

Lindenwood University

Digital Commons@Lindenwood University

Theses

Theses & Dissertations

9-1997

Mother-Bereaved Women and Death Anxiety

Nicole DePriest Thompson

Follow this and additional works at: <https://digitalcommons.lindenwood.edu/theses>



Part of the [Social and Behavioral Sciences Commons](#)

MOTHER-BEREAVED WOMEN AND DEATH ANXIETY

Nicole DePriest Thompson, B.A.

A Thesis Presented to the Faculty of the Graduate School
Of Lindenwood University in Partial Fulfillment of the
Requirements for the Degree of
Master of Art
9/15/97

Committee

Dr. Pam Nickels, Associate Professor, Advisor

Dr. Edward Doerr, Adjunct Professor

Dr. Jesse B. Harris, Jr., Adjunct Professor

Dedication

To my mother, who believes in me
like no other person I know.

And to Maggie, in thanks for the
endless lunches, consolation, and laughs.

Finally, to Tim, for teaching me the
true meaning of courage and unconditional love.

Table of Contents

Abstract	2
Chapter I	3
Introduction	3
Statement of Purpose	4
Hypothesis	4
Chapter II	6
Review of Literature	6
Childhood Through the Twenties	7
Young Adulthood	8
Middle Age	10
Transition to Mutuality	11
Death of a Mother	12
Death Anxiety in Mother-Bereaved women	18
Conclusion	24
Chapter III	25
Methodology	25
Subjects	25
Instrument	28
Procedure	29
Variables	29

Chapter IV	30
Results	30
Chapter V	33
Discussion	33
Limitations	35
Recommendations	37
Appendix A	37
Vita Auctores	39
Appendix B	40
Survey	40
References	42

Listing of Tables

Table 1	Average ages of participants	26
Table 2	Ethnicity of participants	27
Table 3	Descriptive information for causes of death	28
Table 4	Descriptive statistics	31
Table 5	Results of t-test	33

Abstract

Death anxiety in mother-bereaved women versus women non mother-bereaved was investigated. Female graduate students and social service employees were taken from a non-random sample in the Midwest. There were 60 participants, 30 who were mother-bereaved and 30 who were non mother-bereaved. Participants were given the Templer Death Anxiety Scale and a demographic survey to complete. Dependent variables were the scores on the Templer Death Anxiety Scale. There was not a statistically significant difference in average death anxiety scores between mother-bereaved women and non mother-bereaved women. The ramifications of the results are discussed, and potential avenues for further research are suggested.

Chapter I

Introduction

There are many types of relationships that women experience in their lifetime. Friends, siblings, lovers, and spouses, all unique relationships and all important in a woman's life. However, potentially none of these relationships will ever be as dynamic, influential, or intimate as the one between a daughter and her mother (Edelman, 1994). A mother can be many things to her daughter, and the relationship often undergoes many changes. From training wheels to menopause, many women continually judge themselves in relation to their mother. Chodorow (1989) states that women are more likely than men to maintain certain portions of their primary relationship with their mother and that mothers and daughters engage throughout their lives in personal identification because the mother is the early caregiver and primary source of identification for girls. Where a son will break from his mother and seek identity with his father, the daughter continues to maintain the relationship with her mother. Because of the prolonged identification with their mothers, daughters perceived themselves as more like their mothers (Chodorow, 1989).

Although women move away from their mothers and form other relationships, the bond is still present. When this bond is present and a daughter loses her mother, whether as a child or an adult, she loses much more than just another person in her life. Edelman (1994, p. 182) states that "a motherless

woman is a walking paradox. At the same time that she emits qualities of personal strength, the loss of a mother frequently has damaged her self-esteem, eroded her self-confidence, and evaporated her secure base." Numerous studies have looked at the affects that a mother's death has on her daughter (Birtchnell, 1980, Douglas, 1991, Edelman, 1994, Finkelstein, 1988, & Zall, 1994). Depression, anxiety, alcoholism, and difficulty in relationships are among the many potentially lasting effects for a daughter who has lost her mother (Zall, 1994).

Statement of Purpose

The following study was designed to assess whether or not there are increased levels of death anxiety in women who have lost their mothers. Tomer and Eliason (1996) define death anxiety as a negative emotional reaction provoked by anticipation of a state in which the self does not exist. Templer (1976), who designed the Death Anxiety Scale used in this study, states that death anxiety is unrelated to physical health or somatic integrity; rather it is a psychological state. Women typically score higher on death anxiety scales than men do, and if the loss of one's mother is also considered as a determining factor in death anxiety, it seems to be probable that women who are mother-bereaved will have higher death anxiety than women whose mothers are still living.

Hypothesis

The null hypothesis is that there is no significant mean difference in scores on the Templer Death Anxiety scale (TDAS) between mother-bereaved women and women whose mothers are living. The alternate hypothesis is that there is a significant mean difference in scores on the Templer Death Anxiety Scale with mother-bereaved women and women whose mothers are living.

Chapter II

Review of Literature

The relationship between mother and daughter has been a focus of study in psychology and other disciplines of study for many years. As early as Freud, the mother and daughter relationship was a major focus in psychoanalysis.

Psychoanalytic theorists today tend to emphasize daughters' unconscious internalization of maternal values and behaviors, as well as the meaning of those values and behaviors (Boyd, 1989). Conversely, social learning theorists, disregarding the idea of unconscious identification, advocate principals of modeling. They suggest that girls learn to mother and be like their mothers by consistently and positively being reinforced when they imitate their mothers' behaviors (Boyd, 1989).

Chodorow (1989) stated that the mother daughter relationship is the foundation for female development. According to her, the infant's early relationship with the caretaker, who in American culture is usually a woman, is initially important. She went on to state that girls do not separate from their mother, but remain attached. It is through relation to the mother and this attachment that women develop a self.

