



# RCVS Mind Matters

## Report of the 5th RCVS Mind Matters Mental Health Research Symposium

Friday 10 October 2025,  
Birmingham, UK

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# Introductory talks from the RCVS MMI Team

**The 5th Mind Matters Mental Health Research Symposium opened with a series of talks from a number of RCVS staff members who work for or have been involved in the Mind Matters Initiative and related projects from the wider Advancement of the Professions Directorate within the College.**

## **Welcome from RCVS CEO Lizzie Lockett**

In her opening remarks, Lizzie told delegates how she had been there from the very start of the Mind Matters Initiative, having been given the task of setting the initiative up and organising the very first research symposium which took place at the University of Edinburgh in January 2017.

She related that, when the College first launched MMI, there were some questions about why a regulator would get involved in mental health and wellbeing when there were charities such as Vetlife helping people.

However, within the [\*Codes of Professional Conduct\*](#) there was a responsibility for veterinary surgeons and veterinary nurses to take steps to address mental health issues that might impair fitness to practise. Therefore it was felt that, as a responsible and compassionate regulator, the RCVS needed to pursue a policy of prevent, protect and support. This included raising awareness of the signs of mental ill-health; signposting people towards sources of support; reducing the stigma and fear around talking about these issues and engaging in help-seeking behaviours; and funding research that could have practical applications in terms of veterinary mental health and wellbeing.

A decade on, she said that there are very few questions about why a regulator would be active in this area and that, where the RCVS led, other regulators have followed.



She spoke about the many activities MMI has engaged in over the past 10 years – including awareness campaigns, national training courses, its annual funding for Vetlife and research grant schemes.

She said the work had changed over the course of 10 years, at first it was about destigmatisation and this was helped by the national conversation moving in a similar direction. Now much of the conversation is around thriving, surviving and living positively with mental ill-health, while still having conversations around difficult topics such as suicide. The Initiative has also ventured into how to incorporate more systemic changes in the culture of veterinary workplaces, for example, through emphasising the need for wellbeing plans in the Practice Standards Scheme (PSS).

She concluded by saying that mental health is a difficult area to work in and that it can be tough, heartbreaking, heartwarming, bleak and rewarding all at the same time, but that she was proud of MMI, its team and all its work so far.

### **Update from Rapinder Newton on recent projects**

Next to speak was RCVS MMI Lead Rapinder Newton on some of the developments within the Initiative over the course of 2025.

She spoke about the publication this year of six 'Applied Mental Health Science' guides on managing stress, anxiety, depression, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD) and perinatal anxiety and depression. These free to download guides (available at [www.rcvs.org.uk/MMI](http://www.rcvs.org.uk/MMI)) are part of a series offering a collection of bitesize content developed by a range of experts in partnership with the MMI team to make high-quality, practical mental health information more accessible across the veterinary professions.

Rapinder added that, to coincide with World Mental Health Day 2025, MMI was also launching two new courses developed in conjunction with the RCVS Academy and experts, on our free online learning platform, on suicide awareness fundamentals and managing mental health in the workplace.



She also spoke about MMI's involvement in the recent 'Let's talk adjustments' campaign, launched in February 2025 with the aim of raising awareness and empowering people in veterinary workplaces to have important conversations about reasonable adjustments, no matter their role, disability or health condition.

### **'Let's talk adjustments' campaign**

RCVS Senior Diversity and Inclusion Officer Lloyd Emeka then went on to give further information about the campaign and how it was co-created with veterinary professionals sharing their lived experience on how they had benefitted from adjustments in their workplaces.



He said there was a great deal of interest in the campaign which culminated in a webinar panel discussion in July featuring occupational and clinical psychologists as well as veterinary professionals with lived experience talking about the importance of adjustments.

The campaign also worked with an occupational therapist to develop a workplace reasonable adjustments guide to assist conversations between managers and employees about adjustments.

In terms of next steps, he said that they were working with academics to develop a health passport which could be used by vets, vet nurses and students and would provide information about the individual's health condition, how it may present at work, and the reasonable adjustments needed to support them.

In terms of key learnings from the campaign, he said it highlighted a need for evidence-based reasonable adjustment content and that having a combination of lived experience and contributions from academic experts brought together rich and diverse perspectives.

