



Anthropological and social approach to death anxiety in the state security forces during the COVID-19 crisis

Enfoque antropológico y social de la ansiedad ante la muerte en los cuerpos y fuerzas de seguridad del estado en la crisis de la COVID-19

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Abstract

The recent events sweeping the planet in all their dimensions (environmental, health, economic, political) contribute to the fact that human beings find themselves devoid of personal resources to deal with them. During the first wave of the COVID-19 pandemic, professionals considered essential, such as the Security Forces and Corps, tried to provide the population with a certain degree of well-being and security. However, they paid the high price of many members of this group generating anxiety in the face of death, especially among those on the front line. This study, using a descriptive and mixed methodology, aims to determine the level of death anxiety in a large sample of these professionals (n = 1705) and to carry out an anthropological and social analysis of their perceptions of these events. The results have shown a significant presence of death anxiety in members of the Security Forces and Corps, especially during the pandemic's first phase, allowing for different anthropological interpretations.

Keywords: security forces, COVID-19, death anxiety, anthropology, disease.

Resumen

Los recientes acontecimientos que están azotando el planeta en todas sus dimensiones (medioambientales, sanitarias, económicas, políticas, etc.) están contribuyendo a que el ser humano se encuentre desprovisto de recursos personales con los que hacerles frente. Durante la primera ola de la pandemia de COVID-19, los profesionales considerados esenciales como las Fuerzas y Cuerpos de Seguridad intentaron proveer a la población de cierto bienestar y seguridad, pero pagaron el alto precio de que muchos miembros de este colectivo generaron ansiedad ante la muerte, sobre todo producida en aquellos que estuvieron en primera línea. Este estudio, mediante el empleo de una metodología descriptiva y de naturaleza mixta, pretende conocer y determinar el nivel de ansiedad ante la muerte de una amplia muestra de estos profesionales (n = 1705) y realizar un análisis antropológico y social de sus percepciones ante los acontecimientos. Los resultados han demostrado una significativa presencia de ansiedad ante la muerte en los miembros de las Fuerzas y Cuerpos de Seguridad, especialmente durante la primera fase de la pandemia, que permiten distintas interpretaciones antropológicas.

Palabras clave: fuerzas de seguridad, COVID-19, ansiedad ante la muerte, antropología, enfermedad.

Summary

1. Introduction | 2. The context of the COVID-19 pandemic in the state security forces | 3. Materials and methods | 4. Results | 5. Discussion | 6. Conclusion | References.

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1. Introduction

Since human beings have been more conscious of their finitude, they have tried to defeat the passage of time, ageing and death in as many ways as possible (Lyons, 2018; Hidalgo, 2020). Far from winning this battle, humans are confronted every day with medical diagnoses with a poor prognosis that predict an inevitable future they do not want to face (Lázaro-Pérez, 2016).

Although the concepts of health and illness have significantly varied throughout history and are different from culture to culture and society to society, fear or anxiety about death and loss is a common determinant and common factor throughout the world because it is a human characteristic (Nyatanga & de Vocht, 2006; Furer & Walker, 2008).

Nevertheless, there is also social suffering due to the divergence that sometimes arises between the beliefs and values of society and those of individuals (Sarmiento & Rodríguez Terceño, 2018). An obvious example has been seen in the attitude of the so-called "denialists" of the pandemic, creating the impossibility of applying such values in favour of community health. In general, the tension in the face of social adaptation produces the appearance of conflicts and the expansion of physical and mental illnesses, which have become so common in complex societies (Lázaro-Pérez *et al.*, 2021) and which sometimes affect the continuity of their lives.

Nowadays, not only the emergence of diseases that threatens people's lives but in the last five years, humanity has been confronted with many stimuli that threaten its integrity. One of the latest and still ongoing was the spread of the SARS-CoV-2 coronavirus, which causes the disease COVID-19, threatening the security of the entire planet and violating physical and mental health, which, in 2022, is still lurking among the population. Elements such as risk, threat, vulnerability and danger were very much in force as factors that could damage security, with prevention as one of the basic premises (Rueda, 2017).