Gilligan (1982) stated that women, through identifying with their mothers, learn to value the preservation of relationships and to define them with concepts in the context of their relationships to others. A woman's entire sense of being

becomes organized around her valuing her affiliations and mutual relationships.

Childhood Through the Twenties

The mother-daughter relationship is thought to have an enormous impact on women's lives, especially in the developmental years. From skinned knees to first dates, the mother is often the one that is there for it all. What a mother does with her daughter in her childhood and adolescence is thought to have a great impact on her as an adult. The mother is the primary female image a daughter internalizes and refers to for comparison throughout her life. A child's natural tendency is to identify with her same sex parent, and to have that hidden but available gendered sense of self gives them security in development (Edelman, 1994).

Monck (1991) studied 142 girls between the ages of 15 and 20 to look at the nature of their confiding relationships. Mothers were named most often as the preferred confidant over fathers, friends, and boyfriends in four problem areas: money worries, police trouble, unwanted pregnancy, and bullying. Of all girls surveyed, 31% confided fully in mothers. Having minor arguments was not related to how fully the daughters confided in their mothers. In addition, only 35% of fathers were described as meeting their daughters' emotional needs, compared to 72% of mothers. In preferring a parent, 59% preferred their mother.

Several other aspects of the mother-daughter relationship have also been

studied. Lobdell and Perlman (1986) researched the transmission of loneliness in 130 parent-daughter relationships. Loneliness scores between mothers and daughters were positively correlated. Townsend and Worobey (1987) note that even when stress occurs the mother-daughter relationship is still strong. They studied the perceptions of the mother-daughter relationship when the daughter was a pregnant teenager. The ratings of their relationship done by the mothers and daughters were overwhelmingly positive, in contrast to the perceived strained relationships which teenage pregnancy is thought to cause.

Mothers even influence their daughter's career choices. Boyd (1989) found that in both Caucasian and African American daughters, a mother's own work behavior was the best predictor of a daughter's work orientation. Daughters also planned to work earlier in their own children's lives if their own mothers worked.

Young Adulthood

As daughters grow up, the mother-daughter relationship changes on many different levels, but the relationship usually still remains an important one. The continuation of the mother daughter relationship through late adolescence allows the daughter to become more assertive in other relationships as well as in the mother-daughter relationship (Goldberg, 1994). This relationship between mother and daughter also allows the daughter to become independent. Ruebush (1994)

contended that the mother's ability to relate to her daughter empathetically enhances and facilitates a healthy transition to the adult world. Miller (1995) stated that the role modeling and identification that occurs between a girl and her mother may have implications for the timing of the first pregnancy, adjusting to parenthood, transmission of parenting styles and mid-life women's perceptions of their own health and well being. The nature of this relationship may prove to be an important predictor for later life.

As mentioned above, pregnancy is a transition point in a daughter's life where everything is changing, including her relationship with her mother. Research has suggested in the past that a daughter's first pregnancy is a time where daughters become closer to their mothers and perhaps reconcile any differences (Walzer, 1995). Fisher (1986) asserted that a daughter's marriage and her first pregnancy causes a reordering of the mother-daughter relationship, moving it towards greater didactic interaction. Data demonstrated that marriage and motherhood seemed to increase the daughter's desire for closeness and continuity with her mother, despite even geographical distances. Cohler (1988) concluded, stating that young adult women characteristically look to their own mothers' as a source of support and assistance, especially with children of their own. This is not to say that the mother-daughter relationship is without strains or that all mother-daughter relationships move towards closeness. Walzer (1995) studied pregnant women and their mothers, and although the notion is that

mothers and daughters get closer, results from the study did not coincide with that idea.

Middle Age

For middle age women and their mothers, the relationship is also one of great importance, even though it is continually changing. Menopause and aging leave daughters still looking to their mother for answers to questions and support. Cohler (1988) stated that with the advent of midlife, as daughters increasingly come to share the perceptions of their own mothers regarding issues of finitude and the need to preserve energy and time for grieving and resolving the past, the expectations of daughters become increasingly congruent with those of their mother. As the daughter's experiences of time, age, and place in her life changes, she begins to share an outlook increasingly similar to her own mother's. Miller (1995) surmised that studies of mother-daughter relationships over time tend to identify global trends toward improvement or deterioration of the relationship during specific turning points in a woman's life. For example, a young woman's transition to parenthood may be experienced differently in a relationship characterized by mutual trust than in one that has been characterized by alienation, yet both women may wish for a closer relationship with their mothers during that time.

Transition to Mutuality

As daughters mature and the mother's role becomes less that of a mother and more of a peer, the relationship takes on a dimension of mutuality in which both mother and daughter support each other. Cohler (1988) hypothesized that for middle age women and their mothers, the two generations continue to be involved in a mutually supportive and caring relationship that has important implications for the family as a whole and the morale of each generation. Goldberg (1994) concurred, citing the importance of mutual sharing and mutual empowerment in the mother-daughter relationship. Through mutuality, each takes care of the other as well as the relationship, and the daughter develops the ability to relate to the needs and feelings of others. Both mother and daughter develop a sense of competence through mutuality, which plays a role in the development of self-esteem and social adjustment in young women. Boyd (1989) found that mutual mothering was the most common pattern found in adult mother-daughter relationships. There is a sense of mutual responsibility and protectiveness, in which mother and daughter shift between mothering and being mothered.

