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Benjamin Marton
Loyola University Chicago

Teresa Kilbane
Loyola University Chicago

Holly Nelson-Becker
Brunei University London/Loyola University Chicago, hnelsonbecker@luc.edu

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Exploring the loss and disenfranchised grief of animal care workers

Benjamin Marton^a, Teresa Kilbane^a, and Holly Nelson-Becker^b 

^aSchool of Social Work, Loyola University Chicago, Chicago, Illinois, USA; ^bCollege of Health and Life Sciences, Brunel University London, Uxbridge, UK

ABSTRACT

This article explores the psychological distress of Animal Care Workers (ACWs), and the disenfranchisement of this distress through mixed methods study conducted as an online survey. In all, 139 participants responded about their experiences as an ACW, related psychological distress, and the systemic disenfranchisement of distress. Findings indicate that nearly half of ACWs experienced symptoms of depression in the previous month. Over 66% indicated it was difficult to cope. Limited support often resulted in a disenfranchised loss. Implications suggest ACW distress and disenfranchisement related to animals they serve is similar to that of individuals who lose animal companions.

Introduction



Animal care workers (ACWs) are those who work or volunteer for animal care organizations (ACOs), such as veterinarians and those employed at animal shelters, zoos, aquariums, and private ACOs. For this paper, ACW will also refer to those who may not directly work with animals such as administrative staff at an animal shelter. Researchers have shown high levels of anxiety, depression, psychological distress, suicidal thoughts and suicidal attempts amongst veterinarians and animal control workers (Bartram, Yadegarfar, & Baldwin, 2009; Nett et al., 2014; Tiesman et al., 2015). Researchers have illustrated the difficulties some ACWs experience in managing the guilt and grief of euthanasia amongst their clients alongside their own emotional experience (Morris, 2012). There is a research gap in both the experiences of ACWs in capacities other than veterinarians and animal control workers (e.g. the staff at an animal shelter) and learning whether disenfranchisement is a factor in the psychological distress of ACWs.

It is difficult to understand the impact of the relationship between ACWs and the animals they serve without empirically-validated literature about this relationship. Researchers have, however, considered the way in which people perceive the relationship and subsequent loss of animal companions. An animal

companion, as used throughout this paper, is a non-human being (usually dogs and cats, but not exclusively) that is owned by a human who willingly provides the animal with the necessities of life. In an attempt to study the nature of the relationship between ACWs and the animals they serve with empirical validity, the animal companion relationship was explored. This paper develops an understanding of what relationships with animals mean from a generally human perspective.

The relationship between people and their companion animals is one marked by a bond held sacred, an obligation to protect and give voice to the voiceless, a reciprocal form of comfort and mental health satisfaction (Maharaj, Kazanijan, & Haney, 2016), and simultaneous feelings of caring for another while being cared for (Margolies, 1999). The loss of these sacred bonds can also be devastating and create long-lasting grief reactions exacerbated by a disenfranchisement of that grief (Archer & Winchester, 1994; Hart et al., 1990; O'Donovan, 1997, as cited in Morley & Fook, 2005; Hall et al., 2004; Packman et al., 2014).

When relationships with the animals they serve are lost through animal euthanasia, adoption, the termination of employment, the transferring of departments or the loss associated with leaving the animals unsupervised overnight, ACWs may experience loss/grief reactions and the disenfranchisement of those

CONTACT Benjamin Marton  bmarton1@luc.edu  School of Social Work, Loyola University Chicago, 5006 North Monticello Avenue, Chicago 60625, USA.

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reactions through mechanisms similar to the experience of owners of companion animals. This paper explores this grief, the subsequent disenfranchisement of this grief, and the impact on ACW social, emotional and vocational well-being. The research presented denotes the intersection of animal rights, the right to heal from suffering, and mental health awareness.

Exploring the experiences of animal care workers

The significance of animal companions

Owners of animal companions often express that the relationship with their animal companion represents a mirroring of the human ability to connect with other species that share our world (Charles, 2014; Maharaj et al., 2016). Human relationships with companion animals provide: a sense of duty, feelings of obligation to protect and care for creatures that do not have voices of their own, mindful interactions leading to increased self-esteem, connectedness and comfort in times of grief, and stronger relationships with self, family and other people in their lives (Jackson-Grossblat, Carbonell, & Waite, 2016; Maharaj et al., 2016). Companion animals provide a sense of security without a threat of abandonment, particularly useful for people with attachment issues (Morley & Fook, 2005), and allow a simultaneous sense of caring for another while feeling cared for (Margolies, 1999).

