

An Existential Perspective on Death Anxiety, Retirement, and Related Research Problems

John W. Osborne
University of Alberta, Edmonton

RÉSUMÉ

Les auteurs discutent des aspects de l'existentialisme se rapportant à l'existence et de l'anxiété sur la mort (AM). Le facticité de l'existence, l'être-avec-les autres, l'influence sur la motivation de l'inéluctabilité de la mort, la quête de sens, profitant de la vie au maximum en acceptant responsabilité de sa propre vie, et la capacité de faire face à l'isolement existentiel sont tous compris dans cette discussion. Une difficulté importante c'est de séparer AM de l'anxiété de l'objet. On trouve que les corrélations entre l'âge, le sexe et AM sont variables. On discute des problèmes de personnalité et de l'orientation du rôle dans la transition vers la retraite, ainsi que la notion de Erikson de la « générativité » en tant qu'expression de l'énergie et le but de la quarantaine. Considération des problèmes méthodologiques et linguistiques dans la recherche d'AM sont discutés. En conclusion, cet article suggère des méthodologies qualitatives comme un moyen interpersonnel d'exploration d'AM dans le contexte de la psychothérapie et du services de conseil.

ABSTRACT

Aspects of existentialism relevant to existence and death anxiety (DA) are discussed. Included are the "thrownness" of existence, being-with-others, the motivational influence of inevitable death, the search for meaning, making the most of existence by taking responsibility for one's own life, and coping with existential isolation. The attempted separation of DA from object anxiety is a significant difficulty. The correlations among age, gender, and DA are variable. Personality and role-oriented problems in the transition to retirement are discussed along with Erikson's notion of "generativity" as an expression of the energy and purpose of mid-life. Furthermore, methodological and linguistic problems in DA research are considered. The article suggests qualitative methodologies as an interpersonal means of exploring DA within the contexts of psychotherapy and counselling.

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La correspondance et les demandes de tire-à-part doivent être adressées à : / Correspondence and requests for offprints should be sent to:

Dr. John Osborne, Ph.D.
4387 Faithwood Road
Victoria, BC V8X 4Y6
(josborne@islandnet.com)

Evidence for the existence of death anxiety (DA) has come from psychiatrists, counsellors, and DA researchers using quantitative methods such as rating scales. Research based on clinical observation of DA has been growing but is neglected. Identifying DA can be difficult when it hides beneath the cover of object anxiety. Object anxiety can occur in many forms. For example, people with obsessive compulsive disorder may experience that certain objects are making demands on them. Mountain climbers may experience the rock face as a trigger of sublimity, experiencing a mixture of terror and awe at the same time. There may be brief

expressions of DA, but they are quickly obscured. In this article, the DA focus is on the contexts of aging, gender, and retirement. Yalom (1980) suggested that neurotics seem to display their DA more obviously than most people. He claimed that "the neurotic lifestyle is generated by a fear of death" (p. 146).

The existential topics in the subsequent eight subsections following this introduction are intended for readers who may be unfamiliar with existential thought. Existentialism asks questions about the nature of human existence (e.g., What is the purpose of human existence

and its passing?). Death anxiety can be activated by this question and other existential concerns that follow, and these concerns are likely to affect retirement and aging.

Existential Views on Aspects of Existence

Aspects of existence are discussed because they often provide a prelude to understanding DA. Heidegger's term *Dasein* (or "there being") is fundamental (Heidegger, 2010, pp. 193–226). He acknowledged that human existence is initially shaped by our "thrownness" (Heidegger, 2010, p. 169). We are thrown into the world. We have no control over our parentage, where we were born, and under what circumstances. Our parental heritage and the contingencies of our birth are beyond our control and will be a contributing factor in shaping our existence.

The possibility of an authentic or inauthentic life depends upon whether we can become genuine individuals who can, when necessary, resist pressure to conform and yet maintain relationships with others. Heidegger was concerned with pressure to conform that comes from society (i.e., "the they") (Heidegger, 2010, p. 122). Failure to stand out as an individual may lead to a diminished existence that can lead to "non-being". Tillich (2000) called the balance of influence between the individual and society the "courage to be". It is the result of skillful discernment of how to respond in situations that require "standing out" and showing the "courage-to-be-an-individual" (Tillich, 2000, pp. 10–23). Being is also being-with-others. Authenticity is not a matter of social isolation. Getting along with "the they" has been called "the courage to-be-a-part-of" by Tillich (p. 86) and does not mean abject conformity to the "herd".