Rich (1990) noted the importance of mutuality in the mother-daughter relationship among high school girls. The girls described relationships in which their mothers were not only there for them but in which they were there for their mothers. Jordan (1991) studied adolescent women attending college and the importance of mutuality in the mother-daughter dyad. With mutuality being

described as offering each other reciprocity in support and sharing, the mutuality of these relationships appeared to be a predictor of success in other relationships. Goldberg (1994) also studied mutuality in the mother-daughter relationship and found that mutuality and positive self-esteem were positively correlated, indicating that a daughter who perceived a high level of mutuality in her relationship with her mother would also have a high level of self-esteem. Goldberg (1994) also found that mutuality in the mother-daughter relationship was positively correlated with social adjustment, coping, and functioning. Accordingly, a daughter with a high level of coping skills and functioning, as well as social adjustment, has a high level of mutuality in her relationship with her mother.

Death of a Mother

The importance of a mother spans throughout the lifetime of her daughter. Infancy, menstruation, dating, marriage, childbirth, and menopause are only some of the milestones in a female's life that are best shared with another female, for whom many women prefer their mother. Edelman (1994) contends that a woman, as she matures, often sees herself becoming her mother, and bases her life decisions on what her mother has taught or not taught her. The impact of a mother on her daughter is significant. Due to the tendency of an offspring to outlive their parents, it is probable that many women will have to face the death of

their mother at some point in their life. For many women, a mother's death is something they grieve for the rest of their life, especially if a mother has died prematurely. During the last three decades there has been a great deal of interest and study in the effects of early bereavement of a parent (Birtchnell, 1980, Denes-Raj & Ehrlichman, 1990, Edelman, 1994, Meshot & Leitner, 1995, Zall, 1994). Many attempts have been made to assess the possible influences of premature parental death on personality development, social adjustment and mental health. A view commonly held is that early bereavement itself is a serious impediment to the social-emotional development of the child and may lead to a multitude of pathological behaviors later in life (Denes-Raj & Ehrlichman, 1991).

Silverman and Worden (1992) performed an in depth study of children's reaction following the death of a parent. They found that most children talk of feeling sad or confused on hearing the news of the death, even if the death was expected, and being unsure of how to respond. If the death was sudden, the children stated that they felt shocked or stunned. They also found that many children devote considerable energy to staying connected with their deceased parents in some way. This may be done through dreams, keeping certain items of the parent, or trying to become like the parent. The majority of children claimed that they resembled their deceased parent over the living parent. Of even more interest were the effects that Silverman and Worden (1992) noted that are present when a mother dies. Following the death of a mother, the children were more

likely to have problems that included crying, insomnia, learning difficulties, and health problems that reflected the somatization of the child's feelings. Not only are there behavioral problems that occur after a mother dies, there is also a great change in the lifestyle of that child. Children whose mother had died were observed to have the greatest number of lifestyle changes, which caused the largest discontinuity in the lives of children. When the mother dies and the father becomes the primary caretaker, children stated that they were less likely to talk to the father about their feelings and dreams and that they experienced many changes in their daily routines. Silverman and Worden (1992) noted the increased risk in developing behavioral problems which they attributed to the surviving parent's reduced ability to provide continuity and stability in the child's life after the death of their mother.

Weiss (1988) studied the affect a loss has based on the nature of the deceased's attachment with the living. Weiss found that the loss of relationships that provide security causes the most distress, especially the loss of one's parents. The reason for this is that the relationship with the parent and child is security fostering, is displayed under conditions of threat and persistent over time, and the inability to achieve reassuring contact with that person under conditions of threat gives rise to distress. It was noted that children maintain persistent childlike attachments to their parents which provides a continued contact with parents whose proximity provides security, especially their mother.

Moss, Moss, Rubinstein, and Resch (1993) studied daughters' responses to an elderly mother's death. They asserted that when a daughter loses a mother, there is not only the loss of the mother of the past, and the mother of the present, but a fulfillment of expectations about the future relationship with her mother. After her mother's death, the daughter loses the possibility of future interactions with her mother and the assumption that the world will continue as it is. They also noted that the parental bond is maintained after bereavement. This bond may be maintained by shoring memories, holding onto possessions, inner representations of the deceased, and taking on the aspects of the deceased. Some research indicates that the parental bond continues throughout the life span, and children whose parents are deceased continue to see their parents as salient and influential. Out of 103 mother bereaved women that were studied by Moss et al., 66% still needed to cry for their mother, 47% still got upset when they thought of their mother, and 53% were very lonely for their mother. In addition, 47% were preoccupied by thoughts of their mother, 55% stated that their own death had become more real, and 45% stated that their future seemed shorter.

Zall (1994), in a study that explored the effects of early maternal bereavement on future functioning, noted that there are few life events that are more traumatizing for a female child than a mother's death. How the child chooses to deal with this bereavement will affect her growth and development throughout all her life stages. While as an adult adaptations may be negotiated

successfully in regards to bereavement, it is a difficult process that lends an added potential for psychological problems. These adaptations are especially difficult for women who are becoming mothers themselves.

Zall (1994) discovered that many mother-bereaved women whose mothers died in childhood and adolescence and who were mothers themselves, showed that they had a difficult time regaining the developmental balance once they had children. Mother-bereaved women also showed symptoms of depression and anxiety. Anxiety was particularly prevalent. When asked how their mother's death had affected them in particular, anxiety about the fragility of life was a re-occurring theme. It was found that many of the mother-bereaved women lived with the fear that they themselves would die, leaving their children to face what they had. These women in Zall's (1994) study saw parenting as motivated by beliefs such as cherishing time, the fragility of life, the possibility that death would re-occur, and preparing their children for separation.

Edelman (1994) concurred that as a milestone event in a woman's life, childbirth, particularly with a first child, commonly triggers a new cycle of mourning for the lost mother. The visions of gloom and death that arise in this mourning have little to do with reality; instead, they are the results of the woman's perceived vulnerability. This is connected to her future health and potential because when a daughter loses a mother she learns early on that human relations are temporary.

