

Veterinary Science is a Social Science!

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Veterinary and Community Care

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It is time to challenge the paradigm that Veterinary Science is a Medical Science. Google AI's perspective on the difference is:

“Medical sciences, such as biology and medicine, focus on the biological and physiological aspects of health, including disease diagnosis and treatment. Social sciences, like sociology and psychology, study human behaviour, social structures, and their impact on health. Both fields are crucial for understanding and addressing health challenges, with social sciences providing valuable context and insights into the social determinants of health”.

We have all trained and worked under the belief, in fact certainty, that we are medical scientists, but is it time to look at this differently, and forever enrich your relationship with your career as a result.

Whilst some researchers propose a connection between canines and humans as far back as 30-40,000 years ago, the earliest evidence of a tangible link is a 15,000 year old hound known as the “Bonn-Oberkassel dog”, found buried with a group of humans. In 2004 a cat was found buried with humans on Cyprus. Most school children are familiar with the fact that around 1950 BCE, Egyptians began depicting felines as companions, assistants and even Gods. So companion animals have been deeply embedded in our social, cultural and personal relationships for a very very long time. In the modern era this has been recognised as the “human-animal bond”.

For a variety of reasons this connection has grown stronger for some cultures and particularly some sub-sections of those cultures as the value, potential and complexity of the relationship becomes better recognised. It is now relatively common for a family unit to “adopt” a domestic animal into the home and treat them in every way as a child substitute. The strength of this bond cannot be underestimated. Within a standard veterinary clinic community however, these families are contrasted against individuals or families that choose to own a pet for recreation, protection or working purposes, and each scenario presents its own set of communication and decision-making challenges. Collectively we could call these interactions the “outward-facing people connections”.

The intricacies and nuances of those connections must in general be assessed, processed and superimposed onto the medical circumstances of each animal seen in a consult room within a timeframe that may be as long as an hour in a specialist or referral centre context,

but may be as short as 10 minutes in a GP setting. A superhuman skillset in anyone's terms. One study determined that up to 80% of communication between individuals was non-verbal, and the majority of most consultations involve communication between vet and client, with the remainder being devoted to examination of the patient¹. This highlights the importance of these "soft or non-clinical skills" in everyday clinical practice.

In addition to this, Veterinarians generally work in teams. These teams are filled with passionate, intelligent, resourceful people who, whilst they share a common interest in serving the wellbeing of the animals that come through their actual or virtual practice doorway, may or may not be well equipped to manage "people problems". They are also often from diverse backgrounds, cultures and share different values and ideals. Yet they need to work very closely together in high-stress, volatile and unpredictable environments where effective communication is essential. As such, we would have all witnessed team members who are tangibly affected by the relative lack of knowledge and skills in this area passed on through their formal core training. These people-skills extend beyond the team they work with inside their building, and onto all the other people that connect with the average veterinary clinic, from wholesaler and manufacturer representatives, crematorium staff, laboratory team members etc etc. A veterinary clinic is a hive of interpersonal interactions and these collectively form the inward-facing connections.

Veterinary and veterinary nurse undergraduate studies increasingly incorporate academic consideration of the "soft skills", but even this term on itself belittles the importance of that skillset. "Non-clinical" is more frequently used, but equally suggests that these skills are "adjacent" (non) versus a primary focus. The above suggests that we may need to rethink the way we are allocating resources, both in the training of the next generation of veterinary teams, and the way we design the teams themselves.

Perhaps it is time to question whether we should be balancing more aggressively the biological sciences we have always focussed on with the social sciences of communication, empathy, relationships, connections and the human-animal bond.

Currently veterinary team members are required to negotiate the intricacies of these challenges every day, and whilst many experienced veterinary team members gain tremendous skills over time, this is generally through experience and repetition rather than formal training. More targeted and sophisticated resources are becoming more easily accessible but are still in the minority when compared to clinical content.

In Pun's 2020 paper looking at studies on communication in the profession the main conclusion was that veterinarians feel there is insufficient training provided in communication leaving them ill-equipped for even their day-to-day interactions with clients and colleagues.³ There is also strong evidence that the stress caused by dealing with people problems – both outward and inwardly - within a veterinary practice is a strong contributor to stress, anxiety, and attrition within our profession. (74.6%) of 2540 respondents to the

2021 AVA Veterinary Wellness Report research believed that their colleagues had the biggest impact on their work experience being a positive one and enhancing their mental health as well as having positive interactions with pet owners (70.1%). Conversely, interactions with clients and interpersonal conflict with colleagues were cited as the top two causes of stress.²

The other emerging pressure we are facing as a profession is the expanding gaps between what the average client can afford to spend on the actual and potential veterinary care of their pet, the *perception* of what might be needed in the worst case scenario, and the actual cost of some of the more serious health challenges that can affect their pets. This is no more glaring in the emergency and specialist referral sectors, where costs well in excess of \$10,000 are commonly associated with “relatively” common medical and surgical presentations leading to impossible choices⁴. A recent paper in the Vet Record linked escalating veterinary costs to recently graduated vets disengagement as they found mechanisms to protect themselves from the vicarious anguish suffered by their clients⁵. The paper recommended a “Spectrum of Care” approach as one means to mitigate this.

