

## EFFECT OF LONELINESS ON DEATH ANXIETY AMONG ELDERLY PEOPLE

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### ABSTRACT

The simultaneous forces of industrialization and urbanization, compounded by the pervasive impact of Western lifestyles in metropolitan areas, are causing seismic transformations in India's societal environment. These changes are upending long-standing conventions and changing family arrangements. In the middle of this turmoil, the position of the elderly is changing significantly. The old pillars of respect, care, and love are quickly disappearing, which makes the elderly feel neglected.

This research focuses on a sample that was selected from two different groups in Mysore: fifty old people living in institutionalized settings and fifty more in non-institutionalized settings. The main goal is to understand the complex interaction between death dread and loneliness in older people who are both institutionalized and The study's findings tell a moving story: older people living in institutions experience more loneliness than older people living in non-institutionalized environments. In the institutionalized context, the old support networks appear to be eroding more quickly. Nevertheless, the study finds that older people who are institutionalized and those who are not have surprisingly equal levels of death concern. The fact that both groups exhibit a similar fear of death in spite of their different living conditions suggests that the death specter is a threat that is greater than their particular circumstances. *Do not treat your parents like burden especially when they need you.*

**Key words:** *Loneliness, death anxiety, old age and health*

## **INTRODUCTION**

The simultaneous pressures of industrialization and urbanization, compounded by the pervasive impact of Western lifestyles in metropolitan areas, are driving a major socioeconomic upheaval in India today. Not only are these profound shifts reshaping family dynamics, but they are also upending profoundly established social conventions. In this ever-changing environment, older people's status is clearly changing, as evidenced by the rapid decline of customary values like respect, love, and caring. This degradation exacerbates the difficulties older people have in this changing social environment by adding to a pervasive sense of neglect.

This study focuses on a carefully chosen sample of fifty elderly people living in institutionalized settings and fifty more in non-institutionalized settings in Mysore. The main goal is to clarify the complex connection between death anxiety and loneliness in older people living in both institutionalized and non-institutionalized environments.

The study's conclusions present a moving story: older people living in institutions experience higher rates of loneliness than older people living in non-institutionalized settings. In institutionalized settings, the old support networks seem to break down faster. Remarkably, the study finds that the two groups' levels of death dread are remarkably similar. Even though their living situations are different, both of these old people have a similar level of fear about their inevitable death. This implies that the impending death specter is greater than the particular circumstances surrounding their lives.

## **DEATH ANXIETY**

An abnormal or persistent fear of one's own mortality is known as death anxiety, and it is characterized by a deep sensation of dread and trepidation while thinking about dying or ceasing to exist. Often called thanatophobia, this psychological condition is distinct from necrophobia, which is a fear of dead or dying people or objects, not death itself. Elevated death anxiety in older adults has been associated with things like compromised ego integrity, more medical problems, and more psychological problems.

Death anxiety is a complex phenomenon that involves emotional, cognitive, and motivational aspects that change depending on a person's developmental stage and sociocultural experiences (Lehto & Stein, 2009). The risk factors for loneliness among older persons living in independent living retirement communities were examined by Adams et al. (2004). Their research revealed that higher levels of loneliness were linked to a smaller social network, recent loss, and fewer visits, especially from friends.

Duff & Hong (1995) looked studied the connection between death anxiety in the elderly and religious service attendance, and found that the frequency of religious service attendance was the most important predictor of death worry. Remarkably, there was no similar effect seen for the subjective value of religion or non-public religious practices like meditation and private prayer. It's interesting to notice that simply going to religious services increased anxiety about dying, highlighting the complex relationship between religious activities and existential worries in the elderly.

## METHODS

### STATEMENT OF THE PROBLEM

To study the effect of loneliness on death anxiety among elderly people residing in institutionalised and non- institutionalised homes.

### OBJECTIVES OF THE STUDY

1. To understand the impact of loneliness on death anxiety among elderly residing in institutionalised and non- institutionalised homes.
2. To know the difference between loneliness and death anxiety among elderly men and women residing in institutionalised and non-institutionalised homes.
3. To understand the impact of loneliness and death anxiety in elderly with spouse and without spouse residing in institutionalised and non-institutionalised homes.

4. To assess loneliness and death anxiety among pension and non-pension elderly residing in institutionalised and non-institutionalised homes.

