DEATH ANXIETY AMONG ADOLESCENTS: IMPLICATION FOR HEALTH EDUCATION COUNSELLORS IN NIGERIA

BY

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ABSTRACT

The paper was on death anxiety among adolescents. The choice of this group of people was informed by, the onset of puberty, adolescents are introduced into a world of change. As age period where peer groups play a central role in the psychological development of most of them as relationships with parents weaken. Literature revealed that female adolescents tend to show high anxiety than their male counterparts as a result of death of a loved one. To reduce the painful effects of death loss, adolescents might try many different actions. For example, taking of drugs or alcohol to be free from the situation. This may lead to addiction, resulting to pre-marital sex, homosexuality and diseases. The counselor should inevitably involve working through some phobic aspects in individual's death anxiety reactions-because this involves loss of social supports of important interpersonal relationship of the individual.

Introduction

Death is a necessary end to all livings. To man, there seems to be a consensus between him and death since he knows that he can not in any way fight against it. Man has therefore, decided to accept death in order to be happy, and pretend not to recognize its presence most of the times.

The word 'death' has been defined in different ways in hematology. According to Kastenbaum (1986), death is described as the non reversible cessation of the life process when lifelessness is pronounced. On the other hand, anxiety has been described by Wass and Corr (1984) as a state in which danger or threat that may be vague or unknown is expected. Death anxiety shall be referred to in this work as a state of tensed, distressed and apprehension of mind as a result of an impending loss of life especially that of a loved one.

Adolescent has been defined by Wass and Corr (1984) as the period of an individual's life from 12 years to 21 years of human existence on earth. In this context, it shall be used as the period of a young human being between the ages of 12 years and below the age of 22 years of one's life.

In relation to death knowledge at this state (adolescence) of life, Despelder and Strickland (1987) asserted that the adolescent sees death as universal and unavoidable, and that it involves the cessation of physiological functioning. Furthermore, Stillion (1985) stressed that common wisdom states that older people fear death less than the adolescents; reason being that the elderly have experienced a life history, that they have had time to achieve that which they were capable of doing, and thus, death becomes less fearful to them.

Kastenbaum (1991) explained that death anxiety is a condition that seeks its own relief. That is to say, to reduce the painful tension of death loss, a person might try many different actions. For example, taking of drugs or alcohol to be free from the situation. He maintained that death anxiety tends to rise in adolescence and early adulthood, then diminish some what as one's life becomes more settled and predictable and which

may rise again in later middle age due to the death of a friend. To further explain the nature of death anxiety on the adolescent, Macrae, Bartone and Costa (1976) pointed out that the adolescent who exhibit high death anxiety will always show symptoms of illness. But that in old age, the more anxious men reported more illness, and the anxious young individuals were more likely to over estimate the severity of their problems. This goes on to indicate that the adolescent needs counseling to guide him at this period to help maintain normal mental and emotional health, which is the main focus of this paper.

Death is universal, irreversible, and a must to every human, so also is death anxiety in most cultures. For example, Despelder and Strickland (1987) reported that among Indians, death is not something to be ignored, but neither should it become an obsession, something to be feared, on one's situation, here and now. At such times, it is good to make room for death. In a study conducted by Koocher, John, Foster, and Gogan (1976) in American, they discovered that adolescent school student's experienced much more anxiety, depression, and death fear than either junior high students or adults. In Nigeria, Udoh (2000) maintained that death has remained the untouchable, tabooed subject for open discussion because of the fear (anxiety) of the unknown it conjures in the minds of humans. These imply that death anxiety exists in different societies. There may be little differences fro one culture to the other due to demographic factors but the bulk of the type of death anxiety found in other countries seems to have the same effects in Nigerians. This paper was set out to examine death anxiety among adolescents under the following sub-headings:

- (i) Characteristics and behaviour of adolescents toward, death
- (ii) Factors influencing adolescent death anxiety

- (iii) Occupation, personality, and mental Health, and
- (iv) Implications for health educators.

Characteristics and Behaviour of Adolescents Towards Death

Death education for adolescents should take into account their characteristics. This is because with the unset of puberty as observed by different psychologists, this class of people are introduced into a world of change. Changes within their bodies mind and in their relationship to peers, parents and society, which require a great deal of adaptation on the part of the young individuals. In the light of the above, differences may be there as no two people are exactly alike. Furthermore, Ehrhandt and Bahlburg (1975) stressed that differences between early and late concurred that early menstruation may complicate girls feelings about their development but that girls need help to complete the physiological teak of adolescence, to see menstruation as an episode in the life process of their psychological and sexual development.

