

## **Veterinarians and Wellness: Physician, Heal Thyself!**

**by  
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Physicians and Veterinarians are often viewed as healers of the sick. While practitioners of various specialties focus on treating illnesses and modernizing the healing process for all walks of life, what happens to these health care providers when they become ill?

To say the medical profession is extremely stressful for everyone is a serious understatement. The lives of all patients depend upon the practitioner's extensive skills to make the correct diagnosis and prescribe the proper treatment in a timely manner. When the practitioner is dealing with his/her own, underlying (and potentially undiagnosed) mental illnesses, care can become compromised; sometimes with disastrous results.

Many forms of mental illness can emerge within early adulthood; veterinary students are no exception. According to [www.suicide.org](http://www.suicide.org), suicide is the second leading cause of death for college students. Further, the number one cause of suicide among college students (and of all suicides) is untreated depression. Untreated mental illness doesn't disappear after the student graduates and becomes a licensed professional; it can continue well into one's professional veterinary career.

Factors that may influence the expression of various mental illnesses (such as depression or obsessive compulsive disorders) and have been linked to suicides among veterinarians are:

- Stress
- Family history of addiction and/or mental illness
- Failure to diagnose or seek treatment of mental illness
- Lack of knowledge related to stressors
- Relationship and sexuality issues
- Lack of willingness to get help based upon the fear of career-related damage

Where should education begin for members of our profession? Should it begin before one enters veterinary school? Should it be part of the evaluation process? How could this be implemented?

According to our survey, circulated among institutions featuring veterinary students, the need for wellness programs has never been more urgent. Ironically, our sampling of students surveyed aligns almost exactly with the findings of ACHA-NCHA II 2012; nearly 19% of the students surveyed either did not know or had been diagnosed with a mental illness. There is, however, a significant gap between the student numbers and those of the licensed veterinarians in the state of Alabama..

66% of the licensed veterinarians surveyed indicated that they had been clinically depressed. Notable age differences compounded with life experiences potentially contributed to these very different numbers. Additionally, there are a couple of factors that

should solicit concerns. These factors can and need to be addressed within our veterinary schools, associations, and licensing boards.

A survey by the Association of Executive Veterinary Directors illustrated that 54% of the states had a wellness program for veterinary professionals. Within the state of Alabama, however, and in spite of what is considered to be a highly successful veterinary professionals' wellness program, 54% of the survey's recipients were unaware of the program's existence. 44% of those surveyed had not heard of the veterinary professionals' wellness program and only 2% are now or have previously participated in the program.

From the students' survey, 69% felt the quality of alcohol and drug awareness education was good; whereas approximately 31% said that it was non-existent, poor or inadequate. When asked, "If you have a confidential person available to address any of the earlier mental health problems", the students responded 45% yes, 31% no and 24.5% did not know. When subsequently asked, "Would you like more information presented at your school?", the 22% of the students said "yes", whereas 49% indicated "no" and 27% selected "maybe".

What is the cause of the significantly higher cases of depression and other mental health issues among graduate veterinarians? In addition to the stressors that are common to both the students and the graduate veterinarians (finance, relationships, rest, depression, anxiety, addictions and other mental health issues) other factors may also play a role. As the use of electronics has incorporated itself within society's infrastructure, it has also created a unique set of issues.

According to Arthur Levin and Diane Dean in their book, "Generation on a Tightrope", incorporation of the digital culture has brought about a significant shift in addressing what has historically been the method of addressing personal issues. What does this communicate about how one should attempt to address this 'Digital Generation'? What can be done to make a greater impact to address the wellness concerns; particularly for 'Generation X'?

Three suggested concepts become immediately evident:

1. Strengthen the development of wellness communication tools for the digital generation.
2. Incorporate crucial aspects of "Mindful Veterinary Practice", taught by Dr. Trish Dowling, Western College of Veterinary Medicine, Saskatoon, Canada.
3. Provide an online forum to ensure all issues and concerns are professionally and confidentially addressed.

Clearly, there is a serious disconnect between conveying information about the program versus those individuals we hope to reach. The direct source of the problem has not been determined; although important questions are now being asked. Matters regarding the investment of adequate capital to aid our most important resources, our students and our veterinary colleagues, are presently being discussed among our professional community.

Even though the state of Alabama has a very good veterinary professional wellness program by most standards, the results of our survey clearly indicate we've only just begun. By recognizing that problems exist and that confidential help is available, we, as medical professionals can work

together towards finding a solution. The road to wellness must become a visible, accessible path, illuminated through the collective guidance and wisdom surrounding our noble profession.