

GRIEVING PET DEATH: NORMATIVE, GENDER, AND ATTACHMENT ISSUES

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ABSTRACT

Grief over the loss of a pet was investigated to clarify the usual course of symptoms experienced, gender differences in the experience, and the role of attachment to the pet. The sample included 174 adults who had lost a pet dog or cat to death. Participants were administered a modified CENSHARE Pet Attachment Survey (Holcomb, Williams, & Richards, 1985) and a survey of symptoms experienced. Results indicate that initially 85.7% of owners experienced at least one symptom of grief, but the occurrence decreased to 35.1% at six months and to 22.4% at one year. Males and females reported significantly different rates on six of 12 symptoms surveyed. The severity and length of symptoms is significantly correlated with the degree of attachment to the deceased pet. These findings indicate that pet loss can be a potential area of clinical concern, especially if the person's attachment to the pet was strong.

According to Cowles (1985), the degree of attachment between owner and pet determines the psychological impact on the owner resulting from the death of a pet. People form emotional attachments with their pets, and these attachments are sometimes very special and different from the ones they form with people. Pets can be a source of unconditional love, support, comfort, safety, security, and stability. In circumstances in which a person feels either physically or psychologically removed from human attachments, these attributes of a relationship with a pet may be especially significant (Sharkin & Bahrck, 1990). For many complex reasons, the emotional attachments which many humans develop for their pets not only equals, but indeed frequently transcends the emotional attachment which they form with humans (Cowles, 1985).

Even though approximately 55% of the households in the United States include a dog, cat, or both (Quackenbush & Glickman, 1984), and therefore the number who experience pet loss is high, little attention has been paid to the grief that may occur when a pet dies. As the lifespan of pets is relatively short, most pet owners will experience the death of a pet or a number of pets before they even experience the death of a human (Turner, 1997). Dickinson (1992), for instance, reported that 28% of those surveyed reported the loss of a pet as their first recalled death. Cowles (1985) maintains that "While the grief process through which pet owners pass is similar to that experienced with human death, there are some unique aspects as well" (p. 146). Some authors feel that the grief process usually begins with disbelief and denial, followed by feelings of anger. Often the anger is directed at the most available person. Oftentimes this is the veterinarian, particularly in cases of pet death following an illness. After the anger subsides, feelings of guilt, depression, and sorrow will typically set in. At this point, the individual might be preoccupied with memories of their deceased pet. The final phase of the grieving process involves resolution and acceptance of the loss (Sharkin & Bahrck, 1990). Bereaved pet owners experience all the usual characteristics of grief: painful regret, crying, shock, numbness, deep sorrow, and loneliness. Also, they often verbalize feelings of anger, guilt, and of being helpless in living without their deceased pet (Carmack, 1985). Grief over the loss of a pet can last anywhere from six months to a year, with the average length of grieving being about 10 months (Katcher & Rosenberg, 1979).

Although the grief reaction to the loss of a companion animal is similar to the grief experienced when a significant human dies, the mourning process is not. With rare exceptions, socially sanctioned mourning procedures, such as funerals, do not occur following the death of a pet, even though research shows that it is critical to the healing process (Gerwolls & Labott, 1994). According to Rajaram, Garrity, Stallones, and Marx (1993), "The loss of a pet is rendered more of a problem, because in North American culture there is no universal social mechanism that provides an outlet for the expression of grief" (p. 9). This lack of universal social mechanisms for dealing with grief impairs the resolution of grief and isolates the grieving owner (Cowles, 1985). Because many people are unable or unwilling to acknowledge a pet as a legitimate attachment figure for themselves, they do not or will not accept the loss of someone else's pet as significant. Grief for a pet is considered inappropriate, since pets can be "replaced." When the pet owner's bereavement is not socially recognized as legitimate, it can cause an owner to feel shame when grieving. Thus, the case of the loss of a pet is another example of what has been called "disenfranchised grief" (Meyers, 2002). Sharkin and Bahrck (1990) state that "Although the grief over the loss of a pet can be as intense as the loss of a significant person, the loss of a pet is more likely to go unacknowledged" (p. 306).

