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Death Anxiety and Personality Traits among Type-2 Diabetic Patients

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ABSTRACT

Objectives: The present research was framed to investigate the relationship between death anxiety and personality traits (Neuroticism and Psychoticism) among type-2 diabetic patients and to study the difference regarding death anxiety. **Method:** The sample included a total of 30 type-2 diabetic patients. Two measures were used i.e. Hans Eysenck personality questionnaire (EPQ-R) and Upinder Dhar, Savita Mehta and Santosh Dhar Death Anxiety Scale (DAS). Pearson product movement correlation was applied to check the relationship between personality traits and death anxiety among type-2 diabetic patients. The t-value was calculated to study the gender difference. **Result:** The correlation score between neuroticism personality trait and death anxiety it is significant. The correlation score between psychoticism personality trait and death anxiety it is significant. The research finding shows that there is a gender difference in terms of death anxiety it means male and female experiencing the different level of death anxiety. **Conclusion:** The result revealed that relationship was found in neurotic and psychotic tendencies with death anxiety among type 2 diabetic patients. On the basis of obtained result researchers can conclude that personality (neurotic and psychotic tendencies) leads to significant alleviation of death anxiety.

Key Words: Death Anxiety, Personality traits and type -2 Diabetic Patients

INTRODUCTION

Death anxiety:

Death anxiety is a form of anxiety which caused by persistent thought of death. It is also known as Thantophobia is the Greek word and the meaning of that is fear of death (Thantos means Death and Phobia means Fear).

Death anxiety is associated with severe illness. This type of anxiety is mostly observed in a people those who are suffering from severe illness or those who are physically unfit. They constantly worried about their health. Death anxiety is often diagnosed as general anxiety because it is common in people those who are suffering from illness they worried about their life and most of the time they are fearful about their life. Fear of death is not

only related with own health sometimes it is related with close ones health also. People those who are dependent on someone they always fearful about their death because they can't imagine their life without them.

Some common symptoms are observed in people who are experiencing death anxiety – frequent panic attack, irregular heart palpations, nausea, sensitivity of body temperature, anger, guilt feeling, sadness, avoidance of family and friend, ignoring the conversions, busy in same thoughts etc.

Fear of death is related with people's habits, behavior, age, gender, health issues and types and traits of personality

Personality:

The word 'Personality' has its origin in Latin word

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'PERSONA' which means a mask. In Greco-Roman theater, the actors wore masks and the colour and the type of mask depicted the qualities and personality of the character they played.

Personality is that pattern of characteristics thoughts, feeling, and behaviors that distinguished one person from another and that persists over time and situations.

- 1. Mischel (1976): "The distinctive patterns of behavior including thoughts and emotions that characterize each individual's adaptation to the situations in his or her life".
- 2. Allport (1937): "Personality is the dynamic organization within the individual of those psychophysical systems that determine his unique adjustment to his environment".
- **3. Feldman (2004):** "The pattern of enduring characteristics that differentiates a person or the pattern of behavior that makes each individual unique is called personality".

Trait:

A consistent, enduring way of thinking, feeling or behaving

PEN Model of Personality:

Hans Eysenck introduced this model. The PEN model is comprised of three personality dimensions based on psychophysiology. These three dimensions are related to basic emotions.

- 1. Psychoticism: Psychoticism is a personality pattern typified by aggressiveness and interpersonal hostility.
- **2. Extroversion:** Extroversion tends to be manifested in more outgoing, talkative, energetic behavior
- 3. Neuroticism: Neuroticism describes unpleasant emotions like anger, anxiety, depression, or vulnerability. Neuroticism also refers to an individual's level of emotional stability and impulse control and is sometimes referred to as emotional stability.

Diabetes:

Diabetes Millitus (DM) is a metabolic disease in which the blood sugar level is increased. Sometimes body fails to produce proper level of insulin or sometimes it fails to use and store the glucose in blood. The normal blood sugar level is between 70 and 99 mg/dL (below

100).

There are three types of diabetes:

Type 1 diabetes:

Is also known as juvenile diabetes, in this type person's body fails to produce insulin. People those who are suffering from type I diabetes they are insulindependent. It means they take artificial insulin for to stay alive.

