Euthanasia of the Companion Animal:
Understanding the Pet Owner's Experience

Dissertation

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By

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*****

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ABSTRACT

As the popularity of pets continues to grow in the United States, the social work and veterinary professions are realizing the impact that the death of a pet has on the pet owner. Using a qualitative methodology, this study explored the experiences of women who had euthanized a companion animal. Information was gathered in unstructured interviews with eight women who at some point in their adult lives had euthanized at least one companion animal. A cross-case analysis of the interview transcripts revealed many common themes, primarily the lack of social supports for those grieving the death of a pet. The implications of the study are discussed in relation to the need for developing social services which specialize in providing support to pet owners.
To all of the animals
whose lives are ended daily.
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CHAPTER 1

INTRODUCTION

Greater than 50% of American households are estimated to include an animal as a family pet (AVMA, 1993). These pets often become important members of the family, as people are known to develop strong attachments to family pets. These attachments are so strong, that often the term “pet” is replaced with “companion animal” in the literature. It is documented that the human-animal bond is a strong relationship between a person and a companion animal (Lagoni, et. al.; 1994), and companion animals have been found to provide physical and mental health benefits to humans, from loving companionship to lowered blood pressure (Haynes, 1991; Netting, et. al., 1987).

These findings invoke the question, what happens to individuals when the companion animal is no longer alive to provide those benefits? Mental health and veterinary professionals are just beginning to appreciate the implications that the human-animal bond can have on situations involving the death of the companion animal. Issues surrounding pet loss are beginning to be of concern to professionals in the veterinary community. It is known
that pet owners grieve deeply for the loss of a companion animal. It is also known that there are unique grief issues surrounding pet loss which require special consideration. This is especially important to remember when that death is the result of euthanasia.

The act of euthanasia places on the pet owner the responsibility of deciding when to end a companion animal’s life. Little is known as to what kind of emotional impact that additional responsibility has on the companion animal’s owner. The literature suggests that pet owners who euthanize their pets experience various stages and reactions, including frustration, guilt, and anger (Bustad and Hines, 1984). However, the literature does not describe how frequently that occurs or to whom it is most likely to occur.

This qualitative dissertation will examine, through in-depth interviews, how pet owners experience the euthanasia of a companion animal because there are many questions which the current literature has not answered. Is euthanasia an experience that provides the owner with serenity and relief in knowing that he or she put an end to the animal’s suffering or does the act of euthanasia create a stressful situation for the pet owner, who experiences guilt and remorse over choosing when the animal is to die? What factors contribute to making the decision to euthanize? Who or what are helpful supports for the pet owner after euthanasia?

As this is a new, relatively unexplored area of social work research, this researcher is uncertain of the answers to those questions. It is the intention of this study to inductively find answers to those questions through this
research. This study is exploratory, using a qualitative methodology to gain insight into the pet owner's experience. The researcher does not intend to prove or disprove a hypothesis, but instead to use the findings to create hypotheses for future research. The purpose of this dissertation is to answer the broad, overall research question: How do pet owners experience the euthanasia of a companion animal?

Answers to these questions are important to the field of social work, because it is possible that the issues around companion animal euthanasia may require professional intervention. Because of the profession of social work's emphasis on the person in the environment, social workers are very likely to become involved in these companion animal issues both directly and indirectly. Some social workers may be working directly with grieving pet owners through pet loss support groups or counseling. Other social workers may be assisting clients for other reasons, and be called upon to assist the client at the time of a pet's death. This is why it is important that this study provide information from a social work perspective, in order to prepare social workers for situations involving pet loss and specifically, euthanasia.

Purpose and Rationale

This study has four main purposes: (a) to contribute to the emerging union between social work and the veterinary profession; (b) to improve the
awareness of human-animal bond issues within the field of social work; (c) to validate the experiences of pet owners; (d) to provide scholarly information on a new topic in the field of social work.

The first purpose of the study is to contribute to the emerging union between social work and the veterinary profession. Issues involving the Human/Animal bond are of special importance to both the profession of social work and the veterinary profession. Veterinarians, trained to meet the medical needs of animals, are often forced into situations in which they must attempt to meet the emotional needs of humans. Therefore, several university veterinary hospitals currently have social workers on staff to assist veterinarians in meeting those needs. The most noted of those hospitals is the Small Animal Hospital at the University of Pennsylvania. This was the first university veterinary hospital to form a coalition with its university’s social work program (Ryder, 1984; and Quackenbush, 1984). As more veterinarians begin to recognize the benefits of having a social worker, the demand for professional social workers who have expertise in this area will increase. The researcher of this study would like for this research to contribute to the interdisciplinary collaboration between social work and veterinary medicine.

It is also the intention of the researcher to utilize this dissertation to develop a greater awareness of human-animal bond issues within the field of social work. The relationships people have with animals are often unnoticed, or undervalued by social workers. Approximately 55 million households in
the United States contain at least one companion animal (AVMA, 1993) and these pets are assuming roles in humans' lives which were traditionally held by other humans (Lagoni, et.al., 1994). These animals are serving as friends, children, partners, and companions. This is leading to more and more people developing strong relationships with animals.

As with other relationships, there are often stressful situations involved in these human-animal relationships. Animals become ill or die, or the person may move and is unable to take the animal. In these times of stress, pet owners often require professional services. Most often, they turn to their veterinarians, who frequently do not have the time or the skills to assist the pet owners with the problematic situation. Veterinarians are now requesting the services of social workers and other mental health professionals to assist these individuals experiencing problems in their relationships with their companion animals. As more veterinary hospitals are seeking this type of assistance, more social workers will need to be trained to provide services in this emerging area sometimes referred to as veterinary social work (Crocken, 1981).

In addition, social workers in other situations will also need to be aware and appreciative of the relationships that some clients may have with companion animals. Clients with problems, such as grief over the loss of a pet, may come to a social worker in a community mental health facility. These social workers need to understand the human-animal bond and the role of this animal in the human’s life in order to provide effective services to the
client. More specifically, this study will provide social workers with a fuller understanding of what it is like for a pet owner who has euthanized his or her companion animal.

The third purpose of this research is to provide an outlet for pet owners to tell their stories, thus validating their experiences. Pet owners experiencing grief often state that others do not understand or appreciate their situations (Harris, 1984; Quackenbush and Glickman, 1984). Many grieving owners are also embarrassed by the strong emotions which they feel for their pets. Because there is no culturally approved ritual for mourning a pet, they have never seen others grieve a pet and do not know how to express this grief themselves. By calling attention to these situations in which people are sharing their experiences regarding the euthanasia of a companion animal, this research can help others to understand the significance of pet loss. This can normalize the experience for those who are also grieving the death of a companion animal by allowing them to identify with others who have grieved for a pet.

A final contribution of this research is to provide scholarly information on a relatively unexplored topic. In order for social workers to begin understanding this topic of pet loss and animal euthanasia, there needs to be information available in the social work literature. Although the veterinary community has been publishing information on these issues for quite some time, this area needs to be explored from a social work perspective in order to begin educating social workers to serve this population of clients. A review of
the current literature demonstrates the need for further research on the
human's experience in euthanasia of companion animals, especially within
the context of social work.

Application to Social Work

The increased number of pets today also means an increased number of
pet owners. There are now 55 million households comprised of people who
have strong relationships with non-human animals (AVMA, 1993). When
problems arise within these relationships, pet owners often do not know
where to seek services. They often first seek help from their veterinarians;
however, the veterinarian is often only focused on the medical needs of the
animal. Most veterinarians do not have the time or the training to
adequately assist a client who is grieving the death of a companion animal.
This is especially true in situations where the pet owner is having a
complicated grief reaction. Pet owners also try turning to those around them
for emotional support; however, friends and family often do not understand
the strong emotional ties which the person had with the animal. Friends and
family often dismiss the pet owner's emotions as being less real than they
actually are. Very often, the pet owners simply need someone to
acknowledge the loss and give them permission to grieve. Sometime, however,
these are crisis situations in which the person needs skilled crisis
intervention. Social workers are trained to provide such crisis related
services. Social workers now need to apply these skills in the area of human-
animal interactions. Just as social workers began assisting physicians in the medical field, social workers can benefit veterinarians and their clients by assisting in the veterinary profession.

Although many mental health professions, including counseling and psychology, are beginning to take an interest in this area, social work appears to be a natural choice. Social work can be distinguished from other helping professions by its focus on the person in the environment (DiNitto and McNeece, 1990). This is an important concept in the area of pet loss. The pet was an important part of the individual’s environment. Without that pet, the individual is experiencing tremendous environmental changes. Whereas, professions such as psychology and counseling would focus on that individual’s behavior and emotions and would “emphasize the establishment of a relationship with the client as a way of helping” (DiNitto and McNeece, 1990; p. 14), social workers would be more likely to consider those environmental factors which are having an impact upon the individual’s well-being.

The profession of social work in the United States began when volunteers, interested in reform, joined forces to address new issues and problems (DiNitto and McNeece, 1990). The emotions of pet owners are often not regarded with much credibility or dignity, and have usually been neglected or ridiculed by the general population, as well as many helping professions. Thus, meeting the emotional needs of pet owners who are experiencing the euthanasia of a companion animal is a new issue and problem that needs to
be addressed by the profession of social work. There is a need for social workers with an understanding and appreciation of the human-animal bond and its impact upon pet owners.

**A Social Work Practice Model**

Social work is unique in the spectrum of services provided. Social workers are not only qualified to address the emotional needs of an individual on a micro level, but also have the knowledge and expertise to advocate for policy change on the macro level. The problems and issues social workers who specialize in the area of "veterinary social work" could potentially face fall anywhere in that range between micro to macro. A social worker may be providing bereavement counseling to a pet owner who recently experienced the euthanasia of a companion animal, or the social worker may be advocating for a change in housing codes which do not permit companion animals. The spectrum is very broad, which is why an ecological general systems model of social work practice would be appropriate for this area of practice.

The ecological generalist social worker focuses on the five primary systems of (1) client, (2) agency, (3) community resources, (4) the profession of social work, and (5) the larger society (McMahon, 1990). Although the ecological generalist primarily works in an agency providing direct service, he or she is aware of the interdependence between the person and his or her environment (McMahon, 1990). That is a perspective that must be maintained in order to understand and respect the relationships pet owners

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have with their companion animals. Using this ecological general systems model of social work practice allows the social worker to recognize the role that the animal played within the client’s systems. Understanding this role can enable the social worker to assist the client with issues surrounding the euthanasia or other death of a companion animal.
CHAPTER 2

A REVIEW OF RELEVANT LITERATURE

In examining the literature relevant to the research question "How do pet owners experience the euthanasia of a companion animal?", one must look at several distinct areas. This literature will evaluate the following seven areas: (1) the human-animal bond; (2) symbolic interactionism; (3) role theory; (4) human grief and bereavement; (5) the death of a companion animal; (6) social work and pet loss; and (7) euthanasia.

Through this review of the literature, the researcher must determine justification for the topic by demonstrating that human individuals do have strong relationship bonds with companion animals. If a pet is a source of companionship and is considered to be a member of the family, using symbolic interactionism, it follows that a person will mourn the loss of a pet much as they would mourn the loss of a fellow human. Thus, the literature must also include information on what is known in social work about human bereavement. Knowing that a person is bonded to an animal and will grieve the loss of the animal, it follows that making the decision to euthanize would present special difficulties for the pet owner. Therefore, the literature will also explore that specific area of the research question involving euthanasia.
The Human-Animal Bond

The popularity of pets in America continues to grow, as it is estimated that there are more persons today who have pets than there are persons that have children (Lagoni, et.al., 1994). It has been estimated that 57.9% of all American households include at least one companion animal (AVMA, 1993). Not included in that figure are the pets owned by persons without households. Many homeless persons own pets, and the pets are often the only source of companionship and support (diLuck, 1994). In the United States, millions of people own a variety of pets. Although cats and dogs are the most common, with 109.5 million of them living in American households (AVMA, 1993), people have companionate relationships with a wide variety of species. The AVMA (1993) survey found that 8.7% of U.S. households include other companion animals, such as fish, rabbits, hamsters, and guinea pigs.

Most pet owners consider their animal to be family members (Lagoni, et.al, 1994; Katcher, 1981). One study found that 80% of those surveyed considered pets to be members of the family (Katcher, 1981). In addition, most pet owners cite companionship as the primary reason for owning pets (Lagoni, et.al., 1994). This is why the term “pet” is frequently replaced with “companion animal” in most current literature.
Another study asked pet owners to describe the benefits of pet ownership (APPMA, 1996). Ninety-seven percent of dog owners and 93% of cat owners cite companionship and company as a primary benefit of pets (APPMA, 1996). No longer is the dog’s primary role to guard the family’s home, and the cat’s only duty is to keep away mice. People now rely on their pets for emotional benefits.

These companion animals take on a variety of roles in human’s lives. As society became industrialized, more people were living away from their extended families. Companion animals quickly took on roles of extended family members for many individuals. Now as society is becoming more technologically advanced, people are becoming increasingly socially isolated as it is not necessary to see someone in order to communicate with them. This technology is leading many people, especially those in urban areas, to desire some type of contact with nature. Companion animals can provide that link for many human beings. This is demonstrated by the fact that over 39% of all pet owners live in cities with populations over 2 million (APPMA, 1996). The bond between humans and companion animals is very real and very strong, and pets provide humans with an unconditional love that many people may not otherwise experience.

This bond has been shown to have both physical and mental health benefits for humans (Friedmann, 1995; Haynes, 1991; Levitt, 1988; Netting, et. al., 1987; Friedman, et.al., 1983). The use of animals in therapy has been shown to decrease depression (Haynes, 1991). The Joseph Harp Correctional
Center in Lexington, Oklahoma, which is a medium security prison, developed a pet therapy program that used dogs with the depressed inmates. Not only did the program decrease the depression among inmates, but the rates of aggression decreased among those incarcerated persons as well (Haynes, 1991).

Research has also shown that cardiac patients who own pets have a higher survival rate than those patients who are not pet owners (Friedmann, et. al., 1980). Studies have shown that petting and stroking a companion animal lowers people's blood pressure (Levitt, 1988; Friedmann, et. al., 1983). This is one of the numerous benefits companion animals can provide for the elderly (Levitt, 1988). The elderly also benefit from the companionship that a pet can provide. Many elderly persons are socially isolated. Many can no longer drive. The person's spouse may have died, and the children have moved away. The animal is often the only friend or companion with whom that an elderly person maintains regular contact (Nieburg, 1984).

Children, also, place great value on their relationships with animals. In a study in which school children were asked whom they seek out as helpers, animals ranked second only to mothers while fathers came in third (Heath and Mckenry, 1989). Heath and Mckenry (1989) also suggest that companion animals can be very beneficial to self-care children, as the animals provide companionship and security. Another study, conducted by Friedmann, Katcher, Thomas, Lynch, and Messent (1983), discovered that children's blood pressures decreased in the presence of a dog.
Thus, the literature illustrates the existence of the human-animal bond and the benefits that humans receive from this bond. It follows from this that if the presence of an animal improves both physical and mental health, the loss of an animal could potentially have the reverse effect.

**Symbolic Interactionism**

Knowing that the human-animal bond exists may lead many to question why it exists. Symbolic interactionism provides a strong rationale for the existence of the human-animal bond. Symbolic interactionism is a theory that evolved from the work of George Herbert Mead (Charon, 1979). The emphasis in symbolic interactionism is on the importance of both perspective and interaction. One of its main ideas, which came from the philosophy of pragmatism, is that “objects we encounter are defined according to their use for us” (Charon, 1979; p. 29).

Applying this to the human-animal bond, one can see that different individuals will have different perspectives on relationships with animals based on how the individual defines that animal and that animal’s use to the human. The animal could be defined as “guard dog” or “best friend,” a “good mouser” or “my little baby” based on its use to the human. Because of the
wide range of perspectives which individuals have on animals, the animal could fulfill a variety of roles. Nieburg (1984, p.67) discusses these roles saying,

...more and more childless couples are choosing animals as surrogate children. ...Frequently we see individuals who are coping with pet loss and who essentially have identified the pet as a child. We know that pets share complementary drives and responses. In talking about human/pet attachments, we are talking about a complementary system. Before too long the family therapists who are describing the systems theory of family therapy will begin to take a look at the human/pet bond as being one of those systems.

The loss of that animal will be experienced differently, based on the individual’s perception of what is being lost (the role of the animal) and how replaceable that role is. A guard dog is easier to replace than a best friend is. Levinson (1984) states that the grief reaction in pet loss will be dependent upon what the animal meant to the person. “Was the animal regarded as a companion, a toy, a protector, a confidante, a child? In each case the human reaction to the loss of the animal would be different, just as it is when a beloved person dies” (Levinson, 1984; p. 51-52).

Forte, Barrett, and Campbell (1996) used a symbolic interactionist perspective to examine the grief reaction in human death. They state that “the involuntary loss through death of a person considered significant in our lives is more than the loss of an object. It is a loss of the ‘part of our self’ they alone maintained and it is a shattering of our ‘assumptive world’” (Forte, et. al., 1996; p.31). They also state that the death of “a significant other” has a profound effect on a person’s perception of self and his or her social
connectedness. "Successful grieving essentially entails recovering from an assault on personal and social meanings" (Forte, Et.al., 1996; p. 38). Thus, the research in symbolic interactionism illustrates that theory’s applicability to both the human-animal bond and human bereavement.

**Role Theory**

Biddle (1979; p.4) defines role theory as, "a science concerned with the study of behaviors that are characteristic of persons within contexts and with various processes that presumably produce, explain, or are affected by those behaviors." Biddle notes only persons and their behaviors in this definition. This would seemingly eliminate animals as fitting into this theoretical framework. However, one of the key concepts of role theory is that roles are associated with social positions (Biddle, 1979). Therefore, if an animal is holding a social position, such as friend or companion, role theory could be applied.

