

THE NEED TO INCLUDE DEATH AND DYING EDUCATION IN HEALTH EDUCATION CURRICULUM FOR COLLEGES OF EDUCATION IN NIGERIA

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Abstract

Death, which in some cases may be preceded by dying, is an age-long fact of life. Nobody exists today that is not younger than death, and no family here in Nigeria can claim ignorance of the existence of death. Yet in today's Nigerian society, people find it morbid to discuss and think of their own death. By not discussing death, people place it in the closet hoping it will not become a reality they will have to face. Incidentally there is every assurance of death whether we believe it or not. This paper examines the rationale for inclusion of death education in the health education curriculum of Colleges of Education in Nigeria. It examines the meaning, objectives and contents of death education. It further x-rays teacher competencies, problems and prospects of death education, and postulates strategies for effective teaching/implementation of death education in colleges of education in Nigeria

Defining death is a difficult assignment. Although some people tend to think of death as a unique event, there are many definitions of the term. Feifel (2007) projects the meaning of death as being multi-dimensional and varies not only between individuals but within the same person. Additionally, death and dying have psychological and social features and are not merely biological events. This is why death is defined or explained from several perspectives.

Kalish (2008) contends that what constitutes the beginning of life (birth or conception) and ending of life (death) is apparently seen quite differently by different people. He delineates the three levels of existence or no-existence of determining life and death under physical, psychological and social.

Physical death could be either clinical or biological. Clinical is an all-or-none proposition in which the organism is either not functioning or functioning. Once clinical death occurs, the death certificate may be signed and all necessary arrangements following a deceased are commenced. In biological death, man is said to die in parts and as each part dies the individual him/herself does not necessarily die, but still lives. The brain, for instance, can cease to function or cease certain of its functions “brain death” while the heart, lungs, liver, kidney, or stomach are still reasonably healthy. The problem of this type of death is that it is difficult to determine how much biological deaths must occur before that person is said to be dead.

Psychological death which is the second level is when one is unaware of self or the world around. It is normally not in all-or-none occurrence, since most people move in and out of awareness or function with some level of hazy awareness. Total psychological death comes, not often, at the time of physical death, but in some instance takes place earlier. While physical death is irreversible, psychological death is reversible. An elderly, while physical death is irreversible, psychological death is reversible. An elderly, apparently disoriented woman suddenly regains a semblance of psychological life when her daughter visited or when she sees her grandchildren. She lapses into confusion when the family leaves. A hostile or an empty environment or poor medication can accelerate psychological death (Kalish, 2008).

Lastly, one can be socially alive or dead to him/herself, but whether he/she has attained a social death depends on the way in which others perceive him/her. When one, for all practical purposes, is perceived as dead or non-existent, he/she is socially dead. According to Kalish (1988) social death can lead to psychological and physical deaths. A retired old man in the village may be so stripped of his normal social functions that he becomes socially dead. If the environment is hostile, he may degenerate into psychological death or even further into physical death. Social death, according to Kastenbaum (1995) may also occur before the end of biological life, when the dying person experiences limited contact, muted voices and averted eyes.

Kalish (2008) recommended that in the face of the confusion of issues in death terminologies that a good research, good research reporting, and good teaching require that care be taken to report accurately the exact concept that is being considered. This choice could be made from his pool of definitions of death that death is a biological event that occurs naturally to living things. It is passage from this existence into the next. It is the transition from the state of something to a state of nothing. It is a consequence of original sin. It is the absence of life. It is an evolutionary necessity to keep the earth from over-flowing with whatever form of life is under discussion. It is a transition into wholeness becoming one with God. There are other possibilities, each of which describes someone's definition.

The term death has multiple meanings-biological, psychological, social, legal and spiritual. Reference to the death of a human being, however, the irreversible breakdown of respiration and the consequent loss of the body's ability to use oxygen.

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But while death is a biological fact, something which happens to us, dying is a process in which a culture is involved. With the possible exception of those who die suddenly and without warning, dying is something we do. This had led to its inclusion in the curriculum of Nigerian Universities.

Death education has been included in the health education curriculum of Nigerian Universities as part of the minimum standard set by the National Universities Commission (NUC). In Nigeria schools and colleges, feeders of the University degree programmes, there is presently little in literature or curriculum that addresses the topic of managing people's death or developing death attitude with a view to acquiring a positive preparatory experience. No college of Education in Nigeria, considering the National Commission on Colleges of Education (NCCE) guideline offers death education as a part or component of health education (Mba, 2006). Yet part of adventure into life is the understanding of death. This understanding of death could best be achieved through death education.

Since the survival of health education in primary and secondary schools would depend more on the inputs and outputs of health education teachers produced by Nigerian Colleges of Education, one could have expected that death education which has been universally accepted in health education curricula of the developed countries of the world should have been included in the Nigeria health education curriculum produced by the NCCE.

