

HOW ACCULTURATION AFFECTS A RURAL AGED
FILIPINO POPULATIONS VIEW OF DEATH

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AGED FILIPINO POPULATIONS VIEW OF DEATH

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By

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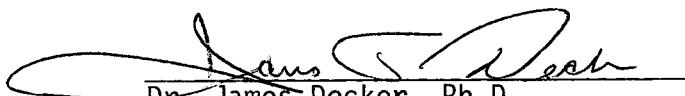
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ABSTRACT

The purpose of this study was to investigate the affect of acculturation on an aged rural Filipino populations relationship and meaning toward death. It also examine the meaning of death for this population. Present literature suggest that for minorities, acculturation is a negative process which depletes an individual's cultural heritage, and hence deprives one of meaningful symbols, myths and beliefs which would otherwise provide a meaningful source of value when facing death. It is furthermore speculated that as one becomes increasingly acculturated into the predominant culture, death becomes correspondingly more adverse, alien and non-existent.

Twenty rural aged Filipinos living in Delano, California, were interviewed for two hours. The duration of the interview process lasted three months. Information was obtained utilizing a structured questionnaire format as well as participant-observation interviews. Rothstein's concept of "Personalization of Death" was utilized to obtain the degree of each respondent's awareness of his/her mortality. The Kastenbaum Scale of Ethnicity was administered in order to arrive at an indice for each respondent's level of ethnic saturation.

The findings of this investigation are:

1. Seven of the 20 respondents revealed that they were aware of their own mortality. These were the "personalizers." The

- remaining 13 respondents were "non-personalizers."
2. Death was entirely accepted or rejected by each of the respondents. There was no gradation in one's awareness or lack of awareness of his/her mortality.
 3. Gender and age were two crucial variables that controlled for the "personalization of death." All five women in the sample were "personalizers." The mean age of the "personalizers" was 67, whereas the mean age of the "non-personalizers" was 76.
 4. The meaning of death for this population was found to be positive. Death was seen as a release from this temporal life. Death ushered in the fulfillment of one's spiritual life, and also, a reunion with the loved ones.
 5. There was a positive relationship between acculturation and the respondent's awareness of his/her mortality, as well as the respondent's ability to conjure more positive symbols and meanings pertaining to death.

This study suggest that from a minority perspective, acculturation should be viewed as a positive process, enhancing the respondent's awareness of his/her sense of mortality. More research needs to be directed toward understanding how gender and age influence one's sense of mortality. Finally, the existential supposition that for the great majority of people, death is distant and almost non-existent was substantiated as only 30 percent of the sample were "personalizers."

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CHAPTER I

INTRODUCTION

Since the turn of the century death has increasingly been viewed as a noxious disease, a catastrophe in the life of modern people. Death has become an alien and adversive event (Aires, 1974), almost an unmentionable subject. Recent research on the subject of death reveals that the most distasteful aspect of death is that it brings an end to our ambitions, goals, projects and plans (Diggory and Rothman, 1961). Anticipated death carries overtones of failure, defeat, humiliation, impotency, and despair (Kastenbaum, 1976). Ironically, those who have the most difficulty resigning themselves to the fact of death and their own mortality are the overly ambitious who have a great need for achievement and independence (Zetzel, 1965).

In western society, particularly in the predominant culture of the United States, death is seen as an external contingency; it is in the distant future, remote from our awareness (Kastenbaum, 1976),

Death has very little or no place in an industrial and secular society. The dead and their concerns are simply not relevant to the living in a society that feels liberated from authority of the past and orients its energies towards immediate preoccupations and future possibilities. (Blauner, 1964, p. 38).

The decreasing visibility of death, with its loss of stature and power, has created a crisis in the meaning of death in western society (Blauner, 1964). Our present culture, which has often been described as narcissistic, reinforces our "specialness" and insulates us from our awareness

of mortality (Yalom, 1981). Without a sense of mortality an individual can never experience the transitoriness and brevity of life and cannot "let go," as it were, in the final act of leaving this world. Because many have lost a sense of meaning in their lives, death has become a meaningless and terrifying event. Perhaps this is why Becker (1973) stated that few indeed are able to face death with equanimity and without self-pity, self-reproach, and bitterness.

Research studies addressing the topic of death suggest that those who are remote from the predominant culture are better able to accept their own mortality than their counterparts in the predominant society. For this study, predominant society includes the Caucasian race. It has been suggested that those living in rural areas, and those from ethnic subcultures are better equipped to face the awesomeness of death (Kastenbaum, 1976). In ethnic subcultures it is hypothesized that death is viewed as having an internal locus (Kastenbaum, 1976). We can then argue that these populations will have less distance from death. They have a sense of the brevity of life and the anticipation of death carries overtones of reunion and fulfillment rather than despair and dreaded isolation (Kastenbaum, 1976).

This study will examine the relationship of the process of acculturation and death, as it pertains to a minority population of rural aged Filipinos. Literature which reflects the predominant culture suggests that these people have great difficulty resigning themselves to the fact of death (Choron, 1963; Kastenbaum, 1967 and Zetzel, 1965). This study attempts to answer the question of whether the same would hold true for a minority population. Would the increase in one's

acculturation into the predominant society increase the likelihood of death becoming a more alien and adverse event?

Statement of the Central Clinical Research Questions

Major questions

1. Is this rural aged Filipino population able to personalize death?
2. To what extent is death personalized or non-personalized in this population?
3. Does acculturation in this population affect the ability to personalize death?

Sub-questions

1. What is the meaning of death to this population?
2. Does acculturation in this population affect their "meaning of death?"
3. Does acculturation affect whether this population is participatory or overcoming (denying in their relationship toward death)?

History and Overview

Before the twentieth century, death remained a solemn event in life (Aires, 1974). In the past, death was also omnipresent, familiar; one approached it with a compliant attitude (Aires, 1974; Toynbee, 1967). However, by the early twentieth century, this attitude toward death became increasingly terrifying (Aires, 1974). This change in attitude was first seen by social and behavioral scientists in America and England who were studying elderly populations. Research by Irving Gorer (1963) in England and the works of Herman Feifel (1956) and

Robert Kalish (1963) in America showed that the elderly in both countries were unprepared to face death. These authors found that our aged populations approached death with bitterness, self-reproach, and self-pity. They also found that anticipated death carried overtones of dreaded isolation, despair, or separation. According to these authors, death for the elderly represented the ultimate catastrophe; the most painful and ultimate separation and isolation. But this terrifying aspect of death was not restricted to the elderly. Such well known authors as Albert Camus, Franz Kafka, Arnold Toynbee, and Bertrand Russell further elaborated and articulated the awesomeness of death in our contemporary society. Such existential writers as Auden (1947), Camus (1957), and Eliot (1962) developed the symbolic theme of "dying alone." For many in our contemporary culture, death became a cruel joke, devoid of meaning. As a result, death had somehow taken away dignity (Tillich, 1952). In the twentieth century death therefore represented a rupture or sudden break with life in which a person became, "emotionally stirred ... emotions shook them (people) ... they cried, prayed and gesticulated" (Aires, 1974, p. 21).

In western society, death was increasingly viewed as the inevitable termination and restriction of existence, experienced as a meaningless and empty final ending. Tolstoy vividly revealed the contemporary crisis of death in his story, The Death of Ivan Illyich. Ivan Illyich, lamented the fact that there was no meaning in his life that would not be destroyed by the inevitability of death. Death's meaninglessness was more recently expressed by Bertrand Russell (1952),

All the labors of the ages, all the devotion, all the inspiration, all the noonday brightness of human genius, are

destined to extinction in the vast death of the solar system, and the whole temple of man's achievement must inevitably be buried beneath the debris of a universe in ruins. (p. 465).

For Becker, Camus, Kafka, Kastenbaum, Satre, and Russell death makes a person's whole life a tragedy, as nothing is immune to the destroying power of death. These authors also note that there is no way of overcoming the nihilistic implications of death.

In summary, we see that since the advent of the twentieth century people have come to fear death. Success and achievement have become goals and death has become a subject of denial or fear. This view of death is reflected throughout literature and in the theoretical dissertations of the major philosophers of the twentieth century. We can place these "philosophers" into specific theoretical orientations, but despite differences in "orientation," the central concept, fear of death, remains similar throughout. These "orientations" can be defined as psychoanalytic and existential.

Psychoanalytic Orientation

By the mid 1950's, the concept of death gained acceptability and recognition as a valid area of investigation (Yalom, 1981). Psychoanalytic thought up to 1955 had omitted the topic of death as a central psychoanalytic concept. Some psychoanalytic oriented writers, however, have viewed death as a problematic and mysterious concern facing people (Becker, 1973; Boss, 1949; Brown, 1959; Eissler, 1955; May, 1977; Rank, 1945; Rosenthal, 1963; Searles, 1966; Yalom, 1980, and Zillboorg, 1943). These authors have given serious thought to death as a significant source of anxiety and psychopathology. Their major

themes are: fear of death, dread of death, and death anxiety, often grounded in the dramatic and behavioral living out of one's existence. Another major concept is that escape from death is impossible (Becker, 1973). This concept could be viewed as the ultimate symbol of anxiety, or the "primordial source of anxiety: and as such, it has been there beneath castration, beneath separation and abandonment (Rank, 1952). Therefore, dread of death, fear of death, and death anxiety are by no means the exclusive province of psychologically troubled individuals. "The deepest need is to be free of the anxiety of death and annihilation but it is life itself which awakens it" (Becker, 1973, p. 66). Psychoanalytic oriented "philosophers" paralleled the thinking of the Existentialists. Although the psychoanalytic "philosophers" believe that an individual's earliest experiences are extremely important, they do not explain the most important sources of dread. This answer is provided by the existential writers.

Existential Orientation

Existentialists believe that the pervasiveness of the fear of death and the source of dread in general is transpersonal; it applies to every one, for it belongs to the him "situation in the world" (Yalom, 1981, p. 95). Existential writers, Berdyaev, 1965; Buber, 1966; Camus, 1955; Jaspers, 1964; Kierkegaard, 1843, Marcel, 1965; and Satre, 1945, focused their attention on problems of alienation and estrangement of the modern people. Heinemann (1958) delineates this alienation and estrangement:

The facts to which the term 'alienation' refers are objectively different kinds of dissociations, breaks or ruptures between human beings and their objects, whether the latter be other

persons, or the natural world, or their own creations in art, science and society; and subjectively, the corresponding states of disequilibrium, disturbance strangeness and anxiety. (p. 9)

Since man has cut himself off from the ground of creativity, freedom and meaning (p. 25), a preceding unity and harmony had somehow been transferred into disunity and disharmony.

Camus (1957), Eliot (1962), and Kafka (1959) have also expressed their revolt against the all embracing powerful influence of technology. These authors saw that our scientific and technological culture was increasingly dehumanizing people. They saw technological and industrial processes transforming people into things, into pieces of reality which pure science could calculate and technical science could control. Increasingly they saw people appearing to themselves and others as agglomerations of mechanical functions. They spoke of modern people as "one dimensional," "hollow." They saw the tragedy inherent in a technological society which increasingly views all problems as technological. Most existentialists agree that ultimate problems, e.g. death, freedom, alienation, can never be technologically solved, and they were overwhelmed by the fact that activities, whether in philosophy or in the arts, had become technological and had lost their grounding in human existence (Heinemann, 1958).

Existential philosophy has always had a striking preoccupation with death. Relationships between problems and meanings of death (Kierkegaard, 1844; Jaspers, 1964; Sartre, 1945 and Tillich, 1952) are explored. Theoreticians as well as novelists (Dostoeveski, Tolstoy) have stressed the importance of death; death expresses what it means to be human. Existentialism argues that people cannot rely on reason, science, or the inevitability of progress to bring about security and

relief from the anxiety of doubt, fate, and death. Life and death are intimately related. It is agreed that if one is to live meaningfully and purposefully, one must anticipate and acknowledge one's death (Yalom, 1981). Life is not truly apprehended or fully lived unless one confronts and accepts one's death (Yalom, 1981). When death is denied or excluded, life becomes impoverished and losses its intensity (Koestembau, 1976). Life shrinks when death is denied (Koestembau, 1976).

In an existential context, dying does not refer to the event of physiological end, but rather to the potential threat of non-being. Heidegger (1926) suggests that the most important question facing people is what anticipation of death meant, and what it means for human situations. He also asserts that we are faced with a basic anxiety about our authentic potentiality for being-in-the-world. If we do not face and resolve our anxiety, we are not free to live.

Social-Cultural Realities

Americans have segregated death from society (Blauner, 1964). Industrial societies push the dead away (Blaunder, 1964). Death is like a noxious disease which needs to be removed. As one author notes, "the dead and their concerns are simply not relevant to the living in a society that feels liberated from the authority of the past and orients its energies towards immediate preoccupations and future possibilities" (Blauner, 1964, p. 390). Loss of the visibility of death in our contemporary society has lead to a lack of clear clultural directives with respect to death. Our present society lacks a single discernible

culture and thus the effective transmission of a meaningful coherent attitudinal and belief system relating to death is virtually non-existent (Blauner, 1964). Our present society does not possess a single unitary meaning of death. Becker, 1973; Blauner, 1964; Foss, 1972; Frankl, 1965; Goffman, 1964; Gorer, 1965; Kastenbaum, 1972; Lifton, 1976, and Tillich, 1965 noted that with increased industrialization, secularization, bureaucratization and technology, death has ironically become more noxious, distasteful and aversive. These authors also have suggested that as society industrializes and modernizes, the distance between the living and the dead increases.

Decreases in the visibility of death, as well as the loss of its stature and power, have created a corresponding crisis in the meaning of death in western society (Blauner, 1964). One of the major crises reveals itself in the upsurge of the movement, "death with dignity." Such writers as Becker, 1973; Blauner, 1964; Foss, 1972; Rank, 1952; Tillich, 1965; Toynbee, 1969 and Yalom, 1980, remind us that society, as well as the individual, experiences a crises of meaning when the threat of death pervades the atmosphere and yet cannot be incorporated into a religious or philosophical context. With little or no culturally sanctioned myths about death, people are left with the cruel task of binding their anxieties and ambivalences regarding death and its meaning. Five days before his death in June 1981, playwright, novelist, and short story author William Saroyan stated, "Everybody has got to die, but I have always believed an exception would be made in my case. Now what?" (p. 23). Feifel (1965) states that: "Death is the most mysterious and unknown of the unknowns, the unknown can be feared more

than the most known dreaded reality." (p. 116). Traditional cultures inform individuals as to what will happen to them when they die. Anxiety about fate, and death is bound; one has dependable, clear direction regarding death. In such cultures, religion reassures the individual against possible anxieties concerning destruction, non-being, and finitude by providing beliefs that make death meaningful, afterlife plausible, and the miseries and injustices of earthly existence endurable (Durkheim, 1949 and Malonowski, 1955).

Socio-Cultural Orientation in America

To understand the meaning and significance of death within a culture, it is imperative that one understand the belief systems and values which characterize that particular population. Although it has been pointed out that our present society lacks culturally sanctioned myths regarding death, our cultural values greatly affect the way we perceive the meaning of death as well as our manner of transcending (denying) death. More than any other culture, America has embraced socio-cultural mores which stress striving, getting ahead, beating others, leaving your mark, and accumulating wealth (Yalom, 1980). Experts have described American culture as "achievement oriented" (Aires, 1964; Becker, 1973; Diggory and Rothman, 1961; and Yalom, 1980). Americans believe in progressing to the top, doing things for money, and getting things done. We are a "doing" culture. We often ask, "What does he or she do?" rather than, "Who are you - human being, lover, father, friend?" Because of the vast resources and opportunities this country has offered, many have believed in a spirit of optimism,

expansiveness, and limitless horizons. These cultural values are reflected by our equation of death with a personal sense of failure and non-productivity (Diggory and Rothman, 1961; Yalom, 1980).

Death in an industrialized society is often viewed as the ultimate catastrophe. Death shatters our ambitions, poisons our pleasures, ends our opportunity to achieve, and erases us as experiencing beings. Death in our present predominant culture has increasingly become unmentionable even as a natural process. In a traditional society death evokes no great awe or fear. Speaking of the Russian peasants' relationship to death, Alexander Solzhenitsyn (1970) states, "They didn't puff themselves up or fight against it (death) and brag they weren't going to die. They took death calmly. They didn't stall squaring things away. They prepared themselves quietly and in good time they departed easily as if they were just moving into a new house." (p. 172). In traditional societies death signified a surrender of the self to destiny and an indifference to the too-individual and diverse forms of the personality (Aires, 1974).

