

HEALING WITH EXISTENCIALISM. THE GRIEF OF LOSING A PET

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ABSTRACT

This article addresses the process of grieving after the loss of a pet and how Existential Analysis (EA) can contribute to overcoming it. A case study will be used to examine dialogues from the perspective of the four Existential Motivations and the methods of Personal Existential Analysis (PEA) and Personal Positioning (PP). The lack of interpersonal relationships can lead to emotional dependence on a pet; however, EA can assist in the search for a fulfilling life, paying attention to both our own feelings and those of others.

INTRODUCTION

The purpose of this analysis is to accompany a patient in the process of grief due to the loss of a pet, which represents an example of what happens to some sectors of current society due to missing meaningful relationships with other human beings. In these cases, affection goes to one or multiple pets that offer company and help overcome isolation caused from multiple social and economic factors. The subject does not only exist in the world, but also participates actively in their life, which pulses in their being.

In this analysis, I'll use the Four Existential Motivations, with particular emphasis on the Second Motivation, referring to interpersonal relationships. For this, I'll make a study of a particular case focused on dialogues and their analysis from the perspective of Existential Analysis, using PEA as psychotherapeutic method and PP as the main tool to set forth the subject of the investigation.

When pain is caused by loss, the question arises: Do I enjoy living? This dimension involves sentiments, emotions, and closeness (Croquevielle, *en Vivir la propia vida*, 2013, p.21). Liberty is a fundamental aspect to live fully, but pain might impede this contact. In the process of grief, loss is confronted, and the meaning of life is questioned.

Alfried Längle, through the Four Existential Motivations, holds that meaning can be found even in loss. In fact, it goes a step further than logotherapy by affirming that only after acceptance can grief proceed.

The experiences of existence make us look for space, protection, and support, and through these is that the condition for existence is transferred: the Power to Be and Being in the world. This necessity refers to the security that is required due to possible threats to our diverse spheres of existence (Traverso, 2013, p.13). The Second Existential Motivation mentions interpersonal relationships, closeness, and the time needed to find the joy for living. We'll elaborate on this motivation to better understand the case of the patient. The Third Motivation questions if it is possible to be oneself. The subject confronts another question: Am I free to be

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who I am? Finally, in the Fourth Existential Motivation, it is questioned for the purpose of being here and now, or more emotionally: Why is it good that I exist? It consists of contacting with transcendence and the future of life through existence.

The sessions with the patient revealed the presence of a pathology through their process of grief. Through PP, the patient found a new way to relate with previous mourning processes, and with the loss of their pet, which was the trigger of their unsolved pain.

MATERIAL AND METHOD

The interviews with the patient will be the primary material to address the problem of grief. Certain data, like name and age, have been modified to keep the privacy of the patient.

The psychotherapeutic method utilized will be PEA. During the interview, I'll use the information compiled in PEA0 to explore the feeling, the impulse and the phenomenological content that will be presented. In PEA1, I'll focus the observation in the comprehension of itself, of the situation, and of others, until the not understood is reached. This process will happen through self-distancing.

The stance adopted will happen in PEA2. I'll ask the patient "How was it for you?" and "What will you do now?", going through the cognitive and the subjective.

Lastly, PEA3 will be implemented, self-transcendence. The will of the patient will be mobilized to take a stance to loss and its relationship with life.

DISCUSSION

In the process of therapy, when a patient makes it to the appointment, it is common that they manifest pain, suffering, or lack of sense. As a therapist, it is fundamental to have an open mind to receive them without judgement or prejudice. Existential psychotherapy is a dynamic focus that focuses on the rooted worries of the subject (Yalom, 1984, p.15). This point of view allows to build new bridges with the patient.

In this instance, the patient is a woman of 51 years of age, she was referred by her psychiatrist due to being trapped in a cycle of pain that she couldn't escape. She takes psychiatric medicine to treat her depression, since many years ago. At 30 years old, she was diagnosed with Generalized Anxiety Disorder (GAD) and began taking Prozac and Xanax. Nowadays, she also takes neurological medicine to being able to walk and has a controlled cardiac problem.

Her health and medication present obstacles for the patient to contact with clarity the power of opposition of her spirit. According to Bretones (2004), spirituality is a human phenomenon par excellence, and it is the spiritual realm that makes it possible for the person to move forward even in the direst of situations. The patient tends to that force of opposition and turns it around, that Längle calls the Existential Turn, where she moves 180° and modifies her thoughts on life. The person decides the answer to the question of life and exercises their liberty and responsibility.

When the patient is submerged in pain, it is hard to get away from it. With medication, the hardship is greater, but even so we can appeal to the power of opposition of the spirit, as Victor Frankl (2005, p.134) says, and make a turn in life.

