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Learning Outcomes

- Examine attitudes toward death and dying

Death and Dying



Figure 1. A young man sits at the grave of his great-grandmother. (Photo courtesy of Sara Goldsmith/flickr)

Every society must deal with the problems that come with an aging population. For most of human history, the standard of living has been significantly lower than it is now. Humans struggled to survive with few amenities and very limited medical technology. The risk of death due to disease or accident was high in any life stage, and life expectancy was low. Because of

industrialization and more advanced medical technology people began to live longer and death became associated with old age.

For many teenagers and young adults, losing a grandparent or another older relative can be the first loss of a loved one they experience. It may be their first encounter with **grief**, a psychological, emotional, and social response to the feelings of loss that accompanies death or a similar event.

People tend to perceive death, their own and that of others, based on the values of their culture. While some may look upon death as the natural conclusion to a long, fruitful life, others may find the prospect of dying frightening to contemplate. People tend to have strong resistance to the idea of their own death, and strong emotional reactions of loss to the death of loved ones. Viewing death as a loss, as opposed to a natural or tranquil transition, is often considered normal in the United States.

Link to Learning

Sociologist Nancy Berns explains that in the United States and other western societies, people are encouraged to deal with grief or loss through closure. She contradicts this advice and explains that people do not necessarily need closure in order to “move on.” Watch this [Ted talk “Beyond Closure”](#) to learn more.

What may be surprising is how few studies were conducted on death and dying prior to the 1960s. Death and dying were fields that had received little attention until a psychologist named Elisabeth Kübler-Ross began observing people who were in the process of dying. As Kübler-Ross witnessed people’s transition toward death, she found some common threads in their experiences. She observed that the process had five distinct stages: denial, anger, bargaining, depression, and acceptance. She published her findings in a 1969 book called *On Death and Dying*. The book remains a classic on the topic today.

Kübler-Ross found that a person’s first reaction to the prospect of dying is *denial*: this is characterized by the person’s not wanting to believe he or she is dying, with common thoughts such as “I feel fine” or “This is not really happening to me.” The second stage is *anger*, when loss of life is seen as unfair and unjust. A person then resorts to the third stage, *bargaining*: trying to negotiate with a higher power to postpone the inevitable by reforming or changing the way he or she lives. The fourth stage, psychological *depression*, allows for resignation as the situation begins to seem hopeless. In the final stage, a person adjusts to the idea of death and reaches *acceptance*. At this point, the person can face death honestly, by regarding it as a natural and inevitable part of life and can make the most of their remaining time.

The work of Kübler-Ross was eye-opening when it was introduced. It opened up new avenues of exploration for sociologists, social workers, health practitioners, and therapists to study death and to help those who were facing death. Kübler-Ross's work is generally considered a major contribution to **thanatology**: the systematic study of death and dying. Over the years, her model has come under criticism for overgeneralizing the experience of grief and creating a false expectation that a person must pass through distinct stages in their grieving process.

Link to Learning

Watch this [SciShow video "The Truth About the Five Stages of Grief"](#) to learn more about some criticisms of the Kübler-Ross model and to consider other theories about dealing with grief.

Of special interest to thanatologists is the concept of "dying with dignity." Modern medicine includes advanced medical technology that may prolong life without a parallel improvement to the quality of life one may have. In some cases, people may not want to continue living when they are in constant pain and no longer enjoying life. Should patients have the right to choose to die with dignity? Dr. Jack Kevorkian was a staunch advocate for **physician-assisted suicide**: the voluntary or physician-assisted use of lethal medication provided by a medical doctor to end one's life. This right to have a doctor help a patient die with dignity is controversial. In the United States, Oregon was the first state to pass a law allowing physician-assisted suicides. In 1997, Oregon instituted the Death with Dignity Act, which required the presence of two physicians for a legal assisted suicide. This law was successfully challenged by U.S. Attorney General John Ashcroft in 2001, but the appeals process ultimately upheld the Oregon law. Subsequently, both Montana and Washington have passed similar laws.

watch It

After Brittany Maynard was diagnosed with terminal brain cancer, she decided to move to Oregon so that she could end her life with physician-assisted suicide. She became an advocate for death with dignity and was interviewed for this video before she passed away in November 2014.



