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1. Introduction

The Australian Veterinary Association (AVA) is the only national professional association representing veterinarians in Australia. Our 8500 members come from all fields within the veterinary profession. Clinical veterinary practitioners work with companion animals, horses, farm animals, such as cattle and sheep, and wildlife. Government veterinarians work with our animal health, public health and quarantine systems while other members work in industry for pharmaceutical and other commercial enterprises. We have members who work in research and teaching in a range of scientific disciplines. The Association also has very strong membership amongst our future veterinarians who are currently training at our seven veterinary schools.

The work of veterinary professionals impacts the daily lives of Australians and their animals in a multitude of ways. The contribution veterinarians make to the community is highly valued, and significantly contributes to the social license of animal industries to operate. Similar to human health care, delivery of modern veterinary care is costly, and is suffering from marked underinvestment, predominantly around labour investment, as much of the work the profession performs is simply not paid for. This is placing considerable pressure on the wellbeing of veterinarians and on the sustainability of veterinary service provision, which is now well evidenced¹. If Australian society is to continue to rely upon modern standards of animal health and welfare, made feasible by modern standards of veterinary practice, investment in the veterinary profession is needed to ensure that these services can be sustainably provided.

The underinvestment in the profession has resulted in the current veterinary workforce shortage through high levels of attrition and severe mental health issues and risks the continuance and quality of Australian animal health. Low rates of remuneration compared to other professions such as medicine, engineering, dentistry², significant educational debt, continued costs to remain registered and competent, and difficult working conditions combine to make the industry an unattractive one financially to remain in long-term. There are high rates of burnout, stress and negative mental health outcomes. Left unchecked, this has the potential to lead to the collapse of the sector, which poses significant risks to the community at large.

It has been understood for more than a century that animal health, human health and the environment are interdependent. Standards of animal health and welfare affect human health and safety through biosecurity, food safety and security. Further, with pets as family members in almost 70% of Australian homes, the impact on human health and wellbeing is a significant public health benefit.

The AVA has identified the following areas which deserve serious consideration for funding; support for the veterinary sector will directly benefit the community, as protecting the health of animals protects the health of humans:

- Addressing the mental health crisis in the veterinary profession
- Making veterinary services economically sustainable and accessible
- Workforce sustainability
- One Health

¹ <https://www.ava.com.au/wellness/>

² [https://www.qilt.edu.au/surveys/graduate-outcomes-survey--longitudinal-\(gos-l\)#anchor-2](https://www.qilt.edu.au/surveys/graduate-outcomes-survey--longitudinal-(gos-l)#anchor-2)

The veterinary profession has provided an essential service to our community for generations. Our food industries, our pets, and our community relies on veterinarians being there for them for support. For the veterinary profession to be sustainable and serve our society it needs help and investment.

2. Addressing the mental health crisis in the veterinary profession

Research shows the suicide rate in veterinarians is four times higher than the general public.³ The lack of economic sustainability of the veterinary profession drives many factors which impact on veterinary mental health and wellbeing. Examples of these include excessive hours required of the job, and inability to take leave due to work force shortages. The job carries many stresses (abuse from clients, limited resources) and ethical challenges (e.g. financial limitations of clients impacting the level of treatment which can be provided to patients and the financial euthanasia of animals) that when are not managed lead to burnout.⁴ These factors combined with poor remuneration lead to high levels attrition further negatively impacting the mental health of those who stay within the profession.

Recommendation 1

The AVA recommends a program of \$1.5 million over three years to address this high rate of distress and suicide. This would consist of:

- *A public campaign to educate the community on the important role veterinarians perform in the community every day (from food security, One Health to companion animal care). There would be a focus on the importance of treating veterinarians with respect and courtesy, similar to the campaigns run during the Covid-19 outbreak reminding people to show respect to health professionals.*
- *Whole of career mentoring (from undergraduate veterinarians to veterinarians approaching retirement and beyond).*
- *Dedicated veterinary counselling services*
- *Development and delivery of veterinary specific wellbeing education material*

3. Making veterinary services more economically sustainable and accessible.

Funding for payment to veterinarians who provide assistance in disaster situations

Veterinarians regularly provide emergency care to wildlife, livestock and pets that have been harmed due to fire, floods, cyclones and other disasters that affect parts of Australia from time to time. While other first responders are either paid or reimbursed for lost earnings, veterinarians currently provide their services, medications, bandages, use of equipment and of other

³ Parliament of Australia, Select Committee on Mental Health and Suicide Prevention, https://www.aph.gov.au/Parliamentary_Business/Committees/House/Mental_Health_and_Suicide_Prevention/MHSP/Report, 2021.

⁴ Hatch PH, Winefield HR, Christie BA et al. Workplace stress, mental health, and burnout of veterinarians in Australia. *Australian Veterinary Journal* 2011; 89:460-468.

consumables at their own cost to wildlife and to animals whose owners are not immediately available or identifiable. A 2003 AVA survey found that the amount of pro bono contribution per annum - excluding disaster situations - is over \$10,000 per annum per practice. With Ibis World data confirming 3,355 veterinary enterprises in Australia in 2020-21, this is \$33.55m per year of lost income for Australia's veterinarians. A more recent study found that the medium number of wildlife cases seen by a veterinary clinic each week is between 5-10, with this being higher in regional areas. This is a significant load on the operating costs of veterinary businesses. When the number of animals treated pro bono dramatically increases during a disaster, this contributes considerably to the high levels of stress and poor mental health in the profession.

