

Pet owners' feedback on psychological support service in an Italian veterinary hospital

Acta Veterinaria Hungarica

70 (2022) 2, 127-131

DOI

10.1556/004.2022.00011 © 2022 Akadémiai Kiadó, Budapest MICHELA CAMPIGLI¹, GIULIA STRIZZOLO², TOMMASO FURLANELLO¹ and STEFANIA UCCHEDDU¹* •

- ¹ San Marco Veterinary Clinic and Laboratory, via dell'Industria 3 Veggiano, Padova, Italy
- ² Fondazione Ado Hospice, Ferrara, Italy

Received: 21 October 2021 • Accepted: 27 April 2022 Published online: 23 June 2022

ABSTRACT

The emotional stress experienced by pet caregivers, induced by negative diagnoses, clinical problems, and/or long-term therapies should be taken into serious consideration by the veterinarians to prevent these individuals from the risk of experiencing incapability of dealing with the great burden and the eventual reduction of compliance. Understanding the client's affective state may enhance the veterinarian's empathic response and effective communication. To understand better the unmet needs of clients, we collected data on service requests at the clinic and emotions that caregivers felt in the veterinarian setting. Understanding these difficulties may represent a first step to initiate the development of a psychological intervention targeting problems experienced by the caregivers. Assuming these difficulties according to the service requested for the pet, the owners might be interested in psychological support provided directly by the veterinary hospital. Our survey showed that a large percentage of owners expressed feelings related to caregiving in the veterinary setting, irrespective of the type of assistance needed, including apparently easy procedures. At the same time, they expressed a strong intention to receive a professional support. However, the crucial role of the psychological support is still difficult to accept even when it can be perceived as a right choice.

KEYWORDS

psychological intervention, caregivers, pet, veterinary setting, veterinarian

INTRODUCTION

The caregiver burden is a multidimensional emotional distress encountered while providing informal and non-professional care for someone with an illness. This emotional distress includes a range of negative feelings and experiences such as feelings of guilt, anticipatory grief, anger even toward the care recipient, not having enough time to manage responsibilities, fear of what the future holds, or feeling that one's health or social life has suffered due to caregiving (Britton et al., 2018). Many health care professionals have a lack of understanding (or lack of empathy) of difficulties or disenfranchised needs among caregivers (Choi and Seo, 2019) and the caregiver may became, in turn, an unrecognised patient (Adelman et al., 2014). The emotional impact due to caregiving could alter the quality of caregiving itself. This is expressed in the form of caregivers' distress exceeding psychological resources and even influencing quality of life and well-being (Britton et al., 2018). Veterinarian-pets' caregivers interactions during medical examination and treatment of a pet mirror many aspects of the physician-humans' caregivers (Spitznagel et al., 2017): dogs are considered members of the family in the Western World since people develop strong emotional connections (Pirrone et al., 2015). Not surprisingly, the caregiving burden has been studied in people that take care of pets (Goldberg, 2017; Spitznagel and Carlson, 2019), and this burden may be linked to poorer psychosocial functioning (Spitznagel et al., 2017).

The caregivers of pets may experience emotional stress induced by negative diagnoses, clinical problems and long-term therapies. The veterinarians should take into serious

RESEARCH ARTICLE



* Corresponding author. E-mail: comportamento@sanmarcovet.



consideration the risk of experiencing such burden and the consequent reduction of compliance (Goldberg, 2017).

Understanding a distressed client's affective state might be the key to the veterinarians' enhanced empathic response and effective communication (Lummis et al., 2020). Although the veterinarian primarily focuses on the pet's health care, it is also important to consider the owner's experience since it may help to achieve better compliance and higher efficacy in the therapy Spitznagel et al. (2019). Identification of specific variables within the family system might be important when designing methods of prevention and alleviation of caregiving burden (Uccheddu, 2021). Even if the caretaking burden should be considered in the veterinary setting, the veterinarian is not the professional figure with the appropriate know-how. Psychological counselling is useful in providing insights into the decision making and coping processes for chronic illness, end-of-life (EOL) care and mourning. The specific roles of counselling psychologists in health care have been widely described (Herman et al., 2007). Psychological counselling is a powerful tool in the caregiving burden. However, it is not yet clear how much if at all the caregivers might appreciate this support in the veterinary setting. Qualitative research can make important contributions to understanding these subjects and help explain the complexity and the context-dependent nature of the experience of family caregiving. Recent work indicates that companion animal owners experience depressive symptoms after a diagnosis of cancer in the animal, but caregiver burden might be related not only to diagnoses but also to the challenges presented by caring for a sick pet (the companion animal's treatment plan) or related to anticipated bereavement, so-called 'anticipatory grief' (Shaevitz et al., 2020). To understand better the unmet needs of clients, we collected data on service requests at the clinic and emotions that caregivers felt in the veterinary setting. The first step to develop a psychological intervention to target the problems experienced by the caregivers might be to fully understand the difficulties experienced by them. We hypothesised that the pet owners might be interested in psychological support provided directly by the veterinary hospital according to the service requested for the pet.