A Positive Aspect of Death Anxiety

Existentialists claim that awareness of the inevitability of our death energizes our awareness of our aliveness and our existence. They maintain that "man ought to deliberately cultivate an intense and persistent surface consciousness of death" (Olson, 1962, p. 195). An existential opinion is that "the affirmation of life is impossible unless we hold steadfastly to the consciousness of death" (p. 195). Consciousness of death adds a sharpened perspective to existence. Shutting out death may even be viewed as robbing life of its value. Existentialists believe the frightening aspects of the consciousness of death to be the price that must be paid for the value enabled by such awareness.

Sartre (1965) was highly critical of Heidegger's approach to DA: Heidegger's theory focused on the mitigation of DA (Heidegger, 2010, pp. 227–249) while Sartre argued that, when we come face to face with death, we cannot develop future plans precisely because we have no future. Sartre's focus upon self-transcendence puts

him at odds with Heidegger whose approach to DA and authenticity excludes the phenomenon of self-transcendence. Sartre (in Audi, 1999) reconsidered the notion of the self: "The self is not in consciousness, much less identical to it. The self is out there in the world, like the self of another" (p. 812).

Attention to the presence of anxiety or dread is a fundamental way of understanding human existence. Existential anxiety is not anxiety related to an object. It is free-floating anxiety. This type of anxiety is often the result of losing oneself in inauthentic being-with-others. Because such anxiety is not object related, it often exists beyond recognition. The anxiety persists for an individual despite the use of drugs and various diversions such as recreations that may be valid parts of what appears to be a balanced, meaningful existence. Nonetheless, the individual may yet experience a vague feeling of dread.

Finding Meaning

Non-object related anxiety is often taken as a sure sign of what Camus called "non-being" or depression. Camus (1955) thought that a human being's position in the world is an absurdity. The search for meaning ultimately occurs at an individual level even though individuals may coalesce to accept meanings that are accepted by what Heidegger called "the they". There is no obvious purpose to human existence apart from meanings that have been developed by humanity over time. The world and the universe may be indifferent to us. Camus believed that "A human being can attain full stature only by living with dignity in the face of absurdity" (Yalom, 1980, p. 47). The pessimism expressed by Camus and Sartre raises the question of how humanity can create ways of coping with an existence that has no particular meaning. Nonetheless, the lack of meaningful direction opens the possibility for an authentic life of finding or creating one's own meanings (e.g., through religions).

Facing Existence and Ultimate Death

The inevitability of death can have a paradoxical impact: the realization that we will die can awaken our awareness of being alive and existing. However, the uncertainty of one's death – when and how it will occur – continues to be a major contributor to DA especially as one grows older, particularly in retirement, and former meanings become irrelevant (e.g., through a withdrawal from the work world). In retirement we may need to create new meanings, especially as we reach advanced ages. Heidegger (2010, pp. 249–256) suggested that "death honestly accepted and anticipated can become an integrating factor in an authentic existence" (Macquarrie, 1972, p. 198).

Death and life are interdependent forces: although death ultimately destroys us, it can also be a great energizer of life. For example, some people have a “to do list” in the sense of things that we still want to do or see while we are still alive. There are numerous other opinions on ways of coping with one’s own eventual death. Ultimately, the actuality of a death experience may be hard to put into words and communicate. But, humanity cannot deny the knowledge of living with the certainty of death.

Death anxiety or dread, as it is sometimes called, is not related to a particular object. An underlying feeling of dread can lead to a fear of sinking into nothingness and a feeling of helplessness. Death anxiety can lead to neurotic behaviours such as compulsivity. The anxiety associated with objects (object anxiety) can hide DA. For example, the deterioration of my physical body can preoccupy me and make me forget that it is really a sign of my mortality. Psychoanalytic defense mechanisms such as repression and displacement as well as attempts to achieve symbolic immortality are examples of the attempt to ward off death. Yalom (1980, p. 54) suggested that “Death anxiety also increases as one moves from conscious to unconscious experience.” Some older people may fear death more as they approach the end of their lives. An understanding of “old” can vary from younger-old to people of advanced age. This distinction has not been completely clarified in studies of DA and aging. The research literature on aging, discussed later in this article, has uncovered some variable trends in the relationship between aging and DA.

