ORIGINAL ARTICLE

Exploring Relationship between Positive Death Attitude and Flourishing among very old persons

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ABSTRACT

The psychological well-being of elderly persons is often marked by the focus on physical discomforts, illnesses and its treatment however it is associated in context to how they face approaching death in near future. Positive death attitudes, such as neutral acceptance, approach acceptance, and escape acceptance, are keys to understanding how elderly cope with it. This study explores the relationship between these death attitudes and flourishing which is a measure of overall well-being in elderly group. In the present study a diverse group of 300 old and very old persons aged 76 years and above who were assessed using standardized scales for flourishing and death attitudes. The study examined how these attitudes correlate with their psychological well-being. Descriptive statistics and Correlation was used to determine the nature and relationship between these two variables. This study highlights the need for further exploration and the development of programs that help these persons to navigate their attitudes toward death leading to better-coping mechanisms and emotional resilience.

Keywords:Geriatric, death, positive death attitudes, very old, elderly, flourishing

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INTRODUCTION

World Health Organisation (WHO) categorises people aged 76 to 90 years as old persons and persons aged above 90 years as very old. The number of older adults is globally increasing. It is projected to reach 150 million by 2025 and 300 million by 2050. Psychiatric issues are also very common in older adults. Geriatric Psychology is a branch of Psychology that deals with the psychological and behavioural aspects of older adults. Lifestyle and ageing related health issues in modern times are also linked to diabetes, kidney, liver or heart diseases which are one of the leading causes of death (Long et al., 2018). When faced with mortality anxiety, people respond differently. They may tend to adopt more or fewer actions that promote health (Amani et al., 2011; Ghorbanalipoor et al., 2010). Despite countless innovations and advancements in medical treatment, ageing related complications remains the primary cause of mortality. Patients endure discomfort and pain throughout the later phases of their lives (Kelley-Moore & Ferraro, 2005). They try to set aside previous grudges behind them and prepare themselves to bid their loved ones farewell and give up on life. For many people, this is a taxing and stressful period. This is the time when death approaches, which is unavoidable (van Laarhoven et al., 2011). Death is an inevitable and universal

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phenomenon that all individuals experience, however lifestyles, belief systems, and cultures have a significant impact (Aksu & Okçay, 2010).

Over time, many scholars, including philosophers, psychologists, psychiatrists, and researchers, have created distinct perspectives concerning basic attitudes that people go through when they think about dying. Death attitudes in elderly have been of interest in recent literature. Elderly people often think about death and find it related to their general well-being and quality of life. Healthcare professionals may better personalize their treatment and provide support to each person's specific requirements by having an understanding of how elderly persons view death. Studies have examined the notion of death attitudes in individuals with cancer and their relatives, showing the significance of handling these views within the framework of treatment. In a study on death attitudes, Gesser, Wong, and Reker (1988) stressed how attitudes about death change during a person's lifetime (Gesser et al., 1988). This study highlights how people's views about death might change over time and developmental stages. In the later stages of life death related attitudes and accepting death is frequently characterized as a positive psychological state. Accepting death could also be the result of balancing the pain and hopelessness of life's limitations with the sense of accomplishments and meaning that comes. Positive attitudes towards death reflect the point of view that death is recognized and accepted as part of life and not with fear. This acceptance does not mean wanting death or minimizing its significance, but rather approaching death with peace and understanding (Pinquart et al., 2006; Reker, 2001; Wong et al., 1994). Death researches are growing. Some of them include: a) acceptance of mortality which deals with acknowledging that everyone will eventually pass away and incorporating this knowledge into daily activities b) finding meaning in one's life c) having a focus on one's quality of life, with prioritizing living in the present rather than allowing death fear to overpower one's life and d) having open communication with loved ones about death and dying that can reduce anxiety and make end-of-life planning easier (Cox et al., 2013; Wong & Tomer, 2011). So it is important to understand that adopting positive death attitudes does not mean eliminating the possibility of experiencing bad emotions or attaining a state of blissful ignorance. It is normal to experience dread, grief, and sadness when someone dies. Positive death attitudes, on the other hand, concentrate on creating a holistic perspective that enables people to face death with acceptance and even find meaning and solace in difficult times. (Long et al., 2018; Pinquart et al., 2006; A. Ray et al., 2006; Vehling et al., 2011; Zimmermann, 2012).

Positive death attitude and flourishing

More researches are required to understand the intricate relationship between flourishing and having a positive attitude towards dying. A number of research studies have been carried out to explore the attitudes of terminally ill patients but most of these studies have concentrated on researching the negative views, with very little attention paid to positive attitudes about death. Negative emotions too have adaptive values since they contribute to our resilience. That is, we cannot live completely until we comprehend life's fragility and finiteness. So the challenges of existential positive psychology is to find avenues to death acceptance and live a meaningful life. Such a positive attitude towards death often improves our well-being and help us flourish further (Neimeyer, 2005; Tomer, 2000; Tomer et al., 2007; Tomer & Eliason, 2007). Death acceptance has been defined as a perspective on mortality that combines cognitive knowledge of death with a positive, or at least neutral, emotional response to this awareness. Researchers also discovered that death acceptance is the only positive death attitude that has been found in the literature yet, and it is seen as beneficial since people who have high death acceptance tend to have successful lives (Tomer et al., 2007). People who accepted their mortality reported having significance in their life, which is considered a component of flourishing. Researches have shown a relation between positive death attitude and flourishing among terminally ill patients. In India death acceptance was linked to decreased anxiety and demoralization, demonstrating growth and flourishing among cancer patients (Philipp et al., 2019).

