

THE EFFECTS OF DEATH AND DYING EDUCATION ON  
ADOLESCENTS' DEATH FEAR AND PERCEPTIONS IN LIFE

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A THESIS  
SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIRMENTS  
FOR THE DEGREE OF MASTER OF SCIENCE  
IN THE GRADUATE SCHOOL OF THE  
TEXAS WOMAN'S UNIVERSITY

COLLEGE OF NUTRITION, TEXTILES,  
AND HUMAN DEVELOPMENT

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DENTON, TEXAS

MAY, 1981

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TEXAS WOMAN'S UNIVERSITY

The Graduate School  
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April 13, 1981

We hereby recommend that the thesis prepared under  
our supervision by Beverly Elaine Lejeski  
entitled THE EFFECTS OF DEATH AND DYING EDUCATION ON  
ADOLESCENTS' DEATH FEAR AND PERCEPTIONS IN LIFE

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### Acknowledgements

This thesis is a result of the efforts of many individuals, The author expresses her appreciation to all who in any way contributed to the completion of this project.

Appreciation is accorded to the graduate committee: Dr. June Impson, Dr. Jennings, and Mrs. V. Young for providing guidance and direction toward the completion of this thesis. A special thanks to Dr. Impson for all her effort and devotion to my goal.

Deep gratitude is expressed to Dr. Wunderlich at the University of Texas at San Antonio, for patient guidance, encouragement, and technical advice in the collection and evaluation of the research data.

Special thanks is given to the Burkarth family who generously gave their time by providing transportation to Texas Woman's University for the many committee meetings.

Appreciation is extended to the Homemaking students who participated in this project and to Jewel Cogburn, Ruby Hackworth, Gail Smith, Joyce Smith, Belinda Trevino (John F. Kennedy High School) and Dr. Mueller (Incarnate Word College) for their cooperation and interest in my professional growth.

A special recognition is awarded to Faye Mangelsdorf for her dedication in typing and delivering the completed work. I will always remember her patience and good nature.

Sincere gratitude is given to my family; Mr. and Mrs. A. Lejeski, Lois, Wayne, Randy, and Roxanne for their love and continual confidence in my ability. Thank you for always wanting the best for me.

Deep appreciation is also expressed to my good friends, Mary Fortin, David Mumm, and Emily Shake, who provided the emotional support and encouragement during the discouraging hours.

My deepest gratitude and love is extended to Don Burkarth and Mary De La Cruz. Without their belief in my ability, their willingness to share their knowledge, and their emotional support, this thesis could not have been completed.

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## CHAPTER I

### THE EFFECTS OF DEATH AND DYING EDUCATION ON ADOLESCENTS' DEATH FEAR AND PERCEPTIONS IN LIFE

#### Introduction

Death Education offers the opportunity to develop an understanding of a stressful life situation. This controversial addition to academic curricula uncovers the fears and misconceptions about death and provides secondary students with information for better coping abilities. Allowing people to become aware of the aspects of death and dying and how to cope may cause individuals to redefine their purpose in life. Teaching individuals to deal with this crisis is a challenge for educators that may be answered by experiences provided in a death and dying unit.

#### Statement of Problem

Secondary Home Economics curricula barely mention the topic of death and dying. Family life textbooks and curricula allot few lines to the topic of death and dying (Sommerville, 1971). Because adolescents are frequently exposed to death-related circumstances, it is important to incorporate the subject of death and dying in Home Economics curricula. With this instruction, the

adolescent could acquire information and cultivate coping skills for this life crisis (Nelson & Peterson, 1975). With the acknowledgement of his own mortality, the adolescent may also gain a greater clarification of purpose in human existence.

#### Purpose of Study

The purpose of this study is to determine the effectiveness of a death and dying education unit in changing secondary students' attitudes about death and their perceptions in life.

#### Objectives of Study

The objectives of this study are to determine the degree of change in death anxiety as measured by the Collett-Lester Fear of Death Scale, after implementation of a death and dying curriculum, and to determine the degree of change in perceptions of life as measured by the Purpose in Life Test after implementation of a death and dying unit.

#### Assumptions

Education affects cognitive, affective, and psychomotor domains of learning, and learning subsequently changes attitudes and behavior (Bloom, 1956). Individuals must know and understand basic facts about a subject before



they can apply the information to their lives. Thus, informing students about the death and dying process should increase their knowledge and understanding of this phenomenon. Because of the increased comprehension of death and dying, students will then desensitize fears about death and may gain more clarification of purpose for their lives.

A justification for the relationship between purpose in life and death fear can be found in Freudian theory. Erikson, a Neo-Freudian, suggests that personality development occurs throughout man's lifetime, from birth to old age. He divides these ego adjustments into eight interrelated stages. The last step of his developmental theory is integrity versus despair (Erikson, 1968). Erikson postulates that a person who is pleased with his accomplishments and involvements during his lifetime will be more accepting of death. However, if an individual looks upon his life as being unsatisfying and misdirected, he may experience feelings of despair, resentment, and subsequently a high degree of death anxiety (Erikson, 1968). Death education helps strengthen an individual's purpose in life, lessens a person's fear about this inevitable event, and supplies a person with valuable information (Pine, 1977).

### Hypotheses

- 1) The experimental group's pre and post test scores on the Death and Dying Content Measure will vary significantly.
- 2) The experimental group's post test scores on the Death and Dying Content Measure and on the Collett-Lester Fear of Death Subscale one (fear of death of self) will relate significantly.
- 3) The experimental group's post test scores on the Death and Dying Content Measure and on the Collett-Lester Fear of Death Subscale two (fear of death of others) will relate significantly.
- 4) The experimental group's post test scores on the Death and Dying Content Measure and on the Collett-Lester Fear of Death Subscale three (fear of dying of self) will relate significantly.
- 5) The experimental group's post test scores on the Death and Dying Content Measure and on the Collett-Lester Fear of Death Subscale four (fear of dying of others) will relate significantly.
- 6) The experimental group's post test scores on the Death and Dying Content Measure and on the Purpose in Life Test will relate significantly.

7) The experimental and control groups' post test scores on the Purpose in Life Test will vary significantly.

8) The experimental and control groups' post test scores on the CLFDS subscale one (fear of death of self) will vary significantly.

9) The experimental and control groups' post test scores on the CLFDS subscale two (fear of death of others) will vary significantly.

10) The experimental and control groups' post test scores on the CLFDS subscale three (fear of dying of self) will vary significantly.

11) The experimental and control groups' post test scores on the CLFDS subscale four (fear of dying of others) will vary significantly.

#### Definitions

1) The death and dying education unit - Six, 55 minute sessions about topics dealing with death. The unit includes the following topics: grief dynamics, psychological adjustments of the dying person, funeral and burial rituals, consumer aspects of funerals, cultural and religious attitudes towards death, and the meaning of death.

2) Home and family living course - A one or two semester homemaking course which covers the four areas of self: appreciation of self, self in groups, self in the future, and self in the community. This course, offered to junior and senior high school students, also includes subject matter about the family as managers and consumers, parenting, and the family life cycle.

3) The Jean Collett-David Lester Fear of Death Scale - An instrument with four Likert Scales to assess the four fears of death. These fears are: the dying of self, dying of others, death of self, and the death of others. This test attempts to distinguish between the fear of death and the fear of the process of dying and to determine whether these fears are for the individual or for another.

4) The Purpose in Life Test - A semantic-differential scale used to detect the degree of "existential vacuum" (Frankl, 1968, p. 54), i.e., the degree of boredom created by failure to find a meaning and a purpose in life.

5) Death and Dying Content Measure - An experimenter designed cognitive test over the content of the death and dying educational unit.

6) Adolescent - Any individual between the ages of 12 and 17 years.

## CHAPTER II

### A REVIEW OF THE LITERATURE

A general review of literature is presented in this chapter. The philosophy, objectives and current directions of thanatology will be outlined. Current death and dying educational research will also be discussed.

#### Relationship Between Death Fear and Perceptions in Life Clarification of Meaning in Life

Accepting and understanding the death and dying process has been related closely to the degree of purpose and quality of individuals' lives (Frankl, 1968; Fiefel, 1959; Erikson, 1968; Kubler-Ross, 1969, 1975). Frankl stated that meaning in life is unique to everyone because each person establishes different life goals. Therefore, goals and the sacrifices that accompanied achievements provided purpose and, subsequently, meaning in life. When man does not strive for goals, he is considered a meaningless entity. He will subsist in a depression where pessimism, and boredom abound, an "existential vacuum" (Frankl, 1959, p. 108). In order to

decrease "existential vacuum", Frankl (1959, p. 108) postulated that man needs to increase meaning in life. Frankl also suggested that if an individual's life is meaningless, then his death is also fruitless. Blazer's (1973) research supported Frankl's theory that the decrease of death fear significantly increases meaning in life.

### Reality of Life

Feifel and Kubler-Ross addressed the philosophical relationship between the understanding of death and the understanding of life. According to Feifel (1959), man's behavior has been constrained by his conscious and sub-conscious fears of death. The variables of death fear, (i.e. fear of the end, loneliness, punishment, the unknown, the uncertain future of our dependents, and failure) may be reduced by knowledge of the death and dying process.

According to Kubler-Ross (1969) (1975), admission of an individual's mortality has significantly affected attitudes toward loved ones and self. Life intensified as the recognition of mortality began. Increasing denial of death has led to refusal of the reality of life and, subsequently, negation of "the final stage of growth" (Kubler-Ross, 1975, p.166).

### Personality Development

Erikson, a neo-Freudian, theorized that personality growth occurs in a series of developmental stages. Each stage has confronted man's ego in such a way as to require major personality restructuring. These eight stages are: (1) basic trust vs. basic mistrust, (2) autonomy vs. shame and doubt, (3) initiative vs. guilt, (4) industry vs. inferiority, (5) identity vs. role confusion, (6) intimacy vs. isolation, (7) generality vs. stagnation, and (8) integrity vs. despair.

The critical stages of identity vs. role confusion and integrity vs. despair influence an individual's attitude toward life and death. During the adolescent crises of self identity, the teenager has doubts about his position within his peer group, his role in society, and his future occupation. It is during this stage that the young adult establishes directions, values, and, eventually, a unique meaning in life. Kastenbaum (1966) suggests that confusion and the inept feelings that accompany the adolescent period are often displaced into a future event, death. Maurer agrees with Kastenbaum (1966) that the adolescent's "problem of identity or purpose" is "...fundamentally the need to find a satisfactory

sublimation for the death anxiety" (1964, p. 89).

The last stage of Erikson's developmental series, integrity vs. despair, can be related to both the adolescent's discovery of self and/or to the crises of dying. Both personal dilemmas stimulate evaluation of an individual's life. Erikson theorized that man's acceptance of mortality begins with clarification of purpose in life. Thus, educating adolescents about death and dying can spur definition of life goals which may lead to a greater satisfaction in life.

### The Need For Death and Dying Education

#### Exposure to Death Related Events

The need for death and dying education on the secondary level is built on the following premises. First, it can be assumed that adolescents have faced and discussed the crises of death since childhood. Many teenagers have experienced the death of a loved one, conversed about death in academic disciplines, and viewed death and dying on television and in movies (Nelson & Peterson, 1975). Whether the majority of teenagers can resolve the inner emotional conflict of death without adequate knowledge of this crisis is uncertain.



### Death Attitude

Finally and most importantly, it is not until adolescence that children begin to realistically view death as a natural part of the life cycle (Hardt, 1979). Adolescents do think about death, and their attitudes are influenced by age, academic achievement, and personality variables (Maurer, 1964) (Fallon, 1976) (Hardt, 1975). Therefore, the adolescent period is an opportune time to allow the students to analyze their death attitude.

### Goals of Death and Dying Education

The goals of death and dying education are "inventive", "preventive," and "postventive" (Leviton, 1977, p. 46). Death education attempts to help people during the trauma of death (inventive), before the death of self or loved one (preventive), and after the emotional impact of death (postventive).

### Coping Skills

Death and dying education provides cognitive knowledge to affect the understanding of this life crisis by the cultivation of coping skills. These coping skills are: (1) to understand personal grief (2) to be able to express grief (3) to verbalize about personal fears of

death and (4) to understand and to give consolation to others. Besides concentrating on personal crises, death and dying education stresses the needs of the dying. Death education encourages and advocates a "...comfortable and intelligent interaction with the dying as human beings who are living until they are dead" (Leviton, 1977, p. 259).

#### Reduction of Death Fear

Some children, adolescents, and some adults accumulate distorted fears about death because of the tendency toward omission of the information about this natural part of life from textbooks and curricula. Throughout the family life studies of secondary and higher education, scant attention is given to death, grieving, and bereavement (Somerville, 1971). Great detail is dedicated toward the other stresses of the family life cycle, marriage, child rearing, and retirement. However, the death of a loved one or of one's self, the most profound of all experiences, is seldom mentioned.

The absence of the topic of death and dying in textbooks and curriculum guides only reflects societal denial of this life experience. According to previous studies, the general population views death education as a taboo subject even more discomfoting than sex

education (McLure, 1974). These suppressive attitudes have contributed to the controversey of death and dying education.

The actual process of death and dying has also been visibly eliminated from the family. Most family members die in nursing homes or hospitals where this personal event is technical and less personal. "We have been compelled in an unhealthy measure to internalize our thoughts and feelings, fears, and even hopes concerning death" (Leviton, 1977, p. 184). Therefore, proponents of death education hope "to reduce and redirect, not totally eliminate, the fears associated with death, to instill the inevitability and power of death, and to assist students in examining and integrating these facets of death in their lives (Kurylychek, 1977, p. 46)".

#### Acceptance of Mortality

Another objective of death and dying education is to help students acknowledge their mortality. The awareness of the inevitability of one's own death and that of loved ones allows people to evaluate and formulate life's priorities and values. Admission of the cessation of life promotes the development of life goals and increases the appreciation of self and loved ones (Kubler-Ross, 1975).

### Consumer Information

Funeral and burial arrangements rank as one of the top five major expenditures in an individual's life time (Leviton, 1978). It is essential to educate the public to the growing commercial death market. Because funeral arrangements are a substantial monetary investment, death and dying education teaches wise consumer decision-making in the midst of emotional stress. Death education informs people about the cost variables, the alternatives to traditional burial rituals, and the advantages of preplanning.

### Status of Death and Dying Education

#### Historical Overview of Thanatology

According to Pine (1977) the growth of death attitudinal research and thanatology (death education) can be divided into three time spans: the era of exploration, the period of popularity, and the decade of development. Presented is a brief synopsis of the developmental process of thanatology.

