

# The Most Frequent Connotations of the Concept of Death in Young Adults

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## The death concept and ideas of death[1]

The ideas that emerge when being confronted with the word “death” are very individual. Formation of this concept is a lifelong intimate (in terms of a weak willingness to share it publicly) issue. Although the death concept is unique for everybody, it is possible to identify the influences that shaped most of its form. The content of the death concept depends on an individual’s cognitive maturity,[2] on the various cultural influences, including language, religious background, the meaning of life and spiritual maturity,[3] own experiences with death in a broader or closer surroundings of an individual,[4] emotions associated with this concept (especially fear and anxiety)[5] etc. Many of these influences are unconscious and many of those which are conscious are actively and deliberately pushed out of consciousness.

## Ontogenetic aspects

It is clear that the understanding of death goes through many changes during a person’s life. Studies focusing on the development of this concept during childhood have identified several components[6] gradually integrating into the understanding of death, which are essential for leading to a more mature understanding. They include:[7]

- *finality* (sometimes called irreversibility), which refers to a realization of the fact that being dead is the definitive, final and irrevocable state;
- *universality* refers to understanding that all living organisms must die without exception (universal rule). Sometimes within this component a term “personal mortality” (also called applicability) is set apart, which represents an understanding of the fact, that the consequence of universality for a person means his own (not only somebody else’s) mortality;
- *inevitability*, which brings an understanding that death is unavoidable;
- *unpredictability* as a possibility of death to intervene at any time in life;
- *nonfunctionality* (also called extinction) brings the knowledge of the functioning of living organisms and observations of living nature into the concept of death realizing that functions cease after death (the dead person is unable to move, breathe, speak anymore);
- *causality* as the correct understanding of the relationship between death and vital functions. In contrast to nonfunctionality (where the simultaneous presence of death and cessation of functions is revealed) causality refers to understanding of the correct relationship between the cause and effect. It brings the understanding that death is the consequence of failure of vital functions.

Based on the understanding of the nature of each component and on the knowledge of Jean Piaget’s theory of cognitive development[8] it is possible to make a rough estimation of the age when the most important components are integrated into the death concept. Most of the early age period (1—3 years) is characterized by the absence of self-awareness (the child lacks a concept of itself, does not understand its own “self,” the uniqueness of its existence). Self-awareness appears only in the age of 2 or 2 and ½ and till then the child can’t even think about its own non-existence. However, during this period the basis of other (particularly emotional) components which are important for understanding death is being formed—e.g. separation anxiety, loneliness, concept of absence.[9]

During the pre-school period (in Piagetian terminology a “preoperational stage”), a majority of

children come to the conclusion that all living things can die sometimes (potentially). Later on, this potentiality transforms into the understanding that it is a necessity (once all organisms must die). In most cases, children in this period also reach the component of finality (the death cannot be changed) as well as the irreversibility (dead persons cannot be alive again).[10] Recently, in connection with the acquisition of the afore-mentioned knowledge and with the integration of components into the overall concept of death, there has been an emphasis on the influence of individual experience with death. It doesn't necessarily mean to have an experience of the death of somebody close; the development of the death concept can be accelerated even by experiencing the death of a more distant relative, pets,[11] or observation of these phenomena in nature.[12]

In the next period (during school age) till adolescence, Piaget assumes progress through two stages—the stage of concrete and stage of formal operations, which is the last one on the way towards maturation of cognitive functions.[13] New important pieces of knowledge are revealed in this period—from an understanding that death is characterized by extinction of the vital function (dysfunction) to revelation of the relationship between the cause and effect (causality) resulting in finding that it is the failure of vital functions causing the death of the organism.

In terms of ontogenetic development of cognitive functions, during younger adulthood there should be no barriers blocking the “adult” understanding of death. However, it cannot be automatically called “mature,” because the incorporation of the afore-mentioned components is not the only condition[14] for creating a mature concept of death. Unlike cognitive maturity, the search for meaning of life, building its own scale of values, and spiritual maturity (which have also its considerable influence for death concept) are yet to develop. Also, in addition to the processing of consequences of understanding all components, together with dealing with the resulting fears and experiences of anxiety, it is possible to think about the immaturity of understanding of death because of the absence of (more personal) experience with it. It is the personal experience with the death, which is considered to be a crucial component for assessing the current stage of development of the death concept even in children. Personal experience with death has the potential to dramatically accelerate the entire death concept development.[15]

### Aspects of individual experience

Experience with death is an important factor shaping the concept of death. Most of the time, people face this kind of experience indirectly (through fairy tales, stories, films, television...) or in cases of non-human objects (plants wither, bugs or pets die...). This is the way naive (folk) theories are being built, which are later replaced by more sophisticated ideas about death enriched by products of targeted and deliberate education, particularly in the area of biological principles of the functioning of organisms.[16] Awareness of the issue of death and dying has two important implications for the understanding of death—both accelerates development of the concept of death, but also causes a reduction in fear of it.[17] Gradually, man is more and more confronted with death in his surroundings and this contact accelerates the process of reaching the components of the death concept. Changes in the death concept caused by personal experience have been recorded by the majority of studies focused on this issue, although not always with the same result. Table 1 presents research that does not correspond with the results of the above findings. It compares the influence of age and experience with the death on the incorporation of three components of the death concept.