Type 2 diabetes:

This is the most common type of diabetes observed in people. It is the chronic condition in which body fails to use and store the level of glucose (sugar). Type 2 diabetes strongly linked with obesity.

Gestational diabetes:

This type of diabetes happens during the period of pregnancy because in that period the body can less sensitive to insulin. In the period of pregnancy the level of sugar is high and it is normalized after giving the birth.

Symptoms of diabetes include:

Increased thirst, frequent urination, fatigue, headaches, weight loss and sometimes dry mouth etc..

Causes of diabetes include:

Overweight, genetic predisposition, high density lipoprotein (HDL), High BP, giving birth to a child with a birth weight of more than 9 pounds, polycystic ovary syndrome (PCOS) and sedentary lifestyle.

Review of Literature :

Singh (2013) conducted an empirical research to analyse and find the relationship between death anxiety, personality traits and behavioural patterns among diabetics and non-diabetics. He was selected 200 samples from Hazaribag District, and then samples were divided into two groups- diabetics and non-diabetics. Two scales were administered on them namely Personal Data Sheet and Death Anxiety Scale by Upinder Dhar, Savita Mehta and Santosh Dhar. And the result finding shows that there was not significant difference interms of death anxiety among the diabetics and non-diabetics.

Cukic *et al.* (2015) tested the main effects of personality traits and their interactions with T2D polygenic risk score, controlling for age and sex. Result reveal that the lower levels of openness were associated with

heightened levels of HbA1c and lower agreeableness was related to a stronger association between T2D polygenic risk and HbA1c. Lower conscientiousness was associated with a stronger association between T2D polygenic risk and HbA1c levels. So the finding suggested that Personality may be associated with markers of diabetes, and may moderate the expression of its genetic risk.

Esmaeilinasab et al. (2016) investigated the relationship between glycemic control in patients with type II diabetes and personality traits, defense mechanisms and spirituality. This cross-sectional study was conducted on 400 Iranian patients with type II diabetes, 64% were men. The NEO Personality Inventory, the Defense Style Questionnaire (DSQ) and the Spiritual Assessment Inventory (SAI) were administered and then underwent a blood sampling for the assessment of HbA1C levels. The research finding shows that the extraversion and conscientiousness had significant negative relationships with HbA1C HbA1C levels, while neuroticism had a significant positive relationship with HbA1C levels of the defense styles assessed, the neurotic style was found to have a significant negative relationship with HbA1C levels. Also, of the spirituality elements, impression management had significant relationship with glycemic control.

Weaver *et al.* (2015) explored the relationship between mental health and type 2 diabetes among women. This research was conducted on 184 diabetic women from 10 public and private clinics. They completed a finger-stick blood test and a questionnaire assessing demographic characteristics, depression and anxiety symptoms, and diabetes-related disabilities restricting their performance of daily tasks. The result shows that the one quarter of sample of diabetic women reported high levels of anxiety symptoms, whereas 18% reported high levels of depression symptoms.

METHODOLOGY

Objectives:

- 1) To examine the death anxiety among type-2 diabetic patients.
- 2) To examine the relationship between the personality traits and death anxiety among type-2 diabetes patients.
- 3) To examine the personality traits (Neuroticism and Psychoticism) among type-2 diabetes patients.
 - 4) To examine the gender difference in terms of

death anxiety among type-2 diabetes patients

Hypotheses:

- 1) There would be positive relationship between neuroticism and death anxiety among type-2 diabetic patients.
- 2) There would be positive relationship between Psychoticism death anxiety among type-2 diabetic patients.
- 3) There would be a gender difference in terms of death anxiety among type-2 diabetic patients.

Research Variables:

- 1) Personality traits
- 2) Death anxiety
- 3) Type-2 diabetic patients.

Controlled Variables:

- 1) Age -40 to 50yrs.
- 2) Type 2 diabetic patients
- 3) Duration of Diabetes (3yrs)
- 4) Region (Nasik city only)

Operational Definition:

- Personality: Scores of individuals as measured by Eysenck Personality Questionnaire (EPQ-R): By Hans Eysenck
- Type-2 Diabetes: It is a chronic health condition in that body fails to store and use the level of glucose.
- Death Anxiety: S cores of individuals as measured by Death Anxiety Scale: By Upinder Dhar, Svita Mehata and Santosh Dhar

Tools:

Eysenck Personality Questionnaire (EPQ-R): By Hans Eysenck :

The EPQ-R constitutes of 90 items from three traits of Personality: Psychotics, Neurotics and Extroversion. The response will be given in yes or no form. The scoring is done with the help of scoring key. The row score converted into the sten score.