#### Early Years

Researchers, during the era of exploration (1928-1951), primarily assembled information for funeral directors with little emphasis on death attitudinal research and formal death education. The roles of funeral

directors were clarified as well, and psychological insight into grief was developed. The significant relationship between bereavement and the attitudes of morticians was also investigated. Interest about the impact of death on children and the analysis of suicidal behavior expanded (Pine, 1977).

#### Intermediate Years

During this decade of development (1958-1967) serious research on death attitudes and formal death education commenced. Feifel (1959) significantly influenced academic research and thoughts about death and dying. He examined the variables of death fear in philosophical, religious, and cultural terms. Using Feifel's work as a spring board, Fulton, Jackson, Kalish, Kastenbaum, Leviton and others inaugurated formal death education classes and seminars on collegiate campuses across the United States during the mid 1960's. Because of the impetus of death and dying education, Omega, a professional journal, and the Foundation of Thanatology, an educational and research clearing house for death and dying education, were established.

Much attention during these years was given to the process of death and dying in institutions. Death

attitudes of dying patients and medical personnel were studied. Also, during these years, a few studies analyzed the impact of death on the societal and familial structure of the United States.

### Recent Years

Three major organizations were established during the period of popularity (1968-1977) that formulated current thoughts and spurred additional research about thanatology. The Omega Project of the Department of Psychiatry at Massachusetts General Hospital, which serviced dying patients and their families, the Center for Psychological Studies of Dying, Death and Lethal Behavior at Wayne State University, and the Fulton's Center for Death Education and Research at the University of Minnesota were founded. The latter two foundations supported research projects and teaching programs about death education.

Death attitudinal research broadened during these years and vitalized death education. Kubler-Ross (1969) promoted the pursuit of death and dying research by reporting the psychological trauma of dying patients and their families. Research, at this time, on death denial, bereavement, dying, patient care, and aging

proved invaluable to professionals of thanatology (Pine, 1977).

Curricula, teaching aids, and articles dealing with death education increasingly appeared in the literature. Thanatological researchers have contributed texts and bibliographies on death awareness, grief, children and death, and cultural attitudinal differences, and other thanatology topics. During these years, the International Work Group in Death Education, chaired by Eugene Knott, and the Forum for Death Education and Counseling, Inc. were organized to aid death educators in pursuit of current research data and the distribution of education materials.

#### Higher Education

The number of college courses in death and dying education has expanded from 20 to an estimated 1,200 since 1970 (Durlak, 1979). The college death education courses are structured upon these variables: (1) audience; (psychology, theology, physical education, medical students) (2) learning domain; affective and/or cognitive (3) number of students (4) the endorsing disciplines and (5) methodology. Although critics of death education suggest that death and dying classes attract many suicidal students,

studies indicate that a very small percentage of students are suicide prone and the number of pupils committing suicide after the death education courses is virtually negligible.

### Secondary Education

More than 100 secondary schools (Hardt, 1979) across the United States have implemented death and dying topics within their curriculum. The literature indicated that most death and dying topics are incorporated as units into classes of sociology, home economics, literature, psychology, and consumer education. Such unit workshops, and/or minicourses are entitled "Philosophy of Death," "Death Education," "Death and Old Age" (Ulin, 1977). There is little information as to the number of complete semester (four and one half months) courses of death education offered on the high school level and the length of the units.

### Curriculum

Curriculum of collegiate and secondary education course content remains multi-disciplinary, involving the academic areas of psychology, literature, anthropology, economics, theology, and science (Berg & Daugherty, 1973; Corr, 1978; Leviton, 1977). Common course topics of



death education include the philosophical meaning of life and death, definitions of death, grieving dynamics, impact of death on children, consumer information, psychological adjustments to dying, and cultural and religious concepts of death. Current societal issues such as abortion, teenage suicide, euthanasia, and war are also studied.

Various teaching methods and situations are employed to explain and to analyze the concept about death. Because of the multi-disciplinary approach to death education, instruction tends to be creative, innovative and stimulating (Corr, 1978). Death education frequently uses speakers from and field trips to mortuaries, hospitals, crematories, and hospices (lodging for recovering patients or those who are terminally ill and not requiring intensive care in a less formal atmosphere than a hospital). Group discussion, analysis of literature, audio-visual media, role playing, and essay writing are also repeatedly used in death education classes.

Numerous course guides, extensive bibliographies, books, and audio-visual programs are now easily available for the structuring of death education classes. Several notable education audio-visual companies also provide educational media about death and dying and many

educational clearing houses offer curriculum guides and text books for death and dying education (see Appendix K). Many of these textbooks, course outlines, bibliographies, and audio-visual programs have been created by thanatology researchers.

#### Current Death and Dying Educational Research

Studies about the effects of death and dying education upon death attitudes and perception in life have been few in number. Approximately six research projects have been conducted from 1975 to 1979. The major studies, executed in health, sociology, and psychology classes, have been performed on the college level. Only two projects have involved secondary students. These major studies will be discussed here.

#### Reduction of Death Fear

In Mueller's (1976) research sample, two groups of eighth grade parochial students (50% male and 50% female) were placed in a 12 week death and dying course. Her chief objective was the reduction of death fear. The two groups of students were post and pre tested utilizing two forms of her self-constructed fear of death scale. They were tested immediately after the lessons. The groups were retested four weeks later, and finally eight weeks

later. Data analysis revealed no significant difference between the treatment and the control groups' scores on the death attitudinal scale. Mueller (1976) offered several reasons for the results. The scale was not valid, thus not accurately measuring this type of anxiety. Secondly, since early adolescence is a very emotional period, "perhaps a unit on death education at this time served only to further the continued repression of death fears" (Mueller, 1976). The researcher questioned the capability of these early adolescents to apply abstract thinking to meet the objectives of the course.

With a similar goal, Bailis & Kennedy (1977) implemented a death education course. Two high schools, each different in geographic and socio-economic factors, were selected. The experimental group was enrolled in a death education module, and the control group was composed of volunteers from a sophomore English class. The Collett-Lester Fear of Death Scale and The Templer Death Anxiety Scale were administered at the beginning and at the end of this course. After pre and post testing the subjects, the researchers found that the two modules did not meet their designed goal, the reduction of fear of personal death. The investigators detected that the adolescents

exhibited a greater fear of death of self after treatment than before. However, Bailis & Kennedy (1977) found that the students revealed less fear of death of others. According to Bailis & Kennedy, this death and dying unit successfully led the students to the first stage, increasing their fear of death by death-related activities. Nonetheless, the unit failed to bring the students to the second and third stages which are respectively: Lowering the students' defense mechanisms about death and dying, and finally, decreasing their anxieties by facing their fear of death and dying.

In another study (Hardt, 1976), college sophomores and juniors (ages 19 to 27 years) were subjected to approximately 45 hours of class time outlining various death and dying topics. A Thurston Equal Appearing Interval Attitude Scale was given to the 86 students as pre and post tests. Hardt (1976) revealed that "it is easier to change or modify attitudes toward death among those who have the more unfavorable attitudes." The subjects with the more favorable attitudes toward death deviated only slightly. The investigator concluded that a change of attitude about death and dying depends upon the initial attitude of the subject.

Howlter & Epley's (1979) study indicated that a death and dying education unit did not reduce the death

fear of the 17 students enrolled in the course, Sociology of Death and Dying. The students met two hours a day for four days a week over a five week period. Student attitudes toward death, abortion, the terminally ill, suicide, euthanasia, and capital punishment were addressed in this study. Many teaching methods were used to explain the concepts about the above issues. An experimenter designed semantic differential scale was used as pre and post tests to measure the students' attitudes. Results revealed that the death education students exhibited a more liberal attitude toward abortion, and a more positive attitude toward suicide than the control group, students enrolled in the Sociology of the Family course. Both groups showed no significant difference in attitudes concerning euthanasia and capital punishment. The researchers suggested that death education students enrolled in this course for therapeutic reasons, since they exhibited a favorable attitude toward suicide. Howlter & Epley (1979) commented that death and dying education had a cognitive influence on the students' attitude, but the affective influences need additional studies.

Exceptions to the above studies are Murray (1974),

Watts (1977), and Leviton & Fretz (1978-79). Their research revealed positive attitudinal change after a death educational unit. Murray (1974) emphasized the benefits of a longitudinal study of the effectiveness of death education. The sample of 30 registered nurses was exposed to six sessions of death and dying education. Using the Templer's Death Anxiety Scale as pre and post tests, the nurses exhibited a significant decrease of death anxiety after the second four week post test. Murray theorized that the decrease of death anxiety during the four week period after the initial post test was due to reflection and utilization of the information received in the seminars.

In Watts' (1977) study, the treatment and control groups were drawn from different health education classes. The university students were subjected to five one hour class meetings, each session lasting 50 minutes. The Hardt Attitude Scale and the Watts-Andrew Attitude questionnaire were given as pre and post tests to the 39 experimental group members and 40 control group participants. Watts' research results revealed a favorable change in death attitude. Watts recognized the value of a brief death educational unit to change death attitudes

and recommended further longitudinal study.

Leviton & Fretz (1978-79) conducted two death attitudinal studies. One study compared death attitudes and beliefs of students in a death education course with students enrolled in a sex education course. The other study contrasted thanatological students' death attitudes with the death and dying attitudes of students enrolled in an introductory psychology class. The 34 pupils from the sex education and the death education classes were matched according to age and sex, and the 174 students from the death education and introductory psychology course were also matched according to the same variables. The first study used the Collett-Lester Fear of Death Scale, Psychology Today questionnaire, Life Death Concept survey, and instructor designed questionnaire as pre and post tests. The second group was administered a test consisting of 125 items. The items included the Collett-Lester Fear of Death Scale, demographic questions, suicidal attitudinal scale, and the Zung depression scale. The results indicated that the students in the death education class revealed less fear of dying of others, but had an increased fear of dying of self as compared to the students in sex education. However, the results revealed

that these students were more homogenous in their rating of death concepts than any other variable. The results also indicated that the death educated students favored family discussions about death. In comparing the results of the death education students to the psychology students, the death education students exhibited a significant decrease of fear of death of others, death of self, dying of others and dying of self than the students from the psychology class on post test results.

#### Death Fear Related to Purpose in Life Studies

Two studies have investigated the relationship between a person's degree of purpose in life and attitude about death. Blazer's (1973) three year study supported the hypothesis that there is a positive correlation between meaning in life and acceptance of death. Approximately 400 persons (200 males and 200 females) over 18 years of age, were tested using the Collett-Lester Fear of Death Scale and the Purpose in Life Test. This sample was not exposed to any death and dying education unit. The results indicated that persons who reported a high purpose and meaning in their lives tended to have less fear of death and a more positive acceptance of death. Testing for sex, age, and marital status bore no measurable



effects in the findings. Blazer (1973), drew these conclusions from his study.

(1) Degree of personal death fear is related to a person's lifetime goals.

(2) Degree of personal meaning in life is related to an individual's death attitudes.

(3) Educators have a responsibility to stress the importance of a meaningful life.

(4) Death and Dying education may lead children to acknowledge their mortality, resulting in a more meaningful adult life.

Pratt (1974) tested the objectives of a laboratory approach to death and dying education and its effects on the participants' awareness of the reality of personal death, fear of death, and purpose of life. Both control and experimental groups, college students, were matched according to age, religion, and personal experience. The Purpose in Life and Collett-Lester Fear of Death Scales were used as pre and post tests. The students were tested again 17 weeks after the death and dying work shop. Post test results of death laboratory participants

revealed three findings: (1) a higher degree of meaning in life, (2) higher awareness of personal death, and (3) a higher measure of death fear.

### Conclusions

As a result of this review of literature, several conclusions can be drawn. The amount of literature on the rationale of the need for death and dying education reflects academic support and interest in this new discipline. The objectives and the philosophy of death education have been defined in the past 20 years. The literature reveals curriculum guides, textbooks, and media materials are now readily available for death educators.

However, the research concerning the effectiveness of death and dying education has exhibited contradictory results. Mueller (1976), Howlter & Epley (1979), and Bailis & Kennedy (1977) post test results yielded no significant decrease of students' personal fear of death after the implementation of a death and dying educational unit. All three groups of researchers, Mueller (1976), Bailis & Kennedy (1977), and Howlter & Epley (1979), attributed the lack of positive changes in personal death attitudes on the identity crises of the adolescent period and

the lack of reliable death attitudinal scales.

Watts' (1977) and Murray's (1974) sample exhibited a significant decrease in personal death fear. They discussed the benefits of the death education course in changing students' attitudes about their fear of death of self. Bailis & Kennedy (1977) and Leviton & Fretz (1978-79) reported less fear of death of others on post test results of their death education studies. Only two of the above researchers, Bailis & Kennedy (1977) and Mueller (1976), performed studies at the high school level. All of the above researchers recommended additional research to investigate the relationship of the many variables of the personal fear of death and dying and the fear of the death and dying of others. The researchers also suggested that more studies are needed to determine if the objectives of death education are being met.

Degree of purpose in life related to death anxiety has not been extensively examined. Blazer (1973) reported a significant correlation between a high degree of purpose in life and a low level of death fear. Pratt's (1974) sample also exhibited a higher degree of purpose of life on post test results, but simultaneously, a higher degree

of death anxiety after completion of the death and dying education unit. From the review of literature, it is obvious that research on the relationship between degree of death fear to degree of purpose in life attitudes is still at its beginning.

#### Implications for Further Studies

As a result of this review of literature several implications can be drawn. The outcomes of the effectiveness of death and dying units are inconclusive because of the sparsity in educational research about thanatology. Many components of the methodology of the current research also need to be evaluated. A lack of empirical and longitudinal research exists detailing the effects of this new academic area on the students' perceptions in life. Studies by Muellar (1976), Watts (1977), Bailis & Kennedy (1977), and others recommend that more exacting research design, more accuracy of the testing procedures, and a closer consideration of internal and external validity are needed to draw any affirmative conclusions about the accomplishments of death education. Closer examination of death attitudinal measurements is also evident as proposed by Mueller (1976). Although a monumental research task, there is a need to investigate the

interrelationship between such variables as adolescents' age, motivation, death fear, and purpose in life.

## CHAPTER III

### METHODOLOGY

#### Population

The target population was adolescents enrolled in secondary home economics home and family living classes.

#### Sample Selection

The experimental (n=24) and control (n=24) groups were enrolled in two home and family living classes at John F. Kennedy High School in San Antonio; Texas. Ninety-five percent of the heterogenous sample were Mexican-American and five percent were Black American and/or Anglo-American. The students' academic achievement on the Comprehensive Test of Basic Skills (CTBS) was computed at the 30th percentile (according to the national average of secondary students). The socio-economic status of the experimental and control groups ranged from middle class to poverty level and the subjects of this experiment were from different types of family units (nuclear, extended, and/or one parent family).

