

MMI RESEARCH SYMPOSIUM

THE FOURTH MIND MATTERS INITIATIVE
RESEARCH SYMPOSIUM

SYMPOSIUM REPORT

10 OCTOBER 2023
BRIDGEWATER HALL, MANCHESTER



Introduction

The fourth Mind Matters Research Symposium brought together mental health researchers from across Europe to share their insights into a variety of areas of veterinary mental health. Topics spanned from moral injury, suicide and suicide prevention, and the impact of racism, to veterinary nurse and student veterinary nurse mental health, and workplace stressors for autistic veterinary professionals.

There was a total of 77 attendees, including a mix of academic researchers and veterinary professionals from a range of backgrounds. It was deliberately organised on World Mental Health Day, to demonstrate the MMI commitment to supporting the global movement around mental health and wellbeing.

This report, produced by the Royal College of Veterinary Surgeons' Mind Matters Initiative, provides an overview of the day and contains summaries of each of the presentations.

We know that those working in the veterinary professions are more at risk of developing mental ill health than the general population, so it is of vital importance that we do all we can to support people to the best of our ability, and research plays a critical role in this.

This is why events such as our Mind Matters Symposium are so essential, as they not only allow us to gain insights into research outputs, but also provide an opportunity for collaboration. It is fundamental that we use the knowledge gained from research projects to inform Mind Matters activities, to ensure we maximise the impact of the research. The application of research in practice ensures that no research intelligence is wasted.

We are all working towards the same collective goal and want to support the professions in the best way that we possibly can, and I feel honoured to be playing a central role in this as Chair of the Mind Matters Initiative.

We cannot hope to change the future alone and it was truly humbling to see the passion, commitment, and generosity demonstrated by all of our speakers and attendees throughout the course of the symposium. Thank you to everyone who came along, both researchers and delegates, and for sharing your research, thoughts, and ideas. The day would not have been possible without you and your contributions will help shape the future of veterinary mental health – the value of which cannot be underestimated.

Finally, many thanks to Rosie Allister for co-ordinating a brilliant programme and to both the Mind Matters and RCVS Communications teams for organising such an enlightening and constructive event.

Best wishes,



Dr Kate Richards
Chair, RCVS Mind Matters Initiative



“We are all working towards the same collective goal and want to support the professions in the best way that we possibly can.”

Plenary speaker

Evidence-based care for people who have self-harmed: risk prediction, psychosocial assessments, and aftercare



Dr Leah Quinlivan, Research Fellow and Chartered Psychologist, University of Manchester

Leah Quinlivan leads the self-harm research component and the patient involvement and engagement work in self-harm and suicide prevention in the National Institute of Health Research (NIHR) Greater Manchester Patient Safety Research Collaboration. She is also an expert content adviser for the NHS England and NHS Improvement funded programme to improve community-based services for self-harm.

Summary

Leah began her talk on evidence-based care for people who have self-harmed by introducing the concepts of suicide and self-harm.

She explained that suicide is a globally important public health issue and that over 700,000 people each year take their own lives. In England, from 2010 to 2020, over 68,000 people took

their own lives and around a third of those had been patients at mental health services. Leah noted that self-harm is common among those who die by suicide, with around two thirds having a history of self-harm.

She then moved on to talk about suicide prevention strategies which recognise key groups in order to reduce suicide rates. These often include people who have previously been in touch with mental health services, and also people who have self-harmed.

Self-harm is a key issue for patient safety in health care services – it is the most commonly reported incident in mental health services and is most likely to result in death. It is strongly related to suicide with a particularly high risk of suicide immediately after hospital presentation for self-harm.

Plenary speaker

What can we do? Evidence-based care

Leah spoke about the prediction of risk for repeat self-harm and suicide, providing context around risk scales and tools used in England and globally.

Her team undertook a large programme of work looking at the scales and tools used across the UK and the predictive performance of those scales for repeat self-harm and suicide. A report by the National Confidential Inquiry into Suicide and Safety in Mental Health Services (NCISH) discovered that there were 156 different tools and scales in use UK-wide, showing an evident lack of consensus on which scale is best to use.

They then carried out a systematic review citing the best performing and most widely used scales, before testing them in a prospective cohort study. None of the tested scales outperformed asking the clinician or the patient for their estimation of risk and they were also found not to be cost effective compared to preclinical judgement.

Leah explained that there needs to be a focus on conducting good-quality psychosocial assessments – collaborative interviews conducted between the clinician and the patient – where the clinician can evaluate the individual needs of the patient, the risk, and the reasons for self-harm. There is evidence to support the fact that these assessments are effective in reducing repeat self-harm and they are also cost effective. Prompt aftercare and psychological therapies are also effective in reducing self-harm repetition and, by extension, suicide and further adverse outcomes.

Currently only 50% to 60% of people who go into hospital for self-harm receive evidence-based care in the form of psychosocial assessments and the quality of these assessments is hugely variable and often poor.

Furthermore, only a third of people presenting to hospital with self-harm receive a referral to any mental health service follow-up and people in more deprived areas are less likely to receive a referral to mental health services.

Barriers to accessing care include long waiting times, stigmatisation, being met by failed promises, and having a lack of personalised, tailored care. People are also told they cannot access treatment if they have self-harmed and are excluded from other treatments if they self-harm during treatment, or that they are too high risk for primary care psychological therapies, but not high risk enough for secondary care therapies. This results in many people being left to struggle alone.

NICE guidelines drafted in 2022 state that tools and scales should not be used to predict future suicide or repetition of self-harm, to decide who should get what treatment, or to decide who should be discharged. Care providers should instead focus on providing good-quality assessments, the provision of prompt aftercare, and on the continuity of aftercare as well as the use of safety plans.

Translating evidence into practice

At the University of Manchester, all intervention studies are co-designed to involve people with lived experience from the start and engagement with policy and practice is also key.

Leah's team has worked with NHS England to try to support services to improve their offerings to people who have self-harmed. The programme is now nested within the NHS long-term plan and community mental health framework.

The team helped NHS services to develop co-designed evidence-based plans, as well going into services to talk about evidence in an accessible way, and ran sessions focusing on particular issues such as equality and diversity.

“Only a third of people presenting to hospital with self-harm receive a referral to any mental health service follow-up”

The programme of work is ongoing.