The loss of such a sacred relationship can be devastating. Owners of companion animals facing the loss of a companion animal often experience numbness, disbelief, ruminations about the death experience and circumstances around the loss; and some experience anxiety, depression, anger, and self-reproach (Archer & Winchester, 1994). Importantly, because bonds between owners and animal companions are often experienced as representations of human relationships, much of the loss response is similar to grief reactions experienced by the loss of any loved one, human or animal (Hart et al., 1990; O'Donovan, 1997, as cited in Morley & Fook, 2005).

Empirical understanding of the relationships ACWs form with the animals in their care does not exist. There will be aspects of the research presented here that address this. However, exploration of the relationship between people and their companion animals can provide researchers with a fundamental understanding of bonds between ACWs and the animals in their care. There is, thus, an empirical assumption that ACWs form bonds to the animals in their care

similar to animal companions and their owners, or to some degree holds aspects of its meaningfulness. Understanding some specific losses ACWs experience may help guide an understanding of mechanisms that result in grief responses.

Euthanasia in America

According to the American Society for the Prevention of Cruelty to Animals (ASPCA), approximately 7.6 million companion animals enter animal shelters every year and approximately 2.7 million of these animals are euthanized, while the same number are adopted out (ASPCA, 2016). This number is not fully accurate. First, it does not account for all shelters across the United States, as there is no existing government body established for collecting accurate counts on this data. Additionally, these numbers are representative of dogs and cats alone; there are a far greater number of species that interact with systems throughout the animal care industry. Lastly, this number does not account for veterinarians who euthanize pets privately at the owner's request.

What this number does ultimately show, however, is that there are countless ACWs who interact with, and potentially form bonds with, at least 7.6 million animals entering their care. Of this number, around a third of animals are euthanized (ASPCA, 2016). Applying the discussion above on the sacred relationship between companion animals and their owners, and the effects of loss on those owners, there is an inference that naturally evolves to the question that drives this research: do ACWs experience impactful grief resulting from the loss of these animals? Though there may be an implied higher investment for pet companions than animals in ACW care, it may be possible to show that these losses ACWs experience are equally devastating, and are repeated, prolonged, and unending.

Losses beyond animal euthanasia

Some researchers have also explored animal losses experienced outside of death. For example, Walsh (2009a, 2009b) writes on the ambiguous loss experienced by owners of absent or missing animals, the forced separation of animals through nursing home admittance, animals going to permanent housing in foster care situations, owners moving into housing with anti-pet policies, and grief experienced through the compounding of other losses. These experiences foster unique forms of grief reactions.

Likewise, it is important to note that ACWs may experience grief reactions through the adoption of animals in their care, relocation of animals to other agencies or departments, the termination of services in certain circumstances (such as ACWs working for private ACOs), and animal-related employment or volunteer termination. ACWs may experience guilt when leaving the animals in their care alone when the worker leaves for the day. Grief reactions to these unique experiences may influence and ultimately compound euthanasia-related loss experiences. This is an important factor when understanding ACW reaction to losses throughout the research presented here. Participants were not asked about specific losses experienced through their work as an ACW. Understanding that loss experiences are diverse amongst participants provides an emphasis on the importance of the post-loss reaction and how that is experienced.

Disenfranchised grief

Strongly associated with the grief faced by the loss of an animal companion is disenfranchisement from loved ones (Packman et al., 2014), and a sense that societal norms do not permit this particular expression of grief (Hall et al., 2004). This disenfranchisement can lead to complicated or unresolved grief (Cordaro, 2012), can intensify underlying psychopathology (Kaufman & Kaufman, 2006), and is a denial of the basic human right of grieving (Attig, 2004). Often, these mourners feel as though their usual support systems will not properly acknowledge the grieving of the animal companion, creating further isolation in mourning (Dunn et al., 2005).

Attig (2004) articulates disenfranchised grief as a failure of grieving in the following domains: empathic failure, political failure, and ethical failure. Empathic failure is the fundamental failure of understanding why the griever is grieving and ultimately represents a failure to understand the gravity of the mourning and how it impacts the lives of its victims. Political failure examines what Attig describes as an “abuse of authority” (p. 202), where entities and/or systems choose for the mourners in a way that limits options in grieving, control expressions of grief, or sanction the efforts to overcome suffering. In the case of this research, political failure is represented by an ACO which does not recognize the suffering of its employees. Ethical failure examines the fundamentally disrespectful ways in which disenfranchised grievers are treated. Disrespect, in Attig’s articulation, concerns ways in which

disenfranchised grievers are ultimately constrained from seeking relief from suffering and are not allowed to contend with and subsequently find meaning in their suffering.