### Description of Experimental and Control Groups

The experimental and the control groups consisted of 11th and 12th grade secondary students (between the ages of 16 and 18 years) from two separate home and family living classes. The home and family living class serving as the control group (n=24), had 8 males and 16 females. The students' overall mean scores on the Comprehensive Test of Basic Skills had been computed to the 35th percentile. The CTBS was given to these 11th and 12th grade students in their junior year of high school. The control class met from 12:30 p.m. to 1:30 p.m.

The Home and Family Living class selected as the experimental group (n=24) had 12 males and 12 females. The CTBS overall mean score for the 11th and 12th grade students had been computed to the 27th percentile. The experimental class met from 1:30 p.m. to 2:30 p.m.

### Instruments

Four instruments were used to investigate the effectiveness of a secondary death and dying education unit upon death fear and perceptions in life.

### Death and Dying Content Measure

A Death and Dying Content Measure (DDCM)(see Appendix A), designed by the experimenter, was an objective

examination. The test consisted of three parts, 19 matching, 16 completion, and 15 multiple choice items. The subject matter of the test was derived from the death and dying curriculum.

#### Scoring of the Death and Dying Content Measure

There were 50 items on the Death and Dying Content Measure. Each of the objective items was valued at two points. The possible score range for the content measure was zero to 100.

#### Administration of the Death and Dying Content Measure

The Death and Dying Content Measure was administered to the experimental group in the classroom setting by the experimenter. The instructions were printed on the test. There was no time limit to the test, but the students completed this test in approximately 20 minutes.

#### Purpose in Life Test

The Purpose in Life (PIL) Test developed by Crumbaugh and Maholick, is a semantic differential attitudinal scale to detect the degree of "existential vacuum" (Frankl, 1959, p. 54) in individuals, (see Appendix B). The PIL is a three part examination in which Part A consists of 20 items to be rated on a seven point scale. In each statement,



position 4 is defined as neutral, and different descriptive items are presented as anchors for point 1 and 7. For example, the item "my life is" had "empty, filled only with despair" as point 1, and "running over with good things" as point 7. Part B includes 13 sentence completion items and Part C requires the writing of a paragraph on personal aims, ambitions, and goals.

#### Scoring of the Purpose in Life Test

The 20 scaled items of Part A were the only portion of the instrument objectively scored. The score of Part A was the simple sum of the numerical values circled for these 20 items. Only Part A's total score was used for this study's data analysis. Part B and C were not administered in this study because the sentence completion and the essay required interpretation by a clinical psychologist, psychiatrist, or counsellor (Crumbaugh and Maholick, 1968). Raw scores of 113 or above suggested the presence of definite purpose and meaning in life, while raw scores of 91 or below suggested the lack of clear meaning and purpose.

#### Administration of PIL Test

The PIL Test was administered to the treatment and the control group in a classroom setting by the experimenter. The instructions, printed on the test form, could

be easily understood by adolescent subjects of about fourth grade level or higher. There was no time limit. Subjects completed this scale in 10 to 15 minutes.

#### Validity of PIL Test

Both construct and criterion (or concurrent) validity of the Purpose in Life Test had been assessed. Crumbaugh (1968) predicted correctly, from the standpoint of construct validity, the order of the means of four populations: N1 Successful business and professional personnel; N2 Active and leading Protestant parishioners; N3 College undergraduates; N4 Indigent nonpsychiatric hospital patients.

The concurrent or criterion validity of the instrument had been evaluated by two measures: (1) correlation between PIL scores and therapists' rating of the degree of purpose and meaning in life demonstrated by the patient, and (2) correlation between PIL scores and ratings by ministers of the degree of purpose and meaning exhibited by their participating parishioners. The relationship between the scale and therapists' ratings was .38 (Pearson Product-Moment, N=50). The relationship between the scale and the ministers' ratings was .47 (Pearson Product-Moment, N=120). These results were in line with the level of

criterion validity which could usually be obtained from a single measure of a complex trait.

#### Reliability of PIL Test

The split-half reliability of the PIL was determined by Crumbaugh and Maholick (1964) as  $r=.81$  (Pearson Product-Moment,  $n=225$ , 105 normals and 120 patients); the Spearman-Brown analysis yield  $r=.90$ . This same relationship was determined by Crumbaugh (1968) as  $r=.85$  (Pearson Product-Moment,  $n=120$ , Protestant parishioners nonpatients); the Spearman-Brown analysis yield  $r=.92$ .

#### Relationship to Other Variables

The following relationship between PIL scores and other variables had been reported:

(1) Scales of Anomie. Crumbaugh (1968) found significant correlations between the PIL and the Srole Anomie Scale. In a sample of 249 college undergraduates the relationship was  $-.48$  for 94 males and  $-.32$  for 155 females. For a sub-sample of 145 freshmen (55 males and 90 females) from the same population the relationship was  $-.34$ . Elmore and Chambers (1967) found a correlation of  $-.51$  ( $n=94$ ) between the PIL and the Elmore Anomie Scale's General Anomie or Meaningless (M) factor though

the sub-factors of this scale (Valuelessness, Hopelessness, Powerlessness, Aloneness, and Closemindedness) showed no significant relationships.

(2) California Personality Inventory (CPI) Nyholm (1966) found significant relationships between the PIL and four of the CPI Scales: Self-acceptance,  $r=.40$ ; Sense of well-being,  $r=.52$ ; Achievement via conformance,  $r=.63$ ; and Psychological mindedness,  $r=.40$  ( $n=34$  non-patients).

(3) Sex, age, education, and intelligence. No consistent relationships between PIL scores and these variables had so far been reported.

#### Collett-Lester Fear of Death Scale

The Collett-Lester Fear of Death Scale (CLFDS) (see Appendix C) is a Likert-type scale designed to assess four separate fears of death: fear of death of self, fear of death of others, fear of dying of self, and fear of dying of others. The CLFDS is a series of 36 statements (e.g., I would avoid death at all costs, I would avoid a friend who was dying) in which the subject scored each item with either a +1 = slight agreement, -1 = slight disagreement, +2 = moderate agreement,

-2 = moderate disagreement, +3 = strong agreement, -3 = strong disagreement. Each subscale contains items keyed positively and negatively. The distribution of the items is as follows:

	positively keyed items	negatively keyed items
death of self	1, 4, 17, 20	6, 14, 23, 26, 28
death of others	2, 13, 19, 27, 32, 33	7, 9, 18, 21
dying of self	5, 15, 30, 36	12, 24
dying of others	11, 22, 29, 31, 34, 35	3, 8, 10, 16, 25

#### Scoring of the CLFDS

Each of the four Likert-type subscales scores were summed to yield an individual attitude score. Each subscale contained positively keyed (presence of fear) and negatively keyed (absence of fear) items. Scores of subscale one (fear of death of self) could have ranged from +12 to -5, subscale two (fear of death of others) could have ranged from +18 to -4, subscale three (fear of dying of self) could have ranged from +12 to -2, and subscale four (fear of dying of others) could have ranged from +18 to -5.

#### Administration of CLFDS

The CLFDS was given to the treatment and the control group in a classroom setting by the experimenter. There

was no recommended time limit for this test, however subjects completed this test in 15 to 20 minutes. The instructions were printed on the test form and were written to be easily understood by secondary high school students.

#### Validity of CLFDS

Lester (1969) constructed the subscales of the Collett-Lester Fear of Death test on the basis of face validity. Intercorrelations between scores on the four subscales of the DLFDS were also used to validate the scale. The intercorrelation of the subscales ranged from .03 to .58. These relatively low intercorrelations indicated that the scales differentiate the four different fears of death. Lester (1969) used product-moment correlations and factor analysis correlation between the subscales with the means of the following populations: student nurses (sophomores, juniors, seniors, first and second year graduates), introduction psychology students, abnormal psychology students, and students enrolled in a psychology course for nonmajors. Two other scales, Boyer's Fear of Death Scale and Templer's Death Anxiety Scale, were intercorrelated as additional proof of validity (Durlak, 1972).

### Reliability of CLFDS

The same populations used in validating the CLFDS were used to measure the correlations between the CLFDS and other fear of death scales. Analysis of the CLFDS indicated a split-half reliability of .83 and a Test-retest reliability of .79 (Boyer, 1964). CLFDS has been considered "one of the only four instruments measuring fears about death with demonstrated psychometric validity" (Durlak, 1972). Approximately 18 research studies about death attitudes have used the CLFDS.

### Research Design

The non-equivalent control group design (Campbell and Stanley, 1969) with approximately 24 subjects in the control group and 24 subjects in the experimental group was used. The treatment was randomly assigned to the group by the experimenter. Campbell and Stanley (1969) suggested that this quasi experimental design did not include major inherent threats to internal validity.

### Variables of the Study

The variables for the treatment and control groups included the following:

The independent variable consisted of the treatment of the death and dying educational unit as described in Appendix A.

The dependent variables were the subscale scores of (1) the four fears of death: a) fear of dying of self, b) fear of dying of others, c) fear of death of self, and d) fear of death of others; (2) the scores on the Purpose in Life Test; and (3) the scores on the Death and Dying Content Measure.

#### Research and Treatment Procedure

The experimenter requested 22 volunteers from the two home and family living classes to participate in this study. The volunteer students of the control and experimental group were notified by verbal and written explanation of this study's purposes and procedures (see Appendices D and E).

#### Testing Procedure

Both the experimental and the control groups received the Collett-Lester Fear of Death Scale and the Purpose of Life Test as pre and post tests. Both the CLFDS and the PIL were administrated one week in advance of the treatment to safeguard against contamination. The class session used for pre-testing with the CLFDS and the PIL Test was designated as day one of the experiment and the class period used for post-testing of these instruments was specified as the eighth day of the



experiment. The experimenter administered the pre and post tests (CLFDS and PIL) to the experimental and control groups on the same day.

The experimental group was also given a teacher-designed pre and post content measure to assess changes in cognitive learning about death and dying topics. The Death and Dying Content Measure was only given to the experimental group because there was not enough time to administer the DDCM to the control group. The experimental group received the DDCM on the first teaching day (second day of the experiment) and on the last teaching day (seventh day of the experiment). On all three tests, the CLFDS, PIL, and the DDCM, the students of the experimental and control groups used the same randomly assigned identification number in order to compute the raw scores of the students (Appendices H, I, and J).

#### Teaching Procedure

In this experiment, the treatment consisted of six, 55 minute sessions of death and dying topics (Appendix A). The sequentially ordered topics of the treatment unit were religious, cultural and societal values of death and dying; psychological adjustments of the dying person; grieving dynamics; funeral and burial rituals; consumer aspects of funerals; and goal formation. The lessons provided for

variety in teaching methods. Teaching methods used were: brainstorming, class and group discussion, lecture, essay writing, analysis of questions and literature, and a resource speaker to explain the concepts of the death educational unit.

Immediately after administration of the CLFDS and PIL pretests, the students in the experimental group were shown a course outline of the death and dying educational unit. The experimental group was not given the outline until after the last day of the experiment because of the possible contamination effect. The experimental group did not receive the course's vocabulary list until after the experiment.

The experimenter taught the death and dying educational unit to the experimental group. The control group, under the instruction of another home economics teacher, studied a unit of the home economics' curriculum which did not include topics about death and dying. The students of both groups used the same classroom throughout the testing and treatment.

#### Debriefing the Students

One of the school counselors was present during the pre testing of the experimental and control groups. At that time, the experimenter explained to the students

that the counselor would be available after the pre tests and during the length of this project for conferences. Because death and dying education could elicit emotional responses, having the counselor available to the students could help the students desensitize their reactions.

If one of the students in the experimental and/or control group became emotionally upset due to the subject matter of the death and dying unit, the student would have been dismissed from the project. If a student experienced a death of a loved one during the course of the unit, the student would not have been included in the project.

After the last day of the experiment, the experimental group was allowed to discuss their feelings and verbally evaluate the merits of the death and dying educational unit. The researcher explained the results of the project to the control and the experimental groups.

#### Curriculum Development

The objectives of the unit were formulated to correspond with the attitudes measured by the two attitudinal instruments, the Collett-Lester Fear of Death Scale and the Purpose in Life Test, used in this study, Included was an outline presenting the content of the curriculum (see page 46).

## Curriculum Development as to Instrument Content

Attitudes Measured by Instruments	Corresponding Overall Learning Objective
<u>Collett-Lester Fear of Death Scale</u>	
Death of Self	Lesson: Day 1
Question #1, 4, 6, 17, 20, 23, 26, 28	Learner becomes aware of his own values of death and dying
Death of Others	Lesson: Day 3
Question #2, 7, 9, 13, 18, 19, 21, 17, 32, 33	Learner understands personal grief and the grief of others  Learner understands his children's reactions to the death of a loved one and thus learns to help children with their grief
Dying of Self	Lesson: Day 1
Questions #5, 12, 15, 24, 30, 36	Learner becomes aware of own values of death and dying  Lesson: Day 1  Learner's fears about death will lessen
Dying of Others	Lesson: Day 2
Questions #3, 8, 10, 11, 16, 22, 25, 29, 31, 34, 35	Learner understands and relates to the feelings of a person close to death  Lesson: Day 3  Learner understands child- ren's reactions to the death of a loved one and thus learns to help child- ren with their grief
<u>Purpose in Life Test</u>	
Questions #3, 4, 5, 8, 10, 11, 17, 20	Lessons: Day 6  Learner appreciates and makes the most of his life and lives it to the fullest
Questions #15	Lessons: Day 2  Learner understands and can relate to the feelings of a person close to death  Lesson: Day 3  Learner understands per- sonal grief and the grief of others  Lesson: Day 5  Learner is made aware of the procedure and the cost of disposal of the body

### Data Analysis

Data were analyzed to determine group gain between pre and post test results of the Purpose in Life and Collett-Lester Fear of Death Scale. An analysis of covariance was the statistical tool for the non-equivalent control group. Isaac (1977) recommended the analysis of covariance because it adjusts for the initial differences between groups and for the correlation between means of the groups. Descriptive data was given for each measure. The experimental and control group's individual pre and post test differences on the Collett-Lester Fear of Death Scale, the Purpose in Life Test, and the Death and Dying Content Measure were also shown (Appendices H, I and J). The hypotheses were tested at the .05 level of significance.

### Hypotheses Testing

Hypothesis one was tested using a t-test for independent means. Hypotheses two through eight were tested with Pearson Product-Moment Correlation Coefficient (Ferguson, 1971). Analysis of covariance was used to test the hypotheses eight to eleven.