Death anxiety is often difficult to detect and, with the help of a psychotherapist, may take considerable time to uncover. Some adults invoke the notion of specialness (“it won’t happen to me”). Others accept that the world continues and that life ends. Other unconscious compensatory ways of coping with DA are, for example, living life to the full, becoming a workaholic, becoming narcissistic, or pursuing power as a type of compensation for one’s powerlessness in the face of death.

Optimizing Existence

The inevitability of death can quicken a realization that existence cannot be delayed. Death anxiety can quicken our lives by drawing attention to the unknown end of our existence, and to the issue of what we can do to make the best of life’s possibilities. The death of a spouse, child, or friend can remind us of our aloneness in the world. We die alone. Nobody can die for us. Birthdays can act as reminders of the passing of time and consequential anxiety. Inevitable death can be a source of anxiety that is both recognised and yet ignored.

Paradoxically, once people apprehend the inevitability of future death, they may be more interested in making

the most of their lives. How much life is left can be unknown, or if one is suffering from a terminal illness, perhaps known. Although DA can result in losing oneself in feelings of nothingness and helplessness it can sometimes enliven increased self-awareness and the possibilities for engagement in meaningful activities. However, DA can be repressed, and repression can enable people to cope with day-to-day living. Nevertheless, managing daily existence through extensively relying upon repression may exact a price; namely, one’s quality of life satisfaction (Yalom, 1980, pp. 185–191).

Accepting Responsibility for One’s Life

Each person must take responsibility for his or her own life. When we die, our world essentially dies with us. We wish for autonomy but fear the isolation it may bring, especially the existential guilt that follows the failure to live as fully – as authentically – as one can. We cannot live authentically unless we take responsibility for our own choices rather than following “the they”.

Existential Isolation

When an individual has a problem with isolation and that problem is fused in a relationship with another, the result can be troubling. Mutual dependency is vulnerable to breakdown. Existential isolation is best dealt with personally rather than through dependence upon an intimate relationship. Each person needs to face the challenge of existing as a unique individual who is interested in becoming more aware of what it means to be an individual because it can lead to understanding that being is “being with others” rather than merging with another in a romantic fantasy. Moreover, a person who has faced the aloneness of existence may be better prepared for a relationship with another person. That said, no matter how successful the attempt to merge with another may be, part of our experience is necessarily exclusive to ourselves and likely to include episodes of existential isolation.

Meaning and Meaninglessness

How does a being who needs meaning find it in a universe that, according to Sartre and Camus, has no ultimate meaning? Every individual person has to find or construct meaning in his or her own life. However, the ways in which potential meanings are developed will reflect their human situatedness and sense of self. Human beings can create their own terrestrial meanings or look to some form of cosmic meaning such as belief in a God. Again, as Sartre (1965) reminded us: “All existing things are born for no reasons, continue through weakness and die by accident ... it is meaningless that we are born; it is meaningless that we die” (p. 136). Both Sartre

and Camus believed that human beings needed to create their own meanings.

Meaning can function as a counterbalance to anxiety. Meaninglessness is often confused with DA because they can both lead to neurosis. The anxiety involved in attempting to develop a meaningful life and find a potential relationship partner can sometimes be an unconscious manifestation of DA. Allied with these confusing anxieties is the notion of having a purpose and being successful in the Western world. Sometimes disgust with the "rat race" and the unrelenting repetitiveness of work and leisure routines ("the good life") can provoke a reaction of disgust towards busyness that has become obsessive but not meaningful. Nonetheless, engagement in any interest needs to be meaningful rather than an exercise in busyness.

An existential vacuum is often characterised by boredom, apathy, cynicism, and lack of direction. Such a situation can be a sign of meaninglessness. Free time may not arouse interest in doing anything. Meaninglessness can often be accompanied by neurotic symptoms such as depression and drug addiction. Even though people can be told how to act in many everyday situations, they can be overcome by choice dilemma: "Which option will I choose?" Feelings of meaninglessness can also lead to stagnation characterised by aimlessness and apathy. We can create meaning through our choices rather than succumb to choice paralysis (e.g., approach-approach conflict).

