

Grief and Bereavement Counselling

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Introduction

Living things die. None are immortal. *Homo Sapiens* is a long lived species, and with few exceptions should expect to outlive our avian companions. The life expectancy of avian species ranges from a few years to many decades. In nature, creatures rarely die from natural causes in old age because predators take the weak and aging. Captive kept birds are protected from predation, and if properly nourished and cared for they can be expected to live to their full life expectancy. In any case, parts wear out, the immune system fails, malignant processes are activated, or accidents and trauma occur resulting in death.

Terminal illness and death can be devastating for many clients. During that time, supportive interactions and client care are appropriate. Anger, a normal response to loss, is also a common cause of litigation. Proper support and sensitive attention to the client can reduce this anger.

Types of loss

Natural causes

All living things age and eventually die. Organ function decreases below the point of sustaining the organism. The immune system fails allowing lurking opportunists to take over, or neoplastic processes are triggered by a variety of causes. For most people, death from natural causes is an acceptable event.

Diseases

There are many factors that affect and control populations and their numbers: space, food supply, population density, climactic conditions and the like. With reasonable care, captive birds in cages or indoor aviaries, whether kept singly or in groups, are generally protected from excess population densities, inadequate food supply, and adverse climactic conditions. Poor management and/or ignorance on the part of avian caretakers can result in the introduction of disease with both morbidity and mortality. Chlamydiosis, salmonellosis, mycobacteriosis, psittacine beak and feather disease, and other bird pathogens are examples of agents best kept out in the first place.

Trauma: "Things that go bump in the night"

Aberrant stimuli can startle avian species. Earthquakes, sudden noises, and flashes of light can all result in a sudden fright and flight response. For a caged bird, this means potential head, body, and feather trauma often resulting in death. Cage doors are often slammed shut on birds, and birds not acclimated

to a particular space may fly into windows, walls, mirrors, or objects such as ceiling fans. Other household pets with predatory predilections, acting instinctively, can traumatize accessible birds.

Disasters

In recent times earthquakes, hurricanes, and fires have devastated areas of the United States and other parts of the world. The destruction of structures often results in loss of life both human and non human.

Lost birds

The bird that flies out an open window or door, or takes to the air from the owner's shoulder while outside, creates other additional issues of loss. The person/client is often unable to establish closure. There is the hope that the bird will one day come back or be found. If the client had a particularly strong attachment to the lost bird it can be difficult for the individual to obtain a new bird and establish a new relationship.

Euthanasia

The decision to end the life of a creature even when there is suffering, poor quality of life, or a hopeless medical situation, is accompanied by some degree of guilt.

Factors influencing response to loss

Contemporary relationships, both intraspecies and interspecies can be very complex. We are an urban society somewhat isolated from the living environment which is struggling for both physical and emotional survival.

Companion species have become integral parts of family systems, and in some cases make up an individual's entire family.

To paraphrase the British psychiatrist Keddie: People who insist on a special relationship with a pet can be expected to have a rather sharp reaction at the loss of that pet. Special relationships include surrogate roles: children, spouse, siblings, family, and friends. The companion bird of a deceased partner, last link pets and sudden unexpected death will influence the response to loss. Unresolved grief from prior losses or piggy back loss (multiple losses within a short period of time) will affect and influence the response to the demise of a bird companion, or on occasion an aviary bird.

Death of a bird as the first loss experience of a client is not so unusual today. In past decades children were exposed to the death of grandparents, parents, other relatives, friends, or childhood pets, and had the opportunity to practice grieving. With increased longevity many adults have avoided any prior losses. I have had the personal experience of working with clients who had no childhood pets and no family deaths. These clients were quite traumatized by the death of a companion bird, and had no idea how to cope with their feelings. The number of creatures kept by a client will also influence the response at a time of loss. The intensity of the response is inversely proportional to the number of animals kept.

The rescue syndrome is familiar to mental health professionals. Clients who inform us of their rescuing the patient are at great risk from a mental health standpoint at the time of loss.

Stages of grief

E. Kubler-Ross, MD pioneered the study and understanding of grief. She observed that the grieving process goes through various stages. These stages progress and except in pathological situations eventually resolve. When this occurs the client has established closure. The stages are denial, anger, depression, acceptance, and recovery. These stages do not have fixed time schedules and may vary in duration and intensity from individual to individual. Sometimes clients experience slipping back to a previous stage for a while before moving on again. Grief becomes pathological when a client gets stuck in a stage, cannot move forward, and becomes non functional.