Just as symbolic interactionism was the "framework for the analysis of social interaction and the social person," role theory "is a framework for the analysis of social structure" (Stryker and Statham, 1985; p. 344). While symbolic interactionism used "the concept of role to build ‘down’ to the social person," role theory "uses the concept of role to build ‘up’ from interaction to larger units of organized social life" (Stryker and Statham, 1985; p. 344).
The literature maintains that companion animals perform a variety of roles in the lives of humans. Structural role theory, which has its roots in structural functionalism, sees social interaction as “actors playing assigned parts in a script written by a culture shaped in the course of evolutionary adaptation to environmental circumstance” (Stryker and Statham, 1985; p.330).

Using this theory, we could see that there are specific roles expected in an individual’s life. In many cases, such as the elderly or childless couples, those roles of companion or child are not being filled by humans. These persons are turning to animals to serve in that capacity.

**Human Grief and Bereavement**

Grief is the normal reaction to loss. Loss is defined as “being deprived of or being without something one has had and valued” (Simos, 1979; p.1). Although there are many different types of losses, such as divorce, retirement, and losing a job, the loss due to death typically brings about the most intense grief reaction (Cook and Dworkin, 1992).

The classic work of Kubler-Ross (1969) involving the stages of grief experienced by a dying person, has been the basis of much of our current understanding of grief and loss. Kubler-Ross (1969) outlined the following stages which a terminally ill person encounters: (a) denial; (b) bargaining; (c) anger; (d) depression; (e) acceptance. Many other scholars have used these
stages as a foundation to describe the stages of the bereavement process experienced by survivors, as well (Cook and Dworkin, 1992; Worden, 1991; Simos, 1979).

According to these scholars, it is important to note that these stages do not occur precisely in the order outlined by Kubler-Ross. Worden (1991; p. 34) states that, "Since mourning is a process, it is appropriate to view it in terms of stages...One of the difficulties with using the stage approach is that people do not pass through stages *in seriatim*". In other words, people do not pass through each stage and move conveniently into the next stage, and the problems arise when others do not understand this. Worden (1991) warns that often nonprofessionals will interpret the stages too verbatim. They will expect themselves or others to follow each stage precisely, and will fear they are abnormal if their grief follows different patterns.

Because of such problematic interpretations of grief stages, Worden (1991) recommends the use of "phases" rather than stages. This seems, however, to risk replicating the same obstacle that the use of stages encountered. It appears to merely be giving it a new name.

Whether one refers to them as stages or phases, most experts agree that there are common grief reactions which bereaved persons experience. The most severe grief reactions can usually last anywhere in the range of six months to two years, although this also varies with each individual. Some of the more common grief reactions include feelings of sadness, anger, and guilt (Worden, 1991). Grieving persons also often experience anxiety, shock,
loneliness, and fatigue. Hallucinations, sleep and appetite disturbances, and confusion are also not uncommon throughout bereavement (Worden, 1991).

One other common aspect of grief is the act of mourning. Mourning is the ritualistic expression of grief, and the actual process can vary considerably among individuals and cultures (Cook and Dworkin, 1992). Worden (1991) outlines the four tasks of mourning: (a) “to accept the reality of the loss;” (b) “to work through to the pain of grief;” (c) “to adjust to an environment in which the deceased is missing;” (4) “to emotionally relocate the deceased and move on with life.” Often individuals who have good social supports are able to work through these tasks on their own. Some individuals, however, may become encumbered and need assistance in moving through the tasks of mourning.

The wide spectrum of grief reactions can make it difficult to discern when the grief reaction is not within the realm of expected or “normal” behavior (Cook and Dworkin, 1992). Although a great deal of the grief literature uses the term “pathological” to describe those grief reactions that are problematic, Cook and Dworkin (1992) prefer to use the term “complicated.” They believe that the term pathological is not appropriate, as it alludes to psychiatric illness. They stress that “difficulties with the grieving process, which may require therapy, are not always a sign of a psychiatric illness such as depression or psychosis” (Cook and Dworkin, 1992;
p.9). They believe that the assessment of complicated grief needs to be based on whether or not the individual is able to perform the tasks of grieving.

Cook and Dworkin (1992) cite several categories of behaviors which they refer to as “complicated grieving.” The first category is “avoidance of grief.” Behaviors within this category include holding on to anger and “mummification,” which is when the bereaved does not change anything in the deceased person’s room years after the person’s death. The second category of complicated grieving is “chronic grief.” This is characterized by intense grief reactions which are evoked long after the person’s death. “Delayed grief,” which is the third category, takes place when a new loss triggers a grief reaction from a past loss. The fourth category of complicated grieving is “inhibited grief.” Drug abuse, acting out behaviors, chronic pain or somatic complaints, and impulsivity are all characteristics of inhibited grief (Cook and Dworkin, 1992).

In order to assist clients who are experiencing a complicated grief reaction, the social worker needs to utilize a range of techniques depending upon the stage of grief which the individual is experiencing. Cook and Dworkin (1992) divide these techniques into three divisions: (1) those techniques which facilitate comprehension and acceptance of grief reactions; (2) those techniques which help the individual to examine the memories of the deceased; (3) those techniques which enable the client to use symbolism to externalize the grief. This requires that the social worker have the skills to assess what stage of grief the individual is experiencing, as well as the
training and skills to perform the various techniques. It is beyond the scope of this study to adequately prepare social workers for providing any type of grief counseling. This information is provided in order to provide the reader with background information regarding traditional grief counseling.

The Death of a Companion Animal

It is well documented that persons in bereavement experience a great deal of stress and anxiety (Cook and Dworkin, 1992; Worden, 1991; Lynch, 1979; Simos, 1979; Parkes, 1964). While Kubler-Ross (1969) and many others have clearly defined stages or phases of the grief process involved with human death, other studies have also shown that persons experiencing the death of a pet follow the same pattern of bereavement that is known for persons grieving a human death (Netting, et. al., 1987; Quackenbush and Glickman, 1984; Crocken, 1981). Because animals have a much shorter lifespan than humans, most pet owners will be forced to experience the death of a pet. The pet has been a dedicated companion and a consistent part of the owner’s daily routine; therefore, it has follows that pet owners experience a definite grief reaction to the death of a companion animal (Lagoni, et.al, 1994). Pet owners often experience such profound grief that professional counseling is sought (Iliff and Albright, 1988).

Bustad and Hines (1984; p. 70) recount a story in which a 77-year old woman died after being forced to give up her dog, Sparky: “Sparky was a
source of unconditional love and affection for this woman. He gave her something to live for, ordered her life, and encouraged exercise and social contact. The severance of this bond resulted in great stress and intense grief, both of which contributed to her death.”

Nieburg (1984) cites denial as the most common defense mechanism utilized by bereaved pet owners. People have a very difficult time accepting the loss of the pet. Nieburg (1984) divides pet loss into two distinct types. Type I are those losses in which the pet owner has some degree of choice. The decision to euthanize would be categorized as a Type I loss, as there is the element of choice. Type II losses include those in which the pet owner does not have any choices. The sudden death of a pet or a pet that has runaway or been stolen are examples of Type II losses (Nieburg, 1984). For both situations Nieburg (1984; p.69) advises, “To counsel people in all types of losses we must identify what the problems are, what they are telling themselves about the problems, and suggest practical, how-to-do-it approaches in terms of dealing with these problems.”

What makes the death of a pet more complicated is that in our society, there is no culturally accepted method or ritual for mourning the death of a companion animal (Harris, 1984). People often do not have the same emotional support from friends and family that they would be afforded in a human death. Pet owners frequently report feeling angered at the insensitivity of friends and family members to the death of the companion animal (Harris, 1984; Quackenbush and Glickman, 1984).
Social Work and Pet Loss

Recognizing the difficulties that many owners experience, the veterinary profession has begun seeking ways to assist pet owners by teaming up with social workers and other mental health practitioners. The first social work practice to be established in a veterinary hospital was at the Small Animal Hospital in the School of Veterinary Medicine at the University of Pennsylvania (Quackenbush, 1984; Quackenbush and Glickman, 1984; Ryder, 1984; Crocken, 1981). Established in 1978, this program was developed by a coalition between the School of Social Work and the School of Veterinary Medicine (Ryder, 1984).

A social worker was placed in the veterinary hospital to assist animal owners and the veterinarians with the following problems: (a) emotional problems of owners with seriously ill pets or pets that have died; (b) animal problems that are symptoms of other problems within the family; (c) problems with irrational and uncooperative pet owners; (d) problems in selecting a pet (Ryder, 1984). An evaluation after one year of operation found that the most common request for social services was regarding the death or anticipated death of the companion animal (Quackenbush and Glickman, 1984; Ryder, 1984). They also found support for the belief that owners coping with the death or impending death of a pet are the most difficult for veterinarians to serve (Quackenbush, 1984).
Since the development of the Companion Animal Clinic at the University of Pennsylvania, other hospitals, including the Animal Medical Center in New York City and the veterinary hospital at Colorado State University, have also established counseling services for pet owners (Mader and Hart, 1992). Many veterinary hospitals now offer pet loss support hotlines and communities are developing support groups for pet loss (Lagoni, Butler, and Hetts, 1994).

The literature has established that the grief process that humans experience at the death of a companion animal is much the same as other grief reaction, and the veterinary community has begun to establish services to assist owners. However, the process of euthanasia could potentially present problems that are quite different from the traditional grief reaction.

**Euthanasia**

Euthanasia is an aspect of pet death which can make it more complicated to understand than human death. Euthanasia, which is commonly thought of as “mercy killing,” is the most common cause of death for companion animals (Rollin, 1988). Although a majority of those are stray animals euthanized at animal shelters, still pet owners each year seek euthanasia services from their veterinarians. The AVMA (1993) survey found that when asking pet owners the reason for their last visit to the veterinarian, 2.6% of dog owners stated the purpose was euthanasia.
There is great debate over humans' "right to die." Although assisted suicide is gaining greater publicity, euthanasia of humans is still considered forbidden. This raises an issue with animal euthanasia. If the animal is serving in a "human-like" role, such as child or friend, how does the pet owner justify euthanasia? Savishinsky (1988) presents the idea that animal euthanasia has several parallels to human decisions regarding life and death. These parallels present family members and medical professionals with the following dilemmas: (a) "to balance the prolongation of life with the alleviation of suffering; (b) to redefine our ethical and professional responsibilities; (c) to clarify the relationships between clients and caregivers; (d) to educate people about human rights and animal rights; (e) to recognize people's emotional needs and to sensitize them to the impact of their behavior on others; and (f) to devise ways of thinking about, communicating about, and responding to death so that our actions are honest, respectful, and meaningful" (Savishinsky, 1988). Assisting a pet owner in pre-euthanasia counseling requires tremendous understanding of each of those issues outlined by Savishinsky. Pet owners questions whether or not they have the moral and ethical right to make these life and death decisions regarding their pets.

Seguine (1985), who has looked at issues around human euthanasia, describes four types of euthanasia. The first of these is direct, or active, euthanasia. This is the type that most assisted suicides could be categorized as. Seguine's second category is indirect euthanasia. This is referred to as
"killing by omission" (Seguine, 1985; p.40). This is often legal, as in cases where an individual’s living will states that he or she does not want extreme measures or life support. The third type of euthanasia is voluntary. This is essentially suicide which is not assisted. The fourth type is the one which most animal euthanasia would be categorized. This is involuntary euthanasia. This is a decision by proxy in which the individual is unable to make the decision, and it is made for them by others (Seguine, 1985).

Seguine's four categories of euthanasia make clear the differences between human and animal euthanasia. In most cases of human euthanasia, which are either direct, indirect, or voluntary, the dying individual has a part in the decision to terminate his or her life. As most animal euthanasia is involuntary, this could potentially have a significant impact on the amount of guilt and responsibility for the death which the pet owner might experience. In human euthanasia, the loved one may have been asked by the dying person to perform the euthanasia; therefore, the loved one knows that this is the persons desire. In animal euthanasia, there is the element of not knowing whether or not death is what the animal would have wanted.

With euthanasia, the pet owner ultimately must decide when the animal is to die (Hart, et.al., 1990; Harris, 1984; Quackenbush and Glickman, 1984). This can be a very troubling experience for many pet owners (Quackenbush and Glickman, 1984). Bustad and Hines (1984) advise veterinarians to be aware of the various stages and reactions that pet owners
experience in a euthanasia situation. Some of these stages and reactions include the following: (a) frustration; (b) decision-making; (c) anger; (d) sense of loss; (e) guilt; and (f) self-protection (Bustad and Hines, 1984).

As the majority of pet owners are families with children (AVMA, 1993), the decision to euthanize a companion animal can cause conflict and tension within the family (Bustad and Hines, 1984). Children can become very angry with their parents for deciding to euthanize a family pet (Bustad and Hines, 1984). Although this dissertation will not examine the effects of euthanasia on children, it is important to note this family stress because it can have an affect on the adult pet owner's own reaction to the loss.

Sixty-four percent of the pet owners who had been referred to social services at the Veterinary Hospital at the University of Pennsylvania "were upset about having to make the decision to have their pets killed" (Quackenbush and Glickman, 1984, p.44). Many pet owners report experiencing guilt over the decision to euthanize (Quackenbush and Glickman, 1984; Crocken, 1981). Moneymaker (1988) states that a pet owner's regret over the decision to euthanize can lead to guilt, anxiety, and in extreme cases neuroses or psychoses.

In a study of veterinarians and veterinary students, 65% of those surveyed stated they felt a sense of relief after euthanasia (Crowell-Davis, et. al., 1988). The same study showed 57% stated feelings of depression after
euthanasia (Crowell-Davis, et. al., 1988). The literature does not reveal, however, if pet owners experience similar reactions to those found for persons in the veterinary community.

Unfortunately, the literature in this particular sub-specialty of pet loss is not vast. The literature has begun to establish that euthanasia presents special problems for pet owners (Moneymaker, 1988; Bustad and Hines, 1984; Quackenbush and Glickman, 1984; Crocken, 1981), but has not yet clearly delineated what those problems are and for whom they are problematic. It is also unclear as to whether or not the positive effects of euthanasia are greater than these problematic ones. Therefore, this is an area in which there needs to be more research so that the services provided by the veterinary and social work communities can begin to understand the special issues of euthanasia.
CHAPTER 3

METHODOLOGY

Very little research has explored the pet owner’s experience of euthanasia of a companion animal. One of the goals of this exploratory study was to gain insight and understanding into the pet owner’s experience. The researcher believed this could be best accomplished by adopting a qualitative research methodology.

Rationale for Qualitative Design

This study utilized a qualitative research methodology, using in-depth interviews as the primary means for data collection. Strauss and Corbin (1990) define qualitative research as “any kind of research that produces findings not arrived at by means of statistical procedures or other means of quantification.” A qualitative methodology is especially appropriate when the research is phenomenological in nature (Strauss and Corbin, 1990). As this research is interested in understanding persons’ experiences with animal euthanasia, the qualitative methods are particularly appropriate.
One of the most frequently used qualitative methods of data collection is interviewing. The long interview has been called “one of the most powerful methods in the qualitative armory” (McCracken, 1988). Interviews are commonly thought of as “conversations with a purpose” (Lincoln and Guba, 1985). This technique allows the researcher to gain broad insight into the subject’s reality. This insight is extremely important for this dissertation, as the purpose of this research is to understand the pet owner’s experience during the euthanasia of a companion animal. This is a phenomena that is not easily described with quantitative measures. A qualitative methodology using long interviews will allow for a fuller understanding of pet owners’ experiences than would a traditional quantitative approach.

A qualitative methodology is also very fitting for an exploratory study in which there is little previous research or theory to guide the project. As the area of this dissertation is relatively unexplored, the qualitative technique is best for facilitating the research of this exploratory project.

**Conceptual Framework**

This study is looking at the experience of euthanasia within the framework of human-animal bond theory and symbolic interactionism, from the perspective of veterinary social work. Using this framework, there are several key concepts which must be clearly defined: (a) euthanasia; (b) pet; (c) companion animal; (d) pet owner; (e) euthanasia experience.
Probably the most critical concept to define in this study is euthanasia. Euthanasia is commonly thought of as mercy killing and can be implemented in a variety of ways. This purposive act of killing is usually conducted in order to end the animal’s pain and suffering; however, that qualifying condition will not be included in this definition. For the purposes of this research, euthanasia is defined as the intentional death of an animal brought about by a veterinarian at the request of the animal’s owner.

The term “pet” is the common name for an animal which resides within a human household (Lagone, et.al., 1994). The more academic term for this is “companion animal.” This term gives more credit to the animal’s role of companion. According to Lagone, et. al. (1994, p.4) “Although the term ‘pet’ implies ownership of property, ‘companion animal’ implies a mutual relationship, much more like a friendship.” In spite of these distinct differences, for ease of discussion these two words will be used interchangeably in the context of this study. A pet or companion animal is any non-human animal which resides with a human and is an important and integral part of the human’s daily routine.

Another important concept to define is that of the pet owner. For the purposes of this study, the pet owner is the adult human with whom the animal resided who was also the animal’s primary caregiver. In two cases in this study, at the time of euthanasia the animal no longer resided with the persons interviewed. However, these individuals were responsible for making the decision to euthanize the animal, and thus were included in this study.
The "euthanasia experience" is a concept which refers to the phenomena encountered by the human who is involved in the euthanasia of his or her companion animal. The euthanasia experience includes the anticipatory period before the euthanasia, the actual act of euthanasia, and the period following the euthanasia.