Douglas (1991) looked at the long-term impact of parental death on mid-life adults. He believed that since parents are the center of existence in the early years and for many their most enduring relationship, crucial to learned behavior in later relationships, the death of a parent may be one of the most critical events in adult development. Douglas went on to state that the loss of a parent lends to a frequent pattern of rupture in love relationships, awakens feelings of abandonment, dependency and anger. In the study, most people reported that it had changed their outlook on life and issues of mortality. Evidence was found to support a significant relationship between the early death of the mother and severe depression and alcoholism in adulthood, along with an increased risk of physical and mental illness.

In a similar study, Finkelstein (1988) found evidence to support a link between early parent death and later emotional disturbance, variations in sex role behavior, marital difficulties, delinquency and criminal activities, external locus of control, introversion, and dependency. The continued absence of the deceased parent was also felt to lead to negative implications on personality development. These traits were primarily found in people for whom the death was perceived as a response to one's value as a person, leading to severe self-esteem deficits.

Conversely, there have been several studies that do not show any relation to mother-bereaved women and psychological problems. Parker and Manicavasagar (1986), in studying childhood bereavement of a parent and adult

depression, did not find any link between post-bereavement depression and adult depression. Birtchnell (1980) studied patients in a hospital and outpatient setting and found no difference between mother-bereaved women and the control group in a classification of unstable and vulnerable by psychiatrists. In the outpatient setting, mother-bereaved women actually suffered less anxiety than the control group. Birtchnell concluded that there was not enough evidence to support the fact that the early death of a mother has any direct influence on development of mental illness in later life.

Death Anxiety in Mother-Bereaved Women

As shown above, there are several effects that a parental death has on a child, especially if the deceased is the mother. One consequence that a mother's death has for the bereaved is a heightened anxiety concerning death. Denes-Raj and Ehrlichman (1991) argued that while the premature death of a parent has implications beyond the normal phases of grief, it also has an impact on the concept of the death of oneself and plays a role in the realization of personal mortality. Meshot and Leitner (1995) stated that for those who have experienced the death of a loved one, especially a parent, death becomes a daily process that is integrated into daily core constructs. Thorson and Powell (1988) stated that death anxiety is a complex construct that interrelates in different ways that can not be understood by demographics and personality traits alone. It does seem that death

anxiety is less among those with self-esteem and a sense of meaning and purpose in life. Towse (1986) stated:

We are thrown into the world. We find ourselves here. Our whole existence is contingent on other things: our parents; our genetic potential; our environment; and our time in history. We are here for a moment and at any moment we could cease to exist. We must deal with the fact of our existence, in fact the certainty of our death. (p. 150.)

This uncertainty about one's own death has led to various avenues of research. Several researchers have studied and offered opinions specifically on the effect that the death of a parent has on a child. One distinctive area of research has focused on the impact that their parent's death has on their concept of their own mortality. Douglas (1991) stated that when one's parent dies nobody stands between them and the grave. After the death of a parent not only is there no person there to protect the child, the child is one step closer to their own mortality. Moss et al. (1993) established that parental death may lead to a transition in a person's sense of self. A central theme that emerges from parental death is the perception of personal time and the timing of one's own death.

As people approach mid-life, not only does the risk grow that their parent will or has died, but they are also facing a number of issues that come with mid-life. Richardson and Sands (1987) claimed:

According to a number of developmental theorists death is a salient issue

for mid-life adults. Failing health, death of parents, loss of close friends and changes in physical appearance all contribute to a heightened awareness of death. During this period individuals begin to view their lives as time left to live, instead of time since birth as they begin to reassess jobs, friendships, marriages, and relationships with children. (p. 327).

Richardson and Sand's study focused on women in their mid-life to measure different attitudes about death. They found several things that lead to greater death anxiety in women. It was found that those struggling with identity concerns seemed more concerned with death anxiety, as well as for those whom nurturing or interpersonal giving was very important. People who lacked intimacy in their lives focused on not accomplishing everything and thus had higher death anxiety, in accordance with those who were in search of meaning and struggling to resolve issues. In their study of death anxiety, White and Handal (1991) concluded that those with higher death anxiety were typically more distressed and less satisfied with life.

Rasmussen and Johnson (1994) discovered that individuals who have greater levels of life satisfaction and sense of meaning in their lives are more likely to have lower levels of death anxiety. Tomer and Eliason (1996) concluded that death experienced as meaningless may result in elevated death anxiety. The subjects in the study who tended to describe death as purposeless, full of suffering

and unintelligible were more likely to indicate death anxiety.

The studies on death anxiety also typically show that women harbor more death anxiety than men, especially concerning their own death. Dattel and Neimeyer (1990) in their study maintained that women exhibited greater death anxiety even after the study statistically controlled for effect of self-disclosure and social desirability, two factors that are noted to be attributed as a sex difference in women. Thorson and Powell (1988) noted that death anxiety had a low level, but significant, relationship to a higher amount of death concern among women. White and Handal (1991) revealed in their study that females scored significantly higher on death anxiety scales than males. Rasmussen and Johnson (1994) also found that females typically have a higher level of death anxiety than males.

Research has also focused specifically on the levels of death anxiety in women who have lost their mothers. Meshot and Leitner (1995) studied death anxiety in women who had lost their mothers, finding that women who had lost their mothers had lower death threat scores. Denes-Raj and Ehrlichman (1991) claimed that death anxiety did not differ between children who had lost their parents and children whose parents were still living. However, in looking at the majority of studies regarding women and the relationship with their mothers, the effect that a mother's death has on her children, and women and death anxiety, there is a tendency towards increased death anxiety in mother bereaved women.