## CHAPTER IV

### RESULTS

#### Data Analysis

Data from the Collett-Lester Fear of Death Scale (CLFDS), Purpose in Life (PIL) Test and the Death and Dying Content Measure (DDCM) were statistically analysed to test hypotheses one to 11 as described in Chapter III. Pearson Product Moment Correlation Coefficients, a t-test for independent and dependent means, and analysis of covariance were utilized to examine the relationship between students' pre and post test scores on the CLFDS, PIL, and the DDCM with an intervening death and dying curriculum administered to the experimental group. Findings from the analysis of data were as follows:

#### Pre Test Scores on the CLFDS Instrument

Pre test means, standard deviations, and t values for both the experimental and control groups' scores on the CLFDS subscale one (fear of death of self), subscale two (fear of death of others), subscale three (fear of dying of self), subscale four (fear of dying of others),

and the PIL Test are shown in Table 1. The CLFDS instrument, consisting of 36 Likert-type statements, was scored with a value of -1 (slight disagreement) to +3 (strong agreement). Students' response values were summed to yield the total fear of death scores. The experiment group's pre test mean (7.00) on the CLFDS subscale two (fear of death of others) showed the highest degree of fear, whereas their pre test mean (-7.74) on the CLFDS subscale four (fear of dying of others) revealed the lowest degree of fear. The control group's pre test mean (6.13) on the CLFDS subscale two (fear of death of others) showed the highest degree of fear, whereas their pre test mean (-5.00) on the CLFDS subscale four (fear of dying of others) revealed the lowest degree of fear. A t-test for independent means revealed no initial differences of the CLFDS pre test scores for the two groups. Individual CLFDS pre test raw scores for the experimental and control groups are shown in Appendices H and I.

#### Pre test Scores on the PIL Instrument

The PIL was a semantic differential attitudinal scale consisting of 20 items, rated on a 1 to 7 point scale. Point 1 represented a low degree of purpose in life. The negative responses were randomly placed at the

beginning or at the end of the scale. The PIL scores, the simple sum of the numerical values circled for the 20 items, could range from a high of 140 to a low of 20. The experimental group's PIL pre test raw scores ranged from a low of 78 (lack of clear meaning) to a high of 138 (presence of definite purpose). A t-test for independent means revealed no initial differences on the PIL pre test scores for the two groups. Individual PIL pre test raw scores for the experimental and control groups are displayed in Appendices H and I.



Table 1

Pre Test Means, Standard Deviations, and t-Values for  
Experimental and Control Groups on the  
Collett-Lester Fear of Death Scale and Purpose in Life Test

		N		Mean			SD		t-Value
CLFDS		E	C	E	C	E	E	C	
Subscale 1	23	23	23	-.35	4.04	10.55	8.20	1.58	
2	23	23	23	7.00	6.13	8.16	7.40	.38	
3	23	23	23	2.00	1.65	7.30	8.41	.15	
4	23	23	23	-7.74	-5.00	8.41	9.26	1.05	
PIL	24	24	24	103.63	107.25	23.95	15.88	.62	

21 degrees of freedom  
critical  $t=2.08$  two tailed

### Post Test Scores on the CLFDS and PIL Instrument

Post test means and standard deviations for both the experimental and control groups' scores on the CLFDS subscale one (fear of death of self), subscale two (fear of death of others), subscale three (fear of dying of self), and subscale four (fear of dying of others) and the PIL Test are shown in Table 2. The experimental group's post test mean (6.43) on the CLFDS subscale two (fear of death of others) showed the highest degree of fear, whereas their post test mean (-7.09) on the CLFDS subscale four (fear of dying of others) revealed the lowest degree of fear. The control group's post test mean (2.30) on the CLFDS subscale one (fear of death of self) showed the highest degree of fear, whereas their post test mean (-6.43) on the CLFDS subscale four (fear of dying of others) revealed the lowest degree of fear. The control group's PIL post test raw scores ranged from a high of 133 to a low of 74. The experimental PIL post test raw scores ranged from a low of 35 (lack of clear meaning) to a high of 135 (presence of definite purpose). Individual CLFDS and PIL post test raw scores for the experimental and control groups are presented in Appendices H and I.

Table 2

Post Test Means and Standard Deviations for  
Experimental and Control Groups on the  
Collett-Lester Fear of Death Scale and Purpose in Life Test

		N		Mean			SD	
		E	C	E	C	E	E	C
CLFDS Subscale	1	23	23	-2.13	2.30	10.30	11.08	
	2	23	23	6.43	1.39	5.76	7.98	
	3	23	23	.34	.65	5.86	5.76	
	4	23	23	-7.09	-6.43	9.64	8.41	
PIL		24	24	103.00	104.54	30.10	15.98	

Pre and Post Test Scores on Death and Dying Content Measure

Pre and post test means, standard deviations, frequency distribution, and t-value for the experimental group's DDCM are shown in Table 3 and 4. The DDCM is a teacher made test developed from the treatment unit on death and dying topics. The test, which contained 50 items, consisted of three parts, 19 matching, 16 completion and 15 multiple choice items. Each of the objective items was valued at two points, The possible score range for the content measure was from zero to 100.

Table 3

Frequency Distribution of Experimental Group's Death and Dying Content Measure Pre and Post Test Scores

Pre Test N = 23			Post Test N = 24		
(x)	F(x)	Cf(x)	(x)	f(x)	Cf(x)
78	1	23	94	1	24
74	1	22	90	1	23
72	1	21	88	1	22
66	1	20	82	3	21
64	1	19	80	1	18
60	1	18	78	1	17
58	2	17	76	1	16
54	2	15	74	2	15
52	2	13	70	2	13
50	3	11	68	1	11
48	1	8	64	3	10
38	1	7	62	1	7
36	1	6	56	2	6
34	1	5	52	1	4
32	2	4	38	1	3
28	1	2	36	1	2
26	1	1	26	1	1

The DDCM was given only to the experimental group because class time was not available to administer the DDCM to the control group. The DDCM pre test raw scores ranged from 36 percent to 78 percent and the post test raw scores ranged from 26 percent to 94 percent (see Appendix J).

Table 4

Pre and Post Test Means, Standard Deviations, and t-Values for Experimental Group on Death and Dying Content Measure

Pre Test		Post Test		
N=22		N=22		
Mean	SD	Mean	SD	t-Value
48.55	18.15	68.09	16.14	5.70*

21 degrees of freedom

\*significant at .05

#### Hypotheses Testing Results

The null hypotheses and the related statistical analyses are presented in the following discussion:

NH<sub>01</sub>) There will be no significant difference in the experimental group's DDCM pre and post test scores. A t-test of dependent means revealed a significant difference in the experimental group's pre and post test DDCM scores as shown by the data represented in Table 4. Therefore, null hypothesis one was rejected.

Pearson Product Moment Correlation analysis was used to test Hypotheses two through five.

NHo2) There will be no significant relationship between the experimental group's post test scores on the DDCM and the CLFDS subscale one (fear of death of self). The analysis revealed no significant relationship as shown by the data represented in Table 5. Therefore, null hypothesis two was accepted.

NHo3) There will be no significant relationship between the experimental group's post test scores on the DDCM and on the CLFDS subscale two (fear of death of others). The analysis revealed no significant relationship as shown by the data presented in Table 5. Therefore, null hypothesis three was accepted.

NHo4) There will be no significant relationship between the experimental group's post test scores on the DDCM and the CLFDS subscale three (fear of dying of self). The analysis revealed no significant relationship as shown by the data presented in Table 5. Therefore, null hypothesis four was accepted.

NHo5) There will be no significant relationship between the experimental group's post test scores on the DDCM and on the CLFDS subscale four (fear of dying of

others). The analysis revealed no significant relationship as shown by the data presented in Table 5. Therefore, null hypothesis five was accepted.

NHo6) There will be no significant relationship between the experimental group's post test scores on the DDCM and on the PIL Test. The analysis revealed no significant relationship as shown by the data represented in Table 5. Therefore, null hypothesis six was accepted.

Table 5

Pearson Product Moment Correlation Coefficients  
of DDCM with CLFDS and PIL for Experimental Group.

	CLFDS 1	CLFDS 2	CLFDS 3	CLFDS 4	PIL
DDCM	-.09	.11	.13	-.40	-.05

$r = .4227$  is sign at .05  
 $df = 23$

NHo7) There will be no significant difference between the experimental and control groups' post test PIL Test scores. The t-test for independent means revealed no significant difference ( $t_{21df} = .221$ ) between post test scores for the two groups. Therefore, null hypothesis seven was accepted. (Analysis of covariance had been planned but a preliminary test of the homogeneity of the regression lines for the two groups indicated that they were not homogenous ( $F_{44df} = 48.54$ ) (Ferguson, 1971).

Analysis of covariance was used to test hypotheses eight through 11.

NHo8) There will be no significant difference between the experimental and control groups' post test scores on the CLFDS subscale one (fear of death of self). The analysis revealed no significant difference as shown by the data represented in Table 6. Therefore, null hypothesis eight was accepted.

Table 6

ANCOVA Summary Table for Experimental and Control Groups on CLFDS Subscale One

Source	SS	df	MS	F
Total	3790.98	44		
Between	85.40	1	85.40	1.0
Within	3675.58	43	85.48	

NHo9) There will be no significant difference between the experimental and control groups' post test scores on the CLFDS subscale two (fear of death of others). The analysis revealed a significant gain as shown by the data represented in Table 7. Therefore, null hypothesis nine was rejected.



Table 7

ANCOVA Summary Table for Experimental and Control Groups on CLFDS Subscale Two

Source	SS	df	MS	F
Total	2509.47	44		
Between	460.62	1	460.62	9.67
Within	2048.85	43	47.65	

NH010) There will be no significant difference between the experimental and control groups' post test scores on the CLFDS subscale three (fear of dying of self). The analysis revealed no significant difference as shown by the data presented in Table 8. Therefore, null hypothesis ten was accepted.

Table 8

ANCOVA Summary Table for Experimental and Control Groups on CLFDS Subscale Three

Source	SS	df	MS	F
Total	828.62	44		
Between	2.32	1	2.32	.121
Within	826.30	43	19.22	

NHoll) There will be no significant difference between the experimental and control groups' post test scores on the CLFD subscale four (fear of dying of others). The analysis revealed a significant gain as shown by the data represented in Table 9. Therefore, null hypothesis eleven was rejected.

Table 9

ANCOVA Summary Table for Experimental and Control Groups on CLFDS Subscale Four

Source	SS	df	MS	F
Total	3242.29	44		
Between	428.35	1	428.35	6.55
Within	2813.94	43	65.44	

## CHAPTER V

### SUMMARY AND CONCLUSIONS

#### Summary

The purpose of this study was to measure changes in secondary students' death attitudes and perceptions in life after treatment consisting of a unit on death and dying. This purpose reflects Howlter & Eply's (1979) suggestion that the affective domain of death fear needs additional exploration before determination of the effectiveness of a death educational unit can be completed. Since secondary schools have been increasingly implementing death and dying curricula, the researcher thought it would be useful to research adolescents' attitudes after such a unit to determine if the objectives are met.

The experimental and control groups consisted of home and family living students, 11th and 12th graders, enrolled at John F. Kennedy High School in San Antonio, Texas. Both groups were reasonably homogenous as to academic performance, ethnic background, and age. The experimental group received a six day death and dying educational unit, and the control group studied a home and family living unit not related to death and dying topics.

### DDCM Pre and Post Test Scores

The experimental group's DDCM post test scores did increase significantly when compared to their pre test scores (Hypothesis one). These findings suggested that the students did increase their cognitive knowledge about death and dying topics after implementation of the thanatology unit.

### Relationship Between DDCM Scores and CLFDS, PIL Scores

The experimental group's DDCM post test scores did not relate significantly with their CLFDS (four subscale) and PIL post test scores (Hypotheses two, three, four and five). These findings brought into question the relationship of the CLFDS and the PIL. The researchers (Collett-Lester, 1969; Crumbaugh, 1968) did not, however, include adolescents or Mexican Americans in their validation of the CLFDS and PIL, thus introducing an age and cultural bias. This study's sample consisted of adolescents, 95 percent of whom are Mexican-Americans. Therefore, an age and cultural bias in the tests may explain the lack of significant relationship between the tests. The above conclusion emphasizes the need to conduct similar experiments using the CLFDS and the PIL to obtain validity and reliability factors for adolescent samples. A second

DDCM, CLFDS, and PIL post test could have revealed a significant relationship between the two instruments. Giving the post tests immediately after the death and dying educational unit, perhaps, did not allow enough time for attitudinal change to occur.

#### Pre and Post Test Scores on the PIL and the CLFDS

The experimental group's PIL pre and post test scores did not increase significantly when compared to the control group's pre and post test scores (Hypothesis seven). The students' perceptions in life did not increase after the treatment. These findings were not in congruence with earlier research. Pratt (1974) revealed that collegiate students did increase their degree of meaning in life after completion of a death and dying educational unit. The adolescence period has been characterized by much identity and goal confusion (Erikson, 1968). Perhaps the adolescents' inability to formulate goals had a significant influence on their PIL scores which supports Frankl's (1959) correlation between low degree of purpose in life with lack of goals.

The experimental group's CLFDS (subscale one) pre and post test scores did not decrease significantly when compared to the control group's pre and post test scores

(Hypothesis eight). The experimental group's personal fear of death did not decrease after the treatment. These findings, along with the results of hypothesis seven, suggested a relationship between the students' scores on the CLFDS and the PIL which, again, supports Frankl's (1959) theory that a significant fear of personal death reflects a low degree of purpose in life. Perhaps, as Mueller (1976) suggested, adolescents are still too immature to cope with the reality of their own mortality. This immaturity could be the result of societal denial of the subject of death and dying and/or the American societal tendency to overprotect the adolescent (Fulton, 1963). The adolescents may have been overwhelmed with the frankness of this educational unit, therefore, their emotional reaction might have prohibited attitudinal change.

The experimental group's CLFDS (Subscale two) pre and post test scores did decrease significantly when compared to the control group's pre and post test scores (Hypothesis nine). The students' fear of the death of others did decrease after the treatment. These results were supported by earlier findings in that death education students scored a lower degree of fear of death of others

on post tests (Leviton & Fritz, 1978-79 ; Watts, 1977 ; Bailis & Kennedy, 1977).

The experimental group's CLFDS (Subscale three) pre and post test scores did not decrease significantly when compared to the control group's pre and post test scores (Hypothesis ten). The students' personal fear of dying did not decrease after the treatment. Is it possible to predict that these adolescents will change their attitudes about their personal death and dying when given a longer period of time to reflect upon information learned in this unit as indicated in Murray's (1974) and Watts (1977) research? Bloom (1966) suggested that learned knowledge alters attitudes and behavior and these students did report a significant increase in their knowledge about death and dying topics.