The concept of “Spectrum of Care” (or Continuum of Care) has been around for a long time, and in the authors’ view relates to a fairly linear range of appropriate and relevant options that may be available to provide care to a patient. This might be notionally arranged in ascending price-points, degree of intervention or likelihood of a favourable outcome, but is generally focussed on the patient. “Contextualised Care” has been receiving renewed interest as a concept as it takes in a much wider range of factors including the facilities that may be available, the cultural, financial, moral or ethical beliefs of the owner/carer, and perhaps even the clinician’s own factors such as experience, time availability etc. Some believe this is “standard” decision-making, but the authors have seen good evidence that the new graduate cohort appears to be having substantial difficulties with this concept as they try to adhere to the more patient-focussed algorithms, flowcharts and decision-trees drilled into them throughout their training. It is another example of the heavy emphasis on the science, without appropriate consideration of some of the equally important factors that should be considered when helping our clients to make big decisions regarding their pet’s care.

Spectrum of Care

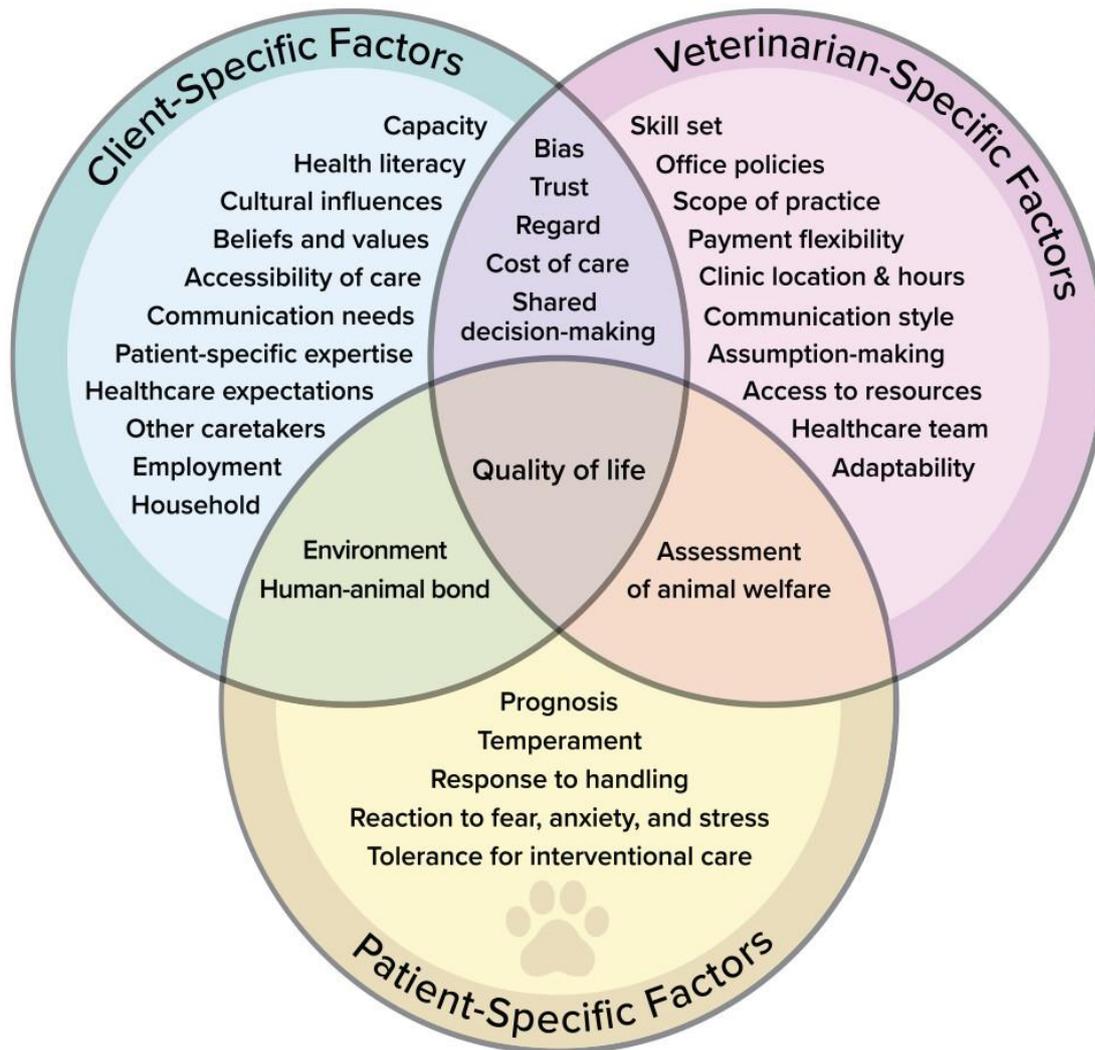


Fig 1. From: Recasting the gold standard – part I of II: delineating healthcare options across a continuum of care. Englar RE. Journal of Feline Medicine and Surgery

So, are we at crossroads where, on the one path, we recognise that we are grossly underprepared as a profession for one of our core competencies, and make wholesale changes to our veterinary and veterinary nursing curriculums to recognise this imbalance? Or, do we follow the human medical facility path, and ensure that every team takes a multidisciplinary approach – employing the appropriate balance of expertise for the caseload they manage?

