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### **Stress and mental health in veterinary medicine**

This talk is a review of the recent research in veterinary medicine and other related health professions on mental illness and health. The concepts of adverse childhood events and attachment are presented as a way to understand mental health from a brain-based biological perspective.

#### **Learner outcomes:**

- At the end of this talk learners will be able to:
  - Cite three research findings about veterinary medicine and well-being
  - Define the term adverse childhood events
  - Identify two types of attachment styles

#### **How is poor well-being impacting the profession?**

- Burnout (Miller, 2004; Zuziak, 1991)
- Substance abuse (Harling et al, 2009; Fishbain, 1986)
- Depression (Reisbig, et al., 2012; Strand et al,2005; Shouksmith & Hesketh, 1986)
- Anxiety (Reisbig, et al., 2012)
- Psychological health (↓ ↓ recent grads) (Fritschi et al, 2009)
- Relationship distress/negative work-home interactions (Speck, 1964; Fritschi et al, 2009)
- Suicide (Bartram, 2010; Fishbain, 1986)
  - Veterinarians are 4 times as likely to commit suicide than the general population and two times as likely as other health professionals (Bartram, 2008)
  - Veterinarians are 5.5 times more likely to have suicidal thoughts in the past 12 months than the general population (Bartram & Baldwin, 2009)
  - Nearly 1 in 11 DVM's suffer from serious psychological distress; More than 1 in 6 have experienced suicidal ideation (Nett et al, 2015)
- Possible increased risk factors include:
  - Increased incidence of depression, anxiety, stress
  - Substance abuse
  - Access to lethal means
  - Accepting attitudes toward euthanasia
  - Isolation
  - Familiarity with death and dying
  - Suicide "contagion"
  - Cognitive and personality factors
  - Work-related stressors
  - Perceived stigma
  - Psychiatric illness (Bartram, 2010, Veterinary Record)

#### Sources of poor wellness in veterinary medicine

- Giving bad news (Bragard et al 2010)
- Managing adverse events (West et al, 2009)
- Interacting with difficult clients (Morrisey & Voiland, 2007)
- Working effectively in teams (Gilling & Parkinson, 2009, Moore et al., 2014)
- Balancing work and home life (Riggs et al, 2001)
- Financial issues (Tran et al, 2014)
- Handling ethical dilemmas (Batchelor & McKeegan, 2011)

Adverse Childhood Experiences (ACES): Events that happen to children before the age of 18 that impact their health and mental health. Adverse childhood experiences (ACEs) fall into three domains: (1) abuse (physical, emotional, and sexual); (2) neglect (emotional and physical); and (3) household dysfunction (substance abuse, violence, divorce, mental illness, and incarceration among caregivers). ACEs have a dosage response effect with poor outcomes; the more categories of exposure a person experiences before age 18, the more likely he or she is to experience poor physical and mental health outcomes. Veterinary students do not have a higher rate of ACEs than the general population (Strand et al, 2017)

Attachment Styles: Attachment styles are the main ways that children bond with their parents. These styles fall into two main categories: secure and insecure attachment. Insecure attachment is more likely to result when a child has experienced ACEs in their childhood histories and to be more representative in the childhood histories of people who seek counseling. Attachment styles can move from insecure to secure through positive life experiences as both children and adults.

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### **Moral stress, conflict, and how it impacts veterinary well-being**

This talk reviews moral stress and how morally complex ethical issues impact well-being in veterinary medical practice. Conflict styles and conflict resolution strategies are presented from a brain-based perspective.

#### **Learner outcomes:**

- At the end of this talk learners will be able to:
  - Cite three research findings about moral stress
  - Define the term moral stress
  - Define the term emotional labor
  - Identify three types of conflict styles

#### **Moral Stress**

“...moral stress is experienced when nurses are aware of what ethical principles are at stake in a specific situation and external factors prevent them from making a decision that would reduce the conflict between contradicting principles.”

(Lützén, Agneta Cronqvist, Magnusson, and Andersson. (2003): pg. 203)

“Moral stress is a unique and insidious form of stress that cannot be alleviated by normal approaches to stress management. It arises among the people... whose life work is aimed at promoting the well-being of animals.”

(Rollin, 2011, pg 651)

#### **Moral Sensitivity**

...an understanding of patients’ vulnerable situation as well as an awareness of the moral implications of decisions that are made on their behalf...