Archer and Winchester (1994) found a significant positive correlation with the degree of attachment to the pet, the suddenness of death, and whether the owner

lived alone, but not with the type of pet, the time since the pet died, and how long the owner and pet were together. Gerwolls and Labott (1994) discovered that individuals reporting deeper relationships with their pets had more difficulty adjusting to the loss than those with less intense emotional attachments. Those with more intimate relationships were also less likely to acquire a new pet within six months. Other pre-existing family pets and the cause of the pet's death had no effect upon adjustment. Holcomb, Williams, and Richards (1985) developed the Center for the Study of Human-Animal Relationships and Environments (CENSHARE) Pet Attachment Survey to measure the attachment between pets and their owners, particularly the emotional intimacy and physical relationship. They found that there was no difference between dog and cat owners on the Intimacy Scale, but dog owners did report significantly higher scores on the Relationship Maintenance Scale. This finding supports the fact that dog owners tend to have more physical interactions with their pets, such as walking and training sessions. In both studies, females scored higher than males on both the Intimacy and Relationship Maintenance Scales. Also, the larger the family size the smaller the attachment score and, in contrast, families without children showed a higher attachment to pets. The number of pets in the home did not affect either of the scales.

Gosse and Barnes (1994) found that high pet attachment, low social support, and an accumulation of other stressful events were associated with high levels of grief with pet loss. The age of the owner, the length of ownership, and the type of final arrangements were not found to be predictive of grief outcome. According to Planchon and Templer (1996), dog grief was associated with living alone at the time of the death, female gender, and high death depression. Cat grief was associated with high death depression, younger age of the owner at the time of the pet's death, and female gender. The amount of grief was not correlated with the length of time the owner had the pet, whether or not the owner had another pet, how the pet died, how much time the owner spent with the pet, or the primary reason for having the pet.

The present study surveyed individuals who had experienced the loss of a pet dog or cat in order to identify specific symptoms owners experience after the death of their pet and the length of the grieving process. Gender differences in the experiences of symptoms were also examined. In addition, the relationship between the degree of attachment to a pet and the symptoms experienced was investigated.

METHOD

Participants

A sample of 174 adults (18 years of age or older) participated. Each of the respondents had lost a dog and/or cat sometime in the past prior to participation. The sample was obtained from a college campus (81.1%), from a local business

setting (9.8%), and by referrals from various veterinarians in the area (9.2%). The sample consisted of 112 females and 62 males, ranging in age from 18 to 85, with a mean age of 35 years. This relatively high mean age for a largely college-based sample is reflective of the non-traditional population at the college. The majority of the sample was Caucasian (90.2%), with 4.6% African American, 1.1% American Indian, and 2.9% Asian. Most of the respondents were either married (36.8%) or single (55.7%), with 1.7% separated, 5.2% divorced, and .6% widowed. Few of the respondents lived alone (15.5%) and only a minority had children (32.8%). The sample was highly educated, with 10.3% having an advanced degree, 14.9% having a college degree, 54.6% having at least some college, 15.5% being high school graduates, and only 2% having less than a high school education. Of those responding, 82.2% worked outside of the home and 17.8% did not. Most of the owners surveyed reported losing a dog (69.5%), with 30.5% reported losing a cat.

Instruments

Researchers from the Center for the Study of Human-Animal Relationships and Environments (CENSHARE) Pet Attachment Survey (PAS) was developed at the University of Minnesota to measure the degree to which individuals are attached to their pets (Holcomb, Williams, & Richards, 1985). The PAS is a 27-item scale of personalized statements each rated on a 4-point scale (almost always, often, sometimes, or almost never). The PAS has two scales: 1) a Relationship Maintenance Scale with 16 items; and 2) an Intimacy Scale with 11 items. The Relationship Maintenance Scale measures aspects of attachment to the pet through physical interaction, for example, "You like to touch and stroke your pet." The Intimacy Scale measures aspects of attachment surrounding emotional importance, for example, "Within your family, your pet likes you best." The owner's total score on the PAS was assumed to represent his/her attachment to the deceased pet. Holcomb et al. report the two scales to be moderately correlated with each other ($r = .59$). They also report the reliability (Cronbach alpha) for the Relationship Maintenance Scale to be .83 and .74 for the Intimacy Scale, with the inter-item correlations for both scales ranging from .20 to .60.

The Pet Attachment Survey was rewritten from its original tense to the past tense, in order to refer to deceased pets. For example, the sentence "You confide in your pet" was changed to "You confided in your pet."

