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Learning to say goodbye; a death education program for emr children

Maryanne Fitzgerald

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LEARNING TO SAY GOODBYE:
A DEATH EDUCATION PROGRAM
FOR EMR CHILDREN

by
Sister Maryanne Fitzgerald, S.C.

A THESIS
SUBMITTED IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE DEGREE OF
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Milwaukee, Wisconsin
1980
This dissertation has been approved for the Graduate Committee of the Cardinal Stritch College by

[Signature]

(Advisor)

[Signature]

(Reader)

Date May, 1980
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CHAPTER I
INTRODUCTION

As a child grows and matures, the concerns and mysteries of life begin to be noticed and faced. The profound questions of life cause most children to stop, ponder, question, seek answers and then make a personal response. Oftentimes, the topics of death, loss and separation raise many questions and evoke deep emotional reactions in children. As children seek answers to these questions, information is required as well as a place where discussion of the concerns is encouraged.

The child who is mentally handicapped also needs to personally face the reality and meaning of death. For the child with limited intellectual ability, such concepts as death can be both extremely confusing and easily misunderstood. Information that is presented both at the child's level of understanding and in an atmosphere of openness allows a mentally retarded child to come to understand and accept the reality of loss and death as a necessary part of life.

Currently, the need for death education programs in schools is beginning to be recognized. Some programs are already in print and trends indicate that more educational endeavors in this area are forthcoming (Montgomery, 1972). A thorough review of the literature, however, reveals that no such programs have been specifically designed for mentally handicapped students.
Of course, the critical question that remains unanswered throughout all of the current movements towards death education refers to whether a specifically designed program of death education will actually alter the individual's ability to think about and react to death. Research has not yet begun to examine this question in relation to the mentally retarded child.

Statement of the Problem

The purpose of the present study was to investigate the effects of a death education program on the level of conceptual thinking of mentally retarded children. This paper focuses on presenting the results of a death education program by comparing the ability of five mentally retarded students to conceptualize about death before and after the specially designed program with that of controls who were not exposed to the program. Piaget's levels of conceptual thinking formed the basis of evaluation. The students were drawn from Blessed Sacrament Special Education Center for educable mentally retarded (EMR) children.

The specific question pursued in the study is:

Did the five (5) mentally retarded students who participated in the ten-week death education program perform at a higher level of cognition (based on Piagetian theory) than did the matched control group which received no death education program?

It was hypothesized that the experimental group would perform at a higher level of the Piagetian scale than the control group.
Hypothesis

The present study was directed towards investigating the effects of a death education program on the conceptual ability of five (5) EMR students, aged 10-14 years. It was hypothesized that: At the completion of the ten-week death education program, the educable mentally retarded students who participated in the program would perform at a significantly higher level on a Piagetian conceptual thinking scale than their matched control group counterparts who did not receive the death education program.

Significance of the Study

Within the recent past, the need to face the question of death has become not only popular but socially acceptable conversation (Kubler-Ross, 1969). Explaining death to children has also become the concern of some researchers and educators (Vogel, 1975; Grollman, 1967).

In the area of death education, the needs of the mentally retarded child have not yet been recognized. With the increased awareness of the needs of mentally handicapped persons as well as with the thrust towards mainstreaming, the specialized area of death education is one that calls for attention and investigation. It is with this goal in mind that the present research has been designed. It is hoped that this study will first create an awareness of the need to provide death education in a special education curriculum, and secondly, that it will offer a model death education program to be used with EMR students.
Definitions

Because Piagetian concepts and terminology can be misunderstood, some basic definitions are provided (Coleman, 1969):

Preoperational stage--2 to about 7 years. In this period the acquisition of language enables the child to deal with his world symbolically instead of only directly through motor activity. By a process of 'decentering' he gradually learns to conceive of a world of space and time that exists independently of himself and his actions (p. 93).

Concrete operations--6 or 7 to about 11 years. During this period the child shows an increasing capacity to reason though still at a relatively concrete level. His symbols and concepts are literal representations of what he has experienced. He is not ready for abstraction or imagination of relationships not already experienced (p. 93).

Formal operations--from about the age of 11 years. Now the child can deal with words and abstract relationships. For the first time he can intellectually examine and manipulate the merely hypothetical and systematically evaluate several alternatives (p. 93).

Summary

In light of the stated need for death education in the curriculum for mentally retarded students, this research was designed to provide a model program and report the results in terms of Piagetian scales of cognitive development.
CHAPTER II
REVIEW OF RELATED RESEARCH

This chapter will be subdivided into the following five sections: (1) Piaget's theory of intelligence; (2) Piaget's theory and the mentally retarded child; (3) Piaget's theory and education; (4) Death education; and (5) Death education and the mentally retarded child.