MATERIALS AND METHODS

Participants

The setting for this survey was the waiting room, at the San Marco Veterinary Clinic (Veggiano, Italy). The Clinic normally receives 7,000 dogs and 1,700 cats each year. When a patient arrives at the entrance, s/he is first seen by a triage nurse who collects data. Emergency, ambulatory pathologies and surgical ambulatory pathologies share the same waiting room that is separated into 'dog' and 'cat' subunits. A psychologist is offered to be enrolled in the survey during the waiting time. Participants were given written information about the aim and the procedures of the study and the right to withdraw at any time. In addition, they were assured that

the survey was anonymous, and confidentiality would be maintained by the researchers. Before data collection, a written informed consent was obtained from each participant. The questionnaire was in Italian. The recruitment took part from January to March 2019.

Survey

Structured and open-ended interviews were used to examine difficulties experienced by caregivers of pets, with a thematic analysis approach (Woodford et al., 2017). The survey included questions on socio-demographic data, on the emotional experiences of the owner during the disease and the care of their pets, and on their opinion of having a psychologist for their support. Three questions have been developed using a rating scale from 0 to 4 (never to always, with intermediate values). Two questions required open answer, in order to collect useful points of view for future research in this area. To improve transparency of analysis, verbatim extracts of data are presented within the results.

Statistics

For comparisons in demographic characteristics between owners, Spearman correlation was considered for non-parametric data. Shapiro–Wilk test was used to check the normal distribution of data. Values of P < 0.05 were considered statistically significant. Analyses were carried out using SPSS 24 (IBM Corp. Released 2016. IBM SPSS Statistics for Windows, Version 24.0. Armonk, NY.

RESULTS

We collected answers from 268 Italian dog/cat owners (168 females and 100 males) with a mean age of 42.00 ± 10.70 (SD) years (range 20.00-70.00). However, 12 questionnaires were not used since they were incomplete, thus only 256 questionnaires (from 161 females and 95 males). were included in the analysis The demographic data are summarised in Table 1.

The proportion of dog owners was 76.9%, and the cat owners accounted for 12.5%. The remaining 10.6% of people

Table 1. Demographic data of 268 Italian dog and cat owners

Demography	Range	%
Age	20-30	9.1
	30-40	16.1
	40-50	28.3
	50-60	27.2
	60-70	14.6
	70+	4.7
Size of household	Alone	12.1
(number of persons)	2	51.0
	More than 2	36.8
Educational level	Primary school	1.2
	Secondary school and high school	76.3
	University	22.8



Table 2. The proportion of the services requested at the clinic. Internal medicine was considered without the inclusion of oncology

Service	Frequency
Internal medicine	110
Oncology	38
Ophthalmology	5
Surgery	3
Neurology	22
Cardiology	13
Dermatology	22
Emergency	28
Odonto-stomatology	4
Orthopaedics	5
Ultrasound	3
Psychiatry	3

questioned had at least one of both animals at home. As shown in Table 2, the people visited the clinic for various reasons. The answers of the survey are presented in detail in Table 2.

Answers to the questions are reported in Fig. 1. In question 1, females showed higher frequency of anxious, worried, and upset feeling (P=0.001). The feelings did not change according to the service requested (P=0.107; r=0.188). A positive correlation was shown between scores of question 1 and scores of question 2 (P=0.01; r=0.161). An even stronger, but negative correlation was shown between question 1 and question 3 (P=0.000; P=0.000); P=0.0009.

Questions did not show any correlation with number of family members or educational status.

DISCUSSION

The questionnaire was developed to gain an understanding of the needs, burden and problems experienced by pets' caregivers. Two questions were open-ended and structured around the possibility to receive psychological support, with questions open and flexible.

The results showed an interesting point of view in as much as the caregivers felt more anxious, worried and upset for the health of their pet, the more they wanted to get also a professional help. The negative feeling related to the health of the pet correlated with the wish of receiving a professional support. However, even if most of the caregivers confirmed to feel anxiety, worries, and negative impressions, when it came to the open answers, the psychological support was still far from being considered as a widely useful tool. The pet owners reported to deal privately with negative feelings ('I think that it is normal/physiological to feel these emotions'; 'I can deal with my feeling by myself; 'I share my feelings with my relatives'), and the psychological support was still supposed to be able to create an embarrassment ('I feel ashamed to ask for a psychological support'). The pet owners trusted the veterinarian's support ('I trust the support of my veterinarian') even from the psychological point of view. However, the veterinarians are not trained to

