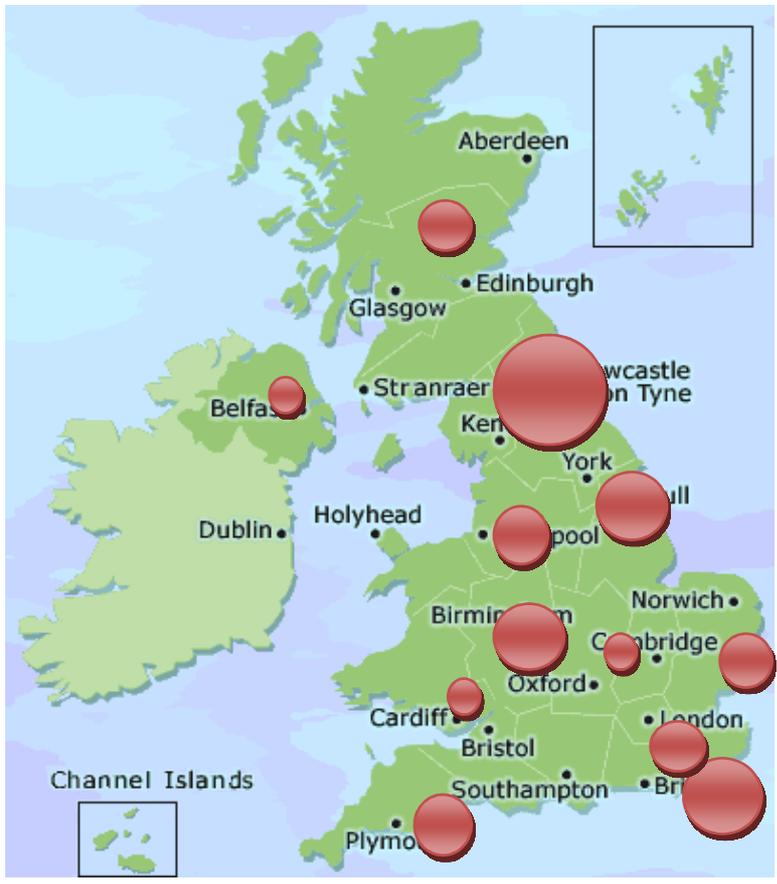
Location

Respondents were asked to give the first part of their postcode. This was mapped to region, as follows:

Which region does the patient live in?	Number of respondents	%
North East	71	32
South East England	40	18
East Midlands	24	11
Yorkshire and the Humber	18	8
South West England	15	7
East of England	13	6
North West England	13	6
Greater London	11	5
Scotland	11	5
Northern Ireland	2	1
Wales	2	1

West Midlands	2	1
Total	222	100

Not answered: 18
Table includes all respondents



NB: a large number of respondents were members of the MKMRF, based in the North East, which could partly explain the larger than expected number of respondents living in that area

4 Diagnosis

Age

10% of patients were aged under-50 when they were diagnosed with mesothelioma, 50% were aged 51-65 years old and 40% were aged over 65 years.

Time from first appearance of symptoms

Mesothelioma was diagnosed within 6 months of symptoms appearing for 65% of patients, and within 7-12 months for an additional 19%. However, 9% were diagnosed in 1-2 years and 7% in more than 2 years.

Patients with mesothelioma that responded themselves were more likely to have had their diagnosis confirmed more than 2 years from symptoms appearing (27%).

Confirmation of diagnosis

For almost all patients (95%), the mesothelioma diagnosis was confirmed by a hospital doctor, for less than 1% by a hospital nurse, 2% by a GP and 3% by someone else. Respondents that reported that “someone else” gave the diagnosis included a *coroner at the inquest* and a *specialist in a pathology laboratory* as giving the diagnosis.

Biopsy to confirm the diagnosis

91% of patients had a biopsy done to confirm the diagnosis, 4% did not and 2% did not know. 3% responded as “other” including two respondents that commented that the biopsy was carried out after the death of the patient.

Diagnosis confirmed and documented

74% of patients reported having had the diagnosis confirmed face-to-face, and 6% by letter. An additional 15% reported being told face-to-face and receiving a letter. One patient had never officially had their diagnosis confirmed.

In addition, the diagnosis of three patients was confirmed by telephone, one at an inquest and one to family members through the autopsy results.

Perceptions of the diagnostic process

69% of those who responded felt that improvements to the diagnostic process were ‘absolutely essential’. This compares to 94% who said the same of research, 58% who said the same of health care support, 47% who said it of the legal claims process, and 41% who said the same of the benefits system.

5 Asbestos exposure

Identifying the time and location of asbestos exposure

Around the time of being diagnosed with mesothelioma, 44% of the respondents felt that they already knew where their asbestos exposure had occurred. 49% were helped to identify the source of the exposure (9% by a doctor or nurse, 6% by an asbestos support group, 30% by a solicitor and 5% by someone else), and 7% said they were not helped to identify where the exposure had occurred.

Respondents that indicated that “someone else” had helped, added the following:

At the factory where my brother worked

Dad tracked down past colleagues to determine where the exposure took place

Department for Work and Pensions

Family Member

Foreman told me

Husband's work friend

The patient told the hospital

Work partner

How the asbestos exposure occurred

Most patients (78%) had been exposed to asbestos through their occupation, an additional 9% through a family member’s occupation and 1% through the environment. 10% did not know where exposure, if any, occurred. Some of these may have been due to unrecognised exposure, and it is possible that some were genuinely spontaneous.

Patients with mesothelioma themselves were more likely to report they were exposed to asbestos through their family member’s occupation (17%) or not know how they were exposed (20%).

NB: Given the infrequency of the spontaneous development of mesothelioma, and the occupational histories elicited, these results are predicated on the assumption that the cases of mesothelioma among the patients referred to in this survey were all caused by asbestos.

6 Benefits

Summary

Most respondents claimed welfare benefits, and the most common reason given for not claiming was a lack of awareness of eligibility to claim. Nearly all benefit claimants sought help with the process, with over a third saying they would not have been able to claim without such help.

Were welfare benefits claimed?

Most of the patients (86%) claimed welfare benefits, although 14% did not.

Help with claiming welfare benefits

Of the patients that did claim benefits, 85% had help with their application - 34% from a health professional, 23% from a local asbestos support group, 4% from a health charity, 18% from a legal firm and 6% from a friend. 11% did not receive help.

Small numbers of patients also reported receiving help from social services, MacMillan nurses and from hospice staff.

The quality of help with applying for benefits was described as excellent by 57% of patients, good by 29% and average by 7%. 5% described the help as poor and 2% as terrible.

Of patients given help with their application, 34% said the application would have been made without such help, and 34% said that they would not have made the application without help. 28% did not know.

When asked if an application would have been made without help, one respondent commented: *“Probably eventually but with great difficulty and stress”*.