Hope Edelman (1994), in her book Motherless Daughters, investigates

specifically the effects that a mother's death has on her daughter. One of the major areas of concentration in her study was the level of death anxiety experienced by mother bereaved women. Edelman describes motherless daughters as having an intense and disproportionate fear of losing a loved one, and because they have a psychological bond with their mothers and identify with their bodies, they also may develop an excessive concern for their own safety and health. She goes on to describe this concern as a secret that motherless daughters share, along with the fear that they will die young at specifically the age that their mothers died. As some motherless daughters stated in Edelman's (1994) interviews:

This is mortality Math 101, in which a mother's age at death is a fixed value, and the only distance worth measuring is one between here and there. We fixate on mental additions and subtractions, anxious about approaching the dreaded age, because what if we too die.... "The magic number" as one motherless woman called it. "Oh, the invisible line in the sand" another woman said. "I don't know if any other women have said this, but I am afraid I won't live longer than my mother." (p. 222)

Edelman (1994) also discussed how a mother's illness ending in death affects the bereaved daughter. Since a daughter typically identifies her body with her mother's, to see her mother die can create a basic fear that her mother's body failed and so will hers. Edelman stated that a mother's death is as close as a

daughter can get to experiencing her own:

In the mirror I find my mother's hips and hands and eyes. When I speak, I hear her voice, occasionally shaping itself around the same sentences I swore I'd never utter as an adult. And from there it seems only a short journey to the afternoon in an examining room when a doctor accidentally touches my armpit, feels a swollen lymph node and asks, with sudden concern "What's this?" It can happen. I know. I am the daughter of a woman whose cancer started growing in her thirties, a mother of three who died absurdly young. I carry in my left breast- the breast my mother lost, a breast that is nearly identical to hers in shape and size- a small lump that has been palpated, mammogrammed, ultrasounded, and pronounced benign three different times. And I'll have it screened again this year. I can never be too sure. (p. 233)

With this statement Edelman showed the core of concern that mother-bereaved women deal with daily. In a survey given by Edelman to 154 mother-bereaved women, more than three quarters of the motherless women interviewed stated that they were afraid that they would repeat their mother's fates, even when the cause of death had no proven relationship to heredity or genes.

Mother-bereaved women who have children may also fear for their mortality, and the effect that their death may have on their children. Zall (1994) noted that mother bereaved women carried the extra burdens of worrying about

when they would die, protecting their children from harm and pushing to be perfect parents so their children would not suffer as they had. Edelman (1994) concluded by noting that the thought of dying young and leaving a child without a parent may sometimes be a deterrent for having children.

Conclusion

The abundance of research indicates the seriousness with which a mother's death may affect her daughter. However, even with the wide variety of research on the effects that a mother's death has on her child, there does not seem to be a particular trend among researchers as to what, if any, effects occur consistently in women. While grief is an issue that all counselors need to be familiar with, it is obvious that grief for a mother holds special circumstances and long lasting effects. There is a need for counselors to be aware of special grieving issues that surround mother-bereaved daughters. Thus, the current study was developed to assess whether death anxiety is a residual effect of a mother's death on her daughter. This will enable counselors to know if death anxiety may be specific to mother-bereaved women, therefore grief counselors will be better able to understand and be effective in therapy with mother-bereaved women.

Chapter III

Methodology

Women enrolled in various classes at several Midwestern universities and women employed in various social service organizations in the Midwest were asked if they would be willing to complete the Templer Death Anxiety Scale and demographic information (see Appendix B). The participants were informed that the above was being used for the purpose of comparing death anxiety between mother-bereaved women and women whose mothers were living. Most of the women whose mothers were deceased were specifically recruited for the study. Potential subjects were informed that participation was strictly voluntary and all information was confidential.

Subjects

The participants in the study were women between the ages of 25 and 65. There were 60 women who participated in the study, 30 who were mother-bereaved and 30 who were non mother-bereaved. The average age of the women participating in the study was 40.22. The average age of the women who were mother-bereaved was 44.23; the average age of the women non mother-bereaved was 36.2. The average age that the mother-bereaved women were at the time of their mother's death was 36.03. The average ages of the women in the study can be seen in Table 1.

Table 1

Average ages of participants

Average Ages		
Average age of sample (n=60)=40.22		
Non mother-bereaved Women (n=30)	Mother-bereaved women (n=30)	Women at year of mothers death (n=30)
36.2	44.23	36.03

Of the sixty women, 80% (48) were Caucasian, 18.3% (11) were African-American, and 1.7% (1) were Native American. Of the mother-bereaved women, 43.3% (26) were Caucasian, 5% (3) were African American and 1.7% (1) were Native American. Of the women whose mothers were still living, 36.7% (22) were Caucasian and 1.3% (8) were African American. There were no participants in the study who were of Hispanic or Asian origin. This demographic information can be seen in Table 2.

Table 2

Ethnicity of participants

Ethnicity of participants		
(n=60)		
Caucasian (48) 60%	African American (11) 18.3%	Native American (1) 1.7%
Ethnicity of mother-bereaved women		
(n=30)		
Caucasian (26) 43.3%	African American (3) 5%	Native American (1) 1.7%
Ethnicity of non mother-bereaved women		
(n=30)		
Caucasian (22) 36.7%	African American (8) 1.3%	Native American (0) 0%

Table 3 shows the percentages for causes of death in deceased mothers. Of the 30 deceased mothers, 26.7% (8) died of natural causes, 63.3% (19) died of illness, 6.7% (2) died of accident or injury, and 3.3% (1) died of other causes.