[See this interactive in the course material.](#)

The controversy surrounding death with dignity laws is emblematic of the way our society tries to separate itself from death. Health institutions have built facilities to comfortably house those who are terminally ill. This is seen as a compassionate act, helping relieve the surviving family members of the burden of caring for the dying relative. But studies almost universally show that people prefer to die in their own homes (Lloyd, White, and Sutton 2011). Is it our social responsibility to care for elderly relatives up until their death? How do we balance the responsibility for caring for an elderly relative with our other responsibilities and obligations? As our society grows older, and as new medical technology can prolong life even further, the answers to these questions will develop and change.

The changing concept of **hospice** is an indicator of our society's changing view of death. Hospice is a type of healthcare that treats terminally ill people when "cure-oriented treatments" are no longer an option (Hospice Foundation of America 2012b). Hospice doctors, nurses, and therapists receive special training in the care of the dying. The focus is not on getting better or curing the illness, but on passing out of this life in comfort and peace. Hospice centers exist as a place where people can go to die in comfort, and increasingly, hospice services encourage at-home care so that someone has the comfort of dying in a familiar environment, surrounded by family (Hospice Foundation of America 2012a). While many of us would probably prefer to avoid thinking of the end of our lives, it may be possible to take comfort in the idea that when we do approach death in a hospice setting, it is in a familiar, relatively controlled place.

The Body after Death

In most cultures, after the last offices have been performed and before the onset of significant decay, relations or friends arrange for ritual disposition of the body, either by destruction, or by preservation, or in a secondary use. In the U.S., this frequently means either cremation or interment in a tomb.

There are various methods of destroying human remains, depending on religious or spiritual beliefs, and upon practical necessity. Cremation is a very old and quite common custom. For some people, the act of cremation exemplifies the belief of the Christian concept of "ashes to ashes". On the other hand, in India, cremation and disposal of the bones in the sacred river Ganges is common. Another method is sky burial, which involves placing the body of the deceased on high ground (a mountain) and leaving it for birds of prey to dispose of, as in Tibet. In some religious views, birds of prey are carriers of the soul to the heavens. Such practice may also have originated from pragmatic environmental issues, such as conditions in which the terrain (as in Tibet) is too stony or hard to dig, or in which there are few trees around to burn. As

the local religion of Buddhism, in the case of Tibet, believes that the body after death is only an empty shell, there are more practical ways than burial of disposing of a body, such as leaving it for animals to consume. In some fishing or marine communities, mourners may put the body into the water, in what is known as burial at sea. Several mountain villages have a tradition of hanging the coffin in woods.

Since ancient times, in some cultures efforts have been made to slow, or largely stop the body's decay processes before burial, as in mummification or embalming. This process may be done before, during or after a funeral ceremony. The Toraja people of Indonesia are known to mummify their deceased loved ones and keep them in their homes for weeks, months, and sometimes even years, before holding a funeral service. [Read more about the Toraja people's burial tradition.](#)

Watch this TED talk, "[The Corpses that Changed my Life](#)" by Caitlin Doughty, a mortician and activist, who strives to encourage Americans to overcome their phobia of death and to be more open and involved in dealing with their deceased loved ones.

Think It Over

- Test Elisabeth Kübler-Ross's five stages of grief. Think of someone or something you have lost. You might consider the loss of a relationship, possession, or aspect of your self-identity. For example, perhaps you dissolved a childhood friendship, sold your car, or got a bad haircut. For even a small loss, did you experience all five stages of grief? If so, how did the expression of each stage manifest? Did the process happen slowly or rapidly? Did the stages occur out of order? Did you reach acceptance? Try to recall the experience and analyze your own response to loss. Does your experience facilitate your empathizing with the elderly?

Try It

Who wrote the book *On Death and Dying*, outlining the five stages of grief?

☐ Erik Erikson

[See this interactive in the course material.](#)

Thanatology is the study of _____.

☐ biological aging

[See this interactive in the course material.](#)

glossary

grief: a psychological, emotional, and social response to the feelings of loss that accompanies death or a similar event
hospice: healthcare that treats terminally ill people by providing comfort during the dying process
physician-assisted suicide: the voluntary use of lethal medication provided by a medical doctor to end one's life
thanatology: the systematic study of death and dying

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