**Selection of Participants**

In qualitative research, a true random sample is not anticipated. Lincoln and Guba (1985) describe qualitative sampling as "purposive sampling" as it can serve several purposes. Usually, the purpose is to gather a sample that will encompass as much information as possible (Lincoln and Guba, 1985). The goal is to obtain a heterogeneous sample. Lincoln and Guba (1985) outline four characteristics of purposive sampling: (a) "emergent sampling design;" (b) "serial selection of sample units;" (c) "continuous adjustment or 'focusing' of the sample;" (d) "selection to the point of redundancy." The purposive sampling strategies, such as the "snowball" and "network" techniques, are frequently employed to select participants (Glesne and Peshkin, 1992; Lincoln and Guba, 1985). These techniques involve finding a participant and requesting that the person refer you to others. Although these sampling techniques make generalizability difficult if not impossible, they provide the maximum variation which is needed in qualitative research (Lincoln and Guba, 1985).
Participants for this study were selected through purposive sampling. The researcher began by contacting five local veterinary practices and asking for assistance in reaching individuals who have experienced the euthanasia of a companion animal (see appendix A). Of these five, one veterinary practice agreed to assist with the dissertation. This practice was given letters (see appendix B) and release of information forms (see appendix C) which informed potential participants of the study and gave the veterinarians permission to provide the researchers with the participants' names, addresses, and phone numbers. Through this method of selection, the researcher was able to obtain five participants, one of which declined participation when contacted by the researcher. The researcher was concerned that because these participants were selected by one veterinarian they may not be as homogeneous a sample as desired.

Due to this concern the researcher decided to find an additional method through which to obtain subjects. This method of sampling more closely resembles the snowball sampling method. A colleague of the researcher's informed her of someone the colleague believed would be willing to participate. This person had also told the colleague that she knew of others who may also be willing to participate. Before knowing the names of any of these potential participants, the researcher provided the colleague with the same letters and release of information forms which were given to the veterinarian. In this way, the colleague served in the same manner as the veterinarian had previously. Through this method, five more participants
were obtained. Due to mechanical failure, the last interview did not record. This left a total of eight participants remaining to be included in this research.

Participants selected for the study have experienced the euthanasia of a companion animal at some point in their adult lifetimes. As the goal in qualitative sampling is to obtain a heterogeneous sample, no criterion for length of time since euthanasia was set. This allowed the researcher to discover the effects time may have on individual’s perceptions of the euthanasia experience. Length of time since euthanasia ranged among participants from one week to over twenty years.

Although the experience did not need to be a recent one, it did need to have taken place during the participant’s adult life, as this study is looking at only the euthanasia experience of adults. The developmental differences in children’s understanding of death and in the different types of relationships children have with animals, would make it too complicated to have included children in this study.

The researcher had intended to strive towards obtaining as diverse a sample as possible in areas such as gender, race, ethnicity, and social class in order to further meet the goal of heterogeneity. However, the sample consisted primarily of white, middle-class females. The researcher was unable to obtain any male participants for this study. Later in the study, the researcher will discuss this further.
One of the purposes of this study is to understand how individuals experience the euthanasia of a companion animal. Therefore, persons who have experienced the accidental or natural death of an animal were not included. In addition, only those participants who were involved in the decision-making process of the euthanasia were included, as the decision-making process is a potentially important part of the euthanasia experience. No criterion for adult age was set, due to the small sample size. Although, through purposive sampling the researcher tried to obtain as much variation as possible. The ages ranged from early 20's to late 60's.

This study also had no restrictions as to the species of the animals which were euthanized. Using symbolic interactionism, the type of animal involved is not as important as the perception of the animal in the human's life. Although one most commonly visualizes a cat or a dog when considering household pets, many individuals have strong relationships with other animals such as rabbits, horses, birds, and iguanas. Therefore, it is not the researcher's position to determine what animals are worthy of human devotion. However, of the eight completed interviews, six focused primarily on dogs and two focused on cats. One of the dog owners, however, did mention during the interview an event involving the euthanasia of her daughter's pet rabbit.

Several factors were considered when contemplating sample size. Qualitative research typically involves a smaller sample size; however, that size is usually not decided on prior to the study. Qualitative studies use an
emergent sampling design which seeks to obtain redundancy (Lincoln and Guba, 1985). Redundancy, which is also referred to as saturation, is achieved when no new information is being generated (Lincoln and Guba, 1985). For the purposes of a dissertation, however, it is often difficult to reach redundancy due to restrictions in time and resources. An anticipated sample size of ten participants was set to serve as a framework, realizing that number may not allow for saturation. Although nine participants were interviewed for this study, as stated previously, the actual number of participants for the study was eight due to mechanical failure during the ninth interview.

**In-Depth Interview**

The most frequently used measurement instrument in qualitative research is the human researcher (Lincoln and Guba, 1985). One of the ways in which this instrument collects data is through interviews. As mentioned previously, interviews are purposive conversations. Weiss (1994) outlines research aims of qualitative interviewing. A few of these aims are (a) to develop detailed descriptions, (b) to integrate multiple perspectives, (c) to describe a process, and (d) to learn how events are interpreted (Weiss, 1994).

Interviews vary among qualitative research in the degree of structure. Structured or focused interviews have preformed questions and are valuable when the researcher knows what information he or she hopes to obtain.
Unstructured interviews, also known as in-depth and exploratory interviews, are valuable when the interviewer is unsure of the questions to ask (Lincoln and Guba, 1985).

The primary method of data collection for this dissertation was in-depth interviews with the participants. These interviews were unstructured, allowing for differences in participants' stories, but were focused upon the euthanasia experience. Because the experience of euthanasia begins before the actual date of the animal's death, the conversations in the interviews focused on both the anticipatory period leading to the decision to euthanize, as well as the situation immediately following the euthanasia. As the experience of euthanasia differs, depending upon the human-animal relationship, it was also important in the interviews to determine what the relationship was like before the animal became ill.

Although the interviews were unstructured, the researcher did seek out basic demographic information for each respondent. This descriptive data included species of pet, age of pet, reason for euthanasia, years of ownership and length of time since euthanasia. This information was helpful in identifying any trends that were present among the sample. The researcher used a list of questions which served as a guide throughout the interviews (see appendix D).

Each of the interviews was audiotaped. Audiotaped interviews allow the researcher to attend to the respondent during the interview (Weiss, 1994). Some experts do not recommend audiotaping interviews because of the
possibility that it will make the participant uneasy or distrustful (Lincoln and Guba, 1985). However, the researcher selected audiotaping because she believes that note-taking would be too distracting and that it is possible to miss pertinent information in the hurry to record everything. According to Glesne and Peshkin (1992; p.75), interviewers who take notes by hand “will also feel less in control of the interview when...attention is focused on the struggle to keep up with the respondent’s talk.” The researcher also did not want to videotape the interviews, due to the sensitive nature of the topic. It is possible that videotaping could make participants uncomfortable in expressing their emotions.

The location of the interviews was left to the discretion of the participants. Each participant was able to select where he or she would like for the interview to take place. Some locations included the participant’s home, the researcher’s home, the researcher’s office, and the participant’s place of employment. Most interviews took place in the participants place of employment. The researchers only request was that the location be some place quiet in order to obtain a clear audio recording, and that it be some place in which the participant felt comfortable.

The participants were interviewed only once. Some qualitative researchers suggest that participants be interviewed more than once (Weiss, 1994). Because qualitative research uses an emergent design, it is possible for the researcher to make changes in the design throughout the process in order to gain greater insight into the research problem. If it seemed that the
first interview did not yield an adequate amount of information, then a second interview could have been conducted. At the time, the researcher believed that the first interviews had yielded enough information that a second interview was not necessary. In hindsight, a second interview could have been helpful as it could have yielded additional information. This limitation will be explored in more detail in Chapter 8.

The interviews were recorded, and then audiotapes were transcribed verbatim by the researcher. The participants were given copies of the transcriptions to evaluate before the data were analyzed. Participants were permitted to add to or subtract from their responses prior to data analysis. This member checking contributes to the trustworthiness of the study.

**Trustworthiness**

One of the key goals of qualitative research is to establish trustworthiness. “How can an inquirer persuade his or her audiences (including self) that the findings of an inquiry are worth paying attention to, worth taking account of?” (Lincoln and Guba, 1985; p. 290). Trustworthiness is interested in the following four objectives: truth value, applicability, consistency, and neutrality (Lincoln and Guba, 1985). These four objectives are also referred to as credibility, transferability, dependability, and
confirmability. These are parallel to the quantitative terms of internal validity, external validity, reliability, and objectivity (Lincoln and Guba, 1985).

One of the techniques suggested by Lincoln and Guba (1985) for improving the credibility, and thus the trustworthiness of a study, is triangulation. Triangulation is gaining and utilizing information from a variety of sources or methods (Lincoln and Guba, 1985). In order to improve the trustworthiness of this study, the researcher had planned to employ the technique of triangulation by gathering data from multiple sources. The researcher had considered interviewing significant others in the participants' lives, such as spouses, parents, friends or veterinarians in order to gain greater insight into the participant's experience of euthanasia. However, due to the constraints of both time and resources, it was not possible to employ triangulation in this study.

A second technique used in qualitative research to improve trustworthiness is peer debriefing. According to Lincoln and Guba (1985; p. 308) "It is a process of exposing oneself to a disinterested peer in a manner paralleling an analytic session and for the purpose of exploring aspects of the inquiry that might otherwise remain only implicit within the inquirer's mind." One of the main purposes of peer debriefing is to assist the researcher in recognizing his or her biases in interpretations. The debriefing also provides
an objective look at the feasibility of the methodology (Lincoln and Guba, 1985). This study included peer debriefings with the chair of the dissertation committee.

A third technique for improving the credibility of a study is member checking. According to Lincoln and Guba (1985; p.314) “The member check, whereby data, analytic categories, interpretations, and conclusions are tested with members of those stakeholding groups from whom the data were originally collected, is the most crucial technique for establishing credibility.” Member checking involves allowing the participants to review the data that has been collected. That may mean allowing them to review the audiotapes or reading the researcher’s notes from an interview. In this dissertation study, the participants were provided with copies of the transcripts of the interviews. There are several benefits gained from member checking. One of these is that it provides the participants with an opportunity to verify the information and correct any errors that may exist, as well as confirm that existing information is correct. Member checking also gives the participant an opportunity to provide additional information which he or she did not reveal previously (Lincoln and Guba, 1985).

One of the main techniques used to improve the transferability of a study is thick description. Although it is not possible in qualitative research to suggest external validity, the thick description can “enable someone interested in making a transfer to reach a conclusion about whether transfer
can be contemplated as a possibility” (Lincoln and Guba, 1985; p.316). This technique of thick description was employed throughout this dissertation.

A technique which can be helpful in establishing all areas of trustworthiness is for the researcher to maintain a reflexive journal (Lincoln and Guba, 1985). Lincoln and Guba (1985; p.327) describe the reflexive journal as, “a kind of diary in which the investigator on a daily basis, or as needed, records a variety of information about self and method.” A reflexive journal should include the daily itinerary, including the study’s logistics, a personal diary in which the researcher records insights and reflections, and a methodological log in which decisions regarding the methodology and their explanations are to be recorded (Lincoln and Guba, 1985). The researcher in this dissertation maintained a reflexive journal throughout the research process, in order to further improve the trustworthiness of the study. This reflexive journal was made available to peer debriefers for review.

Overall, this study utilized several techniques, including member checking, peer debriefing, thick description, and reflexive journaling, which provided for the trustworthiness of the study.

Ethical Considerations

Whenever a research project involves human lives, one must consider the subject of ethics. Glesne and Peshkin (1992) point out that the nature of qualitative research can present different ethical considerations.
Before beginning this study, the researcher received the approval of Human Subjects Review to assure the ethical treatment of the participants. Due to the emotionally sensitive nature of this study and the amount of personal disclosure required of participants, there were several ethical areas which had to be considered. The first of these was consent.

Informed consent is a procedure which ensures that all participants understand the voluntary nature of their involvement, are aware that they may at any time discontinue their involvement in the research project, and that they fully understand any effects this project could have on their emotional well-being (Glesne and Peshkin, 1992). Participants were also told that they do not have to respond to questions and may discontinue their involvement in the research project at any time. Informed consent is frequently documented with written consent forms. For this dissertation, all participants signed a consent form (see appendix E). All participants consented to the audio taped interview and to the use of information provided to the researcher.

The second ethical issue is confidentiality. It is important to maintain the privacy of the individuals participating in the research. The use of audio, rather than video, taping assisted in some level of confidentiality. Participants were also given pseudonyms in order to help them to remain anonymous to the readers. In addition, the names of the pets were also changed in order to again preserve the anonymity of the participants. As the researcher conducted all of the interviews herself, only one person knew the
actual names of the participants. Glesne and Peshkin (1992) caution, however, that the use of pseudonyms is not a guarantee of anonymity. Participants were also informed of this possibility before beginning the interview process.

It was expected that some participants may become distressed when discussing the loss of a companion animal; therefore, the third consideration was for debriefing and follow-up services for the participant after the interview. Participants were provided with information for a pet loss support group and given the telephone number for a pet loss support hotline if indicated by the participant’s emotional state following the interview. The researcher’s own clinical skills and past experience in grief counseling was used to assess the emotional state of the participants following the interviews.
CHAPTER 4

DATA ANALYSIS

Qualitative data analysis is defined by Wolcott (1994, p. 24) as “systematic procedures followed in order to identify essential features and relationships.” The data that were analyzed in this study were the text in the transcripts of the interviews during which the participants told of their experiences with euthanasia. As the interviews were transcribed verbatim, the transcripts contain the actual words which the participants used to tell of their experiences.

In exploring these women’s experiences with euthanizing a companion animal, the researcher looked for common themes that appeared throughout the different stories. However, as each person experiences grief in a different way, it is also important to note those experiences that are more idiosyncratic. Therefore, two different approaches to data analysis were used. Cross-case analysis was used to discover those themes which were common throughout the stories. Inter-case analysis permitted the researcher to find those particularities which were idiosyncratic to that participant.

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To avoid confusion, the cross-case analysis was performed prior to performing the inter-case analysis (Patton, 1990), although many of the idiosyncrasies became apparent during the cross-case analysis. These were noted and then returned to when the researcher began the inter-case analysis.

**Qualitative Data Analysis**

The purpose of data analysis in qualitative research is to organize the massive amount of data that has typically been collected in order to locate themes and interpretations. Historically this analysis has been done a variety of primitive ways which, although effective, are known to be slow and cumbersome. In recent years, the move in qualitative analysis has been towards utilizing computer-assisted qualitative analysis software programs. These are not without their own problems and special considerations, however, as the computers may not be capable of identifying intrinsic themes. In addition, there is the fear that the software package can propel the findings in a specific direction (Richards and Richards, 1994). However, basic word processing features of most computers can be very helpful in assisting the researcher with organizing the various data for analysis.

Huberman and Miles (1994) identify three subprocesses of data analysis. These are data reduction, data display, and conclusion drawing and verification. Data reduction involves the processes of coding and finding themes. The steps the researcher used for data reduction will be discussed
further in this chapter. Data display is defined as “an organized, compressed assembly of information” (Huberman and Miles, 1994; p. 429), and can include summaries, synopses, or vignettes as examples of such displays. The researcher elected to develop personal profiles of each of the participants as a form of data display. These are included as a separate chapter within this dissertation. The third subprocess of conclusion drawing and verification is primarily involved with interpretation (Huberman and Miles, 1994). Evidence of the researcher’s understanding of meaning can be found in the last three chapters of this dissertation.

Cross-Case Analysis

The cross-case analysis was used to identify and code commonalities, which were then used to generate themes that occurred across each of the participants’ stories. Although the primary themes were common to all or most of the participants, within each theme were variations unique to each woman’s experience.

Code-and-Retrieve Technique

Richards and Richards (1994) outline a data reduction technique called Code-and Retrieve. This technique involves, “labeling passages of the data according to what they are about or other content of interest in them, then providing a way of collecting identically labeled passages.”
This technique was employed primarily for the cross-case analysis in order to code data and organize into themes, or data reduction. The transcripts were each read and the researcher made a list of common codes, or words and phrases, that frequently occurred. These codes were then grouped into the major themes.

Although codes were primarily found from reading and rereading the transcripts, a computer word-processing program also assisted with locating these codes. Once codes were noted in one participant’s interview transcript, the researcher utilized the word-processing program’s text-search feature to locate those various codes within the other participants’ transcripts.

Quotes from the women which demonstrated the various themes or contained the codes, were pulled from the transcripts and grouped together based on the common theme. Through a rudimentary “cut and paste” method (Tutty et. al., 1996), these groups of quotes were tacked to a poster board so the researcher could visualize how these women’s experiences coincided. This also allowed for easy retrieval of the data.

**Coding**

As stated, one of the steps in the cross-case analysis was to code the data. According to Tutty, et. al. (1996), coding is a two stage process. First-level coding is a concrete process which is involved with locating concrete content. Second-level coding, which is more abstract, is more involved with interpreting meaning (Tutty, et. al., 1996).
Tutty et. al. (1996) outline five tasks which are essential to first-level coding. These are: (1) identifying meaning units, (2) assigning category names to similar groups, (3) assigning codes to categories, (4) refining and reorganizing codings, (5) deciding when to stop (Tutty, et. al., 1996). This process allows the researcher to reduce transcribed interviews into usable sections.

The second-level coding “involves interpreting what the first-level categories mean” (Tutty, et. al., 1996; p. 107). It is important in this phase to support interpretations with actual excerpts from the interviews. It is also during this phase that the actual “cutting and pasting” take place. Second-level coding has two primary tasks: (1) retrieving meaning units into categories, and (2) comparing categories (Tutty, et. al., 1996). It is during this stage that the researcher begins integrating categories into themes.

**Peer Debriefing**

In qualitative research, peer debriefers are often utilized to enhance the credibility of a study (Lincoln and Guba, 1985). Peer debriefing was an important component in developing themes for the cross-case analysis portion of this study.