Strategies for the practitioner

We are family practitioners. We care for families. Our patients are part of family systems. We are often the only ones privy to the emotions, feelings, and agenda items of our clients. As such, we can help and be successful facilitators at the time of loss. At times, death can be an unpredicted occurrence. Often we are aware of the possibility and owe an early warning to our clients. Being proactive is more effective than being reactive or taking no action at all.

Tell clients presenting newly acquired birds of the realistic life expectancy of the species in question. A thorough client questionnaire will help identify clients at risk (e.g. singles, childless couples, etc.) Also take note of the clients who verbally state the presence of surrogate roles placed on their birds. Clients who use baby talk or "Motherese" with their avian companions give a clear signal to the clinician to prepare in advance for troubled waters when death approaches or occurs.

When patients are hospitalized it is imperative that both day and night contact phone numbers are obtained from the client. Any change in condition which might signal deterioration should be reported to the client. If death does occur, the client must be immediately notified by the practitioner in a sensitive and tactful manner.

When death occurs, give clients options for the care of the bird's remains. Consider and comply with all special requests if reasonable. When death had occurred in the absence of the client, offer the client the opportunity to view the remains. When children are involved this action is vital to help them establish closure. If necessary hold remains until the client can decide on the final deposition of the bird. Sometimes it is appropriate to hold a family conference and poll the family members on their wishes. Do not rush clients in their decision making. One might need to have a speedy decision with the body of a Saint Bernard in the middle of the summer, but avian patients can certainly be kept refrigerated for periods of time without taking up much space. Offer clients your time to discuss issues and choices.

When the client is single and/or advanced in age it is very supportive to make a personal telephone contact in the evening of the day the bird dies. Checking in on a client and telling them that you were thinking of them, that you just wanted to know if they were all right, and that you were available if they want to talk, is most appreciated by clients.

Encourage clients to memorialize their deceased pets. Enlarging and framing a favorite photograph of the bird, or planting a tree, or flowering perennial in its honor, are two ways a client can create a positive reminder of the relationship they had.

If a *post mortem* examination is desired and the client wants to view the remains, or to take them home for burial, then a cosmetic *post mortem* must be done. All patient death should be followed up with a hand written condolence card. The personal touch is most comforting to clients. This is especially true when a euthanasia decision had been made. Thanking clients for their unselfish kindness and reassuring

them that they made a proper decision helps to assuage the guilt feelings that inevitably accompany euthanasia. Clients sometimes request that they be present for euthanasia service. Offer them that choice. Large birds can have euthanasia solution administered by direct intravenous injection. Small and very debilitated birds may need intracardiac or intracoelomic injections. This form of administration may appear brutal to clients. In this case, pre-anesthesia with inhalation anesthetics followed by an injection is cosmetically appropriate. Euthanasia should not be accomplished by decapitation. A number of veterinary practitioners who have used decapitation have been successfully sued by clients who have asked for their bird's remains for burial at home. In one instance, the client decided to open the box to view the bird's remains before burial and found the head separated from the body.

Clients sometimes request cremation, and in most areas this service is available. It is appropriate to know the provider of this service and to check on their credibility.

When should a client obtain a new bird? Practitioners are often asked this question. There is no steadfast answer. Clients with multiple birds generally have a less traumatic response to loss. Birds that die, that are perceived to have a special relationship with clients, may trigger an overt response even if multiple birds are in the household. It is always appropriate to identify who has the primary relationship with the patient. Be sure that person is included in all decisions on euthanasia and care of the remains.

If a child is involved, and their bird dies while they are in school or away, discourage parents from purchasing a replacement. It is improper to do so, because there needs to be the time to grieve. Slipping a substitute in the cage during the child's absence is a disservice. It does not promote a reverence for life. Children are not fooled and invariably are aware of the fact that the "Tweety" in the cage when they return from school is not the same bird that was there earlier in the day. The anger generated by this action will remain for years after. Remember that the loss of a pet allows a child to practice grieving and prepares children to work through future losses which will occur.

Last link pets are also a special circumstance that require special sensitivity on the part of the practitioner. A late spouse's bird is often the last connection with the departed family member and the loss of that pet may exacerbate unresolved grief for the loved one. The contract does not end when the pet dies. There are still human family members to care for.

Alternative actions

At times the practitioner will need outside assistance. Clients may need counseling or support that the veterinarian cannot provide. Make a reading list of suitable material available for both children and adults. If available, a social worker within the facility can be called in. Refer clients to a pet loss support group that functions in the community.

Identify private therapists and counselors in the community that specifically work with issues of loss, grief and bereavement. Contact them and ask if they take referrals. When appropriate, offer to provide clients with a list of these therapists. The breaking of bonds is as much a part of our professional work as the making of bonds. Heal sometimes, but always offer compassionate support.