

## **Positive Psychology Meets Health Psychology: Resilience Amidst Death Anxiety Among the Elderly**

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### **Abstract**

*The ensuing paper addresses an emerging trend witnessed in the present times concerning the increase in the numerical figure of the elderly population due to continued improvements in treatment. Hence, their quality-of-life has all the more become an important affair. To attend to this concern, the researcher responds with an overview of the psychological framework to better understand the concepts of death anxiety and resilience and their relationship which may serve as a promising area of study in psychology. A lot of research has been conducted in the Western culture on these postulations but the same hasn't been done within the Eastern frame of reference. The notion of death is altogether different from this outlook as majority of the elderly population here tends to believe in aspects like an afterlife and moksha. Accordingly, it is cardinal necessary to recapitulate how ideas like death anxiety are perceived in such cultures. Thanatophobia is the fear of death or fear of the dying process, and it is omnipresent among the elderly. Therefore, the researcher in this qualitative research report aims to explore how this anxiety can be restored to resiliency which may lead to wholistic and successful aging. Though aging is a natural process, fruitful aging is a multifaceted concept, and in consequence various factors in this regard have been contemplated so that strength, adaptability and positive attitudes can be cultivated. The pilot trial of this qualitative paper can be implied in clinical settings for the mental healthcare of the elderly age bracket who experience a high level of death anxiety; health professionals may also work towards promoting hardiness or reducing the trepidation of death respectively.*

**Keywords:** Death anxiety, Resilience, Elderly

### **Introduction**

***In the words of Seneca; “Old age is an incurable disease”, but more recently, Sir James Sterling Ross commented; “You do not heal old age. You protect it; you promote it; you extend it.”***

Greek philosophers wrote about aging. The Bible talks about aging. The Romans and Cicero “idealized old age” (Martin, Kelly, Kahana, Kahana, Willcox, Willcox, & Poon, 2015). At the very outset, these lines takes us to acknowledge the fact that the decline in the mortality rate all around the world due to astounding technological advances has lead to the elder age group becoming the major part of the world's population. According to recent statistical studies, the number of elderly is estimated to be around 605 million in the world (Dawane, Pandit & Rajopadhye, 2014), and it is bound to have accelerated upward in the last six years. The scenario in India too is following the similar lines i.e. the government stated that India will have 34 crore people above 60 years of age by 2050 that would be more than the total population of the US.

The numbers are even higher than projected by other international agencies like UN and HelpAge. The agencies had projected the 60-plus population in India to rise to nearly 32 crore by 2050 (The Economic Times, 2018).

Resilience is an aspect of human nature that can help in elevating one's positive coping mechanisms and responding well to changes or stressors, thus leading to a healthy psychological functioning (Perna et al., 2012). The term resilience has been derived from the Latin origin which signifies to jump or bounce back (Seccombe, 2002). Resilience tends to develop from one's innate characteristics and the situational factors they come across during their lifetime. However, studies have shown that some individuals can display resilience in certain conditions as a genetic trait, which can be consistent in different problematic state of affairs (Cummins & Wooden, 2014).

Further, the study of life-span development exhibits that successful aging and resilience share significant operations. Specifically, the transition to different life stages holds various types of crises, and so to overcome and face these obstacles, resilience has been considered as a paramount process of adaptation (Ambriz, Izal, & Montorio, 2012). As a person grows older, there is a prominent amount of increase in fatigue, sleep problems, depression and anxiety, deficits in memory and overall decline in physical and psychological functioning. And this is where resilience can be differentiated as a capacity to survive and get through adversities, and acquire happiness (Chambers, 2012).

During the period of old age, people also have to deal with the demise of their loved ones for whom they care deeply about. This results in them having a restricted social circle, and hence these changes tend to hugely impact their lives and their emotional states. They begin to feel more lonely, and the thought of facing death themselves occurs more frequently, leading to increased levels of death anxiety (Chambers, 2012). Death Anxiety refers to uneasiness and nervousness produced by the awareness of death. Nowadays, this has been considered as a worldwide psychological issue for human beings (Lehto & Stein, 2009).

