




Research Article

Death Anxiety, Life Satisfaction and Psychological Well-Being in Middle Adults

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Abstract

In this study, the relationship between death anxiety, life satisfaction, and psychological well-being levels of individuals in middle adulthood was examined. The study group of the study consists of 340 volunteer individuals between the ages of 40-59, selected through the convenience sampling method. The data of the research were collected using the Death Anxiety Scale (DAS), Life Satisfaction Scale (LSS), and the Psychological Well-being Scale (PWS). The data collected in the study were analyzed using the SPSS-21 package program. Independent Groups T-Test, One-Way ANOVA, Pearson Product-Moment Correlation, and Multiple Linear Regression analyses were used for data analysis. According to the results obtained; While death anxiety does not show a significant difference with respect to age, it varies significantly according to gender and education level. Life satisfaction, on the other hand, does not show a significant difference with respect to age, gender, or education level. However, psychological well-being shows a significant difference with respect to age but does not differ significantly according to gender or education level. The analysis conducted using Pearson's Correlation Coefficient revealed a weak level of relationship between death anxiety and psychological well-being, while a strong level of relationship was found between life satisfaction and psychological well-being. Multiple Linear Regression analysis indicated that death anxiety and life satisfaction significantly predict psychological well-being.

Keywords:

Death Anxiety • Life Satisfaction • Psychological Well-Being • Middle Adulthood • Adult

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Introduction

While human beings strive to sustain their existence in life, they are also forced to confront the reality of death. The thought of death can be a source of anxiety for individuals, but at the same time, it can be a factor that connects people to life and help them find meaning in their existence (Karakuş, 2012). According to Yalom (1980), life and death are simultaneously connected simultaneously; while death makes its constant presence felt beneath the thin line of life, it has a great impact on people's experiences and behaviors.

The meaning of death and thoughts about death have been one of the focal points throughout history. When death is perceived as a punishment, loss, a consequence of failure, or a painful separation situation, it tends to result in high levels of death anxiety. Similarly, fears that the moment of death will be painful or concerns about the disintegration of the body after death can contribute to this anxiety (Assari & Lankarani, 2016).

The perception of the concept of death may differ depending on the developmental stage one is in. A child who has not yet developed abstract thinking skills may have difficulty understanding the concept of death and may not fully grasp what death is like. How adults perceive the concept of death is influenced by social and cultural traditions, beliefs, personal and emotional issues, religious doctrines, and conceptual understandings, all of which are intertwined (Sezer & Saya, 2009). Hökelekli (1991) noted that "fear of death" could underlie most anxieties observed in adulthood and old age. The idea of ceasing to exist, the uncertainty of what will happen after death, and the fear of being separated from loved ones can affect the psychological well-being of older adults and may lead to disorders such as depression (Özen, 2008). In other words, death anxiety not only has negative effects on individuals' daily lives but also reveals situations that hinder their psychological well-being (Kurt Magrebi & Akçay, 2020).

Yalom has emphasized that confronting the concept of death has positive effects on individuals and contributes to personal development (Bakırtaş, 2018). It is believed that it is believed that the better the mental and physical health of individuals, the lower the anxiety about death. This is because they can be more resilient against problems and can perceive control over their lives (Lockhart et al., 2001). Awareness begins as individuals live in the moment and accept the reality of death, leading to a healthier life (Yalom, 2001). The key point here is that individuals contemplate what the meaning of life is, strive to find satisfaction in life, and seek ways to achieve it. This way, individuals can eliminate anxiety and nourish their psychological well-being (Tanhan, 2007). Individuals with high psychological well-being also experience positive emotions on an emotional level and have greater satisfaction in their lives on a cognitive level (Demir et al., 2021).

Life satisfaction is the concept through which the contentment with life is assessed. Life satisfaction signifies the quality of life and the satisfaction one derives from the

life lived. As humans are in a continuous process of development, maintaining mental and physical health accompanies life satisfaction (Veenhoven, 1996). To preserve one's well-being, it is crucial to derive satisfaction from life and sustain it. Otherwise, experiencing low levels of life satisfaction can pave the way for depressive symptoms (Koivumaa-Honkanen et al., 2004). Closely related to psychological well-being, life satisfaction plays a key role in an individual's ability to live a happy life. Various pathways to happiness, such as the pursuit of pleasure, engagement, and meaning, are reported to be associated with life satisfaction (Peterson et al., 2005).