Piaget's Theory of Intelligence

Jean Piaget has devoted most of his life to the study of thinking in children. Piaget views mental growth as an extension of biological growth (Coleman, 1969). His theory is viewed both as genetic and developmental. Flavell (1963) views Piaget's theory as developmental and sequential:

Cognitive development is a coherent process of successive equilibrations of cognitive structures, each structure and its concomitant equilibrium developing logically and inevitably from the proceeding one (p. 37).

Wolinsky (1962) has stated that Piaget's theory of intelligence posits a genetic process that occurs within the child and culminates in 'intelligence'. She describes this process as developmental with simpler processes forming the basis for more complicated thought processes.

Intelligence, in terms of Piagetian theory, is defined as an individual's place on a universal sequence of development towards formal operations (De Vries,
Each stage in the process of the development of intelligence represents a new way of approaching problems. Each stage grows out of its predecessor and prepares the way for its successor (Reiss, 1967). The development of intelligence is evolutionary with changes based on the age of the child (De Vries, 1974).

**Piaget's Theory and the Mentally Retarded Child**

Very little direct attention has been given to the application of Piaget's theory to the progressive growth of intelligence in a child with retarded mental ability.

Piaget himself and Inhelder (1947) did some preliminary work with mentally retarded persons. Their findings indicated that some mentally retarded persons never functioned above a pre-logical level. While there was some variance in the functioning level of the group studied, none reached the level of formal operations. From this research, Piaget and Inhelder saw mentally retarded persons moving along the continuum of intelligence developmentally but mentally retarded persons were not seen as capable of functioning on the level of formal operations.

Stephens (1966) in her research with some 150 mentally retarded persons, supported Piaget's findings: 'to be retarded means to be able to think by concrete but not by formal operations' (p. 81). She further stated that although the same developmental process occurs in all children, children who are mentally...
retarded progress more slowly throughout the stages and development is arrested at an intermediate stage. These findings support Piaget and Inhelder (1947): 'Logical operations follow a much slower rhythm and remain forever unfinished' (p. 403).

While the application of Piaget's theory of intelligence has not yet widely been applied to mentally retarded persons, the research that has been done does aid in an understanding of the thought processes of retarded persons. This area of research and application calls for further exploration in the future.

Piaget's Theory and Education

What role does education play in the development of thought processes?

How does a child move from one developmental stage to the next? These are some questions that have been raised when Piaget's theory is applied to education.

Piaget himself is rather vague in response to questions pertaining to training and education (Ginsburg and Oppen, 1969):

While Piaget himself has hardly dealt with the problems of education or with other practical applications of his work, it is clear, nevertheless, that his theories are particularly relevant for educational practice.

Piaget's investigations . . . could prove valuable to educators and educational planners (p. 218).

The contribution of Piaget's findings to understanding the progression of
human learning is immense and the application to formal education holds much promise. Piaget does not, however, give clues as to how to foster the development of intelligence. As Wadsworth (1971) states: "Unfortunately for education, Piaget has been concerned with how concepts develop and not how to develop concepts" (p. 59).

Wolinsky (1962) has indicated that the experiential world of the child is the setting in which intelligence develops. As the child experiences the realities of life, the process of full realization is occurring not spontaneously, but gradually. Education can be seen as an element of that experiential world.

Using Piaget's theory as a basis, Kaya (1961) has stated that learning experiences should be organized around the psychological processes of the student. Further, Kaya suggests that curriculum should be sequenced to follow the developmental process and the psychological readiness of the students.

Creating a curriculum based on Piagetian levels of conceptual thinking does not ensure, however, that a given child will act on the elements in a situation and proceed according to a particular formula (Wadsworth, 1971).

The value of using Piaget as a guide in educational planning has been studied and supported by many (O'Hara, 1975; Lovell, 1972; Lavatelli, 1970; Kamii and Radin, 1967). Before a program based on Piagetian principles can be wholly adopted, Hooper (1968) suggested that future research will result in the modification of both educational techniques and Piagetian models.
Death Education

Being aware of death as well as confronting the reality of death is an everyday possibility for today's children. The daily news, movies, television and real life situations bring death into the experience of children.

Educating children into a gradual understanding of death is becoming an area of recognized interest, need and value. Hella Moller (1967), school psychologist, suggests that both the school and home should give the child an opportunity to talk about death.

Work in the area of death education first began in the 1930's and early 1940's (Schilder and Wechsler, 1935; Nagy, 1948). One of the classic research studies in the area of death and children was conducted by Maria Nagy (1948). Her report showed a great interest by children themselves in the subject of death. In Nagy's sample of Hungarian children under five years old, dead people were perceived as having life and consciousness. Some saw death as departure or sleep (a denial of death) while others recognized death as existing but could not separate death from life. Nagy reported the most painful aspect of death for children of this age to be separation. A fascination with and an interest in death was strongly indicated by the children's responses.

Schilder and Wechsler (1934) and Anthony (1940) had arrived at these same conclusions earlier. Anthony (1940) found that the thoughts of school-age children centered readily on death. Death also appeared in their fantasies and
in their play.