From examining the socio-cultural orientation as it applies toward our own American society, let us consider some specific research studies as they apply to our society.

Present Research

Loss of status and identity, as well as bad fortune, are seen presently in our connotations of death. This is particularly true for those who are overly ambitious and whose success and independence are important for their self-esteem. Those with the most difficulty

resigning themselves to death without bitterness, self-reproach or self-pity were those who placed a high premium on active achievement as a way to maintain their self-esteem (Zetzel, 1965).

Diggyory-Rothman's study (1961) showed that the most aversive death stimulus in American society, regardless of age and sex, was not dread of one's personal extinction but the foreclosing of one's personal ambition. Death eliminated the opportunity to pursue goals important to one's self-esteem. The most threatening and anxiety provoking question given to the respondents in this study was, "All my projects and plans would come to an end." A vital question concluded this study: "Do we prefer to achieve rather than experience?" (p. 27). Achievement is so deeply entrenched in our culture that it has overpowered the appreciation of who-it-is-who-will-be-there-to-experience-the-achievement" (p. 27).

Becker (1973), Rank (1952), Yalom (1980) have suggested that in Western culture we transcend (deny or overcome) death by feeling that we are inviolable or "special." In the basic boundaries of existence we are no different from others. Yet unconsciously, everyone believes that mortality applies only to others. In our belief in our "specialness" we feel that we "count," that we are truly getting ahead and that the universe acknowledges our "specialness." Our sense of "specialness" (narcissism) helps us to diffuse the awareness of our smallness, our creatureliness, the awesomeness of the external world and most of all, the knowledge of our personal death.

Existentially oriented writers such as Becker, May and Rank use the word "driveness" to describe the manner in which people "compulsively plunge ahead in the ways of the world" (Rank, 1945, p. 21).

Progressive wealth and advances in the sciences, as well as personal growth, are often promulgated as necessary ingredients to a "good life." Existential writers note, on the contrary, that the quality of life has become more impoverished in a technological society. Existential writer Kastenbaum (1977) states, "We don't seem to lead to a quality of life with which we are really satisfied and of which we can be proud" (p. 81).

So far we have seen how the concept of death was viewed by different "philosophers" of the twentieth century. We have also seen how it applied toward our own American society in general and examined some of the research that was done on this subject. We now focused our attention toward the concept of death, as it applies to the minority population that is being used for the purpose of this study.

CHAPTER II

MINORITY ISSUES

Introduction

This study is the first of its kind. There have been few studies on the Filipino population. Even less has been reported on the Filipino and the process of acculturation, and nothing has been written on the rural aged Filipino's relationship to death as influenced by acculturation. This section will focus on the work that has been published on minorities in America, i.e., Blacks, Mexican Americans, Orientals, and Puerto Ricans.

Minority Populations

Suicide related research provides a perspective in which the natural process of aging and acceptance of finality, has been radically altered. The epidemiology of suicide shows that whites are more likely than minorities to commit suicide. Seiden (1982) reviewed the 1975 records and found that for every 100,000 between the ages of 55 and 64, there were 33 suicides among whites and eleven among non-whites. Among various minority groups in Hawaii, Kalish (1968) found that Chinese have the highest rate of suicide, followed by Koreans, than Japanese, Part-Hawaiian, Hawaiian, and Puerto Rican.

Close kinship relationships which characterize minority families have been seen as supportive; hence, a more positive attitude toward

death is fostered (Kastenbaum, 1976). Seiden (1982) attributes the low suicidal rates among minorities to the fact that cultural minorities value the elderly and treat them with respect. Hinton (1977) and Kastenbaum (1976) found that when relative faced a terminal illness, minority families stay close and meet each other's needs more than their Anglo counterparts. Lister (1975), who also studied terminally ill ethnic families in Hawaii, found that the Chinese, Japanese, and Filipino patients wanted and received more contact with families than Caucasians. Lister noted that minorities emphasized more of the convenience for all family members when they visited. In comparing death perspectives Lister found that the Caucasian appeared less accepting of the reality of death than the other groups. He noted that anger was more frequently exhibited by the Caucasian and quiet responses by the minorities.

Let us examine the studies that have been done on the view of death in the Filipino population.

Filipino Population

There is a dearth of research on death attributes for minorities, with even less such research on the Filipino culture. The few studies that used a Filipino population have concluded that Filipinos were more accepting toward death. This acceptance has been attributed to the sharing, close association, and strong kinship relations of the Filipinos (Lester, 1977). As Kastenbaum (1976) has stated, the close kinship relationship is supportive, and provides for a more positive attitude toward death. The person who is facing death

receives attention and genuine concern and feels the love of friends and family in facing the long "journey."

Compared to other minorities--Chinese and Japanese--and to the general Caucasian population, the Filipinos have the lowest suicide rate (Ibrahim and Rashad, 1977). Only Native Americans have lower suicide rates than Filipinos. Sechrist (1969), Wren (1974), and Tiger (1979) indicate that Filipinos are more able to survive in another culture because of their abilities to focus upon the central elements of their culture; their lives revolve around the central elements of religiosity and family; thus their lives remain relatively intact.

The religiosity of the Filipinos, which Tiger (1979) states is instrumental to their survival probably also affects their attitude toward death. Religion, as Malonowski (1955), and Durkheim (1949) have stated, gives an individual hope that a better world awaits. Thus, all the injustices in life are in significant and endurable as they prepare one not only for death but for a future life. Religion views death not as a final meaningless and isolated experience but rather an experience filled with hope, a stepping stone to a reunion with loved one's of the past. In this regard the findings of Feifel (1974), Marshall (1978), Shneidman (1973), Strut (1958), Swenson (1961), and Templer (1972) reveal that persons with more fundamental religious convictions and habits view death in a more positive manner than those without religious convictions. Morton (1972) and Fulton (1976) report reveal that the devoutly religious have less death anxiety than those who are not religious. Both Morton (1972) and Fulton (1976) found that belief in an afterlife was the intervening variable for reducing death

anxiety for religious people.

Tiger (1979) has stated that it is vital for the Filipinos to retain their close kinship ties if they are to survive in a society which often is alien to them. Close kinship ties among family members strengthens the family system as all individual family members are interdependent. Because family needs are seen as primary and not secondary, family members share, cooperate, and work together to insure and maintain the stability and functioning of the family. In such a family structure the individual's heightened need is absorbed into the families. Family primary not only insures the continuation of the family system but aids in coping with critical problems such as the death of a family member (Kastenbaum, 1976), and (Lister, 1977). Both these authors have noted how minorities, faced with a death of a loved one, draw close to each other, give mutual support, and foster a positive attitude toward death rather than a negative and denial attitude.

Significance of the Study of Minority Populations

Few studies are directed toward minority communities and the subject of death. Social work particularly, is lacking in minority oriented research. As Robert Hill (1979) states, "There has always been a dearth of research involving minorities in the area of social work research" (p. 190). The neglect of rurality and cultural minorities in research related to death has been observed by Feifel (1965), Gilfand (1979), and Filey (1969). Kastenbaum, has stated, "The coverage of disadvantaged and minority groups regarding death research

is on the meager side" (p. 89). This situation is particularly regrettable as both the Rothstein and Kastenbaum study revealed that minority cultures have a great contribution to make to the dominant culture at large. These investigations are important as they suggest that persons who are secure in their cultural heritage will be better prepared to accept their sense of mortality than their counterparts in the dominant culture.

Literature of the dominant culture suggests that those who have "achieved" the most and those who have been the most "successful" have the most difficulty resigning themselves to the fact of death. This study examines the question of whether this is true for a minority population. Would the increase in one's acculturation into the dominant culture increase the likelihood of death becoming more alien and adversive?

Authors such as Heinemann (1958), Jaspers (1964), Kastenbaum (1976), and Tillich (1952) have acknowledged that our present science-conscious culture, which tends to measure all experiences within the bounds of space and time, does not supply the necessary parameters for understanding death. Fundamental beliefs and values of a particular culture should not be casually dismissed or explained away by the psychiatric reduction that relates all values to infantile fixations. There is a particular need among professionals to suspend personal biases long enough to learn what culturally different populations feel and think about death.

David Fanshel (1980) has warned us that when there are cultural gaps between ourselves and another group of people, there is increased

likelihood of our misunderstanding their feelings and behavior. Such misunderstanding is most apparent in the area of mental health. "Mental health workers, perhaps more than other practitioners, have periodically attempted to ignore this issue of race and culture" (Hill, 1979, p. 191). Minorities, especially when compared to whites, are often described as lacking "ego strengths" or as not "psychologically minded" (p. 193). As Hill (1979 noted, when research is conducted with minorities, "such research is oriented toward their problems and how they deviate from the general White population" (p. 181). "Few studies," says Hill, "focus on the positive attributes of minorities, such as their assets, resources, strengths and coping efforts" (p. 188). In contrast, this study attempts to show the significance of culture and ethnic realities. It is hoped that this investigation will enhance our appreciation of the Filipino culture and particularly their aged. No attempt is made to compare the Filipino community with any other community, rather the focus is on the cultural attributes within the Filipino culture which are intrinsic to them alone.

Social work began early in the twentieth century, addressing the concerns of the disenfranchised, the poor and the ethnically different. In short, social work dealt with those who existed outside the social fabric of the twentieth century. At that time social work addressed the problem of the whole person, not just the psychic apparatus.

Let us turn our attention to the role of acculturation in affecting the individual's relationship towards death.

Acculturation

Because of the scanty research pertaining to acculturation as

well as the lack of any theory of acculturation, investigation into the subject is seriously handicapped. Literature on acculturation is often historical. In fact the only empirical investigation pertaining to the topic of acculturation is which is related to the epidemiology of suicide. Suicide studies can provide a method of understanding how people actually alter their aging process and their relationship toward death.

When acculturation is viewed in relation to suicide it becomes clear that acculturation is a negative process which enhances the chances that one will at risk for suicide. The epidemiology of suicide shows that there is a positive relationship between acculturation and suicide (Kastenbaum, 1976). Thus, those who are more acculturated in the "melting pot" sense of American society are precisely those who are most vulnerable. White middle-to-upper class persons in an urban setting are more likely to commit suicide than minority persons of low socio-economic status and residing in a rural area.

In his study of seven minorities in Hawaii, Kalish (1968) found a positive relationship between suicide and acculturation. Those races which had acculturated into the predominant culture had the highest suicide rates. Hence, Caucasians had the highest suicide rates followed by Chinese, Korean, Japanese, Part-Hawaiian, Hawaiian, and Puerto Ricans. Woodford (1965) and Davis (1977) found the same negative process of acculturation operating in their study of Black suicide rates. Both found that as Blacks left their southern and rural settings and migrated to the north and to urban areas, their suicide rates increased. A similar positive correlation between acculturation and suicide rate

was found in a study by Miller (1982) who found that teen-age suicide in America is a white urban middle-to-upper-middle class phenomenon. Miller found that "success oriented parents expected too much from their children and literally pushed them over to suicide." Studies from Pasewark and Fleer (1981), Wechsler (1961), Quinney (1965), and Lyn (1969) reveal how the increase in urbanization increases suicide rates.

Works by Kastenbaum (1972), Yallom (1980), Rank (1952), Blaunner (1965), Becker (1973), May (1971) and Tillich (1952) are admittedly speculative. They should not however be discounted as invalid. All these authors have attempted to answer the question of the meaning of life and death to modern people. They have all applied a historical perspective and relied on the existential thought in an attempt to understand modern people's alienation and estrangement from themselves and others. Although they do not use the word "acculturation" per se, they view twentieth century people as the victims of certain social and cultural processes that have occurred in western society. They believe that as people increasingly became part of the technological society and increasingly affluent and secular, people simultaneously became alienated from their "beings." As a result they saw modern people as "successful" but "hollow," "efficient" but "one dimensional." The "existential protest" is a protest against the values inherent in a technological society which treat human as things to be controlled.

Summary

We have now seen, from chapters I and II, the importance of the

concept of death as it relates to the attitudes of twentieth century people. We have also seen this concept, death, in existence in a minority population, and also how this concept would shift or change through the process of acculturation of that minority population into the predominant society. We have also examined the significance of this study, in relationship to the dearth of such studies, and in terms of the roots of social work that were grounded in these minority population in the first place. The purpose of this study is multifold.

It:

- A) Examines the theoretical concept and view of death in the twentieth century, and how man has suffered this attitudinal change in pursuit of achievement or "immortality" as some writers put it.
- B) Views this concept, death, in relationship to its existence in general in minority populations, and specifically, the minority population under study--A rural, aged Filipino population.
- C) Examines also, the process of acculturation that minorities go through when they are assimilated into the melting pot society of America, and how this process of acculturation changes a populations' view or attitude toward death.
- D) Examines specifically, this change of attitude toward death in a rural aged Filipino population.

Conclusion

The goals of this study are actually the answers to the state-

ment of the central clinical research question (see page 3, chapter I). Below are listed the goals of this study which will help to accomplish these goals.

- A) Can this rural aged Filipino population personalize death?
- B) If so, what is the breakdown of the percentate of the population?
- C) How does the process of acculturation affect the ability to personalize death?

Answering these three questions would fulfill the purpose of this research study, in that the answers would reveal how the process of acculturation has affected any attitudinal change in this population. In addition to examining the process of acculturation and death, this study will also look at the "meaning of death" to this population, and how acculturation would alter the "meaning." Sub-questions would help provide an extra source of validation or support for the purpose indicated above.

CHAPTER III

REVIEW OF THE LITERATURE

This chapter will present the review of the literature which pertains to the central research question, "How does acculturation in a rural aged Filipino population affect their attitude toward death?" This chapter will be divided into five major sections; each section will examine or analyze, the components of the above central research questions.

- A) Existentialism and Death
- B) Sociological Studies/Research on Death
- C) Race and Death
- D) Acculturation and Death
- E) Acculturation and Filipinos

Each section will contain specific issues or studies that pertain to the central research question. Underlying data in each section are developed and organized into sub-topics so as to support a perspective which helps illuminate the role of acculturation in defining this particular population's relationship with death.

Existentialism and Death

Perhaps the most accurate and "humanistic" description of man's attitude toward death comes from the Existentialist field of thought. It provides a broad context for understanding the nature of death

anxiety. It also provides a concep for understanding how our present cultural values are transmitted and utilized as a defence against death awareness. In this respect, existential thought provides the perspective by which we can look at our present culture more critically.

This author's central concept of death will, when integrated with psychological theory, explain the findings of this paper. Existential thought emerges from existence. The underpinnings of existential thought are not empirical but are deeply intuitive (Yalom, 1980). Hence, the existential position emphasizes a unique kind of basic conflict. This conflict does not arise from suppressed instinctual strivings, nor from internalized significant adults, but instead flows from the individual's confrontation with the "givens" of existence (Yalom, 1980).

Existential writers use the terms, "dread of death," "fear of death," and "fear of finitude" interchangeably. Jaspers (1954) spoke of the "fragility of being." Kierkegaard (1844) spoke of the dread of "non-being." Heidegger (1926) of "the impossibility of further possibility," and Tillich (1952) of "ontological anxiety." Rank (1945) referred to the fear of death as the fear of extinction and loss of individuality. Choron (1964) distinguished three types of death fear: what comes after death; the event of death; and ceasing to be. This latter fear, the fear of ceasing to be (i.e., obliteration, extinction, annihilation) seems most related to the fear of death (Yalom, 1980).

According to existential thought, "ceasing to be" is the fear of "nothing," whereas fear is the fear of something, anxiety (dread) is the fear of nothing "not", a nothing with which the individual has nothing to do (Kierkegaard, 1844). One dreads or is anxious about

losing oneself and becoming nothing. Anxiety cannot be located but "it attacks us from all sides at once" (May, 1977, p. 207). Since this fear can neither be understood nor located, it cannot be confronted and we usually combat such anxiety by displacing it from nothing to something. Kierkegaard (1984) called this mechanism, "the nothing which is the object of dread becomes, as it were, more a something." It is what May (1977) means by, "anxiety seeks to become fear." If we can transform a fear of nothing to a fear of something, we can mount some self-protective campaign (Yalom, 1980).

Core existential conflict in regards to death is the tension between the awareness of the inevitability of death and the wish to continue to be. One day we shall cease to be; death will come and there is no escape from it. In terms of existential thought, this is a terrible truth and we respond to it with terror. Death is a quandry for all human beings and not just the psychologically troubled, for it belongs to the human condition (Heidegger, 1926). As Becker (1973) states, "the deepest need is to be free of the anxiety of death but it is life itself which awakens it." (p. 201).