### **HYPOTHESIS OF THE STUDY**

1. There is significant difference in the impact of loneliness on death anxiety among elderly residing in institutionalised and non-institutionalised homes.
2. There is no significant difference between elderly men and women in their loneliness and death anxiety.
3. There is significant difference between elderly with and without spouse in their loneliness and death anxiety.
4. There is no significant difference between pension and non-pension elderly in their loneliness and death anxiety.

### **SAMPLE DESIGN**

Samples will be selected from elderly residing in institutionalised and non-institutionalised homes, 50 samples from institutionalised and 50 from non-institutionalised. In gender researcher selected 25 men and 25 women. The samples selected are from Mysore.

### **RESEARCH DESIGN**

2 x 2 x 2 Factorial design

### **TOOLS**

1. Perceived Loneliness Scale (L-scale): Perceived Loneliness Scale by Dr. Praveen Kumar Jha (1997) was administered to the whole sample to measure their level of loneliness (Annexure I). The L-scale consists of items which conceptualized loneliness as a unidimensional psychological state of an individual.
2. Death Anxiety by Dhar, Mehta and Dhar (1998): This test is constructed by Upinder Dhar, Savita Mehta and Santosh Dhar. Total 10 statements are there.

### **PROCEDURE OF THE STUDY**

The primary purpose of the research is to study the loneliness and death anxiety among elderly in institutionalised and non-institutionalised homes. In order to collect data from the elderly residing

in institutionalised and non-institutionalised homes, a visit was made to the institutions and homes. This was done by administering individually by using the Loneliness scale and Death Anxiety scale. Prior to administration of the test in an institution so investigated, co-operation of the Heads/Authorities are to be taken. While visiting homes, co-operation from family members was taken in order to make an attempt to create a healthy rapport among the elderly participants.

The process of data collection by using the questionnaire method. First, the investigator handed over the questionnaire to the participants. The procedure and purpose of the study was explained to the participants and the investigator was available to answer all the participants' questions. Subjects were supposed to be seated in a quiet place to answer the questionnaire. General information regarding age, marital status, qualification was collected from them. With the above instructions the test was administered by first giving the Loneliness scale for about 15- 20 minutes for the participant to finish. After about 5 minutes, a scale on death anxiety is given for the participant to respond. Questionnaires are returned to the investigator when they are completed. All the data and information collected are kept confidential. Precautions were taken to ensure that the subject doesn't take any help from others in giving response. Thus the data collected was tabulated and analysed through SPSS.

### **STATISTICAL ANALYSIS**

Mean, Standard deviation and T test will be used to analyse the data.

### **ANALYSIS OF RESULTS**

This chapter includes the analysis of results of the data obtained in the present investigation. The data was collected from the elderly men and women residing in Institutionalised and non-Institutionalised homes in Mysore on loneliness and death anxiety.

Table-1 Correlation between loneliness and death anxiety

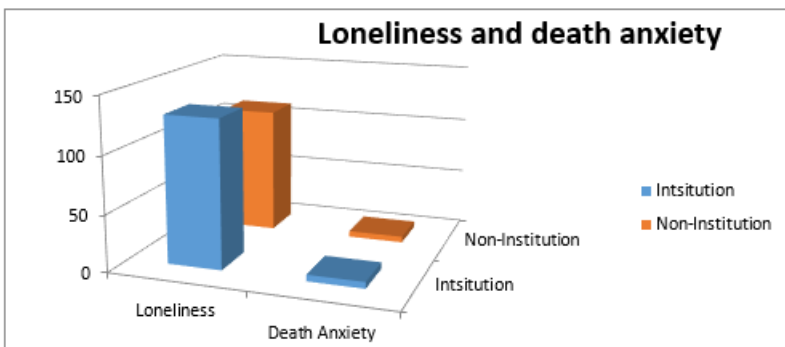
Group	Pearson Correlation	Loneliness	Death Anxiety
		1	.639**
Loneliness	Sig. (2-tailed)		.000
	N	100	100
		.639**	1
Death Anxiety	Sig. (2-tailed)	.000	
	N	100	100

Relationship between loneliness and death anxiety a significant and positive relationship was observed correlation. Co-efficient of .639 is found to be significant at .000 level.