Table 3

Descriptive information for causes of death

Natural causes	Illness	Accident/Injury	Other
26.7% (8)	63.3% (19)	6.7% (2)	3.3% (1)

Instrument

The Templer Death Anxiety Scale (TDAS) was given to the women who participated in the study. The TDAS is a 15 item, true-false questionnaire that assess negative reactions to situations concerning death and dying. Items are in the form of short statements, such as "I am very much afraid to die." The mean score for non-clinical populations usually ranges from 6.5 to 7, with one point scored for each item endorsed in the key direction (Templer, 1970). The total points for each item indicating death anxiety are then added to give a final score. The TDAS has shown in previous administrations a Kuder-Richardson-20 reliability estimate coefficient of .76. Templer (1970) has reported a test-retest reliability score of .83. Validity of the test was investigated by analyzing death anxiety scores using the TDAS with psychiatric patients who had demonstrated a high death anxiety and comparing it with control patients. This study yielded a t

of .579, which was significant at the .01 level. The TDAS was also validated by using a product-moment correlation between the TDAS and Boyar's Fear of Dying Scale, which yielded a coefficient of .41 ($p < .01$).

Procedure

The participants were given a demographic questionnaire to complete attached to the TDAS. The information on the demographic questionnaire included the participant's age, ethnic background, and whether or not the participant's mother was still alive. If the participant's mother was deceased, the participant was asked to give their age when their mother died, and the cause of their mother's death. The subjects were told that they would be participating in a voluntary study assessing death anxiety between women who were mother-bereaved and women who were not. The test and demographic questionnaire were then passed to the participants. They were given as much time as needed to complete the information before returning it to the researcher.

Variables

The dependent variable was the score on the TDAS. The independent variable was the status of one's mother, living or deceased. The TDAS score is an interval level of measurement, while the life status of one's mother is a nominal level of measurement.

Chapter IV

Results

Because the purpose of this study was to compare the mean level of death anxiety between mother-bereaved women and women whose mothers were still living, a t-test was used to establish whether or not there was a significant difference between the means. The null hypothesis was that there is no significant mean difference in scores on the TDAS between mother-bereaved women and women whose mothers were still living. The alternate hypothesis is that there is a significant mean difference in scores on the TDAS between mother-bereaved women and women whose mothers were still living.

The overall mean score for the TDAS ($n=60$) was 6.133, with a standard deviation of 2.507 and a standard error of measurement of .324. The skeweness was .3909 and kurtosis was .6584. The range was 12.000 and the median and the mode were both 6.000. There were 30 women in the study who were mother-bereaved and 30 women whose mothers were still living. The mean score for the mother-bereaved women on the TDAS was 6.333 with a standard deviation was 2.905 and a standard error of measurement of .530. The skeweness was .4406, and kurtosis was .2425. The range was 12.000 and the median and mode were both 6.000. The mean score for the women whose mothers were still living was 5.933, with a standard deviation of 2.067 and a standard error of measurement of .377. The skeweness was -.0553 and kurtosis was .6182. The range was 10.000,

the median 5.000, and the mode was 8.000. Table 4 shows a comparison of the three sets of descriptive statistics.

Table 4

Descriptive statistics

	All participants (n=60)	Mother-bereaved women (n=30)	Non mother-bereaved women (n=30)
Mean score on TDAS	6.133	6.333	5.933
Standard deviation	2.507	2.905	2.067
Std. Error of measurement	.324	.530	.377
Skewness	.3909	.4406	-.0553
Kurtosis	.6584	.2425	.6182
Range	12.000	12.000	10.000
Median	6.000	6.000	5.000
Mode	6.000	6.000	8.000

Using the whole sample (n=60) of women, 75% (45) of the participants

fell within ± 1 standard deviation of the mean, 91.67% (55) fell within ± 2 standard deviations of the mean, and 100% (60) fell within ± 3 standard deviations of the mean. The descriptive measures suggest deviations from the standard normal distributions, but since the t-test is a robust statistic, minor deviations are consistent with the model.

In performing the t-test, Levene's test was performed, resulting in a p-value of .099, which indicates that the variances of the mother-bereaved and non mother-bereaved samples were homogeneous. For the t-test, with an alpha level of .05 and 58 degrees of freedom the level of significance for the two-tailed test is ± 2.009 . The equal t value of $-.61$ (as seen in table 5) indicates that there is no significant mean difference in death anxiety scores between mother-bereaved women and women whose mothers are still living, $t = -.61, p > .05$. Therefore, the null hypothesis was accepted.

Table 5

Results of t-test

Mean, standard deviations, df, and t for mother and
non mother-bereaved women

Group	n	Mean	SD	df	t
Mother-bereaved	30	6.333	2.905	58	-.61
Non mother-bereaved	30	5.933	2.067		

Chapter V

Discussion

The relationship between a mother and her daughter is thought to possess many qualities that make it unique. Several psychological theories, including psychoanalysis (Boyd, 1989) and social learning theory (Chodorow, 1989), both consider the relationship between a mother and daughter to be of primary importance. Studies show that teenage girls primarily confide in their mother (Monck, 1991) and that even in times of stress, such as teenage pregnancy, the relationship remains positive (Townsend & Worobey, 1987).

The mother-daughter relationship has also been shown to affect many life decisions for the daughter. Career choices, timing of pregnancy, parenthood, and mid-life decisions have all been researched and shown to be affected by the mother-daughter relationship. And as the daughter matures, the relationship takes on an aspect of mutuality. Mutual mothering and support become the primary aspect of the relationship as the daughter matures (Boyd, 1989). Goldberg (1994) noted that coping, functioning, and social adjustment was positively correlated with mutuality in the mother-daughter relationship,

With the number of studies showing the dynamics of the mother-daughter relationship, there is also a fair amount of studies that show the impact that a mother's death has on her daughter. A shared view is that early bereavement alone is a hindrance to the development of a child and can lead to pathological behaviors (Denes-Raj & Ehrlichman, 1991). Moss et al. (1993) discovered that when a daughter loses a mother she loses the possibility of future interactions and her assumption that the world will continue as it is. Mother-bereaved women typically show signs of depression and anxiety, and have a difficult time maintaining their developmental balance when they have children. The death of a mother also can affect relationships, and cause feelings of dependency, anger, abandonment, anxiety, and introversion (Finkelstein, 1988, Douglas, 1991).