Existentially oriented writers such as Becker, Choron, Rank and Yalom believe that modern people have insulated themselves from the awesomeness of the external world as well as from his own creatureliness. People insulates themselves by erecting a belief about their "specialness." This belief assuages the terror of death and mitigates against our sense of finality (Becker, 1973; Choron, 1964; Rank, 1945 and Yalom, 1980). Speaking near the apex of our post-industrial, achievement society, Rank began to note how people increasingly affirmed their

autonomy by, "standing out from nature," and also increasingly yearned to be a "hero!" Becker, recently who has reformulated Rank's thought, uses the term "cultural heroics" to designate how modern people, craving for "more life," are constantly being dramatized in our achievement-oriented culture.

Both Rank (1945) and Becker (1973) noted how modern secular industrial people become "religious"; they want eternal life. It could be true, as existential writers affirm, that our present day "workaholics" and the vast majority of "burn-outs" are individuals yearning for "more life." How frequently today one hears that "time is the enemy" (Yalom, 1980). According to existential writers this is so because, "time is the cousin to finitude, and it threatens one of the supports of the delusion of specialness: the belief that one is eternally advancing" (Yalom, 1980).

The existential perspective views life and death as interdependent. Death is inextricably a part of life and life-long consideration of death enriches rather than impoverishes life. The apprehension of one's finiteness can catalyze a major inner shift or perspective. Existential writers define a "boundary" situation as an event or urgent experience that propels one into a confrontation with one's existential situation in the world; this confrontation stems from existential situation in the world. A confrontation with one's personal death (my death) is unparalleled and has the power to provide a massive shift in the way one lives in the world.

In conclusion, we can see that from an existentialist's viewpoint, modern people tries unsuccessfully in their own way to deny or

escape death, the great leveller and equalizer of all human beings. This philosophical viewpoint, in this author's opinion, is applicable to modern "achieving" people: Would the same apply to the population under study in this research? The existentialist's viewpoint/philosophy of death provides this author with a working definition of death around which all answers to this study's research question will revolve.

In the next section, we will consider some concrete studies that reflect the practical application of this theoretical standpoint in modern society.

Sociological Studies/Research on Death

The existential "fear of death" runs through our societies, but like all thoughts, it is modified and changed under the sociological variables inherent in societies. This section deals with the concept of death anxiety, and how it is manifested across some of the variables in a society.

- A) Gender
- B) Age
- C) Religion
- D) Need for Achievement
- E) Purpose and Meaning
- F) Familiarity with Death Workshops/near Death Experiences

Let us turn our attention to the relationships which exist between gender and death anxiety.

Gender and Death Anxiety

This section will explore the relationship between gender, sex, and death anxiety. There is an appreciable sex difference in death orientations as indicated below.

Fear of non-being, ceasing to be, of no longer having any more experiences, has been manifested more in males than females (Diggory and Rothman, 1961). In a post-industrialized society, it has typically been the male who has had the need to prove his "specialness" in the world. Several studies have demonstrated that females have a higher consciousness of death anxiety than males (Christ, 1961; Dibner and Rhudick, 1961; Eisenburg and Kastenbaum, 1971; Eisendorf, Jeffers and Nichols, 1961; Munnichs, 1972 and Swenson, 1961). It appears that on the level assessed by questionnaires, females fear death more than males (Iammarino, 1975; Franks, Ruff and Templer, 1972; Shneidman, 1973; and Templer, 1970). When death anxiety is broken into its components, however, the research shows evidence of a greater fear of death among males.

Diggory and Rothman (1961) found that women show more fear of dissolution of the body and physical pain associated with death, and fear that their death would cause grief to relatives and friends. Women also fear they can no longer care for their dependents. Both of these consequences of death focus upon the situation of the people who survive the dying person. Man, on the other hand, mostly fear that all their plans and projects would come to an end, and they would "cease to be." ("I would no longer have any experiences.") These two fears concern personal extinction and seem to be centrally related to one's personal death (Choron, 1963; Kastenbaum, 1975; and Yalom, 1980).

Degner (1974), using two clusters of responses to the concept of death, had subjects fill our semantic differential scales. These scales show both the cognitive and emotional aspects of death. When the scales were given to both sexes, it was found that women viewed death in more emotional terms, while man wiewed death in more cognitive terms. A replication of Degner was performed by Epsting, Kriegner and Leitner (1974) with the same results.

According to these studies we can see that gender has an effect on how one;s view and dealing with death, and that there is an appre-ciable difference between the male and female. How this difference would be manifested in this study's subject population will be discussed under "Findings and Discussion."

Age and Death Anxiety

This section will explore the relationship between the aged and death anxiety. The research presented suggests that the older one is, the less possibility of experiencing death anxiety.

The existential dread of death, which appears to be characterized by males, manifests itself more intensely in the middle years of life after one has already "succeeded" (Rothstein, 1967). Data so far collected suggest that every age group from children to the very old, views death with a significant degree of anxiety (Yalom, 1980). Some findings however, suggest that death anxiety is very low among young adults through the middle adult years (Epsting, Krieger and Leitner, 1974; Lidz, 1980; Kastenbaum, 1972 and Shneidman, 1973), while an increase of death anxiety was witnessed in the middle adult years, these years being often associated with the term "mid-life crisis." Such a

crisis is not ushered in by any significant event but rather by the realization that more time stretches behind than before one. An existential crisis is the experiential consequence. As Lidz (1980) states, "the balance of life is upset by the awareness of the limits of life's span, and there is apt to be a recrudescence of existential anxiety concerning the insignificance of the individual's life in an infinity of time and space" (p. 102).

Rothstein (1967), relying on extensive interview data, found death anxiety peaking for people in their middle years when they first became aware of their vulnerability as a result of death among friends and acquaintances. According to Kastenbaum (1975), the middle-aged person felt that death came too soon. Kogen and Shelton (1962) also discovered in earlier research that in a population of middle-aged-to-elderly adults, it was the younger portion of this population who had more unconscious death anxiety than their elderly counterparts. Various studies however, indicate a lack of overt anxiety in the aged population (Cory, 1972; Marshall, 1978; Munnichs, 1972; Shneidman, 1973; Strut, 1958 and Swenson, 1961).

Here we see that age becomes a variable in viewing and dealing with the concept of death, and again, the ways in which this difference is manifested will be discussed in the "Findings and Discussion" portion of this study.

Religion and Death Anxiety

Studies reported indicate that there is a positive relationship between strong religious belief and the reduction of death anxiety. It

has been stated that religion serves to bind anxieties pertaining to death and finality (Durkheim, 1949; Malonowski, 1955, and Tillich, 1952).

Feifel (1974), Kalish (1963), and Templer (1970) have demonstrated that in the general population the degree of religiosity, measured by self-report of belief and church going, is unrelated to death anxiety. On the other, Templer (1972) and Shearer (1974) report a negative correlation when people are religiously involved. Swenson (1961), Templer (1972), Morton (1972), and Fulton (1976) found that the devoutly religious have less death anxiety. Belief in afterlife has been suggested as an intervening variable for reducing death anxiety in highly religious people. Eisendorf, Jeffers, and Nichols (1961) found that individuals with strong religious commitments were more likely to believe in an afterlife and showed less fear of death than those who were less religious.

Although there are few studies on acculturation, minorities, and death attitudes, research thus far suggests that those who have fundamental religious convictions have more positive attitudes toward death. Feifel (1974), Marshall (1978), Shneidman (1973), Strut (1958), Swenson (1961), and Templer (1972) concluded that persons with strong fundamental religious convictions and habits view death in a more positive manner than those with weak fundamental religious convictions. Rothstein (1972), utilizing extensive interviews in his studies on death perspectives, found that acceptance of the brevity of life was associated with religious belief.

Religion has become a variable in how a person view and contend with the concept of death. As stated by Kastenbaum (1972), Durkheim

(1949), Malonowski (1955), and Tillich (1952), religion serves to bind anxieties pertaining to death and finality, it gives hope beyond this temporal life and makes it possible to endure suffering and injustices as life takes on a spiritual dimension. Let us now view the relationship between achievement and death anxiety.

Need for Achievement and Death Anxiety

This section will investigate the relationship which exists between the need for achievement and death anxiety. Literature on the subject suggests that individuals with a strong need of achievement may tend to experience more death anxiety than those with less need for achievement.

The works of Diggory and Rothman (1961), Kastenbaum (1967), Rothstein (1967) and Zetzel (1965) indicate that our cultural values of "striving," "achieving," and "doing" have an adversive affect on personality, particularly on the way in which we orient ourselves toward death. Individuals with a great need of achievement fear death, because it ends their chances for further achievement (Diggory and Rothman, 1961 and Yalom, 1980). Our "doing" oriented culture, which emphasizes accomplishments measurable by standards outside of the acting individual, provides little comfort when death approaches. In existential thought, striving, achieving, and progressing are not part of existence: they are not part of the deepest layers of human motivation. It could be assumed that the more one is acculturated, the more distasteful death will become.

Nogas, Grument, and Schweitzer (1974), along with Ray and Najman

(1974) found no relation between need for achievement and death anxiety. Zetzel (1965) found that those who have been overly independent, ambitious, successful, and achieving at a high level in order to maintain self-esteem, were the most preoccupied with death and found it most difficult to adjust to their own mortality. Diggory and Rothman (1961) found that individuals with a high need of achievement feared death to a greater extend than those who were less achievement-oriented. This was so, they speculated, because for the high achievers death would end all their chances for further achievements. Delany (1978) and Marshall (1978) stated that those who seemed most distant from death showed the most preoccupation with death. Becker (1973), Rank (1945), and Yalom (1980) argue persuasively that modern people who need to feel that they "count" and that they are "special" reflect their preoccupation with death as well as their abortive effort to transcend death.

Most of the literature reviewed suggests that there is a price to be paid in acculturating into the predominant society. Although one gains a personal sense of success, achievement, and accomplishment one becomes removed from one's sense of mortality (Diggory and Rothman, 1961 and Kastenbaum, 1972). Many authors such as Zetzel (1965), Nogas Grumen and Sweitzer (1974), Ray and Najman (1974) have reported that those who were overly independent, ambitious, successful, and achievement oriented were precisely the one's who feared death the most. These authors' findings collaborate the existential supposition that striving, achieving, and progressing are not part of existence, not part of the deepest layers of human motivation (Yalom, 1980).

Purpose and Meaning in Life and Death Anxiety

This section will explore the relationship which exists between purpose and meaning in life and death anxiety. Reports suggests that there is a positive correlation between meaning in life and acceptance of death.

Frankl's (1965) makes the existential statement that in order to find true purpose and meaning in life, an individual must accept and find meaning in his suffering and ultimately his own death. Death actually becomes a factor in life's meaningfulness. According to Frankl, the problem is not that life has no meaning because one's death is unpredictable and happenstance, but rather that if death has no meaning, neither has life. Frankl's statements are significant, particularly as many citizens of today's urbanized, industrialized secular world face life without a religiously based meaning system. Many authors, such as Aires (1974), Becker (1973), Choron (1964), Jung (1961), Rank (1946) and Yalom (1980) have concluded that the task of finding meaning in death has become extremely difficult for modern people, who increasingly find death "absurd" and are unable to transcend the nihilistic and destructive power of death.

Utilizing the "Purpose in Life Test," Blazer (1973) found that a high purpose in life was associated with low death anxiety. The "Purpose of Life Test" was based on the existential theories of Victor Frankl (1965), who said that in order to find true purpose and meaning in life, the individual must accept meaning in his suffering and ultimately in his death. Durlack (1973) has rightly speculated that it

is naive to assume that significant changes on the "Purpose in Life Test" would occur as a result of death workshops. He agreed with Frankl that acceptance of death is only one aspect of the development of personal meaning and purpose in life. Modification of death attitudes may not necessarily affect the larger concept of purpose of life, although the reverse may be true.

Modern people, despite achievements, accomplishments, and success are not insulated from the problem of finding meaning in their own death. Authors such as Durlack (1973) and Blazer (1973), utilizing the existential theories of Frankl (1965) have found that those who found meaning in their suffering were precisely those likely to accept death with a minimum of anxiety.

We will now focus our attention to the role familiarity of death plays in relationship to death anxiety.

Familiarity with Death and Death Anxiety

This section will focus on the relationship between familiarity with death and death attitudes. Since our culture has been described as one of "death denying," any awareness toward one's sense of finality would be of benefit to the individual.

In our present culture, it is assumed that the process of acculturation diminishes the visibility of death and reinforces the denial of death (Kastenbaum, 1975). Death awareness and workshops, though not changing death attitudes, are seen as a means where the reality of death and one's finality can be assimilated.

A survey by Murrey (1974) reported a reduction of death anxiety

in nurses who became involved in death education courses. In death related discussions, college students changed significantly more than the controls in frequency of thinking about death (Bell, 1975). Murrey showed that experiential workshops on death decreased the participants' fears and concerns about death while only slightly heightening their anxieties about death. Furthermore, these workshops brought no significant changes on the "Purpose in Life" test, nor did they change attitudes toward death (Durlack, 1973).

Although there are few studies pertaining to the familiarity with death and its relationship to death anxiety, the studies we have suggest that repeated exposure to the subject of death can bring about a reduction of fears and anxieties concerning death.

One of the implications of existential thought is that there are certain unalterable, immediate conditions and certain urgent experiences that jolt one from an everyday state of existence to the state of mindfulness of being. In existential thought, death is the condition that makes it possible for us to live life in an authentic fashion.

Hussain and Tozman (1978), Nonberger (1962), Noyes (1981), Rosen (1975), Schmitt (1976), and Yalom (1980) had shown that individuals who had near-death experiences (automobile accidents, drownings, mountain climbing falls, and confrontations with cancer) experienced a deep alteration in their personalities and made remarkable changes in their attitudes toward life and death. Block and Yalom (1977), Spiegler (1982), using a questionnaire to measure personal changes among female cancer patients, found more of these patients reporting less fear and negative attitudes "now" than "before" they had cancer. In conclusion

individuals who have had near-death experiences have often undergone profound personality changes which have altered their attitude toward death in a positive way.

In our culture it is assumed that acculturation diminishes the visibility of death and reinforces a denial of death. Near-death experiences in the studies of Hussain and Tozman (1978), Nonberger (1962), Noyes (1981), Rosen (1975), Schmitt (1976), and Yalom (1980) and death workshops have reported persons able to accept finality and death with less fear and anxiety than if they had not had these experiences. These studies substantiate the existential assumption that "existence" itself can jolt one to a state of being and mindfulness and make it possible to live in an authentic fashion.

In conclusion, from this section, we can see that although the general trend is for death to be denied and feared, the variables do somewhat influence the manifestation, or non-manifestation of the denial and fears of modern man. These variables, and their influence, would be discussed more in the "Findings and Discussion" chapter, as they pertain to the actual results of the study.

Race and Death

This section investigate how the concept of death, and its accompanying denials and fears, manifests itself in the minority population of our society. Also, we will focus on how our cultural values affect our relationship toward death.

Cultural Values

This section will highlight the relationship between race and death anxiety. While there is indication to believe that cultural ethnic populations are more accepting of death than their Anglo-counterparts (Kastenbaum, 1972, 1977; Lister, 1975), there has yet to be found a relationship between race and death anxiety. Death anxiety scales among different cultural and ethnic groups have not yielded any significant relationship between the two variables (Paddy, 1974; Paddy and Templer, 1972).

While it is premature in terms of research findings, to conclude that people with a deep sense of ethnic identification die "better," it is believed that integration into a tradition constitutes a potentially helpful set of supports for a person who might otherwise feel alone and abandoned in the face of death (Kastenbaum, 1976). Ethnic traditions, values and beliefs have a bearing upon the individual's relationship toward dying and death. Kastenbaum (1976) has stated that death will be viewed in a positive manner among those of ethnic and cultural backgrounds when there is:

- A) a belief and faith in the afterlife.
- B) an acknowledgement that death is a central fact of life.
- C) cohesion among family members who stick together on crucial and intimate matters and meet each other needs (Kastenbaum, 1975).

Hinton (1977) has reported that people who faced problems throughout their lives were the ones who seemed to be more able to adapt to terminal illness and were more likely to indicate that they knew their condition was fatal. Although Hinton did not make a differentiation among cultural

groups, the minority groups have often been subject to a multitude of problems.

Relationship between race and death anxiety is unclear at this state, as death anxiety scales given among different cultural and racial groups has not yield any significant relationship between thse two variables. Despite this unclarity, it is generally believed that integration into an ethnic/racial tradition does constitute a potential source of support for a person who might otherwise feel alone and abandoned in the face of death (Kastenbaum, 1977). In the next section we will see how kinship ties affect a persons attitude toward death.