The first motivation talks about support, space, and protection; it talks about the three capacities, limitations, concrete, real, or searching; it is a power to be, an "I can." The might in movement. "Where there's no power, there's no liberty" (Längle, 1997/05).

When Emma makes it to the appointment with overwhelming emotion, she is not capable of being free to be present. The emotion and the pain impede her from looking at herself and be accompanied by herself in her suffering. This makes her feel depressed, without strength to keep on living. She perceives herself as incapable of being able to keep moving forward, and in the first few sessions, she shared her difficulties getting out of bed, eating, and overwhelming nightmares.

PEAO:

Tp: Can you talk about "Guillo"? -the cat's name was "Guillermo"-

Pt: He had a year and a half, I adopted him, he was the love of my life. He kissed me in the morning, bit my cheek, he was very affectionate. He looked for me in bed. I gave him his name because of a TV show, a false documentary about vampires -She again began crying-

Tp: -I stood silent, waiting for her to recover. Her breathing was inconsistent, so I suggested she take a moment, breathing slowly but deeply. She continues-

Pt: Why did he leave? Why like this?

Tp: Do you want to talk about it?

Pt: I feel as if I were in a dark hole, cold, horrible, I'm mad and sad at the same time... I can't stop crying.

The patient feels lack of support and protection, without the possibility of being herself right now. Ambivalent emotions are present.

Pt: I yelled for Guillo, "hijito," "papi," and he didn't answer. I looked for him in the hall, in the staircase; until I got to the parking lot and saw him in a pool of his own blood. A neighbour's car ran him over. I insulted him, I yelled..., I yelled loudly, the people looked at me from their balconies. I didn't care, my kid was destroyed, bathed in blood...

The patient cries again due to her traumatizing experience. It was necessary to interrupt her and distract her from her pain.

Tp: How did that impact you?

Pt: It's painful, I feel it in my chest, the pressure, it's cold, it's very cold, it goes from my throat to my stomach.

The person seems affected by the situation, a fact (Gottfried, 2018, p.90) in this case the loss of something valuable and meaningful, not only the pet, but everything that he meant to her.

What happens when the patient can't and won't accept it? Coping mechanisms appear, forms of protection that can't be rationalised, they just appear. Emma uses a dead position, lying in bed and unable to continue her life. She stopped eating, working. This happens during the first weeks.

These mechanisms don't come from her freedom, they're more like impulses that make her do things without her absolute consent.

It's important to note that the patient returns to the event that killed her cat in the first couple sessions; by the third session she's calmer and shares the funeral and cremation of the cat.

Tp: Do you want to talk about his funeral and cremation? -She looks calmer and, even if she cries a little, is capable to continue talking.

The patient speaks in detail of her deep love for Guillo, which allows for more closeness to her and a better comprehension of the phenomenon of loss. In her narration, she mentions the injustices of life and the absence of someone important to her. On top of this, she recognizes her inability to show emotion for years, controlling them and without losing her "core." Now she understands the pain of others that have attended therapy, as she is a psychodynamic psychologist.

Thanks to Personal Existential analysis (PEA), I was able to obtain information and describe the problem. I observe how the loss of her pet intertwines with the impossibility of having another child, deepening the grief of the patient. The patient mentions her heart failure and how she had to take the difficult decision to avoid getting a new child due to her health complications. She has a 15-year-old daughter and during the sessions she shares that she wanted a boy.

In one of those sessions, she told me: "you know, I wanted another child, but the doctor told us, to my husband and me, that if I were to get pregnant again, my heart would not resist, leaving our only daughter an orphan. That wasn't an option for us." She keeps her silence for a second and continues: "My husband confessed to me that he wouldn't be in condition to take care of our daughter and confront life without me."

She has accepted this decision in her life.

Tp: How did you feel living through this?

Pt: The decision of forgoing another child was immensely painful, (she stops, and tears come out her eyes), that's why Guillo was always my kid, my baby.

Tp: How did it feel that Guillo, in other words, occupied all the space?

Pt: Without a doubt it was a phenomenal experience. That small feline, playful and loving, became an unconditional partner; a being that accepted me and loved me as I am.

Tp: Who doesn't accept you?

Pt: My mother seems to have the tendency to criticize me constantly. On the other hand, my daughter not only uses up my attention, but my money too. And when it comes to my husband, he doesn't seem to be able to keep the house on his own and relies considerably on my decisions and actions.

As Frankl (2005, p. 117) said: "We can only comprehend the responsibilities in the life of a man if we understand as a responsibility with views of the temporal nature of life, that you live only once." The patient feels a profound responsibility with her family, even though at some point she feels the weight of loss.