Students in Nigerian primary and secondary schools require appropriate assistance in helping them think about the reality of their own death, to reduce fears about the death of others, and to prevent the likelihood of suicide in particular and other forms of horrendous death in general. This assistance could be rendered through death and dying education. (Okafor, 1993:), opined that death needs to be prepared for in order to avoid the consequences of ill-prepared death.

This paper therefore, examines the rationale for inclusion of death education in the health education curriculum of Colleges of Education in Nigeria. It examines the meaning, objectives and contents of death education. It further x-rays teacher competencies, problems and prospects of death education, and postulates strategies for effective teaching/implementation of death education in Colleges of Education in Nigeria.

Meaning of Death Education

Leviton (2007) defined death education as, a developmental process that transmits to people and society death-related knowledge and implications resulting from that knowledge. Okafor (1993) tied up the meaning of death education in what should be its operative meaning in this paper as an informal or formal educational process which provides the participants with some valid information about death-related phenomena with the primary objective of positively influencing knowledge,

attitudes, values and behaviours. This implies that death as contained in death education does not refer to death as the irreversible cessation of life processes, but also the several other reactions, processes and consequences plunged in the living or survivor and his environment by death. It is the totality of these that is death education or, even more professionally, thanatology. Stallion (1985) described death education as a preventive mental care which prepares its participants to face their own feelings about death, accept the inevitability of death and loss and to anticipate and develop health coping behaviours. Death education has the potential for enhancing abilities to cherish life; to improve the quality of relationship with family, friends and peers; to help people focus more sharply on their goals and priorities and simply to live more fully each day. When heart fails, oxygenated blood no longer flows through the blood vessels.

Objective of Death Education

The objective of death education is neither to eradicate painful death experience nor to remove fears and anxieties totally (Resisler, 2007). Many eminent scholars have made successful attempts at putting forward the goals and objectives of death education. Gordon and Klass (2007) after surveying the range of topics possible under the heading of death and dying suggested the following four goals around which to structure death education:

1. to inform students of facts not currently widespread in the culture;
2. to help the students effectively deal with the idea of personal death and the death of significant others;
3. to make the student an informed consumer of medical and funeral services; and
4. to help the student formulate socio-ethical issues related to death and define judgments these issues raise. Grollman (2008) concurred with the first three goals of death education cited by Gordon and Klass but expanded the remaining two of his goals into philosophical and aesthetic domains. Grollman's fourth and fifth goals of death education are:

5. to facilitate basic social changes through education and
6. to gain literacy, philosophical and artistic insight using the human experience of death as a focus. Knott (2009) after a fairly detailed discussion of the goals and objectives of death education summarized the goals of death education in his triad as follows:

1. information sharing goal (cognitive)
2. values clarification goals (affective); and
3. coping behaviours (psychomotor)

The writer suggests that Nigerians who find themselves in death education should strive to adopt the above-stated goals and objectives. In Nigeria, death education should further and specifically aim at eliminating the semantic taboos surrounding death; getting people to realize, think and accept the realities of their own death; understanding the realities of suicide in particular and other forms of horrendous death

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in general, and making students embark on research studies in this important area of education.

Rationale for Death Education

If any aspect of human life needs to be included in a health education curriculum, it should be death education among others. If death education is in Nigeria Colleges of Education health education curriculum, it is hoped that the course if properly handled, will aid the students' psychological development, minimize their negative reactions, familiarize them with the needs and issues surrounding death and dying, reveal their responsibility to maintain life and prepare them for building a better future.

Death education according to Onuoha and Okafor (1992) is an attempt to fill the void created by the tradition of silence about death and by the many social and cultural changes of the 20th century. With these changes, they further asserted, death has been taken almost out of family structure and been replaced by paid "outsiders". This factor has according to O'Brien (1999) presented several mental problems he added have resulted in child runaways, suicide, breakdown of religious beliefs and have forced changes in individual life patterns. Not too many years ago dying and death were very much a natural part of the total family life cycle. Families live together, often with several generations in the same household. The dying process took place within the family circles as did the death itself and the funeral in many cases (Mba, 2006). Young people were thus enabled to view the process of dying, death, grief, and bereavement as natural parts of the cycle. This is not true today, because these processes are typically removed from the family experience. In many instances, the act of dying has lost its dignity and normalcy and has become institutionalized, dehumanized and mechanized and young people have been excluded from the experience altogether (Berg and Daugherty, 2003). They went further to suggest that the resulting void of experience must be filled if society is to retain a proper perspective towards the value of life. This void of experience might be filled if Nigeria Colleges of Education which are the teacher educators should include death education in their health education curriculum for these would-be teachers who will be teaching at both the primary and secondary schools in Nigeria.