Environmental catastrophes that have historically threatened humans, but are intensifying due to global warming, such as floods, volcanic eruptions, fires, or hurricanes, generate a state of vulnerability in people that threatens their safety and survival without them being able to do anything about it (Padmaja *et al.*, 2022, Zaki, 2020).

Another event that shatters emotional stability because of what it represents for the security of people's lives is the recent invasion of Ukraine. A war broadcast lives and enhanced through social networks, where viewers around the world have become involved to the point of feeling the death of each of the victims they saw on television or imagined as if they were a familiar person, and a sense of helplessness because of the threat to the rest of the countries by the invader. (Jawaid, Gomolka & Timmer, 2022; Sofiiia, 2022). However, this is not the only war being waged in the world, and human beings are aware of it. In this sense, Malinowski and Ritcher (1941, p. 143) already pointed out decades ago, amid World War II, that "totalitarianism, by destroying the resources of culture and its structure, is incompatible with the constitution of human societies [...], maintaining and transmitting wealth, solidarity, reason and conscience are the real values and signs of civilisation". This unreason creates permanent insecurity, which, together with other economic, seasonal and socio-cultural problems, sometimes overwhelms the individual, and he or she finds, as the best way of escape, not to continue with his or her life (Carbonell, 2007).

However, human beings have been linked throughout their existence to risk, danger, and the proximity of death. "Insecurity, instability, fear and lack of meaning are the most frequent feelings in complex societies" (Antón, 2013, p. 82). Fear of the loss of personal, cultural and social identity continues to be a factor that moves the individual toward irreparable chaos or to conquer the spirit of belonging and rootedness that makes them capable of even losing their lives, but this time in defence of ideals and not out of defeatism or despair.

This study is developed from the paradigm of medical or health anthropology, or also considered biopsychosocial (Cardoso, 2020), favoring the anthropological understanding of social problems in a global context, allowing an integrative vision of health and individual and collective well-being.

2. The context of the COVID-19 pandemic in the state security forces and corps

Since the outbreak of the COVID-19 pandemic, and more specifically in the first waves that occurred in 2020, many professionals from different areas in Spain have been handling the situation to help the rest of the population and try to re-establish the feeling of normality and security taken away by the coronavirus.

Among them, one of the most punished and, at the same time, most minor recognised groups were the State Security Forces and Corps (Fuerzas y Cuerpos de Seguridad del Estado: FFCCSE), despite being considered one of the essential professions after the State of Alarm Decree.

Many of these professionals had to face the virus unprotected with material to confront an enemy that was killing millions of people not only in Spain but all over the world (Gómez-Galán *et al.*, 2020; Laufs & Waseem, 2020; Stogner, Miller & McLean, 2020). The FFCCSE has played a fundamental protagonist in the security and protection of citizens. Among other activities, they had to manage the installation of field hospitals, the decontamination of centres where vulnerable or infected people were found, health attention or the transfer of patients and corpses, and their functions linked to the maintenance of public order and security.

Although in this profession, including the Police (Policia Nacional) and Civil Guards (Guardia Civil), they are accustomed to handling complex and overwhelming situations and to undertaking actions that have required a great deal of preparation and expertise, the chaos that arose during those months provoked an unusual need to respond, putting their lives and those of their families at risk. A situation in which continuous contact with illness and death, in such an exposed manner, generated anxiety because of the real danger it entailed and the moral and emotional destruction it was causing in society (Frenkel *et al.*, 2021; Gómez-Galán *et al.*, 2020; Lázaro-Pérez *et al.*, 2020; Mehdizadeh & Kamkar, 2020; Talavera *et al.*, 2021).

Numerous researches in professions considered essential have shown high ranks of anxiety about death as a result of the COVID-19 pandemic, given that they had to deal directly with people affected and in a context of high mortality, as is the case of health workers, social workers, residential staff and even the FFCCSE themselves (Hernández-Fernández & Meneses-Falcón, 2022; Karabağ & Fidan, 2022; Lázaro-Pérez *et al.*, 2020; Martínez-López *et al.*, 2021; Shinan-Altman *et al.*, 2022).