Following these speeches Angharad Belcher, the RCVS Director of Advancement of the Professions and Mind Matters, opened the rest of the day featuring 20-minute presentations from researchers working in veterinary mental health.

## Mental health education in veterinary nursing curricula: a multivocality qualitative study of further and higher education

**Dr Jackie Hargreaves and Dr Faye Didymus, Leeds Beckett University, UK**

Jackie and Faye, whose research was part-funded by a Mind Matters Initiative mental health research grant, started their presentation by setting out the case for why their research was needed, saying that veterinary nurse mental health could be supported by integrating information about mental health and psychological safety into their education.



They said that the first stage of their research was to better understand the current landscape for veterinary nursing education and how much teaching about mental health and wellbeing support there was currently in place. While they found some examples of good practice, they also found that mental health principles and support were inconsistently applied across the board.



The second phase involved conducting interviews with veterinary nursing tutors, student vet nurses (SVNs) and qualified vet nurses to find out what's currently being done to support the mental health of SVNs.

### **Some of the key findings from the research were:**

- Taught content around mental health can enhance the mental health of SVNs, confidence in their skills and their willingness to speak up about any mental health issues they may have.
- More contact time between students and tutors had a positive mental health impact on SVNs. Greater amount of contact time was also associated with more opportunity for flexible learning and assessment

opportunities, greater amount of support put in place and better matching and mapping between students and placements.

- The placement environment was a key factor for many SVNs, with the culture of the practice where they were placed impacting their wellbeing. The researchers considered how SVNs might be able to develop advocacy skills so they can call out things that aren't right and speak up for their own needs. It also affirmed the importance of matching and mapping, so that SVNs went to placements that were aware of who they are and their needs.



**Having spoken about some of the key findings, Jackie and Faye set out their recommendations which fell into three broad categories:**

- **Recommendations for curricula and taught content:** Integrate mental health into course learning outcomes; in-person tutor sessions are essential and small groups should be used where feasible; students' assertiveness should be developed to foster positive communication; interprofessional taught content with veterinary surgeons.
- **Training and support:** Embed mental health support in practice settings for support on placement; mandatory training for all delivering and supporting mental health content, including clinical supervisors; mental health awareness training for veterinary surgeons and practice managers.
- **SVN mental health and disability assessment during education:** student health passports outlining needs and contact information; consider fitting placements to students' needs; cascade relevant information regarding students' needs to tutors and clinical supervisors.

## Mental health, alcohol use behaviours and barriers to help seeking within UK veterinary practice: the MAB-VET study

**Dr Jennifer Seddon and Dr Olivia Cormier MRCVS, Oxford Brookes University, UK**

Jennifer and Olivia started their talk by talking about the background behind their study which received support from an MMI Mental Health Research Grant in 2024.

They said that, while there wasn't much recent data about alcohol use in the veterinary professions, historic data suggested there were higher rates of alcohol consumption compared to the general population and that there was, therefore, increased risk of alcohol-related harms. There was also some evidence that there was a 'drinking culture' within the professions which encouraged social drinking with colleagues. However, there was a flipside to this as it was perceived that if people felt their drinking habits had become problematic, there was stigma about seeking support for this and a perceived poor impact on careers and career progression.

The overall aim of their research was to therefore understand what barriers existed and use this to develop targeted interventions to assist veterinary professionals in seeking help for problematic drinking.

The research was conducted via an online survey of UK veterinary professionals who had consumed alcohol within the last three months and they were asked to give their alcohol intake and to describe their mental health more generally. Some 652 people completed the survey – of whom 62% were veterinary surgeons, 30% were vet nurses and 8% had other roles within the team (for example, veterinary care assistants, practice managers and receptionists).

The survey found that 40% of participants were drinking at harmful levels and were therefore at risk of alcohol harm.



While the majority of survey respondents were women, it found that harmful levels of alcohol intake were disproportionately found in older men. Higher alcohol risk was also associated with lower overall wellbeing and higher psychological distress, suggesting that ‘drinking to cope’ in fact may amplify harms.