Without prior knowledge of the researcher’s themes and codes, the peer debriefer was provided with all transcripts to review. After having read each transcript, she noted various codes and themes which she recognized as frequently appearing. The peer debriefer was a highly experienced qualitative
researcher who was able to identify many themes. The peer debriefer's list of themes included the following: the decision-making process, replacement, saying good-bye, coping, social supports, and the various grief stages in the participants' stories. The codes and themes noted by the peer debriefer were very similar to those noted by the researcher. This element of peer debriefing contributed to the trustworthiness of the study because it showed that if another researcher to were to analyze this data, he or she would develop similar results.

**Inter-Case Analysis**

The literature surrounding grief and human bereavement has suggested that there are various stages or phases which individuals will experience (Cook and Dworkin, 1992; Worden, 1991; Simos, 1979). The literature also recognizes, however, that there are very unique responses to loss and that not all individuals experience loss the same way. This is why it is important to evaluate the data, seeking those peculiarities which make that grief reaction unique. Idiosyncrasies are discovered by closely evaluating each woman's story of her experience. These intrinsic case studies provided better understanding of each woman's particular case (Stake, 1994). The value of this is in the recognition of differences that exist even among women experiencing a similar event. It also helps to identify the various ways in which individuals grieve.
The method for identifying these idiosyncrasies is not as easily identified as that used for the cross-case analysis. In several situations, while searching for common themes the researcher discovered situations which were unique to one individual. The researcher noted these and returned to them after the cross-case analysis was completed.

The idiosyncratic responses of significance in the inter-case analysis were often more covert than those of the cross-case analysis. They were often discovered by reading and rereading the transcripts and piecing stories together. This method of data analysis is described by Richards and Richards (1994; p.447) as, “complex processes of evidence analysis, including consideration of knowledge about the site or story that is not in the text.”

On several occasions during this stage of the data analysis, the researcher again listened to the audiotapes to gain understanding of the emotions which could not be represented by text in the transcripts. When the women laughed, when they cried, and when they paused was much more identifiable from the audiotapes than from the written transcripts. The researcher could identify emotions from the speech patterns that the transcripts could not convey. This enabled the researcher to identify other differences in the ways in which these stories were told.

**The Reflexive Journal**

The reflexive journal was an integral part of the inter-case analysis. Throughout the research process, idiosyncratic responses or situations
presented which the researcher noted in the reflexive journal. Following the completion of the cross-case analysis, the researcher returned to this journal to begin identifying those particularities which were unique to one experience. The use of the journal during data analysis ensures consistency and helps to remind the researcher of any biases she may have developed during the research process (Tutty, et. al., 1996).

The reflexive journal contained a great deal of information and served several purposes. The first of these is that it provided a means for record-keeping. The journal was a place in which the researcher could record pertinent details of the research process, specifics of individual interviews, and other important information. This was its greatest value to the inter-case analysis component of the data analysis, as this is where idiosyncrasies had been noted throughout the research process.

A second purpose of the reflexive journal was that it provided an outlet for the researcher to organize and conceptualize thoughts. Gathering and processing such a wealth of information could become very complex. The reflexive journal gave the researcher an unstructured place in which to begin writing ideas and organizing thoughts.

A third purpose which the journal served was to provide an outlet for the researcher to ventilate feelings and emotions regarding the research process and interview material. Certain interview content at times invoked various feelings within the researcher, and the reflexive journal was an appropriate place for the researcher to describe these feelings. By recording
this information in the reflexive journal, the researcher was able to return to
the information during data analysis. As stated previously, this helped to
remind the researcher of biases, as well as reminding her of peculiarities
which may have been forgotten.
CHAPTER 5

PROFILES OF PARTICIPANTS

In order to facilitate the reader's understanding of each individual's experience with euthanasia, it is important for the reader to know and understand something about each participant. Personal profiles have been written for each of the eight participants which describe basic information about the participant, as well as information about her own unique euthanasia experience.

Profile #1 - Sue

Sue is a retired school teacher who is very active with the local humane society. She has several dogs and cats and is married with grown children. The dog she focused on in the interview was Dudley, as he had just been euthanized two and a half months prior to the interview. Dudley was a large dog who was 11 years old at his time of death. Sue had him since he was a puppy.

Sue had taken Dudley to the veterinarian for a dental examination. She had him groomed shortly before his appointment. At the veterinarian's
office, Sue noticed that Dudley had enlarged nodes. The veterinarian examined him and determined that it was lymphoma. Dudley was then taken to a specialist where he began cancer treatment. After ten trips to the specialist, and a brief period of remission, Sue decided to have Dudley euthanized. He had lost nearly thirty pounds, and his final weekend he was having difficulty breathing. Sue believes that there was no other choice due to his deteriorating condition.

Sue had other dogs euthanized in the past, so she was familiar with the procedure. Sue remained present during the euthanasia, talking to Dudley throughout the procedure. She stated that afterwards she cried the entire day, but that she felt very relieved. He was suffering, and Sue stated that she cannot “stand to see animals suffer.”

Although Sue’s husband is not as emotionally expressive as she is, she states that her family and friends are supportive of her. Sue had Dudley cremated and will keep the ashes on a shelf next to the ashes of another dog.

Profile #2 - Michelle

Michelle is a young woman in her early twenties. She is working in a veterinary clinic while attending nursing school. The dog which she discussed was Alex, a female dalmation who was six years old who was euthanized one week prior to the interview. Although the dog belonged to the family, Michelle referred to Alex as her mother’s dog because Michelle no longer lived at home.
Alex had become aggressive and had bit someone. Michelle’s mother was taken to court and asked to have the dog euthanized. The family fought the decision, but eventually Michelle persuaded her mother to allow the dog to be euthanized. Michelle’s sister was pregnant and she feared how the dog would behave around the baby.

Michelle took the dog into the clinic where she worked. Her mother was on vacation, so Michelle went in alone. Michelle had not planned on being present during the procedure, but she walked in before the veterinarian had completed the euthanasia. Alex had fought the procedure and did not “let go” until Michelle entered the room and said good-bye to her.

Michelle has received mixed messages from her family. Her sister has been very upset and calling her frequently. Her brother, however, did not agree with the decision. Her mother does not want to talk about it. They had the dog cremated and will keep her ashes. They had got the dog shortly after Michelle’s father had died. Incidentally, he was also cremated. This has led to a somewhat complicated grief reaction.

Profile #3 - Gloria

Gloria is a middle-aged woman who works at a veterinary clinic. The dog she discussed was CoCo, a Shepherd-Husky mix who was euthanized three years from the time of interview at the age of thirteen.

Gloria had moved out of state and left CoCo to live with her son. While she was home visiting, CoCo suddenly experienced something similar to a
stroke. Gloria contacted her good friend who was a veterinarian, who came to the home. The dog’s back end was paralyzed. The decision was made mutually by the veterinarian and Gloria to euthanize the dog at that time. Gloria assisted the veterinarian during the procedure. She says that it was very difficult to assume a professional role when it was involving her own pet.

Although Gloria did not have many supports where she lived, she states that she and her children are very close, and they were very supportive of her after CoCo’s death.

However, CoCo’s death was very difficult for her. Gloria became very emotionally distressed during the interview. She stated that she still misses CoCo deeply. She already had another dog as well, but waited until just this year to get another puppy. They got this puppy because they are preparing for their other dog’s old age.

Profile #4 - Leslie

Leslie is a young woman in her early twenties who is engaged to be married. She had a dog euthanized nearly two years prior to the interview. Cody was a five-year-old Siberian Husky who had cancer. She had the dog since he was a puppy.

Cody had been ill and she had taken him to her veterinarian, who did not find anything wrong with him. She then took him to another veterinarian who quickly determined that the dog had a twelve inch tumor on his spleen. The tumor was discovered during exploratory surgery. The veterinarian
telephoned Leslie while Cody was still under anesthesia and requested permission to euthanize the dog before he woke up from the surgery. Leslie had only minutes to consider her decision. She then gave her consent to have the dog euthanized.

Leslie has since struggled with feelings of guilt. She was told that the tumor had probably been present two to three years. She feels badly that Cody had to suffer for as long as he did. While he was ill, Leslie had force-fed him to keep him alive. She states that she feels guilty for having kept him alive that way. She wishes that he had died naturally at home. Leslie also regrets that she never had the opportunity to say good-bye. When she left Cody at the veterinary clinic, she did not realize that she would never see him alive again. Leslie had her dog buried at her aunt's home.

Leslie adopted another Siberian Husky a few months later; however, she states that she has not bonded to the new dog the way that she bonded with Cody. She believes she did not wait long enough after Cody's death before getting another dog. She feels that she was trying to replace Cody because she missed him so much, and the new dog's personality is very different from Cody's.

Profile #5 - Ruth Ann

Ruth Ann is a social worker in her early forties, who has an adult daughter. Nearly five years prior to the interview, Ruth Ann had euthanized her seventeen year-old cat, Kitty, because of multiple age-related health
problems. Ruth Ann’s daughter had received the cat as a kitten when she was five years-old. Ruth Ann and her daughter were both present during the euthanasia. Ruth Ann had a dog euthanized a few years prior to the cat, but she had not been present during the dog’s euthanasia.

Ruth Ann’s daughter adopted a kitten a few month’s after the cat was euthanized. Shortly after that, her daughter moved into her own apartment, taking the cat with her. Her daughter encouraged Ruth Ann to get a kitten for herself as well; however, Ruth Ann does not want another cat.

Although Ruth Ann has friends and family that also have animals, she did not have many social supports in dealing with the euthanasia of her cat. She attempted to discuss the cat’s euthanasia with her brothers, but they really did not know how to respond. Ruth Ann did not openly express her feelings with others regarding the cat’s death. She states that she did grieve privately when the animals were euthanized, but does not like “public displays.”

Profile #6 - Janie

Janie is a medical assistant in her mid-forties who is married with two grown children. She has had three dogs euthanized in her adult life. She has never been present for any of the euthanasia procedures.

Although Janie cares for her pets, she clearly distinguishes animal relationships from human relationships. She does not believe in going to extreme measures, such as amputations or chemotherapy, for her dogs. She
also does not keep the animals’ remains, even though her children wanted to have Buffy cremated and keep the ashes in an urn. She felt that was “a little bit ridiculous.”

The dog which Janie was closest to emotionally, was Ginger. This was the only dog which she referred to as “hers.” The other dogs she considered family pets. She and her husband got Ginger shortly after they were married and before they had their children. Ginger developed cancer, and was euthanized at the age of five. This was over twenty years ago, yet it was still obvious during the interview how much Janie missed Ginger.

The first dog that was euthanized was Sheba. Janie considered Sheba to be her parents’ dog. She was also a St. Bernard, who also was euthanized at age five due to cancer. She was the family pet who died when Janie was nineteen years old. It was shortly after that when Janie married and then adopted Ginger. After Ginger was euthanized, Janie and her husband waited a few years before adopting a beagle named Buffy. Buffy was a birthday present for her daughter, so Janie again did not consider this dog to be hers. Buffy was euthanized at the age of nineteen. Due to extremely poor health, Janie had Buffy euthanized on Christmas Eve, which upset and angered her children.

Although Janie had Buffy much longer than she had Ginger, she grieved much more for Ginger. One week after Buffy’s death, the family adopted another dog.
Profile #7 - Catherine

Catherine is a physician in her thirties. She had her six-month old Siamese cat, Fred, euthanized one year ago because he was infected with Feline Infectious Peritonitis (F.I.P.), a terminal disease in cats. She had two other cats at home, and her veterinarian feared that the sick kitten would infect the other two.

Catherine struggled over the decision to euthanize. As a physician, she could not understand the cat’s disease. Very little research is available regarding testing and treatment of F.I.P. This was very disconcerting to Catherine, who eventually decided to have the cat euthanized to spare her other two cats from contracting the disease. Unfortunately, she later discovered that the other two cats had already been infected.

Catherine’s social supports were very poor. She was new to her community and had not developed many close relationships yet. Her husband was not very supportive, either. Most distressing to Catherine was her feeling that her veterinarians were also not being very sensitive to her emotional needs.

Catherine was very distressed during the interview. Although she had only had this cat for a few months, he was the cat she was the closest to. She claims he was her shadow, constantly following her around. She states that being with this cat was, “like being with a person, only easier.”
Profile #8 - Mary

Mary is a woman in her late fifties who works in a medical office. Over ten years ago, Mary had the family’s miniature poodle, Muffin, euthanized at the age of fourteen. The dog had renal failure and other geriatric health problems.

Mary and her husband mentioned to their teenage children that they would probably need to have Muffin euthanized, and then went that same day and had it done while the children were at school. Although Mary and her husband were both present during the euthanasia procedure, Mary did not want the children to be there. The children were very upset with their parents for taking the dog in so suddenly. They had Muffin cremated and buried the ashes in the yard.

Shortly after Muffin’s death, Mary adopted two dogs which she still has. Her husband died one year ago, and Mary says that it will be much more difficult for her when her current dogs die because she is so much closer to them emotionally than she was to Muffin. She states that the dogs are, “all I have now.”
CHAPTER 6

CROSS-CASE ANALYSIS

Phase I of the data analysis involved cross-case analysis, identifying and coding commonalities which were then used to generate themes which appeared throughout the participants’ experiences. Although the primary themes were common to all or most of the participants, within each theme were variations unique to each woman’s experience.

A Code-and-Retrieve technique was employed in the cross-case analysis in order to code data and organize it into themes (Richards and Richards, 1994). This is also called data reduction. The transcripts were each read and the researcher made a list of common codes. These codes were then grouped into the major themes. This was first-level coding (Tutty, et. al., 1996).

The codes were primarily obtained through the traditional “cut and paste” technique of removing quotes from the transcripts (Tutty, et. al., 1996); however, a computer word-processing program also was used to assist with locating these codes. Once codes were noted in one participant’s
interview transcript, the researcher utilized the word-processing program's
text-search feature to locate those various codes within the other participants' transcripts.

Phase I of the data analysis identified the following nine common themes which were relevant to most of the women's experiences of euthanasia.

**Theme #1 - Rationale/Decision-Making**

In discussing the experience of euthanasia of a companion animal, probably the most prevalent theme discussed by the women was the rationale for the euthanasia and the decision-making process. Seven of the eight animals discussed were suffering from serious health issues, cancer being the most common. Michelle's situation is unique because her dog was euthanized due to aggressive behavior. This will be discussed further in the next chapter. It is important to note that in the majority of the cases, however, the animals were terminally ill at the time of euthanasia.

This issue of quality of life and the amount of suffering the animal was experiencing appears to be the primary factor in the decision to euthanize.

**Sue:** I just can't stand to see animals suffer. In any way...I mean, if you can do all you can do, like take them to the vet and medicate them and get them well, that's one thing. But when you know there's no chance for them getting better.

**Gloria:** She would never be able to use her back end again, and so the decision was made then not to make her suffer.
Janie: But when the vet called that day, I really broke down in the office. And I knew it was useless to bring her home, and so we didn't even get a chance to say good-bye...I said, take her out of her misery.

Mary: This went on for awhile before we, you know, before he really got to the point where he was--I mean he was getting bad. I mean, of course, he was getting old. He was just elderly, cause his eyesight was getting bad. You know, and when the cold weather came that just kind of, you know, things really regressed...We had to carry him in and out of the house. He couldn't get up and down the steps, and he was on a special diet by the vet, and, you know, it was just getting worse. Prior to that, he had been real active, you know. He had been--for as old as he was--he would, we would take him out for a walk and he would just run. And, um, I think we basically decided we would have it done..."

Catherine: I said, "Well, he's not suffering now, but I don't want to get in the situation where he will be suffering and I will have allowed that to happen."

In some cases, the veterinarians urged the pet owner to consider euthanasia in order to end the animal's suffering.

Leslie: She told me that if we brought him out of, you know, the sedation, that it would be cruel because he was literally starving to death and he was in severe pain...Well, I wouldn't say I agreed. I cried, and she said, "I have to have your OK. You've got to tell me what you want to do." And I asked her what she thought was best and she told me that it wasn't fair to bring him back out, so I gave her permission.

Ruth Ann: And then finally when we took her in another time, he (the vet) said, "Maybe you all should start thinking about this." And then he says, "I can do it now or we can wait, but it's probably something you will need to do." And so he stepped out and my daughter and I sat and talked about it and said for the cat's well-being and all, maybe we ought to go ahead and do it.
As mentioned previously, in Michelle's situation, the dog had bitten someone and the family was being urged to have the dog euthanized in order to protect other people.

**Michelle:** It was definitely a hard one, but it was definitely the right decision. I had tried to convince my mom the day after the animal bit someone then I found out and I said, "This is what you have to do." I said, "You just can't have-." I mean, she darted and charged someone, and by working with animals, I knew we were in trouble. And this was not the first time she's done it. She's done this several times, but really hurt someone this time.

The rationale for euthanasia and the decision-making process were integral parts of each of the women's stories. There appeared to be a need for them to explain why they each had elected to euthanize. With the exception of Michelle's unique situation, the animal's quality of life and the owner's desire to end the animal's suffering were primary factors in the rationale and decision-making. These women were each trying to do what they believed was best for the animal. None of the women felt that these were easy decisions to make; but when asked if they had to do it again, would they still have decided to euthanize, the women agreed that euthanasia was the right decision to make for their animals.
Theme #2 - Participant’s Presence During Euthanasia

Another one of the most prevalent themes was the pet owner’s decision whether or not to be present during the euthanasia procedure. Seven of the women discussed this during the interview, most of them electing to be be present with the animal.

**Sue:** This time, I definitely wanted to go back because I knew Dudley was suffering, and that they know you’re there. So, I went back, and it went very fast. I just talked to him while he went to sleep.

**Mary:** My husband and I. We both stayed with him when he was put to sleep. I feel that was the least--it was hard--but I feel that was the least I could do because he had been such, he’d been a good dog.

**Ruth Ann:** She was on the examining table and we just didn’t want to leave because she was so sick.

Some of the women who were either unable or chose not to be present during the euthanasia procedure, later regretted the decision and wished that they had been there.