Reasons for not claiming welfare benefits

For those patients that did not claim benefits, the most common reason was that they were unaware of eligibility to claim benefits (33%). Reasons for not claiming were:

If benefits were not claimed, why was this?	Number of respondents	%
Unaware of eligibility to claim benefits	10	33
Not someone who would normally claim benefits from the government	6	20
Other	6	20
Was not eligible	3	10
Financially stable/did not need the money	2	7
Didn't understand the process	1	3
Expected larger award from employer/insurer if I had not previously claimed benefits	1	3

Compensation from the employer/insurer expected quickly and so did not need benefits in the meantime	1	3
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Total	30	100
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Not answered: 179

Not applicable: 31

Table includes respondents not claiming welfare benefits

7 Legal Process

Summary

Nearly all of those surveyed had made a claim or were in the process of making a claim, with the suggestion to claim first coming from a hospital doctor for most respondents and nearly half making immediate contact with a solicitor after diagnosis. Only 5% believed their solicitor was not a mesothelioma specialist, although there is no way of verifying whether these beliefs are correct.

Half of respondents experienced delays in their claims process with the main problem being down to tracing the right employer. Over half (66%) settled their case out of court, with 12% of those feeling pressure to do so but most felt the settlement was fair (66%). A small number of respondents (8%) went to court and a majority of them were glad they did.

The time taken from the first contact with a solicitor to a settlement amount agreed was between 7 months and 2 years in the majority of cases (60%) and over half of those who had reached a settlement were happy about the experience. Those unable to make a claim mostly gave lack of evidence as a cause.

When asked for thoughts on where improvements could be made, the most consistent suggestion was to speed up the claims process. The comments received repeatedly point out the traumatic experience of mesothelioma diagnosis and the ensuing illness. The claims process is an added pressure on an already fragile situation and there were many calls for sensitivity and empathy from insurance companies.

Was a legal claim for compensation for asbestos exposure made?

65% of respondents had made a legal claim for compensation for asbestos exposure in the past, 25% were in the process of claiming now, and 10% had not made a claim.

Help with making a legal claim for compensation for asbestos exposure

For those respondents that made a claim for compensation, the first suggestion to make a claim was most likely to come from a hospital doctor (29%), lung nurse (26%) or local support group (14%):

Who first suggested it might be possible to make a claim for compensation?	Number of respondents	%
The hospital doctor	57	29
The lung nurse	50	26
Local support group	28	14
Other	25	13
Trade Union	15	8
We were contacted by a legal firm	7	4

An internet search	6	3
The GP	5	3
Health charity	2	1
Total	195	100

Not answered: 21

Not applicable: 24

Table includes all respondents making or having made a claim for compensation

Where respondents specified “Other”, this included: *Chris Knighton Mesothelioma Research Fund, coroner, family member, fellow victim, friend who was a lawyer, booklet from hospital, were already aware, MacMillan nurse.*

Help with finding a solicitor to contact about making a compensation claim was most likely to come from a local support group (26%), lung nurse (21%) or Trade Union (14%):

Who helped find details of a solicitor to contact?	Number of respondents	%
Local support group	50	26
Other	43	22
Lung nurse	40	21
Trade Union	27	14
Hospital doctor	16	8
An internet search	10	5
GP	2	1
We were contacted by a legal firm Health charity	2	1
Health charity	1	1
Total	191	100

Don't know: 9

Not answered: 16

Not applicable: 24

Table includes all respondents making or having made a claim for compensation

Where respondents specified “Other”, this included: *friends, family members, already aware, fellow patient, hospital booklet, MacMillan Nurse, newspaper advert, hospice.*

The solicitor

Of respondents making a claim, 48% made contact with a solicitor immediately on diagnosis, 30% within 3 months and 11% in 4-6 months. 5% made contact in 7-12 months, 4% in 1-2 years and 2% in more than 2 years.

The claimant believed their solicitor to be a mesothelioma specialist in 83% of cases, and not a specialist in 5% of cases, with 12% not knowing. It is not possible to verify whether these figures are an accurate reflection of the true number of claimants who were represented by a mesothelioma specialist.

Information to and from the solicitor

14% of respondents making a claim were asked to provide information to their solicitor just once, 19% were asked 2 or 3 times, 20% asked 4-6 times and 29% asked 7 times or more. For those that stated "Other", comments included:

Endless.

It felt at times as if I was doing their job.

Over 20 and still on-going.

Patients with mesothelioma that responded themselves were more likely to be asked to provide information to their solicitor once (33%) or 2 or 3 times (25%).

7% of respondents making a claim were updated by the solicitors weekly, 10% fortnightly, 21% monthly and 21% every 1-3 months. However, 15% said they were communicated with irregularly and 4% had to chase the solicitor to get information. For those that stated "Other" most reported getting information as and when required.

In 77% of cases, the solicitor visited the claimant's home. They visited once for 31% of respondents, 2-3 times for 50%, 4-5 times for 16% and 6-7 times for 4%.

Making a claim

For 45% of claimants making a claim, the solicitor formally started the claim immediately, with a further 23% having the claim start within 3 months and 8% in 4-6 months. 1% waited 7-12 months and 2% more than one year for the claim to start.

Over half of the court proceedings (51%) were started by the solicitor, and 33% were not. The remaining 15% did not know who started proceedings.

The venue for proceedings started by a solicitor was the Royal Courts of Justice - Mesothelioma Fast Track for 29% of respondents, the Local High Court for 12%, the Local County Court for 7% and "Other" for 9%, with 44% not knowing.

Of those respondents that gave "Other" as the venue, the only qualitative response was given as "Court of session, Edinburgh and at home, as my husband [was] too ill to travel to court".

Delays in the claim process

50% of respondents making a claim reported a delay in the claims process, the main reason being problems tracing the employer:

Have there been any delays in your claims process?	Number of respondents	%
No, there were no delays	90	50
Other	36	20
Yes, problems tracing employer/s	23	13
Yes, employer/Insurer did not accept liability for the claim until Court proceedings were started	12	7
Yes, employer/Insurer requested further documentation	7	4
Yes, employer/Insurer did not accept that I was exposed to asbestos by them or at all	4	2
Yes, employer/Insurer did not accept responsibility	4	2
Yes, missing paperwork	3	2
Yes, employer/Insurer did not accept that I was employed by them	1	1
Total	180	100

Not answered: 36

Not applicable: 24

Table includes all respondents making or having made a claim for compensation

For those respondents that gave “Other” as the reason for the delay, the following were listed:

Husband too ill. Did not want to worry so set claim in motion to proceed at later date.

My husband had also worked as a marine engineer. The solicitor was informed by a barrister that only proof of one exposure was necessary. Time had been wasted.

My husband passed away 18 months after diagnosis, which has delayed his claim.

Passed from solicitor to solicitor.

Solicitor hasn't been very helpful.

Solicitor said there was a 6-9 month delay waiting for paperwork from hospital.

Outcome of the claims process

For 66% of claimants the claim was settled out of court. 8% went to court and were awarded compensation and none went to court and were unsuccessful. An additional 8% were unable to proceed with a claim and 14% were still in the process of making a claim.

Of the respondents that settled out of court, 55% felt that no changes were required to the claims process. For those that went to court and were awarded compensation, 39% felt that no changes were required.

Claims that went to trial

73% of claimants that went to trial were glad they went to court and 27% were not.

Claims that were settled out of court

For respondents that settled out of court, 12% felt under pressure to do so and 76% did not. For the 4% that stated “Other”, comments included:

Settled on Barrister’s advice.

I felt legally blackmailed that I should accept the offer otherwise it could be reduced.

Most respondents (66%) felt the settlement was fair, with 21% reporting that it was unfair. A further 13% stated “Other”, and this included the following comments

Hard to argue when you have no idea what value to expect. Impossible to put a value on your life.

Money seemed very unimportant at the time but on reflection took at least one worry away.