Within the patient safety research collaboration, Leah and the team are also continuing in situ research focused on what happens in services by progressing the interventions and aftercare. This focuses on mental health services, self-harm services, and primary care. They are trying to find interventions that are happening in practice that show promise – trying to understand what's working and what we can learn from it, and whether it can be translated to broaden access for all people who have self-harmed to ensure they get the care they need.

Conclusion

People who have self-harmed are at high risk of repetition and are at a significant risk of suicide. There is also substantial variability and unmet need when people do try to access help after they have harmed themselves.

The evidence and guidelines for risk prediction tell us what we shouldn't do, and state that we should focus on providing good-quality psychosocial assessments, prompt access to aftercare and psychological therapies, continuity of care, and tailored interventions.

However, this isn't enough. We need to make sure we translate research into practice to ensure we improve care quality. Within this, it is important to engage with patients, policy, and practice. ●

Sarah Brown Research Grant Talks

INTRODUCTION



“It was felt that supporting research to try to find some answers would be a fitting memorial, and the Sarah Brown Mental Health Research Grants were born.”

Lizzie Lockett, RCVS chief executive, introduced the second session of the morning's programme by taking a moment to remember Sarah Brown, in whose memory Mind Matters has awarded a series of research grants.

Sarah graduated from Edinburgh veterinary school in 2011 and began work in mixed practice in Edinburgh. She then shifted her focus to small animal practice in Aberdeen before becoming a small animal locum vet in 2015. A keen traveller, she travelled to further her passion for yoga, mindfulness, and wellbeing. She was a passionate advocate for positive mental health and wellbeing and was very open about her own mental health. In 2017, Sarah was elected to RCVS Council, standing on a manifesto focused on the need to improve the mental health and wellbeing and the working environment for all members of the veterinary team. To support this, she had co-founded the Veterinary Voices Facebook group. In July 2017, Sarah had been welcomed to RCVS Council but on 28 October 2017, the news came that she had taken her own life, despite appearing to do everything that she could have done to guard against mental ill health – talking, seeking support, looking after her wellbeing, working at a pace that best supported her health, and trying hard to break down the stigma associated with mental ill health.

Lizzie explained that the RCVS and Mind Matters had wanted to find a way of commemorating Sarah, but the more conventional plaques, benches, and trees had not seemed appropriate. Ultimately, to remember someone whose life had “left us so many questions”, it was felt that supporting research to try to find some answers would be a fitting memorial, and the Sarah Brown Mental Health Research Grants were born.

RCVS Council had agreed to fund five £20,000 grants to

support research into mental health – six awards had ultimately been made. The first grant had been given in 2019 to Dr Kate Lamont of Scotland's Rural College. Thanking all those who had helped Mind Matters assess grant applications over the years, Lizzie noted that the final grant was being made in 2023. After some “super fierce” competition, it was awarded to Dr Jackie Hargreaves and Dr Faye Didymus for their proposal: “A deep dive into mental health education for the student veterinary nurse curricula: scoping review and qualitative exploration.”

Jackie is a senior lecturer in exercise and health psychology within the Carnegie School of Sport at Leeds Beckett University. She is also a Health and Care Professions Council registered health psychologist, a fellow of the Higher Education Academy (HEA), and a British Psychological Society chartered psychologist. Alongside her teaching, she undertakes research into how physical activity impacts on the mental health of a variety of different populations. She has been investigating how mental health principles can be embedded in the curriculum design of undergraduate courses in health and exercise science.

Faye is a reader in sport and performance psychology within the Carnegie School of Sport at Leeds Beckett University. She is a fellow of the HEA, a British Association of Sport and Exercise Sciences accredited sports and exercise scientist, a Science Council chartered scientist, and serves on the editorial boards of the Journal of Sports Psychology and Action and the International Journal of Sport and Exercise Psychology. Her fundamental and applied research focuses on the ways psychological stress and wellbeing inhibit and facilitate performance in sport and other high-pressure roles, such as surgeons and general practitioners. ●

Sarah Brown Research Grant Talks

RG.1 – “How Farm Vets Cope”: a summary of the project funded by the Sarah Brown Mental Health Research Grant (Year 1), including “take home” messages and post-project activity



Dr Kate Lamont, Senior Lecturer in Veterinary and Animal Science, Scotland's Rural College (SRUC)

Kate Lamont is a public health social scientist at SRUC's School of Veterinary Medicine in the Centre for Epidemiology and Planetary Health. As well as working on various veterinary epidemiology and agri-food projects, her research interests also include mental health and wellbeing in remote, rural, and agricultural communities.

Summary

Kate's talk was divided into four sections:

- 1) What we hoped to do
- 2) What we did
- 3) What we found out
- 4) Key takeaways

What we hoped to do

Kate's team wanted to maintain a positive approach when thinking about what helped vets cope and to then share that knowledge with other vets so that it could be used to give tips and advice to others who were struggling. For this reason, they wanted vets included in a co-production approach as much as possible.

What we did

They gathered the views and experiences of farm animal vets to identify mechanisms that could be used to promote job satisfaction and to break the cycle of negative thoughts that occurred during periods of poor mental wellbeing or in response to setbacks and failure. The team conducted 31 interviews

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– most participants were male and working in farm practice. The interviews were then transcribed and analysed.

What we found out

There were three trigger points for poor mental health in farm vets that emerged from the interviews. These were:

- 1) **The initial experience after graduation** – many vets reported feeling “shell shocked”, they noted the large difference between vet school and being in practice, having less peer/team/management support (depending on the practice they joined), and a loss of social networks.
- 2) **Approximately five years into the job** – this was the time vets started asking themselves “is this it?” They talked about pay and working conditions, feeling trapped, and personal and family expectations.
- 3) **When moving into a management position** – this often happened without training being given and there was a skills gap between the skills needed to be a good vet and those needed to be a good manager. Vets talked about the added weight of responsibility they felt for their colleagues, for the practice finances, and for keeping farm clients happy. The imbalance between work and life became larger.

Kate and her team found that having a good supportive team was helpful and that teamwork and close relationships with farmers were extremely positive. However, some vets struggled to communicate with farmers and build trust; some farmers were said to be quite cynical and unwilling to always take their vets’ advice. Farm vets also noted that things going wrong had a negative impact on their mental wellbeing, especially when the situation could have been prevented had the farmer taken their advice.

The team also found issues associated with vets driving away from a farm by themselves after a case. If something had gone wrong, they would question themselves and wonder if there was anything else they could have done. On-call vets in particular could drive for miles on their own. Despite being exhausted, many would find it difficult to sleep and switch off.