The study considered the behaviours associated with lower alcohol risk and found that having knowledge of low-risk drinking behaviours and having self-efficacy (for example, the ability to turn down drinks) were factors, with lower risk drinkers also reporting that their drinking was not habitual nor used to ‘cope’ with the pressures of the job.

Lower risk drinkers were also more amenable to help-seeking behaviours, recognising when they might need help, exercising self-compassion and being capable of talking about alcohol-related issues if they felt it would help.

The research found that barriers to help-seeking associated with higher risk drinkers included self-stigmatising views and perceiving that colleagues would judge them in a more negative light were they to talk about problematic drinking behaviours.

In terms of the implications of the research, Jennifer and Olivia said that intervention strategies on harmful alcohol use should consider the relationship between poor mental health and greater alcohol risk, and how drinking to cope or to enhance mood also predicts greater alcohol risk.

They said that the following workplace strategies should focus on how to reduce stigma, increase awareness of and improve attitudes towards sources of help, change cultural/ workplace attitudes towards drinking, and promote healthy coping strategies for stress rather than drinking.

After their presentation, Jennifer and Olivia were asked if there was an association between perfectionism and alcohol use. They said there was some evidence from the research that alcohol use correlated with ‘self-critical’ views.



## Nursing matters: a mixed-methods study of workplace mental health in UK veterinary nurses and nursing students

**Dr Naomi King, Research Assistant, Royal Veterinary College, UK**

In introducing her research, Naomi said her motivation for conducting the project was the fact that there is generally less data and research available about the mental health of veterinary nurses and student veterinary nurses as compared to veterinary surgeons, with 13 empirical papers and five studies suggesting some experienced poor mental health.

Therefore her research was to find out to what extent RVNs and SVNs experienced poor mental health and why that might be the case via a questionnaire-based survey and follow-up interviews.

The questionnaire received 669 responses, the majority of them being young female RVNs who were from England. From the analysis, the survey found that respondents had poorer mental health than the general population – with almost half having clinical levels of depression, plus higher levels of anxiety.

Most concerningly, she said that the questions about suicide and self-harm found that around half of respondents had harmed themselves without suicidal intent, a third had suicidal ideation, and around 5% of respondents had attempted suicide.

The survey had also ended with an open question inviting respondents to let the researchers know about any other issues affecting the mental health and wellbeing of the profession.



Common responses in this section included long working hours and high workloads, poor work-life balance, physically and emotionally draining environments, rude clients and not feeling valued in their work.

Follow-up interviews were conducted with 15 veterinary nurses and two SVNs to try and dig into some of the survey data. One theme that came out of the interviews was of a strong feeling of professional identity and the positives and negatives that can arise from this. On the one hand, being a part of a caring profession with a strong sense of self was seen as a positive for mental health, but also there was the possibility that you could get drowned by work and end up losing the sense of yourself that is independent of professional identity.

The interviews also identified that there was sometimes a mismatch between vet nurses' own positive sense of professional identity, and that of the public and other veterinary professionals who might see them as low-skilled and low-status.

In conclusion Naomi said that mental health for veterinary nurses and SVNs was not a binary concept of good or poor, but was constantly fluctuating with members of the profession having to learn how to negotiate, maintain and balance their mental health and wellbeing to avoid a 'tipping point'.

She found that members of the profession play an active role in how their professional and personal identities are managed and perceived, but that they needed support in developing a more integrated identity that respected their identification with the profession alongside their individuality, as well as coping with and changing undesirable external perceptions.



## “For three of my four miscarriages, I was at work”: workplace management of UK veterinary professionals’ miscarriage, infertility and assisted fertility (MIAF)

**Dr Zoe Belshaw FRCVS, Consultant, EviVet Research Consultancy, UK**

Zoe introduced her research by saying that there is evidence that healthcare professionals, including veterinarians, may be at increased risk of miscarriage and infertility compared to the general population due to the fact that, for career reasons, they tended to try and start families later than average and because of stress. Either way, miscarriage and infertility could lead to profoundly negative impacts on mental health.

She said that the aim of her research was to investigate how the working environment, management and colleagues impacted female veterinary professionals experiencing MIAF.

The study was conducted via an online questionnaire and also sought to include the partners of those experiencing MIAF. The questionnaire collected information about respondents demographics and workplace type and allowed them to self-define their experiences, as well as give information about how long ago the experiences took place, if and how they were supported, and ideas for improvement.