Table-2 Mean, SD, t-value of institutionalised and non-institutionalised elderly people in their loneliness and death anxiety

	Group	N	Mean	SD	Df	T-Value	P-Value
Loneliness	Institution	50	129.7000	17.58739	98	4.797	.000
	Non-Institution	50	111.5800	20.10492			
Death Anxiety	Institution	50	5.7600	1.45069	98	1.795	.076
	Non-Institution	50	5.2800	1.21286			

Graph No.1.shows the differences between Institution and Non-Institutionalized Elderly People in their loneliness and death anxiety.



In loneliness a significant difference was observed between institutionalised and non-institutionalised elderly where t-value of 4.797 is found to be significant at .000 levels. From the mean values it is clear that institutionalised elderly experienced significantly higher loneliness (M=129.70) compared to non-institutionalised elderly (M=111.58).

In death anxiety a non-significant difference existed between institutionalised and non-institutionalised elderly (t=1.795; p=.076). The mean of death anxiety scores for institutionalised and non-institutionalised elderly were 5.76 and 5.28 respectively, which were statistically same.

Table-3 Mean, SD, t-value of elderly male and female in their loneliness and death anxiety

	Gender	N	Mean	SD	df	t-value	p-value
Loneliness	M	50	116.1000	21.11412	98	-2.217	.029
	F	50	125.1800	19.82854			
Death Anxiety	M	50	5.2200	1.2170	98	-2.265	.026
	F	50	5.8200	1.42414			

Graph.No.2.It shows the Loneliness and death anxiety in male and female elderly people.

In loneliness not much difference was observed between male and female elderly where t-value of -2.217 is found to be significant at .029 level. From mean values it is clear that elderly female respondents experienced higher loneliness (M=125.1800) compared to elderly male respondents (M=116.1000).

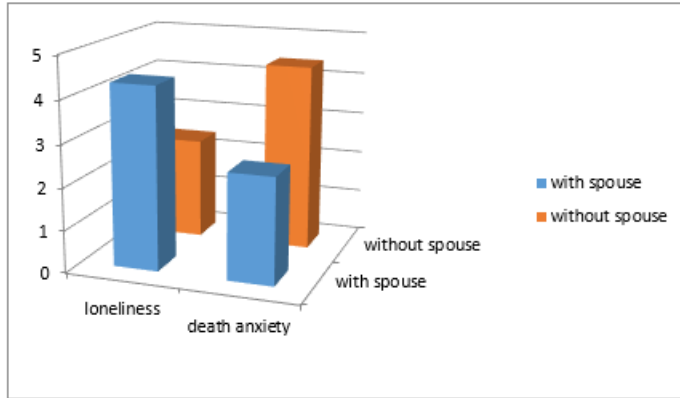
In death anxiety a significant difference existed between male and female elderly (t = -2.265; p = .026). The mean of death anxiety scores for male and female were 5.2200 and 5.8200 respectively.

Table - 4 Mean, SD, t-value of elderly with spouse and without spouse in their loneliness and death anxiety

Spouse	N	Mean	SD	df	t-value	p-value
Loneliness						
With Spouse	54	109.3148	18.90874			
Without Spouse	46	133.9348	14.27103	98	-7.245	.000
Death Anxiety						
With Spouse	54	5.0741	1.28639			
Without Spouse	46	6.0435	1.24644	98	-3.810	.000

Graph.No.3. Shows differences between with and without spouse elderly people and their level of loneliness and death anxiety.





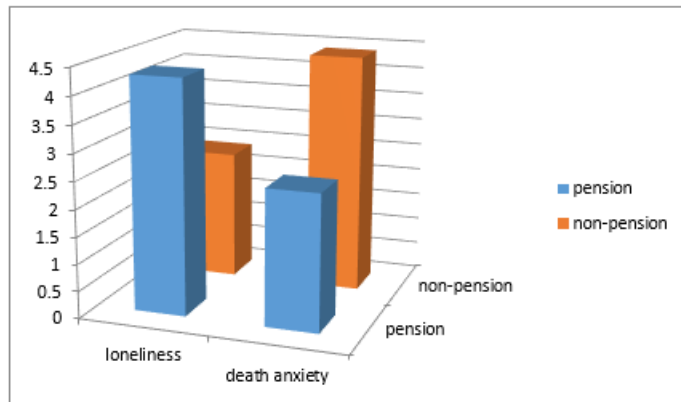
In loneliness highly significant differences was observed between elderly with spouse and without spouse where t-value of -7.245 is found to be highly significant at .000 level. From the mean scores it is clear that elderly without spouse experienced a higher loneliness (M=133.9348) compared to elderly with spouse (M= 109.3148).