The Pet Death Survey (PDS) was developed for this study based on the questions asked by Fogle and Abrahamson (1990) regarding euthanized animals, and utilizing the authors' "Yes" or "No" question format. The PDS asked the respondents to report retrospectively the presence or absence of 12 dimensions of grief (Crying, Feeling Guilty, Feeling Depressed, Pain, Anger, Loss of Appetite, A Sense of Loneliness, A Lump in Your Throat, The Need to be Alone, A Sense of

Relief, A Sense of Failure, and Preoccupation with Memories of Your Pet) initially, at six months after the loss, and one year after the loss.

Analysis

The reliability of the rewritten PAS was calculated using Cronbach's alpha for the total scale and the Relationship Maintenance and Intimacy Scales. The frequencies of symptoms reported on the PDS initially after the pet's death, after six months, and after one year were calculated. Gender rates of symptom reporting were analyzed by Chi-square tests. Correlations were performed between the frequency of reported symptoms and the PAS total scores as well as the two scales.

RESULTS

On the PDS, the majority of owners experience grief symptoms after their pet's death, but the symptoms declined over time (see Table 1). Initially, over half of the owners experienced Crying (73.6%), Feeling Depressed (56.9%), A Sense of Loneliness (52.3%), and Feeling Guilty (51.1%). Of the owners, 35.1% reported that they experienced at least one grief symptom six months after the loss, most often A Sense of Loneliness (14.4%), and Preoccupation with Memories of Your Pet (12.1%). Of those surveyed, 22.4% reported experiencing at least

Table 1. Percentage Reporting Symptoms Initially, Six Months, and One Year After Pet Death ($N = 174$)

Symptoms	Initially (%)	6 Months (%)	1 Year (%)
Crying	73.6	10.3	5.7
Feeling depressed	56.9	9.8	4.6
A sense of loneliness	52.3	14.4	7.5
Feeling guilty	51.1	11.4	7.5
A lump in your throat	43.7	9.2	6.3
Preoccupation with memories of pet	35.1	12.1	9.2
Anger	30.5	8.0	4.6
Pain	28.2	5.2	1.7
A sense of relief	19.5	1.1	0
The need to be alone	18.4	3.4	1.1
A sense of failure	17.5	5.7	2.9
Loss of appetite	16.1	1.7	.6

one symptom after one year, with the most frequent symptom reported being Preoccupied with Memories of Your Pet (9.2%).

Rates of endorsement of the symptoms for males and females are presented in Table 2. Significant differences in the rate of symptom endorsement for males and females are reported for six items, namely, Crying, $\chi^2(2, N = 174) = 23.86$, $p < .01$; Feeling Guilty, $\chi^2(2, N = 174) = 9.46$, $p < .01$; Pain, $\chi^2(2, N = 174) = 5.16$, $p < .05$; A Sense of Loneliness, $\chi^2(2, N = 174) = 7.13$, $p < .01$; Loss of Appetite, $\chi^2(2, N = 174) = 4.59$, $p < .05$; and A Lump in Your Throat, $\chi^2(2, N = 174) = 5.10$, $p < .05$.

Cronbach's alpha for the rewritten PAS was .87; the reliability for the 16-item Relationship Maintenance subscale was .82, and for the 11-item Intimacy Scale was .69. The correlation between the scales was significant ($r(174) = .79$, $p < .01$).

The results of the correlation analysis between PAS scales and reported symptoms indicated the Relationship Maintenance subscale was highly correlated with reports of Crying ($r(174) = .39$, $p < .01$), Loss of Appetite ($r(174) = .26$, $p < .01$), A Sense of Loneliness ($r(174) = .30$, $p < .01$), A Lump in Your Throat ($r(174) = .26$, $p < .01$), and The Need to be Alone ($r(174) = .24$, $p < .01$) for symptoms reported at the time of loss. There were also significant correlations for

Table 2. Differences in Symptoms Reported Following Pet Death by Gender

Symptoms	Females % (<i>n</i> = 112)	Males % (<i>n</i> = 62)	χ^2
Crying	85.7	51.6	23.86**
Feeling guilty	59.8	35.5	9.46**
Feeling depressed	59.8	51.6	1.80
Pain	33.9	17.7	5.16*
Anger	33.0	25.8	.98
Loss of appetite	20.5	8.1	4.59*
A sense of loneliness	59.8	38.7	7.13**
A lump in your throat	50.0	32.3	5.10*
The need to be alone	21.4	12.9	1.93
A sense of relief	18.8	21.0	.12
A sense of failure	19.6	12.9	1.27
Preoccupation with memories of pet	38.4	29.0	1.56.01

* $p < .05$. ** $p < .01$.

the Relationship Maintenance subscale with symptoms at the six month interval ($r(174) = .34, p < .01$) and after year ($r(174) = .27, p < .01$).

