

# [Death management](https://assignbuster.com/death-management/)

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Death, an inevitable yet painful transition in life, is normally surrounded by numerous rituals, beliefs, cultural practices and taboos. As a result, there is need to develop a positive attitude towards death and not to view it as a dreaded stranger but an expected companion to our life since it forms the integral part of human life, (buzzle. com, pp1). One is considered dead if he/she shows stoppage in heart beat and breathing, insensitivity to stimuli, unblinking eyes, cold body and change in skin color.

According to Buzzle. com, (pp1), death management plays a central role in making human beings neither to view death as an “ enemy nor live in denial”, about it but realize that “ we all live and we all die”, an occurrence which happens everyday. It is therefore crucial that death management be talked of with the same breath as crisis management. Epidemiological transition, a shift from acute infectious and deficiency diseases characteristic of underdevelopment to chronic non communicable diseases characteristic of modernization and advanced levels of development, (Wahdan, pp1) represents change in death management with the advent of industrialization.

In their study, Strickland and DeSpelder have successfully managed to provide a scholarly correlation that exist in the way the society and individuals exhibit their attitudes and emotions towards death and dying (Strickland & DeSpelder, pp7). Discussion According to Wahdan (pp1) for a long time, epidemiological transition has been believed to take a given direction; “ beginning when infectious diseases were predominant and ending when non communicable diseases.”

However, today it has been realized that the transition is a multifaceted and dynamic process given that health and disease progress in diverse ways, a situation exemplified by disappearance, surfacing and others re-emergence of diseases, example of the changes in death management in the USA. In USA today, the major causes of deaths are cardiovascular disease, cerebrovascular disease and cancer unlike the era before industrialization where death causes were many communicable diseases, (Cappuccio, pp2).

The epidemiological transition is believed to generally take place as a country changes from one level of developmental stage to the next as indicated by the level of industrialization. It is generally assumed that a developed country like the USA normally register lower incidences of infectious dieses due to improved health care, public information and state supported health care programs.

Harrison explains the concept of change in death management, which has defined morbidity and mortality during the 20th century, as largely determined by the “ industrialization, urbanization, and associated lifestyle changes”, all which have occurred in the USA as the rest of the world “ among all races, ethnic groups, and cultures” ( Harrison, pp1).

Harrison further articulates that the epidemiological transition exhibits a four phase evolution i. e. pestilence and famine, receding pandemics, degenerative and human-made diseases, and delayed degenerative diseases. USA therefore since 1900 has surpassed the four stages, and is now in the fifth stage; typified by “ an epidemic of inactivity and obesity” ( Harrison, pp1). Cappuccio (Cappuccio, pp1), identifies the major epidemiological transition determinants as; eco-biological (interaction between biology and environment), socioeconomic, psychological, and medical (biotechnology and public health), all which are variables of developmental growth over time.

Cappuccio further attribute the fall in death rates today to the medical technology which has helped in the control of the traditional infectious diseases like “ diarrhea, malaria, and tuberculosis, and the decline in infant mortality rates”. However, his study hints increases in the chronic diseases like the “ ischaemic heart disease and stroke”, and the HIV/AIDS epidemic; the most common causes of death in the world today.

There has been changes in the risk factors involved in the epidemiological transition like the “ biological factors, environmental factors, social, cultural and behavioral factors and the practices of modern medicine” , all which are crucial in death management (Wahdan, pp1). For example, since industrialization, there has been improvement in public health through campaigns, legislations, medical research and discoveries as opposed to the olden days where crowding and poor waste management led to outbreak of communicable diseases like cholera which could wipe a whole estate population.

Nutrition transition in the USA since the advent of industrialization has been witnessed. The increased public awareness on healthy eating habits coupled with a availably of variety of foods from different parts of the world, has helped reduce the rise factors associated with poor nutrition like diseases outbreak, mortality rates and eventual state of old population.

Improved health care services and death management strategies have also helped to reduce the once common child related complications like the obesity in the USA. , resulting into reduced child deaths. Another notable change in the death management since the advent of industrialization is the enactment of many laws, polices and rules to deal with the issues. For example, there have been pieces of legislation dealing with health policy, body disposal, and genetically modified foods.