Sometimes DA can be mistaken for the feeling of meaninglessness. The importance of engagement with one's world also needs to contain contact with others in order to be authentic. Yalom (1980, p. 479) concluded that if "nothing matters it does not matter that nothing matters." We are free to ask or not ask questions about life and what, if anything, is beyond it. Being caught up in not mattering can produce despair. An antidote for meaninglessness is engagement rather than thinking oneself into a corner. A leap into commitment and action (i.e., engagement) can result in questions mattering. However, "the solution to the problem of life is seen in the vanishing of the problem" (Wittgenstein, 1961, p. 73). The various aspects of human existence, as discussed above, have considerable relevance to the experiencing of the transition to and establishment of life in retirement.

Death Anxiety in Aging and Retirement

Osborne (2012) discussed possible problems that retirees could experience during their transition to retirement following the initial positive aspects of becoming retired. Some experiences of retirement may include the presence of DA and meaninglessness as time in retirement increases. When employees retire at or near the maximum age permitted before compulsory retirement, they

are likely to be reminded of their own aging and potential mortality by the obvious aging of other retirees. Some retirees will have plans for retirement while others may be mired in choice dilemmas (approach-approach conflicts) from numerous available options (e.g., continuing to live where they currently live or moving to a retirement location). Despite a carefully planned retirement, "wild cards" such as health, financial problems, and family issues can arise (e.g., heart attack, stock market crash, family caretaking).

Retirement's impact on a retiree's identity can be significant. There is a risk that the identity manifested in the workplace by a retiree will need to be adjusted to a new daily life structure. The roles and identities expressed in the workplace might require significant adjustment when employees enter retirement (Teuscher, 2010). For example, retirees might no longer be involved with other retirees who may have been supportive in their mutual recognition of each other's skills and identities. However, the early expressions of identity in retirement are likely to be those that were appropriate for the work environment. The transition to retirement will likely require some adjustments for retirees if they are to enjoy the possibility of new friendships. Pre-retirement attention to identity concerns may be able to help some retirees avoid feelings of meaninglessness when they enter retirement. An existential neurosis in the form of boredom, apathy, or emptiness may be avoided or reduced by the early management of potential identity problems.

An occupational role often becomes part of an identity base in adolescence and young adulthood (Erikson, 1982). A longtime identity can be significantly disrupted by the loss of a work role unless a retiree has developed an identity that is composed of several important roles that were not exclusively work related and which continue to be part of a retiree's identity. As years in retirement increase, so will aging and perhaps episodes of DA. However, research suggests that DA tends to plateau in mid-retirement (Fortner & Neimeyer, 1999). Both DA and object anxiety have been observed in neurotic behaviours. Much of the evidence for the presence of DA has been observed in children and adults who are in psychotherapy (Yalom, 1980). Death anxiety is a difficult phenomenon to describe. It cannot be adequately expressed in words. It is more likely to be a feeling state that is related to the existential issues described earlier.

Osborne (2012) identified an important similarity between the transition to retirement and a variety of pre-retirement values, patterns of living, customs, and worldviews that continue into retirement and thereby make the transition easier, not because these factors are optimal but because they are familiar. Costa and McCrae (1980) suggested that personality traits can be predictors

of retirement experience. They found that retirees who were low in neuroticism and high in extraversion reported higher satisfaction with retirement. Likewise, Lockenhoff, Terracciano, and Costa (2009) reported that retirees who were low in neuroticism and high in extraversion experienced retirement with higher satisfaction. Similar findings regarding the validity of extraversion as a predictor of life satisfaction in retirement or its absence were reported by Robinson, Demarre, and Corney (2010). Extraverts were considered to be more outgoing and to make friends more easily in retirement than neurotics who may or may not be more introverted. These findings appear to support the relationship between neuroticism and DA: "The neurotic life-style is generated by fear of death, but insofar as it limits one's ability to live spontaneously and creatively, the defence against death is itself a partial death" (Yalom, 1980, p. 145).