Kinship Support

This section will explore the relationship between interpersonal relationships and death attitudes. Research thus far suggest that minorities have a more positive attitude toward death than their Anglo-counterparts (Kastenbaum, 1972, 1975), and (Lister, 1975).

Kastenbaum (1972), and Lister (1975) have shown that the close interpersonal relationship networks which often characterize ethnic minority families play a contributing role in the acceptance of death. Weisman (1976), using a controlled study approach with terminally ill cancer patients, found that patients who maintained active and mutual responsive relationships at the terminal stage of life survived longer than those with poor social relationships. Patients who died rapidly tended to have early separations from one or both parents during childhood adolescence (Weisman, 1976). Patients who died rapidly also tended to have "few friends" and distant relationships with families. They

denied the reality of their serious illness and had negative attitudes toward death (Weisman, 1976). Kastenbaum (1972 and 1977) speculated that minority populations when faced with crisis look for interpersonal support more than their Anglo-counterparts who were likely to put on a display of autonomy and independence while facing critical situations.

Kastenbaum (1972 and 1977), Lister (1975), and Weisman (1976) have all reported that the need for sharing, affiliation, and cooperation often exhibited by minorities in crisis made for an adjustment toward death; death is accepted and acknowledged. Lister (1975), when comparing death perspectives among Caucasians, Chinese, Filipino, and Japanese, found that Caucasians appear less accepting of the reality of death than the other groups. Anger was noted more frequently for Caucasians and quiet responses more for Chinese and Japanese. He also stated that although all the groups wanted frequent contact from their families. Chinese and Japanese tended to emphasize the convenience of all family members when they visited. Furthermore, family and patient focused on family events and the patient's immediate responses rather than on plans for the future.

Several authors, Kastenbaum (1972), Lister (1975), and Gilfand (1979) have indicated that ethnic minority families show a more supportive and cohesive family system than their Anglo-counterparts. These authors point to the fact that minorities stress "belongingness" rather than "productivity," "co-operation" rather than autonomy (Seiden, 1982). Close interpersonal relationship networks characterizing ethnic families play a contributing role in making a more favorable attitude toward death.

Purpose in Life Inventory

In 1964, James Crumbaugh and Leonard Maholic, greatly influenced by the work of Victor Frankl, published a psychometric instrument designed to measure purpose in life. Purpose in life questionnaire test consists of 20 items to be rated on a seven point scale. Eight of the 20 items pertain explicitly to life meaning (purpose, mission); six items pertain to life satisfaction (life is boring, routine, exciting, or painful); three items pertain to freedom, one item to the fear of death, one to contemplation of suicide, and one to the worthwhileness of one's life. This section focuses on the application of the "Purpose in Life" test in the predominant culture as well as cultural minorities.

Blazer (1973), Crumbaugh and Maholick (1963) and Durlack (1972) showed evidence (utilizing the "Purpose in Life" test) that persons who reported a high purpose and meaning in their life had less fear of death and a more positive accepting attitude toward it. Conversely, persons who reported less meaning and purpose in their life had a greater fear of death and more negative attitudes toward dying (Familetti, 1975 and Padelfore, 1974). There were little differences between the sexes, ages, and marital status among the findings of Blazer (1973), Crumbaugh and Maholick (1963), Durlack (1972), Familetti (1975) and Padelford (1974). This suggests that meaning or purpose in life was the crucial variable pertaining to one's attitude toward death.

Weiner (1975) compared "Purpose in Life" scores of physically ill patients and reported that patients who were critically ill had a higher "Purpose in Life" score than patients with minor ailments. Based on these results the author speculated that the approach of death served

as a catalyst for critically ill patients to come to terms with their lives, to "work through" their doubts, and to gain some inner peace. Weiner's findings reflect the existential position that death becomes a factor in life's meaningfulness; confronting one's own death and facing up to it gives us the fullness and richness to the meaning of life.

Validity and reliability in this test were established through the administration of the test items to a white middle class population. No validity or reliability was established for a minority population. When test was administered to Blacks and Mexican-Americans, the results indicated that members of both populations had misunderstood the semantic content of certain items on this test. For example, when the existential question, "Do you feel empty? was asked, the response was, "I have just eaten." Hence, when the "Purpose in Life" test was given to minorities (Garfield, 1973 and Padelford, 1974), minorities generally had poor "Purpose in Life" scores. These findings, however, should be seen as reflecting the bias of the test itself as it is "loaded" in social desirability and emphasizes goal directed behavior, future orientation, and activity over passivity (Braun and Dolmino, and Yalom, 1980).

Despite the bias of the "Purpose in Life" inventory against a minority population, as a psychometric instrument it has given some empirical validity to the existential assumption that death becomes a factor in life's meaningfulness and that confronting one's death and facing it gives richness to the meaning of life (Werner, 1975).

Studies on Suicide and Minorities

In this investigation, suicide related research provides a

perspective from which the natural process of aging, as well as the acceptance of finality, has been radically altered. As a result, the problem of suicide raises many questions as to one's relationship to death; the meaning of the act of suicide, and of death itself.

In general, the elderly in minority groups have lower suicide rates than their American counterparts. For example, the suicide rate for white males at age 60 triples more than that for Mexican-Americans and American-Indians. Records for 1975 show that for every 100,000 aged 55-64, there were 33 suicides among whites and eleven among non-whites (Seiden, 1982).

Many authors suggested the importance of ethnicity as an important factor in understanding suicide (Kalish, 1968; Kastenbaum, 1972; Kato, 1969; Krammer, 1972; Lem, 1974; McIntosh and Santos, 1981). These authors have found that the elderly in each specific racial ethnic minority display their own unique suicidal picture. For example, it is generally recognized that suicide rates increase sharply with age, but Kalish (1968) found that the suicide rate of Hawaiians, Part-Hawaiians, Caucasians and Puerto Ricans, by comparison the East Asian groups-- Chinese, Japanese, Korean, experienced a sharper increase as age increases. Kalish also found that compared to East Asians (Japanese, Chinese, Korean), Europeans, Polynesians, and Puerto Ricans were more likely to have a higher rate of suicide attempts. In his study of these seven minority population, Kalish (1968) also found that suicide attempts, but no actual suicides, were related to indices of social disorganization and acculturation.

Each minority displays its own suicide picture. Europeans, Poly-

nesians, and Puerto-Ricans have higher suicide rates than east Asians (Japanese, Chinese, Koreans). In America, Mexican-Americans and native Americans have the lowest suicide rates (Seiden, 1982) with minority suicide rates increasing with their acculturation into the predominant society.

People with a deep sense of ethnic belonging have a set of supports upon which to rely when facing death. Instead of feeling abandoned and alienated in death, minority persons can draw from their religious beliefs and their kinship support systems to assist them in accepting death. The close interpersonal relationships that exist for minority families constitutes a source of comfort, belonging, and support for the elderly person. It is these factors and attributes which no doubt account for the fact that suicide rates for whites are triple those of minorities in America (Seiden, 1982). If suicide is an indication of a sense of the futility of life and a flight from the normal aging process, it appears that cultural belief systems as well as the close kinship relationships of minorities play an integral part in the process of accepting one's acceptance of death. Next, we will deal with how acculturation affects the suicide rate.

Acculturation and Suicide

This section will explore the topics of both acculturation and suicide. There is reason to believe that there is a positive relationship between acculturation and suicide. Higher status groups are more likely to commit suicide than lower status groups; males more than females; whites more than minorities; and wealthy more than poor

(Kastenbaum, 1977).

Kalish (1968), in his study comparing seven minorities, found that acculturation was definitely a factor in the increase of suicides. He states:

By assuming that the ethnic "pecking order" can be estimated by the professional and managerial occupational groups, the Caucasians had the highest followed by the Chinese, Korean, Japanese, Part-Hawaiian, Hawaiian and Puerto Rican in that order. Except for the low social class status of the ethnic Hawaiian, the higher the occupational status, the higher the suicidal rate. (p. 43)

It is interesting to note that the rampant growth of teenage suicides during the last five years has been the "scourge of the well to do" (Miller, 1982). These suicides have mostly occurred in the middle and upper income families. It is believed that this alarming rate of suicides is the result of success-oriented parents who "expect too much, nit pick and set unrealistic standards for their offspring" (Miller, 1982)

Woodford's (1965) study of the increase of Black male suicides in Washington, D.C., attributed the growing trend of male suicidal rates to the increase in vertical mobility, prolonged stress, shifting roles, and a "host of other factors that are a part of the Black struggle." Kastenbaum (1972), in explaining Woodford's findings, attributed the Black male vulnerability toward suicide as an acculturation problem uniquely experienced by those who have lived in a marginal economic circumstances and then are able to be assimilated into the "high life" enjoyed by others. Kastenbaum (1972) stated, "the contrast becomes painful when the under-privileged person recognizes that he has some opportunity to better his circumstances."

Woodford's study has been recently replicated by Davis (1979).

Davis also found that Black suicide rates are higher in the North and West and lowest in the South. Dublin (1963) uses Woodford's and Kastenbaum's explanations of acculturation to account for the lower rate of male non-white suicides in the rural South and Central United States, as compared to that among the urban areas of the North during the year 1975.

A study of suicides in rural Wyoming, by Pasewark and Fleer (1981), found the suicidal rate markedly higher among urban than rural residents (26% vs. 8.9%). Furthermore, the number of rural suicides peaked at the age of 35, while for urban residents, the peak occurred 10 years later. Early works of Wechsler (1961), Quinney (1965), and Lyn (1969) are also significant in this regard. Wechsler (1961) reported a higher rate of suicide in communities with rapidly increasing population, while Quinney (1965) and Lyn (1969) showed how rapid industrialization and urbanization were associated with high suicidal rates.

Ogden (1970), in explaining the lower rates of suicides among aged native Americans, stated that "they simply do not experience the acculturation difficulties of the young Indians." Elderly Indians most often live on a reservation, and because of this, are shielded from the necessities and strains of acculturation.

Iga (1966), in his study of male suicides in urban Japan, found that the greatest stress put on Japanese males was that they had to be "successful" and to "achieve." Iga noted, however, that the roads to success were few and the obstacles were many--"so intense are the desires for success that there produces a continuing sense of insanity."

Seiden (1982) has stated that the low suicide rate which characterizes the elderly minority is due to the fact that minorities

have developed skills in coping with hardship. He notes that minority groups have learned to adapt to frustration and rejection. "If you have been used to little," he writes, "you are not as disappointed as when you have great expectations which are unfulfilled." (p. 4). Seiden also found that the low suicide rates were due to the fact that cultural minorities value the elderly and treat them with respect.

If suicide is an index of a person's flight (anxiety) from life then certainly it must also be a flight (anxiety) from death as well. Present research reveals that there is a positive relationship between acculturation and suicide (Kalish, 1968). The studies of Woodford (1965), Pasewark and Fleer (1981), Quinney (1965), Lyn (169) and Ogden (1970) revealed lower suicidal rates in lower socio-economic class and among minorities in rural areas than their Anglo-counterparts from a middle to high socio-economic class and live in urban areas. We can deduce from this that the least acculturated are better able to accept death than those who have acculturated and that acculturating into the "melting pot" is costly indeed, particularly in terms of human life. Let us turn our focus on specifically how acculturation affects the Filipino.

Acculturation and Filipinos

This section will focus on the Filipino population and acculturation. With the exception of the work by Brown (1978) and Tiger (1979), who investigated the Filipino community, little has been done on the areas of acculturation and the Filipino community. Little research has been directed toward the Filipino population and even less

toward rural aged Filipinos, their attitudes, and relationship toward death. This sample has been chosen in an attempt to supplement the literature about Filipinos. The author has worked with Filipino clients in a rural setting for the past eight years and feels that their culture provides a valuable support system.

In his measurement of general stress in a group of Filipino Americans in Hawaii, Brown (1978) found that people who have either little or a great deal of contact with Honolulu's urban culture have lower stress values than individuals with intermediate levels of contact. This may be a result of the presence of two strategies of urban adaptation: one strategy emphasizes isolation from urban culture, while the other strategy emphasizes the reverse. Brown stated, "that while both strategies are effective in reducing stress levels in individuals, those people who do not successfully utilize one of these strategies are likely to have high stress levels."

Tiger (1979) found that recent Filipino immigrants to the Los Angeles area had low levels of acculturation and assimilation levels. Even highly educated professionals, who were more likely to be involved in non-Filipino neighborhoods, had the same assimilation and acculturation levels as non-professionals. Tiger noted that the Filipino community in Los Angeles has become more cohesive because, "relations within the community are becoming elaborated and membership in ethnic organizations are increasing" (p. 3551). The fact that "Filipinos retain key features of their original culture as they assimilate" (p. 3551), and the fact that, "Religiosity and family primacy, central elements of Philippine culture, retain their force in the United States" (p. 3551),

indicate how cautiously Filipinos approach acculturation.

Ibrahim, Rashad (1977), Kalish (1968), Kato (1969), Krammer (1972), Sechrest (1969) and Wen (1974) found that the elderly Filipino, like most aged minorities (excluding native Americans and Blacks), have a high concentration of suicide in the over-65 age grouping. In contrast to Japanese, Chinese, and Caucasians, Filipinos have the lowest suicide rate (Ibrahim and Rashad, 1977). McIntosh and Santos (1980) reported that Filipino American suicide rates peak in old age and that suicide was an elderly phenomenon. When compared to Chinese, Japanese, Blacks, and native Americans, the aged Filipino showed the highest proportion of elderly suicide. Furthermore, the suicide rate of the aged Filipino male is increasing while that of Chinese, Japanese, and Caucasians is decreasing (Ibrahim and Rashad, 1977). In the general population at large the ratio of male to female suicides is about ten-to-one after the age of 55. Suicide among the aged Filipinos is a male phenomenon. The preponderance of male suicides, however, crosses racial as well as national boundaries (Kastenbaum, 1972).

Conclusion

The review of the literature presented sheds little light on how the role of acculturation affects one's relationship towards death. Both empirical and intuitive data reveal that acculturation in our contemporary society presents complex problems to the individual, particularly in terms of coming to grips with one's own finality. Studies of Brown (1978), Dublin (1963), Kastenbaum (1972), Ogden (1970), and Woodford (1965) suggest that one look critically at the process of

acculturation, particularly its impingement on one's personal life. These authors view acculturation as a negative force in which man loses his "rootedness."

All authors reviewed, with the exception of Brown (1978), found the process of acculturation to be particularly stressful. One pays a price (the acculturation process) for a place in the "melting pot." Though not stated directly, Tiger (1979) cautions that the price paid for acculturation into the dominant society could be the loss of one's ethnic identity or one's loss of racial/ethnic rootedness. A recent trend, particularly among young people, to seek their "roots" and the enduring values of their cultural or ethnic heritage can be seen as an attempt to circumvent the feeling of anomie and alienation which is prevalent in contemporary society. Brown (1978) has cautioned that partial acculturation is the most adversive stimulus and stressful event for the individual. Tiger (1974) and Kastenbaum (1975) have stated that it is important to know what cultural values should be retained and what are disregarded in the acculturation process. In attitudes toward death and the acceptance of one's own mortality, the data presented indicate that certain ethnic and cultural rituals, values, and customs are highly significant and play a positive role in the process of accepting one's finality. Studies by Feifel (1974), Kalish (1963), Kastenbaum (1972 and 1975), Rothstein (1972) and Swenson (1961), as well as the theoretical works of Becker (1973), and Rank (1952), view religion as a positive factor in assisting one facing death.

Kastenbaum (1972 and 1975), Lister (1975), and Weisman (1976) have shown how important is a cultural/ethnic group's interpersonal support system to assist in the dying process. The ethnic value is

placed upon personal interaction rather than institutional procedures. Sharing and cooperating as distinct from the broader cultural values of independence and autonomy, should not be under-estimated.

Finally, the inverse relationship between rurality and suicide rates, no doubt, tell us again of the price paid in the process of acculturation, urbanization, and assimilation (Lyn, 1969; Pasewark and Fleer, 1981; Quinney, 1965; and Wescher, 1961).

