Ego-Integrity and Attitude to Death and Dying among Civil

Service Retirees in Cross River State, Nigeria

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Abstract

The study sought to determine whether ego-integrity or sense of fulfilment influenced the attitude to death and dying of civil service retirees in Cross River State (CRS), Nigeria. An instrument consisting of four sub-scales, namely, Background Data Scale (BADs), Ego-integrity Scale (EIS), Attitude to Death Scale (ATDS) and Attitude to Dying Scale (ATDS) was adopted. Ex-post facto design was employed, using a sample of 430 and the data was analysed in line with two hypotheses, using ANOVA for both. The indication from the result was that attitude of retirees to both death and dying tended to be more negative than the positive attitude of acceptance. It was recommended that retirees and other older adults view death as a passage to another existence, hence, the need to be positive about it, and hold one’s self in readiness for this particular rite of passage instead of being fearful or in denial.

Keywords

ego-integrity, satisfaction, fulfilment, attitude

1. Introduction

The world indeed is a stage where the players have their entrances and their exits. Once they make their entrances, they begin to weave through the various acts and scenes of life until they arrive at the last act, that is, late adulthood. This phase of life namely, late adulthood which begins at about 60 represents an important benchmark in the human life span. These being the twilight years, individuals come to the realization that life’s journey is gradually coming to its final destination and the prospect of death becomes either a painful or pleasant reality depending on the individual’s attitude.

Erikson (1987) put forth that the most important task at this stage of life is that of reflection and introspection, the stage he refers to as ego-integrity versus despair. Ego-integrity in Erikson’s terms means satisfaction with the life lived that would result in a sense of meaning, purpose or wellbeing, the capacity for adjustment to the triumphs and challenges adherent to being, in old age as well as a positive attitude of acceptance of impending death. On the other hand, dissatisfaction with the life lived would result in resentment, bitterness and despair as well as a negative attitude to death in the form of fear, denial and indifference.

In essence, older adults who feel well accomplished and have little or no regret with how life has been
lived have a sense of integrity which allows them to accept the inevitability of disease and death with
courage, that is, a positive attitude. However, individuals who see their lives as series of personal
misfortunes and failures, give way to a sense of defeat, bitterness and despair which allows the
individual to view death with fear and dread because death represents emptiness and failure which is a
negative attitude (Erikson, Erikson, & Kivnick, 1986).

According to Graham (1987), the way individual view death determines, to a surprising degree, the
way they live their lives, consciously or unconsciously. Sometimes older adults are seen to live their
lives oblivious of the proximity of death and disease. In the opinion of Graham (1987), factors such as
age, gender, health, family, social, economic and religious background impact on older adults’ attitude
to death. In the Nigerian context, cultural and traditional factors may play significant role in attitude to
death and dying.

Furthermore, human nature and the survival instinct make it such that nobody wants to die, no matter
the age. Older adults may therefore have mixed feelings about their prospect of death and dying.
Sometimes, physical problems and losses coupled with other challenges of old age may bring upon
older adults apathy and diminished desire to live (McCue, 1995). For others, the comforts and
abundance of life may inhibit their sensibilities to their finitude and mortality that the slightest
insinuation of death and disease brings on panic and fear. There are yet others who feel that they have
lived their lives to the fullest and therefore find meaning and purpose in their existence. For such
people, death is not a frightening thought because, death, to them, is just another stage in a meaningful
existence (Erikson, 1987).

Nonetheless, fear of death seems to be the most pervasive attitude because death means loss of
relationships, loss of pleasures and beautiful things of life (Powers, 1995). Some worry about inability
to complete all that they set out to do; they feel they have not accomplished what they hoped in life and
as such are disappointed in themselves (Zisook & Downs, 2000). Others feel bad because of all the
things they have not done adequately—travel, spend more time with loved ones and tie up loose nuts
(Kalish & Reynolds, 1986).