Some 545 respondents shared 671 MIAF experiences and, of these, 96% were female, with two-thirds of respondents veterinary surgeons and one-third veterinary nurses. In terms of experiences, 55% of the experiences took place in the last three years (although some happened more than 20 years prior) and the majority of experiences related to early-term miscarriages.



Regarding the overall 671 experiences, the majority of respondents did talk to someone at work about what they had or were going through, but 25% of respondents said they didn't tell anyone out of fear of discrimination or it being handled badly.

In terms of experiences of workplace support – 36.6% had no support, 27.9% had paid time off for appointments, 19.1% were allowed to adjust their work duties, 13% had unpaid time off for appointments, 11.3% had a change in work patterns, 9% had unpaid compassionate leave and 7.1% had access to counselling. Please note – these percentages include those who had not told anyone at their workplace about their MIAF experiences.



Zoe said the research found a strong correlation between how managers responded to experiences of MIAF and whether or not the employee remained at the workplace. Some 23% of respondents said they left or considered leaving their role because of how badly it was handled. This was more likely to be the case for those undergoing assisted fertility treatment, while those who got good support were more likely to stay at the workplace.

Some of the bad experiences cited including having to take annual leave for appointments both during and after baby loss, as well as the leave they were given being unpaid or too short. Specific workplace policies for MIAF were often absent or there were contested elements to it.

On the flipside, respondents said that veterinary workplaces that handled their MIAF experiences well were ones where there was a culture of friendship and empathy and where their needs were accommodated with flexibility and where they were treated as an individual. For example, being allowed to attend appointments on a paid basis even at short notice.

In terms of recommendations arising from the research, Zoe said that more flexible MIAF policies were needed, including the ability to more easily take time off at short notice, for longer periods of paid leave to be given and for this leave to be 'guilt-free'. She said that the option of a phased return to work after losses, as well as more stringent risk assessments for those trying to conceive, were also cited by respondents as suggestions for improvement.

## Confronting taken-for-granted truths – a systematic review of risk and protective factors associated with suicide risk in veterinary professionals

**James Glass MRCVS, Postgraduate Researcher (PhD), University of Glasgow, UK**



At the outset of his presentation, James said he would be covering difficult topics around suicide, suicide risks, and suicide methods (further details about sources of support for those in psychological distress can be found on [our website](#)).

He introduced his research by setting out what we currently know about veterinary professionals and suicide risk. He said that the evidence was that veterinary surgeons are three-to-four times more at risk of death by suicide than the general population, but also that this was based on old data, with the last systematic review having taken place 20 years ago. He said that a rigorous approach to research in the area is lacking and that little work on suicide risk for others inside the veterinary community, such as veterinary nurses, is lacking.

However, he said it wasn't just about bringing the data up to date, if the profession wanted to talk about the risk and protective factors for suicide and wanted to put in place intervention strategies for people in crisis, then clear and evidence-based information was needed.

Setting out with two research questions – what was the prevalence of suicidal thinking and behaviour, and what were the psychosocial factors that both increase and decrease risk, James undertook a review of 54 eligible studies about veterinary suicides from across the world. Of these studies, the majority (36) were cross-sectional (ie analysing a snapshot of data from a cross-section at a particular point in time) and 14 were retrospective studies focusing on suicide deaths, with just one longitudinal study.

He said that the retrospective studies, which covered eight different countries and a period of time dating from 1973 to 2021, could give an idea of prevalence, albeit the data presented an incomplete picture. With this in mind he said that there had been at least 670 deaths by suicide within the international veterinary professions – of these 534 were veterinary surgeons. Based on an Australian study there were seven deaths by suicide of veterinary nurses and, according to a US-based study, there were 124 deaths by suicide of veterinary technicians/ veterinary care assistants and five veterinary students.

James said there was some challenges with the data, including the fact that it was drawn from a small profession and dataset for which suicide is still a rare event, making analysis and drawing firm conclusions from the data difficult. He said that suicide was also recorded differently across different jurisdictions and was sometimes recorded as accidental or 'misadventure'. Even with these challenges, James said it could be concluded that veterinary professionals were at higher risk of suicide, with women at higher risk than men, which is contrary to the pattern in the general population.