Disaster preparedness has also been developed especially following the September 11 attack and other weather related disasters which have seen training of volunteers to assist in management of mass deaths that may occur. Explaining death to a child is another death management strategy that has cropped up since the advent of industrialization, as a necessary part of personal development, growing up, and helping him or her understand death fully.

Today unlike before, there are professionally trained death management experts and therapists who help the children freely express their feelings and understand the rituals attached to death like laying of wreaths, caskets, urn and visitation as well as the reason why the deceased body is cold. Due to advanced medical practices in the USA since 1900 coupled with quality health, there has been decline in the mortality rate, a situation shown by longer life span with high birth rate and low death rates.

Body cremation, a death management ritual, has also taken a great centre stage since industrialization as an alternative to burial of the body which is cheaper and does not involve cost of casket (buzzle. com, 2008). This practice has evolved with time to a state where modern technology like vaporization and oxidation of large organs and soft tissues to speed up the process. New laws have also been created to guide and authorize the cremation process as agreed by the next of kin (buzzle. com, pp1).

According to Wahdan, (pp1), since the beginning of industrialization, there has been heavy rural-urban migration in the USA resulting into high population density in urban areas, a situation which acts a catalyst for the quick spread of infectious diseases especially the pollution related dieses. At the same time, the urban population influx, the “ group care for children increases”, a situation which offers a potential environment for spread of infectious diseases like influenza and measles, though the existing health system has always contained their spread (Strickland & DeSpelder, pp1).

Euthanasia is another example of the changes in death management since industrialization. Though it has generated much controversies as debates, legal and spiritual and moral implications, the practice which some supporters call “ pain free dignified” death is toady administered in some USA hospitals either to quicken death of a patient or avoid much an accumulation of hospital bill that the tormented family may not raise (buzzle. com, pp1).

Before industrialization, Euthanasia as a means of death management had not emerged as the religious and moral views of life took the centre stage on the sanctity and dignity of human life let alone formation of such interest groups like the Voluntary Euthanasia Society which vigorously campaign for legalization of the practice.

The advancement of the mass media has also played a role in the changes in death management. For example, mass media has introduced “ behavioral changes and social value systems”, some of which have negative influences on health like the modern day tobacco, alcohol consumption, and high fat content foods which have been portrayed as very normal and part of life though they are injurious to life and cause death.

Rotter and his colleagues also relate the change in the death management to the increase in the “ incidence and prevalence of chronic non communicable diseases, with the burden of disease changing from the younger individuals toward the adult population, particularly the elderly, and bearing a disease has shifted from being a short process to becoming part of our daily existence”, (Rotter et al pp1). There has also been appearance of drug-resistant strains which increases death rates especially due to prevalent use of some “ antimicrobials in the treatment of diseases like tuberculosis”.

Wahda attributes this change to “ chromosomal mutations in the organism”, a transformation which reaches a position of “ dominance in the presence of the antimicrobial against which it has been developed”. The resistance of the “ malaria parasite to chloroquine” is also identified as a major draw back to the development of anti-malarial drugs. It is also evident that the epidemiological transition in the USA is mainly characterized by existence of high incidence of obese population, diabetes, alcohol and drug abuses which are responsible for high death rates apart from the non-communicable disease risks such as tobacco smoking.

Drug abuse and prevalence of Sexually Transmitted Infections have not only increased the death rate but also caused divorce and separation in many families. Finally, Harrison, (Harrison, pp1), explains that since the advent of industrialization, there has been a downward trend in the prevalence of “ some chronic and degenerative diseases,” in the USA thereby lowering the associated death rates. Conclusion As postulated by Strickland & DeSpelder, death management forms the very basis of a society’s development, it is necessary that public awareness and educational campaigns be made on the need for healthy lifestyles.

These efforts will ensure that positive behavioral changes which are fundamental for the prevention and control of diseases are properly reinforced (Wahdan, pp1). Such a noble process would help safeguard the gains which the United States of America has gained since the advent of industrialization especially in the need to manage and control the occurrence of diseases, such as smoking, obesity, alcohol consumption and other dangerous behavior and lifestyles ,(Wahdan, pp1).