My husband was close to death when the insurers agreed a sum. More would have had to be paid if I'd waited until [name removed] died. The claim had been reduced by £20,000 but we didn't want to appeal. I was keen to settle while [name removed] was alive to give him peace of mind. That was worth any sum of money.

The amount was fair but it was too late for my partner to benefit from it.

We would have been given a larger sum of compensation if we had gone to court but I didn't want to put my husband through such an ordeal. We were happy with the settlement we received.

Time taken to settle the claim

For respondents that settled a claim, the time from when the solicitor was first contracted until the settlement amount was agreed was up to six months for 21% of claimants, 7-12 months for 30%, 1-2 years for 30% and more than 2 years for 18%.

One respondent stated that the time taken was 4 years and another 6 years.

At the point the settlement amount was agreed, 21% of respondents were deeply distressed about the experience, 22% were unhappy, 49% were satisfied and 8% happy.

When asked to explain more about how they felt, the following comments were given:

Claim was delayed several times due to appeals from insurers. Solicitor kept us informed but felt distressed at delays thinking there was no end to things.

For me, the settlement ran smoothly.

I felt at the time I was chasing the solicitor. When the solicitor felt he could win the claim it moved quickly.

Money gave us security, that is all my husband wanted for me. It does nothing to help the pain and torture my husband suffered. It is a very cruel disease.

My husband sadly died before settlement was agreed. The claim then became mine. It was a very distressing time, having nursed my husband for 6 months and him never knowing the outcome.

Process took place during chemo and caused additional stress when my husband was feeling very ill. Also took time and effort when he was feeling better and trying to make most of the time left.

Solicitor very helpful but we were thwarted at every turn by uncooperative attitude of insurance companies.

Too much hassle for someone who is already too ill.

The time taken from when payment was agreed until the payment was actually made was under 1 month for 37% of claimants, 1-2 months for 28%, 3-6 months for 13%, 6-12 months for 4% and over a year for 4%. 8% were still waiting at the time of completing this survey.

At the time the payment was actually paid, 20% of respondents were deeply distressed about the experience, 20% were unhappy, 51% were satisfied, 8% happy and 1% delighted. Comments to support this were as follows:

After nearly 3 years I was just pleased it was over because I felt I could finally try and get on with my life. Easier said than done. The money means nothing to me.

Felt insurance company were not taking responsibility and trying to dodge paying the claim, even after employer admitted liability in exposing person to asbestos which killed them.

It was a very stressful time trying to cope with the disease and treatment and all the information was required

It was over 3 years before a settlement was made.

Not happened yet but feel I cannot move on and grieve properly as still on-going. It is almost a year since my husband died, over a year since the case started. Although they admitted liability which was a relief, I expected it to be over before now. I want to be left alone to grieve.

Satisfied because my husband received his compensation before he died.

Very unhappy that payment was deferred because of tactics of insurance company. We had definite proof of where and how my husband contracted this awful painful disease.

You are going through enough trauma with the illness. You can do without this struggle to get justice.

Interim payments

Almost half of those making a successful claim (48%) received an interim payment. The interim payment was made within 21 days of starting a claim for 19% of claimants, made when the case went before a judge or master in court for 23% of claimants and at some other time for 46%.

Respondents unable to make a claim

For those respondents unable to make a claim, for 29% it was because of lack of evidence, 8% due to not being able to trace an employer and 5% due to being unable to trace an insurer. For 13% it wasn't worth proceeding, for a variety of reasons, including:

Coroner's verdict natural causes. Solicitor dropped the case.

Exposure unknown.

My father was only 100% sure of the employer that could not be traced and would not proceed with the other employer on moral grounds

No positive way of knowing where asbestos was.

Not able to clarify where mesothelioma was contacted.

Over 2 years had elapsed from my brother's death and the first solicitor lost the file!!

Solicitors withdrew, due to...denial [by the employers].

They denied use of asbestos.

Unable to find source that offered reasonable chance of success.

An additional 13% gave another reason for not proceeding with a claim, including:

First solicitor didn't pursue claim because of insurer; [second solicitor] did but still couldn't find public liability insurance

Original employer had changed hands and they claimed they weren't responsible.

They couldn't locate a "paymaster". Also because my Dad's exposure was only for 6 months, they claimed that this wasn't long enough to be significant.

Improvements to the claims process

46% of respondents that made a claim felt that no changes were necessary to the claims process.

Respondents that settled out of court were less likely to feel improvements to the claims process were required, with 55% feeling that no changes were required to the claims process. For those that went to court and were awarded compensation, 39% felt that no changes were required.

Of the 54% of total respondents who suggested improvements were required, the main area for improvement was that the speed of the claims process needed to be improved.

Areas suggested for improvement included:

A much more rapid conclusion, compensation should be within the claimant's life time if at all possible.

A quicker claims process

A regional specialist to help the patient before solicitor contacts at time of diagnosis to explain what's involved.

A time limit set on insurance companies to reach a reasonable settlement.

Apart from immediate family, how does the death of a son/daughter affect elderly parents and siblings, who also may become homeless without their help?

At a time when the family were trying to come to terms with the prognosis, it was cruel having to continuously provide evidence of contact with asbestos and it became worse as the cancer progressed and my husband was too ill to deal with this.

Medical Care

5% of all respondents had privately funded care.

Of those that didn't have private care, 71% did not want or need it, 14% were unable to fund it and 16% had other reasons, including: there was not enough time to consider private cover, private cover was never mentioned or offered, it was against their principles or that sufficient care was provided.

8 Information and support

Sources of support

The main sources of **support** for all respondents were the lung nurse (14%) and the local patient support group (12%), although 12% didn't feel they had any support:

Who would you consider your main source of support?	Number of respondents	%
Other	40	26
My lung nurse	22	14
My local patient support group	19	12
I didn't feel I had any support	19	12
My GP	12	8
My hospital doctor	10	6
Other patients/carers	8	5
Social networking	7	5
My solicitor	7	5
A friend	6	4
Health Charity	5	3
Total	155	100

Not answered: 85

Table includes all respondents

Included under "Other", were family members, MacMillan Nurses, District Nurses and Hospice staff.

Sources of health information

The biggest source of **health information** for respondents was the hospital doctor (28%) and the lung nurse (19%):

Who would you consider your main source of health information?	Number of respondents	%
My hospital doctor	46	28
My lung nurse	31	19
Other	21	13

My GP	15	9
My local patient support group	14	9
Social networking	10	6
I haven't received or looked for information	8	5
Other patients/carers	6	4
Health Charity	6	4
A friend	3	2
My solicitor	3	2
Total	163	100

Not answered: 77

Table includes all respondents

Again, included under "Other", were family members, MacMillan Nurses, District Nurses and Hospice staff.

9 Research and disease prevention

Need for research funding

The main area identified as being absolutely essential for improvement was research into new treatments and cures (94% of respondents). This was ahead of the need for improvement in the diagnosis process (69%), in health care support (58%), in the legal claims process (47%), and in the benefits system (41%).

When asked what single thing could make the biggest difference to people living with mesothelioma, for 77% it was continued research to find a cure, compared to 12% more specialist care, 5% more support, and 6% other.

Responsibility for research funding

The majority of respondents (70%) feel that the government is ultimately responsible for funding research into mesothelioma, with 15% believing the insurance industry to be responsible, 7% charities and 8% other. Suggestions under “other” included combinations of the above groups and manufacturers and users of asbestos.