He said that access to lethal means by which someone might take their own life was a key factor in his research. While suicidal thoughts were often very tense but fleeting, he said that the fact many veterinary professionals had an easy access to lethal means meant they were more likely to successfully take their own lives than people who might not have this access.

From the research of the cross-sectional studies, James identified the following risk factors for suicide: low levels of support from colleagues; burnout; substance misuse; personal mental health issues; and difficult life events, including client stress. Identified protective factors preventing suicide included strong peer and colleague support, support-seeking behaviours, feeling in control in their jobs, and having coping strategies in place.

James concluded by talking about the next steps in his research. He was currently analysing the results of a survey he conducted on suicide risk which had more than 2,000 participants (including 400 nurses and 180 students), and which used validated psychological measures to explore protective as well as risk factors. The second step is a qualitative study to investigate the factors that lead suicidal thoughts to become suicidal acts.

## Organisational contributors and intervention strategies to address burnout in veterinary nurses

**Angela Chapman RVN, Senior Lecturer in Veterinary Nursing, La Trobe University, Australia**

In introducing her research, Angela said that she wanted to undertake this study because, while she saw both veterinary and veterinary nursing colleagues around her experience burnout, she struggled to find information that would help her support them. She said that, where there was information, it tended to be about burnout in veterinary surgeons, and not address the specific reasons and interventions for veterinary nurses.

She then went on to give an overview of some of the key characteristics of burnout, including emotional exhaustion, a sense of depersonalisation from the role which leads to negativity and cynicism, and a drop in the sense of personal accomplishment, which leads to a perceived lack of aptitude in their job.

All these characteristics could be experienced individually or in combination and, she added, that burnout existed on a continuum of three dimensions – feeling ineffective, feeling overextended and feeling disengaged. Furthermore, although burnout is linked to chronic workplace stress, individualised factors such as age, gender and role meant that the drivers of burnout will be different.

She said the aim of her study was to gain an understanding of burnout in VNs and then develop a set of evidence-based burnout reduction strategies that could be used in veterinary workplaces.



The first stage of the research was conducted via an anonymous survey to determine common burnout profiles for veterinary nurses, determine what in the workplace contributed to burnout, and explore the VN perspective on burnout contributors.

The survey received 187 responses from nine different countries and the results revealed that there was a greater preponderance of burnout across all three dimensions for veterinary nurses as compared to other occupational groups. Responses to the survey also identified high workloads and lack of workplace support to be the key contributing factors to burnout, with existing workplace wellbeing initiatives being mostly ineffective.

The second stage of her research was a Delphi study to determine what some of the current barriers to addressing burnout were and to determine the feasibility of potential solutions to the contributing factors. An expert panel of VN leaders and wellbeing experts were recruited to review the evidence provided by 40 anonymous participants (of whom 32 completed the study) from five different countries.

The panel identified the external and internal barriers to addressing burnout such as cultural norms, regulation, and the characteristics of the work place and team and agreed upon 39 recommended solutions that would help address the burnout risk factors.

The third ongoing stage of the study is a workplace survey study, developed for implementation in five or more participating clinical practices to help identify burnout risk factors and evaluate how the organisational climate may contribute to these.



## Staff experiences of teaching neurodivergent veterinary students in clinical learning environments

**Dr Kirstie Pickles MRCVS, EDI Lead, Harper-Keele Veterinary School, UK**

Kirstie introduced her research by saying that neurodiversity awareness in clinical learning environments – which include extra-mural study placements – was variable. Therefore, a better understanding of the experience of teaching neurodiverse students in clinical settings was needed in order to better support both staff and students.

A survey was therefore conducted with staff who taught final year clinical rotations at the University of Nottingham – where Kirstie was working at the time – with follow-up semi-structured interviews. There were some 32 responses from staff, of whom 25% themselves identified as being neurodivergent.

A vast majority (94%) of respondents agreed or strongly agreed that neurodivergent students needed more support, but less than half thought that they were equipped to adequately support these students, and 90% agreed or strongly agreed that they would benefit from more specific training.

