



LETTERS TO THE EDITOR

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Integrating Meditation Practice into Thanatophobia Therapy



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Background and Aim of Study:

Abstract

We explore the potential effectiveness of incorporating maranassati meditation into therapeutic practices, highlighting its ability to mitigate thanatophobia and improve psychological well-being. Drawing upon Buddhist psychological perspectives, maranassati emphasizes the contemplation of mortality, impermanence, and interconnectedness.

The aim of the study: to integrate Buddhist meditative practice into thanatophobia therapy.

This article presents research evidence from real-world scenarios involving individuals with coronary artery disease, cancer patients, and the elderly. The initial findings provide a solid foundation, reinforcing the efficacy of mindfulness-based therapies in reducing death anxiety and improving psychological well-being. The proposed approach offers valuable insights for counselors and therapists in assisting future clients in cultivating a positive outlook on death, thereby alleviating fear and anxiety associated with mortality.

Keywords:

meditation, contemplating, cognitive therapy, thanatophobia, maranassati, Buddhist practice

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Dear Editor,

While contemporary science studies consciousness, social interactions, and emotional and moral responses in the study of the dying process, Buddhism simplifies them for introspection and reflection (MN 9, Trans. by Sujato, n. d.). Buddhist practice, dating back 2,600 years, unveils an understanding of demise encompassing both physical and mental aspects.

“What is death? The passing away, perishing, disintegration, demise, mortality, death, decease, breaking up of the aggregates, laying to rest of the corpse, and cutting off of the life faculty of the various sentient beings in the various orders of sentient beings. This is called death.”
(Sammāditthi Sutta (M i.46).

It was only in the last quarter of the 20th century that science has reevaluated the concept of death as the cessation of vital functions, prompting exploration in literature and biomedical ethics.

Black (1977/2014) provides an ethical and practical approach to understanding the dying process, focusing on the heart, lungs, and brain. However, traditional vital signs such as circulation and respiration challenge the determination of death in modern medicine. Black suggests considering additional connotations and conflicting meanings of the dying process in light of societal pressures. In line with this, Hoffman (1979) presents three perspectives on the meaning of death, emphasizing brain function, brain and heart/lung function, and the value of artificial means. While clinical death primarily concerns biological function, it often overlooks emotional reactions and moral judgments. Hoffman's ethical implications underscore the importance of nurturing relationships and valuing human life. Biomedical ethics support ethical choices amidst ongoing debates on death.



Thanatophobia

Since 1969, Colett and Lester's research has brought attention to the fear of mortality in academia (Colett & Lester, 1969/2012). Their study aimed to differentiate between death distress and the fear of the dying process, constructing measurements for death fears. The study entailed 25 undergraduate females who completed a questionnaire assessing different types of fear related to death. Results revealed that the greatest fear was associated with one's own demise, followed by the fear of one's own dying process. Interestingly, the least fear was linked to others' dying, indicating that personal experience has a vital influence. Despite the small sample size, the study sheds light on an important and understudied topic, paving the way for future research on a larger scale. Newly released data from Statista (2023) spotlights the prevalence of fear of death among a sample of 1,220 American respondents, with a majority (68%) reporting some level of fear. Notably, in a recent study conducted by Anālayo et al. (2022), a rigorous randomized controlled trial examined the impact of mindfulness practices on the fear of dying and death. The findings demonstrated that engaging in mindfulness and contemplative practices effectively reduced the fear related to one's own impending death and the death of others. More notably, these practices had the intriguing effect of both heightening the fear of experiencing others' dying and fostering the cultivation of mindfulness and self-compassion.

Meditation Practice

Maranassati, the contemplation on death in early Buddhism, is integral to Vipassanā meditation. Gautama Buddha draw attention to the benefits of mindfulness of death, including peaceful living and the cessation of defilements. Detailed instructions on cultivating awareness of the dying process are found in the Satipatthānasutta (MN 10, Trans. by Sujato, n. d.), which guides the four foundations of mindfulness. Contemplating death involves reflecting on the impermanence and ending of life, with corpses, skeletons, and bones serving as objects for contemplation. In contemporary discussions on maranassati, Allen and Catherine (2017) pay attention to the spiritual urgency known as samvega, which facilitates successful meditation on death. More than 2,600 years ago, the Buddha-to-be renounced worldly comforts in his quest to transcend the cyclical nature of existence characterized by birth, aging, illness, and death. Presently, the continuous cycle of samsara continues to impact all sentient beings, eliciting varying degrees of death-related apprehension within the human psyche.

The dying process extends beyond external locations such as morgues and cemeteries, encompassing biological and physiological changes occurring within our bodies and minds continuously. Processes like digestion, waste elimination, and the growth and death of skin cells influence our thoughts and emotions. Understanding the impermanence inherent in these momentary dying processes can alleviate fears related to the final passing of the physical body. However, the karmic actions we have undertaken throughout our lives

continue to occupy our thoughts until our last breath. While the presence of loved ones during the dying process can be beneficial, learning to confront death alone holds value in attaining inner peace.