The emergence of death education in Colleges of Education in Nigeria will be important because of the non-pervasiveness of death in institutions, media exposure to death, and availability of rampant deaths thereby helping to destroy the taboos and unrestricting learning. Taboos concerning death in Nigeria have combined with technological changes to create a gap in factual knowledge about death that is particularly acute for young people in our society. "Absence of factual knowledge results in suppression of feelings and stimulates the development of myths and misconceptions" (Reisler, 2007:331).

Cruse and Cruse (2009) argued that death education aims at providing appropriate information on cost and other issues surrounding death to consumers. This may help them in making intelligent decisions before a death forces such decisions. Managing estates and utilizing written wills are also units usually incorporated in death and dying education. Death and dying education will definitely help students confront their feelings about death without causing excessive stress. On the premise that death is an integral part of life, and that every aspect of life has to do with health, it seems that the schools and colleges have no choice but to include death and dying education in their curricula.

Contents of Death Education

Imogie (1987) developed a death education curriculum in Nigeria Secondary schools she categorized the topics into death and dying, coping with death and death – related phenomena and horrendous death and crisis intervention. She submitted that the category or unit of death and dying should consist of the following topics:

1. Definition and causes of death
 2. The meaning of death and dying education in Nigeria society
 3. Religious and philosophical perspectives of death
 4. Preparing for death
 5. Attitudes towards death and dying
- Other categories consist of the following topics
1. Understanding the dying process and dying friends and relatives
 2. Coming to terms with the inevitability of personal death
 3. Meaning of bereavement, grief and mourning
 4. Burial and funeral ceremonies and alternatives
 5. Orphanage and widowhood
 6. Extending condolence to friends and relatives
 7. The effect of death of a loved one on the living
 8. The role of languages in reducing fear of death
 9. Horrendous death type I and II
 10. Peace through horrendous death prevention
 11. The nature of suicide
 12. Biological and psychological aspects of suicide
 13. Euthanasia or mercy killing
 14. Suicide prevention and crisis intervention
 15. Attitude of people towards suicide
 16. Effects of suicide on loved ones/family
 17. Personality characteristics of suicide attempt

Onuoha and Okafor (1992) proposed a unit plan for use in the universities. The contents of this plan include

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1. Meanings and causes of death
2. Thanatological terminologies such as: dying, bereavement, grief and mourning
3. Human attitudes and behaviours in relation to death and dying
4. Traditional burial, funeral procedures, costs and alternatives to traditional rites
5. Religious, philosophical and cultural perspectives of death
6. Suicide/self-destruction, prevention and intervention
7. Biostatistics of life expectancy
8. Death and relationship with laws, language and ageing
9. Special problem: horrendous death type I and II
10. Death coping skills and strategies
11. Euthanasia/mercy killing, abortion/miscarriage and capital punishment
12. Cryogenics and triage

These two course contents developed by Imogie (1987) and Onuoha and Okafor (1992) could be married together, and modified for use in the Colleges of Education in Nigeria.

Death Education Teaching/Implementation Strategies

Since the outcome of death education are in the form of altered feelings, emotional satisfactions, and improved mental approach to death as opposed to overt behaviours changes, strategies for teaching and implementing death education should reflect a strong affective component. Below are some suggested strategies for teaching or implementing death education: adequate teacher competencies, group activities, use of resource persons, audio-visual materials projects, field trips, integrated approach and lecture methods. For want of time and space the above mentioned strategies have not been discussed in details.

Problems and Prospects of Death Education

Any new course such as death education should normally be faced with numerous problems particularly as death is a taboo subject in the Nigerian society. Among such problems are avoidance of the topic, dearth of materials, time constraints in the curriculum, lecturers' limited competence and existing misconceptions and so on.

For the prospects of death education, it seems clear that death education has indisputably found its way into the Nigeria educational system through the university. It should also of a necessity be introduced into Colleges of Education because the products of these colleges will be teachers in Nigeria Teaching Training Colleges, Secondary and Primary Schools. We are optimistic that within a matter of time, death education will be included in every Nigerian school and colleges as an integral part of the total curriculum. It is also possible that some other subjects may in future offer areas that could comprise a unit on death.

Conclusion

Death education has come to stay in Nigeria having made its debut into the Nigerian universities. It should be warmly embraced. Curriculum innovation or no innovation, death does not wait until arguments, revisions or innovations are settled, and as such the passage of death education into our Nigerian universities should quickly be extended into the lower levels of the Nigerian education system (colleges of education, secondary schools, primary schools), including adult education programmes. The inclusion of death education into Nigerian Colleges of Education will further fortify its existence.

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