The Intimacy subscale correlated most highly with Crying ($r(174) = .47, p < .01$), A Sense of Loneliness ($r(174) = .47, p < .01$), Feeling Depressed ($r(174) = .24, p < .01$), Pain ($r(174) = .23, p < .01$), A Lump in Your Throat ($r(174) = .33, p < .01$), The Need to be Left Alone ($r(174) = .23, p < .01$), and Preoccupation with Memories of Your Pet ($r(174) = .22, p < .01$) for the reported symptoms at the time of loss. The Intimacy subscale was significantly correlated with reported symptoms at six month ($r(174) = .41, p < .01$) as well as after one year ($r(174) = .37, p < .01$) (see Table 3).

DISCUSSION

The pattern of grief experienced by owners after the death of their pets reported in the current study appears consistent with previous findings that grief over the loss of a pet can last anywhere from six months to one year, with the average length of grieving being about 10 months (Katcher & Rosenberg, 1979). Stallones (1984) points out that the acute grief period lasts from one to two months. The present study found that after six months, the rate of symptom occurrence did decrease; however, more than one-third (35.1%) of the owners reported that they still experienced symptoms after six months and 22.4% reported symptoms one year after the loss of their pet.

Table 3. Correlations of Initial Symptoms with PAS Relationship Maintenance and Intimacy Subscales ($N = 174$)

Symptoms	Relationship	Intimacy
Crying	.39**	.47**
Feeling guilty	-.03	-.04
Feeling depressed	.15*	.24**
Pain	.15*	.23**
Anger	.13	.18*
Loss of appetite	.26**	.34**
A sense of loneliness	.30**	.47**
A lump in your throat	.26**	.33**
The need to be alone	.24**	.23**
A sense of relief	.07	.08
A sense of failure	.05	.08*
Preoccupation with memories of pet	.17*	.22**

* $p < .05$. ** $p < .01$.

Gosse and Barnes (1994) have reported that women grieve over pet loss to a greater extent than do men; that is, experience greater feelings of despair than do men. In the present study, differences were indeed found between males and females in the rate of occurrence of about half of the reported symptoms (e.g., Crying, A Sense of Loneliness). For each symptom surveyed, the rate of endorsement was higher for females than for males. These data reflect the percent occurrence of the symptoms, but not necessarily the intensity of the individuals' experiences.

Reliability was comparable for the rewritten PAS in the present study to the results of Holcomb, Williams, and Richards (1985). According to Cowles (1985), the degree of attachment determines the psychological impact on the owner resulting from the death of a pet. Present data indicate a positive correlation to exist between the Relationship Maintenance and Intimacy subscales and the experience of symptoms. Both scales were predictive of the extent that owners would experience symptoms after six months and one year. In addition, it appears that the degree of attachment to one's pet can predict the severity of symptoms and the length of the grieving process. It might be interesting in the future to examine the impact of animal loss on populations such as those who need an animal for assistance, as such individuals may develop very intense relationships with them.

It is hoped that this study, although limited by its retrospective nature and modest sample of mainly college students, identified symptoms that pet owners experience after a pet dies. Admittedly, neither the difference in the response to the loss of both dogs and cats nor the way the animal died were differentiated in this study, and might yield interesting results.

The results of this study suggest a need for acceptance and legitimization of the grief experience and mourning process following the death of a pet. The grief reported is often intense, and not insignificant. It is important for individuals such as health care providers to be sensitive to this issue in order to help bereaved pet owners during the grieving process. Such sensitivity is particularly warranted when the attachment to the pet was strong. These data also shed some light on the course of grief over pet loss in a sample largely consisting of non-traditional college students.

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