Health and safety was cited as another big issue, with variable conditions encountered on farms.

Things farm vets found useful included having a really dependable rota, as this allowed them to plan time away to spend with friends and family.



“Some vets struggled to communicate with farmers and build trust; some farmers were said to be quite cynical and unwilling to always take their vets’ advice.”

Key takeaways

There were two take home messages. “Even when you are driving away feeling alone, actually there’s an awful lot of other vets in exactly the same position and you are not alone in dealing with all these challenges”, and “never ever feel trapped. There are so many transferrable skills and there’s always opportunities to have a different type of future.” For more information on the project, visit www.howfarmvetscope.co.uk ●

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RG.2 – Experiences and impact of moral injury on UK veterinary professional wellbeing



Dr Victoria Williamson, Research Fellow, King's College London; University of Oxford

Victoria Williamson is a researcher at King's College London and the University of Oxford. Her research focuses on the psychological impact of trauma exposure, including exposure to moral injury. She is currently leading the first UK feasibility study to develop and pilot a treatment for moral injury related mental health difficulties with Combat Stress.

Summary

Victoria started her talk with a definition of moral injury – a term used to describe the very intense and profound distress that an individual can experience after an event that violates or challenges their moral or ethical code. She explained how this can occur after a potentially morally injurious event (PMIE) and that these events come in three forms:

- 1) **Acts of commission (something you did).**
- 2) **Acts of omission (being a bystander and letting something happen).**
- 3) **Acts of betrayal.**

Moral injury is not defined as a mental illness but can lead to the development of negative thoughts and beliefs about others and oneself which, in turn, can lead to mental health difficulties.

People who experience moral injury have been shown to respond poorly to typical treatments for post-traumatic stress disorder (PTSD). While such treatments are effective in dealing with feelings of fear, they are not so effective at treating feelings of guilt, disgust, and shame which are often experienced by those with moral injury.

Before the research carried out by Victoria and her team,

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“Moral injury is experienced by veterinary professionals in the UK. It is associated with poor mental health outcomes but there is the opportunity to improve outcomes.”

there had been no formal research into moral injury in veterinary professionals. It was because of this research gap, and the fact that the situations in which veterinary professionals work could potentially be morally injurious, that they wanted to carry out the research to see if veterinary professionals did experience moral injury.

The team conducted the study using an online anonymous questionnaire, where they explored quantitative measures of moral injury and mental health outcomes, as well as telephone and online interviews to explore the lived experience of veterinary professionals – whether that be new graduates, vets, nurses, or practice managers. They wanted to take an exploratory approach and be inclusive in the study.

What they found

The team discovered that moral injury is experienced by veterinary professionals in the UK and that a large proportion of people who participated in the study reported experiencing PMIEs, with acts of omission and betrayal being most frequently reported. Additionally, reported exposure to PMIEs was significantly associated with experiencing symptoms of PTSD, particularly when it came to betrayal PMIEs.

In the qualitative interviews, they found that people reported a wide range of PMIEs, often involving witnessing other people doing things, for example, seeing senior colleagues having to euthanise healthy animals at an owner's request, having to carry out procedures which were beyond their own skillset, and being involved in culling during the foot-and-mouth disease outbreak. Additionally, there were instances of harassment and bullying, particularly from clients, and colleagues witnessing

them but standing by and letting them happen.

They found that experiencing PMIEs impacted people's wellbeing – people reported a loss of confidence, guilt, shame, anger, and anxiety. To cope with the distress, people reported leaving the practice as soon as they could to seek out other roles with more mentoring, or leaving the profession all together.

Potential risk factors

Potential risk factors impacting the likelihood of experiencing moral injury included a lack of social support, concurrent stressors, feeling unprepared to deal with difficult clients, and not knowing how to deal with failure. This highlighted the need for mentoring and training in these areas.

Key takeaways

Moral injury is experienced by veterinary professionals in the UK. It is associated with poor mental health outcomes but there is the opportunity to improve outcomes. This study serves as a starting point and if it is possible to design and co-produce training for those at university, including the provision of good psychological education and good coping strategies, people may be able to cope better going into practice. There is also potential for interventions to be introduced after the event, to help support people to move forward. With future research, there is an opportunity to develop better evidence-based support for veterinary professionals.

For more information, all papers are available on kcmhr.org/moral-injury/

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RG.3 – Solutions that could make a difference to the impact of racism on Black and Minority Ethnic people working and studying in the UK veterinary profession



Dr Navaratnam Partheeban, Regional Head for Farm IVC Evidensia; Co-founder British Veterinary Ethnicity and Diversity Society

Navaratnam Partheeban, known more widely as Theeb, is a farm animal veterinary surgeon. His previous roles include working in farm animal clinical practice, university higher education, the pharmaceutical sector, and in the global animal health industry. He is a co-founder of the British Veterinary Ethnicity and Diversity Society (BVEDS). His Nuffield Farming study 2021 explored “Encouraging and Supporting Black and People of Colour in Agriculture”. As a current Director of the Oxford Farming Conference, he is leading the McDonalds OFC

Scholars Programme and running the Breaking Barriers Scholarship. He has previously been a trustee of The Country Trust and St Werburghs City Farm. Theeb recently received an OBE for services to inclusion.

Summary

Having previously presented at the Mind Matters Symposium in 2021 about the first part of his project, examining the impact of racism on Black and Minority Ethnic (BAME) people working

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and studying in the UK veterinary profession, this time Theeb focused on solutions that might make a difference. He explained that the process of finding solutions had to include the people who had lived experience of racism. However, he began by briefly summarising his study, which had aimed to understand the experiences of racism and effects on mental wellbeing of BAME people working and studying in the UK vet sector.

In total, 265 responses were received to a questionnaire distributed to vets, vet nurses, receptionists, academics, and support staff. Theeb explained that three different effects had been identified:

- (1) Homogenisation and inferiorisation** – being objectified and deindividualised.
- (2) Alienation and insecurity** – feeling excluded.
- (3) Disappointment and futility** – low satisfaction.

He added that “identity conflict” – the difference between a BAME individual’s perception of their own identity and what White people perceived it to be – ran throughout all of these effects. He then went on to describe the ideas proposed by the BAME individuals taking part in the research for what could or should be done to tackle racism in the UK veterinary sector.

Possible ways forward

These ideas covered eight areas.