Many women also experience greater death anxiety than men. Dattel and Neimeyer (1990), Thorson and Powell (1988), White and Handal (1991), and

Rasmussen and Johnson (1994) all discovered that women exhibited greater death anxiety than men. However, studies testing death anxiety in women who have lost their mothers has been less frequent and more conflicting. Meshot and Leitner (1995) and Denes-Raj and Ehrlichman (1991) both discovered that there was no difference in death anxiety between women whose mothers were deceased and women whose mothers were living. Conversely, Edelman (1994) discussed extensively in her research the high level of death anxiety that the death of a mother has on her daughter, stating that women do not see themselves living past the death of their mother. With the lack of research on mother-bereaved women and death anxiety and the discrepancy in the results it was determined that death anxiety and mother-bereaved women was an avenue compelling further research.

Although most of the data supports the fact that women whose mothers have died would have greater death anxiety, the current study revealed that there was no significant mean difference in death anxiety scores between mother bereaved women and women whose mothers were still living. While it is possible that there is no statistically significant difference in death anxiety between these two groups, there are several factors that could have possibly affected the results of this study.

Limitations

One possible weakness of the study performed was the instrument used.

Lester and Templer (1993) state that the TDAS has several limitations, which include that it only assesses the death anxiety that one is aware of and willing to acknowledge and that true false statements do not assess extremes or the extent of one's feelings. Concurring, Thorson and Powell (1988) state that the true-false format gives less sensibility to the weight, strength, or degree of concern than a likert-type scale would give. Direct self-report measures may not be the most appropriate measures to assess death anxiety, due to the fact that there may be several defensive mechanisms that may be masking one's death anxiety.

Sampling error could also be a factor in the lack of statistical significance. The sample size was small ($n=60$) with the concentration of subjects being graduate counseling students and working in the social service field. This could account for lower death anxiety, due to the fact that this population deals with death and emotions on a routine basis. The study also consisted of primarily Caucasian women. With a larger and more varied sample size, the results may prove to be more reflective of the true population. The sample was also a non-random sample and therefore is possibly not a true representation of the general population.

The average age that the mother-bereaved women were at the time of their mothers death was 36.03. This appears to be typically older than most of the mother-bereaved women researched in the literature. The average age of the mother-bereaved woman was 44.23, so the majority of women had surpassed the

age that their mother was at the time of death. According to research, the majority of women experience death anxiety while waiting to reach the age of their mothers death. The average age difference between mother-bereaved women and women whose mothers were still living was 8.03, with the mother-bereaved women being on the average older, perhaps causing a difference in views on death anxiety. To account for these differences, the sample should have consisted of women who were less varied in age range. There should also be less variation in the age that mother-bereaved women were when their mothers died.

Several life status issues were not considered with the subjects. The subjects religious beliefs, present health of oneself and health of family or significant others, and any other recent deaths was not controlled for or examined in the study.

Another consideration that was not controlled for was whether or not mother-bereaved women were mothers themselves. Literature has shown that this can be an important factor in whether or not mother-bereaved women experience death anxiety. Further studies in this area should control for this factor.

Recommendations

Future research along this line may want to control for the above mentioned weaknesses. A possible focus of study might want to include death anxiety in existence with other affects that a mother's death may have, such as

alcoholism, depression, or difficulty in relationships. Death anxiety could also be assessed in mother-bereaved women in various life stages, to determine whether or not one's developmental life stage is a factor in the amount of death anxiety. If it is found that mother-bereaved women have elevated death anxiety levels, research should focus on techniques to assist women in dealing and overcoming elevated death anxiety.

Appendix A

Vita Auctores

The author was raised in Wentzville, Missouri, where she attended St. Patricks grade school and Wentzville junior and senior high school. After graduating from high school, she attended the University of Missouri at Columbia where she received her Bachelor of Arts in Psychology in May of 1993. She then moved to St. Louis, Missouri, where she began working in the social services field and began attending Lindenwood University in 1994. Nicole is completing a Master of Arts degree in Professional Counseling which will be conferred during September, 1997.

Appendix B
Survey

Please take a few minutes to fill out the following information and the Death Anxiety Scale on the next page. Your participation is greatly appreciated.

Age: _____

Ethnic group (circle one): Caucasian African American Asian

Native American Other: _____

Your mother's current status (circle one): living deceased

*If your mother is living, please turn to the next page and complete the questionnaires.

*If your mother is deceased, please answer the following questions before completing the questionnaire.

Age **you** were when your mother died: _____

The reason for your mothers death was (circle one):

natural causes illness accident/injury other: _____

*The Templer Death Anxiety Scale**Circle one*

- | | | |
|---|---|---|
| 1. I am very much afraid to die. | T | F |
| 2. The thought of death seldom enters my mind. | T | F |
| 3. It doesn't make me nervous when people talk about death. | T | F |
| 4. I dread to think about having an operation. | T | F |
| 5. I am not at all afraid to die. | T | F |
| 6. I am not particularly afraid of getting cancer. | T | F |
| 7. The thought of death never bothers me. | T | F |
| 8. I am often distressed by the way time flies so very rapidly. | T | F |
| 9. I fear dying a painful death. | T | F |
| 10. The subject of life after death troubles me greatly. | T | F |
| 11. I am really scared of having a heart attack. | T | F |
| 12. I often think about how short life really is. | T | F |
| 13. I shudder when I hear people talking about a World War III. | T | F |
| 14. The sight of a dead body is horrifying to me. | T | F |
| 15. I feel that the future holds nothing for me to fear. | T | F |

Thank you for your time!!