This indicates that encouraging patients to have open conversations about death, offering psychological support and counseling, and incorporating mindfulness and acceptance based interventions can all help people better manage their fears and anxieties. By building a supportive atmosphere that identifies and addresses death attitudes, healthcare practitioners may enable very old patients to improve their quality of life, nurture a feeling of flourishing, and discover meaning and purpose during their cancer journey (Braun et al., 2010).

Most of the researches in this area has focused on analyzing the effects of death-related negative attitudes and little researches are done on positive death attitudes. This issue has not been explored much in Bihar region. The present study in view of this research gap tries to explore flourishing and positive death attitudes (approach acceptance, neutral acceptance, and escape acceptance) in elderly group.

Hypotheses:

(a) There would be positive associations between the various dimensions of positive death attitudes (such as approach acceptance, escape acceptance, and neutral acceptance) and flourishing among old and very old group persons

(b) There would be positive associations between the various dimensions of negative death attitudes (such as approach, neutral and escape acceptance) and flourishing among old and very old group

Methods

Participants and Procedures

The participants were recruited from various localities of Patna, Bihar using a convenience and snowball sampling method. The study involved 300 elderly persons comprising 141 males and 159 females, aged 76-95 years. After taking their informed consent to participate in the study, all participants filled out the questionnaires by themselves or with the help of the researcher or their family members. It took about 20-25 minutes to complete the questionnaire. All participants were acknowledged for their involvement. All the ethical principles were taken into consideration.

Inclusion and Exclusion Criteria:

The sample comprised adult individuals with basic reading and comprehension level who had given their consent to participate in the study. Persons with diagnosed psychiatric illnesses (schizophrenia, dementia, etc.) were excluded from the study.

Tools

Death Attitudes Profile Revised (DAP-R) by Wong et al. (1994):

The Death Attitudes Profile Revised (DAP-R) is a 32-item, 7-point Likert scale that measures attitudes toward death (Wong et al., 1994). It has five subscales. The Fear of Death dimension (seven items) examines respondents' negative views about death and the dying process (for example, "Death is a grim experience"). The death avoidance scale (five items) measures the desire to avoid thinking about death (for example, "I always try not to think about it"). The escape acceptance scale (five items) measures a person's opinion of death as a release from pain and suffering (for example, "I see death as a relief from the burdens of life"). The neutral acceptance scale (five items) examines a person's perception of death as a regular part of life that is neither feared nor welcomed (for example, "Death is simply a part of the process"). Approach acceptance (ten items) refers to viewing death as a doorway to a better life, namely the afterlife. Each subscale is evaluated based on the average of its components (Wong et al., 1994). For the current study, only the positive attitudes toward death, (including approach acceptance, neutral acceptance and escape acceptance dimensions) were used.

The Flourishing Scale by Diener et al.:

Flourishing Scale (2010) was originally introduced as the Psychological Flourishing Scale with 12 items (Diener & Biswas-Diener, 2011) but it has been reduced to eight questions. The Flourishing Scale is an 8-item questionnaire that measures a respondent's self-perceived success in major areas of life such as relationships, self-esteem, meaning, and optimism. The scale produces a single score for psychological well-being and may be used to provide useful feedback on how to improve one's life as well as to encourage self-reflection. The Flourishing Scale is best suited for people who do not have any clinical diseases or issues. The results are expressed as a single psychological well-being score (ranging from 8 to 56), with higher values indicating better levels of well-being, resources, and strengths. Diener et al. (2010) found that respondents with high scale scores have a positive self-image in key functional domains and a diverse set of psychological qualities.

Statistical Analysis

Descriptive statistics was calculated for each research variable. To verify the hypothesis, Pearson product-moment correlation was conducted to analyze the association between flourishing and positive death attitudes (approach, neutral, and escape acceptance) among participants.

Results

Among 300 persons, we found a nearly equal distribution of genders.