- 1) Increase diversity and inclusivity in the veterinary profession at all levels and in all areas:** encourage more BAME people to apply to vet school, make the profession more financially accessible, and try to change the view of the profession held by Minority Ethnic people.
- 2) Ensure BAME students and staff are better represented in the veterinary sector:** make sure BAME people are fairly represented in leadership, and promote and platform BAME individuals in the public sphere.
- 3) Raise awareness and educate White people about diversity, racism, and allyship:** challenge misconceptions about BAME people.
- 4) Tackle racism in universities and veterinary schools:** provide support for BAME students, including during extramural studies, diversify teaching, provide more training

“Racism is a problem in the veterinary sector and there is no need for more studies to prove that it exists.”



to university staff on equality, diversity, and inclusion (ED&I) and tackling racism appropriately.

- 5) Tackle racism in veterinary practices:** raise awareness of issues that BAME staff face when working, support BAME employees, especially in leadership, have a zero-tolerance approach to racism.
- 6) Tackle racism more generally in the veterinary profession:** develop policies and positive actions for ED&I and against racism.
- 7) Conduct more research on diversity and racism in the veterinary sector.**
- 8) Tackle racism on a societal and global scale:** develop more education and actions on diversity and racism and put dedicated resources – people and finances – behind them.

Key takeaways

Racism impacts the mental wellbeing of those who face it and it is essential individuals talk about the impacts of any form of prejudice or discrimination on their wellbeing.

Racism is a problem in the veterinary sector and there is no need for more studies to prove that it exists. What is needed now is work to counter it. Not enough is being done currently – and what is being done is being done by those who are impacted by racism. It is the responsibility of everyone in the sector to actively do something to stop and prevent racism. ●

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RG.4 – Autistic veterinary surgeons in the United Kingdom: workplace stressors and mental wellbeing



Dr Kirstie Pickles, Clinical Assistant Professor in Equine Medicine

Kirstie Pickles is an equine medicine diplomate, with a background in both clinical practice and academia, as well as a Mental Health First Aid England instructor. She is passionate about teaching, equine medicine, neurodiversity awareness, and wellbeing in the veterinary profession. She received a late diagnosis of autism at the age of 47 after one of her children was diagnosed. In 2021 Kirstie and her colleagues at Nottingham received the MMI Sarah Brown Mental Health Research Grant to investigate workplace stressors of autistic veterinary surgeons. Kirstie is a keen advocate for neurodiversity awareness and acts as an Expert by Experience for Health Education England training of mental health professionals.

Summary

Giving some background to her research, Kirstie explained that poor mental wellbeing and an elevated risk of suicide have been found in both people with autism and veterinary surgeons. It is possible therefore that autistic vets are at high risk of psychological distress. Understanding the specific workplace stressors that affect autistic vets might help inform proactive adjustments to reduce this risk.

Her study had four aims:

- I) **To examine autistic vets' experiences of their psychosocial work environment (the planning, organisation, and management of work).**

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“Often, people were unaware that their colleague was autistic; they were also unaware of how stimulating the work environment could be.”

- 2) **To generate a profile of mental wellbeing and compare it to relevant normative data.**
- 3) **To identify workplace stressors and investigate associations between exposure to them and mental wellbeing.**
- 4) **To consider reasonable adjustments to mitigate the risk of mental ill health.**

Kirstie and her research team used a mixed methods approach: interviews with 15 autistic vets formed the qualitative element of the study, while a survey of autistic vets, distributed via social media, formed the quantitative element, generating 85 usable responses.

What they found

When asked by the research team, autistic vets found it hard to describe what made a “good work day” – they most frequently said “the absence of bad things happening”. The researchers explored this in more detail with the vets and found that the most common factor in a good work day was “positive interactions”. Feeling in control of both work organisation and physical environment was also very important.

Analysing responses to the questionnaire, the researchers found that three-fifths of respondents had a score on the Warwick-Edinburgh Mental Wellbeing Scale indicative of major depression and one-fifth had a score indicative of probable depression. The mean score was lower than the score for UK veterinary surgeons in general found in a 2019 survey.

The research team used the Health and Safety Executive's Management Standards Indicator Tool to analyse the quality of respondents' psychosocial work environment and found this to be very poor for autistic vets and correlated with their mental wellbeing. Psychosocial working conditions explained 44% of the variance in mental wellbeing experienced by autistic vets. “Control” over the way work was done, and “clarity and absence of conflict regarding role” were most strongly linked to mental wellbeing.

What interventions might be acceptable?

Kirstie explained that participants rated provision of a dedicated workspace, a quiet room to facilitate sufficient and restful breaks, and neurodiversity and disability training for all staff as the most acceptable interventions to improve their mental wellbeing.

Key takeaways

One of the most commonly cited reasons why autistic vets found professional colleague relationships difficult was lack of neurodiversity awareness. Often, people were unaware that their colleague was autistic; they were also unaware of how stimulating the work environment could be, and of how methods of communication differ between autistic and non-autistic individuals. Psychosocial work environment modification may represent an effective way of supporting the mental wellbeing of autistic veterinary surgeons.

For more information, see the paper available at
<https://doi.org/10.1002/vetr.3311> ●

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RG.5 – An online compassionate imagery intervention to improve psychological wellbeing for veterinarians: a randomised control trial



Dr Katherine Wakelin, NHS Clinical Psychologist and Research Fellow, University of Surrey, and Berkshire NHS Healthcare Foundation Trust

Katherine Wakelin qualified from the University of Surrey's Clinical Doctorate Programme in 2021 and now works as a Clinical Psychologist in an NHS trauma service. She is trained to work with a wide range of mental health difficulties and is particularly passionate about Compassion Focused Therapy for high levels of shame and self-criticism. Alongside her NHS role she works part time as a Research Fellow at the University of Surrey.

Sarah Corthorne is a trainee Clinical Psychologist at the University of Surrey, working part time in the NHS rotating through different mental health placements and part time in

Sarah Corthorne, Postgraduate Research Student, University of Surrey, and Surrey and Borders Partnership NHS Trust

research/teaching at the university. At the university she is being supervised by Dr Katherine Wakelin and Dr Chrissie Jones to help conduct a randomised control trial to explore the effectiveness of an online compassionate imagery course for improving the mental wellbeing of vets.