In this sense, it is essential to know the psychological and emotional state in which the professionals of the Armed Forces were in order to prevent possible deficiencies in the event of having to face an event of the magnitude of a pandemic, as well as other catastrophes, and in which they may be affected by anxiety in the face of death.

3. Materials and methods

The objectives of this research were twofold. Firstly, the aim was to determine the level of death anxiety of members of the State Security Forces and Corps. Secondly, to know the subjective perceptions and experiences of these professionals in relation to anxiety in the face of death in their professional practice. An approximation was made to anxiety both in its general index and in its corresponding subscales giving to the Collett-Lester Death Anxiety Scale (1969).

The research design was based on a methodological pluralism that involves the approach of quantitative and qualitative data, which allows analyzing the discourse of the participants. Thus, the Collett-Lester Fear of Death Scale was used, which is made up of four subscales: "Fear of One's Death," "Fear of One's Process of Dying," "Fear of the Death of Others," and "Fear of the Process of Dying of Others", making an approach to the phenomenon of death anxiety from a multidimensional perspective. This Collett-Lester fear of death scale was chosen because it contains subscales that would allow a deeper understanding of the fear of death of professionals such as Spanish police officers and civil guards, who constituted our study population. The response alternatives are distributed on a Likert-type scale from 1 (not at all) to 5 (very much).

Two independent variables were determined: (a) socio-demographic and (b) subjective perceptions of the current status at work, through closed and open questions from a methodological pluralism, thus obtaining a global vision of the study phenomenon.

Regarding socio-demographic variables, the following were studied:

Gender, age, professional category, and whether they operated during the first phase of the pandemic. Subjective perceptions, questions related to work organisation, the means of personal protection, and professional recognition were addressed.

The number of participants in the research amounted to 1,705 (N = 1,705), distributed as follows: 800 National Police and 905 Civil Guards. Most of the sample comprises men, representing 86.9% of the total, and women signify 13.1%, a sign of a much masculinised profile. About age, the principal level is between

31 and 40 years old, representing 32.3%, followed by professionals between 41 and 50 with 33.4%. Next are those up to 30 years of age. A last group is shown by those aged 51 to 60 and those aged 60 and over.

About the professional category, 46.9% are Civil Guard and 53.1% National Police. Of these, 69.2% carried out their work early in the pandemic, specifically during the first, and hardest, first wave. For a more in-depth analysis of these data, we refer to previous studies (Gómez-Galán *et al.*, 2020; Lázaro-Pérez *et al.*, 2020) in which we also analysed a large sample of military personnel, as well as police officers, civil guards and other members of the Armed Forces.

The field research took place during the summer of 2020 in Spain. Fundamental to the fieldwork was the help of the unions and professional associations linked to the Armed Forces, who decided to participate voluntarily in the research. Through them it was possible to distribute the questionnaire. It was carried out through an on-line application specialized in survey techniques.

It should be noted that, although a control group was not specifically established, a question was added to the questionnaire to establish who had worked directly in the time frame of the first wave. Thus, it would be possible to determine whether there were differences between those who worked during those critical moments and those who did not.

The IBM SPSS program (version 24) was used for the development of all the statistical work. Of course, a descriptive analysis was previously performed to determine, according to the subscales used and the general index, the levels of death anxiety. A simple content analysis of the discourse incorporated in the open questions of the questionnaire was carried out to analyse the subjects' perceptions. In this paper, we will focus mainly on this content analysis, referring to the studies already published (Gómez-Galán *et al.*, 2020; Lázaro-Pérez *et al.*, 2020), in order to obtain more information on the quantitative part.

4. Results

Firstly, the following results are observed in an estimate to the DA (Death Anxiety) scale, both in its overall index and in the subscales as a whole. Regarding "Fear of One's Death" (DA1), in this subscale 52.5% registered positive values. We are talking, therefore, about more than half of the sample.

The fear of the virus in this first wave and its consequences influenced the participants' perceptions. They found themselves in a different scenario where they had to carry out their work. In addition, the risk of contagion and, as a consequence, the danger of being the source of the spread of the coronavirus are determining elements in terms of the fear of death, as can be seen in the participants' discourses: *"It is an unknown virus, I am afraid of catching it, and I could die. Many people are dying; it is out of control" / "I am afraid of catching the virus and dying" / "Many people are dying; I could be next"*.