Psychological well-being can be defined as the ability to cope with existential conditions that encompass self-acceptance, positive relations with others, autonomy, environmental mastery, individual development, and purpose in life, all of which indicate an individual's functionality in life (Ryff & Keyes, 1995). It reflects what is happening in an individual's psychological, emotional, and social world. Striving to establish positive relationships with others or continuing one's life for a specific purpose can serve as examples of steps toward psychological well-being (Keyes et al., 2002). In this context, psychological well-being is related to an individual finding meaning in life through specific purposes (Küçük, 2020). With their relationship with their surroundings and the meaning they attribute to life, individuals who experience psychological well-being start to get to know themselves, discover their strengths and weaknesses, feel independent, and have a positive self-perception (Ryff and Keyes, 1995); they focus on positive emotions, thoughts, and experiences in their lives (Myers & Diener, 1995).

When the literature is examined, it can be observed that there are studies indicating a significant negative relationship between death anxiety and life satisfaction (Arslan, 2019; Ekşi et al., 2021; Given & Range, 1990; Hululular, 2019; Roshani, 2012; Taghiabadi et al., 2017; Tate, 1983; Xie & Liu, 2022). On the other hand, there are also studies that show no significant relationship between them (Sağırer, 2021; Toplanır, 2018). In studies examining the relationship between death anxiety and psychological well-being, death anxiety is primarily associated with one of the types of psychological well-being, namely, spiritual well-being (Dadfar et al., 2016; Feng et al., 2021; Mansori et al., 2018; Shirkavand et al., 2018).

In the existing literature, two studies have been identified that simultaneously examined death anxiety, life satisfaction, and psychological well-being, and these studies produced some differences in their results (Özer et al., 2021; Shirkavand et al., 2018). However, in Shirkavand et al.'s (2018) study, well-being was examined as spiritual well-being rather than direct psychological well-being. In summary, while the prevailing literature tends to suggest a significant relationship between death anxiety and life satisfaction, there have been studies that did not support this

relationship, and findings regarding the relationship between these two variables have been inconsistent. When examining the concept of psychological well-being in conjunction with death anxiety, it has primarily been approached through the lens of spiritual well-being. Additionally, the sample groups studied in these researches have often consisted of elderly individuals.

This study aims to contribute to the literature by examining the relationship between death anxiety, life satisfaction, and psychological well-being in middle adulthood individuals. Additionally, it is aimed to determine whether these three variables differ according to gender, age and educational status. It is believed that individuals in middle adulthood can live a healthier and more peaceful life in their current period; and also in order to transition to old age with a more positive attitude, death anxiety, life satisfaction and psychological well-being may play a role in this process and it is. The general problem of the research can be expressed as “Are there significant relationships between death anxiety, life satisfaction, and psychological well-being in middle adulthood individuals?”. In order to address this general problem, the following questions are aimed to be answered:

- i. Do death anxiety, life satisfaction, and psychological well-being levels differ according to gender, age, and education level?
- ii. Are there significant relationships between death anxiety, life satisfaction, and psychological well-being levels?
- iii. Do levels of death anxiety and life satisfaction significantly predict psychological well-being?

Method

Research Design

In this study, a relational survey model was employed to examine the relationships between death anxiety, life satisfaction, and psychological well-being levels of individuals in middle adulthood.