Asbestos-awareness campaigns

Almost all respondents (99%) felt that there is a need for further campaigns in warning the public about the risk posed by asbestos.

The rating of existing campaigns in warning the public about the risk posed by asbestos is that they are very bad (32%), bad (27%) or average (32%). 10% of respondents rated them as good or very good. It was not recorded which particular campaigns respondents were referring to, and whether they sat within the target audience for those campaigns.

References

1. Health and Safety Executive, Mesothelioma mortality in Great Britain 1968-2010, 2012 <http://www.hse.gov.uk/statistics/causdis/mesothelioma/mesothelioma.pdf>
2. Health and Safety Executive, data on file 2013
3. National Cancer Research Institute, data on file 2013
4. Cancer Research UK website <http://www.cancerresearchuk.org/cancer-info/cancerstats/mortality/cancerdeaths/> (last accessed August 2013)
5. National Cancer Research Institute data package 2012. http://www.ncri.org.uk/includes/Publications/general/Data_package_12.xls
6. Medical Research Council, data on file 2013
7. Hansard, House of Lords: 17 July 2013, column 751. <http://www.publications.parliament.uk/pa/ld201314/ldhansrd/text/130717-0001.htm>
8. British Lung Foundation survey conducted by TNS. 2043 adults aged 16-64. March 2012

Appendix 1- Full tables of survey responses

Q1 Do you have mesothelioma?

		Frequency	Percent
Valid	Yes	31	13.2
	No, I am the carer/family member of the person with mesothelioma	15	6.4
	No, I am the bereaved carer/family member of the person with mesothelioma	188	80.3
	Total	234	100.0
Other	Not answered	6	
Total		240	

Q2 What is the gender of the person with mesothelioma?

		Frequency	Percent
Valid	Male	192	82.1
	Female	42	17.9
	Total	234	100.0
Other	Not answered	6	
Total		240	

Q3 What is/was the occupation of the person with mesothelioma?

	Frequency	Percent
Valid A Plumber/pipe fitter	18	8.4
A Plasterer	2	.9
A General builder	8	3.7
Worked in shipyard	19	8.9
A Lagger	2	.9
A Boiler maker	1	.5
An Electrician	32	15.0
A Joiner	12	5.6
A Carpenter	7	3.3
A Motor mechanic	5	2.3
Armed services	3	1.4
Teacher	7	3.3
Health Care worker	3	1.4
Power station worker	4	1.9
Other	91	42.5
Total	214	100.0
Other Not answered	26	
Total	240	

Q5 What was the age of the mesothelioma patient at diagnosis?

		Frequency	Valid Percent
Valid	26-35	1	.4
	36-50	23	9.8
	51-65	117	49.8
	66-70	46	19.6
	71-75	35	14.9
	76-80	10	4.3
	81-85	2	.9
	86+	1	.4
	Total	235	100.0
Other	Not answered	5	
Total		240	

Q6 How long ago was the mesothelioma diagnosed?

		Frequency	Valid Percent
Valid	In the last 6 months	13	5.6
	In the last 6 to 12 months	13	5.6
	More than 1 year ago	23	9.9
	More than 2 years ago	25	10.8
	More than 3 years ago	158	68.1
	Total	232	100.0
Other	Not answered	8	
Total		240	

Q7 How long did it take for the mesothelioma to be diagnosed from the first appearance of symptoms?

		Frequency	Valid Percent
Valid	0-6 months	151	65.4
	7-12 months	43	18.6
	1-2 years	20	8.7
	More than 2 years	17	7.4
	Total	231	100.0
Other	Don't know	1	
	Not answered	8	
	Total	9	
Total		240	

Q8 Who confirmed the mesothelioma diagnosis?

		Frequency	Valid Percent
Valid	A hospital doctor	217	94.8
	A hospital nurse	1	.4
	A GP (family doctor)	5	2.2
	Someone else	6	2.6
	Total	229	100.0
Other	Don't know	1	
	Not answered	10	
	Total	11	
Total		240	

Q9 Was a biopsy done to confirm diagnosis?

		Frequency	Valid Percent
Valid	Yes	213	91.0
	No	9	3.8
	Don't know	5	2.1
	Other	7	3.0
	Total	234	100.0
Other	Not answered	6	
Total		240	

Q10 Was the diagnosis confirmed and documented?

		Frequency	Valid Percent
Valid	Yes, we received a letter	14	6.1
	Yes, we were told face to face	169	73.8
	Yes, we were told face to face and received a letter	35	15.3
	It was never officially confirmed	1	.4
	Don't know	3	1.3
	Other	7	3.1
	Total	229	100.0
Other	Not answered	11	
Total		240	

Q11 Did someone help to identify where asbestos exposure may have occurred?

	Frequency	Valid Percent
Valid		
We already knew	120	43.8
Yes, a doctor or nurse	24	8.8
Yes, by asbestos support group	16	5.8
Yes, by a solicitor	82	29.9
Yes, by someone else	14	5.1
No help was given	18	6.6
Total	274	100.0

(Tick all that apply question)

Q12 Do you know how the asbestos exposure occurred?

	Frequency	Valid Percent
Valid		
Yes, through occupation	182	77.8
Yes, through the environment	3	1.3
Yes, through a family members occupation	20	8.5
No, don't know	24	10.3
Other	5	2.1
Total	234	100.0
Other		
Not answered	6	
Total	240	

Q13 Does/did the patient claim benefits?

	Frequency	Valid Percent
Valid Yes	194	86.2
No	31	13.8
Total	225	100.0
Other Not answered	15	
Total	240	

Q14 Was any help provided from any of the following in making the application for the payment?

	Frequency	Valid Percent
Valid Health professional	54	33.8
Local asbestos support group	37	23.1
Health charity	6	3.8
Legal firm	29	18.1
Friend	10	6.3
Didn't receive help	18	11.3
Other	6	3.8
Total	160	100.0
Other Not Applicable	31	
Not answered	49	
Total	80	
Total	240	

Q15 What was the quality of the help received?

		Frequency	Valid Percent
Valid	Excellent	111	57.5
	Good	56	29.0
	Average	14	7.3
	Poor	9	4.7
	Terrible	3	1.6
	Total	193	100.0
Other	Not Applicable	31	
	Not answered	16	
	Total	47	
Total		240	

Q16 Would the application have been made without such help?

		Frequency	Valid Percent
Valid	Yes	67	34.5
	No	67	34.5
	Don't know	54	27.8
	Other	6	3.1
	Total	194	100.0
Other	Not Applicable	31	
	Not answered	15	
	Total	46	
Total		240	

Q17 If benefits were not claimed, why was this?

		Frequency	Valid Percent
Valid	Financially stable/did not need the money	2	6.7
	Unaware of eligibility to claim benefits	10	33.3
	Didn't understand the process	1	3.3
	Not someone who would normally claim benefits from the government	6	20.0
	Expected larger award from employer/insurer if I had not previously claimed benefits	1	3.3
	Compensation from the employer/insurer expected quickly and so did not need benefits in the meantime	1	3.3
	Was not eligible	3	10.0
	Other	6	20.0
	Total	30	100.0
Other	Not Applicable	31	
	Not answered	179	
	Total	210	
Total		240	

Q18 Was a legal claim for compensation made for the asbestos exposure?

