

INFLUENCE OF COHORT AND GENDER ON DEATH ANXIETY AMONG ADULTS IN EKITI STATE, NIGERIA

by

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Abstract

The study explored the influence of cohort and gender on death anxiety among three age groups of adults; namely early adults (18–34 years), middle adults (35-60years) and late adults (60 years and above). A total of 468 adults (male = 230, female = 238) were drawn from among Nigerian adults residents in Ekiti State using a multi-stage random sampling technique. The Death Anxiety Scale (DAS) developed by Templer (1970) was used to measure death anxiety and a single item in the questionnaire measured age and gender of the participants. Four hypotheses were tested and the data were analyzed using One-Way ANOVA and Independent t -test. The results revealed that there is no significant influence of age cohort on death anxiety. The results also revealed that the female middle adult age group only significantly scored higher than their male counterpart on death anxiety. It was concluded that gender predicts death anxiety among middle age cohort while age is not a good predictor of death anxiety among adults. The results were discussed with the framework of the relevant theories in the field of psychology while it was recommended that the current modern societies should create a variety of mechanisms for removing and reducing the actual experience of fear of death from everyday life.

Keywords: Age cohort, sex, death anxiety, adults, Ekiti State.

INTRODUCTION

Death is one of the features that characterize human life. It is a common saying that death is certain in life. In spite of the certainty of this reality, people seem unable to escape anxiety at the prospect of death (Tomer & Eliason, 2000). As people live their lives day by day, they suffer different degrees of anxiety about death (Belsky, 2008). Humans are aware of the inevitability of their own death (Solomon, 2004). Death presents one of the most formidable challenges to the idea that human life has meaning and purpose. Giving these facts, it should be no surprise that fear has been one of the most commonly expressed responses of humans to death. Humans are psychological and social beings and it is people's interactions with other humans that complete individual's existence and gives their lives meaning. Death is thus separation from people and other things that gives individual's life form and reason for existence; Death is the loss of everything that an individual holds dear. It is thus no wonder that man is anxious about death which brings separation from all that an individual do not want to loose or part with.

Kalish (1985) defines death anxiety as the thoughts, fears and emotions about that final event of living that human beings experience under more normal conditions of life. Dickson and Leming (1996) explained death anxiety as a learned emotional response to death – related

phenomenon characterized by extreme apprehension. They explained that people view and interprets death differently based on their experiences with their environments. While some give it a positive meaning, looking upon it with pleasure, some others give it a negative meaning and view it with fear and anxiety. Death anxiety is a negative feeling a person experiences about death and dying. Fear and anxiety about death are universal and most individuals repressed or denied its truth and its negative feelings.

Anxiety about death is related in complex ways to factors such as age (Fortner & Neiyemer, 2000), religious belief (Suhail & Akram, 2002) and the degree to which the individual has lived a full and satisfying life (Rando, 1991). Also, gender has been linked to death anxiety in several ways (Zisook & Downs, 2000).

In all societies, lifetime is divided into socially relevant units and biological time is translated into social time (Togonu-Bickersteth, 1987). There is no evidence that a special orientation towards death develops in early adulthood (Arogundade & Adebayo, 2011). An increase in consciousness about death accompanies individuals' awareness that they are aging, which usually intensifies in middle adulthood. Researchers have found that middle-aged adults actually fear death more than do young adult or older adults (Kalish & Reynolds, 1976). Older adults though

think about death more and talk about it more in conversation with others than do middle aged and young adults. They also have more direct experience with death as their friends and relatives become ill and die. Older adults are therefore forced to examine the meanings of life and death more frequently than are younger adults (Cuddy-Casey & Orvaschel, 1996). Neugarten (1988) in his studies identified some of the ways whereby age has been conceptualized and concluded that chronological age has become a less accurate prediction of most life events including death anxiety in our society. He stated further that an individual age profile involves more than just chronological age; it also consists of biological age, psychological age and social age. Diena, Suh, Lucas, and Smith (1999) also concluded in their study that death does not seem to be related to chronological age but that death anxiety may be a function of past experience rather than current life circumstances.

Gender refers to the social and psychological dimensions of being female and male. Both gender and age are often related to death anxiety. Females tend to report higher death anxiety than males and they are more responsive and sensitive to the needs of the people with life threatening conditions (Togonu – Bickersteth, 1987), this could be due to the fact that expression of feelings especially those of vulnerability are encouraged in girls but discouraged in

boys (Gur & others, 2009). Also, the nature of the female jobs and their various professions expose them more to the less disadvantaged in the society, for example, nurses in hospitals or teachers of primary school pupils are mostly women in this part of the world, thus women are more exposed to situations where expression of feelings are needed.