Life entails uncertainty and choices, and the fear of death and uncertainties endure. Consequently, the integration of maranassati in therapeutic practices becomes essential for addressing latent fears and living a meaningful life.

Mindfulness-based Cognitive Therapy

The effect of Mindfulness-Based Cognitive Therapy (MBCT) in alleviating death anxiety among diverse populations has been explored in several studies. Ghadampour et al. (2018) conducted a study involving 30 women diagnosed with coronary artery disease. They used a semi-experimental design, randomly assigning participants to either an experimental or control group. The experimental group received eight 2-hour sessions of MBCT training. The results showed a significant decrease in death anxiety levels after the MBCT intervention, and these positive effects were maintained during the follow-up phase.

In a similar vein, Nabipour et al. (2018) examined the efficacy of MBCT in mitigating suicidal ideation and death anxiety in cancer patients. They selected 30 cancer patients and divided them into experimental and control groups using a pre-test and post-test design. The experiment revealed a significant reduction in both suicidal thoughts and death anxiety following the MBCT group therapy sessions, indicating the outcome of this intervention in addressing psychological distress associated with cancer.

Moreover, Pirkalani et al. (2019) investigated the effectiveness of MBCT in addressing depression, death anxiety, and life expectancy among elderly women. They recruited 30 elderly women from specific districts in Tehran using a random stratified sampling method. The experimental group participated in 10 group-based MBCT sessions. The results indicated a significant difference in life expectancy, depression, and death anxiety scores between the experimental and control groups.

Overall, the reviewed studies consistently illustrate the efficacy of MBCT in decreasing death anxiety in individuals with chronic illnesses. The long-term effects of MBCT beyond the intervention periods highlight its value as a sustainable therapeutic approach, offering ongoing benefits to individuals with thanatophobia and aiming to enhance their overall quality of life.

Attitudes towards Death in the Elderly

Among institutionalized elderly individuals in Egypt (Fadila et al., 2018), approach acceptance was identified as the most prevalent attitude towards death, followed by escape acceptance and fear of death. The researchers discovered moderate correlations between different attitudes towards death and variables such as loneliness, life satisfaction, health status, and comorbidities. Accordingly, they suggested to promote social relationships and engage in periodic discussions about death with elderly individuals and their families.

With regard to therapeutic practices, narrative therapy (Nozari et al., 2019) has shown promise in alleviating



distress and uncertainties associated with fear of death. Narrative group therapy (NGT) exhibited positive effects on aging perceptions and death anxiety in older adults. NGT therein proved beneficial in mitigating death anxiety, and these benefits were sustained over time. Meanwhile, another study by Golestanifar and DashtBozorgi (2021) demonstrated the effectiveness of acceptance and commitment therapy (ACT) in reducing depressive symptoms and improving psychological well-being among elderly individuals with nonclinical depression. Participants who received 10 sessions of ACT experienced a significant reduction in depression levels and showed improvements in psychological health and life expectancy.

Particularly in the work of Menekli and Dogan (2021), religious attitudes were found to be inversely associated with death anxiety and positively linked to attitudes towards death among elderly patients. Higher levels of religious attitudes correlated with lower levels of death anxiety and more positive perspectives on mortality. Nurses and other healthcare professionals were encouraged to consider the impact of religious beliefs when addressing death anxiety and fostering positive attitudes towards death in intensive care patients.

Collectively, these studies provide valuable insights into interventions and factors related to the psychological well-being, attitudes towards death, and anxiety experienced by elderly individuals. They underscore the potential benefits of interventions such as narrative therapy, acceptance and commitment therapy, and the influence of religious beliefs in improving the psychological well-being and attitudes towards death among the elderly. Healthcare professionals can leverage these therapeutic practices to reduce depressive symptoms, anxiety, and negative attitudes associated with aging and mortality in older adults.

Integration of Maranassati into Therapy: A Proposed Approach

Considering the on-going body of research discussed, integrating maranassati into therapy promises a comprehensive approach to addressing Thanatophobia and fostering psychological well-being. The practice of Maranassati, as highlighted by Anālayo (2019), brings a deep understanding of transience and cultivates acceptance, reduced fear, improved well-being, and spiritual development. In addition, Moon (2019) also emphasized the positive effects of mindfulness of death on life, particularly in an adolescent population.

Conclusions

The integration of maranassati meditation in therapy holds great significance in addressing Thanatophobia, as it provides a comprehensive perspective. Through dedicated practice, both meditation practitioners and individuals struggling with thanatophobia can effectively navigate anxieties related to mortality and cultivate a deep understanding of impermanence and equanimity. By embracing the benefits of maranassati in therapeutic settings, therapists and counselors have the opportunity to enhance the psychological well-being and overall quality of life for those facing this paralyzing fear. This

integration brings forth new insights and interventions to tackle Thanatophobia, offering hope and potential advancements in the field.

Ethical Approval

The study protocol was consistent with the ethical guidelines of the 1975 Declaration of Helsinki as reflected in a prior approval by the Institution's Human Research Committee.

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