Summary

Katherine began by highlighting the high levels of distress and mental health difficulties reported among veterinary professionals, as well as their high levels of perfectionism and self-criticism. She went on to explain that there is growing

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“Those receiving the intervention had significant improvements in a range of outcomes, and that most changes were maintained at follow up.”

evidence for “compassion-focused therapies” being effective for individuals with high levels of self-criticism who typically have poorer outcomes to cognitive behavioural therapies or interventions.

For the randomised control trial, she and her team recruited 162 qualified and student vets who received an online compassionate imagery intervention either immediately, or after a delay of 10 weeks. The intervention comprised access to one 10–15-minute video every day for two weeks. Katherine explained that the videos covered psychoeducation, basic techniques of mindfulness and breathing, and compassion-based exercises around imagery, expressing compassion towards our own critical thoughts or receiving compassion from an ideal compassionate other.

What they found

Reporting their findings, Sarah said questionnaires had been used to measure psychological outcomes that were particularly relevant to veterinary mental wellbeing, such as self-criticism, resilience,

and work-related rumination. The team had been “pleased and excited” to see that, compared to the control group, those receiving the intervention had significant improvements in a range of outcomes, and that most changes were maintained at follow up. In some cases, the benefits actually increased over time. The findings suggested that the intervention was not just statistically significant but also clinically useful for vets.

Key takeaways

The online intervention led to significant improvements in wellbeing among veterinarians. It was a relatively short, relatively cost-effective intervention.

Katherine and Sarah viewed their study as “particularly exciting” because, while there’s lots of literature about mental health issues among the vet population, to their knowledge it was the first study to look at the effectiveness of an intervention – doing something positive and practical to help tackle these issues.

The project is being written up for publication. ●

Research talks

1 – Euthanasia of animals – Association with veterinarians’ suicidal thoughts and attitudes to assisted dying in humans: a nationwide cross-sectional survey (the NORVET study)



Helene Seljenes Dalum, Researcher, Institute for Studies of the Medical Profession, Oslo, Norway

Helene Seljenes Dalum is a veterinarian from Norway. She graduated in 2010, and has worked in small animal practice, production animal practice, and public administration. Helene has a strong personal interest in mental health and started as a PhD candidate on the #NORVET project in 2020, together with supervisors at the University of Oslo, Department of Behavioural Medicine. She publicly defended her thesis, “Suicidal thoughts, animal euthanasia and help-seeking among veterinarians in Norway – a nationwide and cross-sectional survey (The NORVET study)” in June 2023.

Summary

Helene began by describing the NORVET study, a nationwide survey that had received responses from 2596 veterinarians in Norway – three-quarters of all veterinarians in the country. Two research papers based on findings from the survey have already been published, one on the prevalence of suicidal thoughts among veterinarians, and one on help-seeking for mental health problems. A third paper is being published, discussing euthanasia of animals, suicidal thoughts, and attitudes to assisted dying in humans among veterinarians.

She then moved on to explain that euthanasia of animals has

Research talks



“The findings suggest that it’s not the caseload of animal euthanasia itself that affects attitudes to assisted dying, rather they point to some qualitative part of the work having an impact on views on death more generally and also on suicide risk.”

been proposed as a veterinary-specific risk factor for suicide but pointed out that suicide is complex and one factor alone does not decide whether a person takes their own life. Also, the way that euthanasia of animals could impact on suicide risk is multifaceted.

Helene and her research colleagues used responses to the survey to try to answer three questions:

- 1) What are veterinarians' attitudes to physician-assisted suicide and euthanasia in humans?
- 2) Is the main field of work and the frequency of euthanising animals associated with positive attitudes to euthanasia in humans?
- 3) Is frequency of animal euthanasia associated with serious suicidal thoughts?

What they found

Helene explained that the team found veterinarians to have an overall attitude to assisted dying in humans comparable to that of the general population and that, unlike the view held by physicians, this attitude is not particularly restrictive. Companion

animal practitioners have a more positive attitude to assisted dying in humans, and women have a more positive attitude than men.

She went on to say that the frequency of animal euthanasia was found to be associated with a higher likelihood of having serious suicidal thoughts but also that the frequency of euthanasia was not associated with positive attitudes to euthanasia in humans.

Key takeaways

The findings suggest that euthanising animals may be an occupational stressor for veterinarians. The finding of an association between animal euthanasia and higher likelihood of having serious suicidal thoughts is quite novel, at least in a nationwide setting, and should be explored further.

Seen together, the findings suggest that it's not the caseload of animal euthanasia itself that affects attitudes to assisted dying, rather they point to some qualitative part of the work having an impact on views on death more generally and also on suicide risk.

The papers arising from the NORVET study can be found at
doi.org/10.1136/bmjopen-2021-055827
doi.org/10.1186/s12889-022-13710-y
doi.org/10.1186/s12888-023-05402-7 ●

Research talks

2 – How veterinary professionals are affected by companion animal euthanasia



Hannah Poulton, BSc Veterinary Nursing Graduate, Hartpury University

Hannah Poulton is a veterinary nurse working in a small animal practice in the West Midlands. She has a BSc (Hons) in Veterinary Nursing from Hartpury University. She has developed a keen interest in bereavement support for clients and staff and completed this study as the dissertation for her degree.

Summary

Introducing her study, Hannah noted that providing euthanasia is a powerful tool unique to the veterinary profession in the UK but also that vets have a higher rate of suicide than the general population. She said it is important to understand the impact carrying out euthanasia has on veterinary professionals.

Her study aimed to examine the effects and circumstances of euthanasia to identify the effect euthanasia has on veterinary

professionals and whether the circumstances of euthanasia or their job role affect their responses. She also investigated how veterinary staff feel about support provided for coping with euthanasia in practice.

Hannah conducted qualitative semi-structured in-depth interviews followed by a scenario-based discussion with three Registered Veterinary Nurses and three veterinary surgeons before carrying out thematic analysis of their responses.

Key themes identified

Hannah identified seven key themes under her overarching theme of the impact of euthanasia.

I) Patient wellbeing – findings indicated that veterinary professionals find euthanasia emotionally challenging,

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“When talking about job roles, her participants agreed that clinical responsibility for euthanasia falls on the vet but that, emotionally, vet nurses support the client, animal, and vet through euthanasia.”

generating psychological debate between wanting to preserve life and wanting to advocate for a patient's wellbeing.