The Research Problem

Most researches on adulthood identified age as a poor predictor of the timing of life events, as well as poor predictor of a person's health, work status, family status and of a person's interests and needs (Neugarten, 1994). How relevant is the concept of age in the prediction of death anxiety in adults is one of the major problems of this research work. Gender affects adult's lives profoundly in determining choices or whether one will have certain choices at all in relationships and sequences of experiences, thus, another important problem of this work is to identify the difference if any in the death anxiety level of both male and female age cohorts of adult.

Research objectives

Arising from the problem of the study, the following are the objectives of the research:

- I. Find out if there is any significant age difference in the level of death anxiety among the three age groups of early, middle and late adults in this part of the country.

- ii. Compare male and female in the three age groups of early, middle and late adult age groups in their levels of death anxiety.

Hypotheses

- i. Middle adults will significantly score higher on death anxiety than their early and late adult age groups.
- ii. Early adult female will significantly score higher on death anxiety scale than their male counterparts.
- iii. Middle adults female will significantly score higher on death anxiety scale than their male counterparts.
- iv. Late adult female will significantly score higher on death anxiety scale than their male counterparts.

METHOD

Design

This research work employs a cross-sectional survey design with the use of questionnaires. The approach to the design is comparative; this is because adults of three different age groups were compared at one time. The three cohorts of adults, viz: early (18 – 34 years), middle (35 – 60 years) and late (60 years and above) were compared on death anxiety.

Study Area

The study area was Ekiti State. This state is one of the many Yoruba states in what is today Nigeria. In the words of Babatola (2008), “Ekiti state is historically homogenous, culturally identical, geographically contiguous and religiously similar”. The present study employed a sample of participants from Nine Local Governments in Ekiti State: three Local Governments each from the three senatorial districts in Ekiti State. Ado-Ekiti (Ekiti Central Senatorial District), Ikole-Ekiti (Ekiti North senatorial district) and Ikere-Ekiti (Ekiti South senatorial district) are the headquarters of the three senatorial districts in Ekiti State which were purposively sampled for inclusion in the study. Additional two other Local Government headquarters from each of the three senatorial districts were randomly selected for the study and they are Aramoko-Ekiti, Efon-Alaaye, Ido-Ekiti, Iye-Ekiti, Ise/Orun and Omuo-Ekiti. All the nine Local Government headquarters were majorly dominated by Yoruba people though, other Nigerian ethnic groups were present sparingly in each of the towns.

Participants

The research participants in this study comprised a total of 468 adults spreading across three categories of adulthood viz: early, middle and late. These participants were sampled from among both literates and illiterates individuals in the entire state.

160 (61 males and 99 females) were early adults, 223 (103 males and 120 females) were mid-adults while 85 (66 males and 19 females) were late adults.

Sampling Technique

The study employed a multi-stage sampling technique. The purposive sampling technique was employed to select the three senatorial district headquarters while the systematic random sampling technique was employed to select the remaining six Local Government Areas (LGAs), two from each of the three senatorial districts.

The stratified random sampling technique was employed to select the proportion of the representative sample from the total population.

The quota sampling technique was used to select respondents from each of the group categories to ensure that each of the group reflect all the three age categories of adults (early, middle and late adults).

Instrument

The research instrument consisted of two parts, the first part required demographic information relating to age and gender of the individual respondent while the second part consisted of

Death Anxiety Scale (DAS) developed by Templer (1970) to measure concerns, fear, apprehensions and foreboding people often experience about dying. It is a 15 item inventory. Items 1, 5, and 15 marked for true "T" while 2,3,4,6,7,8,9,10,11,12,13, and 14 for false "F". A score of 1 point is given to each expected response and add together the number of "T" and "F" correctly marked in the item were added together to obtain the total score for DAS.

Templer (1970) provided the original psychometric properties for American sample while the properties for Nigerian sample were provided by Adebakin (1990), Erinoso (1996) and Uzosike (1998). The reliability coefficient reported by Templer, (1970) are KR- 20 internal congruency= 0.76, three (3) week test - retest = 0.83, Adebakin (1990); 3 week test-rest= 0.45. The concurrent validity coefficients were obtained by correlating DAS with Fear of Personal Death Scale (FPDS) developed by Florian and Kravetz (1990) and obtained 0.45.

The mean is the basis for interpreting scores of participants. Scores higher than the mean indicate that the participant manifests high or abnormal death anxiety while scores lower than the mean indicate that the participant manifests normal death anxiety level.

RESULTS

One -way ANOVA was employed to determine the influence of the three age groups – early adults, middle adults and late adults on death anxiety while the

Independent t-test was used to compare the male group and female group on death anxiety.