Kirstie said only 58% could name specific types of support given to neurodivergent students and they identified barriers to implementation of specific support as being large group sizes, staff workloads and the demanding aspects of their jobs.



The follow-up interviews were conducted with 12 members of staff who were asked what the negative impacts of lack of support were in the learning environment and they identified communication challenges, certain learning differences and issues with structure and expectations in relation to neurodivergent students. There was also a lack of awareness around the positive aspects of neurodiversity and what it can bring to veterinary practice.

Kirstie said overall the staff who were interviewed identified lack of resources in terms of time, staffing levels and available training as an issue, and the vast majority of them thought that neurodiversity training should be mandatory in higher education, although said that this would be difficult to implement and police in clinical practice settings.

In conclusion, Kirstie said that, from her findings, what was needed was more support and protected time from line managers and management at veterinary schools to allow staff to undertake training on neurodiversity.



## How does attendance at Schwartz Rounds impact veterinary professionals' experience in clinical practice?

**Dr Emma Ormandy MRCVS, Head of Veterinary Education, University of Liverpool, UK**

In starting her presentation about the research, which was conducted by Dr Rob Campbell MRCVS under her supervision, Emma set out what Schwartz Rounds – named after US healthcare lawyer Ken Schwartz and licensed in the UK by the Point of Care Foundation charity – entailed.

She said they are defined as a structured, confidential forum where all staff can discuss the emotional and social aspects of working in professions such as healthcare, social care and veterinary care. It has been used in the NHS since 2009 but is a relatively new concept in the veterinary sphere.

Setting out the structure of the Schwartz Round, she explained that they are voluntary and that no clinical or expert input is sought, but that it gives the opportunity for professionals to talk uninterrupted about their experiences and for the discussion then to be opened up to the wider audience.

She said their research set out to evaluate how attendance at Schwartz Rounds impacts the experience of veterinary professionals working in clinical practice, and if the proven benefits of the method in human healthcare can translate into the veterinary professions.



The research was carried out via semi-structured interviews with six veterinary surgeons and four veterinary nurses all of whom had attended at least two Schwartz Rounds while working in clinical practice.

The interviews demonstrated that the benefits of Schwartz Rounds were threefold: enabling compassion, empowering vulnerability and enhancing organisational insights.

In terms of compassion, their research found that hearing others' stories allowed self-compassion, compassion towards colleagues and compassion towards clients, and also enhanced being able to listen to those experiencing distress.

The interviews also demonstrated that Schwartz Rounds created a psychologically safe space for 'professional masks to lift' and that it was particularly beneficial when leaders and managers showed vulnerability as it helped humanize them and encourage other team members to seek help.

In terms of organisational benefits, the Schwartz Rounds enabled meaningful colleague connection took place that otherwise would not have happened, and also improved inter-role understanding, for example, between clinical and non-clinical staff.

Emma said that, in conclusion, their research had shown that more veterinary teams should be introduced to the concept and its benefits - which would also help grow the evidence base - and that staff should be given access to Schwartz Rounds training and support to ensure they are successful. Furthermore, she said that Schwartz Rounds needed a top-down approach and institutional buy-in, but that they also shouldn't be seen as a panacea to veterinary mental health. Finally, more research was needed to understand barriers to engagement, as well as longitudinal studies to understand impact over time.



## Announcement of 2025 mental health research grant recipient

**Ahead of the summary and closing remarks, Angharad Belcher, RCVS Director for Advancement of the Professions and Mind Matters, announced the recipients of this year's Mind Matters mental health research grants, awards made to help further knowledge and provide implementable solutions around veterinary mental health and wellbeing.**

The grants come in two tiers – the £5,000 Discovery Grant is perfect for postgraduate or early career researchers looking to kick-start a small-scale study, while our £15,000 Impact Grant is aimed at more established researchers working on more substantial/medium-sized projects.

The £5,000 Discovery Grant was awarded to a research project evaluating the implementation of reasonable adjustments in addressing mental health and neurodivergence for student veterinary nurses during clinical placement. The project is being carried out by Dr Heather Imrie MRCVS, Dr Lauren Cooke MRCVS, Dr Gregory Steele MRCVS and Nicola-Jayne Johnson RVN, at Nottingham Trent University. As part of the research, they will explore the implementation of the new RCVS-produced [Embracing Reasonable Adjustments for Student Veterinary Nurses guidelines](#).