In 1934, Schilder and Wechsler studied death and children by means of a family questionnaire. From their research they reported death to be an important subject for children. The need for further direct research with children on the subject of death was noted as early as 1943 by Schilder and Wechsler.

In the years following these particular and classic studies, no research in the area of death and children was undertaken. In the late 1960's, a renewed interest in this area was shown.

Rochlin (1967) demonstrated, through his research, that death is not only a matter of deep concern for children but that child's thoughts of dying are commonplace and serve as important determinants in his emotional development:

- What is remarkable is not that children arrive at adult views of the cessation of life, but rather how tenaciously throughout life adults hold to the child's beliefs and how readily they revert to them.
- The clinical facts show that the child's views of dying and death are inseparable from the psychological defenses against the reality of death (p. 63).

Kastenbaum (1967) in his investigation also explains that a child's perceptions of death are related to his/her developmental level:

- There is a close relationship between development of ideas about death and intellectual development in general. It is necessary to appreciate
how strongly the child's concept of death is dependent upon the total pattern of mental processes and resources available to him at a particular stage in his development (p. 92-93).

In investigating a child's reactions and responses to death, some researchers have outlined a general developmental approach to explain how a child progressively understands concepts relating to death.

Most of the investigations have been reported in terms of chronological age and how a child at a specific age understands death (Vogel, 1975; Darcy-Berube, 1973; Miller and Ozga, 1973; Kastenbaum, 1967).

Miller and Ozga (1973) report four stages in a child's understanding of death: 1) before the age of 3—a child doesn't understand death because of the child's inability to think in the abstract; 2) 3-5 Years—a limited understanding of death with an accompanying denial of death; 3) 5-9 Years—an awareness of death and sorrow that it brings; the acceptance of the finality of death but not the universality of death; 4) 9-12 Years—by age 9, accepts own death but personal death is seen in the very distant future; by age 12, an understanding of the generality and impersonality of death.

Darcy-Berube (1973) reports a gradual awareness by a child of his/her own death. Although specific stages are not reported, Darcy-Berube states that by age 7 or 8 a child learns to accept the universality of death.

Two chronological levels of death awareness are reported by Vogel (1975)
from her investigations of children and death: stage 1—from 3–5 years—death is temporary; stage 2—from 5–9 years—gradual acceptance of death as final, universal and personal.

Kastenbaum (1967) reports a developmental chronological approach to a child's understanding of death. His stages correspond closely to those reported by Miller and Ozga (1973).

There is consistent evidence from the research to affirm the developmental approach towards a child's understanding of death and also to specify the stages of death awareness.

A caution by Kastenbaum (1967) reminds those investigating death and children to use the stages of death awareness as descriptive rather than prescriptive:

Any attempt to describe the child's exploration of death runs the risk of artificiality. Our emphasis on a single aspect of development might all too easily convey the impression that ideas of death enjoy a completely separate career. Actually, thoughts about death are intertwined with the total pattern of personality development right from the beginning, influencing and being influenced by all the child's experiences (p. 106).

Acknowledging the stages of death awareness in children and stressing the need for death education for children, the following suggestions have come from
the researchers: Dr. Daniel Leviton (1973), of the University of Maryland, suggests that the information should be germane to the child's perception and experience; Berg and Doherty (1973) suggest that a death education curriculum needs to meet the following objectives: 1) universal message; 2) interesting content; 3) intellectual challenge; 4) personal and social relevance; 5) preparation for life.

One dissenting voice against the need for and the value of death education programs comes from Joseph Palumbo, Administrative Director of the Barr-Harriss Center in Chicago (1977). Palumbo is not in favor of intensive death education programs, feeling that these programs arouse unnecessary fears and anxieties particularly in young children:

We believe in providing service in response to a need . . . we would not be in favor of introducing death into the curriculum (p. 80).

Although this opinion is a minority view according to the researchers, it is important to keep in mind.

Alfred North Whitehead (1962) makes a challenging statement to all educators: 'There is only one subject matter for education, and that is Life in all its manifestations' (p. 47).

The challenge to treat the topic of death has been voiced by educators and researchers. The field of research is growing and the formation of death education programs in schools has actively begun.
Death Education and the Mentally Retarded Child

After much examination of journals and reports, as well as direct contact with agencies and persons currently working with mentally retarded children, no evidence was found to indicate the existence of any specific death education programs for mentally retarded children.

Those persons contacted who are in the field of special education expressed enthusiasm for and interest in the development of such a program. Although the need to educate mentally retarded children about death was a concern of many, the lack of appropriate materials and of a specifically prepared program geared to the needs of the mentally handicapped person has prevented them from professionally responding to educating in this subject area.

Conclusion

After reviewing the research relating to Piaget and his work in education as well as reviewing the literature concerned with death education and children, the need to begin studying the mentally retarded child’s understanding of death was seen as important. Since no specific research directly involving mentally handicapped students and death education could be found, a design to investigate this area was devised.