Rapkin and Fischer (1992) found that having pre-retirement goals, which continue into retirement, appeared to be more important than the nature of those goals when it came to easing the transition to retirement. Numerous aspects of pre-retirees' lives, such as personality characteristics and worldviews, may also transfer to retirement (Calasanti, 1996). The transfer of family worldviews can support retiree identities and generally provide validation for retirement transitions. To a significant extent, the transition to retirement is a family affair (Nuttman-Schwartz, 2007). A retiring family's worldview also appears to function as a major source of support as retirees face advanced aging and the likelihood of DA. Erikson's (1982) appeal for generativity provides a contribution to a meaningful project of energised existence and community involvement. The presence of cultural values, embedded in worldviews, can facilitate a transition to retirement that often includes family values such as elder care.

Aging and Death Anxiety

Benton, Christopher, and Walter (2007) investigated the nature of the relationship between age anxiety and DA. Their study showed that the predictors of aging anxiety were also predictors of DA. This result questions the extent to which the two types of anxiety possess common elements that make the identification of DA difficult if not impossible.

Depaola, Griffin, Young, and Neimeyer (2003) found that anxiety associated with aging, death, and fear of the unknown can be stirred up with older people. This finding was supported by older women's high scores on the Fear of Death Scale (Templer, 1970). Russac, Gatliff, Reece, and Spottiswood (2007) reported that DA peaked for both genders during their twenties and showed significant later decline. Women also reached another

peak in their fifties. These findings demonstrate the difficulties of tracking stable relationships among gender, aging, and DA characteristics as discussed by Fortner and Neimeyer (1999) in their review of these types of findings.

Early Methodological Concerns

Yalom's (1980) comments regarding the fragmented focus of the investigations of DA, the use of numerous settings, and the popularity of scales seem to have contributed to the fragmentation of extant research in realizing that multiple variables may or may not influence the development of DA (e.g., aging, gender, living conditions, and interpersonal relations). Lester and Templer (1992–93) claimed that 5-point DA scales (strongly disagree to strongly agree) have established themselves as the most frequently used type of instrument in studies of attitudes towards death-related topics. Perhaps the use of subjects' ratings of the (non)agreement or intensity of statements about death does not mean that its popularity is the best approach to researching death-related issues. Rating scales may appeal to researchers because data collection is convenient and leads to rapid data analysis. Apparently, there is usually no further contact with the research participants. The choice of data collection along with other issues will be discussed later.

Death Anxiety and the Lifespan

Fortner and Neimeyer (1999) set out to "summarize and elevate a subset of literature that has special relevance for one group of people who are statistically 'closer' to death" (i.e., older adults) (p. 388). Variability of age, living environment, psychological problems, and other variable experiences are often aspects of the research that fluctuate. The studies reviewed were restricted to older adults as a means of reducing extraneous variability. Some forms of DA might be unconscious and subject to differences in individual experiences that are expressed indirectly through object anxiety. Individual differences, reflected in the expression of such anxiety, might constitute significant variability and questionable validity. A scale that is built upon presumptive data and pre-suppositions is unlikely to be superior to the clinical observations of psychiatrists or therapists, especially if they have built good relationships with their clients.

Neimeyer and Fortner's (1995) suggestion of focussing upon older adults may be a reasonable approach to researching DA. They addressed the possibility of "relatively pure" (more or less homogeneous) samples of older people for study purposes. Such a study might be able to attribute response variability to fewer identifiable possibilities. Recent retirees who have made the transition to retirement and are living independently

in a retirement village or care facility may be a group that is less likely to express the kind of variability found within samples of previous studies. I suggest that a study of those who have experienced identity issues and those who have not may provide data that are also compatible with studies that have shown a relationship between psychological maturity, a sense of purpose, and ego integrity (Erikson, 1982).

In their review of selective and relevant DA research, Fortner and Neimeyer (1999) found higher levels of DA among elderly adults who were evaluated in terms of their level of Erikson's ego integrity, and their physical and psychological problems. Age, gender, and religion did not appear to predict DA. The same study also found that DA declines from middle age to older age and stabilizes during the latter half of adulthood. Fortner and Neimeyer (1999) also reported that DA did not continue decreasing with age within the elderly population. Cicorelli (2006) found that an awareness of approaching death appeared to create increased fear of physical but not mental or spiritual loss in mid-old but not young-old people. Concern for deteriorating changes in physical appearance and other losses predicted tangible DA (Benton et al., 2007). Their suggestion of looking at psychological transitions in late life as a source of attitudes towards death is pertinent to this article's focus on the possible interactive effects of retirement and family involvement upon DA. An increase in DA can also be higher in patients suffering physical illness and thereby experiencing the wild card of illness that can affect retirees and their families.