- 2) **Internal mental health support** – participants felt appropriate support is not always given in practice; they also noted that other staff members provide an invaluable support system after euthanasia.
- 3) **External mental health support** – here, while participants said they were aware of charities such as Vetlife and Mind Matters, they wanted to be “reached out to” rather than having to reach out themselves.
- 4) **External influences, such as client finances, client-staff relationships, client emotion** – Hannah reported that participants emphasised how their relationship with a client influenced how they dealt with euthanasia, and that professionals often grieve for a patient while also helping a client to deal with their grief.
- 5) **Veterinary professional emotion** – Hannah highlighted that euthanasia can prompt a traumatic stress reaction.
- 6) **Justified euthanasia** – participants defined this as when

they morally and ethically agreed with the circumstances and decision-making around euthanasia to prevent a patient from prolonged suffering.

- 7) **Unjustified euthanasia** – this occurred when the veterinary professional did not feel euthanasia was in the best interests of the patient.

In the scenario-based discussion, Hannah found general agreement between vets and vet nurses on circumstances in which euthanasia is justified. When talking about job roles, her participants agreed that clinical responsibility for euthanasia falls on the vet but that, emotionally, vet nurses support the client, animal, and vet through euthanasia. They also highlighted the important role of non-clinical support staff who are often the first and last faces a client sees as they enter and leave a practice, are usually the ones to deal with conversations about finances, and often those who follow up with bereaved clients.

Key takeaways

Hannah concluded that her findings suggested participants felt they were not properly equipped to deal with the negative impact of euthanasia and there is a need for greater education about euthanasia from the start of training and for more accessible, targeted continuing professional development. ●

Research talks

3 – Reducing moral stress through ethical discussion in charity veterinary hospitals



Dr Vanessa Ashall, Senior Research Fellow, Wellcome Trust; Science and Technology Studies Unit (SATSU), University of York

Vanessa Ashall qualified as a vet in 2000 and worked first in mixed then companion animal practice before discovering ethics through her role as Named Veterinary Surgeon at an animal research facility. She then joined the newly formed Pet Blood Bank UK as its ethics and welfare adviser before becoming a Wellcome Trust Senior Research Fellow in ethics and society at the University of Nottingham, where she was awarded a PhD in empirical veterinary ethics. She is a European Veterinary Specialist in Animal Welfare Science, Ethics and Law, co-director of the Science and Technology Studies Unit (SATSU), University of York, and Chair of the Animal Welfare Science, Ethics and Law Veterinary Association (AWSELVA).

Summary

Introducing her research, Vanessa explained that it had been prompted by a PDSA staff survey which found many staff were not satisfied with the level of discussion about ethically challenging cases and thought greater discussion would be beneficial.

With PDSA, she co-designed a qualitative, longitudinal ethical study with nine focus groups taking place across three PDSA hospitals; each hospital ran three focus groups over several weeks. The same individuals took part in each focus group, which comprised up to six people who normally worked together, including vets, vet nurses, and non-clinical staff. Every participant was offered the chance to have an individual interview at the end of the study.

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“One key finding to emerge from discussions around relationships and ethical decision making concerned the context and complexity of these relationships and that even things that could seem quite simple were actually very complicated.”

Three themes were explored:

- 1) The causes and significance of veterinary moral stress.
- 2) The use of veterinary ethical tools.
- 3) Experiences of small group ethical discussion.

What she found

Vanessa reported that the data gathered from the focus groups supported the definition of moral stress proposed in other areas of work, namely it feeling like an inability to do what it is you want to do in an ethical sense. In her study, moral stress was not really about big dramatic ethical challenges. It was actually more about mundane, everyday challenges in meeting vets' and vet nurses' moral obligations. However, these low-level ethical challenges also have potential mental health consequences.

She said two types of barriers to ethical activity had been identified – practical and relational. Practical barriers are physical problems that impede vets and vet nurses in doing what they feel is right. With relational barriers, another individual stands in the way of vets or vet nurses doing what

they think is best.

Vanessa explained that to facilitate discussions, she had used the **Veterinary Ethics Tool**, which draws attention to different ethical relationships in the veterinary setting. One key finding to emerge from discussions around relationships and ethical decision making concerned the context and complexity of these relationships and that even things that could seem quite simple were actually very complicated.

Key takeaways

Veterinary teams in charity hospitals identified ethical discussion as important. There is a desire for greater ethical discussion of active cases, enabling them to help patients through improved clinical decision making. However, this study also drew attention to the benefit of reflective ethical discussion as a group in promoting better understanding of different roles and ethical responsibilities.

For more information see the paper available at
<http://doi.org/10.3390/ani13101662> ●

Research talks

4 - The Vet Stressor Study: examining the relationship between workplace stressors and career stage



Dr Rebecca Smith, Lecturer in Veterinary Professional Development, Harper and Keele Vet School

Rebecca Smith graduated from the University of Glasgow in 2014, after which she began working as a small animal general practitioner. In 2020 she took a part-time role in academia, alongside clinical work, and is currently working at the Harper and Keele Veterinary School as a lecturer in veterinary professional development.

Summary

Rebecca began by explaining that the study had been led by Professor Jason Spendelow, Professor of Clinical Psychology and Professional Practice at Harper and Keele Veterinary School,

and had involved a team of researchers. She went on to say that, although it is well known there are high rates of distress and attrition within the veterinary professions, there are limited data on environmental stressors and their trajectories. Understanding these and the needs of individuals and different practitioners might enable targeted support and training to be offered.

The research team carried out a cross sectional, quantitative study using an online questionnaire asking respondents to rate 93 workplace stressors with the aim of answering two questions:

I) Which stressors are the most severe?

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“Respondents had been divided into four groups based on years since qualification. The team found that those in their early careers tended to report higher levels of stress than those in later career stages. Stressors varied with experience level but some appeared in all four career stages.”

2) How do stressors change over time as a function of career stage?

A total of 658 veterinary professionals, both vets and vet nurses, responded.

What they found

The team evaluated the responses to determine the top 10 stressors identified by the respondents. Using thematic analysis, they categorised these stressors into three core themes:

- 1) **Client and animal care challenges** – such as clients' financial constraints and adverse outcomes for animals.
- 2) **Workload and time pressures** – for example, dealing with staff shortages, high expectations, and the need to work quickly or intensively.

3) Performance anxiety and expectations – encompassing the fear of making mistakes, facing complaints, and experiencing high performance expectations from oneself and others.

Rebecca said the respondents had been divided into four groups based on years since qualification. The team found that those in their early careers tended to report higher levels of stress than those in later career stages. Stressors varied with experience level but some appeared in all four career stages.