Reference: Templer, D.I. (1970). The construction and validation of a death anxiety scale. *The Journal of General Psychology*, 82, 165-177.

References

- Birtchnell, J. (1980). Women whose mother's died in childhood, an outcome study. Psychological Medicine, 10, 699-713.
- Boyd, C.J. (1989). Mothers and daughters: A discussion of theory and research. Journal of Marriage and the Family, 51, 291-301.
- Chodorow, N. (1989). Feminism and psychoanalytic theory. New Haven, CT: Yale University Press.
- Cohler, B.J. (1988). The adult daughter-mother relationship: Perspectives from a life-course family study and psychoanalysis. Journal of Geriatric Psychology, 21(1), 51-72.
- Dattel, A.R., & Neimeyer, R.A. (1990). Sex differences in death anxiety: Testing the emotional expressiveness hypothesis. Death Studies, 14, 1-11.
- Denes-Raj, V. & Ehrilchman, H. (1991). Effects of premature parental death on subjective life expectancy, death anxiety, and health behavior. Omega, 23(4), 309-321.
- Douglas, J.D. (1991). Patterns of change following parent death in midlife adults. Omega, 22(2), 123-137.
- Edelman, H. (1994). Motherless Daughters. New York, NY: Dell Publishing.
- Finkelstein, H. (1988). The long-term effects of early parent death: A review. Journal of Clinical Psychology, 44 (1), 3-9.

Fisher, L. (1986). Linked Lives. New York, NY: Harper and Row.

Gilligan, C. (1982). In A Different Voice. Cambridge, MA: Harvard University Press.

Goldberg, J.E. (1994). Mutuality in mother-daughter relationships. Families in Society, 74(4), 236-242.

Jordan, J. (1991). The meaning of mutuality. In J. Jordan, A.G. Kaplan, J.B. Miller, I.P. Stiver, & J.L. Surry (Eds.), Womens Growth in Connection (pp. 81-96). New York, NY: Guilford.

Lester, D. & Templer, D. (1993). Death anxiety scales: A dialogue. Omega, 26(4), 239-253.

Lobdell, J. & Perlman, D. (1986). The intergenerational transmission of loneliness: A study of college females and their parents. Journal of Marriage and the Family, 48, 589-595.

McDonald, R.T., & Hilgendorf, W.A. (1986). Death imagery and death anxiety. Journal of Clinical Psychology, 42(1), 87-91.

Meshot, C.M. & Leitner, L.M. (1995). Death threat with young adults who have lost a parent to death. Death Studies, 19, 571-582.

Miller, A.G. (1995). A typology of mother-daughter relationship patterns for young adult women and their mothers. Issues in Mental Health Nursing, 16, 377-394.

Monck, E. (1991). Patterns of confiding relationships among adolescent

girls. Journal of Child Psychology, Psychiatry and Allied Disciplines. 32(2), 333-345.

Moss, M.S., Moss, S.Z., Rubenstein, R. & Resch, N. (1993). Impact of elderly mother's death on middle age daughters. International Journal of Aging and Human Development. 37(1), 1-22.

Parker, G. & Manicavasagar, V. (1986). Childhood bereavement circumstances associated with adult depression. British Journal of Medical Psychology, 59, 387-391.

Rich, S. (1990). Daughters view of their relationships with their mothers. In C. Gilligan, N. Lyons & T.J. Hamner (Eds.), Making Connections (pp. 258-273). Cambridge, MA: Howard University Press.

Richardson, V. & Sands, R. (1987). Death attitudes among mid-life women. Omega, 17(4), 327-341.

Rasmussen, C.H. & Johnson, M.E. (1994). Spirituality and religiosity: Relative relationships to death anxiety. Omega. 29(4), 313-318.

Ruebush, K.W. (1994). The mother-daughter relationship and psychological separation in adolescence. Journal of Research in Adolescence, 4(3), 439-451.

Silverman, P.R. & Worden, J.W. (1992). Children's reactions in the early months after the death of a parent. American Journal of Orthopsychiatry. 62(1), 93-104.

Templer, D.I. (1970). The construction and validation of a death anxiety scale. The Journal of General Psychology, 82, 165-177.

Templer, D.I. (1976). Two-factor theory of death anxiety: A note. Essence, 1(2), 91-93.

Thorson, J.A. & Powell, F.C. (1988). Elements of death anxiety and meanings of death. Journal of Clinical Psychology, 44(5), 691-702.

Tomer, A. & Eliason, G. (1996). Toward a comprehensive model of death anxiety. Death Studies, 20, 343-365.

Townsend, J.K. & Worobey, J. (1987). Mother and Daughter perceptions of their relationships: The influence of adolescent pregnancy status. Adolescence, 22(86), 487-496.

Towse, M.S. (1986). To be or not to be-anxiety following bereavement. British Journal of Medical Psychology, 59, 149-156.

Walzer, S. (1995). Transition into motherhood: Pregnant daughter's responses to their mothers. Families in Society, 76(10), 569-603.

Weiss, R.S. (1988). Loss and recovery. Journal of Social Issues, 44(3), 37-52.

White, W. & Handal, P.J. (1991). The relationship between death anxiety and mental health/distress. Omega, 22(1), 13-24.

Zall, D.S. (1994). The long-term effects of childhood bereavement: Impact on roles as mothers. Omega, 29(3), 219-230.