The following chapters will report one process for death education and the results of this program with mentally handicapped students. Hopefully, this will be the beginning of further research and interest in the area of death.
education and mentally retarded persons.
CHAPTER III

METHOD

The following chapter reports on the specific approach and subjects involved in the investigation of death education and mentally retarded students. Piagetian scales of intellectual development formed the basis of evaluation. A specially designed death education program was prepared for this study and is included in Appendix A.

Subjects

The sample employed in this study consisted of 10 educable mentally retarded (EMR) students selected from Blessed Sacrament Special Education Center, New York.

The 10 subjects were assigned to an experimental and a control group, consisting of 5 subjects each. The following data were collected for both the experimental and control groups: sex, CA and IQ.

Of the total sample of subjects, 8 were female and 2 were male. One male was in the experimental group; one in the control group. In this study, sex is not considered to be a crucial variable.

The chronological ages of the total sample ranged from 9 years 9 months to 13 years 7 months. The age range of the experimental group was from 9 years 10 months to 13 years 7 months. The age range of the control group was from 10 years 3 months to 12 years 11 months. The mean age of the total sample in 16.
months was 154.3 with a standard deviation of 15.0. In the experimental group, the mean age in months was 145.6 with a standard deviation of 16.2. The mean age in months for the control group was 143.0 with a standard deviation of 13.7. A t-test was performed. No significant difference was found between the two groups for age ($t = 0.24$).

The range of IQ scores for all subjects was from 53 to 70. The IQ range of the experimental group was 55 to 70. The IQ range of the control group was 53 to 70. The mean IQ of the total sample was 62.4 with a standard deviation of 6.15. In the experimental group, the mean IQ was 63.4 with a standard deviation of 6.34. The mean IQ for the control group was 61.4 with a standard deviation of 5.95. A t-test was performed between the two groups. No significant difference was found between the groups for this variable ($t = 0.47$).

Materials

A questionnaire was designed to elicit the students' responses concerning death awareness. This questionnaire was employed as the pre-test and post-test (see Appendix B).

A 10-week death education program in the form of ten (10) lesson plans and ten (10) follow-up activities was designed. The content of this program covered the following topics: change, loss, separation and death. The complete program with activities is listed in the Appendix A. Specific materials used are listed in Appendix C.
Procedure

Pilot study. Two special education schools for educable mentally retarded (EMR) students were the sites for the pilot study. Six (6) students from Sacred Heart Special Education Center, New York, and 15 students from St. Frances de Chantal Special Education Center, New York, participated in the pilot study. Each student replied to the prepared questions on tape. The responses were rated according to Piaget's levels of intellectual development. A level 1 response indicated pre-operational thought processes; a level 2 response indicated a concrete operational response and a level 3 response indicated the ability to think on the formal operations level. Each response received a corresponding score: 0 = level 1 response; 1 = level 2 response; and 2 = level 3 response. These responses were pooled and formed a sample of common responses for each specific question.

Selection of subjects. The EMR students were matched for age, sex and IQ. The subjects were selected based on age and IQ scores. The WISC IQ scores were obtained from each student's cumulative record folder. The WISC had been administered to all the students within 16 months prior to the present study. One student from each pair was randomly assigned to either the experimental group or the control group.

Permission to engage these students in the study was obtained from the Diocesan Director of the Special Education Program Diocese of Brooklyn, New
York.

The pre-test. Having established the age, sex and IQ of each EMR student, the pre-testing phase was begun. Testing was carried out by a special education classroom aide. She was familiar with the pre-test and with the students. The pre-test, consisting of 6 questions, was administered to each student individually. The responses were recorded on tape. The responses were scored according to the criteria used in the pilot study. Each student received a score for each question as well as a total score. The total score was the determinant of the level of Piagetian thought processes for each student.

The death education program. Two days after the completion of pre-testing, the ten-week death education program began.

All experimental group students received a 20-25 minute lesson once each week and a 10-15 minute follow-up activity period once each week. This schedule continued for a ten-week period.

The lessons were taught by the writer who was familiar with the students and with the lessons.

The control group received no lessons about death and dying during the ten-week period.

Each lesson and follow-up was designed to teach one topic (see Appendix A).

Each session was scheduled for the same time each week. Some modification
in timing had to be made if a student in the experimental group was absent.

During the course of the death education program, the students in the experimental group were encouraged to 'keep these lessons a secret' so as not to spoil their classmates' experiences of these same lessons in the future.

The ten-week death education program progressed with evidence of increased attention, enthusiasm and interest by the students.

The post-test. Two days after the conclusion of the ten-week death education program, post-testing began. The post-test was administered by the same special education classroom aide. The same set of questions were used in the post-test. The responses of the students in the experimental group and in the control group were tape recorded. The responses were scored according to the criteria established at the time of the pilot study. Each student received a score for each response and a total score indicating the level of conceptual thinking on Piagetian scales.