Fortner and Neimeyer (1999) found that 49 studies showed higher levels of DA for elderly adults which were related to lower levels of ego integrity and greater physical and psychological problems. Age, gender, and religiosity did not predict DA in elderly people. The negative relationship between age and DA did not persist into elder years. Death anxiety appears to decline from middle age to older age and stabilizes in the latter part of life. Erikson's prediction of either generativity or stagnation in middle age was supported in addition to DA being higher in midlife than old age. Subsequently, a negative correlation between old age and DA occurs. Death anxiety was also found to have a negative correlation with life satisfaction, purpose in life, and ego integrity. Neimeyer and Fortner's (1995) suggestion of the effects of gender upon DA were not supported by studies in a later review (Fortner & Neimeyer, 1999). Having significant physical problems predicts higher levels of DA in older adults. A higher number of psychological problems can also result in higher levels of DA (e.g., post-traumatic stress disorder and suicidal tendencies).

Fortner and Neimeyer (1999) suggested that "Measures of DA could be included in psychotherapy studies and

medical treatment studies of elderly people to test the effects of these treatments on DA, using the reduction of psychological problems and physical problems as mediators" (p. 405). Although the above suggestion may be helpful, relevant discussions with patients, doctors, and psychotherapists could also be worthwhile. A collection of the cognitive and personal dimensions that are compatible with Erikson's emphasis upon late-life cognitive development may be helpful in coping with DA. Ego integrity, meaning, and purpose have relevance for those who experience identity loss or DA in retirement. In the last stage of his theory of human development, Erikson (1982) discussed integrity versus despair which is often accompanied by an increased awareness of mortality, especially in retirement. Ego integrity is the result of a positive resolution of life's final crisis. A negative resolution of life's final crisis results in despair and fear of death. Erikson's notion of ego integrity consists of a personal sense of fulfillment or self-worth.

As already stated in Fortner and Neimeyer's (1999) review of the DA literature, the validity of various scales may be in question, especially when similar studies have produced conflicting results. Researchers continue to overlook various contexts in which DA may occur (e.g., psychotherapeutic relationships). Can DA be identified when its manifestations are subject to descriptive observations that have been offered by psychiatrists and psychologists? Is the risk of error variance well controlled? Are there valid descriptions of what we call DA? This issue is reflected in the inability to manipulate assignment to groups with varying levels of DA rather than use other measures, as referenced above, and treats DA as if it were a clearly defined and valid concept rather than a disjunctively defined phenomenon.

Fortner and Neimeyer's (1999) review supports methodological criticism from previous reviews. Their suggestion that "measures of DA could be included in psychotherapy studies and medical treatment studies of elderly people to test the effects of these treatments on DA" (p. 405) may be helpful. The approach to research, however, continues to be predominantly quantitative and reliant upon scaled tests of reactions to dangerous incidents.

A qualitative approach to dialogue with research participants might extend or clarify other data sources of DA relief. It may be time to look at other data gathering and analytic techniques rather than remain with the weaknesses of correlation. Fortner and Neimeyer (1999) have produced results that appear to be hypersensitive to variables that can also be responsive to sometimes unexpected influences. These authors reached a similar conclusion in their review of the research literature

on DA with particular reference to the use of variations in Templer's original DA scale.

Reservations on Quantifying Death Anxiety

Yalom (1980) observed that, depending upon their working focus, some psychiatrists, psychologists, and clinicians do not recognize possible signs of DA. A suggestive sign may be the presence of neuroticism. The possibility of this sign leading to DA may be missed when a practitioner's focus lies elsewhere. This situation is a common bias among many researchers who focus upon what they assume to be their mission target when attending their clients. The focus is upon limited aspects of a person's experience. An exclusive focus upon looking for current descriptions of DA, without careful consideration of how it is sometimes hidden, may overlook concealed DA.

If DA is sometimes obscured within or beneath object anxiety, how can it be identified? DA can also be hidden by various defence mechanisms such as repression and displacement. If one claims that DA is present but hidden, how can we be sure that what is called DA is, in fact, DA, unless the nature of DA has been explained to those who are participating in a research study? Such an action, however, may become a demand characteristic that affects the study.