The experimental group's CLFDS (Subscale four) pre and post test scores did decrease significantly when compared to the control group's pre and post test scores. Therefore, the students' fear of dying of others did decrease after treatment. These findings were supported by earlier research (Watt, 1977) (Leviton & Fritz, 1978-79) in that death education significantly decreases the students' fear about the dying of others. These

conclusions could be related to the results of hypothesis nine, whereby, the students exhibited a lower degree of fear of the death of others. These adolescents may have acquired coping skills and consumer information that may help their loved ones due to their increase of cognitive knowledge and decreased fear of the death and dying of others. When faced with the crisis of death in their familial lives, these students could also act as a support system for their family members, and subsequently, help themselves.

#### Limitations of the Study

Results and conclusions of this study must include consideration of the following limitations:

(1) The difference in students' pre and post test scores may have been influenced by the Hawthorne effect, a condition in which students under investigation may be influenced partly by the fact that they are being observed (Campbell & Stanley, 1963).

(2) The students of both experimental and control groups were not previously enrolled in the experimenter's classes. Therefore, the students and the experimenter were not familiar with each other's learning or teaching styles. This lack of familiarity may have influenced the



students' learning performance on the instruments, and their attitudes about the death and dying curriculum.

(3) The religious, cultural, and familial background of the subjects may have influenced either positively or negatively their motivation, attitudes, and performance on the topics of death and dying.

(4) The length of the unit was only six days excluding the two days used for testing. The experimenter-designed curriculum may have not allowed enough time for in depth student-teacher discussion and interaction. This limited amount of time for discussion might have affected the adolescent's attitudes.

(5) The fact that volunteers from a single high school campus were the subjects of this study may have affected the results and needs to be considered, especially in any generalization of these findings.

(6) The investigation was conducted in an applied setting, and elements of control could not be addressed as adequately as one may have desired.

#### Recommendations for Future Studies

As a result of the experience of conducting this experiment, this investigator offers the following suggestions for future research on the effectiveness of a death

and dying curriculum.

(1) It would be wise to compare this curriculum to other death and dying curricula. Scope and intensity of the content, instructional material, and teaching strategies need to be investigated as to the effectiveness of such a unit on death attitudes and perceptions in life.

(2) A research project to recognize the influence of demographic, religious, personality, and cultural variables on adolescents' death attitudes and perceptions in life would be useful.

(3) Longitudinal post testing of the changes in death attitudes and perceptions in life would be useful to determine the long range effects of death and dying education. Follow-up studies of death education students in later life when they face the death of a loved one would be informative as to merits of such a unit.

(4) It would be beneficial to conduct a similar study with an extended sample of various campuses in an area instead of just one high school. A larger sample would decrease sampling errors and increase reliability.

(5) It would be beneficial to conduct a similar experiment using the CLFDS and PIL tests to determine

their validity and reliability for adolescents, particularly for Mexican-American adolescents.

### Implications

Based on the data collected from the pre and post test results of the DDCM and CLFDS, it would be beneficial for the Home Economics educator not to neglect death and dying topics in the curriculum. The intent of the home and family living classes is one of preparation for all the stages of familial life, including the death and dying of loved ones and personal death. This study's findings indicate that adolescents' attitudes about the death and dying of others can change and students' knowledge about death and dying topics can increase after a death and dying educational unit (Hypotheses 1, 9, and 11). The experimental group's decreased fear of death and dying of others may lead to the development of coping and consumer skills for the crises of dying. The adolescents' increased knowledge about death and dying topics and the formation of coping skills may aid their family members and subsequently themselves during this inevitable event.

The students in the experimental group did not experience a decrease in their fear of personal death and dying (Hypotheses 8 and 10). Perhaps if death and dying

topics were introduced in home and family living curricula, the students would become more comfortable in discussing their personal death and dying. It is the Home Economics educator's responsibility to help the adolescent learn to function effectively as a family member and help students develop emotional and cognitive awareness of all aspects of family life.

In lieu of the experimental groups' pre and post test scores on the PIL (Hypothesis 7), the experimenter recommends that more attention in home and family living classes should be given to the importance of goals and their relation to a meaningful life. It would be helpful for students to learn to function productively in their family and personal lives in order to fulfill their basic needs and life long aspirations. Helping students to become aware of their goals is a major objective of home and family living classes.

## APPENDIX A

### Death and Dying Curriculum

Topic: Death and Dying

Level: Secondary

Junior and Senior classification

Heterogenous group of males and females

Time Span of Unit: Six, 55 minute sessions

Purpose: This unit of study will emphasize the reality of death and dying, explore the students' values and attitudes, and explain the emotional trauma experienced due to this event. An attempt will also be made to acquaint the students with knowledge and consumer skills of funeral practices in our society.

Objectives of the Course: Students will acquire cognitive and affective knowledge of the following:

1. Religious and personal values of death and dying
2. Emotional adjustments and fears of the dying person
3. Grief dynamics
4. Children and grieving
5. Funerals and burial rituals
6. Consumer aspects of funerals and burials

## Death and Dying Content Measure Pre Test

Day 1

Length of Time for Lesson:

15 Minutes

Name \_\_\_\_\_

Period \_\_\_\_\_

Date \_\_\_\_\_

## HOME AND FAMILY CLASS

## Death and Dying Education

A. Definitions

Match the definition with the term it most accurately explains.

- |                |   |
|----------------|---|
| a. cryonics    | _____ the use of a less direct word or    |
| b. denial      | _____ phrase for one considered offensive |
| c. euphemisms  | _____ a life after death                  |
| d. immortality | _____ to set apart from others            |
| e. after life  | _____ to hold back                        |
| f. isolation   | _____ a stage of sadness or loneliness    |
| g. regression  | _____ as by death                         |
| h. repression  | _____ a comfort                           |
| i. bereavement | _____ freezing of the dead body           |
|                | _____ a refusal to believe                |
|                | _____ to go back                          |
|                | _____ living forever                      |

### B. Test Your Understanding

Select the best answer and write the letter in the space on the left.

- \_\_\_\_\_ 1. Most people's first response to their approaching death is:
  - a. denial
  - b. bargaining
  - c. guilt feelings
  - d. passiveness
- \_\_\_\_\_ 2. Some of the basic fears of a dying person are:
  - a. loneliness
  - b. fear of the dying process
  - c. isolation
  - d. all of the above
- \_\_\_\_\_ 3. The first response of grieving for the death of a loved one is:
  - a. passiveness
  - b. disbelief
  - c. guilt feelings
  - d. loss of self-esteem
- \_\_\_\_\_ 4. At what age does a child think of death as being temporary, not permanent?
  - a. pre-schooler
  - b. elementary age
  - c. toddler
  - d. adolescent
- \_\_\_\_\_ 5. Children will respond to the death of a loved one by:
  - a. anger
  - b. passiveness
  - c. guilt feelings
  - d. all of the above
- \_\_\_\_\_ 6. A non-traditional method of body disposal is:
  - a. cremation
  - b. ground burial
  - c. burial in a mausoleum
  - d. all of the above

- \_\_\_\_\_ 7. In 1979, cremation, without the price of the urn, cost:
  - a. \$500
  - b. \$200
  - c. \$1,000
  - d. \$25
  
- \_\_\_\_\_ 8. In 1979, traditional ground burial cost approximately:
  - a. \$500
  - b. \$3,000
  - c. \$1,000
  - d. \$25
  
- \_\_\_\_\_ 9. Cost of traditional ground burial depends upon:
  - a. type of coffin
  - b. services of the mortuary
  - c. amount of cosmetic work upon the body
  - d. all of the above
  
- \_\_\_\_\_ 10. Formation of goals is influenced by:
  - a. values
  - b. peer group
  - c. family
  - d. all of the above
  
- \_\_\_\_\_ 11. The American society denies death by:
  - a. speaking of death in euphemisms
  - b. having funerals
  - c. sending sympathy cards
  - d. organ transplants
  
- \_\_\_\_\_ 12. At what age does a child accept death as the cessation of life?
  - a. toddler
  - b. infant
  - c. preschooler
  - d. elementary age
  
- \_\_\_\_\_ 13. One ecological advantage of cremation as an alternative to burial
  - a. saving land
  - b. generally cheaper
  - c. don't use as many fresh flowers
  - d. don't use as much wood



- \_\_\_\_\_ 14. It is most important that close friends of the bereaved:
- send flowers to the memorial services
  - pay for part of the memorial services
  - keep in contact with bereaved long after the memorial service
  - provide food for the bereaved
- \_\_\_\_\_ 15. The American society often sees death as:
- the enemy
  - a blessing
  - a social, religious, and cultural event
  - all of the above

C. Complete the Blanks

Select the correct word from the list below and write it in the blank.

procession  
support  
physical  
non-verbal  
reality  
pleasant  
purpose  
withdrawal

religion  
children  
consolation  
universal  
donar card  
grieving  
society  
culture

- Grief is a \_\_\_\_\_ human experience.
- An American traditional funeral ritual is the \_\_\_\_\_ of the body and the bereaved family.
- Funerals give social \_\_\_\_\_ to the bereaved.
- Many adults want their \_\_\_\_\_ to continue their adult's life work. This desire is an example of transcending death.
- To bequeath your body or a part of the body to a medical institution, an individual must carry a uniform \_\_\_\_\_ at all times.
- \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ influence our attitudes about death.
- Most people who have an "after life" experience remember these as \_\_\_\_\_ sensations.

8. According to Kubler-Ross, \_\_\_\_\_ is the last emotional stage where the dying person peacefully accepts his approaching death.
9. \_\_\_\_\_ discomforts (loss of appetite, insomnia, weakness) are very common while grieving for the death of a loved one.
10. Sympathy cards and sending flowers are examples of \_\_\_\_\_.
11. Allowing children to discuss their feelings about death of a loved one is a way to help children handle their \_\_\_\_\_.
12. Funeral or memorial services help the bereaved person or family accept the \_\_\_\_\_ of the death of their loved one.
13. Goals give us \_\_\_\_\_ in life.

#### D. Definitions

Match the definition with the term it most accurately explains.

- |                    |   |
|--------------------|---|
| a. personification | _____ a large tomb                      |
| b. burial          | _____ a funeral director                |
| c. cremation       | _____ a person or thing thought of as   |
| d. bequeathal      | _____ representing something            |
| e. mausoleum       | _____ to burn to ashes                  |
| f. embalming       | _____ to leave to another by one's will |
| g. mortician       | _____ the burying of a dead body in a   |
| h. goal            | _____ grave                             |
| i. motivation      | _____ an end that one strives to attain |
| j. urn             | _____ a vase used to hold the ashes     |
|                    | _____ that which causes one to act      |
|                    | _____ process by which chemicals delay  |
|                    | _____ the processes of decomposition    |

Day 1

Length of Time for Lesson:  
40 Minutes

Concept:

Personal values and attitudes towards death and dying

Overall Learning Objectives

Learner becomes aware of his own values of death and dying.

Learning Content:

Attitudes about death and dying

- I. Influences of death attitudes
  - A. Cultural
    - 1. Social event
    - 2. Coping mechanisms
  - B. Religious
    - 1. Acceptance of death/after life
    - 2. Reincarnation
  - C. Societal
    - 1. Death as the enemy
    - 2. Death as the blessing
- II. Denial of Death
  - A. Euphemisms
    - 1. Description of dying
    - 2. Consolation
  - B. Dehumanization of dying
    - 1. Morticians/funeral homes
    - 2. Death in hospitals
- III. Transcending Death
  - A. Offspring
    - 1. Continue family name
    - 2. Continue life's work
  - B. Accomplishments
    - 1. Major contribution to society
    - 2. Creative work

Behavioral Objectives:

The student must be able to:

1. Explain how religion affects our attitude toward death and dying
2. Explain how cultural influences affect our acceptance of death
3. Explain how death is seen as the enemy and as a blessing
4. To describe four ways in which the American society denies death
5. To explain how death and dying has been dehumanized in our modern American society
6. Write an essay from personal attitudes about death and dying

Learning Activities and Procedures:

1. Brainstorm about the meaning of death  
Time: 5 minutes  
Behavior Objectives #1, 2, 3, 4, 5
2. Analysis of quotations (Class discussion)  
Time: 10 minutes  
Behavioral Objective #3
3. Filmstrip, "Man's Attitudes Toward Death"  
Time: 26 minutes  
Behavioral Objectives #1, 2, 3, 4, 5
4. Essay (homework project) Assignment

Complete in essay form: "When I think of death and dying I..."

Behavioral Objective #6

Teacher's Supplies:

1. Filmstrip projector
2. Cassette recorder
3. Chalkboard and chalk

Students' Supplies:

1. Pen and paper

ReferencesFilmstrip

"Man's Attitudes Toward Death". Educational Perspective Associates; DeKalb, Illinois

Articles

Berg, David and Daughtery, George G. How America Lives With Death. The Individual, Society, and Death, Baltimore: Waverly Press, Inc., 1974, p.43-55.

Books

Miles, Gretchen. Discussing Death: A Guide to Death Education. Homewood, Ill: ETC Publication, 1976.

Vocabulary List

1. acceptance - approval
2. attitude - a manner showing one's feeling or thoughts
3. coping mechanisms - any physical or mental process by which a result is produced
4. cryonics - freezing of the dead body
5. dehumanization - mechanical
6. denial - a refusal to believe
7. euphemism - the use of a less direct word or phrase for one considered offensive
8. euthanasia - act of causing death, so as to end suffering

- 9. immortality - living forever
- 10. manifest - to show plainly
- 11. mortality - death
- 12. physical - of the body
- 13. reincarnation - rebirth in another body
- 14. psychological - pertaining to mental and  
emotional process
- 15. spiritual - religious, sacred
- 16. transcending - to go beyond

### Quotations

#### Objective:

To reflect upon personal attitudes toward death  
and dying through analysis of quotations

- 1. We begin to die as soon as we are born (Voltaire).
- 2. In spite of death's endless repetition, it is  
still not natural (Joseph Bayly).
- 3. ...In the unconscious every one of us is convinced of his own immortality (Sigmund Freud).
- 4. Death is a punishment, to some a gift, and to  
many a favor (Seneca).
- 5. A single death is a tragedy; a million deaths  
is a statistic (Joseph Stalin).