Study Group

The study group of this research consists of 340 voluntary individuals residing in Istanbul in the year 2022, ranging in ages from 40 to 59, with various levels of education (elementary school, middle school, high school, associate degree, undergraduate, postgraduate), 168 of whom are female and 166 are male. When determining the age range of the study group, developmental psychology theories were taken into consideration. According to Levinson (1986), one of the leading

theorists of the adulthood period (1986), middle adulthood covers individuals aged approximately between 40 and 65. Based on this, it is assumed that the transition to middle adulthood begins in the early 40s, and as individuals approach their 60s, they move towards late adulthood. Therefore, it is thought that the characteristics of participants in the age groups of 40-49 and 50-59 may differ. In line with this, two different groupings were made in terms of the age variable. In order to examine the differentiation of death anxiety, life satisfaction, and psychological well-being according to gender, in line with the research objective, care was taken to select a similar number of female and male participants in the participant group. To include individuals from different educational levels in the sample, individuals from every educational level were included in the study. Non-probability convenience sampling method was used to collect the data. In this method, researchers work with voluntary individuals they can reach in their immediate environment (Erkuş, 2005). Descriptive information about the study group is provided in Table 1.

Table 1
Frequency Distributions for Participant Gender, Age, and Education Level

	Variables	F	%
Gender	Female	168	50,3
	Male	166	49,7
Age	40-49	190	56,9
	50-59	144	43,1
Education	Primary and Middle S.	81	24,3
	High School and Associate Degree	91	27,2
	Undergraduate and Postgraduate	162	48,5

As indicated in Table 1, there are 168 female participants (50.3%) and 166 male participants (49.7%). Among the participants, 190 individuals (56.9%) fall within the age range of 40-49, while 144 individuals (43.1%) are in the 50-59 age range. Regarding the education level, there are 81 participants (24.3%) with elementary to middle school education, 91 participants (27.2%) with high school to associate degree education, and 162 participants (48.5%) with undergraduate to postgraduate education.

Data Collection Instruments

Demographic information form. A short demographic information form was prepared by the researchers to determine the demographic details of the individuals participating in the study, including gender, age, and education level.

Death anxiety scale (DAS). The Death Anxiety Scale is a 5-point Likert-type scale consisting of 20 items developed by Sarıkaya (2013) to measure individuals' levels of death anxiety. The scale has a minimum score of 20 and a maximum score of 100. The scale consists of three subscales: uncertainty about death, thinking and witnessing death, and suffering. There are no reverse items in the scale. The scale's

item-total correlation, exploratory and confirmatory factor analysis, significance of the 27% upper-lower group difference, criterion validity, internal consistency, and test-retest reliability were examined. As a result of the reliability analysis of the scale, Cronbach's Alpha and test-retest methods were utilized, resulting in values of 0.95 and 0.82, respectively. All of these findings indicate that the scale is a valid and reliable instrument.

Life satisfaction scale (LSS). The Life Satisfaction Scale is a unidimensional scale consisting of 5 items developed by Dağlı and Baysal (2016) to measure individuals' perceptions of life satisfaction. The scale is a 5-point Likert-type scale ranging from 1 (strongly disagree) to 5 (strongly agree). The minimum score that can be obtained from the scale is 5, while the maximum score is 25. The scale's content validity and construct validity were examined, and exploratory and confirmatory factor analyses were used for construct validity. After the reliability analysis, the Cronbach's Alpha coefficient was found to be 0.88, and the test-retest value was 0.97.

Psychological well-being scale (PWS). The Psychological Well-Being Scale is a scale developed by Diener et al. (2009) and adapted to Turkish culture by Telef (2013) to assess individuals' psychological well-being. The scale is used to evaluate individuals' psychological well-being. The items on the scale are answered on a scale of 1 (strongly disagree) to 7 (strongly agree). Scores on the scale can range from a minimum of 8 to a maximum of 56, indicating that individuals with higher scores have many psychological resources. Exploratory and confirmatory factor analyses were used for the construct validity of the scale, and similar scales were used for criterion validity. As a result of the reliability analysis, the Cronbach's Alpha coefficient was found to be 0.80.

Data Collection

Permission was obtained from Marmara University Institute of Educational Sciences Research and Publication Ethics Committee to conduct the study. The study was deemed ethically appropriate (Approval Date and Approval Number: 31.08.2022/06-31). Before collecting data, all individuals in the study group were informed about the purpose of the study, and their consent was obtained for participation. Data were collected through scale forms delivered in person to the participants and via scales prepared on an online platform. The reason for collecting data in this way is to provide efficiency in terms of time and cost to the researchers. This allows reaching a large number of people in a short period. After data collection, 6 individuals with outlier data were removed from the dataset, and the analysis was conducted using the data of 334 individuals.

