

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

Daniel Spitzenstätter

Potential competing interests: No potential competing interests to declare.

I think that this article opens an interesting perspective with respect to potential positive outcomes of interventions on death attitudes.

In the following, I would like to discuss some issues I think should be considered and might benefit the author's manuscript.

One of these issues concerns the use and definition of several terms related to death attitudes. The author initially follows a conceptualization of Bassett and Dabbs (2003), who distinguish between death anxiety, death valence, and death denial. In the course of the text, the author then highlights death valence as the central and – I assume – most fundamental construct in this regard: Depending on a positive versus negative death valence, individuals either deny or accept death. While reading the manuscript, I wondered how death acceptance and positive death valence are conceptually separated? Although different conceptualizations of death acceptance have been proposed in the past (e.g., Klug & Boss, 1977; Klug & Sinha, 1988; Ray & Najman, 1974; Wittkowski, 2001; Wong et al., 1994), death acceptance is usually referred to as a (or incorporating a) positive view on (one's own) death (Neimeyer et al., 2004). Maybe the author can be more precise here in explicating how they define death acceptance and its relation to and distinction from positive death valence.

Next, I think that death valence is not a unidimensional construct. Individuals can hold positive and negative views on their own death at the same time—as, e.g., the typically only low to moderate correlations between death anxiety and death acceptance suggest (Neimeyer et al., 2004; Wittkowski, 2001; Wong et al., 1994). In addition, it could be assumed that there is some form of "neutral valence", expressing a rather indifferent viewpoint, neither really positive nor negative. Epicurus' famous argument that death "is nothing to us"—due to the fact that being dead cannot be experienced by the individual—would be an example here. Another one could be the construct of neutral acceptance, as conceptualized by Wong et al. (1994).

My second point concerns the presentation of death education programs. The author cites one pertaining study by Lokes

et al. (2022), but there are much more relevant and interesting work in this field. Most importantly, meta-analyses on the effectiveness of death education programs have actually yielded conflicting results – or at least demand caution in drawing too simple conclusions in this regard (see Durlak & Riesenber, 1991; Maglio & Robinson, 1994; Menzies, 2018; Menzies et al., 2018). I think the author should incorporate more of this relevant literature in the respective passages of the manuscript. Related to this issue is the distinction, made by the author, between physical and emotional death proximity. I think that experiential death education interventions—or any other intervention designed to increase the awareness of one’s own, personal mortality—are not solely based on emotions but on creating an honest and intense reflection of one’s own finitude and promoting a less biased view regarding one’s own death (and life). This includes emotional as well as cognitive processes, I assume. Therefore, the focus on “emotional proximity” could probably be a too narrow description?

A last point concerns the last paragraph of the Death Culture section (“If the expectation of death need fulfilment depends on culture, why is death valence even relevant to psychosocial intervention in social discrimination? ...”). I found this paragraph a bit confusing and vague. To which demonstrations is the author referring here? What does it mean to die due to systemic injustice? Was does it mean to “politicize death”? The quote from Coll-Planas does not really add information here. Maybe the author can rewrite this paragraph and try to formulate a more stringent line of argumentation for what they would like to tell us here.

I hope my comments and suggestions are of any help to the author and I am already curious to read more about the outlined research and intervention program in the future.

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