

The Influence of Religious Awareness Program in Scaling Down Death Anxiety Among Children Sample in Late Childhood Stage; 9-12 years Old in Al Shobak Province

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Abstract

This study drives at identifying the influence of religious awareness program in scaling down the death anxiety among sample consisted of (50) students; (30) males and (20) females, at the late childhood stage. The sample distributed randomly into (25) students representing main group and (25) students as experimental group. Religious Awareness Program applied to reduce death anxiety scale. Also, the religious awareness program has been applied as well which was prepared to scale down the death anxiety on the experimental group. The results show there is significant differences of the sample performance on death anxiety scale which are attributed to the group, in the favor of experimental group. On other hand. no statistical significant differences were showed that are attributed to gender or interaction between group and gender. Such results were discussed thoroughly and the study was concluded by some recommendations.

Keywords: Religious Awareness Program, Death Anxiety & Kindergarten Children

1. Introduction

Late childhood is considered one of critical growth stages in human life, as it represents starting point of adolescence, which is characterized by independency and self dependence. Teenagers in this stage have tendency to activities that develop performance feeling and support self concept, creating personal and social relationships in a way to enable teenagers to enter following growth stages in capable mode.

Al Remawi (2008), assured that children in this stage are subject to some emotional problems; i.e. (fear, anxiety, anger) So they are still in need of care and guidance, especially if they come to know that they have thoughts and feelings which they can express via various ways. Also children have wishes which do not share thereof with any of their family members, which are considered fronts to determine their self-ego.

Anxiety is considered as one of psychological concepts which acquired researchers concern in psychology, guidance and psychological health. Anxiety is a psychological case happens once a danger or threat is existed, and originating emotional tension accompanied by Physiological disturbances presented under three aspects (Al Dahiri, 2005):

- Knowledge: which is displaying pessimistic ideas, such as individual feeling as to approach of death, the end of the world, fear from losing some mental or physical functions.

Behavioral: which is represented by individual behavior to avoid of exciting things and regression.

- Physical/Hygienic: which is includes Biology and Physiological acts, such as hard breathing, muscle tension, dry throat and cold limbs.

Whereas death is a Being Phenomenon and life reality, but discussing such issues is considered undesirable. Although the human believe in such trend but human keeps running away there from as it represents end of its life (Yassen, 2011).

Death Anxiety is considered type of general anxiety, and individuals who fall under such general anxiety due to their psychological formation, are the most sensitive ones in terms of death anxiety. The foregoing assures that there is connective positive relationship between general and general anxiety (Eid, 1997).

Accordingly, death anxiety is defined as emotional unpleasant state that includes negative self feelings through feeling conscious contemplation in a reality which is imposed on individual and for sure is unavoidable, but when and how? (Asaliah, 2005).

2. The Study Problem

Children are subject to many fears and psychological disorders due to past and present experiences and thinking of future. This shall, indeed, generate anxiety feeling; fear from the unknown; i.e. death anxiety which is feeling that may develop and turn into physical and psychological disease to many overlooked.

The geographical location of, which influence to many wars and disputes. Therefore, death concept has been established in the children minds since their early childhood. Children are eye witnessing daily struggle,

blood shed, displacement and torture, through TV and thus death becomes typical image in their eyes, whatever we try to make life beautiful but remains spread here and there still immortal scene in their innocent memory.

Religion works many vital jobs for each individual and group as well, as it is important factor in the human psychological life and also basic component as to its personality growth and behavior supports. Religion works to make effective base including Psychological security and calmness, emotional equilibrium, The love of live and far from pessimistic outlook. Moreover it facilitates disasters and crises that obstacle the human route and thus individual shall feel calm, and neither afraid nor pessimistic from future through the human relationship with its creator. This is classified as guidance of human behavior in all his life trends and in each of its age stages (Al Khateeb, 2002).

From this point, the study problem is comes in indicative religious program which is expected to decrease the death anxiety level among children sample in their late childhood state.

3. Question of the Study

- If there statistical significant differences ($0.05 \geq \alpha$) in study individuals performance in terms of death anxiety scale that are attributed to group, gender or interaction between them?

4. Significant of Study

The significant of the study comes from the age stage importance which we handle and subject we tackle herein. Late childhood state (9-12 years old) is considered one of the important stages to form individual personality and individual possession of positive behaviors. This study subject importance also comes from death anxiety among such category which worry them, hinder their growth and their intellectual, physical and behavioral development. The study significant also is highlighted by the fact that the study works to bring the teachers and parents aware of individual features in this stage, how to avoid fear and the study seeks to offer religious indicative program aiming to decrease the anxiety in general and death anxiety in particular.