The treatment of data. The data collected in the present study were analyzed through the use of the t-test. Comparison was made between the experimental groups' post-test scores and the control groups' post-test scores. The data were further analyzed comparing individual pre-test and post-test scores.
CHAPTER IV
RESULTS AND DISCUSSION

The outcome of the study is reported in terms of group results and individual results. Raw scores and Piagetian levels of conceptual thinking are compared and discussed.

The raw scores that correspond to the Piagetian levels of conceptual thought are presented in Table 1.

Table 1

<table>
<thead>
<tr>
<th>Scores</th>
<th>level 1</th>
<th>level 2</th>
<th>level 3</th>
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<tr>
<td>0-5</td>
<td>pre-operational</td>
<td>concrete operations</td>
<td>formal operations</td>
</tr>
<tr>
<td>6-12</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13-24</td>
<td></td>
<td></td>
<td></td>
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The range of possible raw scores for each specific question is presented in Table 2.

21.
Table 2

Range of possible scores

<table>
<thead>
<tr>
<th>Question</th>
<th>Range</th>
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<tbody>
<tr>
<td>1</td>
<td>0-10</td>
</tr>
<tr>
<td>2</td>
<td>0-2</td>
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<td>3</td>
<td>0-4</td>
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<tr>
<td>4</td>
<td>0-4</td>
</tr>
<tr>
<td>5</td>
<td>0-2</td>
</tr>
<tr>
<td>6</td>
<td>0-2</td>
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</table>

Group Results

Pre-test measures of death awareness.

Having established that the experimental and control groups were equivalent with respect to chronological age and IQ, it remained to be determined whether any significant difference existed between the groups regarding death awareness prior to the inauguration of the death education program. A t-test was performed to determine if significant differences existed between mean scores on the pretest. The results indicate no significant difference between the two groups with respect to death awareness on the pre-test (t=0.05) (See Table 3).
Table 3

Pre-test Score Comparison

of

Experimental Group and Control Group

<table>
<thead>
<tr>
<th>Experimental group</th>
<th>Control group</th>
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<tbody>
<tr>
<td>$S_1$</td>
<td>18</td>
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<td>16</td>
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<tr>
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<td>14</td>
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$t = 0.05$ at .05 level (not significant)

Post-test measures of death awareness.

The hypothesis of this study concerned the ability of the experimental group, after completing a death education program, to perform at a higher level of conceptual thinking about death in terms of Piaget's levels of conceptual thought than they previously had. The effect of the death education program in raising the level of death awareness and the level of conceptual thinking about death was examined. The two groups were post-tested and t-tests were applied to the
mean change scores in order to determine if any significant change had taken place in the thought processes of the groups. Significant improvement was evident ($t = 2.17$) in the experimental group. The control group, on the other hand, exhibited no significant change ($t = 0.55$). Table 4 shows the results of the t-tests.

Table 4
T-score Comparison of Experimental Group and Control Group

<table>
<thead>
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<tr>
<td>$S_1$</td>
<td>$t = 1.16$</td>
<td>$t = 1.25$</td>
</tr>
<tr>
<td>$S_2$</td>
<td>$t = 2.12$</td>
<td>$t = .30$</td>
</tr>
<tr>
<td>$S_3$</td>
<td>$t = 2.0$</td>
<td>$t = .20$</td>
</tr>
<tr>
<td>$S_4$</td>
<td>$t = 0.55$</td>
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</tr>
<tr>
<td>$S_5$</td>
<td>$t = 0.35$</td>
<td>$t = .86$</td>
</tr>
</tbody>
</table>

at .05 level (significant) at .05 level (not significant)

The data further analyzed by comparing the post-test performances of the experimental and control groups. The two groups did not significantly differ
in performance on the pretest; similarly, no significance in difference was
found to exist between the groups on the post-test ($t = 1.05$) as shown in Table
5.

Table 5

Post-test Score Comparison

of

Experimental Group and Control Group

<table>
<thead>
<tr>
<th>Experimental group</th>
<th>Control group</th>
</tr>
</thead>
<tbody>
<tr>
<td>S1</td>
<td>21</td>
</tr>
<tr>
<td>S2</td>
<td>18</td>
</tr>
<tr>
<td>S3</td>
<td>20</td>
</tr>
<tr>
<td>S4</td>
<td>12</td>
</tr>
<tr>
<td>S5</td>
<td>21</td>
</tr>
</tbody>
</table>

$t = 1.05$ at .05 level (not significant)

In summary, the analysis of the experimental groups' gain scores significantly
supported the hypothesis that the level of death awareness and conceptual think-
ing about death can be raised through a specifically designed program of death
education, based on the mental ability of the students. However, it cannot be
concluded that this increase is due to the death education program since the difference between the experimental group's performance and the control group's performance on the post-test was not significant.