In another development, Elkind (1967) explained that the major task of early adolescence is the conquest of thoughts. This may be because intelligence may be used as a physiological defense by some adolescents to deal with troubling anxieties that may be too painful to deal with directly. Thus, Mussen (1979) posited that intellectualization involves casting into an abstract, in personal, philosophical form, issues that are actually of immediate personal concern. Due to this he emphasized, apparent impersonal, highly intellectual discussion of the role of aggression in human affairs, of responsibility versus freedom, of nature of friendship. The existence of God may, infact, more nearly reflect deep seated personal concern. Liking this with adolescent development, it means that the adolescent's development is of a more mature in understanding of time,

may leads to the poignant awareness that everyone is caught up in the ongoing process of growth, ageing and death.

Discussing on the adolescent characteristics from another angle, Wass and Curr (1984) observed and stressed that peers play a control role in the psychological development as most adolescents relationship with parents weaken. This according to them may be due to the fact that prolonged dependence on parents is some times a source of conflict as they strive for independence. That is the more reason why the adolescent can easily develop anxiety due to the death of a friend. They further emphasized that although the peer influence may seem to be often seen as opposed to parental values, which is the exception rather than the rule adolescent friends often come from families with similar backgrounds and standards of behaviour.

Adolescence is characterized by rapid growth and unprecedented physiological and psychological changes within a complex world most of them are reasonably mature, happy and responsible members of the society. On the other hand, according to Wass and Curr (1984), some of the adolescents tasks, and that their failures result in problems associated with dropping out of school, premarital pregnancies, venereal Diseases, delinquency, suicide, acuter. Due to these, Feitel (1971) suggested that if these are as a result of death, delinquency at times may reflect masked mourning and that some violence may well serve as an active response to unmasked anxieties about death.

The studies conducted by Perkesand Schildt (1979) to determine sex related attitudes towards death related activities, discovered that males and females differed significantly on several components. Females, more than males, were in favour of abortion, valued funerals, and were more

concerned as to what might happen to their bodies subsequent to death. According to them, some differences were found in attitudes about capital punishment and near-death phenomenon. No significant difference was found on the death anxiety components.

In another work, Kennedy (1977) sought to determine whether students experienced positive changes on effective measures of death such as fear of death and death anxiety from death education instruction. Prior to and following a typical course of instruction valid attitude scales were used to ascertain differences. The instructional modules did not meet the goal of having student understand and, therefore, fear death less. Students exposed to the learning module actually increased their fear of dying. Control groups did not re reflect any change. The study indicate that a death education module will not always be worth while for students if specific attitudinal changes are sought. Therefore, the class module could not produce any serious change in the students behaviours.

Factors Influencing adolescent Death Anxiety

a. Religion

Religion has been defined by Lenning and Dickinson (1987) as a system of beliefs and practices related to the sacred-that which is considered to be of ultimate significance.

The actual practice of religion according to them, continues because it makes basic social needs of individuals with a given society and that its major functions include: helping individuals, providing means of establishing social order challenged by death. When one encounters death, the anxiety experienced is basically socially ascribed, provides individuals with a solace when they attempt to cope with death attitudes, provides temporal interpretation of death which is a means for protecting the social

order by emphasizing the empirical, natural, and "this worldly". View of death.

Becker (1973) pointed out that religion has traditionally been the institution responsible for making sense of such magical situations, for addressing the problem of how to bear the end of life. Furthermore, Toybee (1976) maintained that all religions demand behaviour that is not self-serving whose purpose is something higher than oneself-in other words, religion command morality. Individual's need for meaning can be strong or even stronger than the need for happiness, and in return there is often the demand for some form of religious Masochism. He posited that when the belief is personal immortality is associated with a belief in a judgment after death-a judgment that will consign the dead to either eternal bliss or eternal torment-the price of a human being's belief in the survival of his personality after his death is anxiety during his life time.

In a study conducted by Wass and Scoth (1978) it was discovered that adolescents spontaneously reported fear and concern along with their explanation of the irreversibility of death. In the same study it was found that adolescents' feelings about death are significantly related to concepts and beliefs they hold about life after death. Adolescent children who did not report any position or belief had more death anxiety than those who did. Among the children who expressed beliefs, those who believed in heaven or hell had more death anxiety than those who believed in some other kind of immorality, such as reincarnation, transmigration of souls, conversion to other forms of life or energy.

However, Lenning and Dickinson (1987) emphasized that from 1600 to 1830 the puritans believes that due to original sin and their own sign fullness, they (Puritans) deserved to die and be dammed. Therefore,

they increasingly used strong human emotion to arouse people from their psychological and spiritual security. Furthermore, they stressed that the puritans know that they would die, but not when they will die, or if they were among the elects and due to this, they admonished themselves and each to be constantly prepared for death.