Manifestations of grief and disenfranchisement

In October of 2014, the Huffington Post published a blog post entitled “The Legacy and Tragedy of the life of Dr. Sophia Yin.” The article starts, “On Sunday, Sept. 28, Dr. Sophia Yin, one of the world’s most respected and important veterinary behaviorists, committed suicide” (Grossman, 2014, para. 1). The article discusses the prevalence of depression amongst what the author describes as, “the animal-training and veterinary community.” It was among the first times popular media has acknowledged this trend.

Empirical researchers are catching on to the trend, as well. Bartram and colleagues (2009) found that, when compared to the general population, veterinary surgeons in the UK had high levels of anxiety, depression, poor working conditions through unfavorable demands and low levels of managerial support, less positive mental well-being, and increased rates of negative home-work interactions. Most disturbing, however, was their significant finding that veterinary surgeons were 5.5 times as likely than the general population to experience suicidal thoughts. A study by Tiesman et al. (2015) looked at suicide in U.S. workplaces between 2003–2010. Animal control workers, employees of what is often called the “city pound,” had a suicide rate 3.5 times higher than that of the overall U.S. worker population. Additionally, a report from the Centers for Disease Control showed that 6.8–10.9% of 10,254 currently employed participant veterinarians were experiencing serious psychological distress, 24.5–36.7% reported experiencing depressive episodes, 14.4–19.1% reported suicidal ideation, while 1.1–1.4% made suicide attempts (Nett et al., 2014).

Attention has been focused on veterinarians and a few other specific ACW populations, but researchers have failed to address other populations of ACWs, such as shelter staff. Additionally, few researchers have looked at the processes that facilitate suicidal ideations, only the outcome of completed suicide or suicidal ideation itself. The research presented here contributes to a broader understanding of the mental health needs of ACWs by exploring the questions: (1) Do ACWs experience socioemotional consequences related to animal care work? and (2) Is there disenfranchisement of these experiences?

Methodology

Due to a lack of research on a wider ACW population, this is an exploratory study to describe and understand the specific loss reactions that occur amongst ACWs and the disenfranchisement of those loss reactions by varying systems within the lives of ACWs. This study used a mixed methods design.

Procedures

An online quantitative survey was designed with questions relating to: (1) basic demographics; (2) qualifying employing organizational data; (3) assessment of emotional experiences in their role as an ACW; (4) perceptions of support systems within their lives; (5) mental health needs; and (6) reception towards the utilization of a structured support group. These questions were designed to uncover preliminary concepts on the stressors ACWs face relating to their work, and how systems in their lives, including the ACO in which they work, support or hinder healing. The section of the survey relating to perceptions of the utilization of a support group for ACWs is meant to provide insight into the feasibility of such an intervention. A qualitative question follows to elicit participants' perception of the potential utilization of a structured support group. The survey was created within university-supported software package called Qualtrics. A link was provided in all the recruitment efforts to the survey in Qualtrics which at the end created an SPSS file for data analysis.

Recruitment and sample

The survey was open to anyone who identified as an ACW described in marketing materials as an employee of, or regular volunteer for, any ACO. Participation in the survey was anonymous and the research was approved by the Loyola University Chicago Institutional Review Board. Researchers began receiving survey results in April 2016, and the survey was kept active until December of 2016, though aggressive recruitment ended in May 2016. Participants were recruited mainly through snowball sampling, through social media blurbs which appeared on the primary investigator's own social media pages, and through posting on the social media pages of ACOs. Individual ACOs were contacted with a printable flyer and invited to post it in employee spaces. Additionally, community leaders in the animal care industry were contacted to assist in recruitment. These leaders were invited to publicize the survey

Table 1. Sample demographics ($n = 139$).