Reliability: Test retest reliability coefficient was 0.80

Validity: The validity of the test was highly satisfactory. The test was validated with psychiatric group.

Death Anxiety Scale (DAS): By Upinder Dhar, Savita Mehta and Santosh Dhar:

The DAS constitutes of 10 items each item has two alternate answers yes and no. The scores of this scale vary in between 0 to 10 which high score showing high degree of death anxiety and low score showing low degree of death anxiety.

Reliability: Test-retest reliability coefficient was 0.58 and split-half reliability coefficient was 0.87

Validity: Satisfactory

Sample:

The sample for the present research consisted of 30 type - 2 diabetic patients out of these 15 males and 15 females suffering in Nashik city. The sampling method was purposive sampling and the age range of the sample was 40-50 years.

Research Design:

A comparative and correlational study design was used in the present research.

RESULTS AND DISCUSSION

To analyze the data means and SD were calculated t-test was used for finding the gender difference and Pearson r-correlation was computed to check the relationship. The obtained data is systematically presented in the following tables.

Table 1 shows the correlation between neuroticism personality trait and death anxiety among type 2 diabetic patients. For this analysis pearson product moment correlation coefficient was calculated. For the obtained

value in Table 1 show the correlation score between neuroticism personality trait and death anxiety is 0.61 and it is significant at 0.01 level. These indicate the correlation between neuroticism personality trait and death anxiety is positive. It indicates that higher the level of neuroticism higher the death anxiety.

Table 2 shows the correlation between psychoticism personality trait and death anxiety among type 2 diabetic patients. For this analysis pearson product moment correlation coefficient was calculated. For the obtained value in Table 2 show the correlation score between psychoticism personality trait and death anxiety is 0.55 and it is significant at 0.01 level. These indicate the correlation between psychoticism personality trait and death anxiety is positive. It indicates that higher the level of psychoticism higher the death anxiety.

Table 3 shows the gender difference in terms of death anxiety for this analysis t value is calculated. For the obtained values in Table 3 shows the means of male and female male M=9.66 and female M=9.26 and the t value = 2.48 and it is significant at 0.05 level. These indicated that there is gender difference in death anxiety it means male and female experiencing the different level of death anxiety.

Conclusion:

In the present research following are the conclusions

- 1) There is a positive relationship between neuroticism and death anxiety among type-2 diabetic patients.
- 2) There is a positive relationship between Psychoticismdeath anxiety among type-2 diabetic

Table 1 : Showing the relationship between Neuroticism and Death anxiety among type-2 diabetic patients (N=30)							
Variable	N	Mean	r-value	Level of Sig			
Neuroticism	30	20.43	0.61	Sig			
Death Anxiety	30	9.26	0.01	Sig			

Table 2: Showing the relationship between Psychoticism and Death anxiety among type-2 diabetic patients (N=30)							
Variable	N	Mean	r-value	Level of Sig			
Psychoticism	15	11.8	0.55	Sig			
Death Anxiety	15	9.26	0.55				

Table 3: Showing the gender difference in terms of death anxiety among type-2 diabetic patients (N=30)								
Variable	Gender	N	Mean	SD	t-value	Level of Sig		
Death Anxiety	Male	15	9.66	9	2.48	0.05		
	Female	15	9.26	3.46		0.03		

patients.

3) There is a gender difference in terms of death anxiety among type-2 diabetic patients.

Implication:

The Present research study will be helpful in developing intervention strategies for the type 2 diabetic patients who experience death anxiety because of the disease and their health decreases day by day. It is observed in many diabetic type 2 patients that many a times treatment does not show remarkable improvement because they have constant feeling of death anxiety and some personality traits are also responsible for it. So with the help of this kind of research we can identify their problems and give them a proper help so the health issues can be substantially reduced. These patients can cope up this death anxiety with the help of supportive psychotherapies and counseling. Yoga, meditation and physical exercises can also be helpful.

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