**Michelle:** I look back now and wish I had decided to be there...I think she would have went down easier if I would have been there when they started it all. They took her from me. She didn’t want to go with them. She fought them...She didn’t know what was going on. She knew I was upset. You know, I was crying my eyes out. She had no idea what was going on.
Leslie: I think I would have felt better about the whole thing because at least I'd have known. If he'd have been awake and I could have said good-bye. I felt like that was the part that never ended. When I took him in there I told him that everything was going to be alright and he wasn't going to hurt anymore, which was the truth. But, I didn't really say good-bye because I was hoping they could fix what was wrong with him and then he would come out and be OK.

Only one of the women had not been present and did not ever want to be present in the future. When Janie was asked if she would want to be present during her dogs' euthanasia, she stated, "No, and I guess it would be the same way if being present if they did an autopsy on a family member." Janie felt the idea of being with the animal during the euthanasia procedure was very morbid.

The decision whether or not to be present during the euthanasia is a very personal one. The various reactions to deciding whether or not to be present demonstrates the importance in veterinarians allowing the individual the opportunity to be present, even if she declines. It is also important that the veterinarians respect the wishes of those who do not want to be present.

**Theme #3 - Social Supports**

A third important theme that was apparent was the issue of social supports. Social supports included family, friends, and the veterinary staff. For some of the women interviewed, family members were the primary ones who showed sympathy and provided support after the animal's death.
Leslie: Both my parents were very supportive because they had been around Cody since he was a little pup, and we always, our dog, we always take him everywhere we go with us. We go to my mom's, we take the dog. So, he was a very big part of our family, too. And my dad went out when we buried him too, and he was just as emotional as we were.

Gloria: I think it was sympathetic, but it was like, I was only there for like maybe the rest of that weekend and then went back to jersey, and people there didn't know this dog, so I mean, you didn't get a lot of support. Mainly it was just family support...I really felt I at least have a family, and we've always been a close family. All of the children and my husband and I, so I had enough support. And working with it day by day (as a vet tech), when you work with other people, giving them support. I think if you've been through it, it's a lot easier to empathize with people.

Other women described gaining comfort and emotional support from their veterinarians or staff members at the veterinarians' offices.

Sue: The vet was just, that particular group of vets, and in fact, most of the vets I know are very sympathetic. Because I have had to take animals from the cat shelter in to be euthanized and I find most of the vets are very sympathetic, which I'm happy to say. The ones I deal with anyway.

Ruth Ann: When I went through this situation with the dog, I was a basket case, and the vet spent more time talking to me and patting me on the head...

Even those women who did receive support from some sources, recognized other areas in which they did not receive the same support.
Leslie: There's a sadness that you have for such a long time you figure, you know, someone says, "it was just your dog that died, you shouldn't be emotional about it." But it's, you know, all the time. Little things that happen that remind you and it comes back.

Ruth Ann: I think I let my brothers--I have two brothers--and I let them know, and they just said, "Oh." Because they both--I don't know if they've ever been through putting them down.

Unfortunately, there were still other women who described not actually finding any emotional support or sympathy anywhere following the euthanasia of a beloved pet.

Catherine: While one vet was more supportive than the next, I did "pick up" feelings that "emotions" were not welcome and inappropriate. To this day, I feel embarrassed about my degree of depression/anxiety regarding his death. His/their staff was frankly rude and unresponsive to any distress or questions. Someone with coping problems with an animal dying either through euthanasia or naturally is in some ways worse off than a person with a family member (dying) in that to most people it is socially unacceptable to express grief or to talk about what is going on.

During the interview, Catherine was asked if her husband was supportive. She nodded, "no," and then explained:

Catherine: You know, he grew up on a farm and to him the cats eat the mice, and pets are basically like tools. I think that he was sad, but he was not supportive.

Catherine did have one friend who tried to be supportive, but because the friend was also very emotional it was not the right type of support that Catherine needed.
Catherine: Actually, Andrea was very supportive, but she was as bad as I was. I mean we'd kind of cry. She'd talk about her dead cat and cry, and I'd talk about Fred and cry. So, in some ways she was very helpful, but she was very emotional about it. And I just got to the point that I was way too emotional about it, and, so in some ways she was supportive and in some ways she wasn't.

Due to the unique circumstances surrounding the euthanasia of Michelle's dog, she also did not receive the emotional support she needed.

When asked how people were reacting to her situation she responded that others appeared happy that the dog was no longer alive.

Michelle: Because, I think, my cousins, which are much younger, feared her. She'd never bitten a child or attacked a child for any reason, it seemed to be older people, but I think they all feared her. And my aunt, that had the small children, um, feared her. And she asked me the following weekend, you know, "Is your duty done?" And I asked her, I said, "What are you talking about?" And she said, "With Alex." And I think inside she was happy. I was sad that she asked me, but I mean, I can understand how she feels. But, I think everyone else was happy.

Michelle has also been trying to be strong for her other immediate family members who are grieving, and has not been allowing herself to receive much support from them.

Michelle: I guess my sister has (been supportive). She's called several times to cry, and I've tried to be the brave one and say, "Now, don't get me upset." But, um, no. I would have to say no one really has (been supportive). I mean, my sister. I think, I think my mom needs more support than I do.
These stories, shared by these women regarding their social supports after the euthanasia of a companion animal present the fact that there is still a need for the public, veterinary professionals, and social workers to understand and appreciate this very real grief reaction. Several of these women experienced problematic grief reactions, which will be discussed later, which possibly could have been prevented if they had received adequate support for their feelings.

Not only do others need to understand and appreciate the pet owner’s feelings of grief, but the pet owners also need to feel that it is acceptable to express their grief and seek some support.

**Theme #4 - Memorializing/Pet’s Remains**

Another common theme that was discussed in seven of the interviews involved the animal’s remains and memorializing the pet. Three of the six women had their animals cremated. These pet owners saw cremation as a type of memorialization of their pet. Although two women elected to keep the cremains, or ashes, one woman chose to bury them.

Sue, who had previously cremated another animal, keeps Dudley’s cremains on a shelf beside the other animal. She states:

*Sue:* So we had him cremated, and he joined Alex (their other dog) in the kitchen. One’s on the top shelf and one’s on the second shelf because that’s where they spent their life trying to get food...I guess you could say cremation is a kind of memorialization.
Mary had her dog cremated and had intended to bury the cremains; however, the family soon moved to another house. Mary took the dog's cremains with her and buried them at the new house.

For Michelle, the cremation of the family's dog Alex was symbolic of her father's cremation:

Michelle: I'd prefer to have buried her, but that wasn't my decision. My mom will store those ashes. It will just be something she will keep onto. I think, um, Alex meant a lot to her because she kind of replaced my dad after he died because she got Alex after my father's death. So I think this is more of a 'my father issue' versus, almost a dog issue when it comes to putting her to sleep, because now she's got my father's ashes and Alex's ashes.

Two of the women buried their pets. Although Gloria buried her dog, she states that in the future she will cremate:

Gloria: I think the only thing that I would have probably done different is probably had her cremated had I realized how much, how easier it was to do that now...And I will do that for the rest of my animals because I think that's nice to have their ashes.

At Leslie's dog's burial, her family held a memorial service for her dog which provided a sense of peace and closure for Leslie:

Leslie: We took him out to my uncle's who had land in the country because he loved it out there because he could run, and we took him out there, and we put his blanket and his favorite toy in there with him. And the weirdest thing happened. There were getting ready to cover him up, and I threw his blanket and his toy in there, and we all bowed our heads for a minute, and like I bet eighty birds flew over. It was the weirdest thing I've ever had happen to me. It just gave me chills, cause it was like they were telling him good-bye, and it was so weird to have

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something like that happen right at that moment....I think that was somebody up there telling me that was alright. That I did the right thing...It gave me a little peace, because I was so upset...

Janie and Ruth Ann both allowed the veterinary disposition of the pets remains. In the following quote, Janie discusses the options that the veterinarian had presented to her:

**Janie:** We could cremate the dog and give you the urn to keep, or you could arrange to have it put in a cemetary for all these different prices, and I said, "No, this is a dog." I think my children would have liked to--I know my daughter would have wanted to have the dog in an urn and everything else. I said this is a little bit ridiculous.

**Ruth Ann:** The vet took care of it (the cat's remains). Well, and the vet took care of it for the dog, too...We took the kitty litter box, I know I cleaned it all up and put it in a place--stored it in the basement. We just took all of that stuff--if there was any litter left, I think I threw all of that stuff out. Threw out the toys, you know, and all that kind of stuff...and I remember doing that same thing with the dog. I wanted get home and just get it out of there...to complete the process. It was almost like a burial.

Because there is no culturally approved ritual for mourning a pet (Harris, 1984), these women used the burials or cremations as rituals for mourning. These "healing rituals" can help pet owners to gain a sense of closure and work through some of the grief associated with the loss of their companion animals (Paladin, 1991; and Rando, 1984).
Theme #5 - Comparison to Human Death

A very surprising theme which emerged was that of participants making direct references and comparisons to human euthanasia. This is surprising because there was nothing in the literature which might have predicted such a response. The participants were never directly asked of their opinions on human euthanasia, but five of the eight openly expressed those opinions.

Catherine: Oh, I think that I believe in euthanasia for people, so then for pets it makes sense to me, too.

Janie: I don’t believe in letting human being, animal, whatever suffer...Um, but I do believe in it if an animal or even if a person is really suffering. You know, if this is what they want.

Sue: It’s (euthanasia) just the kindest thing I think you can do to an animal, and it’s so quick. I can even see where it’s for humans. I think now I’ve kind of changed my mind on things like that.

Michelle: I think that’s (euthanasia) a wonderful option. I wish sometimes, it was able to do to humans. But, very nice that we have that great gift.

When Gloria was asked if she saw anything negative about euthanizing, she replied:

Gloria: No. No, I don’t. In fact, that’s probably wrong, but I think a lot of people like Dr. Kevorkian. It’s very humane.
Still comparing the euthanasia of an animal to that of a human, Leslie stated that she questioned her right to decide when it was appropriate for the animal to die.

Leslie: Well, it’s a hard thing to do, and the biggest thing of it’s like you--I felt like I was playing God. Who, who is it for me to make the choice for my dog? Nobody says when a person’s in the hospital, “Let’s put them to sleep” if they’re suffering. And that, I think, is the negative part of it. You don’t know if you should cross that line or not, because, you know, everything happens for a reason, and you’re not God. And that was my biggest thing. That was the only part I didn’t like about it. That I didn’t feel, in some ways, that I should make that.

Although Catherine had stated that she believes in euthanasia for humans and animals; however, she struggled with the decision when it was time to decide for her own cat.

Catherine: I kept thinking like, you know, the Dr. Kevorkian comparison. I just didn’t like to have to make as much--go out on a limb as far as I did. You know, I mean, it’s like if he was suffering, oh, that’s clear cut, you know. You know, something awful happened to him, you know, he would go into renal failure or have a stroke, I mean, that’s pretty clear cut. But, this was so unclear and I just felt like I’m taking all of the responsibility.

The relationships that these women drew between the euthanasia of a companion animal and human euthanasia were very unexpected. However, there are several possible explanations for why these connections were drawn. The first of these is based on the animals’ relationships to the women. In these situations, the animals were very often serving in very human-like roles
in the pet owner’s life. Therefore, the women identified with them as being more human than animal. Because of that, they transferred the ideas of euthanasia for animals onto their beliefs for humans.

A second possible explanation is that because these women found peace in ending the suffering of the animal, they also believed that peace could be found in ending the suffering of terminally ill humans. These women felt that euthanasia was the right thing to do for their companion animals, some even said it was “the kindest thing you can do.” Therefore, they also feel it would be a kind thing to do for a suffering human, as well.

A third possible explanation is that these women already believed in human euthanasia prior to the euthanasia of the companion animal, and it was that prior belief that led to the decision to euthanize the animal. Possibly it was because they believed in it for humans that they elected it for their companion animals.

Each of these ideas will be explored further in the last chapter. Nothing in the literature prepared the researcher for this outcome, so it warrants additional study to understand why these relationships were drawn.

**Theme #6 - Anthropomorphism**

Anthropomorphism is the attribution of human-like characteristics to non-human beings. The previous theme dealt with the participants applying
their beliefs regarding animal euthanasia onto human death. This theme differs in that it deals with the animals being treated like humans. In seven of the eight interviews, the women directly referred to the animals as serving in human roles in their lives.

**Catherine:** Well, I don’t have children, and I probably won’t. So, they were a lot like my children. You know, I talk to them, and well—when I was single—they used to eat with me. They’d sit on the table.

**Leslie:** You know, an animal is almost like having a little kid. There’s always that third person and then when they’re gone, there’s that emptiness...I feel like he was my child...It like left a hole in us. It was strange because it was like losing a child.

**Gloria:** She (the dog) was family. A family member, family member.

**Sue:** They’re (her pets) part of the family.

**Janie:** I know a lot of people get very, very attached to their pets, and I can see that our pets have been like family members...she (the dog) was a member of the family.

**Ruth Ann:** We always said that the cat kind of ruled the house.

Mary had discussed during the interview how the dog she had euthanized was “the family pet.” She went on to explain how she has a very different relationship with the two dogs she got after her children were grown.

**Mary:** They’re both very special, and I’m probably closer to these two. It would be much harder, it will be much harder on me when these two, when something happens to these two than it was with the first one...My husband passed away a year ago, and you know, so that’s all I have now. You know, so I’m real close to them.
It is important for anyone who is assisting someone who is grieving over the death of a companion animal to understand and appreciate the role that the animal was serving in the human’s life. As mentioned in the literature review and as reiterated in these interviews, pets become important family members. Their death is often grieved much as any other family member’s would be.

**Theme #7 - Replacement**

The subject of getting another pet was discussed by each of the eight women. The participants differed, however, on the length of time each waited before getting another pet. Some of the women preferred to get another pet shortly after the death of the first pet.

**Sue:** Harvey was our dog that we had to replace our very first dog....I usually say to people who have had a dog, a dog or a cat, a pet has died, that I think the best thing to do is to get another pet right away. It will never take the place of that one, but it’s got its own personality.

**Ruth Ann:** (We were) sad and we talked about the house was gonna feel empty, and it did. This was (pauses) November? It might have been November, because a couple of weeks later, and I had said to her now we can get another kitten whenever you feel ready, and so, about the end of December, she (her daughter) was talking about she wanted a new kitten.  

**Janie:** After that time, my parents really never got another animal whatsoever. It was too hard, but when I got married in 1969 and bought a house in 1970, one of the things my husband had promised me was that we could get another St. Bernard, which we did.
Later, Janie went on to tell that after one of her dogs died, the family went to a shelter and adopted another dog one week later. She explains it in the following:

**Janie:** I think that we had just had a dog around so long... We had just become such a dog family. Whether it be for protection, or giving extra love, whatever. It was, you know, just something I knew we were gonna do. And like I said, if anything were to happen, if something were to happen to Brittany right now, we'd probably go out and get another dog.

**Mary:** Let's see, that was in the Fall, and I got another dog in like January... Which I probably really didn't even plan on getting a dog that quick.

Gloria prefers to get another pet before the older pet dies so that she has another animal there to comfort her. The following segment of the researcher's interview with Gloria, shows how much time and thought Gloria put into getting another pet after the death of CoCo:

**R:** And, did you get another dog afterwards?
**G:** No, not until this year, so it was really not one to replace her.
**R:** You waited, what three years before?
**G:** Yeah, three years before I got a pup.
**R:** And did you struggle with that decision? Did you think about, "Oh, we need another one?"
**G:** Yes. That was my main thing that I think Max made it easier when we lost CoCo, and I think having Dahlia now will make it easier when Max goes.

Leslie waited nearly one year before getting another pet. Her dog, Cody, was a Siberian Husky. She spent a great deal of time searching
different breeders for another Siberian Husky before finally adopting Beau. However, she has been struggling to develop the same type of relationship with Beau that she had with Cody.

**Leslie:** Because I think in a way, I was getting another dog to try and make my pain better. I mean, it's not that I don't love Beau, but I feel like now, I just, it was because I didn't have a dog there and I was used to having a dog. And in some respects I feel like I was trying to replace him. Emotionally. And they're not alike. I mean I love them both...I mean, I love Beau to death, but there's not the closeness that I had with my first dog. And I don't know if it was his personality. We were connected more than me and Beau are, so it makes you feel bad. You feel guilty and then you think, "OK. Why can't I love this dog like I loved my first dog?" you know. I don't feel that I replaced him because he's not him. You know, I didn't go out and buy the same dog and call him the same name or--and they're very different personalities. I'd like to have Cody back. I'd trade three of him for Cody.

Michelle's situation was very unique. It had only been one week since her dog's euthanasia at the time of the interview, so the issue of obtaining another pet was not brought up. However, Michelle spoke of how her dog Alex had been a replacement for her father after his death.

**M:** I think Alex meant a lot to her because she kind of replaced my dad after he died, because she got Alex after my father's death...

[later in the interview]

**R:** What about you? do you have any sort of attachment like that? Did you think of her as a replacement?

**M:** I would have to say yes and no. We got her because my dad wanted my mom to have a dalmation and she just couldn't handle with him being sick and with her. So, I would say yes in that aspect because we got her shortly after he died, and I would say no because I hadn't been in the house for a year and a half, so the attachment
was different. But, before I would say yes. When I was at home, we walked everyday, we spent, I mean every hour I was home we spent together.

Replacement is an issue which causes great concern to pet owners. Frequently friends and family encourage the bereaved pet owner to quickly obtain a new pet before she is actually ready to accept a new pet in her life. In other situations, pet owners may want to get a new pet, but feel they should mourn for a certain length of time or it might seem that they are forgetting the deceased pet.