Data Analysis

The data collected in the study were analyzed using the SPSS-21 software package. In the analysis of the data, descriptive statistics such as frequency, arithmetic mean, and standard deviation were used. Independent Samples t-test, One-Way ANOVA (with Levene's test and Tukey tests), Pearson Product-Moment Correlation, and Multiple Linear Regression analyses were used to understand the relationships between death anxiety, life satisfaction, and psychological well-being and whether these variables differ according to gender, age, and education level.

Multiple regression is used when there is one dependent variable and two or more independent variables (Tutar & Erdem, 2022). Therefore, the multiple regression analysis was used to examine the level at which death anxiety and life satisfaction predict psychological well-being, given that there were two independent variables (death anxiety and life satisfaction) and one dependent variable (psychological well-being). Prior to commencing the data analysis process, checks were performed for outliers, incorrectly entered data, and missing data, as recommended by Pallant (2016). There were no erroneous or missing data in the dataset.

Results

The reliability of the scales used in the study was assessed using Cronbach's Alpha coefficient, and the results are presented in Table 2.

Table 2

Reliability analysis for death anxiety, life satisfaction, and psychological well-being scales

Variable	Cronbach Alfa (a)	The number of items	X	sd
Death Anxiety	,96	20	50,73	22,14
Life Satisfaction	,85	5	16,32	4,76
Psychological Well-Being	,83	8	43,93	7,67

Özdamar (2002) has stated that the Cronbach's Alpha value, between 0.81 and 1.00, indicates high reliability, and when Table 2 is examined, it can be seen that the Cronbach's Alpha value for each scale is greater than 0.81, indicating high reliability of the measuring instruments. Based on this information, it was tested whether the data showed a normal distribution or not.

For social sciences, another way to determine whether the data is normally distributed is to look at the skewness and kurtosis values. Skewness and kurtosis values falling between -1.5 and +1.5 indicate that the data follows a normal distribution (Tabachnick & Fidell, 2013). The skewness and kurtosis coefficients of the scales are shown in Table 3.

Table 3*Skewness and kurtosis values for death anxiety, life satisfaction, and psychological well-being scales*

	Skewness Coefficient	Kurtosis Coefficient
Death Anxiety	,47	-,82
Life Satisfaction	-,30	-,53
Psychological well-being	-,57	-,36

The skewness coefficient for the Death Anxiety Scale data is -0.47, while the kurtosis coefficient is -0.82. For Life Satisfaction data, the skewness coefficient is -0.30, and the kurtosis coefficient is -0.53. Finally, for Psychological Well-being data, these values are -0.57 and -0.36, respectively. As seen in Table 3, since these values fall within the range of -1.5 to +1.5, it can be said that the data follows a normal distribution.

Independent Samples T-Test for Gender and Age Variables

An Independent Samples T-Test was conducted to examine whether the levels of death anxiety, life satisfaction, and psychological well-being differ according to age and gender. The results of the analysis are presented in Table 4.

Table 4*Analysis of death anxiety, life satisfaction, and psychological well-being scores by gender*

	Group	N	X	sd	df	t	P	
Death Anxiety	Gender	Female	168	57,11	23,09	332	5,53	,00
		Male	166	44,26	19,14			
	Age	40-49	190	51,87	22,39	332	1,09	,28
		50-59	144	49,21	21,79			
Life Satisfaction	Gender	Female	168	16,39	4,75	332	,26	,80
		Male	166	16,25	4,79			
	Age	40-49	190	15,99	4,86	332	-1,44	,15
		50-59	144	16,75	4,61			
Psychological Well-Being	Gender	Female	168	44,05	7,77	332	,32	,75
		Male	166	43,79	7,56			
	Age	40-49	190	43,17	7,51	332	-2,06	,04
		50-59	144	44,91	7,75			