**Individual Results**

For each student in both groups, a level of conceptual thinking about death was determined on the pre-test and the post-test. The scale of raw scores with corresponding levels of Piagetian thought, reported earlier, was used to determine each student's level. The results are reported in Table 6.

Since the significance of the death education program on the performance of the groups has been determined, the data were further analyzed to determine the significance of changes in individual performances as a result of the death education program. The results of the analysis are reported in Table 7. In the experimental group, the performance and level of conceptual thinking about death of two students were raised significantly (S2 and S3). In the control group, only one student (S1) performed at a higher level on the post-test.

Four of the five students in the experimental group were at the highest level of conceptual thinking about death following the death education program (an increase of 40% from the pre-test). In contrast, 60% of the control group was at level 3 at the time of the post-test (an increase of 20% from the pre-test).

In summary, the level of conceptual thinking about death of two students in the experimental group was raised. The level of conceptual thinking about
Table 6
Students' levels of Conceptual Thinking
Pre-test and Post-test

<table>
<thead>
<tr>
<th></th>
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<tr>
<td><strong>Experimental Group</strong></td>
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</table>
death of one student in the control group was raised. These individual results support the hypothesis of this study that, by means of a specifically designed death education program, the level of conceptual thinking about death, measured by Piagetian scales, can be raised.

Discussion

The results of the study confirm the hypothesis that a death education program, designed for use with EMR students, can raise the level of conceptual thinking about death significantly.

The gain scores of the experimental group were superior to those of the control group, after the death education program, particularly on those items of the post-test that examined the direct content of the death education program (see Questions 1 and 2 in Appendix B).

Closer analysis of the results indicated that all the students in the experimental group received a higher raw score on the post-test (≥ 3 or higher) while while only four students in the control group raised their scores on the post-test and one student received a lower post-test score (pre-test = 14, post-test = 10).

In terms of levels of conceptual thinking about death, on the pre-test of the experimental group, one student was on level 1, two students on level 2 and two students on level 3. At the time of the post-test for the experimental group, the results were: one student at level 2 and four students at level 3.
The results of the present study suggest that EMR students can increase their level of conceptual thinking about death by means of a death education program. It seems likely that a program of this sort, implemented on a broader basis, would add a valuable dimension to a special education program for mentally handicapped students.

Although some research has stated that mentally retarded children do not reach the formal operations level of conceptual thinking based on Piagetian scales, seven of the students reached level 3 (formal operation) at the end of the death education program. This may be due to the fact that these students are EMR students with ability that exceeds that of some of the students who were studied in past research.

It must be noted, however, that the limitation of the mentally handicapped student, in terms of intelligence is a primary factor affecting his/her ability to conceptualize and abstract. The mentally handicapped person appears to reach a point, as Piaget and Inhelder (1947) have suggested, beyond which even the most optimal program of learning conditions do not enable him/her to advance.

This caution needs to be kept in mind when designing and/or evaluating a specific death education program for EMR students. In addition, the value of a specific death education program needs to be judged in terms of the performance of individuals in response to the program and not in terms of group performance since the individual’s level of conceptual thinking ability is the key to his/her performance.
Limitations of the Present Study

Suggestions for Further Research

The limitations of the present study are primarily five: (a) the exclusive use of educable mentally retarded (EMR) students, (b) the ages of the students tested, (c) the size of the sample employed, (d) the role of the experimenter/instructor and (e) the specific questions of the pre-test/post-test. The availability of only EMR students to the experimenter made it necessary to draw only from this particular level of mental ability. As a result, caution is needed in making generalizations to other levels of retarded mental development. Also, no normal controls were used.

The age range (9 yr. 10 mo.-13 yr. 7 mo.) of the sample is also somewhat limiting. Whether younger or older students, with equivalent IQs, would yield the same results is not known. Studies involving a wider age range might be significant in determining if correlation between age and levels of conceptual thinking about death does exist.

The size of the sample (10 students) is another limiting factor. The ability to generalize the results of this study to other larger populations would need to be investigated first. It is difficult to anticipate if a greater number of subjects would yield similar results.

The experimenter who designed the death education program also performed as the instructor of the program. This is a limitation that could be controlled in
future studies.

Conceivably, other questions could have been used instead of, or in addition to the items that were selected for inclusion in the pre-test/post-test. Further research employing different questions would possibly bring about results that differ from those obtained in this study.

In summary, while the results of the present study are encouraging, care should be exercised in generalizing beyond the specific scope of this research. However, replication of this study with a larger sample of handicapped students of different IQ levels, and of different ages could provide useful information for other researchers and educators. Further, employing an alternative form of the pre-test/post-test would provide results that would possibly enhance the validity of the present study.
CHAPTER V
SUMMARY AND CONCLUSIONS

The major purpose of this study was to investigate the efficacy of a death education program designed for mentally handicapped students. Piagetian levels of conceptual thinking about death were measured before and after the program. The hypothesis was as follows: At the completion of the ten-week death education program, the educable mentally retarded students who participated in the program would perform at a significantly higher level on Piaget's conceptual thinking scale than their matched control group counterparts who did not receive the death education program.