	(n)	%	ACO Type	(n)	%
Gender			<i>No Kill Shelter</i>	49	35.3
<i>Female</i>	124	89.2	<i>Veterinary Practice</i>	37	26.6
<i>Male</i>	14	10.1	<i>Open Admission Shelter</i>	30	21.6
<i>Other</i>	1	0.7	<i>Private ACO</i>	5	3.6
Age Range			<i>Other</i>	18	12.9
<i>18–29</i>	50	36.0	<i>Employment Length</i>		
<i>30–39</i>	36	25.9	<i>0 Months up to 1 Year</i>	24	17.3
<i>40–49</i>	32	23.0	<i>1 year up to 3 Years</i>	38	27.3
<i>50+</i>	21	15.1	<i>3 years up to 6 Years</i>	33	23.7
Primary Race			<i>6+ Years</i>	44	31.7
<i>White</i>	131	94.2	<i>Employment Capacity (n = 130)</i>		
<i>Black/African American</i>	1	0.7	<i>Animal Attendant</i>	88	56.8
<i>Multiracial</i>	1	0.7	<i>Administrative</i>	46	29.7
<i>Other</i>	6	4.3	<i>Other</i>	21	13.5

through social interactions and post digital and paper copies of the flyer for the survey.

Data analysis

Both quantitative and qualitative methods were used to analyze the data from the study. The quantitative analysis was descriptive in nature focusing on the rate of occurrences of the structured responses. Qualitative analysis focused on the open-ended question on attending a proposed support group for ACWs. Two of the authors coded the qualitative responses. Comparison of themes was made across participants who would attend a support group, those who would not attend, and those who were not sure. Discussion took place between the two coders until an agreement was achieved. The themes were then quantified by prevalence within these three groups. Participants' quotes were used to illustrate the themes.

Results

Recruitment efforts produced a total of 168 surveys. After eliminating 29 surveys that were not fully completed, the final sample size was 139 respondents. Most participants were white females across a wide age range (see Table 1). The most common ACO-type of affiliation was a no-kill shelter, followed by veterinary practices and, lastly, open admission shelters, meaning shelters that euthanize for behavioral or physical health concerns. Participation was not limited to those who interact directly with animals, but as expected, most participants do work in that capacity. Participants were evenly spread across the length of time in employment. Approximately half of the participants identified themselves as animal attendants (those who spent most of their time at work interacting with animals), followed by nearly a third in

Table 2. Emotional impact of animal care work ($n = 139$).

Statement	Never (%)	Sometimes (%)	Often (%)	Always (%)
When an animal leaves your care, how often do you feel a loss similar to that of losing a human friend?	42 (30.2)	66 (47.5)	25 (18.0)	6 (4.3)
Statement	Not at all (%)	Several days (%)	More than half the days (%)	Nearly everyday (%)
How often have you experienced feelings of depression or hopelessness?	27 (19.4)	71 (51.1)	24 (17.3)	17 (12.2)
How often have you felt tired or had very little energy? ($n = 138$)	11 (8.0)	70 (50.7)	30 (21.7)	27 (19.6)
	Not difficult at all (%)	Somewhat difficult (%)	Very difficult (%)	Extremely difficult (%)
If you find your work as an ACW hard, how difficult has this made it for you at home or with other people? ($n = 94$)	31 (33.0)	50 (53.2)	12 (12.8)	1 (1.1)
How difficult is it to cope with the feelings associated with working with animals?	20 (14.4)	92 (66.2)	25 (18.0)	2 (1.4)
Statement	Yes (%)	No (%)	–	–
Are negative feelings triggered through incidents experienced at your ACO? ($n = 134$)	82 (61.2)	52 (38.8)	–	–
Do you think about the animals in your care during non-work hours? ($n = 139$)	130 (93.5)	9 (6.5)	–	–
If yes, do you feel that sometimes those thoughts turn into extreme rumination or obsession? ($n = 134$)	49 (36.6)	85 (63.4)	–	–

administrative roles (those who were in more managerial and administrative positions).

The next section presents the results of the participants' emotional experiences as an ACW, their support systems to deal with these experiences, and openness to support groups at their organization as a method to cope with loss. The questions utilized in the survey for these results are highlighted in Table 2 and Table 3. The total n s are reported in the tables when missing data occurs.

Loss reactions among ACWs

Most participants experienced negative emotional states working with animals and faced difficulty in handling these feelings; some had troublesome issues indicating the need for professional assistance (see Table 2). Nearly half of participants (51.1%, $n = 71$) reported that, over the last month, they have had several days where they experienced feelings of depression or hopelessness; over a fourth (29.5%, $n = 41$) experienced this more than half the days or nearly every day. Participants expressed similar feelings of being tired and having little energy. Almost all participants think about the animals in their care even during non-working hours (93.5%, $n = 130$). The majority stated that their work with animals sometimes makes it difficult for them at home or work (53.2%, $n = 50$) and to cope with their feelings (66.2%, $n = 92$). When an animal leaves their care, ACWs sometimes experience similar feelings to a human loss (47.5%, $n = 66$),

and nearly a quarter (22.3%, $n = 31$) often or always feel similarly. Most participants (61.2%, $n = 82$) stated that negative feelings were triggered by incidents experienced at their ACO. Triggered incidents were self-defined by the participants. For those who think of the animals outside of work, one-third (36.1%, $n = 48$) feel that their thoughts turn into extreme rumination or obsession.