According to the findings obtained, the level of death anxiety does not show a significant difference based on age ($t= 1.09$; $p>.05$), but it does show a significant difference based on gender ($t=5.53$; $p<.05$). The average death anxiety score for females is 57.11, while the average death anxiety score for males is 44.26. The difference in averages is statistically significant, indicating that female participants have higher levels of death anxiety than male participants. There were no significant differences in individuals' perceptions of life satisfaction based on age ($t=-0.44$; $p>.05$) or gender ($t=0.26$; $p>.05$). While there was no significant difference in psychological well-being based on gender ($t=0.32$; $p>.05$), a significant difference was observed based on age ($t=-2.06$; $p<.05$). Specifically, individuals in the 50-59 age range have

higher levels of psychological well-being ($X=44.91$) compared to those in the 40-49 age range ($X=43.17$).

One-Way ANOVA Test Based on the Education Variable

One-Way ANOVA was conducted to test whether there were differences in death anxiety, life satisfaction, and psychological well-being based on the level of education. The results of the analysis are presented in Table 5.

Table 5

Analysis of death anxiety, life satisfaction, and psychological well-being scores by educational level DA: Death Anxiety;LS: Life Satisfaction, PWB: Psychological Well-Being

	Educational Level	N	X	sd	Source Variance	Sum of Squares	df	Mean Squares	F	p
D A	Primary and Middle S	81	56,60	22,21	B.G.	3694,14	2	1847,07	3,83	,02
	High School and Associate Degree	91	48,89	21,47	W.G.	159582,07	331	482,12		
	Undergraduate and Post-graduate	162	48,82	22,09	∑	163276,28	333			
L S	Primary and Middle S	81	16,11	5,58	B.G.	64,93	2	32,46	1,43	,24
	High School and Associate Degree	91	15,74	4,76	W.G.	7491,79	331	22,63		
	Undergraduate and Post-graduate	162	16,75	4,28	∑	7556,72	333			
P W B	Primary and Middle S	81	44,53	8,44	B.G.	261,50	2	130,75	2,25	,11
	High School and Associate Degree	91	42,48	7,49	W.G.	19258,78	331	53,13		
	Undergraduate and Post-graduate	162	44,43	7,26	∑	19520,28	333			

When examining the obtained results, it is observed that only the level of death anxiety differs according to the variable of education level ($F=3.83$; $p<.05$). It was determined that the levels of life satisfaction and psychological well-being do not show a significant difference according to the variable of education level ($p>.05$). Based on this information, the post-hoc analysis technique was used to determine which groups the difference originated from. To decide which of the post-hoc multiple comparison tests to use, the Levene's test was conducted. Due to the homogeneity of variances, the Tukey test was used. The analysis results obtained from the Tukey test are presented in Table 6.

Table 6*Comparison of death anxiety levels by education level categories*

Post Hoc Testi	Educational Level	Educational Level	Mean Differences	p
Tukey Test	Primary and Middle School	High School and Associate Degree	7,71483	,06
		Undergraduate and Postgraduate	7,78395*	,03
	High School and Associate Degree	Primary and Middle School	-7,71483	,06
		Undergraduate and Postgraduate	0,06912	1,00
	Undergraduate and Postgraduate	Primary and Middle School	-7,78395*	,03
		High School and Associate Degree	2,87647	1,00

As seen in Table 6, individuals with a higher education level (bachelor's degree or higher) have significantly lower levels of death anxiety compared to those with lower education levels (elementary or middle school) ($p < .05$).

Pearson Product-Moment Correlation Analysis

Pearson Product-Moment Correlation Analysis was conducted to determine the degree and strength of the relationships between the variables of death anxiety, life satisfaction, and psychological well-being. The analysis results are presented in Table 7.

Table 7*Pearson product-moment correlation analysis showing the relationships between death Anxiety, life satisfaction, and psychological well-being*

Variables	1	2	3
Death Anxiety	1	-,09	-,17**
Life Satisfaction		1	,63**
Psychological Well-Being			1

P<0.01

According to the obtained findings, there is a weakly negative significant correlation between death anxiety and psychological well-being ($r = -,17$; $p < .01$), a strong positive correlation between life satisfaction and psychological well-being ($r = ,63$; $p < .01$). There is no significant relationship between death anxiety and life satisfaction.