Gender and Age

Experience and observation seem to confirm that women in Nigeria express more death anxiety than men. For example, when there is loss as a result of death, many women used to cry aloud, sometimes jumping and falling on the ground, refusing to cook, eat or drink. This observation seems to agree with Kastenbaum (1991) who stressed that women in America tend to express higher levels of death anxiety. This conclusion is in agreement with the observation that American women tend to be more open in expressing a variety of feelings, not only those associated with death, and that women almost always out number men in seminars and workshops that deal with dying, death and grief

Lonetto and Templer (1986), observed that there was little or no difference in death anxiety level between individuals of middle age group (40-54 years) range, but stressed that thoughts and feelings do change as people move through life. However, Kastenbaum (1991) in his work, opined that, death anxiety tends to rise in adolescence and early adulthood, then diminish somewhat as one's life becomes settled and predictable. Talking about gender and death anxiety, Stillion (1985) discovered that there was no correlation between age and death anxiety in every group but explained that death anxiety decreased as age increased.

Occupation Personality and Mental Health

Studies on death anxiety have attempted to establish correlations between the usual range of demographic characteristics and marital health variables. Reviewed work by Kastenbaum (1991) concluded that no clear association had emerged between occupation and death anxiety of the adolescent. Furthermore, it was found that higher levels of death anxiety were reported by adolescents who tack a sense of personal effectiveness mastery, and power. The findings further stressed that the relationship between religiosity and death rushes to the surface when a person's "ego defenses" are weakened and can no longer inhibit the impulses, fears, and fantasies that are ordinarily suppressed.

In addition to the above, Bowly (1960) posited that death anxiety is evoked by separation and the activation of instinctual response system that underline attachment behaviours. It then goes to suggest that when these responses are activated and remained so by prolonged separation, an anxiety response results which lead to protest, despair, and detachment.

Observation by Kastenbaum (1991) that death anxiety lead adolescents into taking of drugs or alcohol to be free from the situation is worthy of noting. When an individual consumes alcohol, there is the tendency that the brain may be impaired leading to distorted reasoning and bad behaviour. Due to the brain impairment, the individual is likely to have accidents even in the home. The taking of alcohol sometimes leads people into social vices like the acceptance of premarital sex, homosexuality and the use of marijuana.

Adolescent females who drink due to anxiety may be encouraged to having sex in discriminated, which, if not controlled can push them to prostitution. The reason being that there is the desire for this set of people to become alcoholics. As long as there is no enough money for the purchase of the drug, they may resolve to become commercial sex workers. As the problem of alcohol and other drug use persist, it may push them to a stage of addiction, and when they attain this stage, and no sufficient money is available for the purchase of the substance they may end up being criminals, for example, keeping of bad company, stealing and arm-rubbery.

Educationally, adolescents may drop out of schools, which is a clear indication that his future is league and a sign of no hope for tomorrow. In old age, it is possible for this type of individuals to support making divorces, more likely not to be satisfied with family and work and to report being unhappy as well as belonging to cult societies.

When adolescents lack personal effectiveness, mastery power as well as these social vices mentioned above, the situation calls for counselling.

Summary and Conclusion

From the above discussion the following conclusions were drawn:

That the adolescent stage of life is a critical stage especially in developmental task when failure result, problems associated with dropping out of school, premarital pregnancies venereal diseases, delinquency, suicide etcetera may be noticed. That historical modules in schools did not meet the goal of having adolescent understand death related matters as a result of which they feared death loss.

The more religious a male adolescent was, the more likely he was to regard death as a peaceful bliss. That females, regardless of religiosity, tended to see death as sadness and tend to have more anxiety towards it. That generally, people experiencing mental and emotional problems as a

result of death try to express higher levels of death anxiety and that anxiety rushes to the surface when a person's "ego defenses" are weakened. By this conclusion, it is convincing that adolescent death anxiety is often high especially in females.

Implications for Health Counselors

In the light of the above, health counselors (which could be, the health educator, medical personnel, religious leader and other professional counselors) must understand the concept of death and the individual experiencing death anxiety as a result of loss. Counselors need to understand the psycho-analytical aspect of the problem to function in individual counseling sessions. Adolescents who have experienced loss of a parent or loved one who develop fears or guilt about some particular aspects of death, be given counseling alone and not in groups.

External support must be mobilized as a way of dealing with loss and death anxiety issues among adolescent females. Adolescent males need special help at the early state of death anxiety to prevent their tendency of escaping by using drugs.

Lastly, the counselor should inevitably involve working through some phobic aspects in individuals death anxiety reactions- because this involves loss of social supports of important interpersonal relationship. It is possible that complication may result because of the will to avoid pain. In itself, this is an understandable and healthy reaction because it encourages the expression of feelings with those people, thereby educating them about death anxiety and about the price of high death anxiety.

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