The disenfranchisement of ACW loss experience

A lack of organizational support to address these negative feelings was perceived by the ACWs (see Table 3). Over two-thirds (69.8%, $n = 87$) reported that their organization never or only sometimes advocates for their well-being nor recognizes the difficulties of working as an ACW (54.6%, $n = 76$); supports them in general (46.0%, $n = 64$); or validates their voice in matters (44.6%, $n = 52$). Unfortunately, the ACWs also find it difficult to obtain their own support; 59% ($n = 82$) reported that they never or sometimes can find mental health resources when needed. Another indicator of the stress level is that nearly one-quarter (24.6%, $n = 34$) often or always feel the need to look for other employment.

Despite depressive symptoms, most participants (94.3%, $n = 131$) still feel that they have often or always done the best they can for the animals in their care, and many participants (84.1%, $n = 116$) believed that the organization for which they work often or always does the best it can to provide resources to the

Table 3. Perceived organizational support ($n = 139$).

Statement	Never (%)	Sometimes (%)	Often (%)	Always (%)
I feel supported by my organization's management.	10 (7.2)	54 (38.8)	37 (26.6)	38 (27.3)
My voice matters in my organization.	18 (12.9)	44 (31.7)	42 (30.2)	35 (25.2)
My organization recognizes the difficulties of working as an ACW.	23 (16.5)	53 (38.1)	34 (24.5)	29 (20.9)
My organization advocates for my mental wellbeing.	48 (34.5)	49 (35.3)	27 (19.4)	15 (10.8)
My organization does the best it can in providing resources to the animals in our care. ($n = 138$)	1 (0.7)	21 (15.2)	47 (34.1)	69 (50.0)
I feel that I have done the best I can for animals in my care.	1 (0.7)	7 (5.0)	56 (40.3)	75 (54.0)
I feel motivated to do the best work that I can at my organization. ($n = 137$)	5 (3.6)	20 (14.6)	44 (32.1)	68 (49.6)
I have the ability to find mental health resources when need be.	39 (28.1)	43 (30.9)	27 (19.4)	30 (21.6)
I feel the need to look for other employment opportunities. ($n = 138$)	43 (31.2)	61 (44.2)	18 (13.0)	16 (11.6)

animals in their care. Additionally, despite the majority experiencing feelings of fatigue and depression, many participants (81.7%, $n = 112$) reported that they often or always feel motivated to do their best work at their ACOs. This may indicate motivation beyond pay: a sense of duty ACWs may feel towards the animals in their care.

Family, friends and coworkers are sources of support outside of management at the ACO (see Table 4). Discussing ACW-related losses with others was not difficult for 40.9% ($n = 56$) of the participants, somewhat difficult (41.6%, $n = 57$) for others, while 17.5% ($n = 24$) stated that it is very or extremely difficult. Similarly, most participants often or always feel they have someone to talk to about work difficulties (54/9%, $n = 72$) and feel like talking to other ACWs help them to cope with work difficulties (53.1%, $n = 69$). However, the majority (62.3%, $n = 81$) reported they never or only sometimes feel that they have enough opportunity to speak with other ACWs. Being able to speak to others in the field is important since most ACWs feel that people in their personal life never or only sometimes empathize with their work difficulties at the ACO (64.2%, $n = 84$), or disregard the difficult feelings they face dealing with loss and stress (61.8%, $n = 81$).

A possible solution of a support group to deal with feelings of loss, depression and anxiety was posed to the participants (see Table 5). Over half of participants (56.5, $n = 73$) reported that they may benefit from the use of a support group for ACWs. A majority (60.0%, $n = 78$) reported that this group of like-minded people in the industry may improve feelings of depression, anxiety, and/or ruminations, and just under half (47.3%, $n = 61$) reported that such a group may improve their social well-being. Fewer participants felt the group would be able to improve feelings toward their employer (26.4%, $n = 34$). Though many participants (43.4%, $n = 59$) said that they would attend if such a support were created, a close percentage (40.4%, $n = 55$) said that they were not sure and a few (16.2%, $n = 22$) stated outright they would not attend. An open-ended question followed requesting the reasons behind their response regarding attendance.