CHAPTER IV

METHODOLOGICAL SECTION

Theoretical Orientation

Many authors have described many impediments of effect research with minorities, particularly the aged minority (Bengtson, 1979; Fanshel, 1980; Hill, 1972; and Kastenbaum, 1977). Most of these impediments center on the lack of a systematic body of information regarding the minority aged or problems of concepts, vocabulary and theory (Bengtson, 1979). Problems in theory have usually been related to the fact that in an effort to be "scientific," undue emphasis has been placed on methodological concerns rather than on substantive requirements. As a result, important questions have gone unresearched (Heinemann, 1981). It is no wonder that Bengtson (1979) states "that theory has become so abstracted that it is irrelevant" (p. 28). Hill (1981) has complained that traditional methodological techniques are inappropriate for adequately understanding racial minorities. Researchers who have concerned themselves with minority populations have stated that much information is irrelevant to the population studied, because theory and methodology are utilized in such a manner as to render the research insensitive to the cultural values, beliefs, and realities of that population. Not surprisingly, Kastenbaum (1972, 1977) and Hill (1981) state that most research on minorities depict them as deviates from the dominant society.

Because of the theoretical and methodological problems associated with minorities, the use of grounded theory seems most appropriate in this study. According to Hill (1981), the research directed at minorities should adopt an exploratory-descriptive approach utilizing both quantitative and qualitative data in a narrative form. Hill (1981) states:

The state of knowledge about minorities in the social sciences is so fragmentary and unreliable that research could make a more significant contribution to this knowledge by placing greater emphasis on exploratory-descriptive studies. (p. 192)

Substanative theory is phenomenologically based and by nature, less restrictive than other logo-deductive approaches which often impose some conceptual schemata or structure upon the phenomena at hand (Glasser and Strauss, 1967). Glasser and Strauss (1967), Strauss (1965) as well as Becker (1958) note that grounded theory is faithful to the inherent structure of social reality. Since theory is derived from data, an accurate and meaningful portrayal of the substanative area of investigation can be attempted. In this approach, conceptualization is relatively open and is illustrated by characteristic examples of the data. Concepts are tested, changed, and refined as data are obtained.

Glasser and Strauss (1967) have stated that, "the crucial elements of sociological theory are often best found with a qualitative method, that is, from data on structural conditions, consequences, deviances, norms, processes, patterns and systems" (p. 18). In this dissertation, qualitative data are utilized in the development of a substanative theory of acculturation and finality (death). Qualitative data rather than quantitative data lend themselves to the understanding of the meaning of participants, words, and their social context.

Furthermore, theory will provide for the acquisition of data acquired in the participant-observer interviews. In this manner, substantive theory will guide instrument development and will provide the basis for controlling cultural sensitivity. Authors such as Briar (1980), Fanshel (1980), Kastenbaum (1977) and Sridl (1980) have noted that the participant-observer interview provides one of the most natural avenues from which to understand the social and psychological context. Participant-observation, as a method of inquiry, lends itself to qualitative data and a phenomenological approach. Like effective therapy, participant-observation makes use of the relationship between the observer and the observed.

Substantive theory is the discovery of theory from data, Glasser and Strauss (1967). Howard Becker (1961) stated, "substantive theory is derived from data and then illustrated by characteristic examples of the data." In this dissertation, qualitative data are utilized in the development of a substantive theory of acculturation and awareness of finality. Substantive theory will provide for the acquisition of data acquired in the participatory-observant interview (Rothstein, 1967). At the same time substantive theory will guide the instrument development and will provide the basic framework for controlling cultural sensitivity.

Analysis of the data will be guided by substantive theory, as well as existential thought. Analytic process will be relatively open, that is, preconceptions will be held to a minimum and conceptualization is supported by illustration (Rothstein, 1967). According to substantive theory models are constructed and refined as the data are acquired.

According to Glasser and Strauss (1967), concepts are derived from the data and are systematically worked out in relationship to the data during the courses of the research. Substanative theory is also a phenomenological approach and as such is faithful to the structure of social reality (Rothstein, 1967). Experiences of individuals are a proper source of validation, because the respondents' experiences bring us closer to the inherent structure that is sought (Rothstein, 1967). Existential thought will provide the broad perspective for understanding the meaning of death for this population. Existential thought views death as a universal problematic "ultimate concern" in which nobody can escape. The next section will be a discussion of the Methods/Purpose of this study.

Methods/Purpose

This study investigates how acculturation affects the relationship toward death in a rural Filipino population. Exploratory in nature, this study employs substanative theory to guide data collection in the participant-observation interviews.

Information will be gathered through the use of a structured questionnaire format (see appendix). The questionnaire combines both the question items of Diggory and Rothman (1961) and Rothstein (1967) and was refined to address the special needs of a rural aged Filipino population. An elderly local Filipino served, when need arose, as an interpretive guide in the development and implementation of questionnaire procedure. The questionnaire was structured for cultural sensitivity and cultural integrity.

Major Questions

1. Is this rural aged Filipino population able to personalize death?
2. To what extent is death personalized or non-personalized in this population?
3. Does acculturation in this population affect the ability to personalize death?

The term "Personalization of Death" was first used by Rothstein (1967) and refers to one's recognition of mortality. An individual who has completed the task of personalizing death may speak of his earlier attitude as believing in his own immortality. To complete the task of personalization of death, an individual must fulfill three conditions which pertain to the locus proximity of death as well as to the concept of finite life time. (For specific definition of the personalization of death please refer to Operational Definitions in this section)

Sub-Questions

1. What is the meaning of death to this population?
2. Does acculturation, in this population, affect their "meaning of death?"
3. Does acculturation affect whether this population is participatory or overcoming (denying) in their relationship toward death?

Operational Definitions

Acculturation:- The process in which a person becomes identified and integrated within the major predominant culture (Webster, 1972).

Aged:- The Filipino population that has been living in the City of

Delano for at least four years and those who are chronologically between the ages of 60 to 85 years old.

Death:- In this study death will be viewed as an object of fear.

- a. The fear of "ceasing to be." It includes extinction, annihilation or obliteration. It conveys one's potential non-existence, state of non-being or "nothingness."
- b. The fear of what comes after death; in religious terms, an eternal life, or more generally, life after death. Also includes the belief in separation or unification with God.
- c. The fear of the event or process of dying. It often involves apprehension about prolonged suffering, weakness, dependency, and loss of control (Kastenbaum, 1972).

Filipino:- Those whose ancestry on both parental sides are of Filipino descent.

Rural Filipino:- Those who are termed Filipino and who have been living in the City of Delano for at least four years.

Relationship toward death:- The stance which a person takes in respect to death. In this study that stance is either non-participatory (overcoming, denial) or participatory (acceptance of mortality).

Participatory relationship toward death:- This relates to the acceptance of one's finiteness. (For more information, refer to page 1.)

Non-participatory relationship toward death:- This relates to the overcoming or denial of one's finiteness. (For more explanation, refer to page

Personalization of death:- This is a concept utilized to reveal one's relationship toward death (Rothstein, 1967). Personalization signifies

one's awareness of mortality and occurs only when the following variables are met (Rothstein, 1967):

- a. Concept of finite life time: Life activities are seen in regard to a terminal point. This requires that one's conceptualization of activities are seen in relation to beginnings and ends as well as a sense of the brevity of life.
- b. Locus of death: Death will be understood as a function of natural and inevitable biological process and not external or the result of an accident or act of violence.
- c. Proximity of death: Death will be viewed as imminent or relatively near. There will be less a desire to conceive death as an abstract entity and less of a belief in one's sense of immortality in this life.

Meaning of death:- These are the respondents' beliefs and values about death, which include the significance of death--Is death seen as an ultimate problem or ultimate solution? This includes:

Context of anticipated death: The overtones of anticipated death which can be failure, defeat, humiliation, reunion or fulfillment (Diggory).

Subject at risk:- Because of the nature and topic of this study, subjects may be "at risk." All proper and prudent precautions will be taken throughout the interview to protect the subjects' civil and human rights. In order to minimize stress and risk factors, subjects will be screened so as to circumvent any problems that might arise if they were seen to be susceptible to experimental stress during the course of the interviews. Initial screening by the examiner will coincide with the

introduction of consent form. Research procedures, the topic under study, as well as risk factors will be explained to each subject at this time. Overt and covert reactions will provide the examiner with the information needed to assess the suitability of each subject as a participant in this study. The examiner will constantly be observing each respondent's mood throughout the series of interviews.

Any interview appears to be too stressful for the respondent, the examiner will intervene. In a minimum-to-moderate stress situation, the examiner might suggest that the interview process be stopped momentarily and the examiner will assist in neutralizing the respondent's stress. In a minimum stress situation, the examiner will assess the respondent's threshold of stress tolerance and implement supportive measures. If these measures fail to neutralize the respondent's stress, the examiner might suggest that the participant withdraw from the study.

The interview will be conducted in an informal atmosphere which will encourage and strengthen rapport between examiner and respondent. The questionnaire (see appendix) will provide the structure for data collection, but will serve only as a guide and not as an overriding format to be followed meticulously.

Cultural sensitivity:- Sensitivity to the cultural variances among, as well as between various cultures.

In the next section we will discuss the Procedures/Implementation of this study.

Procedures/Implementation

The sample (N=20) will include twenty respondents. The sample

size is congruent with substantive theory design which encourages restricting sample size. As Strauss states, "Since accurate evidence is not so crucial for generating theory, the kind of evidence as well as the number of cases is not so crucial" (p. 30).

Of the 20 respondents selected 15 were men and five were women. The median age of the men was 71 years and all had long histories of field work experience in their occupational backgrounds. Eight of the 13 males were retired and of the five who were still working, three were working in the fields. Ten of the men were married and lived in their respective homes. Of the three who were separated, two lived in a Filipino retirement village in Delano. Nine of the male respondents could be categorized as "middle class," the other four were from a lower socio-economic class. The mean level of education of the males was eight years and the mean length of stay in the United States was 55 years. The mean length of stay in Delano was 38 years.

The women had a mean age of 65 years and all were married with the exception of two widows. Although almost all had started working at manual labor, they had eventually reached semi-professional and professional work while in their mid-twenties. Three were nurses, and the remaining two, who were the only ones employed at the time of this research project, were managers or directors of respective social agencies. The women in this sample could be said to belong to a solid middle-class background. Interestingly, their sons and daughters were mostly professionals who were affluent. The median length of stay in the United States as well as Delano was 32 years and 22 years respectively. Considering the whole sample, the mean age was 72 years; the

mean years in the United States was 53 years, the mean years of education was eight and the mean years in Delano was 31.

Next we will see how specific Filipino members of the community assisted in the implementation of this study.

Community Members and Implementation

The two "key" Filipino women who assisted in the implementation of this study were active members in the Filipino Community. Both women were housewives, spoke the Filipino language, and came from middle class families. Both were active members of the Filipino Education and Cultural Association, the Filipino Women's Club, the National Filipino Federation of America, and the Filipino Catholic Association. In addition, both volunteered their time to several social service agencies in Delano. Their husbands are active in the Filipino community in Delano. One is an active businessman who owns several hotels and rest homes for the aged in Delano. Many immigrants from the Philippines use these rest homes as first places of residency in the States. Both men are active in many Filipino Organizations: one is the president of the Filipino Senior Citizens and vice-president of a Filipino Social Service Organization called "Help and Care."

Once the two "key" women were familiar with the design and purpose of the study they began to select potential respondents. Because they knew the Filipino community, they knew exactly which persons would be able and willing to become subjects for the study. They made the initial contacts with the potential subjects. After the subjects conceded to be interviewed, the "key" women gave this research the

telephone numbers in order to arrange for place and time for the interviews. They also assisted in the interviewing process by translating into different Filipino dialects (for two respondents) when the need arose for clarification.

The Interview

The basic instrument for collecting research data was the interview. The interview process was divided into two segments: the first focused on obtaining a saturation level of each respondent's ethnicity (see Design section) and the other segment dealt with obtaining information on the topic of death. The topic of death was divided into two categories--the personalization of death (with the respective probes of locus, proximity of death and concept of finite life time) and the meaning of death (with parallel concept of participation of death).

The outline of the interview approach is provided in the Appendix I. This outline provided the guide for the interview process. As Richardson has stated, the interview approach maximizes the possibility of obtaining equivalence of meaning between respondents and is particularly useful in studies where phenomena are described and concepts explored and developed. The participant-observation interview also maximized the clinical component of the interview. As a method of inquiry participant observation, like effective therapy, uses of rather uses rather than obliterates the relationship between the observer and the observed.

The interviews started in October of 1982 and proceeded until completion in mid-December of that same year. Ten of the interviews

were held at the examiner's office and ten were held at their request in the respondents' home.

Design

Instrumentation development combined and utilized a series of questions developed by Diggory and Rothman in their questionnaire, "Values Destroyed by Death" and questions utilized by Rothstein (1967) in his study of the "Personalization of Death." The questionnaire (see appendix) provided the base of data collection and is divided into two sections. The first section pertains to the concept of "Personalization of Death." Three themes or probes control for the Personalization of Death:

- a. locus of death
- b. proximity of death
- c. concept of finite life time

These three themes, first used by Rothstein (1967), are defined and operationalized (see Operational Definitions in the Methodological Section). The second section pertains to the "meaning of death" and includes Kastenbaum's (1972) concept of participatory or non-participatory relationship toward death. Two themes or probes control for the participatory or non-participatory relationship toward death:

- a. locus of death
- b. favorable anticipated context of death

Respondents answer the questionnaire in an open ended manner and interpretation is correlated to both the major and minor questions of the research. Reliability and validity of the series of questions

developed by Diggory has been established by Diggory. Since this dissertation utilizes substantiative theory (as in Rothstein), validity and reliability, however, need not be demonstrated. Glasser and Strauss (1967) have stated that substantiative theory does not concern itself with reliability and validity. "Our position is not logical, it is phenomenological...it is not to establish verification of the facts" (p. 6).

To operationalize the concept of "acculturation," an instrument has been suggested by Kastenbaum (1977). Kastenbaum's scale of ethnicity or ethnic saturation was followed. He lists eight ethno-cultural variables:

- a. Familism
- b. Age hierarchy
- c. Sexual roles
- d. Language
- e. Religion
- f. Food
- g. Friends and associates
- h. Place of residence

Each of the eight variables will include three statements. For example, the following statements relate to the variable of food:

- a. I prefer ethnic or Filipino food
- b. I prefer both Filipino as well as American food
- c. I prefer eating American food

Each respondent is given the complete scale (see appendix) and fills it out accordingly. Kastenbaum includes three levels of saturation. Total saturation which is reflected in item a, partial saturation which is

reflected in item b and non-saturation which is reflected in item c. A numerical score of three is given for each respondent scoring on item a on the scale. A numerical score of two is given for each respondent scoring on item b and a score of one is given to those scoring on item c. The total score is summed in order to arrive at each respondent's degree of acculturation.

Conclusion

In conclusion, we have seen how and why substantive theory was chosen as the methodology of study, due to the subjective nature of the qualitative data involved. We have also discussed the operational definitions of the major concepts used in this study, and reiterated the central clinical questions and sub-questions. We have seen the "instruments" that would be used and what items composed the contents of these instruments, i.e., Kastenbaum's Scale of Ethnicity. Selection of the sample was explained particularly as it pertained to the methodology at hand; the process of obtaining the sample was also explained. The interview process was explained as well as how it pertained to the design of the study. The probes which controlled for the personalization of death were elaborated. In this study we saw that the thesis was divided into three sections. The first section pertains to the topic of the "personalization of death." Variables associated the personalization of death were enumerated to follow those used by Rothstein in his 1967 study of the personalization of death. The second section pertains to the "meaning of death." Questions pertaining to the "meaning of death" are addressed in the interview questionnaire (see interview guide in

Appendix). The third section pertains to the topic of acculturation. Kastenbaum's Scale of Ethnic Saturation was utilized and provided the means whereby the concept of acculturation could be operationalized.

CHAPTER V

FINDINGS AND DISCUSSION

The purpose of this research was to investigate according to the central research question, "How the process of acculturation in a rural aged Filipino population affected their relationship toward death?" To answer this question, it was broken down into three additional questions:

- A) Is this rural aged Filipino population able to personalize death?
- B) To what extent is death personalized or non-personalized in this population?
- C) Does acculturation in this population affect the ability to personalize death?

and three sub-questions:

- A) What is the meaning of death to this population?
- B) Does acculturation in this population affect their meaning of death?
- C) Does acculturation affect whether this population is participatory or overcoming in their relationship to death?