The £15,000 Impact Grant has been awarded to Professor Elinor O'Connor from the University of Manchester, and Dr Kevin Teoh from Birkbeck, University of London. They will use the funding to fuel their project researching organisational interventions to support wellbeing in veterinary workplaces.

Applications for the next round of Mind Matters mental health research grants open early 2026. For more information on the grants or applying, please email [researchgrants@rcvs.org.uk](mailto:researchgrants@rcvs.org.uk) or visit the [Mind Matters website](#).



## MMI Research Symposium 2025 Evaluation

### Delegates

Question	Response
Was this your first time attending the MMI Research Symposium?	<b>93%</b> of those who responded said it was their first time attending the MMI Research Symposium.
How would you rate your 2025 MMI Symposium experience overall?	<b>100%</b> of those who responded rated their overall experience as either good or excellent
To what extent do you agree or disagree with the following statements? <i>The event met my expectations</i> <i>I learned something of value from the research symposium</i>	<b>100%</b> of those who responded either agreed or strongly agreed that the event met their expectations <b>100%</b> of those who responded either agreed or strongly agreed that they learnt something of value from the research symposium
How relevant were the research talks to your interests or professional needs?	<b>100%</b> of those who responded said that the research talks were either relevant or extremely relevant to their interests or professional needs.
How would you rate the quality of the speakers/presenters	<b>100%</b> of those who responded rated the quality of the speakers/presenters as either good or excellent
I had an opportunity to engage with the poster presenters at the event	<b>86%</b> of those who responded said they'd had the opportunity to engage with the poster presenters at the event
I had an opportunity to engage with the exhibitors at the event	<b>83%</b> of those who responded said they'd had the opportunity to engage with the exhibitors at the event
Would you recommend attending the next Mind Matters research symposium to your colleagues and professional network?	<b>100%</b> of those who responded said they would recommend the next MMI Research Symposium to their colleagues and professional network.

### Speakers and exhibitors

Question	Response
How would you rate the communication and support provided by the RCVS team prior to the event?	<b>100%</b> of those who responded rated as either good or excellent
How would you rate your overall experience as a speaker/exhibitor on the day?	<b>93%</b> of those who responded rated as either good or excellent
Based on your experience as a speaker/exhibitor would you recommend attending the next symposium?	<b>100%</b> of those who responded said yes

## Closing summary and 10th anniversary celebrations

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**As the founder of Mind Matters a decade ago, RCVS CEO Lizzie Lockett was given the opportunity to give some closing remarks on the day and the insights that were presented by the various researchers who shared their work.**

She said that, at the first Mind Matters symposium they struggled to get enough veterinary mental health researchers but that now they are oversubscribed. However, it was not just about data and numbers – the story of the Mind Matters Initiative has been based in the stories of the people who have engaged with and been part of it.

Lizzie then went on to pick out her key takeaways from each of the research presentations given on the day.

For Jackie and Faye's research she was struck by the importance of relations between students and staff members and how the continuity of relationship is important for wellbeing.

For Jennifer and Olivia's alcohol use research, she said it was interesting how, in a community with higher levels of social alcohol use, there was greater stigma attached to problematic use.

For Naomi's research she said there was some very sobering statistics about suicide and self-harm and what struck her was the strength of feeling around professional identity.

On Zoe's research, the stories of infertility and baby loss resonated with her and that while we can't change people's biology, we can change how we treat people in the workplace.

She said that James' research brought to light the lived experience behind the suicide data. It was key that when lethal methods were less available, people were more likely to survive – if there are off-ramps and access to means is reduced then lives will be saved.

Regarding Angela's research on burnout, she said that while a lot of the problems were well-established, she was particularly glad that the research focused on potential solutions and their implementation.

**“Symposiums like this are absolutely essential to share current practice, to share what we know in terms of the research literature and to come together as a group with collective interests in mental health and kind of forging a way forward to see what that should look like and how we can get there together.”**

Dr Jennifer Seddon, Associate Professor in Psychology, Oxford Brookes University

She said Kirstie's work was genuinely inspiring, especially as there was such an appetite to support people around neurodiversity in higher education. However, she said that with the university sector being squeezed people working in it had less time than ever.