Definitions of DA are complex and often somewhat vaguely described by psychologists. For example, are certain descriptions of DA conjunctive or disjunctive in their composition? Can a DA syndrome be defined or described in various combinations of characteristics and symptoms but not universally? Researching a phenomenon that manifests in various ways creates difficulty in grasping the meaning of the phenomenon. Apprehension of the inevitability of death or as the result of being stricken with a fatal illness is likely, in both instances, to elicit an awareness of DA. However, the two situations are probably different in terms of the effects of DA. It is probable that there may be individual differences in the intensity and imminence of DA. Some of the research discussed in this article shows that older people, who are closer to the end of their lives, may manifest less DA than younger people. With the occurrence of such an unexpected situation, can we be sure that the ways in which the phenomenon is being researched are valid?

Language Problems

The use of an intensity scale in recording the extent of one's DA can be affected by language problems. Experience precedes language. However, the meaning of language is not identical for all those who listen to or read descriptions of incidents that may provoke DA.

Are research participants responding to reality (e.g., near-death experience in an auto accident) or imagined experience?

Participants in a research study do not necessarily respond to the meaning of words uniformly. Those participants who appear to respond to descriptions of incidents involving DA may provide similar ratings on an intensity scale but for different reasons. Words often have multiple meanings even when there appears to be unanimity on a measurement scale in a research project. Death anxiety might be an example of Wittgenstein's comment that "there are things that cannot be put into words" (Wittgenstein, 1961, p. 73). Wittgenstein states a major problem associated with the use of linguistically expressed data thusly: "The world is *my* world. This is manifest in the fact that the limits of *language* (of that language of which I alone understand) mean the limits of *my* world" (Wittgenstein, 1961, p. 57). Is this a reason for taking the DA research in a more qualitative direction that may be able to detect persons' experiences that occur as an overarching gestalt rather than a collection of responses to items to be rated in terms of DA?

Another issue is the likelihood that DA is said to exist in a psychological matrix of object anxiety that makes it hard to identify. Yalom's (1980, p. 54) comment that "death lies outside awareness and increases when one moves from conscious to unconscious experience" is still a significant problem in researching DA. Another source of significant variability within the research into DA is the broad scope of circumstances in which a description of DA may vary for different reasons (e.g., sometimes living arrangements have effects, and sometimes not, across a range of studies). Research participants in studies of DA may have used many of the same words to describe a phenomenon; however, the meanings they attach to the same words may differ.

Quantitative and Qualitative Science Approaches to Death Anxiety

A common natural science approach to understanding the nature of DA involves the use of a rating scale of statements that trigger possible anxiety about the inevitability of death. The Templer (1970) scale, according to Beshai and Naboulsi (2004) is "a mixture of fears, phobias and obsessions with thoughts of illness, cancer, heart disease and wars" (p. 507). They added that "the scale addressed thoughts about the death of others even though its items are cast in the first person singular" (p. 507). Most, if not all of the research on DA, is framed in terms of quantitative science. Exploration of DA, based upon a qualitative science approach, may emerge from a deep and extended relationship between patient and psychiatrist or counsellor. This situation has been expressed in previous comments from Yalom

(1980), who repeated his support for a more phenomenological approach to understanding the ways in which DA can be obscured by object anxiety or be obstructed by various defense mechanisms of the client. Levitt, Stanley, Frankel, and Raina (2009, p. 127) claimed that “humanistic researchers” may be at a disadvantage if their treatments are being evaluated by their ability to achieve goals that are not their own. Their instruments need to reflect their own theories of development and models of psychotherapy. A study of DA reduction found that an experiential format was the most effective approach to lessening death-related fears (Vargo & Batsel, 1984).

There appears to be no post-experimental contact or interest in interviewing some participants in many studies after the data are collected (e.g., how participants experienced the scaling-driven procedure). Even brief discussions with participants following data collection may produce useful feedback on their experiences. A potentially disturbing inquiry into DA may have upset some participants who might have appreciated an opportunity to talk through their experiences.