Death anxiety can also be considered as a fatalistic and cynical psychological reaction to the concept of mortality (Templer et al., 2006). Most people at some point in their lives experience the fear of death. It is more of a universal fear and anyone can develop this fear even if they don't have a history of anxiety or panic disorders. Many models have been constructed to explain why death anxiety occurs in the first place. One model (Tomer, 2000) elucidates that there are three determinants of death anxiety including regrets related to past, future related disappointment, and meaningfulness of death.

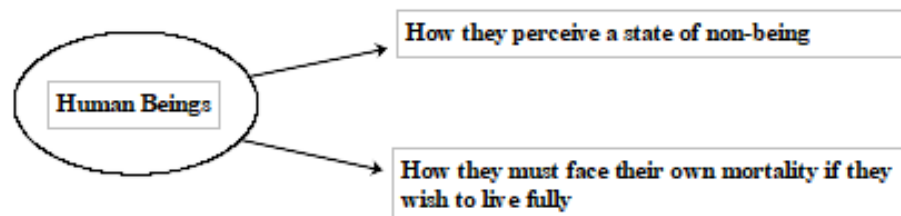
Unlike Western cultures, the notion of spirituality has been more ardently propagated in

Eastern cultures like that of India. Review tells us that Indian elderly people either indulge themselves in spiritual or philosophical thoughts, or use the avoidance approach where they try to escape from any anxieties about death. It has been shown that when an aged individual has additional resources to cope with such tormenting thoughts, it is easier for them to make sense of their existence and reducing emotional distress (Budhiraja, & Midha, 2017).

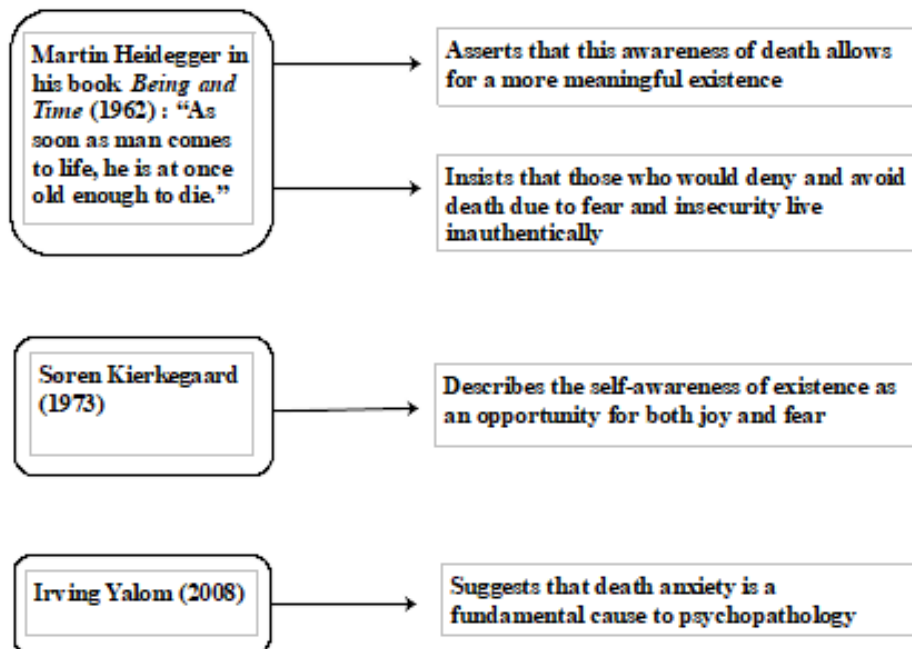
It was in the late 1950s that the subject of death anxiety became interesting for psychologists. A fundamental part of our existence is death, and yet to this date it is hard for us to conceptualize it. *The researcher in the following section attempts to contemplate on the underlying mechanisms/frameworks to conceive what the concept of death anxiety holds.* These frameworks are based on Existential, Freudian, Cognitive-Behavioural and Positive Psychology theories and they are as follows.

