



Helping Children Deal With Pet Loss

The death of a family pet is often a child's first experience with loss. Children experience grief also, though their age and development levels influence their grief reactions. They express grief differently than adults due to shortened attention spans and varying intellectual levels of understanding death and loss. Each child is unique and overlap occurs across levels of development, so the following overview should be used only as a guide.

Children ages 1-2: Their world is experienced through their senses. At this age, they do not understand death. Instead, they respond to their caregiver's emotions and behaviors. They may express grief as irritability, changes in sleep and eating patterns and quietness. For caregivers, supportive actions include continuing nurturing interactions and maintaining routines.

Children 2-6: For children at these ages, death is like sleeping. Death is temporary and perhaps reversible, not final, and the deceased pet can come back to life. Children may ask and repeat many questions, such as *When will he be back? Where did he go? What will he eat in the ground?* They may also believe that their own magical thinking can have realistic results. "It's my fault. Barkley chewed on my toy and I got mad at him. Now he's dead."

At this stage, children can be very focused on the concrete details, often very curious of the physical aspects of the dead body. Still, they are very sensitive to their caregiver's emotions and behaviors. They may express their grief as irritability, change in regular patterns, regression, and acting out behaviors. The maintaining of schedules is important. Children often process their emotions through play, so themes of death, dying and funerals may be displayed with toys. Parents and caregivers are encouraged to answer questions truthfully, using simple and appropriate language.

"Barkley is sick and suffering with cancer.

"We will have the doctor give Barkley medicine that only animals can have to help him to die."

"When Barkley dies, his body will still be here but he will not be alive anymore."

This is also an opportunity for adults to model appropriate expression of feelings. This not only helps the child identify what they are feeling themselves, but creates a sense of safety about experiencing emotions and expressing them appropriately.

Children 6-12: Children in this age range begin to understand death as final. They may be curious of the physical and biological aspects of the deceased. In the earlier years of this developmental phase, children may believe death is something that occurs to only the old, and only to others. Soon an understanding will occur that death can happen to anyone as well as themselves. Fear of death may occur. Acting out behaviors at home and at

school may be exhibited. Social development is occurring so children may imitate how others around them respond to death or may hide their feelings in attempt to not appear "different". It is important for parents to continue to model appropriate behaviors and be honest and factual with children.

Teenage children: These young adults are able to think abstractly about death. They understand it is the end of a physical life. At this age, teenagers are searching for identity and attempting to find a balance between independence and dependence of their caregiver. They may struggle with needing support and not wanting it. It is important to help them find personal ways to express their grief, such as writing, drawing and talking.

In all areas of development, the ways in which parents process and display their grief will greatly impact their children's ability to grieve. It is an important time for parents and other adults to teach children how to express grief in emotionally healthy ways free of shame or embarrassment, lessons carried into adulthood.

Developmental Considerations Concerning Children's Grief

Developmental considerations concerning cimaren s crief					
Age	Developmental Stage/Task	Concept Of Death	Grief Response	Signs Of Distress	Possible Interventions
2-4	Egocentric. Believes the world centers around them. Narcissistic. No cognitive understanding. Preconceptual - unable to grasp concepts.	Death loss is seen as abandonment. Seen as reversible not permanent. Common statements: "Did you know my doggie died - when will he be home?"	Intensive response but brief. Very present oriented. Most aware of altered patterns of care.	Regression: Eating & sleeping disorders bed wetting, insecurity.	Short interactions. Frequent repetition. Comforting. Touching. Needs consistency more than anything else.
4-7	Gaining sense of autonomy. Exploring world outside of self. Gaining language. Fantasy thinking/wishing. Concerns of guilt.	Death still seen as reversible. Great personification of death. Feeling of responsibility because of wishes or thoughts. Common statements "It's my fault; I was mad at her and wished she'd die".	Verbalization. Great concern with process. How? Why? Repetitive questioning. Wanting the answers to stay the same. May have dying, death or funeral themes in play.	Regression: Nightmares, sleeping and eating disturbances. Violent play.	Symbolic play. Drawings /Stories. Allow/encourage expression of energy/feelings anger. Talk about it.
7-11	Beginning of socialization. Development of cognitive ability. Beginning of logical thinking.	Death as punishment. Fear of bodily harm, mutilation. This is a difficult transition period - still want to see death as reversible but beginning to see it as final.	Specific questioning. Desire for complete detail. Concerned with how others are responding. What is the "right" way? How "should" they be responding? Starting to have ability to mourn and understand mourning.	Regression: problems in school withdrawal from friends. Acting out. Sleeping and eating disturbances. Overwhelming concern with body. Role confusion.	Answer questions. Encourage expression of range of feelings. Encourage/allow control. Be available/but allow alone time. Symbolic play. TALK ABOUT IT!
11-18	Problem Solving. Abstract Thinking. Integration of one's own personality.	"ADULT" Approach. Ability to abstract. Beginning to truly conceptualize death. Work at making sense of teachings.	Depression. Denial. Repression. More often willing to talk to people outside of family. Traditional mourning.	Depression. Anger. Anger toward parents. Noncompliance. Rejection of former teaching. Role confusion. Acting out	Encourage verbalization. Do not take control. Encourage self motivation. Listen. Be available. Do not attempt to take grief away.

© Margaret M. Metzgar M.A. 1 1301 5th Ave N.E. Seattle WA 98125 (206)367-4880 Reprinted by the SIDS Foundation of Washington with permission of author. Reprinted here with permission from the SIDS Foundation of Washington.

Helping children through pet illness and death

Some helpful ideas for helping your child experience death and loss are:

- Be as honest as possible. Avoid euphemisms like, "put to sleep." These can be frightening and confusing to children (especially young children) who may associate the word 'sleep' with going to bed.
- As a parent, it's natural to want to protect your child from any pain, including the pain
 associated with grief. Some parents think that a way to do this is to lie about the death of a pet.
 Fabricating reasons why a pet is no longer in the home leads to many other emotional effects,
 such as abandonment beliefs, a continued sense of hope for their return, and unresolved grief
 due to a loss not being recognized. Instead, be honest with your children about a pet's death
 and don't collude in lies.
- Recognize that pet death is a significant loss for children and should not be trivialized or minimized. It is an important time for parents and other adults to teach children how to express grief in emotionally healthy ways free of shame or embarrassment.
- Discover what the individual child is thinking. Be open and receptive to any questions/concerns that your child may have. Encourage him or her to ask the veterinarian questions that may occur. Remember, there are no stupid questions.
- Be alert to "magical thinking." Young children often mistakenly believe that they are somehow responsible for the pet's death. Talk openly with children about this.
- Involve children as much as possible in decisions surrounding the pet's illness and death. During euthanasia, it can be helpful for the child to have a choice of being present or not, given that they are well prepared for the event taking place. If a child does not want to be present for the actual euthanasia, viewing their pet's body afterwards for final goodbyes can help create a sense of closure and finality.
- Understand that the emotional responses to a pet's death vary according to the child's relationship with the animal. Don't assume that a child's reaction will be the same as the adult's.
- Parents are encouraged to involve their children in a good-bye ceremony and in memorializing the pet. Some ideas are making a clay paw print, ink paw print, cut a hair clipping, creating a shadow box, or holding a funeral service or memorial celebration.
- Don't encourage replacement of pets, but rather share memories and stories of the deceased pet.