If we acknowledge that most veterinary teams are exceptionally good at handling the “animal problems” but grossly under-prepared for the “people problems” then is it time to look at employing “experts” in people-problems within veterinary teams? Outsourcing the more challenging of these interactions to people with that precise skillset?

Introducing Veterinary Social Workers. Veterinary Social Workers (VSWs) are qualified and experienced social workers who have undertaken additional training to develop a deep understanding of the human–animal bond (HAB) and the role of veterinary teams, including the challenges they face when navigating complex human interactions.

VSWs provide the time and space to support the implementation of Contextualised Care in contemporary veterinary practice.

VSWs are not new, with a number of institutions around the world offering training programs since the early 2000s. The University of Tennessee is probably the most highly developed program, with around 170 students currently working their way through the Certificate of Veterinary Social Work. Auburn University Alabama, and Denver University also offer VSW programs.

And in Australia, we have pioneers who have been working in this space for several years. Dr Alicia Kennedy, who presented at 2024 ANZCVS Science Week must be acknowledged as our trailblazer. Alicia Social Hearted Vet practice in Victoria utilises VSW and allied social services support for clients and staff at her Cherished Pet Vet Hub.



Fig 2: The role of a Veterinary Social Worker in a Veterinary Practice setting.

In 2022, Veterinary and Community Care (VaCC) was established; a charitable organisation focussed on helping those experiencing vulnerability to access veterinary care for their pets. In order to do this in a sustainable manner, one of the founding priorities was to develop the first training program in Australia for Veterinary Social Workers. VaCC recently received WA State Government funding to enable a pilot program that will commence training the first cohort of five individuals in early 2026. It is expected that these pioneers will commence offering Veterinary Social Work services in late 2026. VaCC plan to use the knowledge, connections and outcomes of that pilot to develop a sustainably funded

recognised training program that meets what is expected to be growing demand for the graduates.

Veterinary Social Workers are uniquely well prepared for helping manage both the outward facing people challenges, such as grief counselling, challenging end-of-life discussions, cultural, age-related or social issues; and the inward-facing challenges such as interpersonal issues, critical incident debriefs, psychological safety audits or general counselling. Think about those clients who genuinely cannot afford to care for their pets, the occasional suspicious domestic violence or cruelty cases or the hoarder who won't desex their cats. What about the poor morale and increasing absenteeism rates permeating our practices? When was the last time you checked your protocols on critical incidents or what you should do when a staff member expresses thoughts of self-harm? Your friendly neighbourhood VSW is well equipped to assist with all of these scenarios.

Then think about the commercial side. How many hours are spent in the average practice managing an exquisitely small number of highly demanding clients that never seem happy and always raise blood pressures when they enter the building? Absenteeism, presenteeism, burnout and "bored-out" are increasing threats to the wellbeing, profitability and sustainability of veterinary practices. Some propose that the fundamental veterinary business model is broken, and the whole industry is under threat as attrition rates increase and the range of services clinics are willing to offer decreases. VSWs may not be the whole solution, but they offer a substantial solution to a big part of the problem, allowing vet team members to focus on the bits they did sign up for, and "pass" on those they did not.

So, Veterinary Science is clearly not actually a Social Science, but perhaps we would be all better equipped as Veterinary Graduates if we received undergraduate training that was more appropriately balanced to the core requirements of practice. In the meantime, or if that is an unrealistic paradigm-shift, Veterinary Social Workers may be the breath of fresh air we need, and the missing piece in Veterinary Teams who are exceptionally well equipped for caring for their patients, but constantly left shattered and frustrated by the things they are least prepared for....the people that are the custodians of those pets.

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Definitions:

- **Contextualized Care:** This approach in veterinary practice emphasizes understanding the unique context of each animal and client. It involves considering factors like the animal's living environment, the client's beliefs and preferences, and any social or economic factors influencing care decisions. By tailoring treatment plans to these specific contexts, veterinarians aim to improve outcomes and enhance the well-being of both animals and their caregivers.
- **Spectrum of Care:** Spectrum of care refers to the range of services and support provided to animals throughout their lives. It encompasses preventive care (such as vaccinations and wellness exams), acute care for illnesses or injuries, and ongoing management of chronic conditions. This concept highlights the importance of offering comprehensive care that meets the diverse needs of animals at different stages of life and health. Spectrum of care encompasses the range of veterinary services and support available to meet an animal's health and welfare needs while ensuring compliance with professional, legislative, and ethical responsibilities of the veterinarian.
- **Informed Consent:** Informed consent involves ensuring that clients fully understand the proposed treatments, including their benefits, risks, alternatives, and costs. Veterinarians provide this information to empower clients to make educated decisions about their pets' care. This process fosters trust and collaboration between veterinarians and clients, promoting ethical practice and client satisfaction.