5. Literature Review

Anxiety has multiple patterns and causes which allowed the researchers to classify it in line with its cause; for instance death anxiety, illness anxiety, social and future anxiety.

Children do suffer many obsessions; i.e. death obsession which human tried and still trying to ran away from it, keep it out of his thinking, due to the fact that death works to let human feel weak and helpless. Death anxiety occupied many researchers and social psychology science (Refaei', 2003).

Death is the most mysterious issue and secret that faces all the objects on the earth and thus it works to raise their fear and anxiety, it could be classified as pathological case which children suffer or incidental case. The foregoing depends on the child surrounding environment, religious and educational programs presented thereto. Child may ask about death and replies in most cases are not complete, which is attributed to lack of information which adults have (Al Sekhan, 2010).

Whereas children in late childhood stages (9-12) years old, feel scared from death, rather than ego death, as their experience is not big enough, but they feel scared from others death, especially their parents, who they represent every thing in this world for them. Sherbini (2010) displayed many point of views that discuss death anxiety components, as following:

1. Jacques Choron specified the death anxiety components moments before death fear, after death fear, life cessation.
2. Cavano mentioned in his book (death facing) explained clearly his personal fears components of death; such components include the following: personal death, hereafter life thought, deep or applicable aura that surround the person within moments before death.
3. Lester also presented Psychological point of view among four sides of death anxiety which are: fear from ego death, fear from ego before death, fear from others death and fear from others dying.

Death anxiety reflects uppermost ego dying; in other words damage that originating from struggle in the social arena interaction which locates its echo in fear from losing love also in order to stirring up torture self feeling and restrain its mortification (Faraj, 2009).

Death anxiety is considered as emotions that located in the feeling area, being unrecoverable Metaphysical disorder. The thing which cannot hid is that the death anxiety is not ordinary anxiety or disease that is easy for diagnosing thereof, but it is anxiety as to future, anxiety stand and incident which is out to individual control (Butros, 2008).

Death anxiety is: emotional response including self feelings of unhappiness and willful engagement an also emotional unhappy experience surrounding death and its related subjects. Such experience may lead to accelerating the individual himself (Moammariah, 2007).

There are many Psychological theories that work to interpret death anxiety based on circulated literatures. Behaviorisms define it as acquired feeling composed of fear, pain and evil expectation, but it is

different than fear, and is agitated by direct risky stand which faces the individual. Anxiety leads to crises, and remain more than ordinary fear, but it may be linked with death if it exceeds its limit. Once Human feels death anxiety feeling or fear, the emotional effects thereof are accompanied by physical changes which could be very dangerous if strain is repeated, and the emotional case becomes chronic. It is cleared that chronic anxiety as same as continuous death anxiety that may lead to apparent dynamic changes (Botrus, 2008).

There are others who look thereto as emotional behavior originating from ideas which the individual forms in terms of its ego, including diseases, and such ideas may exceed logical limits. In order to get ride of cognitive disorders, we have to perform structural change as to the idea through providing the individual, who suffers disorder represented by death anxiety, with new cognitive concepts (Borkovec, & Costello, 1993).

On the other hand, Psychological Analysis theory from (Freud) point of view, he mentioned that death fear is the same as fear of conscience, therefore, it is a thing that happens between ego and upper ego, and is displayed under two circumstances; as external risk reaction and internal operation (Mc Caithy, 1970).

The death fear is established since childhood stage; oral stage of babies weakness, absence of physical and psychological sources which the baby owns and scariness of mother absence and losing thereof. In other words death fear based on psychological analysis is suppression of longing as to renewable unity with the mother, frank wish to return to early state of complete dependence and psychological merger in the mother womb; (Mc Caithy, 1970).

The religious feeling in the individual remains the significant factor towards satisfaction, happiness and conviction feeling, and also believing in Allah capability which work to help the person and equip him with strength to face pressures and stresses, and further grant him confidence to face crises and challenges in is lifelong; security and optimism feeling which is based on its believe stating that Allah is the controller of incidents towards the best in all times, and such feeling shapes the individual through coming close to Allah (Al Hudaibi, 2013).