- **EXISTENTIAL PERSPECTIVE**

*Fig 1. Depicts how the existential school of thought conceptualizes death anxiety*

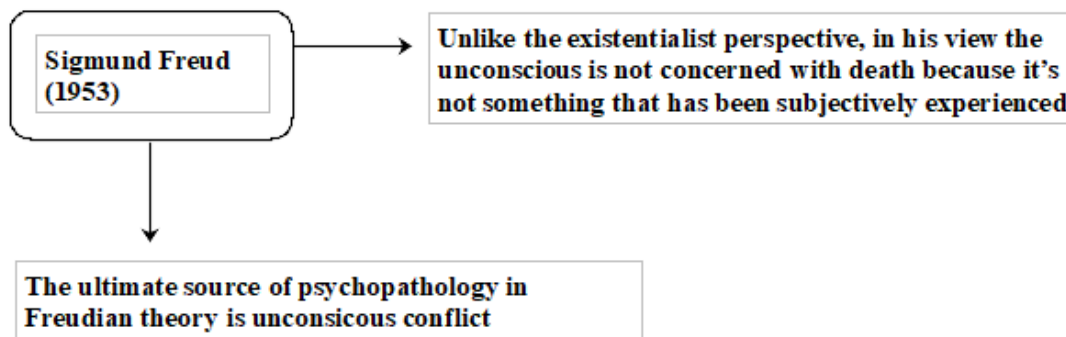


**Foundational philosophers in Existential Thought :**



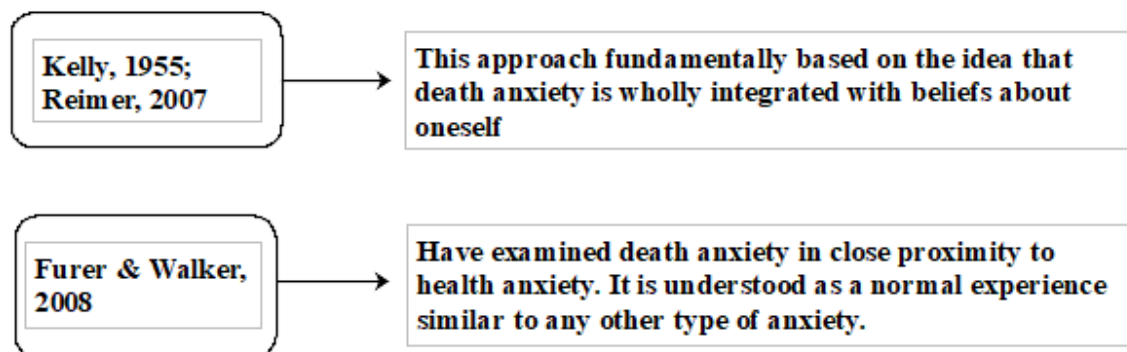
- **FREUDIAN PERSPECTIVE**

*Fig 2. Depicts how the Freudian school of thought conceptualizes death anxiety*



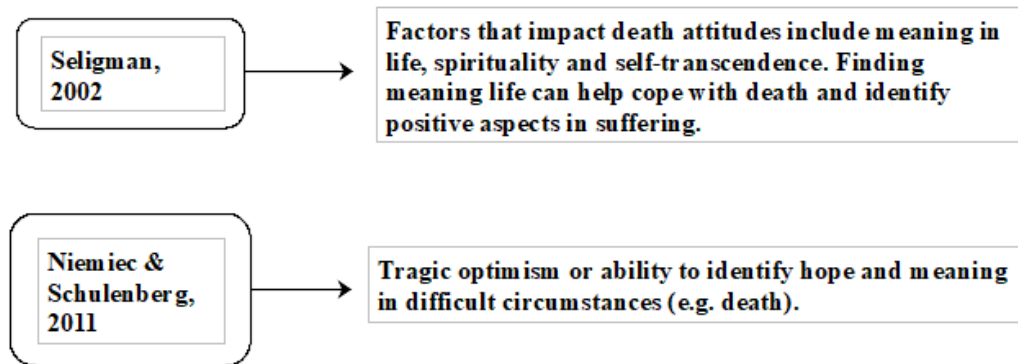
- **COGNITIVE BEHAVIOURAL PERSPECTIVE**

*Fig 3. Depicts how the CBT approach conceptualizes death anxiety*



- **POSITIVE PSYCHOLOGY PERSPECTIVE**

*Fig 4. Depicts how the positive school of psychology conceptualizes death anxiety*