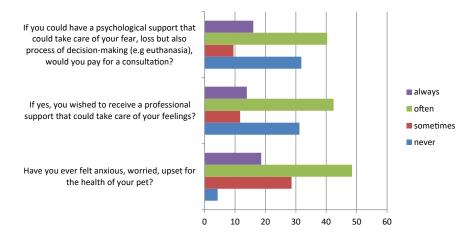


Fig. 1. The relative frequencies of answers and the open-ended questions

Could you give reason for your reply, in case you did not want a professional support that could take care of your feelings, even you felt anxious, worried or upset for your pet

What do you think about people that request a psychological support in case of important decisions such as euthanasia, oncological care, etc.?

Open-ended questions

I can deal with my feeling by myself.

I trust in the support of my veterinarian.

I share my feelings with my relatives.

I feel ashamed to ask for psychological support.

I would start taking drugs/alcohol.

I think that it is normal/physiological to feel these emotions.

They took the right choice. Protracted illness and loss of a pet are comparable to what happens to human beings.

They should take care of their feeling on their own, even if it is difficult to deal with the pain.



recognise or address significant human suffering; furthermore, providing support for caregivers' burden or to people with poor psychosocial functioning is not within a veterinarian's skills or legal scope of practice (Goldberg, 2017). However, in the veterinary settings, different feelings have to be managed every day (Spitznagel et al., 2018). Exploration of caregiver burden within a veterinary setting is the first step, even in evaluating the impact of client emotional distress on the veterinarians' wellbeing (Perret et al., 2020; Chigerwe et al., 2021).

In the literature on caregiving, it has been widely reported that both the psychosocial support (counselling and psychotherapeutic interventions) and multicomponent interventions (veterinarian support, caregivers support groups) should be adapted to the specific needs of the caregiver. The psychosocial support might be useful to alleviate the daily load of caregiving as widely reported in the human literature (George et al., 2020). These may be effective approaches in enhancing the quality of life and in reducing the burden in human caregivers (Britton et al., 2018). More research is needed to determine whether such interventions are beneficial for the companion animal caregivers as well (Britton et al., 2018). Nonetheless, in our questionnaire nobody considered the psychological support such as an 'exaggerated support', even if just hardly over half of the participants confirmed the willingness to accept a professional support.

Psychologists have the knowledge and skills to help people who are involved in animal health care at varying levels, including practicing veterinarians (Uccheddu, 2021), animal health technicians, nurses, veterinary clinic managers, and receptionists but also caregivers. There are a number of ways in which psychologists can take care of fear, loss and grief but also the process of decision-making (e.g. euthanasia). Psychologists can help both professional and family members how to respond to and deal with psychological distress (Sharkin and Knox, 2003).

There is not a specific feeling associated with a service requested for the pet. The people who required a dermatological service did not show a strong difference compared to the clients requesting an oncological treatment, maybe because both problems are chronic. However, even in case of emergency, the psychological support was considered. As a consequence, psychological support can be provided not only for decisions associated to an emotionally high impact but also to all people who need support for a chronic illness or acute emergency. This is confirmed from the fact that a positive association was shown between question 1 and 2. More the caregivers felt anxious, worried, upset for the health of their pet, more the psychological support was requested, independently of the reason why they were at the clinic. However, a negative association between question 1 and question 3, revealed that a strong negative emotional impact correlated negatively with the possibility to pay for psychological support. Caregivers' receive some therapy or counselling at no cost through medical clinics, or hospitals when they take care of humans. Pet caregivers may feel the support as not economically sustainable.

Females answered with higher frequency that they felt anxiety, worries and upset feelings. Women have been reported to be more empathic and to have a higher concern for animal welfare compared with men (Testoni et al., 2019). Thus, the female subjects may also be more willing to fill out online surveys on sensitive issues related to pets than the males are. This is consistent with the observation of women's general tendency to report stronger negative (but also positive) emotions than the men (Uccheddu et al., 2019).

In conclusion, our survey showed that a large percentage of owners expressed feelings related to caregiving in the veterinarian setting, not taking into account the type or gravity of assistance needed. At the same time, they expressed a strong intention to receive a professional support. However, the crucial role of the psychological support is still difficult to accept even when it can be perceived as a right choice.

The psychological support should routinely provide services in the veterinary setting and the effect should be scientifically demonstrated in order to educate caregivers to feel free to share feelings during the complex time of caregiving.

Pet owners commonly suffer from anxiety with regard to their animal healthiness. In our opinion, the range of services provided by a veterinary practice should include psychological support. One of the aims should be to facilitate sharing the feelings and to promote the communication during the complex time of caregiving. Undoubtedly, reducing the level of stress and anxiety would reduce similar negative feelings in the veterinary team.