Key takeaways

Training and support are needed to target specific stressors but because needs will vary according to career stage, the support and training provided should be targeted to specific career stages. There is also a need to better understand the mechanisms behind the top-ranked stressors. ●

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5 – Is the quality and provision of mental health support in higher education sufficient in preparing student veterinary nurses for the profession?



Kaitlin Murray, IVC Evidensia UK

Kaitlin Murray entered the veterinary industry in 2018 when she started her journey to becoming a Registered Veterinary Nurse at Harper Adams University. She has now been a qualified veterinary nurse for over a year, having graduated in September 2022. Kaitlin is currently working in a first-opinion small animal practice in Shropshire. She is a strong believer in 'life is short' so, outside of work, she loves to travel the world and create as many new experiences for herself as she can.

Summary

Kaitlin introduced her research project, which she carried out during the final year of her veterinary nursing degree. She had sought to identify the levels of mental health support available in higher education and whether they are sufficient to prepare student veterinary nurses (SVNs) for their futures in the profession. Kaitlin felt Registered Veterinary Nurses' (RVNs') mental health is often overlooked in comparison to the mental health of vets, and said there has been less research into RVN-

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specific mental health and wellbeing to use as an evidence base to underpin support initiatives.

Kaitlin then summarised some of the existing evidence that suggests mental health issues are one of the key reasons RVNs choose to leave the profession, contributing to the acknowledged problem of poor retention. Protecting the mental health of SVNs enrolled in higher education is essential, she said, and she highlighted recommendations that the human nursing profession incorporate resilience training into education to better prepare students for the challenges they may face in their nursing careers.

She carried out her research using questionnaires, which attracted 41 responses, and interviews with seven RVNs who had graduated within the previous six years.

What did she find?

Questionnaire data revealed that most of the participants had experienced fluctuations in their mental health and over half of these individuals had experienced fluctuations before they graduated. Of those reporting fluctuations in their mental health,

“Six of the seven RVNs interviewed reported experiencing negative mental wellbeing at some point in their careers and all seven reported that a lack of coping strategies provided at university somewhat contributed to the outcome of their mental health.”

almost half felt their university had not appropriately prepared them for the RVN role.

Similarly, six of the seven RVNs interviewed reported experiencing negative mental wellbeing at some point in their careers and all seven reported that a lack of coping strategies provided at university somewhat contributed to the outcome of their mental health.

Integrated learning support within the academic content was the type of mental health support that all participants felt would be most appropriate.

Key takeaways

There is a significant lack of research into the mental health of RVNs in the UK, suggesting an absence of evidence-based mental health support within the profession. There is also a lack of mental health support for SVNs in higher education. Further research is needed to establish the best methods for preventing the development of poor mental wellbeing and to support RVNs' mental health in future. ●

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6 – Final-year student veterinary nurses' future career plans: values, beliefs, and anxieties



Suzannah Harniman, Senior Lecturer and Programme Manager, Department of Veterinary Nursing, Hartpury University

Suzannah Harniman is a Registered Equine Veterinary Nurse and Senior Lecturer in the Veterinary Nursing Department at Hartpury University. She manages the BSc (Hons) Veterinary Nursing and BSc (Hons) Equine Veterinary Nursing programmes at Hartpury and teaches across a range of veterinary nursing modules. While completing her MA in Education, Suzannah developed an interest in qualitative social science research and has since focused her research on the experiences student veterinary nurses have at university.

Summary

Noting the well-recognised challenges around long-term retention of veterinary nurses in clinical practice, Suzannah began by emphasising the importance of vet nurses being motivated to seek employment in practice on graduation. She had investigated the motivations lying behind her final-year students' plans for their careers after graduation, with the view to helping motivate future students to seek employment in clinical practice.

Suzannah carried out a qualitative case study using online

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semi-structured interviews with 10 final-year student veterinary nurses to try to answer the question: "How do the values and beliefs of final year students on a BSc (Hons) veterinary nursing programme impact their desire to seek future employment in the veterinary nursing industry?" She used a motivational theory called the "Situated Expectancy-Value Theory" as the framework for her research. Four "subjective task values" (STVs) – intrinsic value (enjoyment of the task), utility value (perceived usefulness of the task), attainment value (perceived importance of the task), and cost value (any detriment from engaging with the task) – form part of this theory and she had used these STVs to interpret her results.

What did she find?

The intrinsic STV was very evident among participants, who shared their love for the veterinary nurse job role. Participants also highlighted the importance of promoting animal health and welfare – the attainment value of the role. There was a sense of pride and a sense of belonging within the veterinary nursing profession.

However, all participants reported alternative future career aspirations outside of clinical veterinary nursing. Some viewed

"This culture of openness should be nurtured by providing wellbeing support for student veterinary nurses, encouraging them to share their concerns and be supported"

their degree as a "stepping stone" to another career.

Participants were also willing to openly discuss their anxieties relating to their future career plans. These anxieties were the "costs" STV – the detriment participants believed they may encounter by engaging in a vet nursing career. The demanding nature of the profession was highlighted as a career-limiting factor and perceived as a barrier to a long-term career. The emotional strain faced by vet nurses was linked to reduced motivation and low pay was highlighted as a reason why the participants may leave the profession.

Key takeaways

In general participants highlighted high levels of intrinsic and attainment value in relation to key aspects of the veterinary nursing job role. However, many perceived costs were also discussed.

The willingness of participants to talk about their anxieties should be viewed positively. This culture of openness should be nurtured by providing wellbeing support for student veterinary nurses, encouraging them to share their concerns and be supported so that as they progress through their careers, they maintain their motivation to have a long-term career and seek support as required. ●

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7 – How the COVID-19 pandemic shaped the veterinary mental well-being in Europe



Wiebke Jansen, Policy Officer, Federation of Veterinarians of Europe (FVE)

Wiebke Jansen received her veterinary degree from the University of Veterinary Medicine in Hannover (Germany) in 2010. After 10 years in research projects focusing on the detection and characterisation of food-borne zoonotic pathogens and antimicrobial resistance in emerging food-borne pathogens, she completed her PhD and became an EBVS Specialist in Veterinary Public Health in 2017. Before joining the FVE in 2021, she managed the national Q fever surveillance programme at the Belgian National Reference Laboratory for neglected zoonotic diseases

and was its Animal Welfare Officer. At FVE, she works as a Veterinary Policy Officer on European veterinary public health policies, focusing on animal health, animal welfare, and the mental well-being of veterinarians, which had led to several publications on the use of antibiotics and alternatives, and diversity, equity, and inclusiveness in the veterinary profession.