Also, many who have seen loved ones suffer in the last days, state that, they are not afraid of death
itself, but rather the event of dying (Kasterbaum, 1974). Still, others who may not fear the act of dying
have fear of the cessation of life. They dread the finality of death, the thought of nothingness, of
ceasing to exist, of separation from loved ones, the gnawing fear of being replaced and the thought of
the decomposition of the body (Kavanaugh, 1984).

Notwithstanding, life of purpose and meaning should reflect in an attitude of acceptance and
preparedness, on a daily basis, for the somewhat unforeseen, rather than fear. It would reflect a
willingness to let go and as Goodman (1981) put it, a positive attitude involves a reconstruction and
transformation of values, beliefs and meaning systems in the evening of life. Acceptance is not to result
in passivity, resignation, self-pity or melancholy, neither is it about cheating death (Powers, 1995). It
should rather result in an optimistic, joyful, purposeful and useful life—useful to oneself and society,
one way or the other, even in the evening of life. Indeed, positive attitude of acceptance would propel individuals towards preparedness and facing the proximity of death with little or no fear. On the other hand, negative attitude of fear and denial would render older individuals delusional, believing that the end is still far away and therefore, leave themselves utterly unprepared for this inevitable end.

The way people live their lives and the things they do in our Nigerian society, according to the reports on the mass media, creates the strong impression that ours is a death denying society. These reports of the greed and quest for stupendous wealth, naked power, fame, youthful appearance, extensive landed property and what have you, even by older adults, give a clear indication that many older individuals are still totally engrossed in the mundane, the ephemeral and trivial pursuits. Oppression, exploitation and perversion of justice are the order of the day, as if life and the world are under their control, even when they see their contemporaries drop dead right before them. These are glaring demonstrations of insensitivity to their mortality and finitude, especially on the part of the older adult. Hence, using retirees as a typical population in late adulthood, this research sets out to ascertain the level of preparedness on the part of older adults, to face death and disease on a daily basis, by measuring their attitude to death and dying.

The main purpose of this study is to determine whether achievement of ego-integrity or sense of fulfilment influence the attitude to death and dying of civil service retirees in the late adulthood in Cross River State.

The hypotheses guiding the study are:
1) Ego-integrity of retirees in Cross River State does not significantly influence their attitude to death.

2. Methodology

The ex-post facto design was adopted for this study since the manifestation of the independent variable, ego-integrity, is already evident in the respondents and as such is not subject to manipulation by the researcher.

The population consist of all retirees of both state and federal civil service who are in their late adulthood, 60 years and above, in Cross River State, since the concept ego-integrity is only applicable to individuals in their late adulthood.

A stratified random sampling based on the nine locations in of the state sub-treasuries, federal pension’s office and University of Calabar pension’s office, was adopted for the purpose of selecting 430 respondents for the study. The nine locations represents pay points from which retirees picked up their pay checks each month.

The instrument consisted of a structured questionnaire which had four parts, Background Data Scale (BADs), Ego-integrity Scale (EIS), Attitude to Death Scale (ATDS) and Attitude to Dying Scale (ATDS). BADS consist of eight items that sought from retirees’ background information ranging from age, sex, number of children, to relationship with children. EIS, an eight-item scale that sought to
establish the level of satisfaction of retirees on dimensions such as education, health, finance, success level of children and others. ATDS, a ten-item scale sought to measure retirees attitude to death through responses to the ten items; response range from acceptance, indifference, refusal, to fear. ATDYS, a seven-item scale sought to measure retirees’ attitude to the process of dying through their response to the seven items; responses ranged from low extent, moderate extent to indifference.

The instrument was thoroughly scrutinized by experts in measurement and psychology to establish the content validity. It was then administered on 60 civil servants who are close to retirement in the civil service and after proper coding, the Cronbach Coefficient Alpha reliability method was employed to establish its internal consistency. The reliability so derived for the four scales ranged between 0.79 and 0.85.

The instrument was administered to individual retirees at their different pay points. Visits were made to these locations for ten consecutive days for the purpose of data collection. After the ten days, sampled retirees who did not show up at their pay points were traced to their residences where it was administered.