It is important for pet owners to be encouraged to follow which ever route they wish to follow when it comes to replacing a deceased pet. As is evidenced by the interviews in this study, each pet owner has a different method which works best for her. Some chose to get a new pet when one is still living, but is older or sick. Others mourn for a certain length of time, while still others immediately adopt a new pet. What is important is that each pet owner is supported in her choice, whatever that choice might be.

**Theme #8 - Coping Mechanisms**

The eighth theme which emerged from the interviews was that of coping. Unlike some of the other themes, in which the women directly spoke of the activity, this theme was much more covert in nature. Rarely did the
women state how they coped, but the coping method or grief reaction was apparent through other statements and stories that the women told.

The women used a variety of different coping mechanisms following the euthanasia of their companion animals. One method of coping used to assist with the grief process was spirituality and religious beliefs.

Sue: So, I would always talk to them. Tell them how much we loved them, and that we'd see them later. And, because I'm a big believer in St. Francis, I would say 'St. Francis is waiting up there for you.'

Some of the women have tried to cope with the euthanasia of a companion animal by avoiding facing the grief. This avoidance is illustrated by the following quote from Leslie when she was asked how long ago her dog was euthanized:

Leslie: It's been...(sighs) I try to wipe it out of my mind. It's probably been at least a year and a half. Maybe almost two years.

Michelle and her family also used avoidance as a mechanism for coping with the euthanasia of the family's dog, Alex. She described a conversation with her mother in which her mother was asking questions about the euthanasia procedure. Michelle first stated, "Mom, I don't want to talk about her. It's very hard for me. It's fresh in my mind." Her mother convinced Michelle to tell her more; however, when Michelle began to talk about the procedure, her mother said, "Don't tell me anymore. I don't want to know."
Ruth Ann took a similar strategy for coping with euthanasia. She described trying to be strong and compared it to how she, as a social worker, copes with working with anorexic clients.

Ruth Ann: I think when I face things like that in my own life—cause when you’re dealing with like anorexics and other things, you’re stoic in a different way—but I think you kind of put on this big mask and be strong, and so, therefore, that’s what you’re trying to do.

Another method of coping used by the women in this study was that of acceptance of death as a natural component of life. Janie mentioned this acceptance of death at several points throughout her interview.

Janie: I think it’s just as you get older, you know things die. So, it’s more of a—well, it’s less of a shock and more of a reality. [later she stated] You know, Dad’s death was hard. Dogs deaths were hard, too, but you just go on, and I don’t mean to sound cold or anything else like that, but it’s just a part of life. And it’s not a part we like, but that is reality.

Another method of coping was to educate one’s self on the animal’s disease. As a physician, Catherine wanted to learn as much as she could about her cat’s disease. The lack of research to assist her was actually a cause of frustration for Catherine.

Catherine: I think the frustrating part about this was that he seemed fine and that there was just no information about the disease...It was really unclear what his prognosis was. [later she added] I didn’t really like the role of being dependent on somebody else to give me information or advice....I tried to do some research on my own, and I just couldn’t get the information.
The literature had suggested that the most common coping mechanism used by pet owners who euthanize is denial (Nieburg, 1984). Although several different coping mechanisms were utilized by the women in this study, denial was not one which was noticed by the researcher.

Some of the women found healthy ways of coping with their feelings of grief, while some of the others appeared to have a more complicated grief reaction. This is especially true of those who utilized avoidance as a mechanism of coping. They were not allowing themselves to grieve, and instead were stifling those emotions.

**Theme #9 - Complicated Grief**

The final theme common to many of the women in this study ties in very closely with the previous theme. Although some of the women utilized coping mechanisms to effectively deal with the grief, others used these mechanisms in problematic ways which are indicative of complicated grief reactions.

The literature had suggested that some pet owners who decide to euthanize a companion animal may experience a range of emotions, including guilt and anxiety and in extreme cases, neuroses or psychoses (Moneymaker, 1988). Cook and Dworkin (1992) use the phrase “complicated grief” to refer to those grief reactions that are problematic. They cite several categories of behaviors which indicate complicated grieving. The first of these is
“avoidance of grief”, which was exhibited by several of the women in this study. The second category of complicated grieving is “chronic grief.” Again, there were women in this study who exhibited this type of complicated grief. The final two complicated grief categories of “delayed grief” and “inhibited grief” were not as prevalent among the women in this study.

As noted above, some of the women in this study did display what could have been complicated grief reactions. A complete psycho-social assessment would be needed in order to know for certain if the women were experiencing complicated grief; however, based on comments and reactions of the women during the interviews, the researcher feels that some of the women were probably having complicated grief reactions. These were prevalent in the situations in which the pet owner felt a lack of control.

For example, in Michelle’s situation the family was forced to euthanize their dog Alex due to aggressive behavior. The family seemed to be experiencing very complicated grief, as this euthanasia was not something which they had control over. As mentioned previously, Michelle and her family avoided talking about Alex’s euthanasia. In the following text, Michelle discusses a conversation she had with her mother regarding the dog’s euthanasia:

Michelle: I think it’s so hard to talk about for her. She asked me last night on the telephone, she’s on vacation, and she was kind of asking me questions and I said, “Mom, I don’t want to talk about her. It’s very hard for me. It’s fresh in my mind.” She convinced me to go on a little bit. She said, “How did she do?” and I said, “She was fine.” Which, I lied. She was terrible. And she goes, “Don’t tell me any more.” She goes, “I don’t want to know.”
Michelle’s family was having a difficult time discussing the dog’s death. They were trying to use avoidance as a means of coping with their grief, but this avoidance is characteristic of a complicated grief reaction.

Leslie also appeared to be experiencing very complicated grief due to the unexpected illness and subsequent euthanasia of her dog Beau. For Leslie it was the lack of closure that she had, along with her own sense of powerlessness that complicated her grief. She was not able to be present during Beau’s euthanasia, and was forced to make the decision very suddenly and over the telephone. Leslie displayed behaviors that fit into two of the categories of complicated grief. Leslie exhibited both “avoidance of grief” as well as “chronic grief,” as she became intensely emotional when discussing Beau’s euthanasia during the interview.

Leslie: ...because he lived five years and one day, exactly, one day past his birthday. And that’s the hardest thing. When it comes on his birthday, you think then and the very next day. And with us having this other dog that looks sort of like him. He doesn’t, in the face he looks different to me, but other people think he’s the same. But they have the same characteristics. A lot of the things he does reminds me of Cody. Sometimes, he’ll do something and I’ll just cry because it brings back a memory of something that Cody would have done. But, thank God they’re not the same personality because I’d be really tore up all the time.

Ruth Ann had immediately thrown out both her cat and her dog’s belongings immediately following each of their euthanasia procedures. She also spoke of being stoic and “put on this big mask and be strong.” These behaviors are also indicative of a complicated grief reaction. She is avoiding
facing the grief. By throwing out the animals’ toys, beds, and litter pans, she
does not have to look at them and think of the deceased pet. By remaining
stoic, she does not allow herself to feel the emotions of the loss.

*Ruth Ann*: Well, I think I was trying to hold up because my
daughter being there and she had not been through this....We
took the kitty litter box, I know I cleaned it all up and put it in a
place--stored it in the basement. We just took all of that stuff--if
there was any litter left, I think I threw all of that stuff out.
Threw out the toys, you know, and all that kind of stuff..I wanted
to get home and just get it out of there.

Catherine also experienced a very complicated grief reaction. The
interview took place one year after her cat’s euthanasia, but the intensity of
her emotions as she recalled the event were indicative of chronic grief.
Catherine sobbed intensely during the interview and seemed to be still feeling
a great deal of anger surrounding her loss. Catherine felt as if she was never
permitted to express her grief.

*Catherine*: I wanted to talk to somebody about the fact that, um,
it's really stupid of me. It's obvious that I went way overboard
with the vet, and everybody around me kept talking about it very
matter of factly (crying). I felt as if my response was exaggerated
and inappropriate, and in part, this feeling was picked up from
my vet. I was hesitant to express my feelings to them...That
made it worse because you couldn't show that you were upset.

Gloria also appeared to be displaying chronic grief, which is significant
of a complicated grief reaction. Gloria's dog had been euthanized three years
prior to the interview; however, Gloria became very emotional discussing the
event. At several points during the interview, we stopped the audio taping so
she could take a moment before continuing with her story. The following excerpt from the beginning of the interview illustrates this:

G: But she was the best little dog. I mean, she had been with us since a puppy, and it was hard.
R: It was a very sudden decision, wasn’t it?
G: Mm-hmm (begins to cry).
R: Do you want to stop the tape for a minute?
[stopped tape]

Of the eight women whose stories have been included in this study, five of them appeared to be experiencing complicated grief reactions. This is very significant. More than half of the participants in this study probably need outside intervention to assist them through their grief. Services need to be available to assist these women, and any others who are experiencing complicated grief reactions involving the death or euthanasia of a companion animal. This will be discussed further in the last chapter.
CHAPTER 7

INTER-CASE ANALYSIS

The second phase of data analysis involved inter-case analysis, searching for idiosyncrasies and unique responses and situations. These are important as they demonstrate the individual differences involved in grief reactions.

The literature has demonstrated the various phases and stages of human bereavement, and has identified typical grief reactions. Attig (1996) suggests, however, that it is also important to realize that humans do not grieve uniformly. He states, “The stage and phase and medical ideas of grieving provide no clues about the ranges of such variations in our living and grieving that others must come to know and appreciate if they are to respect the uniqueness of our experiences” (Attig, 1996; p.45). He also warns that by relying too much on the stage theories of grief, we may be suggesting that there is a proper way to grieve. Attig says that this “bypasses and neglects our individuality and the uniqueness of our life circumstances and experiences (Attig, 1996; p. 46). This is why the researcher felt it was important to examine the idiosyncratic grief reactions, in addition to the common themes.

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As stated previously, the researcher relied heavily upon the reflexive journal in order to identify these idiosyncrasies. Throughout the research process, the researcher had noted any unique experiences or peculiarities in the reflexive journal. During the second phase of data analysis, as the researcher read and re-read the transcripts, she frequently returned to the reflexive journal to recall those idiosyncrasies previously noted.

A somewhat surprising finding is that there were fewer idiosyncrasies than commonalities among the participants. One possible explanation for this is the homogeneity of the participants in the study. All were middle-class, white women, which may have contributed to the similar experiences. Other issues in the methodology could also be responsible for the limited number of idiosyncrasies. These will be discussed further in the next chapter. It is possible that through additional interviews with the participants, new information would have also presented new idiosyncrasies.

Five unique responses to the experience of euthanasia of a companion animal are worth noting in this chapter. These are: (1) euthanizing a healthy animal, (2) the participant not the primary caretaker, (3) the pet replaces a deceased family member, (4) natural deaths are more difficult, and (5) setting limits.
Euthanizing a Healthy Animal

The first idiosyncrasy within the euthanasia experiences of the women in this study is the one situation in which the animal that was euthanized was not ill at the time of euthanasia.

Even within the common themes of the cross-case analysis, it was obvious that Michelle’s situation was very unique. Hers was the only animal that was healthy at the time of euthanasia. Max had been an aggressive dog who had attacked someone, which led to the decision to euthanize. This presented many differences to her grief reaction.

The primary of these was the reactions of others. Other people had forced Michelle’s family into having the dog euthanized. Many people, including some family members, were happy that Michelle’s dog had been euthanized. Rather than receiving sympathy and support from others, Michelle felt that others were glad that the dog was no longer a threat.Michelle, whose complicated grief reaction was discussed in the previous chapter, did not receive the same sympathy and support that she might have been afforded had the dog not been euthanized due to aggression.

It is also worth noting that in each of the other seven women’s experiences, the euthanasia was performed in the best interest of the companion animal. Michelle’s situation was the only one in which it was not the animal’s best interest which was being considered. This euthanasia was performed in order to protect human lives.
Participant not the Primary Caretaker

The second idiosyncrasy to discuss involves the participant, who was responsible for the euthanasia of the companion animal, not being the primary caretaker of the animal. In each of the other situations, the individual who made the decision to euthanize was also the animal’s primary caretaker who provided for the daily care of the animal.

Once again this idiosyncrasy involves Michelle and her family’s dog Alex. Michelle was unique in that she was not the primary caretaker of the animal that was euthanized. Michelle referred to the dog as her mother’s dog, although Alex was actually the family’s pet. What is unique about Michelle’s situation is that she took the dog to be euthanized and instead of her mother taking Alex. With each of the other participants who euthanized a family pet, a parent took the dog to be euthanized. This was the only situation in which the child made the decision and took the companion animal to be euthanized.

Michelle’s mother was actually the primary caretaker of the animal; however, her mother was emotionally unable to have the dog euthanized. This is why Michelle assumed this duty. Michelle was trying to be strong for her mother, but Michelle was also trying to be strong for the rest of the family. Her brother and sister were both very upset by the decision to have Alex euthanized. During the interview, Michelle discussed how she did not want to talk about the euthanasia with her mother. Michelle’s avoidance of the grief issues was discussed in the previous chapter.
Although Michelle was not the primary caretaker of the dog, it did appear as if she was the primary caretaker of the family. Based on the researcher’s own experience as a social worker, it appeared as though Michelle was so busy caring for the needs of everyone else in her family, she was neglecting her own feelings of grief. However, the interview took place just one week after Alex’s euthanasia, so it is possible that at the time of the interview Michelle was still in the early stages of her grief reaction.

Pet Replaces a Deceased Family Member

A third idiosyncratic response is that of the pet “replacing” a family member who had died. Chapter 6 discussed how new pets are often obtained to replace a pet which has died. There was only one situation in which the pet had been obtained as a replacement for a family member who had died.

Again, this is another unique element of Michelle’s experiences. Michelle’s family’s dog, Alex, had been obtained shortly after the death of her father. She stated in the interviews that in some ways, the dog was a replacement for her father. Although replacement was a common theme among the participants, in all of the other situations the participants were discussing replacing another pet. They were not discussing replacing a deceased human. Therefore, this presents a new element to the situation.
If the animal is replacing a human, then it would follow that the role which the animal plays within the family is likely to be very human-like. There is a definite link between the dog and Michelle’s deceased father; therefore, it is likely that the dog’s death would initiate feelings of grief regarding her father’s death as well. This may have led to what appeared to be a complicated grief reaction for Michelle and her family following Alex’s euthanasia.

It is also interesting to note that Michelle’s mother had both her father and the dog cremated. Michelle stated in the interview that her mother will probably keep the dog’s cremains along with her father’s cremains. This demonstrates that association that the family has of the dog and the father. However, it is also worth noting that Michelle was not in favor of having the dog cremated. During the interview, she had stated, “I’d prefer to have buried her, but that wasn’t my decision.” One can speculate that Michelle did not want to have the dog cremated because of the association she has of cremation with her father’s death.

Overall, there were many unique elements to Michelle’s euthanasia experience. It would be worth further exploration into the euthanasia experiences of others who have had to euthanize pets for reasons other than poor health in order to determine if those others’ experiences follow similar patterns to that of Michelle.
Natural Deaths Are More Difficult

The fourth idiosyncratic response involves the pet owner having a more difficult time coping with the natural death of an animal than she had with a euthanized death. The literature had stated that persons who elect to euthanize a companion animal frequently experience guilt over having made the decision (Moneymaker, 1988). A unique situation occurred when one of the participants discussed experiencing more guilt over the sudden, but natural deaths of her companion animals.

Ruth Ann discussed the euthanasia of two companion animals, a dog and a cat. She also spoke of two dogs she had which died on their own of natural causes. Ruth Ann felt comfortable with the deaths which were both her decision to euthanize; however, she discussed a great deal of guilt regarding the two natural deaths. She stated that she felt she should have prevented those deaths in some way.

Ruth Ann: In fact, the pup of the dog, they were dobermans, died and I found that dog dead. That was another disaster. I had put it out one night and I didn't realize it was sick. I put him out and forgot to bring him back in. I couldn't find him the next morning and I went out into the garage. I found him laying there stiff. That was almost more traumatic than the euthanasia because that was a totally unexpected death, and I found him and felt neglectful. And I called the vet and they said, "bring him in." And they suspected that because it was a large dog, that he probably did something and the stomach got twisted, and even sometimes with surgery, if you are aware, you cannot always save them. But, that I think was more traumatic, almost, because of finding him and feeling the guilt.
From a social work perspective, the researcher believes that there is an element of control that Ruth Ann needs in order to feel comfortable. The grief literature states that the lack of control humans have regarding death heightens anxiety and depression (Attig, 1996). Attig refers to death as “choiceless events.” He says, “The lack of choice makes us feel that the world is out of control and that we are powerless to influence major events in our lives” (Attig, 1996; p. 32). Euthanasia gives the pet owner the opportunity to have choices and exert some control over the situation of a terminal pet.

When Ruth Ann is in control of deciding that it is time for the animal to die, she is comfortable. When the animal dies suddenly, Ruth Ann feels that she is somehow to blame for having not prevented the death. The following excerpt from the interview discusses this:

**Researcher:** It sounds like a lot of what I’m hearing from you is when it’s a sudden death, when you don’t have any control over it, that it’s more difficult. Is that true?

**Ruth Ann:** I think so. I think so. There were some things—well, there was a feeling of neglect there. That I should have done something.

**Researcher:** In both those cases you felt like you should have prevented it, but in these two cases you had to—you made the decision to end their suffering.

**Ruth Ann:** Yeah, Yeah. And I think that age was a difference there, too. Because the two animals—the two dogs that died—were less than fifteen years old. Cause you can usually expect dogs to live fifteen or twenty years. So those were unexpected. Whereas these others, we knew they were elderly.

Ruth Ann’s life span expectations for dogs is somewhat extreme. The life expectation of a dog is very dependent upon the breed, smaller dogs living
significantly longer than larger dogs. However, what her comment
demonstrates is her expectation that the only pets that should die are those
that are very old and very ill.