Higher percentages were obtained for Fear of One's Process of Dying (DA2), reaching 69.6%. In this sense, death as a natural phenomenon acquires greater relevance when broadcast in the media, primarily when the effects of the virus and the process/evolution of the disease are known: respiratory problems, admission to the ICU, tracheal intubation process, or death in solitude. That is why the participants in the study reflect these situations: *"The worst thing is not dying from this virus per se, the worst thing is how you die" / "Knowing that you can die from pneumonia and that nothing can be done the worst thing to think that I could catch it"*.

However, the highest value for Fear of the Death of Others (DA3) with 82.9%. This figure can perhaps be explained by the functions carried out by these professionals. Beyond the coercive role of the State Security Forces, the fact is that the social function they fulfil as guarantors of the protection and security of citizens means that they identify others and their problems above their own. This perspective can be observed in their speeches: *"If I get infected and pass it on to my relatives with a fatal outcome, I would never forgive myself" / "I feel much pain when I imagine and see how people are dying every day, it is a horror" / "It makes me deeply sad that I cannot do anything to save lives from this pandemic"*.

There are similar results in Fear of the Process of Dying of Others (DA4), with 78.9%. Both subscales are closely related. This shows that not only does death produce high levels of anxiety but also that the process of dying generates a high level of discomfort as a consequence of being a group that lived with, accompanied and moved dying people during the first wave of the pandemic. These perceptions are reflected in the statements of the participants: *"I have met people who have died without having the opportunity to put them on a respirator, what a cruel death" / "The fact that people enter the hospital conscious and know that they will most likely not leave and will not be able to say goodbye is terrifying" / "An acquaintance went into the ICU"*

and saw how the others around him were dying alone and horribly. The worst thing is not being able to do anything".

Therefore, higher values of DA are obtained concerning the death and dying processes of others than if one asks about one's death and dying process. Total DA reached 69.5%, i.e., more than two out of every three professionals out of 1705 in the sample had this type of anxiety. This is a very high figure, bearing in mind; moreover, that death anxiety can cause psychological disorders and affect the development of the professional activity.

For the subjective category variables, 27.6% of the respondents stated that they currently need psychological or psychiatric treatment. Bearing that the consequences of post-traumatic processes appear sometime after the experience, it is logical to think that these data could increase as the months go by. Many participants are in extreme situations and need support: *"We have not experienced this situation before, I need help to be able to face this day to day" / "It is essential to have professional help when we are so close to death, these last few months. I do not know how to deal with it" / "I find it very difficult to sleep at night after the experiences of the day. I think I do need psychological help"*.

However, 56.4% feel that they may need these services in the next wave of the pandemic, a sign of the vulnerability of these people. This is a fact to be taken into account because the COVID-19 pandemic waves showed the possibility of successive waves over time: *"At the moment, I think I am coping well, but I do not know if I would hold on if this goes on for a long time" / "I see some of my colleagues and I think I might need help if the pandemic goes on for a long time. I am starting to doubt my abilities"*.

Instead, 88.8% believe that psychological or psychiatric treatment should be offered in the workplace as a result of the pandemic scenario: *"I think that having the necessary attention from specialised professionals in the workplace would be the most convenient way to help deal with this situation and what it is entailing" / "It would be ideal, our workplace must teach us how to handle the situations that arise from it" / "We would need to be able to have that option"*.

5. Discussion

This research appears that 56.4% of the FFCCSE professionals felt they might need psychological help in a subsequent pandemic wave, and 88.2% believed that places of work should offer psychiatric or psychological treatment. In all cases, the psychological influence on their lives of the pandemic, and the need for professional help are demonstrated. This fact is shared in other countries, and several studies attest to this (Borbély, 2021; Drew & Martin, 2020; Grover *et al.*, 2020; Edwards & Kotera, 2021; Leske *et al.*, 2021). Similar results were also found for other professional contexts (Kira *et al.*, 2020; Grover *et al.*, 2021; Menzies & Menzies, 2020).