A qualitative science approach to research focuses upon persons’ “lived experiences”. Although Yalom is a trained natural scientist, he has acknowledged the value of a mutually trustful relationship with clients that, when established over time, can yield discoveries that have been dormant or resisted recognition (Yalom, 1980). He is well known for his work as a group therapist and the ways in which therapeutic relationships can lead to important discoveries such as the ways in which defense mechanisms can obscure DA. The exploration of dreams, free-floating anxieties, and nightmares in particular can be a source of DA that escapes a patient’s awareness. There can be a tendency to forget dream messages and other signs of DA. In their review of DA studies, Fortner and Neimeyer (1999) suggested that focussing research on factors that appear to be associated with DA, such as living circumstances, and psychological and physiological problems, could be helpful. However, the preferred methodology for investigating the nature of DA continues to be quantitative.

A major problem in trying to measure DA is that researchers cannot accurately define what they seek to measure. The relationship between DA and object anxiety is conjecture rather than the result of precise definition and measurement. Such a situation creates a serious problem for data gathering from scales. Researchers are caught in the conundrum of not being able to describe and explain the phenomenon they seek to measure. The exploration of personal experiences through talking with therapists might provide opportunities for deeper exploration that may lead to greater potential validity

when using the term DA. The kind of trustful relationship advocated by Yalom (2009) over time may provide insightful experiences from interviews that the scale builders have neglected. A variety of robust qualitative methodologies are available (e.g., Camic, Rhodes, & Yardley, 2003). Nonetheless, quantitative science prevails in many contexts where qualitative research can offer more personal information that can be elaborated and studied for understandings that may illuminate an existential context despite language problems.

Conclusion

The presence of existential concerns is expressed in many of the research studies focused upon death and DA without being an explicit existential focus of the studies (e.g., meaning and relationship). Pondering the end of one’s own life is a part of existence that can lead to many questions such as “Why am I here?” and “What kind of existence do I seek?” These questions, and many others, can lead us to think about what we want from life and how we cope with deep issues that arise from existentialism. Formal philosophical presentations of existentialism come after the fact of human experience in which we are already engaged. If we live in a free society, we have numerous options to consider. Heidegger claimed that being is “being-with-others” (Heidegger, 2010, pp. 114–122). But how do we make our way in society without pandering to “the they”?

Tillich (2000) suggested dual compromises such as “the-courage-to-be as an individual” and the “courage-to-be-a-part-of”. Both points of view have value if we can make the appropriate distinctions and avoid rigidity. The radical views of Sartre (1965) and Camus (1955) conveyed that human existence comes without prescription. Existence is what we experience and make of it. The creation of interactive meaning rests with ourselves and leaves us with many choices. The meaning of existence is variable if we awaken to the possibility that we can make our own choices or “follow the herd”. There are many possible choices and meanings that form part of our daily lives. However, contemplating “my death” and the death of others is likely to be a difficult challenge.

Erikson’s (1952) view of living in a developmental interval between the polarities of generativity versus stagnation, a psychosocial stage of life with an interval of 40 to 64 years, also provides for a continuing lifespan beyond an age of 65 to death. These intervals can be productive or neglected. These two periods cover retirement and beyond. Generativity involves a significant concern for younger generations. The transition to retirement can also cause a transfer of family values, (such as when the retiree moves into the home with his or her children) as well as significant adjustments to meaningful activities and identity changes. These two

stages in time bring new challenges to prompt our approach to the end of our existence. Coping with various ailments is likely to take up increasing amounts of time. Research involving measures of DA in groups of controlled gender, age, and psychological characteristics such as ego integrity can produce different results based upon repeated testing.

Retirees, especially, may focus on the next generation (generativity). Creativity and productivity are valued. Ego integrity is a favoured personal characteristic. It tends to involve a broad engagement with existence and is a favoured feature in much of the DA research. Living beyond the age of 65 (the psychosocial stage of ego integrity vs. despair) forms the ultimate record of what we have done with our lives. We may have achieved a satisfying life or we may have lived an unproductive life of despair or loneliness.

At present the most popular source of DA research is still served by rating scales containing, for example, dangerous events. This approach relies upon correlations of scale responses as its data source. Rating scales of verbal descriptions suffer from language problems that do not necessarily express what each person experiences. The verbal structure of a given study may create a mental picture or emotion that is influenced by a script whereas for others it might trigger personal experiences that go beyond whatever the study's current experiment or focus is. A qualitative approach to building a close relationship with a therapist may enable exploration of DA beyond the limitations of designated verbal structures.

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