



New Trends
in Psychology

Advising the Owner After the Loss of the Pet Case Study

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Abstract: Following a complicated intervention of a pet, belonging to D.T., a young student of letters, in order not to prolong the torments of the feline undergoing treatment, follows the counseling process through which she was helped in making a good decision both for her as well as for the little companion. Her preparation for unraveling and at the same time reducing anxiety and guidance are put into practice after a first assessment and continue during the treatment period of the little companion, during the history and treatment, insisting on counseling when it cannot be registered no improvement in the patient's health, which leads to an increase in depression.

Keywords:

1. Intervention Plan

At a first evaluation, I did the history of the patient, the animal, in parallel with the owner's, to understand what is happening, and to observe if the owner's condition does not influence it and the animal's, something very common in veterinary medicine.

1.1. History of the Owner

D.T. student: 20 years old, female, born and raised in Costesti commune, Costesti village, Vaslui county, attended high school in Vaslui Mihail Kogalniceanu, philology section, entered Al. Cuza University, Literature section, with high grades, English-French, third child out of 4, modest but hard-working family, quiet

environment with loving family, second child at university, attached to family and animals, low social life, works in free time and on holidays in the city of Iasi for to support herself in classes, which is why the feline was brought with her to study and due to the lack of time during the vacation and her busy work schedule, she took her companion back to her parents' house, to be left in the care of her parents . The blanket represents a comfort, it represents the reduction of anxiety and it reminds him of home, being always with her for almost three years.

Anamnesis of the male, Ricky: unneutered male, European breed, age 38 months, raised at home and in the yard, after a 3-day absence from his parents' home, returns home with open wounds, mandibular fracture, and parietal skull, wounds by biting in the cervical and mandibular area, followed by parasitic infestation with fly larvae, poor condition, showing hypothermia, dehydration, lack of sensory reactions.

The owner presents himself in a state of denial of the seriousness of the animal's condition, repression through condemnation and repression, displacement and projection through accusations brought to the family, intellectualization through the transformation of the painful situation into philosophical contents, rationalization through the justification of the decision taken not to bring the feline to the consultation immediately but after a few days, a possible regression can be observed, he has not fed, rested since he heard news that the animal is sick.

2. Intervention

All this made me use the following tools: I used the Zung scale with her consent to calculate her depression level, obtaining a score of 62, which results in mild depression, I used the Berger Self-Acceptance scale where I obtained an average score of 119, noting that he understood where he went wrong and where he can improve in the future, I used the Rosenber scale obtaining a score of 29 and resulting in an average level of self-esteem, also the Hamilton anxiety scale, obtaining a score of 16, moderate anxiety.

These short tests helped me to communicate to the patient the reserved prognosis regarding the evolution of the patient's condition and to help the patient face the not-so-pleasant situation, to be able to make the best possible decision for both her and the patient, to accept the reality, without causing him a deep trauma, to realize the defense mechanism of Acting out through a work of mourning that can be realized in time and consciously, which will lead to the defense mechanism of Affiliation,

although he came to save the companion, at least to reduce his suffering, hoping to avoid the Altruism defense mechanism and accepting one's own needs to reconcile and accept the loss and even not to blame the family members through Avoidance, although I observed the Compensation mechanism and that of Humor, I did not observe on the one of Passive Aggression, but her father told me that she showed up for a few days in front of the family, which is normal because the state of suffering was still recent.

As a method of communication, I used verbal and non-verbal communication, I followed his posture, facial expressions, body language, interpersonal communication, through a positive thinking without looking to blame for the patient's condition, and to look for a resolution of the state of health, a reduction of the anxiety state of the owner, and an easy acceptance of the prognosis. I also used written communication, both for the patient's anamnesis and for counseling the caregiver, oral communication to understand the condition of the patient and the caregiver, all through a positive and non-accusatory way of thinking, so that toxic communication is non-existent. Due to the patient's state of anxiety and fatigue, I observed the effects of paralanguage, the answers were given with a delay to questions, shortness of breath due to crying, the lowering and raising of the tone, which made me continue the communication in a positive way in such a way that I help them calm down, maintaining visual contact with the caregiver and the patient. I was able to observe a non-verbal communication with the owner through the posture, gestures, facial expressions, tone of voice, rhythm, clarity and fluency of speech and meaning.

As I administered the treatment and followed the evolution of the patient, observing the precarious condition and gathering information from the consultation, I realized that the prognosis would be negative, for these reasons I made the decision to think about a counseling plan for the patient.

She was informed of this plan and if she agrees to participate, thus her written consent was requested, following the analysis of the scales, and following these answers, I will know how to communicate the prognosis in such a way as to help her overcome this inevitable loss.

3. Conclusions

- The communication with the patient's family member led to his counseling, and therefore the family member also became a patient, but a patient for personal development counseling.
- D.T. at first sight showed a state of increased anxiety, a low self-esteem, he entered the defense mechanisms, he was aware of the seriousness of the feline's state of health, but there is hope for a total recovery through denial.
- The reduction of the state of anxiety was reduced through a form of positive, objective communication, as clear and sincere as possible, without bringing accusations, without looking for culprits.
- All this was felt by her during the counseling process, and I guided her by explaining that what she feels is normal, I listened to how she goes through the defense mechanisms, which I then explained to her each in part.
- Through counseling, I tried to help her go through mourning, accept the loss, come to terms with it, and come to terms with the loss, because both suffering and loss are part of the life process;
- I counseled her for a period of 5 meetings, during which I kept in touch with the family, communicated with them, they were very receptive and became a real support and help in this process.
- Due to the fact that the owner was open to counseling, she accepted a realistic treatment for the feline's condition, she understood her suffering and accepted it, it helped her to communicate more openly with her family, to increase her self-esteem, to socialize more, recognize the signs of depression, live in the present and enjoy life.

3.1. Short Term Goals

- Although the intervention was of short duration, the support of the family was very important, its desire to reconcile and overcome the trauma due to blame and loss.
- An increase in self-esteem can be observed, the counseling helped her to accept the symbolism of her beloved furry friend.

3.2. Long-Term Goals

- she is much more sure of herself, much happier, freer, she is no longer so anxious, she socializes more, she is more confident in herself and she fondly remembers Ricky, and his love and what he meant to her.

- I kept in touch with her family, and she is much more at peace with herself and with her new life, that of a young student, although there are moments that increase her anxiety level, she now has more courage to face the unknown.

- Through counseling for personal development she understood her feelings, understood herself, got closer to her family and came out of her comfort state, facing her pain, trauma, loss, anxiety, insecurity and recognized that she still needs for help, which he requested from a psychotherapist of the faculty.

In the field in which I work, that of veterinary medicine, counseling in personal development gives me the opportunity to help patients, in effective communication, in their own healing, in understanding, recognizing and putting into practice communication, counseling and identification a problem, in finding a method to approach and guide the owner.

Although we have met many cases with a favorable prognosis, sometimes we also have an unfavorable one, and this can affect the well-being of the patient, it can lead to depression, anxiety, a lonely life, misunderstanding or non-acceptance of the diagnosis.

Many times there are people who want to increase their family with a furry, but by counseling them I find out if this is what they really want or if they want to cover a gap, others cannot overcome the gap made after the disappearance of a quadruped, and the truth and the road to the well-being of happy, responsible, responsible owners and future owners can only be achieved through personal development counseling, something that leads to a more conscious, more positive, more fulfilled and happier world.