It is significant to note that, in general, death anxiety is usually related to losing one's own life. However, the results obtained have indicated that the highest values were related to the fear of death and the process of dying of others, which suggests that for these professionals, the concern for the health of the population was greater than personal concern. This has also been found in other groups, such as the healthcare sector (Lázaro-Pérez *et al.*, 2020) or social work (Martínez-López *et al.*, 2021).

There are other interesting findings in relation to death anxiety. For example, the lack of Personal Protection Equipment (PPE) was decisive. This was not only because of the fear of becoming infected without this means of protection, but also because they could infect others, especially their family members. The perception of needing professional, psychiatric or psychological help in these circumstances is therefore clear. This issue has also been identified in other studies referring to different professions (Acosta & Iglesias, 2020; Arnetz *et al.*, 2020; Ortiz *et al.*, 2020).

It was also determined that they did not have institutional support. They felt that the work they were doing on behalf of citizens was not sufficiently recognized. Despite this perception, they showed a high level of personal fulfillment, which reflects their professionalism. It is worth noting that, although we cannot speak of it being something general, the memberships of the National Police and the Civil Guard who carried out their work at the most critical moments of the pandemic were less likely to develop AD4. This could be explained by adaptation to the new work context. From both an emotional and psychological perspective, the fear of becoming infected and seeing death so closely would offset the risk of developing AD4.

In any case, they were particularly insecure because of the fear of infecting their family members if they themselves were infected, is one of the most noteworthy findings. This completely conditioned their professional dynamics, as they sought to avoid as far as possible any uncontrolled situation that might lead to contagion, the consequences of which, at that time, were completely unpredictable. We must remember that in these early stages of the pandemic there were no vaccines or treatments, and much was unknown about the intensity and evolution of the disease. The scenario generated stress, uncertainty and also a certain loneliness in their work at the service of the public. Likewise, different studies on various essential professions offered very similar results (Martínez-López, 2020; El-Hage *et al.*, 2020).

Research has shown that the short- and medium-term effects can be severe (Liu *et al.*, 2020; Shreffler, 2020; Vignaud & Prieto, 2020), given that both the context in which they work and the performance of their duties take place in a situation that facilitates the growth of high death anxiety (Kavali *et al.*, 2020; Lee *et al.*, 2020; Sheraton *et al.*, 2020; Shinan-Altman *et al.*, 2022).

All the factors we have presented must be taken into account in times of similar catastrophes, and which are so conditioning for the members of the FFCCSE. Moreover, their work is always essential for the protection and safety of citizens. That is why the development of preventive and training programs, based on the experiences acquired, are essential.

6. Conclusion

The research has shown a significant presence of death anxiety in members of the Security Forces and Corps in the COVID-19 pandemic scenario. From an anthropological perspective, it can be determined that they have done an admirable job, facing an unknown infectious agent that was causing, especially in the first phase of the pandemic, thousands of deaths around them, against which there were practically no means or possibilities of prevention except isolation. They could not afford this as they had to carry out their professional work on the front line. However, the most striking thing is not that they were afraid for their own lives but the anxiety caused by the possibility of becoming infected and, in turn, infecting their families and loved ones. In other words, they were thinking of others more than of themselves.

This health crisis was, in short, an experience that should be taken into account with an eye to the future. It is a means of being able to anticipate, based on the knowledge of what happened, guidelines to take care of the mental health of those professionals who carry out essential tasks, as has been the case of the members of the FFCCSE studied. The dedication of the institutions protecting citizens and the professionals working for their safety (such as the Armed Forces and health workers) has been seriously compromised by the events that have taken place. These professionals have suffered enormous professional wear and tear in their work throughout the pandemic and, as we have seen, especially at the most critical moments. The anxiety in the face of death that they generated is a reflection of this critical scenario. The consequences, such as post-traumatic disorders and high levels of stress, explain the high demand for psychological services to deal with them. Programs to cope with anxiety and stress in such complex contexts are becoming increasingly necessary. For example, those based on emotional intelligence could be very useful in circumstances such as those currently experienced by mankind.

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