With sudden deaths, Ruth Ann appears to become very overwhelmed
with guilt. When she has a period of anticipatory grief, she copes much better.
Anticipatory grief takes place before the actual death, and allows the
bereaved to begin mourning the loss. The grief literature suggests that this
period of anticipatory grief allows the person to put closure on the
relationship while the dying person, or animal in this case, is still alive
(Fitzgerald, 1994).

Ruth Ann's reaction to the deaths of her pets is a very unique compared
to the other women interviewed. Many of these other women had stated that
they would have felt less guilty and/or more comfortable had the animal died
naturally at home.

Setting Limits

A fifth unique response to the euthanasia experience is that of the pet
owner setting limits as to the extremes she would go to for a companion
animal. Each of the participants probably had her own limit as to how much
each would spend and what lengths each would be willing to go for the animal;
however, only one of the participants clearly stated these limits describing
how she distinguishes human relationships from animal relationships.
Each of the participants except Janie described the great lengths and extreme measures to which they went in order to care for the pets. Janie was unique in describing how she set limits for how much she would do for her dogs.

Janie stated in the interview that, "to do any type of surgery or anything else like that, I think that this is an animal and it's a pet." She went on to add, "I know a lot of people get very, very attached to their pets, and I can say that our pets have been like family members, but we haven't gone overboard..." Janie also set limits at the time of their pet's euthanasia. She did not want to spend the money to have her dog cremated, although her daughter wanted her to do that.

What is interesting about Janie's limits is that she is strongly attached to her pets and grieved the losses, yet she still distinguished them as pets. What this suggests is that it is not only those individuals who view the pet as more than just an animal who grieve the loss. Janie drew strong distinctions that pets are animals and are not people, and yet she still described the euthanasia as a traumatic experience.

Summary

There were many other elements not mentioned here which makes each euthanasia experience and each woman's story unique. One of the benefits of qualitative research is that due to the structure of the methodology, one is
able to gain insight into these unique and individual experiences. The value in that is it demonstrates the different ways in which seemingly like individuals experience similar situations. Although the sample was quite homogeneous, there were still unique particularities which could not have been predicted. This is why it is so important in qualitative research to not only delineate those areas in which the participants are alike, but also distinguish those ways in which they each differ.
CHAPTER 8

DISCUSSION AND CONCLUSION

The function of this chapter is to discuss the implications of the findings and derive conclusions from them. This chapter is divided into five sections: summary, discussion, limitations, implications for social work, and recommendations for future research.

**Summary**

The primary focus of this dissertation was to gain insight and understanding into the pet owner's experience of euthanizing a companion animal. The researcher was interested in factors which led to the decision to euthanize, the actual euthanasia event, and the coping after the animal was euthanized. Social supports of the pet owners were also examined. The researcher conducted both a cross-case analysis, as well as an inter-case analysis. Common themes, as well as idiosyncratic responses were identified.
Common Themes

The decision to euthanize a companion animal is one that was taken very seriously by each of the participants of this study. Through these women's stories, one can see the significant roles the animals played in their lives. Many common issues were shared by the women, and yet each also had her own unique experience.

The first of these common issues was that each of the women described a rationale for the euthanasia and described the decision-making process. This was an integral part of each of the women's stories. There appeared to be a need for them to explain why they had elected to euthanize. In seven of the eight cases, the animals were euthanized due to poor health. The animal's quality of life and the owner's desire to end the animal's suffering were primary factors in the rationale and decision-making. These women were each trying to do what they believed was best for the animal. In some cases, the veterinarians urged the pet owner to consider euthanasia in order to end the animal's suffering.

These findings substantiate what Nieburg and Fischer (1996) wrote. They had stated that the primary factor that contributes to the pet owner making the decision to euthanize is the animal's quality of life. They also state that the veterinarian's recommendation can play a key role in the decision-making process (Nieburg and Fischer, 1996).

In their book for pet owners, Nieburg and Fischer (1996) also discuss making the decision to euthanize an aggressive animal, which was the case in
Michelle's situation. They state that "the pet's presence may markedly decrease your own quality of life." According to Nieburg and Fischer (1996), this is another factor which can lead to the decision to euthanize a companion animal. This factor was also substantiated by this research. However, it points out that although Michelle's situation was unique in this study, it is overall not an unusual rationale for euthanasia.

The second common theme was the owner's decision whether or not to be present during the euthanasia. This was an important aspect of the euthanasia procedure, although there was variety among the participants regarding the specifics of this issue. These differences reveal that choosing whether or not to be present with the animal during the euthanasia procedure is a very personal decision. It is important that the veterinarian allow the pet owner the opportunity to be present if he or she wishes to be; however, it is equally important that the veterinarian respects the wishes of those who do not wish to be there.

The literature states that the decision whether or not to be present during a companion animal's euthanasia should be based on three things: degree of attachment, emotional strength, and inclination (Nieburg and Fischer, 1996). These did not appear to be factors relevant to the decisions of the women in this study. In Leslie's situation, for example, she was unable to make the decision because her dog was euthanized immediately following surgery. Also, Janie appeared to be very emotionally strong and was attached to her pets; however, she chose not to be present. Therefore, the findings of
this study did not substantiate those that were suggested in the literature. The literature does recommend, however, that pet owners be given the opportunity to be present during the euthanasia procedure (Nieburg and Fischer, 1996). This study does support that recommendation.

A third very important theme that emerged is social supports. The grief literature recognizes that the presence, or absence, of social supports can have a tremendous impact on the grief process (Attig, 1996; Fitzgerald, 1994). Fitzgerald states, “The support and understanding you have around you will make a big difference in how you experience and handle your grief” (1996; p. 34). It is important for the bereaved to receive emotional support.

The literature regarding pet loss had suggested that pet owners often do not have the same emotional support from friends and family that they would be afforded in a human death (Harris, 1984; Quackenbush an Glickman, 1984). This was supported by the findings of this study, although there was variety among the participants regarding this issue. The most common source of emotional support following the euthanasia was family members; however, some women described not gaining any support from their families. Some of the women found their veterinarians to be very supportive, while others felt their veterinarian discouraged any emotional expression of grief.

What this illustrates is that while some veterinarians and some family members are supportive of bereaved pet owners, there is no consistent source of support for all grieving pet owners. This demonstrates the need for social
services aimed at providing social supports for individuals grieving the loss of a pet. The grief literature states that one of the most effective means for assisting bereaved persons in resolving the pain of loss is group work (Sanders, 1989; Murphy and Perry, 1988; and Yalom and Vinogradov, 1988). Groups can provide bereaved pet owners with the opportunity to meet with others who have experienced similar events. This can help to normalize the bereaved pet owners feelings, and aid them in feeling less isolated. This is an area in which the profession of social work could become involved. Social workers could develop and facilitate support groups aimed at assisting the needs of grieving pet owners.

A fourth common theme involved the memorialization of the pet and the decisions regarding the animal's remains. Because there is no culturally approved ritual for mourning a pet (Harris, 1984), the women in this study used the burials or cremations as rituals for mourning. Nieburg and Fischer (1996; p. 70) state that this can “provide a large measure of comfort for a caring owner.” They advise pet owners to write eulogies for the pets which can provide closure to the pet's death.

The grief literature refers to these as “healing rituals” (Paladin, 1991; and Rando, 1984). According to Rando (1984), these rituals “help the bereaved individual or family accept the reality of the loss, express and work through the feelings attendant to that loss, and accomplish the tasks of grief work.” These rituals aided the pet owners who participated in this study in gaining a sense of closure to the loss of their companion animals. Social
workers can assist grieving pet owners in understanding the importance of healing rituals and can help them to identify different ways in which they can memorialize their companion animals.

The fifth theme common to most of the participants was a comparison to human death. The women were never asked directly anything related to human death or human euthanasia; however, five women discussed these issues in the interviews. These women openly stated that they wished euthanasia was an option for humans who were ill and suffering, also. Nothing in the literature had suggested that this would be a prevalent theme in this study. The researcher can speculate on some possible explanations for this comparison.

The most obvious of those explanations is that the companion animals in these women's lives were serving in human-like roles; therefore, the women identified with them as being more human than animal. Because of that, they easily transferred the ideas of euthanasia onto humans. Using the framework of symbolic interactionism, pet owners have relationships with animals based on how they define that animal and that animal's use to them. If the pet owner is defining the animal as "a member of the family," and they decide to have it euthanized, it follows that the pet owner would carry those views of euthanasia onto human members of the family as well.

Another possible explanation is that because these women found peace in ending the suffering of the animal, they also believe that peace could be found in ending the suffering of terminally ill humans. People do not like to
see other living things suffer (Shuchter, 1886). It makes people feel helpless to watch suffering and not be able to stop it. Pet owners are able to end the suffering of their companion animals because it is socially acceptable to have an animal euthanized. People choose to do this so that they do not have to see an animal suffer. When a person is watching another human suffer, it is natural that she would want that person's suffering to end; however, euthanizing a human is not socially acceptable. The women in this study experienced relief in knowing they were able to stop the animal's suffering, which could have carried over into their beliefs regarding human euthanasia.

A third explanation is that these women already believed in human euthanasia prior to the euthanasia of the companion animal, and it was that prior belief that led to the decision to euthanize the animal. In actuality, it is probably a combination of these three explanations and the reason is probably different for each woman who made the statement. The researcher was unable to locate any theories within the literature which would further clarify this theme. Additional study should be done in this area.

The sixth theme was anthropomorphism. Seven of the women directly attributed human-like characteristics to their companion animals. The animals were referred to as "children" and "members of the family" among others. This reiterates what the literature already states regarding the human-animal bond. Animals take on human roles in the lives of their owners. (Nieburg, 1984). Borrowing again from symbolic interactionism, one can see that different individuals have different perspectives on relationships
with animals based on how the individual defines that animal and the animal's use to the human. This also helps to explain why some individuals have social supports and others do not. Pet owners only receive support from those who recognize and appreciate the way in which that pet owner has defined the animal. Those who defined the animal in a human role, grieve the loss of the role just as if the role had been filled by a human. Thus, it is logical that the person would grieve the death of the animal much as they would grieve the death of another person.

This theme raises questions regarding why some humans become so attached to companion animals and others do not. Nieburg and Fischer (1996) postulate that some individuals who have difficulty maintaining close human relationships often develop strong attachments to animals. One could also speculate that others who are unable to have human relationships for a variety of reasons, such as social isolation, would also depend heavily upon animals for companionship. An example of this are elderly persons whose spouses are deceased, children are grown, and now live alone. They can become very strongly attached to their companion animals (Nieburg, 1984). Couples who do not have children frequently bond with companion animals in a very parental way. In this study, none of the women had children who were currently living with them. The women had either not had children, or the children were now adults. This could explain the attachment they each had with their companion animals. This will be discussed further in the “Discussion” section of this chapter.
The seventh common theme was replacement. Each of the participants discussed the subject of obtaining another pet. There was variety among the women as to the length of time each waited before getting another pet. The women also differed in whether or not they viewed the new pet as a replacement. However, one could assume from this that when a person shares his or her life with a companion animal, the absence of that animal creates an emptiness which the person usually wants to fill. Although some pet owners do not choose to get another pet, each of these participants considered the idea at some point.

The grief literature discusses replacement in relationship to the death of a spouse and subsequent remarriage. Companionship can help a bereaved person to adjust to loss (Shuchter, 1986). Shuchter (1986; p. 228) states, in relationship to remarriage, “the forces pushing the bereaved toward reinvolvement are usually the ones that drew them toward marriage in the first place: the need for intimacy, companionship, security, support, and sexuality.” With the exception of sexuality, the same can be said for obtaining another pet. People elected to get an animal in the first place for various reasons, when the animal is gone the same reasons will push them towards considering another pet. One study suggests that 85% of pet owners eventually do get another pet (Nieburg and Fischer, 1996).

Shuchter also explains how some widows and widowers prefer to remain single for various reasons. He says these reasons “reflect on their growth, fears, loyalty, values, and sense of reality” (Shuchter, 1986; p. 230).
Pet owners may also struggle with these same reasons. They may fear that they are being disloyal if they bring a new pet into their lives. They may also be fearful of experiencing another painful loss (Shuchter, 1986).

Some of the women in this study did what Nieburg and Fischer (1996) describe as "replacement in anticipation of loss." For example, Gloria got a new puppy in preparation for her other dog's advanced age. This can be an effective way of insuring companionship after a pet's death; however, Nieburg and Fischer (1996) warn that this could be a way of stifling one's grief.

As the decision regarding replacement of a companion animal is so complex, this is another area in which social workers could be effective helpers. Pet owners often need help sorting out feelings before making the decision to bring in a new companion animal. They may be feeling pressure from outside sources both to get another pet and to refrain from getting another pet. These mixed messages can be confusing, especially when the individual is already distraught with grief. Social workers could assist in this decision-making process.

The eighth theme examines the various coping mechanisms used by the participants. Coping with loss is an integral part of the grief process, and individuals utilized different mechanisms for both successful and unsuccessful coping. Attig (1996; p. 13) warns that "the changes affected through coping (successful or unsuccessful) tend to be pervasive and life-transforming." This is why it is so important to look at coping issues in regard to pet loss.
The literature had suggested that denial is the most common defense mechanism used by bereaved pet owners (Nieburg 1984). The use of blatant denial was not as apparent in this study; however, some of the women utilized the similar defense mechanism of avoidance. They did not deny that the animal had been euthanized, but some of them did avoid talking about it or thinking about it. The grief literature discusses how avoidance is actually a form of denial (Fitzgerald, 1994). Fitzgerald writes of how disposing of everything that reminds the bereaved person of the deceased is a way of avoiding reality. That is supported by this research when Ruth Ann described throwing out all of her pet’s toys. She had stated that she wanted to “just get it out of there.” Ruth Ann had stated that this was “to complete the process.” It is questionable whether it was to complete the process or to avoid the process.

The various methods of coping which were used by the women in this study demonstrate the variety of reactions individuals have to the euthanasia of a companion animal. It is important to note here that the literature had predicted that guilt would be a primary emotion associated with euthanasia. This was not supported by this research. For the eight women in this study, guilt over the decision to euthanize was not an issue because each of the women felt that the euthanasia was the best decision for her circumstances. Some of the women did express guilt over different issues involving treatment and care of the ill animal, but the women did not discuss guilt over the decision to euthanize.
Different individuals have different coping skills and utilize a variety of coping mechanisms, both helpful and limiting. The coping mechanisms are most helpful when they allow the individual to express the grief, acknowledging the loss (Worden, 1991). Some individuals are limited in their coping capacities, and are unable work through the grief. This can lead to a complicated grief reaction. This is an area in which social workers could become involved in assisting bereaved pet owners in developing new and more effective coping skills in order to prevent or work through a complicated grief reaction.

The existence of possible complicated grief reactions from five of the eight women was the final theme in this study. These apparent complicated grief reactions were characterized by the participants' avoidance of grief and/or the presence of chronic grief.

Worden (1991) outlined four tasks of mourning: (1) to accept the reality of the loss, (2) to experience the pain of grief, (3) to adjust to an environment in which the deceased is missing, and (4) to emotionally relocate the deceased and move on with life. Signs of an incomplete task include not believing, not feeling, and not adapting (Worden, 1991). These incomplete tasks are indicative of a complicated grief reaction. Five of the women in this study seemed to have not completed these tasks of mourning and seemed to be experiencing complicated grief reactions.

Fitzgerald (1994) writes that there are a variety of factors which can prevent a person from moving through grief, thus resulting in complicated
grief. Delayed grief can sometimes be the result of the bereaved individual having spent so much time attending to the needs of others in the family who are grieving (Fitzgerald, 1994). That is substantiated by this study. Michelle was the "caregiver" of the family, and was not attending to her own needs. She was not able to express her grief, as she was trying to be strong for others in her family. The death of Michelle's dog was very recent at the time of the interview, but based on the literature one could predict that she may experience a delayed grief reaction. Months or years later when the others in her family have worked through their grief, Michelle may finally have the opportunity to begin her own grief work. Fitzgerald (1994) warns that this delayed grief can be very frightening because the individual feels very isolated.

Another factor which the grief literature cites as leading to complicated grief is sudden illness and death (Fitzgerald, 1994). Fitzgerald (1994; p. 176) states that "sudden illness and death can rob you of the opportunity to say good-bye or to have any final words with your loved one." Although each of the animals in this study were euthanized which suggests some level of planning, there were some situations in which the discovery of the illness and subsequent euthanasia were very sudden. Such was the case with Leslie, who took her dog to the veterinarian for surgery to discover what was wrong. She was telephoned by the veterinarian immediately following surgery and urged
to allow the dog to be euthanized. Leslie stated in the interview that she regrets not having the opportunity to say good-bye. This lack of closure and control is what appears to have contributed to chronic grief for Leslie.

Social workers can be highly instrumental in assisting grieving pet owners through complicated grief reactions. Cook and Dworkin (1992) identify three divisions of techniques which can be used to assist clients who are experiencing a complicated grief reaction: (1) those techniques which facilitate comprehension and acceptance of grief reactions; (2) those which help the individual to examine the memories of the deceased; (3) those which enable the client to use symbolism to externalize the grief. Using these techniques, social workers can assist pet owners in working through the tasks of mourning. In other situations of complicated grief, social workers are present to assist mourners. It is important that social workers understand how equally complicated grief involving the death of a pet can become, and that they are willing to assist pet owners in working through this grief.

**Discussion**

The data gathered in this study was very rich. Many, many things of importance have probably been overlooked, while many others have been analyzed very minutely. A great deal of information has been presented. This
begs the overall question, "What does it all mean?" It is important to discuss how this study is going to affect everyday social work practice and how it is going to affect bereaved pet owners.

Fulfilling its Purposes

In the initial chapter of this dissertation, the researcher stated that the study had four main purposes: (1) to contribute to the emerging union between social work and the veterinary profession; (2) to improve the awareness of human-animal bond issues within the field of social work; (3) to validate the experiences of pet owners; and (4) to provide scholarly information on a new topic in the field of social work. It is now important to evaluate this study and discuss how it fulfilled its purposes.