**Table 1**

The Pearson correlation coefficients between selected components of understanding death and the factors of age and experience[18]

component			
inevitability		irreversibility	causality

age	,42**	,20	,19
experience	-,40**	-,22	-,39**

The results of the study reveals that experience with death shapes the concept of death more strongly than age, but on the other hand, this effect is negative (the bigger experience the less developed death concept). Conversely, a strong positive (in terms of acceleration of development of understanding of death) effect is demonstrated in children who have experienced very close contact with death—research of terminally ill children report that the experience is the strongest factor for the death concept. Table 2 shows the significant differences between a healthy and oncologic population of children at the same age.

**Table 2**

Differences in the incidence of selected components of understanding the concept of death in healthy and oncologic populations of children[19]

Component	healthy children	oncology group
Animism	19%	9%
Anthropomorphism	22%	6%
causality of death—concrete	63%	81%
personal death	91%	68%

NB.: Animism (belief that everything that shows some activity, is alive) and anthropomorphism (attributing human motivation, characteristics or behavior to inanimate objects or the dead) are signs of an immature understanding of death, so their decrease means a more mature understanding.

However, even in studies of M. Jay et al.[20] there were opposite results—eg. in personification of death, but also in universality healthy children scored better than ill. Clarification of some controversial findings was brought by Brenda L. Kenyon,[21] who examined the relative weight of factors on specific components. She found that eg. cognitive development, verbal skills, cultural and religious aspects influence the acquisition of rather general components of the death concept (such as universality), while direct experience with death affect more of the components associated with the physical characteristics (such as malfunction, irreversibility).

### Cultural aspects

Cultural influences are the relatively strong external components forming the death concept. One of the most vivid cultural traits in relation to death in western culture is its tabooing and unwillingness to deal with it.[22] This fact is present not only in the general population, but even among professionals working in areas where coping with the facticity of the end of one’s own existence is almost a necessity (psychologists, philosophers, doctors...). The issue of death and dying is considered morbid and inappropriate for public discussions.

This status is caused by the overall attitude of society towards the issue of death. The society we live in is focused on achievement, therefore it considers old age and illness as a financial burden. Society prefers active, healthy and happy people—the sick and dying are detached. The denial of the presence of death and the unwillingness to talk about topics connected with death are reflected also in language. Instead of the word die, there are many others that we use to avoid the verbal contact with death. Expressions such as decease, perish, go, exit, pass away, go into eternity, fall asleep forever, complete life’s journey, go to the truth of God etc. do not distract us as much; they are

“softer.” Suppression of an already infrequent contact with death eliminates the minimum options that have the potential to activate coping with the necessity of (one’s own) death. Emotionally highly involved issues are the source of anxiety and fears that make the entire situation even more complicated.

As a result, most people die outside the family,[\[23\]](#) in an anonymous environment of hospitals and other institutions. In most cases, during their old age/illness they never talked with somebody about death (some of them intentionally, others for lack of a partner for dialogue), and many die unsettled with the fact of the end of their existence.[\[24\]](#)

The unfavorable situation goes even further—it affects not only the dying, but finally the bereaved, too. Cathartic importance of funeral rituals have faded away (opposite to several hours/days long-lasting loud expressions of despair, crying followed by worshipping of the deceased typical in the past)[\[25\]](#) and individuals vent the sadness of losing a beloved one in the intimacy of their private life. Nowadays, presenting the emotions in public is considered a sign of losing control of self, which we do not like to see, because it brings uncertainty. The way we cope with death as well as what we associate with death, is affected by pressure formed by society through its socialization influences.

One of the cultural influences significantly influencing the understanding of death is religion. It forms a set of ideas about the meaning of existence, its goals and objectives, as well as the conception of what occurs at the end of our lives. The impact of religion/spirituality is particularly evident in adulthood, therefore its impact on the development of the death concept during childhood (especially the incorporation of individual components) is not a frequent subject of investigation. In childhood it may play a role, eg. through religious rituals which maintenance can help the child to have a sense of stability and security in a changing environment, and thus eliminate the anxiety. For the younger adult its importance grows—generally it has a rather positive than negative influence on the death concept and helps mainly to cope with fear. Most studies conducted in this field explore the issue of the relationship between spiritual maturity and attitudes towards death particularly in older adults.[\[26\]](#)

The concept of death is therefore influenced by several factors. Before examining their effects it is necessary to make fundamental research that would depict the imaginations of death at different developmental periods, which is in our conditions still missing. The basis for such research are enquiries that would test the suitability and use of specific methodologies (interviews, written productions, projective drawing techniques...) and their potential to convey the content of the death concept of different groups of subjects. Therefore we plan to focus our attention on connotations of death in younger adults and on the subsequent content analysis.