### **Sample**

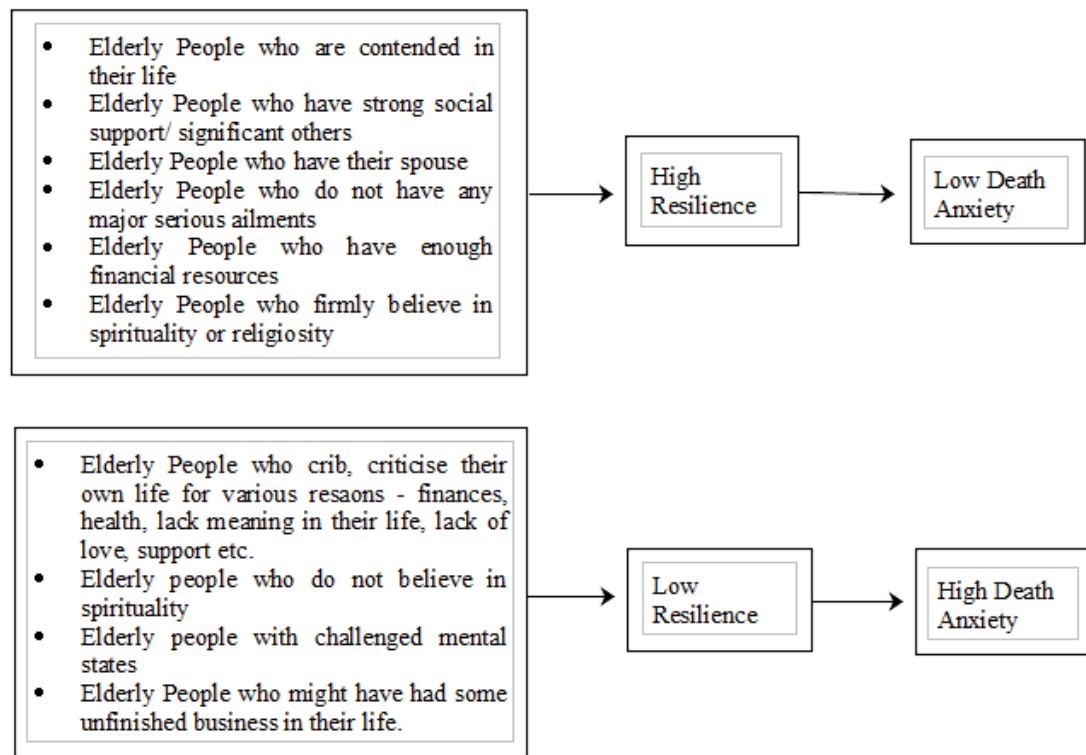
A total of fifty elderly from Chandigarh were targeted for the study and a list of questions on fear and anxiety related to death (informal interview) and what sort of coping strategies are adopted were asked from them as well as their caregivers (family members). Since the sample is an elderly population therefore occurrence of lifestyle diseases common like diabetes, hypertension, knee pain, memory issues is common. To be more precise, the inclusion criterion for the sample of the study was as follows:

- Age would range from 70-85 years
- Elderly from intact families and urban middle class were included
- Elderly not suffering from serious disease (like cancer, tumor, liver cirrhosis) comprised the present study

*Further, the researcher proposes an Indigenous perspective based from the findings of a sample of fifty elderly people for the present study.*

### **THE INDIGENOUS PERSPECTIVE**

The researcher puts forward the following pictorial proposal which suggests that there were significant distinctions between the elderly population that experience high and low resilience while encountering death anxiety.