Tp: What do you need to keep moving forward?

Pt: I'm not entirely sure, but maybe I hold out hope that, somehow, Guillo comes back. I believe in reincarnation and maybe he'll come back for me in another form. (Tears run through her face again)

Tp: And how would you verify it?

Pt: Through signals and subtle details like the look or facial expression of my kitty, I could tell its mood. However, I couldn't tell by its colour. A friend suggested that maybe through natural indicators, like a bird singing, Guillo could communicate, making sure that he's ok and is still by my side.

Tp: And if that doesn't happen? What would happen with you?

Pt: It would mean that the purpose for what he came to this realm was served. That would cause me pain.

Tp: What would be that purpose?

Pt: Something I've learned talking with you, is that now I comprehend how much he meant to me, that good friend, that son, that turned into the emotional support for my daughter during her depression. He wasn't only there for her, but he managed to awake in my husband unexpected care for cats. Even with my mother, he turned into a regular subject of our conversations.

Tp: Do you feel it's comprehensible what you're telling me about the relationship between Guillo and your life?

Pt: I hadn't considered yet... yes, that was his labour... my tears fall peacefully.

Tp: What do these tears mean to you?

Pt: I reflect upon the love that Guillo brought to me and my family. He behaved like a son to me; a benevolent being, generous, and a little mischievous.

I observe as the patient relives her relationship with her pet, giving it the role of a son. As she goes deeper into her emotions, I perceive the anguish that envelops her, revealing endless possibilities around her lived experience.

Tp: What would happen if he didn't reincarnate?

Pt: -She observes me with an ample and open look- I'm have no certainty, but today I've been reflecting on how he contributed to us as a family... Maybe he achieved his purpose and doesn't need to reincarnate anymore.

Tp: What you say makes sense to you?

Pt: Right, it's a heartrending experience, but it seems to be the reality... I've gone through deeply painful loss in the past: my father, my stepfather, my son... even my health has dwindled.

Tp: What would happen if we talked about your losses? Do you want to do it?

Pt: My biological father didn't take care of me; my uncle married my mom and gave me his surname. He was an aggressive man, always pointing at my flaws, he was a homosexual and used my mom as a "cover-up" to the family. I got to the point of hating him.

Tp: What you are telling me is rough; you were barely a kid...

Pt: Yeah, but he's already gone... and resting.

Tp: Do you need to do something about this?

Pt: I only need to be heard.

Tp: Here I am...

At the time of taking conscience. "The person receives information, knowledge, they notice the real situations that happen in their environment. This is possible because the person distances from themselves. Self-distancing is what allows to see the reality that surrounds them." (Gottfried, 2018, p.90)

In these sessions she talks about her losses and what she learnt from each situation. In one of them, the patient recognized that thanks to how her uncle/dad behaved, she studied two careers, when he said she wouldn't be able to keep moving forward.

Pt: Now I think that thanks to how Raúl (her stepfather) treated me, I could study and show that I was capable. Even if he didn't manage to see it, I've formed a family, I have a job and an apartment... I'm capable.

Tp: You recognize that you're a strong woman, that despite the obstacles, you've managed to keep moving forward.

Pt: Yes, I recognize it. The "heartbreak" I felt for the loss of Raúl lasted very little. Instead, the guilt I felt for wishing for his death tormented me. Now I know that the wish wouldn't make it a reality, things simply happen.

It can be observed a more mature posture regarding a hardship that happened in the past. Sentiments are a positive reality in the life of the human being (Längle, en "Vivir la propia vida", 2013, p.31).

Tp: Could you accept that Guillo may not come back?

Pt: Yes, now I feel stronger. Even if I keep crying now and then, I've let Guillo go, just as I let go the possibility of having more kids. It's painful, but I've gone through hard times, and I know I'm capable.

PEA2 is a process in which the patient takes a stance and distances themselves from their losses. The fact of answering "yes" to life, waking up every day, eating a little more each week, giving priority to their own being and knowing that it's useful for others, allowing them to find their path in existence.

The sessions have been significant. The patient has shown great dedication, despite the adversities given by her medicine in given moments. Nowadays, she can recognize her own courage and strength.

When the past turns into a liability, the future seems uncertain, and the present can't be seen. The Existential Analysis offers the possibility to give new meanings to life.

My recent experience with the handling of grief for the loss of a pet, has secured my sensibilities regarding the pain that such an event may cause on patients. Currently, two new cases have arrived that show the same loss; both cats of different ages and conditions, and in

both cases, the people lacked close family links. The methods to manage loss will be different in every case and every individual will have to look for their own answer.

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