ABSTRACT

“Everybody in one way or another; is afraid of death” (Fiefel & Branscomb, 1973). Although every human being is aware of the inevitability of death but still an approach of honest and open enquiry has not been adopted to deal with the matters related to death and dying. The society in which we are living is death avoiding and denying society. On the other hand with advancement in medical sciences the human life span has extended, ultimately responsible for increased population dying with chronic illnesses. With advancement and modernization of the present society death and dying has become a lonely experience.

Thus it can be said that how we view death and deal with fear of death affects every aspect of our lives. There is need to remove the negativism associated with death and dying because it is important to think about death if we really want to think significantly about life. By accepting ourselves as mortal beings every moment in life becomes important and people have no time to fear death rather they will be concentrating on achieving their goals in life.

Keeping all these things in mind the present investigation was planned. As noted in the existing literature, the correlates of death anxiety are numerous; the current study has tried to explore all the four dimensions of
death anxiety and some cognitive, emotional and behavioural correlates of fear of death. The four dimensions of death anxiety are: fear of death of self, fear of dying of self, fear of death of others and fear of dying of others. Under cognitive, emotional and behavioural correlates hope, alienation, meaningfulness in life, intrinsic religious motivation and health promoting behaviours were incorporated. The total sample comprised of 200 females, which is further divided in two groups of 100 females in each i.e. females professionally exposed to death/dying (group-I) and females not exposed to death/dying in last 2 years (group-II). A set of seven questionnaires (Background questionnaire, Collett-Lester’s fear of death scale, Hope scale, Alienation scale, Meaningfulness in life scale, Intrinsic religious motivation scale and Health promoting lifestyle profile II) was administered for collecting the relevant information. Analysis of data was carried out using both descriptive and inferential statistical measures. Results of the present investigation depicted that no subject is free from death anxiety but the degrees of fear of death and dying varies. Fear of death and dying of self is significantly high in females exposed to death and dying as compared to those not exposed to death and dying in last two years. All the subjects in total sample and in group-II exhibited significantly high fears related to death and dying process of others as compared to self. Subjects in group-I were having significantly high fear of death of others as compared to self. Hope showed significant and positive relationship with fear of death and dying. Feelings of
alienation increased with increase in fear of death and dying. Meaningfulness in life (presence) showed negative relationship with fear of death and dying whereas meaningfulness in life (search) found to be positively correlated with fear of death and dying. About the relationship of fear of death and dying with intrinsic religious motivation no conclusive comments can be made and this aspect needs further exploration. Health promoting behaviours were found to be positively correlated with fear of dying of self. For fear of death of self, fear of dying of self and fear of death of others the overall contribution of all the variables was significant in total sample and among all independent variables hope, alienation, health promoting behaviours and age were most influencing.