REFERENCES

Adelman, R., Tmanova, L. L., Delgado, D., Dion, S. and Lachs, M. (2014): Suffering in Silence: the Caregiver as Invisible Patient.
Britton, K., Galioto, R., Tremont, G., Chapman, K., Hogue, O., Carlson, M. D. and Spitznagel, M. B. (2018): Caregiving for a companion animal compared to a family member: burden and positive experiences in caregivers. Front. Vet. Sci. 5, 325.

Chigerwe, M., Barter, L., Dechant, J. E., Dear, J. D. and Boudreaux, K. A. (2021): A preliminary study on assessment of wellbeing among veterinary medical house officers. PLoS One 16, e0253111.

Choi, S. and Seo, J. (2019): Analysis of caregiver burden in palliative care: an integrated review. Nurs. Forum **54**, 280–290.

George, E. S., Kecmanovic, M., Meade, T. and Kolt, G. S. (2020): Psychological distress among carers and the moderating effects of social support. BMC Psychiatry **20**, 154.

Goldberg, K. J. (2017): Exploring caregiver burden within a veterinary setting. Vet. Rec. **181**, 318–319.

Herman, K., Tucker, C. M., Ferdinand, L., Mirsu-Paun, A., Hasan, N. T. and Beato, C. (2007): Culturally sensitive health care and counseling psychology: an overview. Counsel. Psychol. 35, 633–649.

Lummis, M., Marchitelli, B. and Shearer, T. (2020): Communication: difficult conversation in veterinary end-of-life care. Vet. Clin. North Am. Small Anim. Pract. 50, 607–616.



- Perret, J. L., Best, C. O., Coe, J. B., Greer, A. L., Khosa, D. K. and Jones-Bitton, A. (2020): The complex relationship between veterinarian mental health and client satisfaction. Front. Vet. Sci. 25 February 2020. https://doi.org/10.3389/FVETS.2020.00092.
- Pirrone, F., Pierantoni, L., Mazzola, S. and Vigo, D. (2015): Owner and animal factors predict the incidence of, and owner reaction toward, problematic behaviors in companion dogs. J. Vet. Behav. 10, 295–301.
- Shaevitz, M. H., Tullius, J. A., Callahan, R. T., Fulkerson, C. M. and Spitznagel, M. B. (2020): Early caregiver burden in owners of pets with suspected cancer: owner psychosocial outcomes, communication behavior, and treatment factors. J. Vet. Intern. Med. 34, 2636–2644.
- Sharkin, B. S. and Knox, D. (2003): Pet loss: issues and implications for the psychologist. Prof. Psychol. Res. Pract. **34**, 414–421.
- Spitznagel, M. B., Ben-Porath, Y. S., Rishniw, M., Kogan, L. R. and Carlson, M. D. (2019): Development and validation of a burden transfer inventory for predicting veterinarian stress related to client behavior. J. Am. Vet. Med. Assoc. 254, 133–144.
- Spitznagel, M. B. and Carlson, M. D. (2019): Caregiver burden and veterinary client well-being. Vet. Clin. North Am. Small Anim. Pract. **49**, 431–444.
- Spitznagel, M. B., Jacobson, D. M., Cox, M. D. and Carlson, M. D. (2017): Caregiver burden in owners of a sick companion

- animal: a cross-sectional observational study. Vet. Rec. **181**, 321–321.
- Spitznagel, M. B., Jacobson, D. M., Cox, M. D. and Carlson, M. D. (2018): Predicting caregiver burden in general veterinary clients: contribution of companion animal clinical signs and problem behaviors. Vet. J. 236, 23–30.
- Testoni, I., De Cataldo, L., Ronconi, L., Colombo, E. S., Stefanini, C., Dal Zotto, B. ad Zamperini, A. (2019): Pet grief: tools to assess owners' bereavement and veterinary communication skills. Animals **9**, 1–16.
- Uccheddu, S. (2021): Improving vet-client communication through understanding the client perspective. Vet. Rec. 188, 349–351.
- Uccheddu, S., De Cataldo, L., Albertini, M., Coren, S., Da Graça Pereira, G., Haverbeke, A., Mills, D. S., Pierantoni, L., Riemer, S., Ronconi, L., Testoni, I. and Pirrone, F., (2019): Pet humanisation and related grief: development and validation of a structured questionnaire instrument to evaluate grief in people who have lost a companion dog. Animals 9, 933.
- Woodford, J., Farrand, P., Watkins, E. R. and LLewellyn, D. J. (2017): 'I don't believe in leading a life of my own, I lead his life': a qualitative investigation of difficulties experienced by informal caregivers of stroke survivors experiencing depressive and anxious symptoms. Clin. Geront. J. Aging Mental Health 41, 293–307.