Before we answer the above questions, through the results of this research, let us look again at the methodological emphasis of the approach that has been used: substantiative theory. Because of the rather "open" and "qualitative" approach, the findings become a blend of "qualitative" and "quantitative" data. The validation of the findings cannot

be in a logo-deductive approach without (1) violating the theoretical approach, (2) losing the very reason for the use of such a theoretical approach. The findings presented below, in order to be fully understood, will have to be discussed and explained following the phenomenological approach of the analysis of the data. To reduce the results to mere numbers would violate the reason for the research. Results are as follow:

- A) 30% of the sample population were "personalizers" because they were able to fulfill Rothstein's requirements. They were able to:

1. Describe the fact that they were growing old.
(locus of death)
2. View death as imminent or relatively near.
(proximity of death)
3. See their life as having a finite or terminal point. (finite life time)

Besides being able to personalize death, six out of the seven respondents regarded death in a "positive" light. To them the context of anticipated death was one of reunion, release, happiness, and an entrance to a better place and time. The ratio of thirteen to seven between the "personalizers" and the "non-personalizers" will be explained in detail in the Discussion section.

- B) Age was found to be a significant variable that controlled for the personalization of death. Of the seven who were able to personalize death, the younger the respondent, the greater the tendency for him/her to personalize death. Age

range for "non-personalizers" was 60 to 73. Most significant, however, was the fact that the mean age of the "personalizers" was 67 years, whereas the mean age of the "non-personalizers" was 76 years.

- C) Gender was a significant variable that controlled for the personalization of death. The total female population (n=5) within the n=20 respondents was able to "personalize death."
- D) Mean length of stay in Delano was an insignificant variable in controlling for the personalization of death.
- E) The mean educational level was an insignificant variable controlling for the personalization of death. Between personalizers and non-personalizers there were no appreciable differences in educational attainment--both had mean educational levels of the eighth grade.
- F) To answer the research questions pertaining to acculturation, a classification of ethnic saturation, suggested by Kastenbaum, was administered to each respondent. From this classification a score was obtained for each respondent's degree of ethnic saturation or rootedness. Using the suggested Kastenbaum Scale of Ethnicity it was revealed that 70% of respondents had scores of less than the mean of 10.5 ($\bar{x}=10.5$), suggesting a higher level of acculturation (with scores above 10.5 indicating a lesser level of acculturation). Of the 13 respondents who had higher levels of acculturation, five of them were "personalizers." This was significant as studies on acculturation (i.e., Choron, Kastenbaum) revealed the reverse of the findings

of this paper: the more one is acculturated, the greater the tendency to deny death and see it as adversive.

- G) As to the "meaning of death" for this population, of the respondents' beliefs and values about death were similar. 19 of the 20 respondents saw death as a solution rather than a problem. Hence; death was seen in a positive light. They regarded the anticipated context of death as one of hope, release, and reunion. It is significant to note that this view was unlike that of Kastenbaum (1972) who noted that death was seen as an external and adersive event with, "overtones of defeat, impotency and humiliation" (p. 106) for the general WASP population. This population viewed death in the reverse light; it was a positive experience.

In the next section, we will discuss the implications of these findings.

Implications

What do these results indicate about the central research question? Let us begin by examining the results one by one.

The first finding of this study has to do with gender of the respondents, in terms of their ability to personalize death. Diger (1974) had found that women view death in emotional terms while men view death cognitively. Christ(1961), Rhudick and Dibner (1961), Swenson (1961), and Munnichs (1972) all found that females feared death more than males did. Diggory and Rothman (1961) found that what women feared most was that death would cause grief to their relations and that they could not take care of their dependents. Both consequences

focus upon the situation of the people who survive the dying person. Men feared mostly that they would cease to be. There was no indication that they could look beyond themselves, to the welfare of their surviving loved ones.

As in the Diggory study, the women in this study expressed more fears pertaining to others, particularly their loved ones, than males did. Ibrahim and Rashad (1977) found a preponderance of male aged Filipinos who committed suicide as compared to female aged Filipinos. Could Ibrahim's and Rashad's results be extrapolated to suggest that males are more egoistic and therefore lacking altruistic feelings about leaving their loved ones behind? The two male personalizers were able to look beyond themselves and express concern for their survivors. From these results, women in this study were more altruistic than males. They showed more concern for others than for themselves. These findings suggest that women have a value system which emphasizes the concept of self-esteem dominated by self-reliant individualism.

The second finding of this study had to do with the age of respondents in terms of their ability to personalize death. Generally the younger the respondent, the greater the tendency to personalize death. The mean age of the "personalizers" was 67 years, whereas the mean age of the "non-personalizers" was 76. This finding contradicted the findings of Rothstein (1967), Kogen and Shelton (1962), Kastenbaum (1972), Kriger, Epsting and Litner (1974), Lidz (1980), and Shneidman (1973) who found that the younger cohorts in their aged populations were more anxious about death than the younger cohorts. Their findings supported the existential notion that a mid-life crisis occurs when one becomes aware of the fact that more time stretches behind one than

before one. In this study, the younger respondents could discuss their aging process and their nearness and vulnerability to death. They showed less tendency to deny the reality of death than the older cohorts. This finding also was the reverse of the findings of Cory (1972), Marshall (1978), Munichs (1972), and Swenson (1961) who found little or no anxiety pertaining to death in their aged populations.

Chronologically, younger subjects are further removed from death than their older counterparts. That is, they have a future to look to and more time to live. Hence, there would be less of a denial to talk about death and its many implications. On the other hand, the older respondents whose death is imminent must protect themselves from the recognition of the actual threat to life and therefore distance themselves from the reality of death.

In this study the younger respondents could talk about their aging process and their impending death. The younger age group showed less tendency to deny the reality of death. They have a future to look forward to and they have more time to live.

The third finding dealing with personalizers versus non-personalizers indicated that of n=20 subject population, seven were able to personalize death, with the rest being classified as non-personalizers (Rothstein, 1967). Let us begin by examining the three requirements necessary for "personalizing" death, and how the personalizers differed (through these three requirements) from the non-personalizers.

Personalizers of Death

Personalizers were generally the younger females. Below are

examples of their statements, which reflect their ability to meet the requirements for the personalization of death.

Locus of Death

Seven respondents were able to state that they were growing old and that age-related bodily changes accompanied their aging. During the years of middle-adulthood, people become increasingly aware that death will come as a result of inevitable natural biological processes. The verbatim quotations by the respondents reveal this awareness.

My teeth are out (laughs). I have dentures...my hair is getting gray. (no. 8)

When asked if these changes were seen as an advantage or disadvantage, the respondent replied, "It makes no difference because it's coming to my age."

Question: What changes have you noticed in your appearance during the past five years?

Well, I noticed that my hair has gone gray completely ...For last few years, I notice that I don't sleep as long as I used to. The most I can sleep now is about five hours or less. (no. 3)

My hair has become gray. My face looks old because I am growing older...I am loosing weight. (no. 4)

Question: What changes have you noticed in the way your body functions for the past year?

I have more pains that goes with my age. I am lazier, I don't cook as much. I am more physically limited because of my age (laughs). I have to be a bit more careful in order to survive. (no. 8)

I am getting weaker....I got gray hair like my mother (laughs) much more tired too...you feel a lot of pain, back pains and it's hard time getting around. (no. 12)

Other respondents were more descriptive of their awareness of "growing old," particularly the slowing down of their physical powers.

I used to be so active. I find that as the years go by I am not so active as I used to be. Of course graying of the hair and the stoutness, those changes come with age...Well, I guess a long time ago I was still slim...Well, I would say that there are times, many times during the mornings where I don't want to get up, you know, as quickly and as easily as I used to. There are times when I just want to sleep in even though the children are all grown up. I still feel the need of extra sleep...I find that I am not as quick as I used to be. I don't have that drive I used to have. There are times when I just want to say forget it which I never said a time ago. Well, I'd say well I got to do it now and get it over with. But now I say forget it. I'll do it tomorrow....I realize that there are things that I can't do which I could do when I was younger, so I make a postponement. (no. 18)

You know I am graying. I am fat and I don't feel too well. I am a little weaker now. I can feel that my energy has decreased and lately I noticed that I am getting headaches now and then....It's the process of getting older, diabetes and my high blood pressure, particularly high blood pressure, many older people have it. (no. 17)

To several respondents growing old meant an alteration in their social activities.

We don't go out as we used to. We have decided that going to social events isn't that important to us; we don't join in. There are things that we have decided that were more to our advantage, at least we have decided that it's not going to do us any good you know, so why join in? (no. 18)

Another respondent states:

My social activities are the same although I don't attend too many parties like I used to....I would much rather stay at home after work. (no. 17)

One respondent was able to see the potential enemy within, he was able to see death.

I am going down and I feel weak now. When they

(people) get over thirty-five they do down.
That is what I feel now, but more worse I
don't eat too much but I am just waiting for
my turn to go. (no. 19)

Next, let us see how the personalizers responded to the probe of the proximity of death.

Proximity of Death

Seven of the respondents were able to view death as imminent or relatively near. In the middle adult years, most people become aware that death is imminent or relatively near. This awareness is accompanied by less belief in one's immortality in this life. Quotations by the respondents reveal these changes in attitude and beliefs.

Question: When you think of your life, do you think of how much longer you are going to live?

Yes, everyday. (no. 3)

Question: Is death far off?

No, I am hope. I am live a little longer....I am not sure, but God is behind me. (no. 3)

Question: Is death a long way off?

No, it's not, it's God's will, whatever will be... Of course we have to figure out that we are not going to live here forever. We're going somewhere (laughs). This is a stepping stone for our pilgrimage to the end. (no. 8)

Well, I don't know, but I hope it's a little bit far away, but I know it will come sooner than I wish. (no. 4)

No, I expect it any time....I don't think about it all the time, but I expect God has given me a limited time on this earth. (no. 17)

I hope it's far....everybody dies, if I can postpone it and live a little bit longer so I can see the grandchildren married and having their own

family I would appreciate it. (no. 18)

Well, it's very close, I think. (no. 19)

Question: How often do you think about death?

Well, before I go to bed, I lay down and think about the time I will go. I pray to God for a couple of years to go. (no. 19)

The process of aging itself brought this respondent closer to death itself. She states:

Well, when you are younger there is so much life in you and you don't think of death at all. You think of fun and living, that's it . . . When you're young death seems so remote. (no. 17)

One respondent's proximity toward death depended upon the particular mood she happened to be in. She states:

It's way off; but if I am not feeling well, I feel as though I am going to die soon. (no. 12)

In the following, we will focus our attention to the responses of the personalizers pertaining to the probe of the concept of finite life time.

Concept of Finite Life Time

Seven of the respondents were able to view their life as moving to a finite or terminal point. The ability to see one's finality in the distant horizon also brings a sense of the brevity of life. In quotations below, respondents reveal that they can view their lives in terms of beginning and ending. Hence, they revealed a finite time perspective.

Question: Do you ever think of how much time you have left?

Yes, I think accepting the idea of death makes a

difference because they (people) realize that they themselves will be gone one of these days, and if they have things to do they must do it before they realize they have to be gone. I have thought like this and in fact, my husband and I discussed it and we realize that if we didn't do these things now, probably we would never be able to do it. (no. 18)

Question: Young people don't believe that they are going to die, how do people learn this?

That is because they believe in God, that's why there is nobody living forever. (no. 4)

They learn this (that they are going to die) by growing older....yes, when I was young I didn't think about all those things....Like the reason you die, things like that....now I do. (no. 12)

Question: Do you think about that very much?

Yes....I tell my son and daughter. I give them fatherly lectures. They'd better be saving their money for I am not going to be around too much longer. (no. 4)

Question: Some people tell us sometimes they think about how much time they have left, has this happened to you?

Sometime I think about, doctor. (no. 3)

Sure, I think about that once in a while....especially after my husband's death, I realized when the time comes, it could happen any timeit's my age. (no. 8)

Sometimes I have this idea especially when you have problems, you know....a lots of thinking. (no. 12)

To me the years just seem to pass by, it seems to me just to be like yesterday....I pray God that the Lord give me some more time to life in this beautiful world that he created for us. (no. 16)

One respondent, in answering the above question, always mentioned the brevity of time. She stated:

Yes, especially the last few years, especially the years that my husband has been ill...We realize time is going so fast, that it is not waiting for us. Now maybe they (youth) are saying it's slow....but to us we've done it so naturally time has gone so fast....youth is not waiting for us. (no. 18)

One respondent, who was aware of the limitation of time, felt she had to prepare something for her family. She stated:

Yes....I'll like to do something for my familyI'll do with my days to make even something for my life before I die. When you got a family you get to prepare something for your family before you leave. (no. 19)

The brevity of life was made apparent to one respondent by a series of family members who had been criminally assaulted. She was asked the question, "How do you reconcile these tragedies (of your sisters and brothers) with a sense of meaning?" She replied:

Well, it has given me grace to realize that we don't possess our lives and that our lives can be taken away any time at God's will. (no.17)

We will take a look at the non-personalizers, and how they were "classified" as such, and how their quotes differed in contrast to those of the personalizers.

Non-Personalizers of Death

These 13 males were the older portion of the subject population.

Locus of Death

The following quotations revealed how age-related bodily changes and the aging process were denied or ignored. These respondents were often evasive and ambivalent in describing age-related changes.

Question: Are there any changes in the way your body functions during the past five years?

I feel strong....well my body and mind has matured. (no. 9)

Question: What changes have you noticed in your appearance over the past five years?

Well, it seem to me that I feel better...there has been some changes in my body, when I was in my fifties I was so very healthy, but now my body is still regular. I just feel like I felt in the fifties. (no. 5)

Well, I've gained a little more weight, I walk a little bit more slowly due to my arthritis condition....I tire more easily....I can't take stress too long. (no. 10)

Well, you have the feeling that you are still young when it comes to action there is a delay in your movements of your bones or whatever muscles especially when you have diabetes or or heart kind of disease, it hurts, it's bound to. Ninety-nine percent of the old people, they get rheumatism or something like it. (no. 11)

Interestingly, the last two respondents viewed the changes in their bodily functions as related to diseases and illnesses rather than to the passage of time. The last respondent, who was 60, denied any decrease in his physical energy during the past five years. His only reply was, "I think it's normal, just normal." In addition, he denied feeling more physically limited than when he was 30. Another denied the aging process by stating, "I am weaker than when I was a few years ago. I feel tired now but these changes don't mean I am getting older." (no. 13). In a similar fashion another respondent stated, "I noticed my hair has gone gray, a few wrinkles, but of course my strength is normal just like I used to be. I don't know why but I feel that way." (no. 20).

One respondent could not locate any changes in the past ten years. He stated, "I have not noticed any changes in the last ten years. My friends say that I am looking younger, I have not noticed any changes in the last ten years." (no. 16)

Several admitted a few changes in bodily functions, but they usually added a positive description which often included the virtues of exercise. One respondent stated:

I think I am slowing down, getting older, that's the only thing that has changed, but I am still strong as I used to be. If I exercise I will be stronger. (no. 14)

One respondent felt that exercising could alter his many physical problems. He stated:

To me I think it is all the same, nothing has changed. I am doing exercising in the morning and I can get rid of it (ulcer), it won't bother me very much. I have headaches sometimes but not very bad. I can get rid of my headaches when I get ice and rub my head and eyes. (no. 15)

Another respondent stated:

For the last fifteen years I have noticed that youth is trying to evade me....in order to change all this I try to keep up exercise, and do more exercise, stay in the sunshine in the morning. I do exercise because it brings you where youth is at. (no. 11)

Question: Do you feel your body is as strong as it was when you were a young man?

I feel not as strong, that is why I like to exercise more so I can feel strong. (no. 2)

Another respondent said:

I am a little bit weak, just a little bit. Not too much, in my legs because I exercise mostly. When I was younger I had more energy

because old now and there is some energy but still I am exercise. You know I am still strong yet. I don't feel weak because I exercise....The most important I do is exercise early in the morning or in the evening.
(no. 6)

Repetitive statements of the virtues of exercising could be seen as self-reassuring statements to keep "healthy" and mask the negative changes. Interestingly, the two eldest respondents (no. 1 and no. 2), who were 84 and 85 years old, did not describe any negative changes. They felt they were getting stronger as the years went by and answered "no" to the questions pertaining to aging.

In the next section, we will turn our attention to how the non-personalizers responded to the probe of the proximity of death.

Proximity of Death

Quotations from certain respondents revealed that they could not conceive of their mortality. They conveyed a sense of immortality in this life and could not think about their impending death. To these respondents death was too distant to think about.

Question: Is death a long way off?

"Yes....I never think about it." (no. 1)

Another respondent simply answered,

"Yes" (no. 2)

Another stated,

"The more I exercise, the more longer will be life." (no. 6)

One answered the question ambiguously,

I don't have any fear bout it (laughs).
That is one thing an individual cannot

escape. When his time comes young or old so I never regret death. (no. 10)

Several gave dates that were quite distant. They stated the following:

That's one thing I can't tell you. Now I am still thinking that I will even live when I am in the nineties. (no. 13)

Heck, I am going to be 105....I never think about it. (no. 14)

One respondent attributed his long life to the fact that he neither drinks nor smokes. He stated,

"Well, it seems to me I still have a long life....I don't think about (death) too much....people die because they smoke or drink liquor." (no. 5).