		Frequency	Valid Percent
Valid	Yes, in the process of making a claim now	57	24.9
	Yes, made a claim in the past	148	64.6
	No	24	10.5
	Total	229	100.0
Other	Not answered	11	
Total		240	

Q19 Who first suggested it might be possible to make a claim for compensation?

	Frequency	Valid Percent
Valid The GP	5	3
The hospital doctor	57	29
The lung nurse	50	26
Local support group	28	14
Health charity	2	1
An internet search	6	3
Trade Union	15	8
We were contacted by a legal firm	7	4
Other	25	13
Total	195	100.0
Other Not applicable	24	
Not answered	21	
Total	45	
Total	240	

Q20 Who helped find details of a solicitor to contact?

		Frequency	Valid Percent
Valid	GP	2	1.0
	Hospital doctor	16	8.4
	Lung nurse	40	20.9
	Local support group	50	26.2
	Health charity	1	.5
	An internet search	10	5.2
	Trade Union	27	14.1
	We were contacted by a legal firm	2	1.0
	Other	43	22.5
	Total	191	100.0
Other	Don't know	9	
	Not applicable	24	
	Not answered	16	
	Total	49	
Total		240	

Q21 How long after diagnosis was contact made with a solicitor?

		Frequency	Valid Percent
Valid	Immediately	98	47.8
	Up to 3 months	61	29.8
	4-6 months	23	11.2
	7-12 months	10	4.9
	1-2 years	9	4.4
	More than 2 years	4	2.0
	Total	205	100.0
Other	Don't know	6	
	Not applicable	24	
	Not answered	5	
	Total	35	
Total		240	

Q22 Was the solicitor a mesothelioma specialist?

		Frequency	Valid Percent
Valid	Yes	172	83.1
	No	11	5.3
	Don't know	24	11.6
	Total	207	100.0
Other	Not applicable	24	
	Not answered	9	
	Total	33	
Total		240	

Q25 On how many occasions were you asked to provide information to the solicitor?

		Frequency	Valid Percent
Valid	Just once	29	14.0
	2-3	40	19.3
	4-6	42	20.3
	7 or more	60	29.0
	Don't know	27	13.0
	Other	9	4.3
	Total	207	100.0
Other	Not applicable	24	
	Not answered	9	
	Total	33	
Total		240	

Q26 How regularly was information about the claim communicated from the solicitor?

		Frequency	Valid Percent
Valid	Weekly	14	7.0
	Fortnightly	21	10.5
	Monthly	42	21.0
	Every 1-3 months	43	21.5
	Irregularly	31	15.5
	Solicitor had to be chased to get information	9	4.5
	Don't know	24	12.0
	Other	16	8.0
	Total	200	100.0
Other	Not applicable	24	
	Not answered	16	
	Total	40	
Total		240	

Q27 What information was requested by the solicitor?

	Frequency	Valid Percent
Witness statement	116	17
Employment history	180	26
Pay slips	70	10
Proof of diagnosis	146	21
Information on care and dependants	108	15
Receipts for equipment, house repairs and maintenance undertaken	70	10
Other	8	1
Total	698	100

(Tick all that apply question)

Q28 Did the solicitor visit the claimant's home at any point during the claim process?

	Frequency	Valid Percent
Valid Yes	160	76.9
No	39	18.8
Don't know	9	4.3
Total	208	100.0
Other Not applicable	24	
Not answered	8	
Total	32	
Total	240	

Q29 How long did it take the solicitor to formally start the claim? (i.e. send the letter of claim to the other party)

	Frequency	Valid Percent
Valid Immediately	91	45.0
Up to 3 months	46	22.8
4-6 months	16	7.9
7-12 months	3	1.5
More than one year	5	2.5
Don't know	41	20.3
Total	202	100.0
Other Not applicable	24	
Not answered	14	
Total	38	
Total	240	

Q30 Did the solicitor start court proceedings?

		Frequency	Valid Percent
Valid	Yes	103	51.0
	No	67	33.2
	Don't know	32	15.8
	Total	202	100.0
Other	Not applicable	24	
	Not answered	14	
	Total	38	
Total		240	

Q31 If the solicitor started court proceedings, what was the venue for the claim?

		Frequency	Valid Percent
Valid	Royal Courts of Justice - Mesothelioma Fast Track	30	29.1
	Local High Court	12	11.7
	Local County Court	7	6.8
	Don't know	45	43.7
	Other	9	8.7
	Total	103	100.0
Other	Not applicable	123	
	Not answered	14	
	Total	137	
Total		240	

Q32 Have there been any delays in your claims process?

	Frequency	Valid Percent
Valid Yes, missing paperwork	3	1.7
Yes, problems tracing employer/s	23	12.8
Yes, employer/Insurer did not accept that I was employed by them	1	.6
Yes, employer/Insurer did not accept that I was exposed to asbestos by them or at all	4	2.2
Yes, employer/Insurer requested further documentation	7	3.9
Yes, employer/Insurer did not accept responsibility	4	2.2
Yes, employer/Insurer did not accept liability for the claim until Court proceedings were started	12	6.7
No, there were no delays	90	50.0
Other	36	20.0
Total	180	100.0
Other Not applicable	24	
Not answered	36	
Total	60	
Total	240	

Q33 What was the outcome of the claims process?

		Frequency	Valid Percent
Valid	Settled out of court	133	65.8
	Went to court and was awarded compensation	17	8.4
	Unable to proceed with claim	16	7.9
	Still in process of making claim	29	14.4
	Other	7	3.5
	Total	202	100.0
Other	Not applicable	24	
	Not answered	14	
	Total	38	
Total		240	

Q34 If your claim went to trial at court, how did you feel?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	We were glad we went to court	11	4.6	73.3	73.3
	We were not happy to go to court	4	1.7	26.7	100.0
	Total	15	6.3	100.0	
Missing	Other	8	3.3		
	Not applicable	24	10.0		
	Not answered	193	80.4		
	Total	225	93.8		
Total		240	100.0		

Q35 If the claim was settled out of court, was there any pressure to do so?

		Frequency	Valid Percent
Valid	Yes	16	11.8
	No	103	75.7
	Don't know	12	8.8
	Other	5	3.7
	Total	136	100.0
Other	Not Applicable	24	
	Not answered	80	
	Total	104	
Total		240	

Q36 If the claim settled out of court, did it feel like a fair settlement?

		Frequency	Valid Percent
Valid	Yes	88	65.7
	No	28	20.9
	Other	18	13.4
	Total	134	100.0
Other	Not applicable	24	
	Not answered	82	
	Total	106	
Total		240	

Q37 If the claim was successful, how long did it take from the time the solicitor was contacted to the time the settlement amount was agreed?

	Frequency	Valid Percent
Valid Up to 6 months	28	20.7
7-12 months	41	30.4
1-2 years	41	30.4
More than 2 years	25	18.5
Total	135	100.0
Other Not yet complete	7	
Don't know	12	
Other	4	
Not applicable	24	
Not answered	58	
Total	105	
Total	240	

Q38 At the point the settlement amount was agreed, how did you feel about the time it took to get to that point?

		Frequency	Valid Percent
Valid	Deeply distressed	34	21.5
	Unhappy	35	22.2
	Satisfied	77	48.7
	Happy	12	7.6
	Total	158	100.0
Other	Not applicable	24	
	System	58	
	Total	82	
Total		240	

Q39 How long did it take from the time payment was agreed to actually be paid the claim?