The subjects were 10 educable mentally retarded students, aged 9 yr. 10 mo. to 13 yr. 7 mo., selected from Blessed Sacrament Special Education Center, New York. All students were pre-tested. The pre-test had been piloted in two settings to obtain common responses. Five subjects were assigned to the experimental group and five to the control group. These groups were matched for age, sex and IQ. The experimental group students participated in the ten-week death education program. The control group received no training in death education during the ten-week period. The post-test was administered to all students following the completion of the death education program.

Through the use of the t-test, applied to the test results, it was concluded that:

33.
1. The students of the experimental group who participated in the death education program did not perform significantly better (as a group) than did their control group counterparts who received no death education training. Therefore, the hypothesis as stated was not confirmed.

2. The students of the experimental group who participated in the death education program performed significantly better on the post-test than they did on the pre-test.

3. The students of the control group who received no death education training did not improve significantly from the pre-test to the post-test.

4. In the experimental group, 80% of the students were performing on level 3 of conceptual thinking about death following the death education program (an increase of 40% from the pre-test).

5. In the control group, 60% of the students were performing on level 3 of conceptual thinking about death at the time of the post-test (an increase of 20% from the pre-test).

The results indicate that the effects of a death education program on the individual's level of conceptual thinking about death by EMR students were generally positive. Participation in the program enabled individual students to improve their level of conceptual thinking about death. While group results comparing the performance of the experimental group as a whole with the control group as a whole on the post-test were not significant, individual responses
showed increases in death awareness due to participation in the death education program.
REFERENCES


O'Hara, E. Piaget, the six-year old, and modern math. *Today's Education*, 1975, 64, 32-36.


Appendix A

Death Education Program

Lesson Plans
LESSON 1

Change Takes Time

Objective: To experience the reality that change takes time by viewing a filmstrip and to learn the stages of change that a caterpillar experiences.

Procedure: 1. Students will be instructed to listen carefully for the words change and concentrate.
2. Students will view filmstrip 'Kenilworth Caterpillar'.
3. Students will orally re-tell the story.
4. Students will be left with the following question to think about for the next meeting: The Tree told Kenilworth: If you want to change you must concentrate on changing. Is this true? If you concentrate can you make yourself change? Is change fast or slow?

Materials: 'Kenilworth Caterpillar', butterfly pictures

Follow-up activity:
1. Each student will respond orally to: If you concentrate can you make yourself change? If no, why not? If yes, How?
2. Is change fast or slow? When?
3. Students will color a picture of an outlined butterfly. The words: Change takes time, written at the top of the picture.
LESSON 2

Changes Happen All Around Us

Objective: To show the students examples of change in nature.

Procedure:
1. Introduce new vocabulary—tadpole and dandelion.
2. Teacher will show pictures of animals and plants in nature that change—using Let's Discover Changes Everywhere.
3. Students will orally describe the changes they see: changes in shape, size and color.

Materials: Let's Discover Changes Everywhere

Follow-up activity:
1. Each student will draw four (4) pictures of before/after change in animals or plants.
2. Students will show pictures to teacher and then write the names of each on the paper with the help of the teacher when necessary.
LESSON 3

Change Happens to Us, Too

Objective: To discuss with the other students ways in which each of us has
changed and to see examples of how we may continue to change—
emphasizing physical as well as changes in abilities.

Procedure: 1. Teacher will show pictures of a baby, a toddler, a young child,
a teen-ager, a young woman and an elderly woman to the stu-
dents.
2. Students will each be given (2) pictures (in sequence) and will
be asked to explain how the person has changed from one
picture to the next.
3. Students will tell the other students one way in which they have
changed.

Materials: pictures of infant, toddler, young child, teen-ager, young woman,
elderly woman

Follow-up activity:
1. Students will respond to the following questions orally:
   What can you do now that you weren't able to do when you were
   1 year old? When you were 7 years old?
   What do you think you'll be able to do when you're 18 years
   old?
LESSON 4
Loosing Things and Loosing a Friend

Objective: To review feeling when something is lost and to explore feeling about having our best friend move far away.

Procedure: 1. The teacher will narrate various situations portraying: the loss of a favorite toy, a ball is washed into the ocean, the loss of your candy money.

2. After each narration, the students will write one word that expresses their feelings (a simple picture of a face may be drawn if the child cannot write a word).

3. The teacher will ask each child to name his/her favorite neighborhood friend. The teacher will then briefly narrate a story to each student that his/her best friend is moving in two weeks to California. Students will then share with the others how they would feel.

Materials: teacher prepared stories re: loss of a favorite toy, ball washed into the sea, loss of candy money; paper for writing feeling words.