3. Results

The data collected were analysed according to the two hypotheses. The results and their interpretation are presented below.

3.1 Hypothesis 1

Ego-integrity of retirees in Cross River State does not significantly influence their attitude to death. One-way analysis of variance (ANOVA) was used to test the hypothesis; given that attitude to death is a continuous variable while ego-integrity is a categorical variable with three independent groups, high, moderate and low ego-integrity. The respondents score on dimensions such as educational level, level of job fulfilment, sense of life fulfilment and others were aggregated and sub-divided into groups, using the total score, as follows: 4-8, low; 9-16, moderate and 16, high. The results of data analysis are shown in Table 1.

| Ego-Integrity level | N   | X    | S   |
|---------------------|-----|------|-----|
| Low                 | 216 | 28.63| 7.30|
| Moderate            | 108 | 27.59| 7.32|
| High                | 106 | 28.42| 7.41|
| Total               | 430 | 28.32| 7.33|
### Table 1. Means, Standard Deviation and One-Way ANOVA of Ego-Integrity and Attitude to Death of Retirees in Cross River State

| Ego-Integrity level | N  | Mean (X) | S  |
|---------------------|----|----------|----|
| Low                 | 216| 14.74    | 5.12|
| Moderate            | 108| 15.31    | 5.45|
| High                | 106| 15.27    | 5.50|
| Total               | 430| 15.01    | 5.29|

Source of variation | Sum of square | df | Mean square | F   | P    |
|--------------------|---------------|----|-------------|-----|------|
| Between groups     | 79.435        | 2  | 39.7        | .738| .479*|
| Within groups      | 22969.916     | 427| 53.794      |     |      |
| Total              | 23049.351     | 429|             |     |      |

* P>.05 df (2, 427) Critical F=3.02.

The result in Table 1 indicate that respondents with low ego-integrity have the highest mean score (X=28.63, S=7.30) on attitude to death, followed by those with high ego-integrity (X=27.59, S=7.32). The indication from the result is that the observed difference in the mean attitude to death of the groups is not statistically significant (P>.05). This is because the calculated F value of .738 is less than the critical F value of 3.02 at (2, 427) degrees of freedom. This means that ego-integrity does not significantly influence retirees attitude to death. Thus the null hypothesis is upheld.

### 3.2 Hypothesis 2

Ego-integrity of retirees in Cross River State does not significantly influence their attitude to dying. For the same reason as in hypothesis 1, this hypothesis was also tested with one-way ANOVA. The results are shown in Table 2.

### Table 2. Means, Standard Deviation and One-Way ANOVA of Ego-Integrity and Attitude to Dying of Retirees in Cross River State

| Ego-Integrity level | N  | Mean (X) | S  |
|---------------------|----|----------|----|
| Low                 | 216| 14.74    | 5.12|
| Moderate            | 108| 15.31    | 5.45|
| High                | 106| 15.27    | 5.50|
| Total               | 430| 15.01    | 5.29|

Source of variation | Sum of square | df | Mean square | F   | P    |
|--------------------|---------------|----|-------------|-----|------|
| Between groups     | 33.001        | 2  | 16.500      | .588| .556*|
| Within groups      | 11983.941     | 427| 28.065      |     |      |
| Total              | 12016.942     | 429|             |     |      |

* P>.05 df (2, 427) Critical F=3.02.
As shown in Table 2, the moderate level of ego-integrity group has the highest mean attitude to dying ($\bar{x}=15.31$, $S=5.45$) followed by the high ego-integrity group ($\bar{x}=15.27$, $S=5.50$) and then the low ego-integrity group ($\bar{x}=14.74$, $S=5.12$). The calculated F value for the ANOVA is .568 and since this value is less than the Critical F value of 3.02, at (2, 427) degrees of freedom and .05 significance level, it means that the observed difference in the mean attitude to dying score of the three groups is not statistically significant. This means that ego-integrity does not significantly influence the attitude to dying of retirees in Cross River State. The null hypothesis is therefore retained.