		Frequency	Valid Percent
Valid	One month	50	37.3
	Two months	38	28.4
	3-6 months	17	12.7
	6-12 months	5	3.7
	Over 1 year	5	3.7
	Still waiting	11	8.2
	Other	8	6.0
	Total	134	100.0
Other	Don't know	18	
	System	88	
	Total	106	
Total		240	

Q40 At the point the payment was actually paid, how did you feel about the time it took to get to that point?

	Frequency	Valid Percent
Valid Deeply distressed	31	20.1
Unhappy	30	19.5
Satisfied	79	51.3
Happy	12	7.8
Delighted	2	1.3
Total	154	100.0
Other Not applicable	24	
System	62	
Total	86	
Total	240	

Q41 Was an interim payment from the responsible employer or insurer provided?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	57	23.8	48.3	48.3
	No	61	25.4	51.7	100.0
	Total	118	49.2	100.0	
Missing	Don't know	36	15.0		
	Not applicable	24	10.0		
	Not answered	62	25.8		
	Total	122	50.8		
Total		240	100.0		

Q42 Do you know when this payment was made?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Within about 21 days of starting a claim	8	3.3	18.6	18.6
	When the case went before a Judge or Master in Court	10	4.2	23.3	41.9
	At some other time	20	8.3	46.5	88.4
	Other	5	2.1	11.6	100.0
	Total	43	17.9	100.0	
Missing	Don't know	58	24.2		
	Not applicable	24	10.0		
	Not answered	115	47.9		
	Total	197	82.1		
Total		240	100.0		

Q43 If unable to proceed with a claim, what reason was given for this?

	Frequency	Valid Percent
Valid Not enough evidence	11	28.9
Unable to trace employer	3	7.9
Unable to trace insurer	2	5.3
Don't know	12	31.6
It wasn't worth proceeding	5	13.2
Other	5	13.2
Total	38	100.0
Other Not applicable	24	
Not answered	178	
Total	202	
Total	240	

Q44 From your experience, what would you suggest the most important improvements to the mesothelioma claims process could be?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No changes necessary, I was very happy with it	75	31.3	45.7	45.7
	I would suggest the following:	89	37.1	54.3	100.0
	Total	164	68.3	100.0	
Missing	Not applicable	22	9.2		
	Not answered	54	22.5		
	Total	76	31.7		
Total		240	100.0		

Q45 Did you have any privately funded care (e.g. care at home that you had to pay for yourself)?

	Frequency	Valid Percent
Valid Yes	11	5.2
No	202	94.8
Total	213	100.0
Other Don't know	1	
Not answered	26	
Total	27	
Total	240	

Q46 If you did not have any privately funded care, was this because:

	Frequency	Valid Percent
Valid We didn't need it/want it	135	70.7
We were unable to pay for it	26	13.6
Other	30	15.7
Total	191	100.0
Other Not answered	49	
Total	240	

Q47 Who would you consider your main source of support?

	Frequency	Valid Percent
Valid My local patient support group	19	12
My GP	12	8
My hospital doctor	10	6
My lung nurse	22	14
Other patients/carers	8	5
Social networking	7	5
A friend	6	4
My solicitor	7	5
Health Charity	5	3
I didn't feel I had any support	19	12
Other	40	26
Total	155	100.0
Other Not answered	85	
Total	240	

Q48 Who would you consider your main source of health information?

	Frequency	Valid Percent
Valid My local patient support group	14	8.6
My GP	15	9.2
My hospital doctor	46	28.2
My lung nurse	31	19.0
Other patients/carers	6	3.7
Social networking	10	6.1
A friend	3	1.8
My solicitor	3	1.8
Health Charity	6	3.7
I haven't received or looked for information	8	4.9
Other	21	12.9
Total	163	100.0
Other Not answered	77	
Total	240	

Q49 Who do you believe is ultimately responsible for funding research into mesothelioma?

		Frequency	Valid Percent
Valid	I believe the Government is responsible	147	69.7
	I believe the Insurance industry is responsible	32	15.2
	I believe health charities are responsible	14	6.6
	Other	18	8.5
	Total	211	100.0
Other	Not answered	29	
Total		240	

Q50 Do you feel there is a need for further campaigns in warning the public about the risk posed by asbestos?

		Frequency	Valid Percent
Valid	Yes	232	98.7
	No	3	1.3
	Total	235	100.0
Other	Don't know	1	
	Not answered	4	
	Total	5	
Total		240	

Q51 How would you rate the effectiveness of the existing campaigns in warning the public about the risks posed by asbestos?

		Frequency	Valid Percent
Valid	Very bad	74	31.6
	Bad	63	26.9
	Average	74	31.6
	Good	20	8.5
	Very good	3	1.3
	Total	234	100.0
Other	Not answered	5	
	System	1	
	Total	6	
Total		240	

Q52 From your experience, how important do you rate the need for improvement in the benefits system?

		Frequency	Valid Percent
Valid	Absolutely essential	93	41.2
	Great need	36	15.9
	Important	74	32.7
	Not as important	17	7.5
	Unimportant	6	2.7
	Total	226	100.0
Other	Not answered	14	
Total		240	

Q53 From your experience, how important do you rate the need for

improvement in research into new treatments and cures?

		Frequency	Valid Percent
Valid	Absolutely essential	216	93.5
	Great need	7	3.0
	Important	6	2.6
	Unimportant	2	.9
	Total	231	100.0
Other	Not answered	9	
Total		240	

Q54 From your experience, how important do you rate the need for improvement in the legal claims process?

		Frequency	Valid Percent
Valid	Absolutely essential	107	46.7
	Great need	37	16.2
	Important	69	30.1
	Not as important	14	6.1
	Unimportant	2	.9
	Total	229	100.0
Other	Not answered	11	
Total		240	

Q55 From your experience, how important do you rate the need for improvement in health care support?

		Frequency	Valid Percent
Valid	Absolutely essential	134	57.8
	Great need	38	16.4
	Important	51	22.0
	Not as important	7	3.0
	Unimportant	2	.9
	Total	232	100.0
Other	Not answered	8	
Total		240	

Q56 From your experience, how important do you rate the need for improvement in the diagnosis process?

		Frequency	Valid Percent
Valid	Absolutely essential	160	68.7
	Great need	32	13.7
	Important	37	15.9
	Not as important	1	.4
	Unimportant	3	1.3
	Total	233	100.0
Other	Not answered	7	
Total		240	

Q57 What single thing do you believe could make the biggest difference to people living with mesothelioma?

	Frequency	Valid Percent
Valid Continued research to find a cure	151	76.6
More support	9	4.6
More information	2	1.0
More nurses	1	.5
More specialist care	23	11.7
Other	11	5.6
Total	197	100.0
Other Not answered	43	
Total	240	

Appendix 2 - Qualitative comments made by respondents

Q36 If the claim settled out of court, did it feel like a fair settlement?

But felt like blood money. Nothing or no amount of money would make the pain of losing my husband any easier to bear.

Deceased partner felt it was unfair.

Hard to argue when you have no idea what value to expect. Impossible to put a value on your life. Money seemed very unimportant at the time but on reflection took at least one worry away.

Money is never compensation for loss of life.