The first purpose of the study is to contribute to the emerging union between social work and the veterinary profession. This study examines issues which are relevant to both the profession of social work as well as the veterinary profession. That fact alone identifies a common link between the two professions. The findings of this study demonstrate that not only can social workers fill a role within the veterinary community, but also that the veterinary community has a need for social workers. Social workers who begin assisting veterinary clients regarding issues involving companion animals will also be developing this new area of veterinary social work.
The second purpose of this study was to improve the awareness of human-animal bond issues within the field of social work. By providing insight into these women’s experiences, this study demonstrates to the profession of social work the serious emotional impact of companion animal euthanasia. Social work issues such as coping, bereavement, and social supports are all equally applicable in situations involving the death of a companion animal. Social workers who may not have animal relationships of their own may not be aware of the serious emotional implications the human-animal bond can have on the pet owner. This study depicts how the euthanasia of a companion animal has affected the lives of eight women, thus clearly showing those emotional implications.

The third purpose of this study was to validate the experiences of pet owners. By allowing these eight women to tell their stories, the researcher was validating those women’s experiences. The message this gave to the women was that their stories and experiences were important. What this study can provide for other grieving pet owners is the realization that they are not alone. They can see that others have also grieved over a companion animal, which will help to normalize their experiences. Often pet owners are surprised by the intensity of their emotions regarding pet loss. They believe that it is abnormal and are embarrassed by their reaction. By showing how these eight women reacted to the euthanasia of their companion animals, this study not only gave the participants a voice but provided a voice for all pet owners.
The fourth purpose of this study was to provide scholarly information on a new topic in the field of social work. The social work literature had not addressed the issue of companion animal euthanasia. This study has examined this phenomena within the context of social work, and the new information generated can be a foundation for future research.

**Generating Hypotheses**

Because qualitative research is inductive, one of the primary purposes of this methodology is to generate hypotheses which can be used as the basis for subsequent studies. After reflecting upon the various themes and idiosyncrasies which were noted in this study, the researcher has attempted to synthesize this information in order to create hypotheses. It is not within the scope of this study to prove or disprove these hypotheses, but simply to present them as well-founded ideas worthy of future investigation.

The first of these hypotheses is that there is an element of control which is necessary in order for the pet owner to avoid a problematic or complicated grief reaction. Several control issues were presented in this study: (1) control over whether or not to be present during the euthanasia procedure, (2) control in making the decision to euthanize, and (3) control over decisions regarding the animal’s remains.

The participants who exhibited complicated grief reactions were those participants who did feel not control over some aspect of the animal’s
euthanasia. Another way of framing this is that at some point in the euthanasia experience, these women had feelings of powerlessness. Elements of the experience which they should have had some measure of control over, were controlled by someone else. In most of the situations, this other person was the veterinarian. This is why it is extremely important that the veterinarian provide the pet owner with as many options as possible regarding the euthanasia of a companion animal.

The second hypothesis is also related to preventing a complicated grief reaction. Those pet owners with strong social supports, who are given permission to grieve, are less likely to develop a complicated grief reaction. Individuals who are not supported in their grief, are more likely to mask their grief or deny themselves the opportunity to grieve. Social supports can be very effective in condoning the emotions, and allowing the pet owner the opportunity to experience each of the stages of grief. Social workers could be very effective in providing such support, as well as in assisting the pet owner in developing networks of support of her own.

A third hypothesis for future research is that the decision to euthanize a companion animal has an affect on the individual’s opinion regarding human euthanasia issues. As mentioned previously, several of the participants of this study noted that their opinions regarding human euthanasia changed following the euthanasia of their companion animals.
The researcher speculated on why the participants made such connections, but further investigation into this phenomena could provide valuable insights into human euthanasia issues.

A fourth hypothesis generated from this research is that women who do not have children living with them are more likely to develop strong bonds with their companion animals. None of the women in this study currently had children living at home. Three of the women did not have children, and the other five had adult children. These five each described having stronger relationships with companion animals before having children, or after the children had left home. This ties into the theme of Anthropomorphism, and is reinforced by symbolic interactionism and role theory. It is widely known that women typically have an inherent urge to nurture. This urge is usually fulfilled by motherhood. When that need is not met by motherhood, women can develop parent-child relationships with the companion animals. Further study looking at the relationships of male pet owners and of female pet owners with children would be necessary in order to validate this hypothesis.

A final hypothesis based on the findings in this study is that most individuals who have euthanized a companion animal are comfortable with having made that decision and would make the same decision again in order to end an animal’s suffering. Pet owners will still grieve for the pet and some may develop complicated grief; however, most pet owners are satisfied with the decision that they made. This is in direct contrast to the researcher’s beliefs prior to this study. The researcher’s own experiences in working with a
pet loss support hotline had led her to believe that pet owners who euthanized often regretted the decision. The findings of this study suggest the opposite of that. The pet owners in this did not regret their decision to euthanize.

The hypotheses generated by this study need to be examined more closely in future research. Additional studies, both qualitative and quantitative, could be conducted to provide greater insight into the situations presented here.

**Recommendations for Future Research**

This qualitative study was exploratory because the nature of the study is nearly unprecedented within the field of social work. Therefore, it has always been the researcher's intent that this study be a foundation for future research in the area of companion animal euthanasia. Further research could test the hypotheses generated by this study.

As this study was only able to capture the experiences of women who had euthanized a companion animal, future research in the experiences of male pet owners could prove valuable. It would be interesting to note whether gender differences affect the euthanasia experience. This is especially true in regards to the hypothesis that women who do not have children develop strong bonds to companion animals.

This study also raised questions regarding social supports of individuals who have euthanized a companion animal. There was great
variety among the participants regarding social supports. Further investigation into where individuals receive support and into why some individuals do not receive support would be valuable to both the social work and veterinary professions. It would also be important to compare the grief reactions of those who receive support with those who do not.

In addition, this study only touched on some of the complicated grief issues which are triggered by the death of a companion animal. Further study which could provide more information on this phenomena could be of interest to social workers who specialize in bereavement. The researcher had hypothesized that lack of control leads to complicated grief. This would need to be substantiated with further research.

The relationships that the women in this study made between animal euthanasia and human euthanasia also warrant further research. As hypothesized, it appears that the decision to euthanize a companion animal has an affect on the pet owner's views of human euthanasia. The findings of future research on this topic could have tremendous legal and social implications.

There is a need for much more research in the area of pet loss and, specifically, euthanasia because the roles of companion animals in human lives are changing. Animals are becoming dramatically integral components of human lives. Social workers need access to information which can help to describe, explain, or predict these relationships. Any social work research which looks deeper into these relationships will be a benefit to the profession.
Limitations

As with all studies, this study has limitations which affect the use of its findings. Three major limitations are: (1) methodological issues due to the use of an exploratory, qualitative methodology; (2) the homogeneity of the sample; and (3) the use of only one interview per participant.

The first limitation of the study involves the use of an exploratory, qualitative methodology. This in itself is not a limitation, as qualitative research has its own value and purpose. However, the nature of qualitative research does have its limitations. As exploratory research, this study describes rather than explains the phenomena of companion animal euthanasia. There are several methodological issues specific to qualitative research which can pose limitations to this study.

The first of these methodological issues is sampling. In qualitative research, a true random sample is not anticipated. Usually the purpose is to gather a sample that will encompass as much information as possible (Lincoln and Guba, 1985). Purposive sampling strategies, such as the "snowball" and "network" techniques are frequently employed to select participants (Glesne and Peshkin, 1992; Lincoln and Guba, 1985). These are the sampling techniques used in this study. Although these techniques are designed to provide the maximum variation which is needed in qualitative research, they make generalizability difficult if not impossible (Lincoln and
Guba, 1985). The samples are not randomly selected and the sample size is relatively small. Other limitations of the sample in this study will be discussed further in this chapter.

A second methodological issue is that of the design. The most frequently used measurement instrument in qualitative research is the human researcher (Lincoln and Guba, 1985). Unlike quantitative surveys and questionnaires which have been tested for their reliability and validity, the human researcher is a subjective instrument. Tutty, et. al. (1996; p.52) warn that “The quality, quantity, and type of data gathered are substantially influenced by the nature of the interaction between the interviewer and interviewee.” In unstructured interviews, the questions that are asked and the manner in which they are asked are all dependent upon the researcher. The skills, knowledge, and personality of the researcher can have a tremendous impact on the interview itself. This can make the research difficult to replicate by other researchers.

A third methodological issue to consider when looking at the limitations of qualitative research is trustworthiness. Trustworthiness is interested in the truth value, applicability, consistency, and neutrality of the research (Lincoln and Guba, 1985). The researcher utilized several techniques for improving the trustworthiness of the study. These included peer debriefing, member checks, thick description, and maintaining a reflexive journal. One technique which the researcher did not employ which could have contributed to the trustworthiness of the study is triangulation.
Triangulation involves gaining and utilizing information from a variety of sources or methods (Lincoln and Guba, 1985). The researcher had considered interviewing significant others in the participants' lives, such as family, friends, or veterinarians in order to gain greater insight into the participant's experience of euthanasia. However due to the constraints of both time and resources, it was not possible to employ triangulation in this study. Triangulation could have improved the transferability of the findings.

A second limitation of this study, which ties into some of the methodological issues, is the degree of homogeneity in the sample of pet owners who participated in this study. In qualitative research, the goal is to obtain a heterogeneous sample (Lincoln and Guba, 1985). Purposive sampling is employed in order to gain a variety of participants covering a variety of characteristics. All of the participants in this study were middle-class, Caucasian females. Although the ages of the participants did vary, the study could have been strengthened by having participants of different gender, race, or ethnicity. The degree of homogeneity of the sample could have affected the results because the situations and relationships with the animals were so similar. It could have provided a false sense of redundancy. A more heterogeneous sample could have also provided greater insight into idiosyncrasies. A more varied sample would have probably presented more unique situations and idiosyncratic responses.

A final limitation of this study is that only one interview per participant was conducted. The researcher elected not to conduct second
interviews because rich data was obtained in the first interviews; however, it is possible that a second interview could have gathered even more important information. This study could have been strengthened by conducting second interviews. This could have allowed the researcher to ask questions that were raised in others' interviews, that had possibly been overlooked in some participants' interviews. It could also have provided more depth to the data. Although the first interviews brought many common issues and responses, it is possible that the second interviews could have produced more idiosyncratic responses as more depth into the experiences was gathered.

Implications for Social Work

What this study presents to the field of social work is the opportunity to understand the unique bereavement experience of women who have euthanized a companion animal. With this knowledge, the social work community can begin to develop services which would assist other bereaved pet owners in coping with such experiences.

One such service would be in the area of pre-euthanasia counseling. Pre-euthanasia counseling has traditionally been done by veterinarians, and assists pet owners in deciding whether or not to euthanize a companion animal. As one can see from the stories presented by the participants of this study, some veterinarians are more skilled at this than others. Social workers could begin working with veterinary practices to either provide this
pre-euthanasia counseling to their clients, or could assist in training the veterinarians and their staffs so that they would be capable of providing this to their clients themselves.

Another service which could be provided by the social work community is that developing and facilitating bereavement support groups. As demonstrated in this study, individuals who are grieving a beloved pet often lack social support or do not know how to ask for such support. Social workers could develop and facilitate pet loss support groups which would provide grieving pet owners with that much needed support. A few pet loss support groups exist in larger communities, but there is a growing demand for more.

In addition to needing social supports, the findings of this study suggest that pet owners can experience complicated grief reactions which may require professional assistance. These pet owners may contact a local mental health clinic seeking bereavement counseling. The social worker or mental health practitioner at the clinic needs to be prepared for assisting a pet owner with the death of a companion animal. It is important that the social worker not only be an experienced bereavement counselor, but also that he or she understands the issues specific to pet loss.

There is a need for additional social workers who specialize in assisting in companion animal issues. As this study presented, there are many areas involving the bereavement of companion animals in which social workers could play important roles. Social workers are needed before, during, and
after the death of a companion animal. There is an under-developed specialty called “veterinary social work” which deserves becoming more developed. It is this researcher’s aspiration that every large veterinary hospital have a social worker on staff, and that every community have a social worker who specializes in pet loss who the smaller veterinary hospitals can utilize on a contract basis.

Although this goal may seem quite lofty to some, the researcher also has a smaller wish that each and every social worker would develop an acceptance and understanding of the emotional implications of pet loss. When the researcher embarked upon this project, there were many within the profession of social work who did not see the topic as having much credibility. The needs of grieving pet owners did not seem to warrant as much respect as the needs of other mourners. It is the researcher’s deepest desire that this study can, in some manner, make changes in the ways in which social workers view the relationships humans have with companion animals.
LIST OF REFERENCES


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APPENDIX A

LETTER TO VETERINARIANS

To the Veterinarian:

We are requesting your assistance in a study that will explore how pet owners experience the euthanasia of a companion animal. This study, which is the subject of my doctoral research, is entitled, "Euthanasia of the Companion Animal: Understanding the Pet Owner's Experience." In this study, we will be interviewing pet owners who have euthanized a companion animal in order to gain insight into their experiences.

If you choose to take assist with this study, you will be asked to present information of this study to clients who have recently euthanized a companion animal. If those clients agree to take part in the study and give consent for you to provide us with their name and telephone numbers, we will contact them in order to schedule an interview. Your participation then ends. We are only seeking your assistance in obtaining participants for the study.

Participation by your clients should be completely voluntary, however, and no inducements should be provided in order to encourage participation. Keep in mind, you may at any time withdraw your participation.

It is our intention that this research will provide both the veterinary and social work fields with new information which can improve services to persons who must euthanize a companion animal. We hope that you will choose to participate in this study, but you are under no obligation to do so.

Sincerely,

Virginia Richardson, Ph.D. 

Wendy G. Turner, M.S.W., A.B.D.
APPENDIX B

LETTER TO PARTICIPANTS

To prospective participants in this study:

We are requesting your participation in a study that will explore how pet owners experience the euthanasia of a companion animal. This study, which is the subject of doctoral research, is entitled, "Euthanasia of the Companion Animal: Understanding the Pet Owner’s Experience." In this study, we will be interviewing pet owners who have euthanized a companion animal in order to gain insight into their experiences.

As a part of this study, you would be asked to talk with me about your experience before euthanizing your companion animal, the actual euthanasia, and your experience after the euthanasia. As the interviews proceed, I may ask an occasional question for clarification or for further understanding, but the primary objective is to listen to you as you recreate your experiences. You do not have to answer any questions which you do not wish to answer.

The goal of this study is to analyze the materials from your interview in order to understand better your experience and that of other pet owners who have euthanized a companion animal. Each interview will be audiotaped and later transcribed. In all written materials, I will not use your name, names of people close to you, or the name of your companion animal. Transcripts will be typed with initials for names, and in the final form the interview material will use pseudonyms.

You are under no obligation to participate in this study. Your veterinarian is not involved in this research and will not have access to confidential information. Your desire to participate, or your desire not to participate will have no effect on any future veterinary services provided by your veterinarian. You may at any time withdraw from the interview process, and/or you may withdraw your consent to have specific excerpts used.

We know that having to take this step is very difficult. Your information can help both the veterinary and social work professions to gain a better understanding of the experience of euthanasia of a companion animal. It is our intention that this knowledge will improve the services provided to pet owners, as well as increase the public’s understanding of this experience.

Sincerely,

Virginia Richardson, Ph.D.  Wendy G. Turner, M.S.W., A.B.D

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APPENDIX C

PARTICIPANT'S RELEASE OF INFORMATION

Please complete and return this entire form to your veterinarian.

I __________________________ give permission and consent for my veterinarian, Dr. __________________________, to provide the following information to the researchers for the purpose of the study, “Euthanasia of the Companion Animal: Understanding the Owner’s Experience.” This information will be used only so that the researchers may contact you to request your participation in the study.

__________________________________________  _______________________
signature                                            date

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Participant Information

Name__________________________________________________________

Address ______________________________________________________

______________________________________________________________

Telephone ____(____)___________________________________________

The best time to reach me is: ________________________________
APPENDIX D

INTERVIEW QUESTIONS

1. What was the name, age, species, gender of the companion animal?
2. How long had you had this animal?
3. When was the animal euthanized? At what age?
4. When did you decide to euthanize the animal? At whose suggestion?
5. How did you/your family feel about the decision to euthanize?
6. Were you present during the euthanasia procedure? Why/Why not?
7. Are you glad that you were/were not present during the euthanasia?
8. If you were present, how did you feel during the euthanasia procedure?
9. Did you memorialize the pet in any way? How?
10. How did you feel immediately after the death of the animal?
11. How did your family/friends react to you after the euthanasia?
12. How do you feel today about the decision to euthanize?
13. What did you find positive about the experience? What did you find negative?
14. How was/is your relationship with the veterinarian after the euthanasia?
APPENDIX E

PARTICIPANT'S CONSENT FORM

I consent to participating in (or my child's participation in) research entitled:

Euthanasia of the Companion Animal: Understanding the Pet Owner's Experience

__________________________ or his/her authorized representative has explained the purpose of the study, the procedures to be followed, and the expected duration of my (my child's) participation. Possible benefits of the study have been described as have alternative procedures, if such procedures are applicable and available.

I acknowledge that I have had the opportunity to obtain additional information regarding the study and that any questions I have raised have been answered to my full satisfaction. Further, I understand that I am (my child is) free to withdraw consent at any time and to discontinue participation in the study without prejudice to me (my child).

Finally, I acknowledge that I have read and fully understand the consent form. I sign it freely and voluntarily. A copy has been given to me.

Date: ________________________ Signed: _________________________

(participant)

Signed: ________________________ Signed: _________________________

(principle investigator or his/ her authorized representative) (person authorized to consent for participant - if required)

Witness: ________________________