Table 1: Summary Table Showing the Mean Scores and Standard Deviation of the three Age Cohorts on Death Anxiety

Category	N	Mean	Std. Deviation
Early adults	160	5.73	1.846
Middle adults	223	5.85	2.177
Late adults	85	5.80	2.627
Total	468	5.80	2.158

Table 2: One -way ANOVA Summary Table Showing the Influence of Age Cohorts on Death Anxiety

Source	Sum of Squares	df	Mean Squares	F
Between groups	1.503	2	0.752	
Within groups	2173.617	465	4.674	0.161 [#]
Total	2175.120	467		

= Not significant

The results presented in table 2 shows that there is no significant difference among the three age cohorts on death anxiety ($F(2, 467) = 0.161; P > 0.05$). Hypothesis one which states that middle adults age group will significantly score higher on death anxiety than early adult and late adults was therefore rejected.

Table 3: t- test Summary Table Showing Gender Difference in Death Anxiety among Early Adults

Group	N	Mean	SD	df	t
Male	61	5.64	2.050		
Female	99	5.78	1.718	158	0.460 [#]

Not significant

The results presented in table 3 shows that there is no significant difference between male and female early adult group on death anxiety ($t(158) = 0.460$, $P > 0.05$).

Hypothesis two which states that early adult female will significantly score higher on death anxiety than their male counterparts was therefore rejected.

Table 4: t- test Summary Table of Results Showing Gender Difference In Death Anxiety among Middle Adults.

Group	N	Mean	SD	df	t
Male	103	5.47	2.213		
Female	120	6.18	2.098	221	2.481*

* **Significant**

The results presented in table 4 show that there is a significant difference between male and female middle adult group on death anxiety ($t(221) = 2.481$; $P < 0.05$).

Hypothesis three, which states that middle adult female will significantly score higher on death anxiety than their male counterparts was therefore supported.

Table 5: t- test Summary Table Showing Gender Difference in Death Anxiety among Late Adults

Group	N	Mean	SD	Df	t
Male	66	5.53	2.591		
Female	19	6.74	2.600	83	1.787 [#]

[#] = **Not significant**

The results presented in table 5 show that there is no significant difference between male and female late adult group on death anxiety ($t(83) = 1.787$, $P > 0.05$). Hypothesis four which states that late adult female will significantly score higher on death anxiety than their male counterparts was therefore rejected.

DISCUSSION

The age cohorts of respondents did not have any significant influence on their death anxiety scores. This implies that death anxiety is not influenced by age cohorts of adults in Ekiti State. However, the mean score of middle adults is the highest but the difference is not significant. Early hypothesis focused on age as a probable

factor in death anxiety. The initial theories held that as people got older and closer to death they would have more anxiety about death but recent researches have remained inconclusive about the role of age in the level of death anxiety exhibited by adults. This has led to different contradictory conclusions about the relationship of age and death anxiety. According to Neugarten (1988), the current society is becoming an age irrelevant society, where age should be conceptualized biologically, socially and psychologically and not chronologically only. Diena et al, (1999) also argued that chronological age is not very relevant to understanding a person's psychological development which is an individual capacities compared to those of other individuals of the same chronological age. In predicting an adult's behavior, it may be more important to know an overall age profile of such an individual which involves more than just chronological age and which has become a less accurate prediction of most life events including death anxiety in our society.

The hypothesis that tested the role of gender on death anxiety was partially confirmed. Female middle adults group alone significantly scored higher than their male counterparts. However, the early and late adults groups did not show significant gender difference in death anxiety. A lot of researchers have found significant difference with women reporting higher levels of death anxiety. This could also be

due to the fact that, expression of feelings, especially those of vulnerability are encouraged in girls but discouraged in boys (Togonu- Bickersteth, 1987).

The implication of the results generated by this present study on the effect of gender on death anxiety is that, this study is an added advantage to earlier researches because it is a developmental research which compared three different age groups of adults on the concept of death anxiety. It has specifically identified the age group and gender of adults which are most prone to death anxiety in adults. That is, it has bridged the gap of different researchers who are either linking or not linking gender to death anxiety by identifying the middle adult female group alone having a significant influence on death anxiety. Thus, the language of generalization of female adults has been substituted to a language of specification of a particular female adult age group alone.

Conclusion

The two main conclusions of this research are that age is a less accurate measure in the prediction of death anxiety among adult age groups in Ekiti State, it may be necessary to involve the role of psychosocial or emotional maturity with age in future studies. Also, Gender is an important predictor of death anxiety. It identified female middle adults group as having the highest level of death anxiety.

Recommendation

It is recommended that societies should create a variety of institutional mechanisms for reducing the actual experience of death from everyday life. In addition to traditional mechanisms such as religion and culture, hospices, drugs, death education, psychotherapy, philosophical belief system and conducive environment equipped with adequate infrastructure serve to reduce the fear of death. This sanitizes and eases the pain of the transition from life to death. It thus becomes even less for societal members to fear such an abstraction as death.

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