Follow-up activity:

1. Each student will act out (without words) the following scene:
   You and your friend are at the beach. You leave your ball (or other toy) or your ring near the water. You go for a walk. When
you return, the tide has come in and your toy (ring) has been washed away.
LESSON 5

Why Do People Die?

Objective: To begin to share personal thoughts and questions about death.

Procedure: 1. The teacher will ask each student the following questions:
   - What is death? Do you think about death? How do you feel about death?
2. Students will listen to a story and ask teacher questions if necessary.
3. Students will list five (5) questions they want answered about death.

Materials: "Living and Dying", index cards

Follow-up activity:
   1. Students will draw a picture of how they would feel if someone they knew just died.
   2. Students will share about the following: Have you ever been to a wake? to a funeral? to a cemetery?
LESSON 6

Saying Goodbye to Grandparents

Objective: To face the reality that grandparents will die—that death often comes as one grows old.

Procedure: 1. Teacher will ask students if their grandparents are alive or dead.
          2. Teacher will read a story to the students about the death of a grandmother.
          3. Students will share their thoughts on why older people die.

Materials: The Butterfly Tree

Follow-up activity:
          1. Students will describe three qualities of their grandparents as they are now or as they remember them.
          2. Students will share their feelings about when their grandmother/father died (if they were involved).
          3. Students will write a goodbye letter to grandparents (if they are dead) or help someone to write a letter if all grandparents are living.
LESSON 7
Tell Me About A Funeral

Objective: To learn the meaning of wake, coffin, funeral, cemetery and to be able to explain each word.

Procedure: 1. Teacher will present each new word: wake, coffin, funeral and cemetery to the students on index cards.
   2. Using the book, About Dying, and other prepared pictures, students will match the words and the pictures.
   3. Teacher will explain what happens at a wake, a funeral and a cemetery--using pictures to illustrate.

Materials: About Dying, index cards, pictures of a coffin, a cemetery and other related pictures (hearse, coffin, etc.).

Follow-up activity:
   1. Students will be given paper and asked to draw one of these:
      coffin, wake, funeral, or cemetery.
   2. Students will use their own picture to explain to the other what happens at each place. Others can comment on question.
LESSON 8

Is Death Forever?

Objective: To convey the fact that once someone is dead it is forever.

Procedure: 1. Using the pictures of a wake and coffin, the teacher will ask the students to respond to the following questions: Can the person in the coffin hear you speaking? Will the person in the coffin get hungry? Can the person in the coffin come back to visit you?

2. The teacher will explain to the students that death is forever—that no one comes back from the dead—that ghosts on T.V. are not real.

Materials: About Dying, pictures of coffin and wake, Tell Me, Papa

Follow-up activity:

1. Students will answer the following questions by using "yes" "no" cards—turning them over to indicate a response: Does the dead person need food? Can the dead person see? Is the dead person able to speak? Will the dead person ever come back to life?

2. After each question, the teacher will check the response cards—if a student answers incorrectly, the group will discuss the point.
LESSON 9

I Miss My Pet

Objective: To allow the students an opportunity to reflect on their feelings about the death of a pet or to project their feelings in a similar situation.

Procedure: 1. Using the story, "Jinx Died Today", the teacher will read the story slowly and with feeling to the group of students.
2. After the first reading of the story, the teacher will then re-read the story, stopping at various points and asking the students to express their feelings.
3. The students will share personal experiences about the death of a pet.

Materials: "Jinx Died Today" in About Dying

Follow-up activity:

1. Students will discuss what they should do in the following situation: The classroom has a fish. The students love the fish. The fish's name is Goldie. On Tuesday, when we came into school, Tommy noticed that Goldie was dead...
2. After the students have discussed what should be done, the group will act out the funeral/burial procedure—preparing the box, grave, etc..
LESSON 10
Is It True That I'll Die Someday?

Objective: To begin to explore the reality that I'll die someday--personal death.

Procedure: 1. Students will read, with the teacher, parts of There is a Rainbow.
   2. Students will be told that some children who are sick or who are in accidents die--not only older people.
   3. Students will respond orally to the following questions: Will you die? Are you afraid to think about your own death? Students will be reassured by the teacher that death probably won't come for many years.

Materials: There is a Rainbow, record "To Be Alive"

Follow-up activity:
   1. The teacher will help each student to write down his/her special gifts.
   2. Students will then fill in the following statement: When I die, people will miss my ________________.
   3. Students will then join in singing the song: "To Be Alive" and then share in a celebration of life with juice and cookies.
Appendix B

Questions

Pre-test/Post-test
PRE-TEST/POST-TEST
QUESTIONS

Question # 1
What is a funeral?
What is a wake?
What is a coffin?
What is death?
What happens when a person dies?

Question # 2
Are people dead forever?

Question # 3
Do dead people hear and see?
How do you know?

Question # 4
Will everyone die?
Will you die?

Question # 5
What makes people die?

Question # 6
Why are people sad when someone dies?
Appendix C

List of Materials
LIST OF MATERIALS