Several found their good health to be a natural immunity against death.

I've been feeling very good ever since.... I haven't been sick....I never been sick.... I never think about it (death). (no. 9)

Every year you read that when you are my age you are near death for sure; but to me I don't feel it. I don't believe even though I am now seventy-eight years old, close to seventy-nine. I feel, just feel, that I am just happy and strong as anybody. I could work if I want to but the way I think, I would like to preserve that strength for longer days to come. (no. 11)

Some respondents suggest their complacency or resignation when confronted with the idea of death.

I don't have....my feelings about thinking about death, it doesn't concern me. I think it's funny, it doesn't concern me when I say to myself I am old. When I die, I die....no I don't think about death. Say like these people who are old like me, some of them die at 60 and 65 and things like that. They die

a mature death so it doesn't concern me very much on my age of seventy four. (no. 15)

What do you mean, Ruben? I really never thought of death because I know that we had to go some time but in the mean time I am busy with my daily life that I have never thought of when I going to die. When I am going to go all I can say is when your time comes that is death. I never thought until now that you asked me, it's a little bit funny? (no. 20) .

It is interesting to note that the respondent above, who stated that he never thought of his own death until the author questioned him, purchased life insurance some 15 years ago because he was "forced" into it. In his own words:

....because of my family, I thought people were talking about it's nice to have life insurance and if something happens to you at least there is something to fall back and your family behind you so that is why I was forced to do it. Until now I still carry life insurance. (no. 20)

Question: Is death a long way off?

To me the years just seem to pass by like yesterday. I still feel I could do some- think. Still in my mind I feel I could do something. There will be more days from now on, to go on, yes more days for me to go on. (no. 16)

Let us examine how the non-personalizers responded to the probe of the concept of finite life time.

Concept of Finite Life Time

For 70 percent of the respondents, death had minor or little importance in terms of their seeing life in finite terms. Even the death of significant others, which greatly affected most respondents,

seldom brought a corresponding uncertainty about their own life. In short, most respondents conveyed a rather flexible time perspective. They were unable to view their life in terms of a terminal point and had a false belief in their own immortality.

Question: Do you think about how much time you have left, has this every happened to you?

I'll just wait many years more. (no. 1)

Well, I still live long as to my situation now I feel all the time happy and contendednot worries at all...The majority of the people may think that. (no. 5)

No, I never think about death. I only think it when I am going to die because you never can tell, sometime tomorrow or maybe a hundred years. (no. 14)

....they (people) are going to die but to myself I thik to myself I will never die.... my life is still long. (no. 6)

I never think that. When I graduated as a barber all the barber manuals I read stated that the average barber will only work for twelve years and they will die....Twelve years elapsed and I never die....I read a booklet the average people receiving social security will live only fifteen years, now it's over fifteen years since I am on social security and I am still alive. (no. 11)

One respondent feel that his life time was short, but he saw this thought as a sort of aberration to be conquered by a strong will power.

He stated:

Sometimes there is a time that you get depressed, Ruben. Now sometime you feel that maybe life is too short but if you have a strong will power you will get it over with, and I forgot all about how long will I still live, and when I am going to die....I have a strong will power, it's all in your mind. (no. 20)

One respondent stated the following:

Well, my grandma was 110 when she died, so
I am going to live long long (laughs)
(no. 9)

Many respondents gave either vague or inadequate answers.

Question: Do you think about how much time you have left?

Well, I just wait. (no. 2)

I really don't know. (no. 16)

I think it's age and experiences in life that
teaches us things. (n. 13)

My personal opinion as I grow older, I come
to realize and believe that I am 71 years old.
When I was younger I never thought I would
reach my age of 71 years. (no. 10)

Since they were unable to view their own imminent death, "non-personalizers: seldom made any statements about the brevity of life or the scarcity of time. Kastenbaum (1972) and Rothstein (1967) found that religiosity was an instrumental factor in the awareness that life was short and time was precious. For "non-personalizers" this was not true. Although 17 of the 20 respondents were religious and held to biblical truths, for the majority of the respondents religiosity had no bearing on how transitory they felt their life to be.

Question: How does a person learn they are going to die?

Well, I can't say about when I am going to
die....I am just waiting for God, you just
wait. (no. 2)

Question: Some people tell us that they think about how much time
they have left, has that ever happened to you?

No, as I say....take life day to day and
trust in the Lord to get me going. When-
ever the time comes I am ready. (no. 7)

Question: Do you think that accepting the idea of death makes any difference in the way a person thinks about life?

No, I never think about death. I only think about when I am going to die because you never can tell sometime maybe tomorrow or maybe a hundred years from now. (no. 14)

It's something that I really never thought of. As I said that all I believe that someday somehow everybody has to go and I never thought of when or how I shall go.... I know for sure....I have to go but I have no idea of when and don't have that in mind really. (no. 20)

No....I never think about my death. (no. 15)

One wonders if the aging process had impacted on the "non-personalizers." They expressed no need to curtail their social and external relationships, yet they were on the average ten years older than the "personalizers." One "non-personalizer" regretted the many years he had tried to be "young" and stated:

When I was young I was wild. Then when I got older it wasn't right because as I get older I come to think that my experiences tells me that it's not proper to feel or show people that I am still young when I am already old. (no. 10)

Neither did the "non-personalizers" give any indication that they were retreating to an interior and introspective life. Rather, the themes were to keep busy and carry on as usual.

Conclusion

The quotations reveal how the differentiating factors contrasted the respondents from the two groups: Personalizers and non-personalizers. Their responses differed qualitatively; analysis of

the quotations from these seven respondents, demonstrate their to fulfill the three requirements for a "personalizer." They were able to face the aging process, acknowledge the imminence of death, and view a terminal point to their lives.

Acculturation/Ethnic Saturation

The fourth finding of this study dealt with the amount of ethnic saturation/acculturation for each of the respondents.

Results of the Kastenbaum Scale of Ethnicity and Ethnic Saturation revealed that respondents rated each of the nine items as either A or B. They never rated the C category which reflected the least ethnically saturated and hence the most acculturated (for detailed description of scale, please refer to appendix).

Findings revealed that the more acculturated the respondents was the more likely they were able to personalize death. This was a startling fact; given the fact that the literature reflects the opposite trend. As has been stated, death in our present contemporary society is distant and almost non-existent (Becker, 1973 and Blauner, 1964). Becker (1973), Choron (1964), and Foss (1972) have all focused on the extent to which death is denied in our culture. Becker (1973), Kastenbaum (1972, 1977), Rank (1945), and Zetzel (1965) view acculturation as the process whereby people becomes alienated from their own mortality. Kastenbaum (1972) speculated that persons in ethnic and sub-cultures anticipate and accept death because the locus of death is internalized within themselves rather than externalized as in the predominant culture. He speculates that those who are more remote from the dominant culture, (i.e. those

living in rural settings and of strong ethnic and racial heritages) are better able to accept their mortality than their counterparts in the predominant culture. Behavioral observations reveal that "personalizers: were generally more articulate in the English language, had more contact with the dominant culture, had usually found employment outside the agriculture sector, and held semi-professional jobs. These findings, however, did not hold true for the two men who were "personalizers." Their English was fragmentary, they had little contact with the dominant culture, and they continued to hold employment as field workers.

As stated earlier, the literature suggests that those from the predominant culture have the most difficult time resigning to the reality of death; they tend to deny death, feel overwhelmed with the meaninglessness of death, and regard this temporal life as one of immortality. In this study that hypothesis did not hold true. The contrary was more accurate in this population. The increase in one's acculturation to the predominant culture decreased the likelihood that death was an alien, aversive, and forbidden subject, that one's temporal life was immortal and we were not aging.

In this research (see section on sample), the men were generally from a lower socio-economic status than the women. Lower socio-economic status is associated with a greater risk and vulnerability to death Kastenbaum (1977). Across a broad age spectrum, 20 to 64 years, men in the lowest of five socio-economic categories had a mortality ratio almost two times greater than men in the highest category (Kastenbaum, 1977). The men in this sample were in a position of more vulnerability given their socio-economic status. They were also in a position of

vulnerability given their history and socio-economic status. These men could have well been anxious about death given the fact that they experienced much tragedy, separation, and death throughout their lives. Their histories were remarkably similar. They all came from backgrounds of poverty, usually villages in the Philippines and worked in the fields from dawn to sun-down. They all spoke of the difficult life in the Philippines. For example, if they did not work 12 to 13 hours a day, their families would not survive. At an early age they were put in an adult role with the accompanied anxieties of an adult father. When the chance arrived to leave the Philippines, they were happy, not merely to change their own personal lot but to be the primary breadwinner for the family in the Philippines. Once in the States- usually at 16 or 17 they worked in the fields, often as long as 15 hours a day.

Facing separation from loved ones in the Philippines, and the loss of their culture, they had little to look forward to in this country but to work hard. They sought to prove to themselves (and particularly to the outside predominant society) that they were persons in their own right and worthy of respect. They faced prejudices which they occasionally shared with this author. More important, they tell of the extremely hard physical work, particularly until 1967, before the organization of the United Farm Workers Union. Two men, who had personalized death, were 73 and 71 years old and still working eight hours a day in the fields.

The longer they stayed in the States, the more they lost contact with their families back home. Few of the respondents went back to the Philippines to visit or attended their parents' or siblings' funeral.

Most felt alone, isolated and alienated in this culture, which hardly accepted them. All were trapped, as it were in the fields, and in a gruelling life, which had little stability (only seasonal work) or permanancy.

These men could not talk about death because it was extremely difficult and painful for them; they had to put death a distance to survive. Their deprivations had been too great. Zetzel (1965) stated that in order to adjust to old age, loss, and one's impending death, one needs all of the psychological resources available. Past deprivations, separations, failures, particularly in early life, constitute a serious reduction in potential psychological resources. The vulnerability resulting from such a history impedes one's acceptance of death.

Meaning of Death

The fifth finding of this study dealt with the meaning of death to each of the respondents. This was a religious cohort. Ten of the respondents stated that they go to church regularly and believe in Biblical truths. The remaining ten stated they seldom go to church but believed in Biblical truths. Seventeen respondents perceived death in a religious context: death was not the final event in their life; there was a life after death. As one respondent stated, this life is just a "stepping stone." Little fear was expressed about death, and the anticipated context of death was positive and favorable. The anticipated context of death was one of reunion with loved ones, freedom from the cares and anxieties of this life and, perhaps most important fulfillment in a spiritual dimension.

It has been stated that religion binds one's anxieties pertaining to death (Durkheim, 1949; and Tillich, 1952) and lifts man to a spiritual meaning and connection outside of himself (Buber, 1966; and Tillich, 1962). Kastenbaum (1972) has suggested that the anticipated context of death among minorities will be favorable because they believe in a life after death characterized by fulfillment and reunion.

Emperical studies on death attitudes and death anxiety by Feifel (1974), Fulton (1976), Morton (1972), Shneidman (1973), Strut (1958), and Swenson (1961) reveal that the "devoutly religious" or those individuals with "more fundamental religious convictions" view death with less fear and anxiety than those less committed in their beliefs.

In this sample, the same held true: those with strong convictions and beliefs and those who were able to enumerate their religious doctrines were the ones that could elaborate lucidly on the meaning of death. Eight of the 17 respondents believed in a life after death. These eight respondents generally gave stereotyped responses. For example, when asked what death meant, these respondents would state:

....Well, in my mind I think it's nothing to think about. (no. 5)

Well, I think of death....No, I don't think nothing of death. (no. 6)

The way I feel I don't think of death very seriously. (no. 10)

Nothing comes to my mind. (no. 9)

....to my mind, no, I don't think about death. (no. 1)

Nine of the 17 respondents were able to elaborate further on their religious commitments and faith and to convey more specifically their

meaning of death. These nine respondents found a profound hope in death; there was an eternal life to be lived with loved ones with whom they would be reunited, of course, reunion with the person Christ Jesus.

Below are examples of their religious themes and meanings:

I will see my people someday, I will see them in Heaven....It will be a reunion. People will think I am crazy but that's how I feel because that is what we were taught....I don't want to die but death is coming. (no. 8)

I am not afraid of dying. Somehow I am ready any time God wants me. That's His will, and that will be. (no. 4)

In this life, live is temporal, after death you live a new life, you live an eternal life. You see this death is the most glorious day of your life. (no. 11)

There is another life, I believe it. The other life is eternal. I believe the Bible and Jesus Christ....Oh! that I might be with him. (no. 15)

As several respondents put it:

....it's like going from one door to another. It's the end of living and the beginning of a new life. (no. 7)

I believe of when you die, you go to heaven and there is a new life again. That's the way I feel. (no. 10)

The Bible says that there will be a resurrection, there will be a resurrection and that we will live on, our spirits will live on. I am kinda looking forward for that. Yes, death is a reunion with the loved ones who have gone on before you. (no. 17)

Only one respondent found death intolerable, perplexing and fearsome. To this respondent, the thought of her impending and eventual death coupled with her own personal problems made her feel extremely

vulnerable. She stated:

Sometimes I have this crazy idea (laughs)
....suicide? especially when you have
problems you know....(no. 12)

For this respondent life seemed empty and futile particularly since for her life ended at the grave. In her own words,

I am scared....I am getting scared because once you die that's it....once you die that is the end, no more....(no. 12)

When she was asked what death meant to her, this respondent (no. 12) repeated the statement, "I feel sad you know, because I will not be here." The following quotation conveys the meaninglessness or emptiness of death.

You know that when somebody dies they put you in a cemetery, and that's it....you won't see your family any more. (no. 12)

It was interesting to note that the above respondent was a "personalizer." Eight of the 17 respondents, who believed in life after death, but could not elaborate further convictions, symbols or beliefs, were those who did not personalize death. As a consequence, they felt generally immune from the power of death, did not feel that they were growing older, and had a sense of being immortal in this temporal life. They had little or no awareness of the transitoriness or brevity of life. This finding was in contrast to both Kastenbaum and Rothstein who found that religious beliefs were associated with one's sense of the brevity and transitoriness of life. Of the nine respondents who believed in a life after death and could elaborate further meanings, beliefs and symbols, five had no recognition of the brevity of life, the awareness of their aging process, or of their imminent death. They were "non-

personalizers." In many ways, this finding was paradoxical. Those who have definite beliefs and strong religious convictions would be expected to "let go" of their ideas of their invulnerability toward death and immortality in this temporal life.

The remaining four of the group of nine were "personalizers." They were more consistent than the five "non-personalizers." There was a greater consistency between belief and behavior; their religious beliefs were consistent with their life behavior. Usually the more religious the respondent, the greater the ability to transcend the negative implications of death and the more favorable the anticipated context of death.

Acculturation and the Meaning of Death

Finally let us look at the relationship between acculturation and the meaning of death. Becker (1973), Choron (1963), Kastenbaum (1972 and 1977), and Rank (1945) view acculturation as a negative process. Through the acculturation process, man loses meaningful myths and symbols which insulate him/her from the nihilistic implications of death. Without these symbols and myths about death, death becomes a meaningless and absurd event for modern man (Aires 1974 and Frankl, 1965). Correlation between suicide rates and acculturation, as evidenced in the studies of Dublin (1963), Kalish (1968), Lyn (1969) Pasewark and Fleer (1981), and Quinney (1965) reveals that "wealth," "status," "achieving," and "progressing" do not insulate one from the destructfulness of death.

When the subject of acculturation was addressed to this sample, the opposite trend occurred. That is, the more the respondent was

acculturated into the predominant society, the more he/she was able to elaborate further meaning, symbols and beliefs about the meaning of death. Also, the more acculturated the respondent, the more favorable was the anticipated context of death. This finding, as with the personalization of death, contradicted the established notion which states that the more one is acculturated into the predominant culture, the more likely one is to conceive death as an adversive and alien event and the more unfavorable the anticipated context of death.

The same trend was evidenced by the fact that nine of the 17 respondents who believed in a life after death and who were not able to elaborate on further religious beliefs and convictions had a mean score of 7.8 on the Kastenbaum Scale of Ethnicity, while those who did elaborate further had a mean score of 6.3. A reverse trend occurred when the nine "strong believers" were broken down between "personalizers" (four) and "non-personalizers" (five). Both "non-personalizers" and "personalizers" scored a mean score of seven points on the acculturation scale.