Summary

Wiebke started her presentation by briefly introducing the Federation of Veterinarians of Europe (FVE), an umbrella

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organisation whose members are both professional organisations and statutory bodies in 38 European countries. Its mission is to enhance animal health, animal welfare, and public health, and protect the environment by promoting the veterinary profession.

She went on to explain that every five years FVE carries out a cross-sectional demographic survey, the VetSurvey, which gathers information about aspects of the veterinary profession across Europe. The most recent survey in 2022/23 had attracted responses from 12,397 participants. Since the previous survey in 2018/19, to which 14,559 people had responded, there had been several significant global events – the COVID-19 pandemic, a geopolitical crisis, and a cost-of-living crisis. Wiebke said FVE was interested to find out what impact these had had on mental wellbeing among veterinarians.

Data were extracted from the 2018/19 and 2022/23 surveys to evaluate changes in three indicators over time:

- 1) **Self-reported stress levels.**
- 2) **The need for medical leave due to decreased mental wellbeing.**
- 3) **Responses to the seven-question Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS).**

The aim was to provide an overview of the mental state of veterinarians in the same 27 countries across Europe.

Wellbeing stable overall

The average self-reported stress level in both 2018/19 and 2022/23 scored in the upper third of the scale used, but in 2018/19, veterinarians in Italy and Slovakia had the highest average scores; in 2022/23, those in Latvia had the highest scores. Consistently, veterinarians in the Netherlands and Denmark scored lowest.

There was no statistically significant difference between the two surveys in terms of medical leave needed due to decreased mental wellbeing, but again country-level differences were found. The need for medical leave increased significantly in Latvia, Slovakia, Italy, and Iceland in 2022/23 compared with 2018/19 but decreased in North Macedonia and Estonia over the five-year period.

Likewise, there was no statistically significant difference between the average WEMWBS score in 2018/19 and that in 2022/23.

Key takeaways

In both surveys, early career and female vets were most at risk.



“Some vets struggled to communicate with farmers and build trust; some farmers were said to be quite cynical and unwilling to always take their vets’ advice.”

The overall stress levels of vets, need for medical leave due to decreased mental wellbeing, and wellbeing scores remained stable, although consistently high, despite the multidimensional crises.

The greatest success in improving vet wellbeing will be achieved by creating more resilient veterinary workplaces that:

- Prioritise wellbeing.
- Pay attention to work/life balance.
- Respect all employees and share accountability.
- Create a supportive environment for the whole vet team.

There is also a crucial need to define comparable standards for mental wellbeing assessments in healthcare professions. ●

Mind Matters Initiative: evaluation and strategy



SUMMARY

Angharad Belcher, RCVS Director for Advancement of the Professions

Angharad began by listing the four key values of the RCVS Mind Matters Initiative (MMI) – collaboration, innovation, inclusion and accessibility, and evidence – and explained that these values are extremely important, not just to MMI but to the advancement of the veterinary professions as well.

Reflecting on some highlights of recent years, she said they showed how MMI covers the breadth of the veterinary professions. For example, a student veterinary nurse (SVN) experience survey

had received over 700 responses and had been one of the first of its kind for SVNs, not just in the UK but globally.

She went on to say that MMI's latest survey looking at mental health, chronic illness, disability, and neurodiversity in the veterinary professions and student populations had received more than 3500 responses.

MMI is also collaborating with other professions to learn from them and to share veterinary knowledge, she said. Challenging and reducing stigma, and reducing complacency are key.

Mind Matters Initiative: evaluation and strategy



“MMI is very mindful that accessing anything around mental health and wellbeing can be very hard, whether because of personal lived experience or challenges within the workplace.”

One way of doing this is through awareness days, weeks, and months that allow MMI to demonstrate its values and support members of different communities. Angharad explained that the events chosen for focus may vary from year to year to highlight the mental health impact of a variety of issues, while others will become part of MMI's long-term plans; however, all such events are important.

MMI is very mindful that accessing anything around mental health and wellbeing can be very hard, whether because of personal lived experience or challenges within the workplace. So, it tries to make its initiatives accessible. As an example, Angharad described the “deliberately no frills” Campfire Chats launched online in 2021 to make it easier for those who needed the content but who were under pressure for whatever reason, to attend. They focused on the lived experience, coupled with expertise, and attracted hundreds of attendees.

MMI's training is rarely profession-specific, Angharad continued. More than 2500 people have attended training offered by MMI, ranging from quite general training, such as introductions and core principles, to more advanced, such as mental health first aid.

MMI International, a group of veterinary associations and bodies from all over the world, is another initiative underway. Angharad described the global will and desire to support those with mental ill health, promote protective health behaviours, and reduce stigma as a positive demonstration of MMI's core values and of the global alignment of these values.

Students are a particular area of focus for MMI, which has started an outreach programme to all the vet schools and veterinary nurse training providers. The aim is to build trust in MMI, reduce stigma,

and signpost to the incredible work done by charities like Vetlife. Collaborations with and support for Vetlife and charities such as Vet Support NI and Professional Conduct Investigation Support are also integral to MMI's work.

Having highlighted aspects of MMI's work to date, Angharad moved on to plans for the future, as featured in a [new five-year strategy](#) launched earlier in 2023.

Leadership is one area MMI feels passionate about, she said. It was known that many leaders and line managers found talking about mental health with their teams extremely difficult. MMI will be working to help generate confidence in having such conversations.

Angharad noted that the final Sarah Brown Mental Health Research Grant had been awarded earlier in the day and she thanked Sarah's family for their support. MMI will be announcing new plans for its grant and research programme in spring 2024, continuing the core principles embarked on as part of the Sarah Brown programme.

Also as part of its plans going forward, MMI will be aiming to increase the learning resources that it offers. There will be a new series of Campfire Chats and new subsidised training opportunities will be created, spread across many more topics. MMI will also be attending more industry events and, having partnered with the British Small Animal Veterinary Association (BSAVA) to deliver a stream of sessions on neurodiversity at the BSAVA Congress in 2023, will be putting on a new stream in 2024 looking at more complex mental health issues.

Summing up, Angharad said MMI has a lot of ambitious targets, which help it focus on how it wants to go forward and what it might be possible to change. ●



The Mind Matters Initiative is run by the Royal College of Veterinary Surgeons
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