Day 2

Length of Time for Lesson:

25 Minutes

Concept:

After life experiences

Overall Learning Objectives:

The learner's fear of death will lessen

Learning Content:

After life experiences

- I. Pleasant sensations
  - A. Feelings
    - 1. Peaceful
    - 2. Joyous
  - B. Visuals
    - 1. Color
    - 2. Spatial objects
- II. "Back to life" sensations
  - A. Initial reactions
    - 1. Desire to stay
    - 2. Remembrance of beauty
  - B. Purpose in life increased
    - 1. Realize meaning of life
    - 2. Realize meaning of death

Behavioral Objectives:

- 1. Explain how those persons described in the article felt about being brought back to life.
- 2. Explain what their experiences of dying bring to their restored lives
- 3. Explain to what extent does religious belief eliminate or diminish the fear of death

Learning Activities and Procedures:

- 1. Read "What's It Like" in Death: End of the Beginning

Time: 10 minutes

Behavioral Objectives #1, 2, 3

2. Group (3 students) discussion - questions about the above reading

Time: 15 minutes

Behavioral Objectives #1, 2, 3

Teacher's Supplies:

1. Chalkboard and chalk

Students' Supplies:

1. Writing supplies

References

(I A,B; II A,B)

Montgomery, Mary. Death: End of the Beginning. Death Infinity Series. Minneapolis, MN,: Winston Press, 1972, p. 60-64.

Vocabulary List

1. after life - a life after death
2. illuminated - to light up
3. sensations - the receiving of sense impressions through hearing, seeing
4. spatial - existing in space

Group Discussion Questions

1. How did these persons described in the article feel about being brought back to life?
2. What did their experience of dying bring to their restored life?
3. What did their experience do for the lives of others?
4. Did the article reassure you about what happens after death?



Day 2

Length of Time for Lesson:  
30 Minutes

Concept:

Psychological and emotional stages of a dying person

Overall Learning Objectives:

The learner understands and can relate to the feelings of a person close to death.

Learning Content:

- I. Psychological stages of the dying person
  - A. Initial response
    - 1. Denial
    - 2. Isolation
  - B. Anger
    - 1. Interruption of life activities
    - 2. Discomfort of hospitalization
    - 3. Lack of independence
  - C. Bargaining
    - 1. Attempt of postponement
    - 2. Guilt
  - D. Depression
    - 1. Withdrawal
    - 2. Preparation for death
- II. Fears of the dying person
  - A. Fear of loneliness
    - 1. Basic death anxiety
    - 2. Fear of the dying process
  - B. Fear of loneliness
    - 1. Isolation
    - 2. Depression
  - C. Fear of loss of family and friends
  - D. Fear of loss of body
    - 1. Loss of self-image
    - 2. Grief
  - E. Fear of loss of self-control
  - F. Fear of loss of identity
  - G. Fear of regression
    - 1. Retreat to fantasy world
    - 2. State of surrender

Behavioral Objectives:

The student should be able to:

1. List and explain the emotional stages of the dying person
2. Explain the fears of the dying person
3. Describe ways to help dying persons cope with their situations

Learning Activities and Procedures:

1. Filmstrip: "Immortality"  
Time: 10 minutes  
Behavioral Objectives #2, 3

Teacher's Supplies:

1. Filmstrip projector
2. Cassette recorder
3. Chalkboard and chalk

Students' Supplies:

1. Pen and paper

References

Articles

(I. A,B,C)  
Berg, David and Daughtery, George G. Learning the Facts About Death. The Individual, Society, and Death, Baltimore: Waverly Press, Inc., 1974. p.31-36.

Books

(II. A,B,C,D,E,F,G)  
Kubler-Ross, Elizabeth. On Death and Dying. New York: MacMillan Co., 1969.

Wilcox, Sandra and Sutton, Marilyn. Understanding Death and Dying: An Interdisciplinary Approach. Port Washington, New York: Alfred Publishing, Inc., 1977. Chap. 3.

Filmstrip:

(I. A,B,C,D)

"Immortality". Schloat, G.W., Sunburst Communications. Pleasantville, New York.

Vocabulary List

1. acceptance - belief in
2. anxiety - worry of uneasiness about what may happen
3. denial - a refusal to believe or accept
4. depression - low spirits, a period of sadness, and of reduced activity
5. ego - the self, the individual as aware of himself
6. fantasy - imagination
7. identity - individuality
8. institutionalize - to place in an institution (e.g., hospital) for treatment
9. isolation - to set apart from others; place alone
10. regression - to go back
11. repression - to hold back, restrain
12. self-control - control of one's emotions
13. self-image - a person's conception of himself, his abilities, worth

Day 3

Length of Time for Lesson:  
25 Minutes

Concept:

Grieving Dynamics

Overall Learning Objectives:

Learner understands personal grief and the grief of others

Learning Content:

- I. Stages of Grieving
  - A. Disbelief
    - 1. Physical effects
    - 2. Mental confusion
  - B. Controlled stages
    - 1. Passiveness
    - 2. Depersonalizing
  - C. Regression
    - 1. Mental breakdown
    - 2. Guilty feelings
    - 3. Loss of self-esteem or self-respect
  - D. Resolution
    - 1. Rebuilding of self-esteem
    - 2. Regaining of reality
- II. Consolation
  - A. Importance of personal support
    - 1. Relieves loneliness
    - 2. Promotes communication
  - B. Expressions of consolation
    - 1. Verbal
    - 2. Non-verbal

Behavioral Objectives:

The student should be able to:

- 1. List and explain the four stages of grief .
- 2. Explain possible actions that will help the bereaved person or family .

Learning Activities and Procedures:

1. Class discussion between students and teacher

Given certain situations,

(a) Compare the states of grieving to other crises in our lives

(b) Explain actions that will help the bereaved persons in these situations

Time: 25 minutes

Behavioral Objectives #1, 2

Teacher's Supplies:

1. Chalkboard and chalk

Students' Supplies:

1. Pen and paper

References

Articles

(I. A.B.C.D: I. A.B.)

Berg, David and Daughtery, George G. You and Your Grief. The Individual, Society, and Death. Baltimore: Waverly Press, Inc., 1974. p. 56-57.

Books

(I. A,B,C,D; II. A,B)

Spiegel, Yorch. The Grief Process. Nashville, Tenn: Abbingdon Press, 1977.

Vocabulary List

1. bereavement - stage of sadness or loneliness as by death
2. concept - an idea
3. consolation - comfort, solace

4. depersonalize - not to take personally
5. passiveness - inactive, no resistance
6. reality - fact
7. self-esteem - belief in self

### Class Discussion Activity

#### Objectives:

1. To compare the states of grieving to other crises in our lives
2. To explain actions that will help bereaved persons in these situations:
  - (a) A broken love affair
  - (b) Moving from one city to another or from one neighborhood to another
  - (c) Parents are divorcing
  - (d) Losing the game that determines the State championship

Day 3

Length of Time for Lesson:  
30 Minutes

Concept:

Children and Grieving

Overall Objective:

Learner understands children's reactions to the death of a loved one and thus learns to help children with their grief.

Learning Content:

- I. Children's concept of death
  - A. Toddler's concept
    - 1. Gradual and temporary
    - 2. Symbolic language
  - B. Pre-Schooler's concept
    - 1. Man-theme
    - 2. Personification of death
  - C. Elementary school-age's concept
    - 1. Cessation of life
    - 2. Death as a process
- II. Children's emotional reactions
  - A. Initial response
    - 1. Passiveness
    - 2. Anger
  - B. Subsequent reactions
    - 1. Guilt feelings
    - 2. Loud mourning

Behavioral Objectives:

The student should be able to:

- 1. Explain the reactions of toddlers, pre-school age, elementary school age children to the death of a loved one
- 2. List ways to help toddlers, pre-school age, and elementary school age children cope with their grief of a loved one.

Learning Activities and Procedures:

1. Filmstrip, "Death in the Family"  
Time: 15 minutes  
Behavioral Objectives #1, 2
2. Class discussion of the subject content of filmstrip (see Learning Content)  
Time: 15 minutes  
Behavioral Objectives #1, 2

Teacher's Supplies:

1. Chalkboard and chalk
2. Cassette recorder
3. Filmstrip projector

Students' Supplies:

1. Pen and paper

References

Books

Mitchel, Marjorie E. The Child Attitudes Toward Death. New York: Schocken Books, 1966.

Wolf, Anna. Helping Your Child to Understand Death. New York: Child Study Press, 1973.

Articles

(I. A.B.C; II.A.B)

Berg, David and Daughtery, George G. Some Questions and Answers About Your Child and Death. The Individual, Society, and Death. Baltimore: Waverly Press, Inc., 1974. p. 113-118.



Filmstrip

(II. A.B)

"Death in the Family". Barr Films, Jacoby & Storm  
Productions Inc., Westport, Conn.

Vocabulary List

1. elementary school age child - child between the  
ages of six to 12 years of age
2. gradual - little by little
3. guilt - the fact of having done a wrong or  
committed an offence
4. personification - a person or thing thought of  
as representing some quality, thing or idea
5. pre-schooler - child between the ages of three  
to five years of age
6. symbols - an object used to represent something  
abstract
7. temporary - lasting only a while
8. toddler - child between the ages of one to three  
years of age

Day 4

Length of Time for Lesson:

55 Minutes - 1 class session

Concept:

Activities and rituals relating to death and funerals

Overall Learning Objectives:

The learner understands the purposes of burial rituals and the types of body disposal

Learning Content:

- I. Activities relating to death
  - A. American traditional burial customs
    - 1. Consolation
    - 2. Honoring the dead
    - 3. Procession
  - B. Emotional needs met by the funeral rituals
    - 1. Social support for the bereaved
    - 2. Conformation of the reality of death
- II. Disposal of the body
  - A. Traditional manner
    - 1. Burials
    - 2. Mausoleums
  - B. Non-traditional methods
    - 1. Cremation
    - 2. Body bequeathal

Behavioral Objectives:

The student should be able to:

- 1. Explain the three major rituals of American traditional burials
- 2. Explain the emotional needs met by funeral rituals
- 3. List alternatives to traditional burial

4. Explain the advantages and disadvantages of erecting a mausoleum

5. Explain the advantages and the disadvantages of cremation in relationship to financial and ecological conditions

#### Learning Activities and Procedures:

1. Filmstrip, "Funeral Customs Around the World"  
Time: 28 minutes  
Behavioral Objectives #1, 2
2. Class discussion between teacher and students about Learning Content of lesson  
Time: 30 minutes  
Behavioral Objectives #3, 4, 5
3. Analysis of Donor's Card  
Time: 5 minutes  
Behavioral Objective #3

#### Teacher's Supplies:

1. Handout (Donor's Card)
2. Filmstrip projector
3. Cassette
4. Chalkboard and chalk

#### Students' Supplies:

1. Pen and paper

#### References

##### Filmstrips

(I. A,B)  
"Funeral Customs Around the World". Perspectives on Death. Educational Perspective Assoc. DeKalb, Ill.

Articles

(II. A,B)

Berg, David and Daughtery, George G. The question of funeral services. The Individual, Society, and Death. Baltimore: Waverly Press, Inc., 1974. p. 68-79.

Berg, David and Daughtery, George G. Cremation Today. The Individual, Society, and Death. Baltimore: Waverly Press, 1974. p. 80-97.

Berg, David and Daughtery, George G. The panorama of modern funeral practices. The Individual, Society, and Death. Baltimore: Waverly Press, Inc., 1974. p. 119-145.

Books

(I. A,B; II. A,B)

Morgan, Ernest. A Manual of Death Education and Simple Burial, Burnsville, N.C.: Celo Press, 1975.

Vocabulary List

1. bequeathal - to leave to another by one's will
2. burial - the burying of a dead body in a grave, tomb, etc.
3. consolation - comfort
4. cremation - to burn to ashes
5. mausoleum - a large tomb

## UNIFORM DONOR CARD

OF

*Print or type name of donor*

In the hope that I may help others, I hereby make this anatomical gift, if medically acceptable, to take effect upon my death. The words and marks below indicate my desires.

I give \_\_\_\_\_

- (a) \_\_\_\_\_ any needed organs or parts  
(b) \_\_\_\_\_ only the following organs or parts

Specify (in organization or parts)

for the purposes of transplantation, therapy, medical research or education.

(c) \_\_\_\_\_ my body for anatomical study if needed.

Limitations of special wishes, if any \_\_\_\_\_

Signed by the donor and the following two witnesses in the presence of each other

Signature of Donor

Date of Birth of Donor

Date Signed

City & State

Witness

Witness

This is a legal document under the Uniform Anatomical Gift Act or similar laws.

*The Uniform Donor Card designed for the donor's wallet*

*This is a legal document in most states and provinces.*

Copies of the Uniform Donor's Card may be obtained without charge from:

American Medical Assn., 535 N. Dearborn, Chicago, Ill. 60605.

Eye-Bank Assn. of America, 1111 Tulane Ave., New Orleans, La. 70112.

Living Bank, 6631 S. Main, P.O. Box 6725, Houston, Texas 77005.

Modic Alert, Turlock, California 95360.

NAHPT Donor Program, 135 Flower Hill Rd., Huntington, N.Y. 11743.

National Kidney Foundation, 119 E. 27th St., New York, N.Y. 10010.

Natl. Pk. Serv. Agency, Suite 503, 210 W. Fayette St., Baltimore, Md. 21201.

## THE "UNIVERSAL DONOR" PRINCIPLE

New life-saving uses for human tissues and organs are being found almost every day, and the techniques for using them are rapidly improving. New worlds of hope have opened for thousands who otherwise would be condemned to invalidism or premature death.

Alas, the work of collecting these anatomical materials is seriously fragmented. One organization collects kidneys, another eyes, a third pituitary glands, and so on. These organizations do their best but the supply is pitifully short. Three times as many kidney patients are awaiting transplants as there are kidneys available. Thousands remain blind for lack of corneas, and ten times as many pituitary glands are needed as are available.

The answer to this problem is two-fold. First, and basic to the other, is the "Universal Donor" principle as practiced in some of the more advanced countries of Western Europe. Anyone who dies anywhere in the country is available as a donor if needed, *unless* he or she, or the family involved, has specified to the contrary.

The removal of a needed organ or tissue is a routine matter, in no way interfering with funeral display if that is wanted. It does no more violence to the body than the ordinary process of embalming. On the other hand, it is a ploy to bury precious life-giving tissues needed for someone's survival or health.

The legal mechanics are simple: Uniform Legislation authorizing autopsies and the responsible salvaging of anatomical material from anyone who dies in the country—except persons carrying some indication to the contrary or whose families object. Likewise it does not apply to persons leaving their bodies to a medical school.

The other part of the answer is in regional tissue banks like the Northern California Transplant Bank. These coordinate the procurement, processing, storage and distribution of tissues for transplant and therapy, on a regional basis. Ideally such tissue banks will, in the future, accept bequeathal of the entire body and dispose of the remains without expense to the family.