Summary

In this study we found that:

- A) Seven of the 20 respondents were able to personalize death.
- B) Gender was a variable that controlled for the personalization of death. All the women ($n=5$) in the sample were "personalizers."
- C) Age was a variable that controlled for the personalization of death. The mean age of the "personalizers" was 67 years,

whereas the mean age of the non-personalizers" was 76 years.

- D) When the topic of acculturation was addressed it was generally found that the more acculturated the person was the less likely he/she was able to personalize death.
- E) The meaning of death for this population was quite positive. For the majority of the respondents death was seen as a stepping stone to a future life of fulfillment, not as something negative or to be feared. In general, the more the respondent was acculturated the more he/she was able to generate positive values about the meaning of death.
- F) Length of stay in Delano as well as educational attainment were insignificant variables.

We then compared and contrasted each of the above findings in relationship to existing data from other researchers. For the variables of gender and age our findings paralleled those of other studies. For acculturation they did not. For the meaning of death, this sample paralleled other studies as well. Religiously involved persons usually have more positive beliefs about death than non-religiously involved persons.

CHAPTER VI

CONCLUSION

Findings of this research revealed that gender in the sample population was a significant variable which helped explain the "personalization of death." With the exception of Diggory and Rothman (1961) few studies have considered gender as a meaningful and distinct factor in death related research. Christ (1961), Jeffers, Nichols and Eisendorf (1961) Munichs (1972), Rhudick and Dibner (1961), and Swenson (1961) who reported that females feared death more than males did. These studies, however, gave no explanation as to why this was so. In light of this study, the reported findings are consistent with the fact that females fear death to a greater extent than males because they have a closer proximity to death. This research clearly revealed that females are more sensitive to their aging process, their finiteness and their mortality. They have the courage to embrace death and not distance themselves from it. It is not surprising that Digner (1974) found that men view death in cognitive terms, while women view death in emotional terms. This finding appears to be meaningless, since death demands our being and not just our cognition. Distancing is usually considered a cognitive function of the psyche; it would seem that Digner's (1974) finding suggests that women are more open to feeling the reality of death, which many existentialist have stated, "terrorizes" us. In light of this study, it appears that women can look death in the eye

and resonate with its dread; they can look honestly into its many implications.

The Diggory-Rothman study (1961) is helpful in further defining the sexual difference in relation to death. Diggory found that women fear death, but these fears are associated with physical pain, fear of causing grief to those who are left behind, and particularly fear of not being able to take care of their immediate dependents. Men, on the other hand are not interested in the situation of the people who survived them. They are, one might say, "egoistic," they have no concern about people outside of themselves. What they fear is that their plans and projects will come to an end and that they will no longer have any experiences. Since death is a final giving up of one's activities (ambitions, aspirations, talents), those who can accept it and face it as it is, are those who can be altruistic rather than egoistic. Diggory and Rothman's findings were replicated in this research; women more than men had concern for others, particularly their loved ones. But what was even more surprising in this study was that the two men who personalized death were the only two men who voiced concern (fears) about their survivors and their loved ones. Since the two men who personalized death were also the only two men who had altruistic fears a question arises about a possible variable other than gender differentiating "personalizers" from "non-personalizers." Are "personalizers" more altruistic than "non-personalizers?" Do they have less of an egoistic need? Is the issue here one of character traits or spirit rather than gender: It has been argued that women are by nature more sensitive than men, particularly in their ability to sense danger. This surely is

conjecture, but is there some reality to the speculation? Ibrahim and Rashad (1977) found a prepondence of male aged Filipinos who committed suicide, as compared to female aged Filipinos. The findings of this paper suggest that Ibrahim's results may be caused by the fact that males are more egoistic and less able to personalize death, therefore lacking altruistic feelings about leaving their loved ones behind.

Age as a significant factor in this study is somewhat more perplexing than gender. "Personalizers" were generally significantly younger than "non-personalizers." The younger population of this aged group were able to embrace death and to look at it in a more realistic light. Cory (1972), Marshall (1979), Munichs (1972), Shneidman (1973), Strutt (1958), and Swenson (1961) found little death anxiety in the normal aged population they studied. Could these findings be reinterpreted in the same manner as the findings on gender and death attitudes? That is, older persons report less death anxiety than younger cohorts do, because they distance themselves from the ever present reality of their impending and imminent death.

Kastenbaum (1974), Lidz (1980) and Rothstein (1967) suggested in their samples that there was an increase of death anxiety witnessed in the lives of those in the middle adult years. Kogan and Shelton (1962), in their study contrasting middle-aged and elderly adults, found that the younger portion of the population had more unconscious death anxiety than their elderly counterparts. Thus presented, our findings can be interpreted to mean that there could well be an age factor or dimension. This is in keeping with the existential position of Rothstein. Death anxiety increases in the middle adult years. For the first time, one

comes to realize that more time stretches behind than in front of one. This realization may trigger a crisis; one's balance is upset by the awareness of the limits of one's life span, particularly the awareness of the insignificance of one's life in an infinity of time and space. Seemingly a "little" or "no anxiety related to death," as reported by Cory (1972), Marshall (1978), Munichs (1972), Shneidman (1973), Strutt (1958) and Swenson (1961), could mean that over the years these aged adults have learned to distance themselves from the existential crisis of death, which we all face and try to resolve in one way or another.

Another fact which became apparent in this research concerning the personalization of death, that there was a distinct difference between "personalizers" and "non-personalizers." A respondent was either "personalizer" or not a "personalizer." There was no gradation or scale from "non-personalizer" to "personalizer." Either there was a stark rejection of the reality of death evidenced by repeated failures on the probes of locus, proximity of death, and the concept of finite life time, or there was an acceptance of those probes. One is left with the question as to why one person failed consistently in each category, and why another respondent passed in each category? Why was not there more of a variation? These findings suggest that there is no fluidness in one's acceptance of mortality. Acceptance of death, for lack of a better word, seems to be related to something substantive to our character or nature. Note Kohut's comment that the acceptance of mortality is a function of wisdom and not a function of knowledge, no matter how profound the latter might be.

This study in regarding the relationship between the personali-

zation of death and acculturation, provides some interesting findings. Prior to the task of data collection, the author had assumed that those who were least assimilated and acculturated into the dominant society would have adequate resources to contend with death. Such people were closer to their cultural roots and could draw strength from their cultural heritage to grapple with death. This hypothesis was supported by most authors including those reviewed in this study. It was the consensus of these authors that the more extensive the process of acculturation, the greater the depletion of meanings, symbols, and values, and the greater the sense of anomie, alienation, and meaninglessness of life. What was overlooked was the fact that all the research presented reflected the predominant society and not a minority population. The author had assumed that acculturation, as described by these authors, could be applied to this Filipino population. It was surprising to find that this was not true. Results indicated that the more one became acculturated, the greater the tendency for one to accept and deal with death honestly and realistically. This finding, if correct, forces us to view acculturation, at least from a minority population, as a positive rather than a negative process.

In the dominant culture, as noted by the authors mentioned (Kastenbaum, Rothstein), the process of acculturation had a negative connotation; it forced one into the "melting pot" of undifferentiated beings. Therefore, unlike the dominant culture, the process of acculturation for minorities was "gains" rather than "losses." At present, there is no workable theory on acculturation, which limits our understanding of its process and consequences. From this study we can

conclude that, unlike the process of acculturation for the dominant culture, for the Filipinos, a minority population, the process of acculturation is a positive one.

Summary

This paper is the first to examine the relationship between acculturation and the personalization of death in a rural, aged Filipino population. The results of this paper support the existential position that few are able to deal with the finality of death. The majority of us, regardless of race or creed, view death as distant or even non-existent. Most of the psychiatric literature, especially since the 1960's underscores our denial of the reality of death and the process by which we distance it. We prefer to be blind and thus retain a semblance of peace and equanimity.

As with the general population studied, a few among the 20 respondents were able to express their vulnerability toward death. Those who were able to personalize death appeared to be sincere and honest in their discussion of their lives. They were unanimous in the expression of their own vulnerability; they discussed their most pervasive fear, death, in an open manner without self-reproaches, condemnation, or pretentiousness. They were able to abstract the essential ingredients of living out of their daily lives. It appears that when one knows where one is going after death, one becomes more optimistic toward it. The "personalizers" were spontaneous, sincere, and accepting of the probes; again, accentuating their vulnerability toward death; while the "non-Personalizers" were defensive and negative, and more invulnerable toward

death.

Let us re-address the central questions and examine the answers in terms of their significance as they relate to the application of the existential position in other studies, and not as statistics. As has been said before, answers to these questions cannot be broken down into statistical percentages and significances without losing the depth of questions being asked. It is not the matter of how many can personalize, but how they personalize, how the process is manifested, and how is it related to acculturation and death.

A) Is this population able to personalize death?

Statistically "No," but in view of the fact that even among the general population, few are able to personalize death, then the answer must be "Yes." Seven of the total respondents ($n=20$) were able to personalize death. This represented 35 percent of the total respondents. Gender and age were the most important variables that controlled for the personalization of death.

B) To what extent is death personalized/non-personalized?

There was a sharp distinction between "personalizers" and "non-personalizers" in each of the three categories associated with personalization. Hence, if a respondent felt a proximity with death, he would also experience an awareness of age-related physical change as well the transitoriness of life. The same finding was applicable to "non-personalizers." If, a respondent did not experience bodily changes, he/she could not experience his/her own impending death nor the brevity of life. The temper of the interviews as well as the differences in personalities

revealed this distinction between "personalizers" and "non-personalizers."

C) Does acculturation affect the ability to personalize death?

Contrary to what has been written about acculturation, acculturation had a positive connotation rather than a negative one for this population. A positive relationship was found between acculturation and the potential for personalization of death. This finding was quite strong; the more acculturated the respondent, the greater the likelihood for the personalization of death.

It has been assumed by various authors (Choron, Kastenbaum and Rothstein) that those who achieved the most and were the most successful would have the most difficult time resigning themselves to the reality of death. The opposite held true for respondents in this study; the most successful and most "achieving" were able to deal most openly with the topic of death.

D) What is the meaning of death to this population?

Death was seen in a favorable light for this population. Death was not the end of life; hence death had been the final event in their lives. Death, most often, was seen as a stepping stone to a more enriching life. Death was not seen as an alienating, absurd, or meaningless event (only one respondent was fearful of death). Few fears were associated with death.

E) Does acculturation effect the meaning of death?

For this population, a positive relationship was found between acculturation and the ability to mention meaningful

religious symbols, beliefs, and convictions about death.

Contrary to earlier findings, the more acculturated the respondent was, the more likely he/she was able to elaborate on the multitude of meanings pertaining to death and the better able to see death in a positive light.

- F) Does acculturation affect the denial of death (one's participation or overcoming relationship toward death)?

Six of the respondents were able to participate in their relationship toward death. The remaining respondents were found to be overcoming in their relationship toward death. All the "personalizers" were participatory by definition (operational definition), except for one respondent who could not find any value or meaning in death and who was frightened of death.

This dissertation attempted to answer the question of how culture affects a person's relationship and meaning toward death. The fact that one's cultural heritage affects one's relationship to as well as the meaning of death was apparent in the literature reviewed in this study. The literature (and this author) had assumed that the cultural realities which a minority person brings to the acculturation process, would be depleted and eroded hence limiting that person's resources in handling the greatest unknown: death.

Before beginning this research project, the author shared the hypothesis of many authors: since acculturation presents itself as a negative process, it would impede one's ability to accept and find meaning in one's death. It was further speculated that the more a

person was acculturated into the "melting pot", the greater would be the tendency to deny the reality of death and to find death increasingly adversive and noxious.

The findings of this study contradict the above notions and assumptions and afford a new hypothesis from a minority perspective: acculturation plays a positive role in assisting the individual to accept, and find meaning in death.

Rather ironically, this author found also that those in the sample who were the most "successful," who had "achieved" the most socially, economically, and professionally, were the ones who could participate in death and find the most meaning in it. These "achievers" and "accomplishers" certainly had the most to lose from death. One would expect that they would have the most difficult time resigning themselves to these losses. Yet, this was not the case. Death was denied to a greater extent by those who were the least acculturated and who had the least to lose from death. This research raises questions as to why this is so. It also formulates other questions such as, Why was death either entirely denied or entirely accepted in this sample? This suggests that the acculturation process does not affect death in a gradient manner as was assumed. Furthermore, the fact that sex and age were the two variables that controlled for the acceptance of death suggests that the acculturation process might differently affect those who are young from those who are old. Does it affect males differently from females? These questions can only be answered as more extensive research is undertaken and a theory of acculturation is articulated.

APPENDIX

DEATH AND ACCULTURATION: A RURAL FILIPINO AGED POPULATION

INTERVIEW GUIDE

1. Identifying Information. Age; length of marriage; age of wife and children; occupation; are parents and/or siblings alive or deceased. Perception of life in America.

2. Proximity and Locus of Death. What changes have you noticed in your appearance in the past 5/10/15 years. Are there any advantages or disadvantages in this for you? What have you done to influence or modify this process? How about changes in the way your body functions? Are there any changes in the way your body functions over the past year? Has your energy level increase/decrease over the past year? How do you allow for this in your family, social and recreational activities? Has there been any change in eating habits? When was your last physical examination? Why then? Is this something you do regularly? Do you exercise in a different way from how you did before? In general, do you feel you are more sensitive to the variation in body functioning or to physical limitations than when you were a young man? Did any experience especially contribute to this? Are there any illnesses that particularly concern you because of your own history, family history, or the experiences of friends or what you have read or heard? Is death a long way off? How often do you think about it? Has living in America affected

how near or how far death is for you?

3. Concepts of Finite Life Time (if appropriate). How old were you when your parents died? How did you react? Some respondents have reported feeling more personally vulnerable. Was your reaction similar or different? (Maximum rapport required). When was the last time someone close to you died? How did you feel? Is knowing people who die a common experience? Young people do not often really believe that they are going to die. How do people learn this? Is it something you give much thought to? Some people tell us that in contrast to when they were younger, they now sometimes think about how much time they may have left. Has anything like this happened to you? Do you think that accepting the idea of death makes any difference in the way that a person thinks about life, and what he thinks is important? How would you say it has made a difference to you? What experiences have you had which tell you that you are getting older? In general, do you think of yourself as older or younger than others of the same age? What difference has being older or being treated as older mean to you? Has living in America affected your concept of time?

4. Meaning and Context of Death. What comes to your mind when you think of death? What does death mean to you? What is the most fearful thing about death? What is the most distasteful thing about death? How would life be without death? Would there be any benefit for a person if he recognized his own death: to what extent do you believe in a life after death? Regardless of your belief about life after death, what do you wish about it? If it were up to you, how would you like to have your body disposed of after you have died? Do you view death as a

serious problem? If so, how serious? Do you view death as an ultimate solution? If yes, how? Has living in America affected the meaning of death for you?

SCALE OF ETHNICITY (KASTENBAUM)

Name.....

Age.....

Years in U.S.A.....

Sex.....

Years of education.....

I. FAMILISM

- a. A respected family is a family, which puts the family needs before their own.
- b. A respected family is a family, which each individual's and family's needs are met together.
- c. A respected family is a family in which individual members put their needs before the family.

II. AGE HIERARCHY

- a. In a respected family, parents should have the most important role of authority and decision making.
- b. Parents, as well as children in the family, should share authority and decision making.
- c. Children should be given as much family decisions and authority as possible.

III. SEX ROLES

- a. The father of the family should have the last word in decision making.

- b. The parents should share the responsibility of the decision making in the family.
- c. The children should, whenever possible, make the decisions of the family.

IV. LANGUAGE

- a. I prefer to speak the Filipino language most of the time.
- b. I speak both the English and Filipino languages equally.
- c. I prefer speaking English to the Filipino language.

V. RELIGION

- a. I attend church and believe in the church doctrines.
- b. I seldom, if ever, attend church but believe in biblical truths.
- c. I never attend church and have no interest whatsoever in religious matters.

VI. FOOD

- a. I prefer ethnic or Filipino food.
- b. I prefer both Filipino food as well as American food.
- c. I prefer eating American food.

VII. FRIENDS AND ASSOCIATES

- a. I prefer friends and associates who are Filipino.
- b. I prefer friends of both Filipino and American Nationalities.
- c. I prefer to be in the company of Americans rather than Filipinos.

VIII. PLACE OF RESIDENCE

- a. I prefer to live in a rural area like Delano.
- b. I would like to live in a bigger City than Delano.
- c. I prefer to live in a large City i.e., Los Angeles or San Francisco.

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