Multiple Linear Regression Analysis

The results of the multiple linear regression analysis conducted to predict the psychological well-being levels of individuals in middle adulthood based on their death anxiety and life satisfaction are presented in Table 8.

Table 8*Multiple linear regression analysis for predicting psychological well-being by death anxiety and life satisfaction scores*

Variable	B	Standard error	β	t	p	Multiple r	Partial r
Constant	29,59	1,43	-	20,75	,00		
Death Anxiety	-,04	,02	-,11	-2,64	,01	-,17	-,14
Life Satisfaction	1	,07	,62	14,67	,00	,63	,63

R=,64 R²=,41F_(2,331)= 115,28 p=,000

The findings indicate that death anxiety and life satisfaction scores significantly predict psychological well-being scores ($F = 115.28$; $p < 0.01$). As stated in Table 8, it was found that the combination of individuals' death anxiety and life satisfaction scores explains approximately 41% of the total variance. According to the standardized regression coefficient (β), the relative importance of the predictor variables on psychological well-being is as follows: life satisfaction and death anxiety. Life satisfaction positively and significantly predicts psychological well-being, while death anxiety negatively and significantly predicts psychological well-being.

Discussion

In this study, we examined whether there were differences in death anxiety, life satisfaction, and psychological well-being among middle-aged individuals based on gender, age, and educational level. Additionally, we examined the relationships between death anxiety, life satisfaction, and psychological well-being.

According to the findings of the study, it has been determined that in middle adulthood, death anxiety does not significantly vary with age, but it does differ significantly according to gender and educational status. It was found that women have a higher level of death anxiety than men. The identification of which groups the significant difference in educational status originates from revealed that the difference stems from the primary-secondary school and bachelor's-postgraduate groups. Individuals with a bachelor's-postgraduate level of education were found to experience a lower level of death anxiety compared to those with a primary-secondary school education. When reviewing the literature in the field, studies supporting the results of this research, showing that death anxiety differs according to gender and is higher in women compared to men, have been encountered more frequently (Keller et al., 1984; Kimter & Köftegöl, 2017; Seyhan, 2015; Yüksel et al., 2017). This situation can be interpreted as women being more likely to feel death anxiety compared to men, or it may be due to women being more capable of expressing their emotions than men. In other words, men may experience death anxiety to the same extent as women but may not express it outwardly.

When examining studies that explore the relationship between death anxiety and age variable, conflicting results have been observed (Gesser et al., 1988; Russac et al., 2007; Yüksel et al., 2017). Russac et al. (2007) concluded that death exhibits fluctuating patterns in relation to age. Regardless of age, experiences such as having faced death previously, traumatic encounters related to death, or illness can also influence death anxiety. Considering the studies that examine death anxiety in relation to educational level, it has been observed that a higher level of education is associated with lower levels of death anxiety, similar to the findings in this study (Erdoğan &

Özkan, 2007), or that there is no significant relationship between the two (Kimter & Köftegöl, 2017; Yüksel et al., 2017). Due to the diversity in results, it is thought that death anxiety may be more closely related to accepting death rather than factors such as age, gender, or educational level.

In this study, it was determined that the life satisfaction of middle-aged individuals does not vary significantly according to age, gender, or educational status. The results of this study were compared with existing studies in the field. Parmaksız (2020) conducted a study with a sample group consisting of adult individuals and obtained findings parallel to this study, concluding that life satisfaction does not differ by gender and educational status. Demirel (2018), in a study involving adult individuals, found that life satisfaction does not vary according to age and gender but does differ according to educational status, with those who have completed primary school reporting higher life satisfaction compared to those with college or university degrees. One reason for this could be that life satisfaction may be influenced by factors other than age, gender, and educational status, such as health and economic conditions. Since the measurement tool used in the study examines life satisfaction in a single dimension, the study may not have provided a comprehensive assessment of life satisfaction along with different dimensions.