Consider what the donor principle can mean. A burn patient in the emergency room needs skin—at once. Down the hall a person has just died from an auto accident. The needed skin is available without delay. A patient needing an organ transplant can wait in a large hospital for a few hours or a day or so until a suitable donor dies. Every blind person in the country who needs a corneal transplant can have one. Thousands of stunted children can be given the hormones needed for normal growth. All shortages of tissues and organs would be ended once and for all. This would add a new and creative dimension to death.

Day 5

Length of Time for Lesson:

55 Minutes - 1 class session

Concept:

Consumer aspects of burial

Overall Learning Objective:

The learner is made aware of the cost and the procedures of disposal of the body

Learning Content:

- I. Traditional burial
  - A. Preparation of body
    - 1. State requirements
    - 2. Extra services
  - B. Funeral cost
    - 1. Mortician's services
    - 2. Price of caskets
  - C. Cost of burial plot or sites
    - 1. Size
    - 2. Locale
- II. Cremation
  - A. Preparation of body
    - 1. Legal aspects
    - 2. Availability of services
  - B. Cost
    - 1. Procedure
    - 2. Container for remains

Behavioral Objectives:

The student should be able to:

- 1. Explain the factors contributing to the cost of a funeral service and burial plot
- 2. Explain the basic procedure of preparing a body for traditional burial and for cremation

3. Compare the cost of a traditional funeral service to cremation

Learning Activities:

1. Speaker: Funeral Director (Learning Content will be given to speaker).

Time: 45 minutes

Behavioral Objectives #1, 2, 3

Vocabulary List

1. crematorium - a furnace for cremating dead bodies
2. embalming - process by which chemicals delay the processes of decomposition
3. mortician - a funeral director
4. plot - an area of ground
5. urn - a vase used to hold the ashes of a dead person

Day 6

Length of Time for Lesson:

15 Minutes

## Cognitive Post Test

Name \_\_\_\_\_

Period \_\_\_\_\_

Date \_\_\_\_\_

## HOME AND FAMILY CLASS

## Death and Dying Education

A. Definitions

Match the definition with the term it most accurately explains.

- |                |   |
|----------------|---|
| a. cryonics    | _____ the use of a less direct word or    |
| b. denial      | _____ phrase for one considered offensive |
| c. euphemisms  | _____ a life after death                  |
| d. immortality | _____ to set apart from others            |
| e. after life  | _____ to hold back                        |
| f. isolation   | _____ a stage of sadness or loneliness    |
| g. regression  | _____ as by death                         |
| h. repression  | _____ a comfort                           |
| i. bereavement | _____ freezing of the dead body           |
|                | _____ a refusal to believe                |
|                | _____ to go back                          |
|                | _____ living forever                      |

B. Test Your Understanding

Select the best answer and write the letter in the space on the left.

- \_\_\_\_\_ 1. Most people's first response to their approaching death is:
- denial
  - bargaining
  - guilt feelings
  - passiveness



- \_\_\_\_ 2. Some of the basic fears of a dying person are
  - a. loneliness
  - b. fear of the dying process
  - c. isolation
  - d. all of the above
  
- \_\_\_\_ 3. The first response of grieving for the death of a loved one is
  - a. passiveness
  - b. disbelief
  - c. guilt feelings
  - d. loss of self-esteem
  
- \_\_\_\_ 4. At what age does a child think of death as being temporary, not permanent
  - a. pre-schooler
  - b. elementary age
  - c. toddler
  - d. adolescent
  
- \_\_\_\_ 5. Children will respond to the death of a loved one by
  - a. anger
  - b. passiveness
  - c. guilt feelings
  - d. all of the above
  
- \_\_\_\_ 6. A non-traditional method of body disposal is
  - a. cremation
  - b. ground burial
  - c. burial in a mausoleum
  - d. all of the above
  
- \_\_\_\_ 7. In 1979, cremation without the price of the urn, cost approximately
  - a. \$500
  - b. \$200
  - c. \$1,000
  - d. \$25
  
- \_\_\_\_ 8. In 1979, traditional ground burial cost approximately
  - a. \$500
  - b. \$3,000
  - c. \$1,000
  - d. \$25

- \_\_\_\_ 9. Cost of traditional ground burial depends upon
  - a. type of coffin
  - b. services of the mortuary
  - c. amount of cosmetic work upon the body
  - d. all of the above
- \_\_\_\_ 10. Formation of goals are influenced by
  - a. values
  - b. peer group
  - c. family
  - d. all of the above
- \_\_\_\_ 11. The American society denies death by
  - a. speaking of death in euphemisms
  - b. having funerals
  - c. sending sympathy cards
  - d. organ transplants
- \_\_\_\_ 12. At what age does a child accept death as the cessation of life
  - a. toddler
  - b. infant
  - c. pre-schooler
  - d. elementary age
- \_\_\_\_ 13. One ecological advantage of cremation as an alternative to burial
  - a. saving land space
  - b. generally cheaper
  - c. don't use as many fresh flowers
  - d. don't use as much wood
- \_\_\_\_ 14. It is most important that close friends of the bereaved
  - a. send flowers to the memorial services
  - b. pay for part of the memorial services
  - c. keep in contact with bereaved long after the memorial services
  - d. provide food for the bereaved
- \_\_\_\_ 15. The American society often sees death as
  - a. the enemy
  - b. a blessing
  - c. a social. religious, and cultural event
  - d. all of the above

C. Complete the Blanks

Select the correct word from the list below and write it in the blank.

procession	withdrawal
support	religion
physical	children
non-verbal	consolation
reality	universal
culture	donar card
pleasant	grieving
purpose	society

1. Grief is a \_\_\_\_\_ human experience.
2. An American traditional funeral ritual is the \_\_\_\_\_ of the body and the bereaved family.
3. Funerals give social \_\_\_\_\_ to the bereaved.
4. Many adults want their \_\_\_\_\_ children to continue their adult's life work. This desire is an example of transcending death.
5. To bequeath your body or a part of the body to a medical institution, an individual must carry a uniform \_\_\_\_\_ at all times.
6. \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ influence our attitudes about death.
7. Most people who have an "after life" experience remember these as \_\_\_\_\_ sensations.
8. According to Kubler-Ross, \_\_\_\_\_ is the last emotional stage where the dying person peacefully accepts his approaching death.
9. \_\_\_\_\_ discomforts (loss of appetite, insomnia, weakness) are very common while grieving for the death of a loved one.

10. Sympathy cards and sending flowers are examples of \_\_\_\_\_
11. Allowing children to discuss their feelings about death of a loved one is a way to help children handle their \_\_\_\_\_.
12. Funeral or memorial services help the bereaved person or family accept the \_\_\_\_\_ of the death of their loved one.
13. Goals give us \_\_\_\_\_ in life.

#### D. Definitions

Match the definition with the term it most accurately explains.

- |                    |  |
|--------------------|--|
| a. personification | _____ a large tomb                       |
| b. burial          | _____ a funeral director                 |
| c. cremation       | _____ a person or thing thought          |
| d. bequeathal      | _____ of as representing something       |
| e. mausoleum       | _____ to burn to ashes                   |
| f. embalming       | _____ to leave to another by one's       |
| g. mortician       | _____ will                               |
| h. goal            | _____ the burying of a dead body         |
| i. motivation      | _____ in a grave                         |
| j. urn             | _____ an end that one strives            |
|                    | _____ to attain                          |
|                    | _____ a vase used to hold the            |
|                    | _____ ashes                              |
|                    | _____ that which causes one to act       |
|                    | _____ process by which chemicals         |
|                    | _____ delay the process of decomposition |

Day 6

Length of Time for Lesson:

25 Minutes

Concept:

Goal formation

Overall Learning Objective:

The learners appreciate and make the most of their lives and live them to the fullest

Learning Content:

Goals

I. Definition

A. Types

1. Short-term
2. Long-term

B. Influences of goal formation

1. Values
2. Peer group
3. Family
4. Life style

II. Importance of goals

A. Purpose in life

1. Motivation
2. Material satisfaction

B. Pride in accomplishments

1. Promotes happiness
2. Promotes self-esteem

Behavioral Objectives:

The students must be able to:

1. Define goal
2. List three reasons why goals are important
3. Explain how the possibility of death influences goal formation

Learning Activities and Procedures:

1. Brainstorm about meaning of goals  
Time: 5 minutes  
Behavioral Objectives #1, 3
2. Analysis of Leonardo de Vinci quotation (written on chalkboard)  
Time: 5 minutes  
Behavioral Objectives #2, 3
3. (a) Outline personal goals for the next year  
(b) Outline personal goals for the next year knowing that you would die at the end of that year  
(c) Contrast the difference in attitudes between 3a and 3b.  
Time: 20 minutes  
Behavioral Objective #3

Teacher's Supplies:

1. Chalkboard and chalk

Students' Supplies:

1. Pen and paper

References

(I. A,B; II. A,B)  
Westlake, T. Relationship, A Study in Human Behavior.  
Massachusetts: Ginn and Co., 1972, p. 3,5,7.

(I. A,B; II. A,B)  
Kiker & Kiker, Me: Understanding Myself and Others.  
Illinois: Bennett Co., 1977. p. 341.

Quotation

"As a well spend day brings happy sleep, so a life well used brings happy death."

Leonardo de Vinci

Vocabulary List

1. accomplishments - work completed
2. goal - an end that one strives to attain
3. lifestyle - an individual's whole way of living
4. long range - extending over a long period of  
time (e.g., years)
5. motivation - that which causes one to act;  
incentive
6. peer group - persons of the same ability or rank
7. pride - dignity and self-worth
8. self-esteem - belief in oneself
9. short range - extending over a short period of  
time (e.g., days)

Curriculum has been adopted from:

- (1) Death Infinity Series (Minneapolis, Minnesota);
- (2) The Individual, Society, and Death Curriculum  
(Baltimore, Maryland);
- (3) Morgan, Ernest. A Manual of Death Education and  
Simple Burial. Burnsville, N.C.: Celo Press, 1975.



NAME \_\_\_\_\_ DATE \_\_\_\_\_

AGE \_\_\_\_\_ SEX \_\_\_\_\_ CLASSIFICATION \_\_\_\_\_

**P I L**

James C. Crumbaugh, Ph. D.  
Veterans Administration Hospital  
Gulfport, Mississippi

Leonard T. Maholick, M.D.  
The Bradley Center, Inc.  
Columbus, Georgia

**PART A**

For each of the following statements, circle the number that would be most nearly true for you. Note that the numbers always extend from one extreme feeling to its opposite kind of feeling. "Neutral" implies no judgment either way; try to use this rating as little as possible.

1. I am usually:

1	2	3	4	5	6	7
completely			(neutral)			exuberant,
bored						enthusiastic

2. Life to me seems:

7	6	5	4	3	2	1
always			(neutral)			completely
exciting						routine

3. In life I have:

1	2	3	4	5	6	7
no goals or			(neutral)			Very clear goals
aims at all						and aims

4. My personal existence is:

1	2	3	4	5	6	7
Utterly meaningless			(neutral)			very purposeful
without purpose						and meaningful

5. Every day is:

7	6	5	4	3	2	1
constantly new			(neutral)			exactly the same

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**PSYCHOMETRIC AFFILIATES**

Box 3167

Muncie, Indiana 46321

Test #168

6. If I could choose, I would:

1	2	3	4	5	6	7
prefer never to have been born			(neutral)		Like nine more lives just like this one	

7. After retiring, I would:

7	6	5	4	3	2	1
do some of the exciting things I have always wanted to			(neutral)		loaf completely the rest of my life	

8. In achieving life goals I have:

1	2	3	4	5	6	7
made no progress whatever			(neutral)		progressed to com- plete fulfillment	

9. My life is:

1	2	3	4	5	6	7
empty, filled only with despair			(neutral)		running over with exciting good things	

10. If I should die today, I would feel that my life has been:

7	6	5	4	3	2	1
very worthwhile			(neutral)		completely worthless	

11. In thinking of my life, I:

1	2	3	4	5	6	7
often wonder why I exist			(neutral)		always see a reason for my being here	

12. As I view the world in relation to my life, the world:

1	2	3	4	5	6	7
completely confuses me			(neutral)		fits meaningfully with my life	

13. I am a:

1	2	3	4	5	6	7
very irresponsible person			(neutral)		very responsible person	

14. Concerning man's freedom to make his own choices, I believe man is:

7	6	5	4	3	2	1
absolutely free to			(neutral)			completely bound by
make all life choices						limitations of heredity
						and environment

15. With regard to death, I am:

7	6	5	4	3	2	1
prepared and			(neutral)			unprepared and
unafraid						frightened

16. With regard to suicide, I have:

1	2	3	4	5	6	7
thought of it seriously			(neutral)			never given it a
as a way out						second thought

17. I regard my ability to find meaning in my life as:

7	6	5	4	3	2	1
very great						none

18. My life is:

7	6	5	4	3	2	1
in my hands and I			(neutral)			out of my hands
am in control of it						and controlled
						by external factors

19. Facing my daily tasks is:

7	6	5	4	3	2	1
a source of pleasure			(neutral)			a painful and bor-
and satisfaction						ing experience

20. I have discovered:

1	2	3	4	5	6	7
no mission or			(neutral)			clear-cut goals
purpose in life						and a satisfying
						life purpose

## Appendix C

### THE COLLETT-LESTER FEAR OF DEATH SCALE:

#### A MANUAL

1974

David Lester

Richard Stockton State College

#### THE SCALE

Here is a series of general statements. You are to indicate how much you agree or disagree with them. Record your opinion in the blank space in front of each item according to the following scale:

- |                       |                          |
|-----------------------|--------------------------|
| +1 slight agreement   | -1 slight disagreement   |
| +2 moderate agreement | -2 moderate disagreement |
| +3 strong agreement   | -3 strong disagreement   |

Read each item and decide quickly how you feel about it; then record the extent of your agreement or disagreement. Put down your first impressions. Please answer every item.

- \_\_\_ 1 I would avoid death at all costs.
- \_\_\_ 2 I would experience a great loss if someone close to me died.
- \_\_\_ 3 I would not feel anxious in the presence of someone I knew was dying.
- \_\_\_ 4 The total isolation of death frightens me.
- \_\_\_ 5 I am disturbed by the physical degeneration involved in a slow death.
- \_\_\_ 6 I would not mind dying young.
- \_\_\_ 7 I accept the death of others as the end of their life on earth.
- \_\_\_ 8 I would not mind visiting a senile friend.
- \_\_\_ 9 I would easily adjust after the death of someone close to me.
- \_\_\_ 10 If I had a choice as to whether or not a friend should be informed he/she is dying, I would tell him/her.
- \_\_\_ 11 I would avoid a friend who was dying.