## Results & Discussion

The results proved that the paradigm suggested by the researcher was accurate. Firstly, elderly people who had *faith in a particular deity or God and/or spirituality* showed less signs of experiencing death anxiety. They exhibited strength and a positive attitude because they firmly believed that God has a plan for them and is looking after them. Several other studies have also been conducted that support this outcome. An investigation on the relationships between the styles of attachment to God and death anxiety resilience in the elderly showed that higher the level of loyalty and devotion to God, higher is the resilience and less is the death anxiety (Bitarafan, Kazemi & Yousefi Afrashte, 2018).

Secondly, people that are in the elderly age bracket tend to reflect back on the life they have lived and introspect whether they managed to *fulfil their purpose*. A research study found that the sense of having lived a productive and accomplished life is a predictor of life satisfaction and is related to lower death anxiety (Lau & Cheng, 2011). Erik Erikson, in his theory of psychosocial development talked about the elderly people facing one of the two crises being *'Integrity vs Despair'*. During this stage a person tends to reflect on their accomplishments, and if they feel they have wasted their life they might end up full of regret and despair (Giselle, 2019); the results in the study showed that those people who introspected and felt that they had achieved what they wanted to achieve, were not afraid to die. They said they experienced

contentment and no agitation or alarm related to death.

Thirdly, in today's day and age where technology has become the epicentre for any kind of communication and sustenance, it is the elderly individuals that face the brunt of its repercussions. At this particular stage in their lives the aged are in dire need of social support and love. And those who don't have a warm surrounding and an affectionate environment have been shown to experience more psychological dysfunctionalities. A research study showed that after adjusting for socio-demographics and somatic health problems, a statistically significant relationship was reported between psychological distress and lack of social support in elders (Boen, Dalgard & Bjertness, 2012). And in tandem with this investigation, our results showed that the aged who were *surrounded by an emotionally invested family and caregivers* showed higher adaptability to changes, and were less afraid of the impending doom of passing away. **A quote from one elderly participant mentioned during the interview is as follows:**

***“My children take such good care of me, and worry so much about my health that I am not afraid to die. It is by God's grace that I have been blessed with such a loving family, and I am deeply grateful.”***

Fourthly, another known fact is that *having a companion during this period in one's life* makes it easier to get through the tough times. Even as early as 1917, Sigmund Freud talked about how losing a loved one could deeply affect a person's mood and their complex thought process to overcome grief. *And as the indigenous perspective proposed, our sample study revealed that those people whose significant others were still alive sounded more confident and secure about their health than those who didn't.* There have been many underpinning researches to support these results. Findings of a research study showed that participants within the age range of 60-87 years experienced a higher level of anxiety of their impending death when multiple deaths had occurred in the family that included those of their significant others. And especially those individuals who had unfortunately lost their offspring had very low resilience and stability to cope with such a loss, and exhibited severe signs of psychological dysfunctionalities (Lekalakala-Mokgele, 2018). However, this study also showed some contradictory findings where the elders in the family who had encountered multiple deaths had developed a resiliency to cope with the fears and anxieties more successfully than those who hadn't faced the same amount of loss. Nevertheless, even though they had learnt to manage their emotions, they showed that they required the same amount of love and support for a wholesome subsistence.