My husband was close to death when the insurers agreed a sum. More would have had to be paid if I'd waited until [name removed] died. The claim had been reduced by £20,000 but we didn't want to appeal. I was keen to settle while [name removed] was alive to give him peace of mind. That was worth any sum of money.

No amount of money is fair. My brother was only 54 years. It should not have happened.

No, but only because a life had been taken, and it seemed a small amount to attribute to a life, although any amount would have seemed trivial.

Not initially. Refused first offer. Second offer better but still would have made more money if I hadn't got condition and worked to retirement age as planned

Not really two people in my family had died because of the defendant's negligence.

Not sure really. Solicitor said it was fair and might not have got amount if went to court. Can you put a price on a life?

Nothing compensates for my husband.

Nothing is ever enough for a life

Nothing would seem like a "fair settlement": my husband died.

The amount was fair but it was too late for my partner to benefit from it.

We would have been given a larger sum of compensation if we had gone to court but I didn't want to put my husband through such an ordeal. We were happy with the settlement we received.

What price compensates a human life!

Q38 At the point the settlement amount was agreed, how did you feel about the time it took to get to that point:

At first I was not going to claim and then I thought of my family and the years I would lose with them.

Because it was too late for my partner to benefit from it.

Because of uncertainty of the outcome of the Fairchild case, my husband died before his claim was settled, not knowing if his family would be able to survive financially.

But disappointed at the value of life.

But took a long time as a lot of work was involved.

But unfortunately, the claimant died before the case was settled.

Claim was delayed several times due to appeals from insurers. Solicitor kept us informed but felt distressed at delays thinking there was no end to things.

Company would still not accept liability.

Distraught, cheated and angry that it took over three years to finalise and that my husband's life was worth so little. After nearly three years of forever providing information there had previously been a test case in London whereby everything was on hold and there was a strong possibility that after three years of hell that the case would be cancelled, I felt overwhelmed with stress.

Firm didn't take part and had no claim in it, as they said I had not been exposed, but I had.

For me, the settlement ran smoothly.

Given the claim was on the basis of probability, I was very satisfied with the settlement.

I felt at the time I was chasing the solicitor. When the solicitor felt he could win the claim it moved quickly.

It was distressing going over the diagnosis, treatments and researching, it was a constant reminder of what had happened to my husband. Even though the solicitor was fantastic.

I was more than happy with [the solicitor]. The delay was by the other side. My wife had died when it was settled.

If we had left the case open, we would have had a lot more than we did.

Insurance company refused to pay until the trigger liability issue was settled via High Court, Court of Appeal and Supreme Court.

It felt to me like a consolation for something that, in the end, was going to kill my father.

It was a fair amount but it would never bring my husband back

It was obvious to all concerned that the employer was not cooperating.

Money gave us security that is all my husband wanted for me. It does nothing to help the pain and torture my husband suffered. It is a very cruel disease.

My husband died before the claim was settled.

My husband had signed several statements whenever small changes were made. We thought it would have been easier to get all the information together first. My husband was tempted to drop the claim as it took so long.

My husband sadly died before settlement was agreed. The claim then became mine. It was a very distressing time, having nursed my husband for 6 months and him never knowing the outcome.

My husband was no longer alive and died without knowing the outcome of the claim.

My husband was relieved when the legal process finished. The solicitors were very good but he did not like being reminded how ill he was.

My husband was very ill before settlement was reached and only had weeks left of life.

No amount of money would compensate for my otherwise very healthy father being diagnosed with this awful disease that he contracted from working many years before in the docks. He had a photo of himself covered in asbestos and although the MOD could not argue I think the time until settlement was appalling.

Process took place during chemo and caused additional stress when my husband was feeling very ill. Also took time and effort when he was feeling better and trying to make most of the time left.

Relieved that my son's boys (then 7 and 9) would have some security.

Seemed my husband was just a number to his former employers.

Solicitor very helpful but we were thwarted at every turn by uncooperative attitude of insurance companies.

The claim was started while my husband was alive, settlement was received 18 months after his death.

The money did not seem important compared to his illness.

To me, it was blood money. I did not want to claim. No money would bring my husband back and he was only 52 years old. He only worked with asbestos for 3 months and lost his life.

Told to take offer, i.e. If went to court could lose out.

Too much hassle for someone who is already too ill.

Very hard to grieve when you have to relive all the details of mesothelioma and caring for a loved one suffering in pain and visiting solicitors giving details.

Work partner was pursuing a claim so all information was on hand. This took shorter time. He was also successful.

Q39 How long did it take from the time payment was agreed to actually be paid the claim?

After nearly 3 years I was just pleased it was over because I felt I could finally try and get on with my life. Easier said than done. The money means nothing to me.

All the time my husband was ill, it was unhappy and difficult and a distressing time.

Because a successful claim had been reached when we were originally told we didn't have a good chance because it would be difficult to prove the source.

Can never try to get on with life. Always hanging over you.

Felt insurance company were not taking responsibility and trying to dodge paying the claim, even after employer admitted liability in exposing person to asbestos which killed them.

Felt that it had been completed quickly.

For me, it wasn't about the money. We were ok. It was about getting justice for my husband and brother. I was numb, not elated. How can you feel happy at the loss of loved ones? I didn't touch the money for 2 years.

How can you put a price on someone's life? I would rather have nothing and live in a field just to be with my husband, but now I think he's still looking after me.

I almost gave up, as it had taken so much time and my husband had already died. I just wanted an end to the process.

I was very impressed with [solicitor]. I could not fault them.

It felt to me like a consolation for something that, in the end, was going to kill my father.

It was a distressing time dealing with the grief, and it was 'strange' money.

It was a very stressful time trying to cope with the disease and treatment and all the information was required

It was over 3 years before a settlement was made.

It was so quick I couldn't believe it was over.

It wasn't as important as having the justice done.

Money doesn't replace life.

My deceased partner felt he shouldn't ever have been in a position to have to make a claim because he should never have been diagnosed with mesothelioma through exposure at work.

My Granddad was happy to be able to have the money to pass to family. As his carer, no amount of money was worth his life.

My husband died before the claim came through as the court case had to be changed to myself his wife to start proceedings afresh

My husband managed to get benefits of chairlift, scooter, special chair, holiday, etc. to make life as comfortable as possible.

My partner had died before the settlement was paid.

No public liability insurance, solicitor has tried everything possible. My family are never going to receive this money

Not happened yet but feel I cannot move on and grieve properly as still on-going. It is almost a year since my husband died, over a year since the case started. Although they admitted liability, which was a relief, I expected it to be over before now. I want to be left alone to grieve.

Once discussed and agreed with solicitor, payment was made very quickly.

Patient did apprenticeship as a plumber with local firm that went bankrupt. On submarine after that as a mechanical engineer, working with asbestos on both jobs.

Relieved and very thankful.

Relieved it was finally over but thankful that my husband who lived only 13 weeks after diagnosis didn't see how little his life was valued. I feel very bitter about it all.

Satisfied because my husband received his compensation before he died.

Some relief, but serious health issues deeply distressing.

This was finally paid 2 weeks before my husband died.

Time and amount were irrelevant.

Told to take offer, i.e. If went to court could lose out.

Very unhappy that payment was deferred because of tactics of insurance co. We had definite proof of where and how my husband contracted this awful painful disease.

We wanted the claim to be dealt with quickly so as to avoid the distress of prolonged action

We were satisfied, although the amount was nothing compared to the death sentence my husband had received.