It involves more dimensions than cognitive capacity, ...it includes the components awareness, thinking, feeling and action. (Lutzen, 2010, pg. 216)

Batchelor and McKeegan (2014) found that 57% of veterinarians experienced 1-2 per week ethical dilemmas per week; 34% experienced 3-5 per week.

On the stress scale all respondents said these experiences were 7 out of 10 (with 10 highest level of stress).

#### **Conflict Styles:**

1. Accommodating
2. Avoiding

3. Collaborating
4. Competing
5. Compromising

### Selecting the Right Conflict Style

Five key diagnostic questions

- How important are the issues to you?
- How important are the issues to the other?
- How important is it to maintain a positive relationship?
- How much time pressure is there?
- To what extent does one party trust the other?
- What is the power differential in the conflictual relationship?

**Emotional Labor....** the process of managing feelings and expressions to fulfill the emotional requirements of a job.

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**Stress management, neural integration and the healthy mind platter**

This talk reviews the daily behaviors that are needed to maintain mental health. This session will include experiential practice of techniques like mindfulness and play. All techniques will be coupled with efficacy research.

Learner outcomes:

- At the end of this talk learners will be able to:
  - Cite three research findings about health behaviors
  - Identify 5 of 7 Healthy Mind Platter Behaviors
  - Define the term neural integration
  - Know their current level of well-being

Healthy Mind Platter (Source: [http://www.drdansiegel.com/resources/healthy\\_mind\\_platter/](http://www.drdansiegel.com/resources/healthy_mind_platter/))

<b>Focus Time</b>	When we closely focus on tasks in a goal-oriented way, we take on challenges that make deep connections in the brain.
<b>Play Time</b>	When we allow ourselves to be spontaneous or creative, playfully enjoying novel experiences, we help make new connections in the brain.
<b>Connecting Time</b>	When we connect with other people, ideally in person, and when we take time to appreciate our connection to the natural world around us, we activate and reinforce the brain's relational circuitry.
<b>Physical Time</b>	When we move our bodies, aerobically if medically possible, we strengthen the brain in many ways.
<b>Time In</b>	When we quietly reflect internally, focusing on sensations, images, feelings, and thoughts, we help to better integrate the brain.
<b>Down Time</b>	When we are non-focused, without any specific goal, and let our mind wander or simply relax, we help the brain recharge.
<b>Sleep Time</b>	When we give the brain the rest it needs, we consolidate learning and recover from the experiences of the day.

.....  
\*\*We add Good Food and Altruism at UTCVM

**Mindfulness Practice**

“A large body of research has established the efficacy of these mindfulness-based interventions in reducing symptoms of a number of disorders, including: anxiety (Roemer et al., 2008), depression (Teasdale et al., 2000), substance abuse (Bowen et al., 2006), eating disorders (Tapper et al., 2009), and chronic pain (Grossman et al., 2007), as well as improving well-being and quality of life (e.g., Carmody and Baer, 2008).”

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**Perfectionism 101: The liabilities and benefits of striving for perfection.**

This talk reviews the research on the benefits and liabilities of perfectionism. From the perspective of cultivating excellent mental health the etiology of perfectionism is explored and the strategies for using perfectionism wisely in veterinary medical practice and one's personal life are explored.

Learner outcomes:

- At the end of this talk learners will be able to:
  - Cite three research findings about perfectionism
  - Know their level of perfectionism and imposter phenomenon
  - Name three strategies used to deal with imperfection

Types of Perfectionism (Hewitt, P.L., & Flett, G.L., 1990)

Self-Oriented Perfectionism:

- striving to attain perfection and avoid failure
- "I strive to be the best at everything I do."
- leads to self-criticism and self-punishment

Other-Oriented Perfectionism:

- Unrealistically high standards for others.
- "everything that others do must be of top-notch quality."
- Leads to blame, a lack of trust and feelings of hostility towards others.

Socially Prescribed Perfectionism:

- Perceiving that others have unrealistically high standards of you
- "people expect nothing less than perfection from me."
- Leads to stress, anxiety, anger, and depression

Trait perfectionism among veterinarians (Crane et al, 2015)

- negatively associated with resilience
- positively associated with stress, anxiety, emotional arousal
- and seeing morally complex situations as morally distressing

Three strategies to deal with perfectionism:

- Recognize perfectionism that is unhealthy vs healthy
- Learn to ignore perfectionistic thoughts by connecting to core values
- Practice self-compassion while exposing yourself to being imperfect on purpose.