Recommendation 2

- *The AVA recommends that veterinarians who provide services in response to a disaster be reimbursed from funding in either the Emergency Response Fund or Disaster Recovery Funding when a situation triggers payment from these funds.*

4. Workforce sustainability

Rural Bonding Scheme (\$13.6m)

Shortages of veterinarians in rural and regional areas has been an issue for the community over decades. The impacts of COVID-19 and the disruption this has caused to the movement of veterinarians around the country and internationally has exacerbated this problem.

The AVA proposes that the Australian Government introduce a rural placement incentives scheme for graduate veterinarians to assist in the shortage of rural veterinarians - that will in turn, improve private surveillance performed by private veterinarians to sustain adequate biosecurity levels. As outlined under 'One Health,' veterinarians play a key role in detecting and managing biosecurity threats. Without veterinarians in rural and remote areas - including Australia's borders - the risk of serious and deadly diseases infecting large number of animals and from there infecting the human population, is dramatically increased.

The AVA makes the following recommendations for an Australian Government Rural Placement Incentives Scheme:

- Participants must be an Australian citizen or permanent resident, registered to practice in Australia
- Employment must be with a practice that has a majority focus on production animals
- Employment must be in a Rural or a Remote area (using the [Australian Government's Rural, Remote and Metropolitan Areas Classification](#) (RRMA))
- Available to all graduates (up to 5 years after graduation)
- Up to 80 placements per year offered: 60 rural and 20 remote.
- Remote participants eligible for a maximum of \$70,000 over a 5-year period
- Where a HECs debt exists, payment to be paid directly to HECs debt
- Each year completed attracts the following payment (can be consecutive or non-consecutive):

Stage	Rural	Remote
Completion of first year	\$9,600	\$12,000
Completion of second year	\$10,400	\$13,000
Completion of third year	\$11,200	\$14,000
Completion of fourth year	\$12,000	\$15,000
Completion of fifth year	\$12,800	\$16,000

Table 1: Suggested payment eligibility for veterinarians in the first five years post graduation depending on locality.

Recommendation 3

- *The AVA recommends that the Commonwealth Government introduce a rural placement incentives scheme for graduate veterinarians to assist in the shortage of rural veterinarians.*

5. One Health

The One Health concept summarises something that has been known for more than a century: that animal health, human health and environmental health are inextricably intertwined and interdependent. The health of one affects the health of all.

The COVID-19 pandemic – a human health crisis of likely animal origin – has underlined the importance of the One Health concept. However, there are many other pathogens that can be transmitted from animals to humans and cause serious illness or death, such as Hendra virus, anthrax, leptospirosis, Q Fever, and avian influenza.

A coordinated One Health approach that is appropriately funded is essential. The AVA would like to see a national centre for disease prevention and control (CDC) established in Australia.

5.1. Centre for Disease Prevention and Control (CDC)

The AVA supports calls for a national CDC made by other health-based organisations, including the Australian Medical Association and Public Health Association of Australia. As the emergence of COVID-19 has shown, a One Health structure would be of great benefit to Australia.

Australian One Health Centre for Disease Prevention and Control – similar to the CDC in other nations - is needed for prevention and response to future pandemics, antimicrobial resistance (AMR), new and emerging infectious diseases such as Hendra virus and for chronic and neglected zoonotic diseases. This will provide cost effective management of communicable and non-communicable diseases as well as other problems with local, regional and global impact such as antimicrobial resistance and food security.

Recommendation 4

- *The AVA recommends that the Commonwealth Government establish an Australian One Health Centre for Disease Prevention and Control*

5.2. Antimicrobial Resistance (AMR)

Antimicrobial resistance (AMR) is a threat to both animal and human health. Many common human infections are becoming resistant to the antibiotics used to treat them, resulting in longer illnesses and deaths. Globally, approximately 700,000 deaths may occur each year as a result of AMR, and this could rise to 10 million death annually by 2050. In Australia, we know that antimicrobial use in animals is very modest compared with the rest of the world, however a system of surveillance is required in order to monitor and respond as needed, to ensure the AMR is well controlled.

The Australian Government's 2015 [national strategy](#) to combat antimicrobial resistance included provision of funding from the Department of Health to the Australian Commission on Safety and Quality in Health Care to develop a national surveillance system for antimicrobial use and resistance in human health in Australia. It also recommended the Department of Agriculture develop a new Task Group to work with industry stakeholders to design and implement a model for surveillance in animals and agriculture. To date, this has not occurred. Without concurrent animal health surveillance in Australia, we cannot fully understand where and when specific threats are emerging in both humans and animals. Funding needs to be allocated to animal health research to allow AMR and antimicrobial use (AMU) monitoring and surveillance of the large number of livestock and companion animal species, with recurring annual expenditure estimated to be \$2 million.

Recommendation 5

- *The AVA recommends the development of a surveillance system for antimicrobial use and resistance in animal health in Australia (\$2m per annum) by the government.*

6. Conclusion

The AVA is the only body representing the entire veterinary profession. By addressing the issues that confront the profession such as mental health, recognition of the inextricable relationship between animal and human health and addressing labour market shortages (in rural areas initially) significant economic and social benefits can be enjoyed by all Australians.

AVA would welcome further discussion on the initiatives outlined in this submission. For further information please contact Dr Cristy Secombe, Head of Veterinary and Public Affairs by email on cristy.secombe@ava.com.au.