Review of: "Death needs, culture and emotional death proximity: Keys to intervene in social discrimination"

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Potential competing interests: No potential competing interests to declare.

This is a potentially interesting look at the role death valence plays in determining whether one experiences a “good” death. I was particularly interested in the construct of death valence and its various facets (e.g., hope, agency, dignity, etc). I also felt the discussion around death education and other psychosocial interventions aimed at improving death valence to be practically and theoretically interesting.

That said, I believe there are a few issues that need to be given additional consideration and clarity as the author moves forward in this work.

I felt the topic of the paper and its’ contribution to existing literature could have been made more clearly and succinctly up front; in both the abstract and introductory paragraphs. More specifically, I felt the paper was not clear in terms of making the connection between death valence and social discrimination. I was also not clear, on the basis of the paper, how psychosocial interventions with regard to discrimination requires an understanding of good death.

How does death and death valence relate to social inequality and discrimination?

Related to the above, the paper could be more clear in terms of explaining the linkage between death denial (or acceptance) and sex-, race-, and able-isms. How and why does death denial impact these? This point is important to detail further as it sets the stage for presenting a psychosocial intervention.

Please provide a clear construct definition of death valence, both positive and negative. What do those look like, conceptually and experientially?

I believe the paper would benefit from clearer definition and application of terror and meaning management theories.

The proposal to provide more death education at a societal level is really interesting. What would such education or training look like? What are the mechanisms of its’ and effect and what are anticipated individual and collective outcomes? Is there existing research support for this kind of intervention?

Recently, in many western countries, Medical Assistance in Dying (MAID) is becoming increasingly part of collective discussions around death. How would this contemporary issue “fit” into discussions around death, death valence, social inequality and discrimination, death interventions?

Thanks for the opportunity to review this work. Best wishes as you move forward!