A total of 90 participants responded to this question. Themes were compared between those who would attend, not attend, or were not sure. Specificity and frequency of themes for attendance of support groups are listed in Table 6.

Positive disposition toward a support group

Most participants who would attend a support group are those who clearly stated the need for a supportive place with their own peers in attendance. Responses included "people who understand the frustration and disappointments in this work" and "it is difficult to talk about work-related [issues] with people not in the field." One participant stated, "It's difficult to explain my feelings to my husband who has never worked in a field like this." Examples of universal support included "It is always good to vent," "there's something more personal about speaking about it rather than allowing it to continue to build," and "for support, understanding, and to improve our work." A few were ambivalent but willing to attend, i.e. "I would at least check it out and see what it was all about" and "I would attend to see if it was helpful." One participant stated, "I could gauge my mental state and would have a ready outlet to address any recognized or developing concerns" and another wrote, "I am very concerned about burning out and not being able to keep doing it."

Negative disposition toward attendance

For those who would not attend a support group, most felt they either were not the type of person to attend a support group because of personal characteristics or their personal style of handling stress. Personal characteristics included "... never been a fan of sharing or opening up," "I'm not a joiner," or "I'm shy." Handling stress on their own included "I deal with this stuff fine on my own" or "I leave my work at work." A few participants have other support systems in place i.e. "I find and seek support from my husband and very close friends" and "I have a support

Table 4. Perceived social supports for ACWs.

Statement	Never (%)	Sometimes (%)	Often (%)	Always (%)
How often do you feel that the people in your life empathize with the difficulties of working at an ACO? (<i>n</i> = 131)	15 (11.5)	69 (52.7)	31 (23.7)	16 (12.2)
How often do you feel that the people in your life disregard the difficult feelings you face when dealing with the losses and stress for your employment? (<i>n</i> = 131)	27 (20.6)	54 (41.2)	42 (32.1)	8 (6.1)
How often do you feel you have someone that you can talk to about difficulties at work or outside of work? (<i>n</i> = 131)	8 (6.1)	51 (38.9)	40 (30.5)	32 (24.4)
How often do you feel like talking to your coworkers and animal care workers at other organizations helps with coping through difficulties of being an animal care worker? (<i>n</i> = 130)	18 (13.9)	43 (33.1)	40 (30.8)	29 (22.3)
How often do you feel that you have enough opportunity to speak with animal care workers about the difficulty in coping? (<i>n</i> = 130)	30 (23.1)	51 (39.2)	36 (27.7)	13 (10.0)
Statement	Not difficult at all (%)	Somewhat difficult (%)	Very difficult (%)	Extremely difficult (%)
How difficult is it to discuss these losses with others? (<i>n</i> = 137)	56 (40.9)	57 (41.6)	16 (11.7)	8 (5.8)

Table 5. An ACW-Specific support group.

Statement	Yes(%)	No(%)	I'm not sure (%)
Do you feel like you may benefit from the use of a group of animal care workers coming together to discuss issues related to their profession? (<i>n</i> = 129)	73 (56.6)	16 (12.4)	40 (31.0)
Do you feel like having a regular group to attend of like-minded people in the industry may improve feelings of depression, anxiety, or ruminations of the animals of which you care for? (<i>n</i> = 130)	78 (60.0)	23 (17.7)	29 (22.3)
Do you feel like attending such a group would improve your social well-being? (<i>n</i> = 129)	61 (47.3)	35 (27.1)	33 (25.6)
Do you feel like attending such a group would improve your feelings toward your employer? (<i>n</i> = 129)	34 (26.4)	42 (32.6)	53 (41.1)
If such a group were created, would you attend? (<i>n</i> = 131)	56 (42.7)	22 (16.8)	53 (40.5)

Table 6. Frequency of themes for attendance at a support group.

Would attend (<i>n</i> = 23)		Would not attend (<i>n</i> = 18)		Not sure would attend (<i>n</i> = 31)	
Peer support specified	13	Not a support group person	6	Logistical difficulties	12
Support & venting	11	Don't need-Can handle	6	Have support systems	6
Ambivalent but willing	4	Have support systems	4	Do not want to mix with other divisions at work	5
Experiencing profound distress	4	Prefer professionals	3	Misconception of support group dynamics	4
ACO suppresses stress reactions at work	2	Personal Characteristics (lazy, not motivated)	2	Don't need – not impacted by the job	4
Need to help others	1	Misconception of support group dynamics	1	Not a support group person	4
–	–	–	–	Ambivalent - depends	2
–	–	–	–	Would if helps others	1

system that allows me to vent/talk about my job.” A few prefer “guidance from a professional” or “One-on-one is better for me personally.” While it was expected that logistical difficulties would be the response of those who would not attend, this did not occur. Instead, it was the overwhelming response for those who were unsure if they would attend.