Worst time to be fighting for compensation

You are going through enough trauma with the illness. You can do without this struggle to get justice.

Q44 From your experience, what would you suggest the most important improvements to the mesothelioma claims process could be?

A much more rapid conclusion, compensation should be within the claimant's life time if at all possible.

A quicker claims process

A regional specialist to help the patient before solicitor contacts at time of diagnosis to explain what's involved.

A time limit set on insurance companies to reach a reasonable settlement.

Apart from immediate family, how does the death of a son/daughter affect elderly parents and siblings, who also may become homeless without their help?

At a time when the family were trying to come to terms with the prognosis, it was cruel having to continuously provide evidence of contact with asbestos and it became worse as the cancer progressed and my husband was too ill to deal with this.

Be put in touch with a specialist charity. Mick Knighton Fund were great.

Better information and help contacts.

Claimants need settlement immediately diagnosis is confirmed.

Claims to be settled more quickly.

[Solicitors] were sensitive and efficient when helping my mum. An amazing team, thank you.

Empathy and compassion from the solicitor acting for the claimant.

Everything made easier and quicker.

Faster process

Faster settlements.

Fast-track help from a solicitor with proven success with tracking mesothelioma illness.

Felt claim process was very good our only point is delay from insurers in payment

For a speedy process, rather than the case to go on over years which has the most adverse effect on the bereaved family.

For employers who have been proved negligible to be unable to fight it.

For the claim to be a lot quicker, especially when you are financially worse off.

I didn't think it worth pursuing at the time and when I did I found out there was a time limit on claiming, I wish I had known before starting. I should have been more prepared if going ahead for a claim

I understand/know that in the 11 years since my husband died, there have been changes for a good time, but insurers and government have created a lot of stress for sufferers and families.

I was asked to consent to having my life expectancy calculated by my doctor so compensation could be adjusted if it was lower than my deceased husband. Deeply distressing.

I was fortunately dealt with speedily and sympathetically. For others, process should be dealt with as quickly as possible.

I would like the system to improve.

If the solicitor can't find the employers as in my husband's case then where can the solicitor go from there? I don't know how much time they are allocating to my husband's case. There is no way that we can tell. It is disappointing that there seems to be no more that they can do. My husband died on the 14th April 2012 and I believe they have still very little information to go on.

If you have a proven case surely the outcome should not take so long.

I would like laws to change so I could chase the parent company of a dormant company [to increase the] chance of compensation

Improvement in the time it takes.

In my experience, it ran smoothly.

Information at diagnosis.

Insurers penalised for missing paperwork and a 12 month limit from start to finish.

It should be fast tracked as my claim lasted two years

It shouldn't take so long. It's such a difficult time in any case.

Kept informed.

Less paperwork. Phone calls etc. Maybe someone to take charge of it all.

Make it faster, too much dragging along. Think about the family and patient who are still very shell shocked and dealing with the diagnosis.

Make the process quicker and less stress for the patient and family. Insurers should be accountable for the damage they have done and not delay proceeding by trying to find delays to put in the way of paying out.

More communication with solicitor - it goes very quiet once the claim is going ahead, and with no communication you don't know what is going on, perhaps a monthly update.

More contact and insurer not playing games with our feelings. Just as we thought we were near end. Insurers wanted more info. Very distressing.

More face to face contact. My husband died 9 months after claim was settled. No one ever told us his illness was terminal. They said prognosis was good.

More help with finding a specialist solicitor

More information once diagnosed regarding claims and benefits procedure and more awareness of mesothelioma.

More speedy conclusion.

More thorough communication between all parties.

My dad didn't want to make a claim as he knew that it wouldn't change the outcome. However, I think he felt pressurised by the hospital into making a claim to highlight the issue of mesothelioma. It didn't change the outcome and the case dragged on for two years after his death before it was thrown out. This caused distress to my mum who kept being reminded of her loss. So possibly speed up the process so that sufferers may actually see the result before they die!

Not sure you can change in the hands of others. Maybe government could take some responsibility.

Not to take so long.

Once diagnosed, should be an interim payment to help with living with this dreadful cancer.

Once liability is accepted the process should have a time limit for completion.

One dedicated point of contact for all queries for the whole of the country be it, solicitors, benefits, medical etc. thereby relieving the stress of not knowing who to speak with and being passed from pillar to post

Paperwork seems to be duplicated. Some information was asked for towards the end of the claim would have appreciated being asked for this in the beginning when it was still fresh in my mind.

Should be made much quicker. My husband died 11.5 years ago. I understand that things have improved since then.

Should get a solicitor who is experienced in this field

Simplify it! Ability to access documents before starting formal claim like FOI request.

Solicitors take on the work, not expect the client to do groundwork for them.

Speed up the process so that those suffering with mesothelioma can benefit before they die.

Speed up the process. My brother only lived one year after receiving his claim and most of that time he was not well enough to use it for a holiday.

Speed.

SPEEDIER PROCESS IN ALL AREAS FROM START TO FINISH

Suggest it's an industrial disease and compensate sufferers for just being diagnosed with it.

That claims are processed as quickly as possible because the stress caused is unfair the sufferer and the family

That every mesothelioma victim is treated the same. Everyone contracts the disease from asbestos, which is an industrial carcinogen. It doesn't matter where it comes from.

That insurers are made to supply information about which companies they have insured in the past.

That the patient does not do the claim through a solicitor who is based a distance away.

That the victim could get the government payment before claim settled, then pay that back once claim settled. This way my husband would have seen some of his compensation.

The defendant can prevaricate and leave responses to the last minute so that the process is drawn out longer than necessary.

The DWP should offer more info. I was not aware of half of the benefits we were entitled to, i.e. disabled parking blue badge, motorability, etc. It's a maze!

The process should be faster. My mum didn't need the money, but others with mortgages, etc., would be struggling without the money. We had a wonderful solicitor who supported my mum throughout. More information should be out there.

The speed

The time to settlement takes too long, the defendant's insurers constantly delayed responding to letters so we had to continually chase. There should be more stringent time limits applied.

There should be a Government Scheme to pay mesothelioma victims compensation when they are still alive

They should be dealt with quickly by the courts and those being sued should be made to move quickly in these cases; my husband did not live to see the result of his case

Things had to improve greatly after my experience 1989-1992. We were isolated with an unhelpful GP (rude) and all doors remained shut.

This is not directly claims process, but public bodies, such as schools, need to keep and make available detailed records of asbestos use.

This questionnaire is based on my sister-in-law's experience with my brother, who died of mesothelioma in 1994. Things have improved greatly since then. I had a lot more support when my husband died in 2004.

Time between claim and payment is very slow. This should be easier to get.

Time in process. Less intimate intrusion.

To be resolved quicker.

To get diagnosis when out of breath after getting fluid in lungs three times.

To make sure that everybody who works with asbestos is covered by insurance by the companies involved.

Tracing insurance companies

Tracing insurers seems to be a big problem. Insurers should not be allowed to prolong the procedures

We were advised with a mesothelioma case it would be resolved quickly because it was terminal. That was not the case.

Where the exposure is unknown but diagnosis given, there should be a fund to help families receive the equivalent compensation to those able to claim against an employer.

Yes most definitely. It is so hard when you feel sick after someone's passed to have to deal with deadlines etc.



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