4. Discussion
The result of the study indicate that there is no difference in the attitude of retirees to death and dying based on their achievement of ego-integrity or the lack of it. The tendency is towards negative attitude of indifference, denial, resignation and fear than the positive attitude of acceptance. This conforms with Erikson’s (1986) findings that older adults who are dissatisfied with life often have negative attitude towards death and disease. However, for those with high ego-integrity, the findings are contrary to Erikson’s theory which contends that such older adults are optimistic and positive in attitude toward issues of death and dying.

One explanation could be that it is part of human nature and the survival instinct that cause human beings to be apprehensive of death, no matter the age. It could also be that, these older adult may feel that they have worked very hard all their lives and have accumulated enough to live comfortably and happily and therefore worry about death. Powers (1995) put it that the prospect of loss of pleasures and beautiful things of life cause people to be apprehensive about death. It is also possible, as Zisook and Downs (2000) put it, these people feel they have not accomplished all that they set out to do in life. They may also feel that there is still a lot left to be done, according to Kalish and Reynolds (1986). Fear of the unknown might well be a factor, after all no one has gone there and come back to tell how it is there.

5. Conclusion
The study set out to ascertain how prepared retirees and other older adults are, to face death and disease on a daily basis, by measuring their attitude to death and disease. The overwhelming evidence adduced is that attitude of retirees across the board tend to be more negative—denial, indifference, refusal or fear than the positive one of acceptance, level of ego-integrity or sense of fulfilment notwithstanding. Since late adulthood spells the end of the life span continuum, it is important that older adults develop positive attitude of acceptance which will motivate them to prepare for this inevitable aspect of human existence, that is, death.

Based on the above conclusion, the following recommendations are proffered:

-Late adulthood is hardly the time to acquire stupendous wealth or to worry about those things that are left undone. It is rather a time to cement relationships, mend fences, create memories and contribute as
much energy as the older adult can spare, thus securing one’s foot-prints in the sand of time.

-Death should be viewed, as a transition or translation into another stage of existence. Preparation should therefore, be made for this particular rite of passage, just like all other rites of passage in the human developmental continuum.

-There is the need to organize seminars, workshops and retreats for older adults with a view to sensitizing them towards impending death and the need to cultivate altitude of acceptance and state of preparedness. It is also necessary to counsel and encourage those in despair, assuring them that all hopes may not be lost, that they could still add meaning and purpose to their lives that would result in positive attitude to death.

References

Erikson, E. N. (1987). *A way of looking at things: Selected papers from 1930–1980*. New York: Norton.

Erikson, E., Erikson, J. M., & Kivnick, H. Q. (1986). *Vital involvement in old age: The experience of old age in our time*. New York: Norton.

Goodman, L. M. (1981). *Death and the creative life: Conversation with eminent artists and scientists as they reflect on life and death*. New York: Springer.

Graham, B. (1987). *Facing death and the life after*. Texas: Word Incorporated.

Kalish, R. A., & Reynolds, D. K. (1986). *Death and ethnicity: A psycho-cultural study*. Los Angeles: University of S. California Press.

Kasterbaum, R. (1974). *Childhood: The kingdom where the creatures die*. *Journal of Clinical Child Psychology, 8*, 11-14.

McCue, J. D. (1995). The naturalness of dying. *Journal of the American Medical Association, 273*, 1039-1043.

Powers, J. (1995). *Introduction to Tibetan Buddhism*. Ithaca, NY: Snow Lion.

Zisook, S., & Downs, N. S. (2000). Death, dying and bereavement. In B. J. Sadock, & V. A. Sadock (Eds.), *Comprehensive textbook of psychiatry* (7th ed.), (1956-1967). Philadelphia: Lippincott Williams & Wilkins.

Zisook, S., & Downs, N. S. (2000). Death, dying and bereavement. In B. J. Sadock, & V. A. Sadock (Eds.), *Comprehensive textbook of psychiatry* (7th ed.), (1956-1967). Philadelphia: Lippincott Williams & Wilkins.