Unsure about attending a support group

Most respondents in this category indicated attending a support group would be difficult practically, such as, “[I am] clocking 65 hr a week,” “I am so busy,” “I like

the idea, but I work 7 days a week, so I don't know if I'd have the time,” and “... barely enough time to do my day job, my second job, and volunteer regularly at the shelter.” Like those who would not attend, this uncertain group has support systems (“I already have informal gatherings of this sort with mentors and former classmates”), misconceptions of support group dynamics (“I can see it turning into a giant gripe session without any real conclusions”), and do not see themselves as a support group person (“social anxiety, and the fear of making feelings of loss/sadness worse” and “I am not a social creature”). Other common responses for the uncertain group were concerns

about bringing diverse types of employees together, i.e. “I may attend a group of veterinarians, but I would have little in common with a group of kennel staff and other animal care workers” and not needing a group because it would be unnecessary, i.e. “Since I am in administration, I’m not sure if I would be impacted as much as an animal caretaker” or “I practice good self-care, sleeping, eating, exercising, and meditating.”

A genuine interest for a support group was expressed by many participants who see its value especially with their own peers in attendance. For others, more education on the structure, purpose, and execution of support groups might encourage attendance. In addition, for many participants, the logistics of support groups will have to be carefully planned to fit their schedules or else it remains a major barrier for those who may want to seek support.

Discussion

Experiences of loss

The findings here support the concern that ACWs face stress-inducing losses associated with working at an ACO. This is evidenced through participants’ reports of depression and fatigue within the last month and ruminating thoughts about animals for which they care. This is also illustrated through participants’ comments that losses of animals in their care feel like the loss of a human friend. Though further research should look at the exact nature of the relationships between ACWs and the animals in their care, this data gives support to the conclusion that this relationship has features similar to that of owners and their animal companions.

Owners of companion animals have a sense of duty towards their companion animals and feel an obligation to protect and provide for creatures that do not have a voice of their own (Maharaj et al., 2016). Similarly, despite feelings of depression, ruminations, and difficulties in grieving the losses of animals in their care, participants still felt that they are motivated to do their best to provide for the animals in their care. ACWs may seek employment with ACOs because of prior history and interest as well as love towards animals, which may facilitate a process of developing invested relationships with animals in their care.

Disenfranchisement of ACW loss

The losses and grief reactions experienced by ACWs are disenfranchised at multi-systematic levels per

Attig’s (2004) articulation of disenfranchisement. A key finding was that ACWs report lack of empathy from social networks about difficulties of their work, and the difficulties ACWs face in articulating their experiences. This provides evidence of empathic failure from those whom ACWs typically see as support systems. Further research is needed to examine the processes associated with this empathic failure.

Participants reported a lack of support, recognition of their challenges, and advocacy for mental wellbeing from the ACO for which they work. This absence of organizational awareness and response is a form of political disenfranchisement. The qualitative analysis regarding potential utilization of a support group provided additional insight. Some participants stated they would not feel comfortable in a group with others from different departments. This may imply a lack of communication between departments at varying levels of the organizational hierarchy. Additionally, it is important to note the significance of those reporting administrative positions leaned towards feeling *always* supported by the ACO where they work, whereas those reporting animal attendant positions leaned towards *never* feeling supported. Though these latter findings lack generalizability, it does lean towards supporting the implication of a mentality from ACOs in general that, at the very least, does not recognize, or at worst, completely ignores ACW suffering.

Participants reported that ACOs fail to advocate for the well-being of ACWs, and many participants reported an inability to find mental health services. This implies a disrespect towards the need for a healing process that may impact the quality of work and overall impact on the mental well-being of ACWs. There may be something about the culture of ACOs that isolates the suffering of ACWs, which can cause further complications for healing. Because the results indicate a *group need* for support, there is an implication that a *group response* is needed to address healing.