According to the findings obtained from this study, psychological well-being in middle-aged individuals does not differ significantly according to gender and educational status, but it does vary significantly according to age. Individuals in the 50-59 age range were found to have higher levels of psychological well-being compared to those in the 40-49 age range. In contrast to the findings in this study, Tura (2019) conducted a study where he found that psychological well-being varies according to educational status, with individuals having a postgraduate education level reporting significantly higher psychological well-being compared to those with a high school education level. While there are studies in the literature that show psychological well-being differs significantly according to age and gender, there are also studies that indicate no significant differences (Diener & Suh, 1997; Eryılmaz & Ercan, 2011; Kocaman, 2019; Tura, 2019; Xing & Huang, 2014). It is believed that these discrepancies in the literature may be due to social or financial factors not accounted for as variables in the studies, and it is suggested that future research on other variables should shed light on this area.

When examining the relationships between death anxiety, life satisfaction, and psychological well-being, this study found a weak negative relationship between death anxiety and psychological well-being, whereas a strong positive relationship existed between life satisfaction and psychological well-being. However, no significant relationship was found between death anxiety and life satisfaction.

Additionally, when assessing the extent to which death anxiety and life satisfaction predict psychological well-being, it was determined that the combination of death anxiety and life satisfaction accounted for approximately 41% of the total variance. The predictive power of life satisfaction (positive) and death anxiety (negative) on psychological well-being was observed. In the literature, there are studies that support the results of this study, indicating that there is no significant relationship between death anxiety and life satisfaction (Sağırer, 2021; Toplanır, 2018). However, contrary to this result, there are studies that report significant negative relationships (Arslan, 2019; Ekşi et al., 2021; Given & Range, 1990; Hululular, 2019; Roshani, 2012; Tate, 1983; Taghiabadi et al., 2017; Xie & Liu, 2022). Özer et al. (2021) also conducted a study on perceived COVID-19 risk among healthcare workers, where they found no relationship between death anxiety and life satisfaction, a low-level negative relationship between death anxiety and psychological well-being, and a moderate positive relationship between life satisfaction and psychological well-being. The results of Özer et al. (2021) research align with the findings in this study.

In conclusion, this study has revealed that death anxiety and life satisfaction serve as predictors of psychological well-being in middle adulthood. According to Erikson (1993) and his psychosocial development theory, individuals in the final stage of development may experience either ego integrity or despair. During this stage, individuals engage in a general evaluation of their lives, which can lead to either a positive continuation of the aging process or a sense of hopelessness driven by regrets of the past. Achieving life satisfaction becomes crucial for ego integrity at this stage. Failure to accept one's past and to resolve personality crises by maintaining ego integrity negatively impacts psychological functioning (Rylands & Rickwood, 2001). Additionally, when ego integrity is not achieved in the final stage of life, it can be accompanied by a fear of death (Erikson, 1993). Based on all these, conducting interventions aimed at reducing death anxiety and promoting life satisfaction (such as existential-based individual/group therapies, psychoeducation, etc.) can contribute to individuals' psychological well-being.

Although this study is thought to contribute to the literature by providing insights into middle-aged individuals, it also has certain limitations. The reasons behind higher death anxiety in women compared to men and how death is perceived differently according to gender were not explored in this research. Future studies could delve deeper into this by using qualitative research methods to investigate how death is perceived by both women and men, considering the gender differences in death anxiety. Furthermore, this study only examined the relationship between death anxiety and age, gender, and educational status without exploring the influencing factors on death anxiety during this stage of life. Identifying the factors that influence death anxiety during middle adulthood can contribute to the content of intervention

programs. Middle-aged individuals may struggle with accepting the transition from youth to old age. Bearing witness to the aging and eventual deaths of their own parents may lead them to reconsider and become anxious about death. Therefore, future research could assess the relationship between attitudes toward old age and death anxiety. Additionally, it may be worthwhile to investigate the relationship between death anxiety, intolerance of uncertainty, and cognitive flexibility in middle-aged individuals. Studies in this area could help individuals enter old age positively and contribute to their successful aging process by providing tools to deal with uncertainty and enhance cognitive flexibility.

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