In death anxiety highly significant difference existed between elderly with spouse and elderly without spouse (t=-3.810; p=.000). The mean of death anxiety scores for elderly with spouse and without spouse were 5.0741 and 6.0435 respectively.

Table-5 Mean, SD, t-value of elderly with pension and non-pension in their loneliness and death anxiety

	Pension	N	Mean	SD	df	t-value	p-value
Loneliness	Yes	51	116.7843	21.36756	98	-1.909	.059
	No	49	124.6531	19.78799			
Death Anxiety	Yes	51	5.2941	1.23764	98	-1.721	.088
	No	49	5.7551	1.43658			

Graph.No.4.Shows the loneliness and death anxiety between the pensioner and non-pensioner.



In loneliness a significant difference was observed between pension and non- pension elderly where t-value of -1.909 is found to be significant at .059 level. From the mean score it is clear that non-pension elderly experienced higher loneliness (M=124.6531) compared to pension elderly (M=116.7843)

In death anxiety a non- significant difference existed between pension and non-pension elderly (t-value= -1.721; p=.088). The mean of death anxiety score for elderly pension and non-pension were 5.2941 and 5.7551 respectively.

## DISCUSSION, SUMMARY AND CONCLUSION

### MAIN FINDINGS OF THE STUDY

- Compared to their non-institutionalized counterparts, elderly people living in institutionalized settings reported higher levels of loneliness.
- There was, however, very little difference in the death anxiety scores of older people living in institutions compared to those living in the community.

- There was a gender difference in the experiences of social isolation, as seen by the higher levels of loneliness displayed by female respondents.
- It's interesting to note that there was a substantial difference in respondents' death fear between male and female, highlighting gender differences in concerns about dying.
- Seniors without wives had higher degrees of loneliness, providing insight into how marital status affects social ties as people age.

Surprisingly, a highly significant degree of variation in death dread was noted between older people with and without spouses, highlighting the subtle emotional and psychological aspects of marital companionship as people age.

- Significant differences were found in the levels of loneliness experienced by senior people with pensions and those without, indicating that one's ability to maintain or increase one's financial stability may be critical in reducing or escalating experiences of social isolation.
- In contrast, no discernible difference was seen between elderly people with pensions and those without, suggesting that financial concerns might not have the same impact on existential worries as they do on loneliness.

## **DISCUSSION ON HYPOTHESIS**

H1: There are notable distinctions between old individuals who are institutionalized and those who are not, with the former showing higher degrees of loneliness. The idea supports the findings of Chadha and Kanwara (1998), which highlight the influence of living arrangements on loneliness, depression, and social support. But there was no discernible difference in the two groups' death fear, which is in line with the findings of Templer, Ruff, and Franks' (1977) study on the weak correlation between death dread and age.

H2: There are notable gender disparities in loneliness and death fear among the elderly. Research from Balachandran et al. (2007) and Kausar & Saima (2002), showing gender differences in alienation, life satisfaction, and death dread, supports the notion that female respondents felt more alone.

H3: Peters and Liefbroer's (1997) study on older adults' well-being supports the claim that there are notable disparities in loneliness between elderly people who have spouses and those who do not. Loneliness increases when a partner is not present. But there was no discernible difference in the two groups' levels of death dread.

H4: Loneliness and death anxiety do not significantly differ between older people receiving pensions and those who do not. Economic challenges are a contributing factor to anxieties, according to Khan's (1997) study on anxiety. This suggests that economic factors should be taken into account when evaluating psychological well-being.

### **GENERAL DISCUSSION**

The study shows a significant and positive relationship between loneliness and death anxiety among elderly people. The results of the study show that there is a significant difference between the institutionalized and non-institutionalized elderly people in their level loneliness and death anxiety. It also shows highly significant difference between elderly with spouse and without spouse. Whereas much difference was not observed between male and female elderly in their loneliness compared to in their death anxiety.

### **CONCLUSION**

The purpose of this study was to look into how loneliness affects death anxiety in older people who live in institutionalized and non-institutionalized environments. The results showed that among the senior participants, loneliness and death dread were positively correlated. The study revealed a noteworthy difference in the degrees of loneliness and death anxiety experienced by older adults who are institutionalized compared to those who are not. These findings highlight the complex differences in psychological well-being that older people experience depending on their living situation, highlighting the significance of taking residency into account when addressing issues related to loneliness and death dread.

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