5.1. Previous Studies

Eugen (1980), conducted a study that focused on comparing the development of death concept among anxious children and otherwise. The study sample consisted of (160) children; (4-12) years old. Un-anxious children were (89) while otherwise were 71, out of which there were (37) children less than five years old. The generated outcomes displayed (4) years children who have few disturbed experiences on death and have disorder as to the concept maturity. Besides, all children concepts as to death are progressing in sequence manner combined with age increase. Moreover children who are at (5) years old show explanations on death more than those who do not have death experience at same age.

The study performed by Waldman (1988) establishing indicative program based on death anxiety symptoms among the University students. The study sample was consisting of USA Kolorado University, who were presented to three weeks' indicative program. The Analysis displayed the presence of statistical significant influence as to indicative program in decreasing the death anxiety among such students.

Study prepared by Abdel Wahhab and Mohammad (2000) which aimed to identify death anxiety and relation thereof with psychological variables among the University students. Study sample consisted of (226) students; (115) from Hilwan university (46 males). Also (111) students from South Valley University (49 males, 62 females). The generated outcomes showed high appreciation as to the ego and material religiosity which play critical role in decreasing death anxiety and prevention thereof. Also organic sickness plays great role in increasing death anxiety, and further the females were more anxious than males.

Study conducted by Al Hello et, al, (2003) which aimed to indentify AQSA uprising influence on death anxiety level among National Janah university students. Study sample was formed of (706) students of both genders, and were selected randomly. Same scale of death anxiety was applied thereon. The generated outputs displayed statistical significant as to AQSA uprising on increasing students feeling of death anxiety among males and females in the favor of latest, and also among individuals who are far of the confrontations and those who are adjacent thereto, in the favor of those who are close to confrontations.

Shoqair (2003) conducted a study to identify the influence of applying indicative and psychological program procedures to figure out its efficiency as to decrease depress level and death anxiety among Jerusalem University students and further to know the depress level and death anxiety among all study sample individuals. The results presented that the psychological indicative program has effectiveness and impact in decreasing depression and death anxiety.

On the other hand, Asaliah (2005), was designed study to know death anxiety among Palestinian children and relationship thereof as to housing domicile among males and females in Gaza Strip. Study sample consisted of (120) individuals and the results showed that the females were the majority to feel of death anxiety than males.

Slaughter and Griffiths (2007) conducted a study to test developed acquisition as to mature concept of death, indicating the death as biological incident has its impact on death fear among children. Study sample was

consisted of (90) children aged (4-8) years old. In order to achieve the study aims both researchers performed interview on death concept and fear. Anxiety level among children has been scaled through reports offered by parents. The results showed displayed that the increase in death concept is connected with the decrease of death fear. Moreover the study conducted at the fact that discussing death in terms of biology is the best way to mitigate death fear severity among children.

6. Study method and procedures

6.1. The sample of the study

The study sample is consisted of (50) students of both genders; (30) males and (20) females aged (9-12) years old who are enrolled in Sameeh Darwazeh fundamental mixed School, and Al Shobak Fundamental school for boys reporting to Educational directorate in Al Shobak province in the second academic semester, 2014/2015, distributed randomly into (25) students representing main group of (25) students; (15) males and 10 females & experimental group; (15) males and (10) females. Table (1) presents study sample distribution based on gender and group variables.

Table 1: distributing the Study Individuals Based on Group and Gender

Gender	Main	Experimental	Total
Males	15	15	30
Females	10	10	20
Total	25	25	50

6.2. Groups Equivalence

In order to verify the groups' equivalence, researchers extracted the SMAs, standard deviations as to study individuals' performance on tribal death anxiety scale according the gender and group variables, as presented in table (2).

Table 2: SMAs and standard deviations as to study individuals' performance on tribal death anxiety based on gender and group variables.

Group	Gender	SMA	Standard deviation	Number
Experimental	Males	2.63	0.137	15
	Females	2.61	0.110	10
Total		2.62	0.126	25
Main	Males	2.61	0.055	15
	Females	2.73	0.434	10
Total		2.65	0.275	25
Total	Males	2.62	0.104	30
	Females	2.67	0.314	20
Total		2.64	0.213	50

Table (2) displays ostensible variance in SMAs and standard deviations of the study individual performance on tribal death anxiety due to group variable categories difference (main and experimental), gender (male, females). In order to clarify the statistical differences significance among SMAs we have used variance analysis (Two way Ancova) as presented in the table (3).