Finally, with Emma's research on Schwartz Rounds, she said it demonstrated the power of silence and reflection and how they enable compassion for individuals, colleagues and clients, even under difficult circumstances.

She finished by saying she was excited for the next 10 years of RCVS Mind Matters and that the initiative was in safe hands with the team and with its inclusion in the new Strategic Plan. She praised all the researchers and exhibitors, as well as the Mind Matters and wider RCVS staff team who had delivered the event.

**“Being based in Australia, the Mind Matters Initiative is really leading the way in mental health research and progression internationally. I think it's doing a fantastic job of creating a safe space and creating change within the veterinary profession to make people feel safe to say ‘you know I'm not doing ok’, but also really promoting research and change within this area, and supporting positive movements towards improving mental health for people that are working within the profession.”**

Angela Chapman RVN,  
Senior Lecturer in Veterinary  
Nursing, La Trobe University

## Key take-aways from the Symposium

- 1 Make time for non-clinical CPD:** utilise free courses on the [RCVS Academy](#), and consider non-clinical members of the team who don't have access to the Academy. Could you do team CPD together?
- 2 Participate in research:** Interested in further knowledge and understanding into veterinary mental health. Look for opportunities to attend research webinars, engage in surveys or consider applying for an [MMI Mental Health Research Grant](#).
- 3 Workplace policy audit:** Look at your workplace policies around sickness and absence, fertility and baby loss, paternity/maternity/adoption leave, suicide prevention, as well as whether staff are paid for taking medical appointments. Speak to your people team (HR) about where improvements could be made.
- 4 Signposting and safeguarding:** help seeking should be promoted. Ensure that you are aware of what support resources are available through your workplace (for yourself and others). Ensure these are frequently promoted and can be easily found.
- 5 Embedding everyday conversations:** Consider how you utilise everyday working practices in your organisation to reflect on approaches and support individual mental health and wellbeing (this might include 1:1s, annual reviews, team meetings, reflective sessions, organisational away days, quarterly temperature checking)
- 6 Awareness events and campaigns:** Utilise key awareness events to reduce stigma, promote help seeking behaviours and further understanding of stress, burnout and mental health problems (you might find Stress Awareness Month, Mental Health Awareness Week, World Suicide Prevention Day, World Mental Health Day useful).
- 7 Supportive management:** Invest in your leadership and management skills - know how to support your teams when they most need it is necessary - not only due to legislative requirements, but also because of the impact it has on staff retention and wellbeing.
- 8 Meaningful action:** Employers - do not rely on fruit baskets as your wellbeing strategy. Consider meaningful steps to minimise workload pressures and help reduce long term impact on employees' mental health.

# Help & support

**If you, or someone you know is struggling with their mental health there are sources of support available.**

**Samaritans** - available 24/7 and provides a safe place for anyone, whatever you are going through. **Call 116 123** or email: **jo@samaritans.org**

**Shout** – available 24/7 and offers a free, confidential text messaging service for anyone who is struggling to cope. **Text SHOUT to 85258**

**If you need urgent help for your mental health** – call **NHS 111** in England, Wales and Scotland, or Lifeline on **0808 808 8000** in Northern Ireland. You can also contact a GP surgery and ask for an emergency appointment.

**If you are in crisis or need immediate medical help** call **999** and ask for an ambulance or visit your local A&E department.

## Veterinary specific help and support

**Vetlife helpline** – available 24/7 to listen and offers a confidential, safe, and non-judgmental space. Call **0303 040 2551** or visit <https://helpline.vetlife.org.uk> to register and contact via email.

**VetSupport** – offers a confidential, empathetic, and non-judgmental listening ear across UK and Ireland. Email **info@vetsupport.me** and they guarantee a reply within 24 hours

**Prof Con Investigation Support** – ran by Vet Support, they also provide a confidential support service for those going through RCVS Professional Conduct Investigation process. You can contact any member of the Vet Support team on their direct email address, or email **info@vetsupport.me** and they guarantee a reply within 24hrs.

# RCVS Mind Matters Mental Health Research Symposium 2025 Report

10 | YEARS  
ANNIVERSARY



## Contact details

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