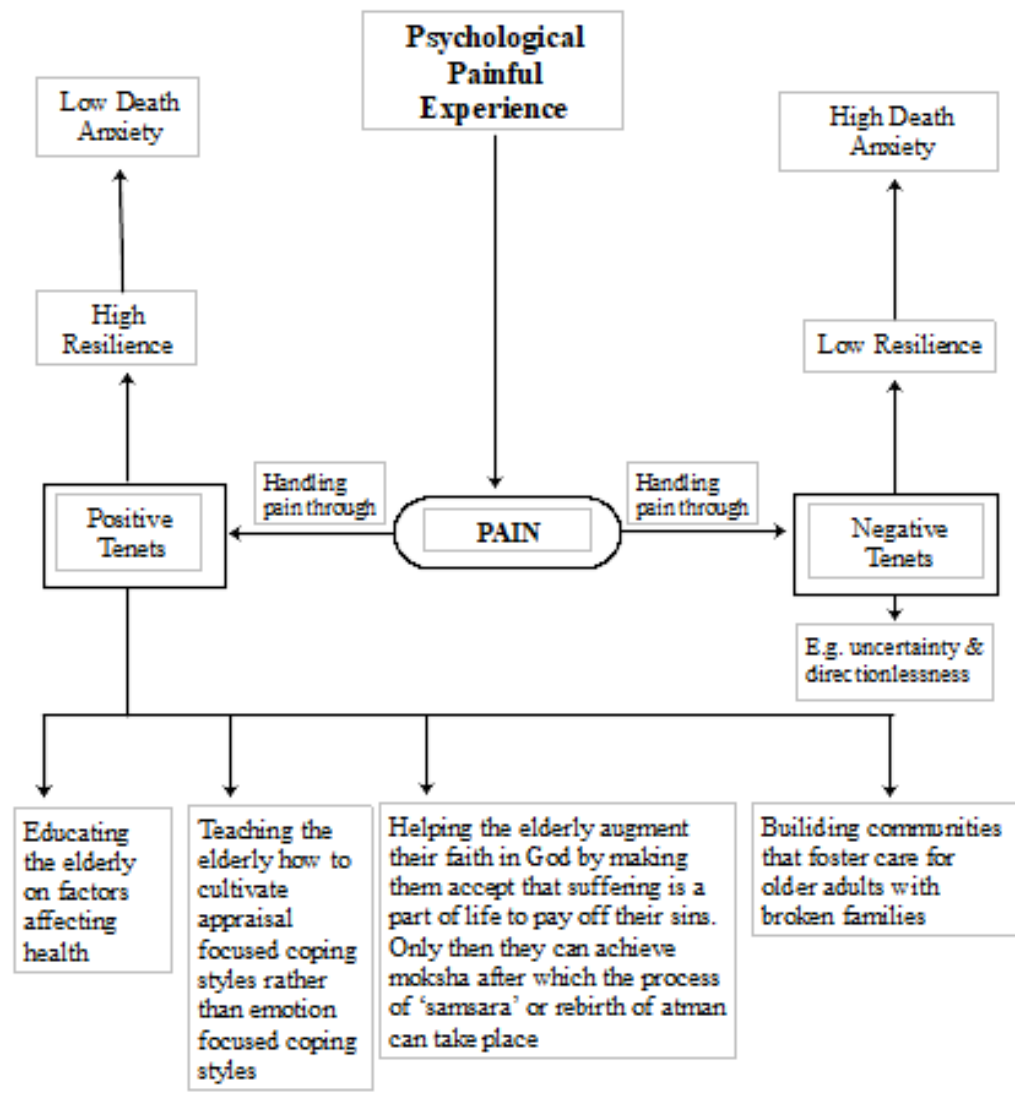
Fifthly, the availability of *financial resources* also plays a huge role during this period in one's life. Our sample study showed that those individuals who were economically secure demonstrated a healthy attitude towards life and conveyed a positive outlook to face whatever

challenges came their way. *This corroborates with the indigenous perspective proposed by the researcher.* Even in developed countries like the United States, which has been statistically presumed to become one of the leaders in terms of size of aging population in the future, is facing major challenges when it comes to supporting the aged population. This lack of financial resources is leading to a growing number of senior citizens having to deal with poverty and financial insecurity (Bauer et al., 2010). Hence, this dearth of social safety can have a scarring effect on the well-being of such individuals.