Table 3: The (Two Way Ancova) Analysis Outcomes as to Group and Gender Variables Influence and Interaction Between them on tribal Death Anxiety scale

Variance Source	Total Squares	Freedom Marks	Medium Squares	F Value	Significance Statistical
Group	0.026	1	0.026	0.574	0.453
Gender	0.024	1	0.024	0.524	0.473
Gender * group	0.062	1	0.062	1.349	0.251
Fault	2.114	46	0.046		
Total	2.213	49			

Table (3) displays no differences of statistical significant ($0.05 \geq a$) in study individuals performance on tribal death anxiety scale that attributed to gender and group as well as interaction between them. The foregoing refers to the fact that both groups; Main and experimental are equivalent before applying the religious indicative program.

6.3. Study Tools

6.3.1 Religious indicative program: Is consisted of 3 factors clarified as follows:

A. Skills factor : represented by cutting and sticking, drawing by using colors and clay, installing and dismantling games.

B. Knowledge factor: Represented by listening to stories and, religious encouraging tales to accept Allah Fate, keep remembering of paradise and the forever pleasure, memorizing Quran short verses and some prophet statements.

C. Knowledge Factor: Represented by visiting patients in the hospitals, visiting graves to encourage children, fetch children to help diseased persons, consolation in death cases and mercy towards others.

6.3.2 Notice Card " death anxiety symptoms; psychological, and physical among the kindergarten children.

This issue was prepared after reviewing the theoretical literature and previous studies in such field; i.e. (Qawajliah , 2013), as it was amended to suit the age category which is adopted herein, and its final image is formed from 16 items divided into two parts; a. physical symptoms as to death anxiety among children consisting of six items, b. psychological symptoms of death anxiety consisting of ten items.

6.4. Avelidaty of tools

The researchers prepared religious indicative program and presented thereof to specialists in Educational psychological science, psychological guidance, child education, curriculums and teaching who they work as teaching committee in Al Hussain Ben Talal University, as well as four supervisors in children kindergartens stage, and the researchers collected all comments offered by arbitrators and applied thereof herein. Such notice card acquired (90%) acceptance which is considered enough as to accepting thereof. Moreover, the researchers have extracted the correlation coefficients between paragraph and field, which were ranged at (0.19-0.98) and the following standards were adopted to accept the paragraph as following:

- a. Correlation coefficient must be 20% and more.
- b. To be statistically significant at (0.01=a) level and this was applied on correlation coefficients extraction between baragraph and total performance on the scale. The correlation coefficients were ranged from (0.18-0.96)

As for the values of correlation coefficients between the first field; physical symptoms and total performance on scale, it presented (0.86), while correlation coefficient between the second field; Psychological symptoms were (0.089).

6.5. Reliability of tools

In order to make sure of the study tool Reliability, the researchers obtain verification between (Test – Retest) method by applying test method and re-test method after two weeks on a group outside the study sample consisting of 30 children. Then the researchers calculated Person's correlation coefficient between the assessments in both types and displayed (0.88). the researchers also calculated Constancy coefficient via internal consistency method based on Koder Richardson Equation (-20) which showed (0.79). Such values were considered suitable for the purposes herein.

6.6. Statistical Analysis

The study question analysis through calculating the SMAs and standard deviations of study individuals' performances by using death anxiety scale based on group and gender variables. In order to identify the influence of indicative program, the researchers used (Two ways Ancova) analysis.

6.7. Study Methodology

The researchers have used the semi-experimental curriculum which depends on two groups; main and experimental via design presented hereinafter in table (4)

Table 4: Experimental Design

Group	Tribal	Training	Dimensional
1 st . (Main)	Death Anxiety	Without Training	Death anxiety
2 nd . (Experimental)	Death Anxiety	Training	Death anxiety

express the above within mathematically as follows:

02 - 01 G1 R
 04 * 03 G2 R

7. Study Outcomes

7.1. Study Question Text:

Are there differences of Statistical significance (0.05≥ a) in the study individuals performance on death anxiety scale which are attributed to group, gender or interaction between them?

In answer question:

The researchers have calculated SMAs and standard deviations of the study individuals performance on death anxiety scale based on groups and gender variables as displayed on table (5).

Table 5: SMAs and Standard Deviations of the Study Individuals' Performance, on Death Anxiety Scale Based on Groups and Gender Variables.