- \_\_\_ 12 Dying might be an interesting experience.
- \_\_\_ 13 I would like to be able to communicate with the spirit of a friend who has died.
- \_\_\_ 14 I view death as a release from earthly suffering.
- \_\_\_ 15 The pain involved in dying frightens me.
- \_\_\_ 16 I would want to know if a friend were dying.
- \_\_\_ 17 I am disturbed by the shortness of life.
- \_\_\_ 18 I would not mind having to identify the corpse of someone I knew.
- \_\_\_ 19 I would never get over the death of someone close to me.
- \_\_\_ 20 The feeling that I might be missing out on so much after I die bothers me.
- \_\_\_ 21 I do not think of dead people as having an existence of some kind.
- \_\_\_ 22 I would feel uneasy if someone talked to me about the approaching death of a common friend.
- \_\_\_ 23 Not knowing what it feels like to be dead does not bother me.
- \_\_\_ 24 If I had a fatal disease, I would like to be told.
- \_\_\_ 25 I would visit a friend on his/her deathbed.
- \_\_\_ 26 The idea of never thinking or experiencing again after I die does not bother me.
- \_\_\_ 27 If someone close to me died I would miss him/her very much.
- \_\_\_ 28 I am not disturbed by death being the end of life as I know it.
- \_\_\_ 29 I would feel anxious if someone who was dying talked to me about it.
- \_\_\_ 30 The intellectual degeneration of old age disturbs me.
- \_\_\_ 31 If a friend were dying I would not want to be told.
- \_\_\_ 32 I could not accept the finality of the death of a friend.
- \_\_\_ 33 It would upset me to have to see someone who was dead.
- \_\_\_ 34 If I knew a friend were dying, I would not know what to say to him/her.

- 35 I would not like to see the physical degeneration  
of a friend who was dying.
- 36 I am disturbed by the thought that my abilities  
will be limited while I lie dying.

Appendix D

\_\_\_\_\_  
Date

Dear \_\_\_\_\_,

From April 28 to May 8, I will be teaching topics about death and dying to the Home and Family class as part of a research project. The topics will include: understanding grieving, helping children during their grief, the meaning of death according to medical and legal terms, helping people close to death by understanding their fears, different religious and cultural ideas about death, and the cost of funerals and burial plots.

In the Home and Family classes, we discuss marriage, birth, and rearing children. It is also important to talk about aging and the dying of our loved ones since everyone is faced with this emotional event.

Because this is a special project, I will give two tests at the beginning and at the end of this unit to see if the students' attitudes about death and dying has changed. I would also like to find out if the students have a different attitude about life after studying this unit.

I am respectfully asking permission for \_\_\_\_\_ to be involved in these class discussions about death and dying. If at any time your son or daughter feels uncomfortable during these lectures or during the learning activities, she/he can be dismissed from class.

If you have any questions about this project, please telephone me at 434-4901. I can also arrange a parent-teacher conference or a home visit if you prefer.

Thank you for your cooperation.

\_\_\_\_\_  
Teacher's signature

Approval \_\_\_\_\_ Disapproval \_\_\_\_\_

\_\_\_\_\_  
Parent's or Guardian's  
signature

Appendix D

\_\_\_\_\_  
Fecha

Estimado \_\_\_\_\_,

Del 28 de abril hasta el 8 de mayo, espero dar conferencias a la clase de "Home and Family" sobre el tema de la muerte y el morir. Estas presentaciones incluirán: un entendimiento de la pesadumbre, como ayudar a niños durante el periodo de su pesadumbre, el significado de la muerte segun la ley y la medicina, como entender las temores de las personas a punto de morir y como ayudarlos, las diferentes ideas culturales y religiosas tocante a la muerte, y el costo de funerales y sepulcros.

En las clases de "Home and Family," hablamos del matrimonio, nacimiento, y la crianza de niños. Es importante tambien incluir discusiones sobre la vejez y la muerte de nuestros queridos, siendo que estos sucesos emocionales nos toca a todos.

Debido a que éste es un proyecto especial, espero dar dos exámenes, uno al comienzo y otro al final, para ver si las actitudes de los estudiantes sobre la muerte hagan cambiado. Me gustaria tambien areriguar si sus actitudes sobre la vida son diferentes despues de haber terminado estas lecciones.

Por eso les pido permiso para que \_\_\_\_\_ participe en las discusiones sobre la muerte y el morir. Si su hijo o hija no se sienta gusto o si le perturba hablar de estos sujetos o participar en las actividades, se puede disculpar de la clase.

Si hay preguntas, favor de llamarme en 434-4901. Si desea conferencia o visita a la coasa de Uds., estoy para servirles.

Gracias por su atención.

aprobacion \_\_\_\_\_

desaprobacion \_\_\_\_\_

\_\_\_\_\_  
Firma de pabres o  
guardian

\_\_\_\_\_  
Firma de la maestra



Appendix E

Parental Consent Letter  
(Control Group)

April 15, 1980

Dear \_\_\_\_\_,

The Home and Family class, 4th period, has been selected as the control group for a research project, entitled The Effects of Death and Dying Education Upon Death Fear and Perceptions of Life. As members of the control group, the students will only have to take two (2) pre and two (2) post tests. Both tests take approximately 25 minutes to complete. The students of the control group will not be required to write their names on the pre and post tests. \_\_\_\_\_ will also not be exposed to any lessons about death and dying. The students will continue their lessons with Mrs. Trevino.

I am respectfully asking permission for \_\_\_\_\_ to be part of my research project. If you have any questions about the project, please telephone me at 434-4901. I can also arrange a parent-teacher conference or a home visit if you prefer.

Thank you for your cooperation.

\_\_\_\_\_  
Teacher's signature

\_\_\_\_\_ Approval      \_\_\_\_\_ Disapproval

\_\_\_\_\_  
Parent's or Guardian signature

Appendix F  
Principal Approval  
TEXAS WOMAN'S UNIVERSITY  
Box 23717 TWU Station  
Denton, Texas 76204

HUMAN SUBJECTS REVIEW COMMITTEE

Name of Investigator: Beverly Lejeski Center: Denton

Address: 8100 Pinebrook #1703 Date: March 10, 1960  
San Antonio, Texas 78230

Dear Beverly Lejeski

Your study entitled The Effects of Secondary Death and Dying  
Education Upon Death Fear and Perceptions in Life

has been reviewed by a committee of the Human Subjects Review Committee and it appears to meet our requirements in regard to protection of the individual's rights.

Please be reminded that both the University and the Department of Health, Education, and Welfare regulations typically require that signatures indicating informed consent be obtained from all human subjects in your studies. These are to be filed with the Human Subjects Review Committee. Any exception to this requirement is noted below. Furthermore, according to DHFW regulations, another review by the Committee is required if your project changes.

Any special provisions pertaining to your study are noted below:

Add to informed consent form: No medical service or compensation is provided to subjects by the University as a result of injury from participation in research.

Add to informed consent form: I UNDERSTAND THAT THE RETURN OF MY QUESTIONNAIRE CONSTITUTES MY INFORMED CONSENT TO ACT AS A SUBJECT IN THIS RESEARCH.

The filing of signatures of subjects with the Human Subjects Review Committee is not required.

Other:

✓ No special provisions apply.

cc: Graduate School  
Project Director  
Director of School or  
Chairman of Department

Sincerely,

*Marilyn Hanson*

Chairman, Human Subjects  
Review Committee

Appendix G  
Human Research Committee Approval

To: Dr. Block  
From: Beverly E. Lejeski, Homemaking Dept.  
Date: February 12, 1980  
Re: Thesis research approval

I am requesting permission to conduct my thesis research project, entitled, The Effects of Secondary Death Education Upon Death Fear and Perceptions in Life, at John F. Kennedy High School. The date of the experiment is approximately April 28 to May 8, 1980.

Students from the two Home and Family classes, 4th (11:30 to 12:30) and 6th period (1:30 to 2:30) will be involved in the project. Parental permission will be secured before the project begins.

Thank you for your time.

Approval ✓

Disapproval \_\_\_\_\_

Approval ✓

Disapproval \_\_\_\_\_

Approval ✓

Disapproval \_\_\_\_\_

Beryl Block  
Principal  
Sylvia Higgins  
Vocational Director  
Martha Smith  
Department Chairperson

## Appendix H

### Experimental Group's Individual Differences Purpose in Life Test and Collett-Lester Fear of Death Scale

Pre Test

Post Test

Student	CLFDS					PIL				
	DS	DO	DyS	DyO	Total	DS	DO	DyS	DyO	Total
001	-17	-2	-1	-3	39	-21	+10	-3	+10	41
002	-10	+2	+13	+4	99	-1	+6	+11	+4	107
003	-1	+16	+9	-10	119	-2	-9	+4	-12	118
004	-12	+16	+9	-10	110	+6	+17	+4	-7	106
005	-1	+16	+4	-8	120	+13	-2	-2	-21	122
006	+7	-1	-2	-6	100	+15	+8	-4	-6	98
007	+5	+17	+9	-13	110	+1	+4	+5	+7	108
008	+22	+7	+3	-2	117	+11	+21	+6	-8	120
009	-9	+19	+9	-16	97	+6	+6	-8	-9	90
010										
011	+3	+9	-7	-17	121	-5	+6	+10	-8	115
012	-5	+10	+2	+4	112	-8	+3	-1	-7	101
013	+6	+5	+4	-3	97	-7	-1	-8	-4	113
014	-4	-1	+5	-9	115	+7	+9	+2	-4	120
015	-16	-2	-5	-14	83	-21	+1	-7	-16	74
016	-10	-6	-7	-21	106	-9	+4	-8	+4	88
017	-12	+3	-11	-13	123	-2	-3	-6	-19	126
018	+7	-2	+13	+3	98	-5	+2	+5	-3	135
019	+2	-2	-8	0	113	+2	+9	-1	+8	123
020	-4	0	-5	-25	108	-13	+3	-5	-21	121
021	+18	+15	+9	0	113	+8	+8	+8	-9	109
022					121					87
023	+3	+12	+1	-4	126	-13	+12	-11	-9	124
024	+12	-20	+11	+2	112	-6	-4	+1	-6	91
025	-12	+13	+6	-19	28	-15	+2	+4	-27	35

CLFDS = Collett-Lester Fear of Death Scale

PIL = Purpose in Life Test

DS = Death of self

DO = Death of others

DyS = Dying of self

DyO = Dying of others

# Appendix I

## Control Group's Individual Differences Purpose in Life Test and Collett-Lester Fear of Death Test

Pre Test

Post Test

Student	CLFDS					PIL				
	DS	DO	DyS	DyO	Total	DS	DO	DyS	DyO	Total
001	-2	+9	-9	-12	86	+2	-8	00	+2	83
002	+3	-10	-12	-18	138	-2	-6	-50	-27	133
003	+12	+13	-12	-13	109	+6	+7	+4	-2	109
004	+2	-1	-17	-6	122	+4	-10	-16	+2	117
005	-1	+7	-10	-10	84	-11	+2	-6	-2	74
006	+1	+6	0	-13	118	-4	+3	-7	-12	102
007	+15	-5	+5	-3	127	+18	+11	+4	0	127
008	+3	+3	-8	-13	101	-10	-15	+4	-4	97
009	+17	+7	+2	-16	110	+12	-15	+4	-4	89
010	+2	-1	+6	-2	116	-5	+8	+8	-1	111
011	+2	-1	+6	-2	119	-4	-1	-9	-19	121
012	+9	+15	+9	-10	134	-5	+15	+5	-5	122
013	-8	+11	+11	-19	107	+6	+4	-4	-9	99
014	+2	+9	-4	-8	84	+1	+7	+3	-3	86
015	+5	+3	+1	-7	95	+12	+3	+5	-12	98
016	-10	+11	0	-20	78	-19	-8	-5	-12	90
017	-6	+12	+1	+6	124	+8	+3	-11	-9	107
018	+7	+8	+4	+1	98	-3	+8	+5	-8	106
019	+11	+11	+11	+9	107	+9	+1	+4	+11	108
020	+21	+21	+14	-10	111	+25	+2	+7	-3	128
021										
022	-1	-1	+4	-7	110	+23	-10	+6	+4	108
023					100					117
024	-2	+11	+5	-3	98	-5	+5	-4	-17	79
025	+15	-6	+9	+1	98	+11	+14	+6	-8	98

CLFDS = Collett-Lester Fear of Death Scale

PIL = Purpose in Life Test

DS = Death of self

DO = Death of others

DyS = Dying of self

DyO = Dying of others

## Appendix J

### Experimental Group's Individual Differences Cognitive Test

Pre Test

Post Test

Pre Test Score		Post Test Score
Student		
001	54	52
002	54	80
003	28	64
004	78	82
005	64	74
006	34	36
007	52	70
008	60	82
009	36	68
010		38
011	32	78
012	32	26
013	66	76
014	50	64
015	58	88
016	52	56
017		90
018	58	64
019	26	70
020	38	56
021	72	82
022	48	
023	50	74
024	50	62
025	74	94

## Appendix K

### Death and Dying Instructional Aids

#### Educational Clearing Houses: Filmstrips, Books, Course Outlines

1. Perspective Associates; De Kalb, Illinois
2. Sunburst Communications: Pleasantville, New York
3. Contemporary/McGraw Hill; New York, New York
4. Time Life Multi-Media; New York, New York
5. Waverly Press, Inc.; Baltimore, Maryland
6. Home Economics School Service; Culver City,  
California
7. Barr Films, Jacoby & Storm Publications, Inc.;  
Westport, Connecticut
8. Brofilms; Easton, Maryland
9. Guidance Associates; New York, New York
10. The Center for Humanities, Inc.; White Plains,  
New York
11. Films Incorporated, Wilmette, Illinois
12. The Eccentric Circle, Greenwich, Connecticut

Course Outlines Composed by Thanatology Researchers

- Berg, David H. and Daugherty, George G. (Eds).  
The Individual, Society, and Death. Baltimore:  
 Waverly Press, Inc., 1974.
- Grollman, E.A. (Ed). Concerning Death: A Practical  
 Guide for the Living. Boston: Beacon Press, 1974.
- Mills, Gretchen C.. Discussing Death: A Guide to  
 Death Education. Homewood, Illinois; ETC Publica-  
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- Morgan, Ernest. A Manual of Death Education and Simple  
 Burial. Burnsville, N.C.: Celo Press, 1975.
- Hardt. The Final Frontier. New Jersey: Prentice Hall,  
 Inc., 1979.
- Ulin, Richard O. Death and Dying Education. NEA,  
 Washington, D.C.
- Wilcox, Sandra and Sutton, Marilyn. Understanding Death  
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 Port Washington, New York: Alfred Publishing, Inc.,  
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