Also, a country like India, which has been considered as a developing country for decades together in Economic textbooks, the elderly population suffers the most due to lack of funding and efficiency of health care facilities. Most senior citizens in India tend to live with their offsprings and depend on them for their survival and well-being, because of which manipulation of the elderly is a common issue in this country (Government of India, 2011). These older adults may become victims of financial abuse (family members taking their money, possessions, pensions etc.) at the hands of their children (Chokkanathan & Lee, 2005), which may direct them to feel lonely, weak and perturbed thus leading them to have feeble immune systems, and towering mental uneasiness.

The idea of death has been interpreted very differently in India than in western countries. In India, majority of the population believes in concepts like moksha, samsara, and karma. Very few researches have been done to examine the role of spirituality and mental health in death anxiety. An investigation was conducted regarding the same where it was found that spirituality was negatively correlated with death anxiety, and positively correlated with the elderly having a sound mental health (Sharma, Asthana, Gambhir & Ranjan, 2019). Therefore, the researcher advances a prototypical **‘Paradigm to reduce the anxiety of death and boost resilience among the Indian elderly population’**. The model has taken inspiration from the Fear-Avoidance Model introduced by Lethem et al., 1983. It is a psychiatric model that describes how people develop musculoskeletal pain and tend to maintain it as a consequence of attentional processes and avoidant behaviour. The anguish of death anxiety can also be developed and maintained due to various tormenting experiences. Ways to get rid of this agony have been suggested in this model.





### Explanation of the model:

#### Positive Tenets

★ Educating the elderly on how the body processes work can be of utmost importance and Health Professionals should look into providing substantial information about the same so that well informed individuals can take sufficient actions.

★ Emotion focused coping can generally lead to not concentrating on the solution but on the problem itself. And spiralling into a thought process regarding one's death can never be healthy and so Clinical Psychologists and Counsellors should work towards imparting knowledge about other styles of coping such as problem-focused or appraisal-focused coping styles.

★ With concepts like Karma, Moksha and Afterlife in the loop of the Indian culture,

it is important that the mental health care professionals help the aged individuals in accepting their reality. Acceptance is the first step to recovering from such agonising thoughts and it is vital that the elderly comprehend that they came on this planet for a reason and will pay off for all their sins before they leave. The more they are able to recognize this, the more resilient they will become.

★ Building communities that foster the care of such individuals who are too old to take care of themselves can contribute largely to the social safety of the elderly. Those people who might not have anyone to take care of them or have toxic manipulative families should have such communities that can provide them with emotional and financial support. These groups can be built if certain organisations such as HelpAge India can conglomerate with smaller start-up companies to initiate a non-profit establishment that can work towards funding for efficient health and social services.

### **Negative Tenets**

★ The perpetual fear and uncertainty of death can lead to severe disruption psychological functioning which can result in one going into depression.

★ It is also important to have a productive living even during this period of life, because an idle mind tends to wander toward pessimism. Being directionless enables a person to go deep into crisis and panic mode which does not help in alleviating death anxiety at all.

## **Conclusion**

As has been mentioned above in the cognitive behavioral perspective by Furer & Walker (2008), death anxiety can also be characterised as health anxiety. Health anxiety basically suggests that one is very anxious about what sort of signs and symptoms their body is experiencing, and if any of these symptoms indicate that they are in eminent danger. This is where the title of this paper takes the floor suggesting that the relationship between resilience which is a component of the positive psychology school of thought, and death anxiety (health anxiety) can be considered as a crossover between two branches of psychology - Positive psychology and Health psychology.

Along with the strategies suggested by the researcher in their model to overcome death anxiety, other practical implications can also be extorted from this review. These are:

- An increased focus should be on implementing interventions that highlight the importance of social support.
- The already existing organisations should look into problematic family dynamics by conducting surveys all over the country to rescue the aged individuals who are stuck in a malignant environment.

- Societies and Self-Help groups should be encouraged to form to help those who are trapped in the grieving process and those have been through it. It can help these people to feel like they belong somewhere and at the same time can gather support to find stability.
- More research should be conducted on the impact of death anxiety on resilience of an individual cross-culturally as well as in LGBTQ community, because their experiences will differ and so will their approach to carrying on.

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