Group	Gender	SMA	Standard Deviation	Number
Experimental	Males	1.45	0.141	15
	Females	1.39	0.118	10
	Total	1.43	0.133	25
Main	Males	2.62	0.70	15
	Females	2.63	0.112	10
	Total	2.62	0.87	25
Total	Males	2.04	0.601	30
	Females	2.01	0.645	20
Total		2.03	0.613	50

Table (5) displays variance in SMAs and standard deviations of the study individual performance on tribal death anxiety due to group variable categories difference (main and experimental), gender (male, females). In order to clarify the statistical differences significance among SMAs the researchers have used variance analysis (Two Ways ANCOVA) as presented in the table (6).

Table 6: Outcomes of (Two Way ANCOVA) Accompanying the Influence of Group, Gender and Interaction Between them on Death Anxiety Scale

Variance Source	Total Squares	Freedom Marks	Medium Squares	F Value	Statistical Significance
Tribal (accompanying)	0.24	1	0.24	1.90	0.175
Group	16.926	1	16.926	1357.75	000
Gender	0.009	1	0.009	0.73	0.398
Group*Gender	0.010	1	0.010	0.84	0.365
Fault	0.561	45	0.012		
Total	18.384	49			

Table (6) displays no differences of statistical significant ($0.05 \geq \alpha$) in study individuals performance on tribal death anxiety scale that attributed to group. In reference to table (5), the differences are in the favor of experimental group, which means the availability of statistical significant influence of the religious guidance program in decreasing death anxiety among the children sample in the late childhood stage. Whilst there were not statistical significant differences ($0.05 \geq \alpha$) that are attributed to gender or interaction between the group and gender.

8. Discussing the Results

The researchers attribute the reached at outcome herein to the positive impact to employing various teaching strategies; i.e. stories, role play, dialogue, discussing, imagination, and feedback. Stories occupied high degree of thrill and attraction and also it contain expertise, educational and social stands based on solve problems and thus it contributed in acquiring various educational and religious experiences and further worked in bringing the indicative program into success.

On the other hand, the Role play strategy stirred competence and enthusiasm among the study individuals which, indeed, helped in growing desired behaviors thereof. As for the dialogue and discussions strategy, worked to stir child thinking and participation skills in various stands, in addition imagination strategy contributed in creating active and real participation of the child as what he gained from imagination is translated into real expertise which lasts for a long time in the child memory. the researchers shall not forget the feedback in carrying out the program and thus contributed in offering help for the child to discover the accurate responses and correcting faults and therefore, it offered indication as to the child actual performance, which was emphasized by Besharah (2013).

The researchers also interpret the difference which the indicative program presented to this program nature via focusing on sound communication necessity between teachers and students, through concentrating on targeted aims and informing the students, in advance, of goals which are required to be achieved. The foregoing worked in organizing the children thinking and their efforts; for instance, the child neither practiced boredom nor aversion, and finally encouraging the teachers to adopt positive behavior towards the children.

Besides, activities, class positions, and method of drafting the indicative religious program paid attention as to decreasing the death anxiety among sample of the study, males and females without distinction, which offer the superiority to the indicative program compared with any other programs that may be designed basing on gender.

The children from (9-12) years old have many joint features, with few differences which were not displayed with statistical significant on program activities types. Also the religious indicative program did not allocate stories, communicative modes, or educational subjects that are characterized by female or male features in specific way, which allowed the indicative program to acquire its generality in decreasing death anxiety

among kindergarten children; males and females.

This study came in line with the study outputs prepared by Shuqair (2003), Waldman (1988) Eugen (1980), data of which refer to statistical significant influence as to religious indicative program on decreasing the death anxiety. On the other hand, some aspects herein became different than the outcomes generated from Al Hilu study and his fellows 2003, Asaliah study 2005, where related data therein referred to influence of statistical significant attributed to gender, in the favor of females.

9. Recommendations

On the light of results in this study, the researchers set out recommendations as follows:

1. Conclude more studies on religious indicative program impact in decreasing death anxiety issue among orphans, street and SOS children.
2. Carrying out more studies on the religious indicative program influence in decreasing other modes of anxiety; i.e. disease anxiety, future anxiety and else.
3. Issue recommendations to curriculums designers and developers as to include religious concepts in such curriculums; such as death and life.
4. Developing religious indicative programs on the long run covering all growth stages, whether among pre-school children or fundamental and secondary schools children, then proceed to include University students as well.

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