Implications

Structured support group

Research exploring the creation of a positive support system within workplace settings has shown that this can increase the satisfaction of work-life balance and foster positive mental health outcomes (Bhave, Kramer, & Glomb, 2010). The benefits of a structured support group have been shown in other vocations, such as police officers (Patterson & Telescolesco, 2009), and in other populations that experience grief

and loss (Knight, 2009). Additionally, Dunn, Mehler, and Greenberg (2005) reported positive results from a support group for victims of animal companion loss. Participants in this group reported feelings of gratefulness for having support to fill empathetic voids. Support groups for specific populations can often help members find meaning in the losses they experience. This meaning is a vital step in the mourning process (Goldsworthy, 2005; Murray, 2001).

The formation of a support group for ACWs may find similar success. Many participants endorse the idea for support from others in their field. Disenfranchised loss with animals is a currently under-addressed area. ACWs have not had the opportunity to develop a common language in this area, nor benefit from sharing coping strategies that might be specific for this type of work, nor give and receive support from each other.

Working with ACOs and community networks

Given the findings here, it is important for ACWs to have discussions with ACOs, perhaps with mental health professionals acting as mediators in the conversation, to explore solutions to ensure employees and volunteers receive the support that is urgently needed. In obtaining cooperation from ACOs, researchers should investigate how mental well-being may impact employment and volunteer retention, particularly given that many participants reported that they at least sometimes feel the need to look for other employment opportunities. Research should also look at the impact on worker productivity, particularly given that many participants reported frequent feelings of fatigue, which may manifest in sick leave.

Healing through community involvement and community empowerment is another avenue in which ACWs may find meaning in their losses (Murray, 2001). This could include connecting ACWs with animal rights activists, environmental activists, or other professions that have found value in addressing the emotional impact of their professional work. Though this may be beneficial despite ACO involvement and cooperation, healing may be most productive when more stakeholders are involved.

Limitations

This research has several limitations. Researchers used a convenience snowball sampling technique. Because researchers did not have a sampling frame to enlist participants, researchers were reliant on employees in

the animal care industry, as well as ACOs themselves, to enlist their own community members to participate in this survey. This technique creates questionable representation quality; however, it is suitable in the exploratory nature of this study. The survey itself was self-created for this study and has not been tested for validity or reliability. Thus, results of this survey may not necessarily represent the truest mental health assessment needed for ACWs. Because most marketing was also completed online, there may have been limitations of who would have been exposed to the survey's existence. Furthermore, this study does not account for extraneous variables that may influence the mental well-being of participants. It cannot be concluded, thus, that these results are not impacted by other stressors in the participants' lives. There were some participants who started but did not finish the survey in its entirety ($n=37$). It is not possible to speculate why they did not complete the survey, thus, creating a possible non-respondent bias. Lastly, this study may have elicited responses from ACWs who, for whatever circumstance, may be more impacted by these needs. Those who do not experience these needs in the same way, or at all, may have been disinterested in this survey, and thus, it may not be representative of the ACW population as a whole.

The demographics of this survey may ultimately skew its results in unforeseeable ways. For example, 89.2% of participants were female and 94.2% were white, where other studies have shown 60% response rates from female ACWs (Huntley, Dean, Massey, & Brennan, 2016; Tran, Crane, & Phillips, 2014), and racial identity has not typically been explored. Thus, these numbers may not represent the diversity in the field. Lastly, ACWs are targeted as a homogeneous population, but ACWs probably experience losses in varying levels of severity and frequency. For example, workers at open-admission animal shelters will experience euthanasia of animals in their care at greater frequencies than workers at no-kill shelters, where ACWs at some private ACOs probably do not experience euthanasia at all.

Conclusion

Though there are limitations to the research presented here, it does provide an initial framework for understanding how ACWs experience their careers at ACOs. Through building relationships with the animals in their care, ACWs suffer grief reactions when these relationships come to an end. This grief is disenfranchised through the empathic failures of usual

support systems in their lives, political failures through institutional denial and ethical failures in that ACWs are not usually permitted to process their losses (Attig, 2004). Further research is needed to understand the relational processes of ACWs with the animals in their care and the consequences of the losses of these relationships on ACW well-being, and to gain a better understanding on disenfranchisement or failure to mourn these losses.

Interventions should focus on providing support for ACWs to process their losses without judgement. This may include structured support groups for ACWs in general, or specific ACWs such as veterinarians, and connecting ACWs with animal rights, environmental, and labor activists who may help ACWs understand how to make meaning out of the losses they experience, vital in the healing process of loss, and to gain a sense of community empowerment.

ORCID

Holly Nelson-Becker  <http://orcid.org/0000-0001-9614-9974>

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