Correlation Analysis

The correlation analysis was done to examine the relationship between flourishing and subscales of positive death attitudes (a. neutral acceptance, b. approach acceptance, and c. escape acceptance) among participants. The analysis revealed that the coefficient of correlation between positive death attitude subscales (i.e. neutral acceptance, approach acceptance, and escape acceptance) and flourishing among the elderly group was found as 0.597, 0.860, and -0.828 respectively which came out to be significant at 0.01 level of significance. *The hypothesis, therefore, stating that there will be a positive relationship between positive death attitudes (i.e., neutral, approach and escape acceptance) and flourishing among overall elderly persons came out to be partially true and is therefore, partially supported/ accepted.*

Table 1: Relationship between positive death attitude (dimensions) and flourishing

Variables	N	Neutral acceptance	Approach acceptance	Escape acceptance	Flourishing
Neutral Acceptance	300	1	.571**	-.583**	.597**
Approach Acceptance	300		1	-.823**	.860**
Escape Acceptance	300			1	-.828**
Flourishing	300				1

N = 300. ** indicates Correlation is significant at the 0.01 level (2-tailed).

As a result, the table showed that the correlation coefficient between positive death attitude subscales (i.e., neutral acceptance, approach acceptance, and escape acceptance). *The hypothesis, therefore, stating that there will be a positive relationship between positive death attitudes (i.e., neutral, approach and escape acceptance) and flourishing among male and female participants came out to be partially true and is therefore, partially supported/ accepted.* The overall results proved that elderly who have a higher neutral acceptance (i.e., patients who neither fear nor welcome death and accept death as a part of one's life) and approach acceptance (i.e., patients who welcome and see death as a gateway to post-life fulfilment) are found to have more positive attitude and outlook towards death rather than people having a high escape acceptance attitude towards death. Results have shown that persons who escape death, (i.e. who view death as a desirable means of escaping psychological and existential sufferings of life) were found to have a negative correlation, which shows that having a higher escape acceptance attitude leads to lower flourishing among such persons. It may therefore be concluded that people who have a positive death attitude including approach acceptance and neutral acceptance towards death were found to be higher on flourishing and have a positive outlook towards death than people who have a higher escape acceptance attitude.

Discussion

This study shows various perspectives that elderly persons hold about death and dying. Most researches have examined the negative attitudes toward death, but relatively, very few have examined the positive attitudes toward death among cancer patients. However, very few studies examine the perspectives of persons patients who are very old which is often overlooked(Braun et al., 2010; Kudubes et al., 2021; Tüzer et al., 2020). In light of the gaps in literature, the current study was carried out on elderly persons. According to the results of the current study, males and females were found to have different attitudes toward mortality. While females had a greater neutral accepting attitude, males were shown to be high on approach acceptance and escape acceptance. According to the study, patients who had a more optimistic outlook on mortality flourished more, which was associated with reduced sorrow and distress, a greater sense of purpose in life, and greater life satisfaction. The study's findings were found to be in line with those of previous studies (Ernsberger, 2014; McLeod-Sordjan, 2013; Philipp et al., 2019; Wong & Tomer, 2011).Findings from the study also indicated that people flourish less when they had higher escape acceptance. It was discovered that many people believed that they might escape the pain of life by accepting death. In a research published in 1994, Wong discovered that individuals with an escape-accepting attitude saw death as a means of escaping the hardships of life (Wong et al., 1994). Therefore, it became the need of an hour that patients accept death as a natural part of their lives rather than escaping or fearing it.

The findings are also consistent with the previous researches which show a significant impact of positive death attitudes on flourishing. Various studies indicate that a positive attitude toward death can have beneficial effects and improve well-being. This positive attitude is characterized by optimism and one's focus on the present, rather than thinking of an uncertain future(Wilkes et al., 2003). Accepting one's death may indicate a positive adaptation in terminally ill patients(Philipp et al., 2019). Factors that contribute to patients' positive attitudes include supportive relationships with professionals, family, friends, as well as a pleasant environment (O'Baugh et al., 2003; Wilkes et al., 2003). Findings highlight the significance of treating existential and psychological issues in people where acceptance based therapies may help to enhance their quality of life and lower their fear of dying, escape acceptance attitude, and increase their positive attitude toward death.

Conclusion

It provides a perspective on people's thoughts about death and dying. The study examines positive attitudes towards thriving and how they might affect the well-being of such people. The study focuses on the immediate need for mindfulness-based therapies to lower escape acceptance attitudes and improve approach acceptance attitudes. The study provides insights into how adopting a positive attitude towards death might assist elderly in overcoming their concerns and developing a more optimistic view of mortality. As a result, the study emphasizes the importance of medical health professionals and therapists in combating negative death attitudes and promoting positive ones in such populations.

Implications

Studies on geriatric patients' positive death attitudes have a big impact on their psychological health and overall quality of life. It is implied that receiving positive psychotherapy helps very old patients have a higher quality of meaningful life. This finding emphasizes the value of psychosocial therapies in improving patients' experiences and coping strategies. Moreover, it has been demonstrated that having a positive death attitude lowers death fear, metacognitive beliefs, and perceived stress in elderly group. These findings highlight the need to treat psychological issues in geriatric therapy. Therefore, providing comprehensive palliative care and enhancing end-of-life experiences involve an understanding of very old patients' attitudes about death and their need for a good death. It also focuses the necessity for more investigation into this topic and the creation of educational initiatives aimed at assisting older groups in better understanding their attitudes towards dying, overcoming anxieties, and strengthening coping mechanisms.

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