### **Survey questions**

The purpose of the analysis was to reveal the most common connotations of death in young adults and to outline the suggestions for further research in this area emerging from the analysis.

**Q1:** What are the most frequent connotations of death in young adults?

**Q2:** Which connotations have the closest relationship to the concept of death (they appear on the lists of productions in the first place)?

### **Method**

To carry out an exploratory enquiry we used the method of word production to a stimulus word: death. Instruction has been formulated in order to prevent the production of free association (or associations based on sound, place etc. similarities; eg.: death—skeleton with scythe—scythe—grass...). Respondents were asked to produce their associations only to the initial word “death” and to write down those words that are (for them) connected with this word. We used a pen & paper administration and the data collection was done in groups.

The content analysis on the basic level of descriptive data analysis was used for evaluation of the productions. Besides the connotations as such, their frequency and order on the list of productions has been observed. The different score value has been given to each connotation according to its order on the list (see Table 3).

**Table 3**

Method of allocation of the score according to the order of connotation on the list of productions

order on the list	score	order on the list	score
1st	10	6th	5
2nd	9	7th	4
3rd	8	8th	3
4th	7	9th	2
5th	6	10th	1

Except for the frequency of each connotation, the allocation of the score enabled us to see the relative weight of the connotation given by its order on the list. Each term was therefore awarded by the number representing its frequency of occurrence in the sample as well as by the number representing its “weight/importance” in connection with the stimulus word “death.”

**Research sample**

Research sample consisted of 50 subjects-college students in the first and second year of z a master program in psychology.

**Results and interpretation**

Pbs generated together 642 responses to the stimulus word, which represents an average of 12.84 responses per Pb. A relatively large number of connotations in survey sample indicates a willingness to talk about death. This fact may seem contrary to literature data that indicate a tendency to escape from communication about this topic.[27] However, both facts are not mutually exclusive—people avoid death topics and thinking about death when possible, on the other hand, if they are already confronted with it, they appreciate the possibility to vent their feelings and answer their questions. Another reason for increased production of responses could be that the answers were anonymous and written, which could give a space to expose more intimate layers of Pbs’ relation to death. Also, psychology students are taught to be more sensitive and perceptive as well as they are more open and willing to communicate their feelings, and ready to analyze their “inner world.” The age of Pbs could also play its role—the period of early adulthood represents a stage of life when the individual is not often confronted with the death of close relatives (siblings, parents and often grandparents are still alive). The threat of one’s own death and the need to cope with its inevitability is still fairly distant, therefore the tendency to show escape reactions when confronted with death topics might not be as strong as later in life.

Within 642 Pbs’ responses 121 different terms appeared. An overview of their content, as well as the frequency of their occurrence is presented in Table 4.

**Table 4**

Connotations of the word “death” and their frequency within responses

once	questions, guilt, eyes, nothing, loss of appetite, bed, ECG curve, coping, mystery, sacrifice, ash, justice, war, finances, trust, purity, insomnia, substitutability, hell, escape, knowledge, circle, hatred, misunderstanding, angel, balance, comeback, goal, car, Freud, dissonance, cigarette, worries, unhappiness, love, destiny, against the will, wound, suicide, murder, autonomy
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2 times	doctor, injustice, body, transience, meaning of life, values, priest, breath, emotions, compassion, scythe, cross, taboos, the light
3 times	spirit, sleep, hope, fear of the unknown, leaving the world, All Souls', Eternity, helplessness, skeleton, prayers, road, tunnel, to balance
4 times	quiet, unknown, cold, forgiveness, change, memories, irreversibility, hospital, church, farewell, unexpected, help/support
5 times	problems, anger, nature, law, demise, candlelight, changeover
6 times	flowers/wreaths, soul, anxiety
7 times	faith, emptiness, uncertainty
8 times	peace, life, heaven, loneliness
9 times	grave/pit, cemetery
10 times	bereaved
11 times	despair/hopelessness, old age, coffin, suffering
12 times	redemption, disease
13 times	accident
14 times	beginning
15 times	relief (from pain), darkness
19 times	after-life, black
22 times	loss, pain, anxiety/fears
28 times	funeral
33 times	end
35 times	crying/tears
42 times	sadness/grief

From table 4 it is obvious, that 1/3 (N = 41) of responses (33.88%) occurred only once. This group represents a specific and individual view of Pbs to death. In this group there were terms representing the actual feelings (guilt, hate, love...), the specific causes of death (suicide, murder, war...), but even relatively abstract connotations (nothing, mystery, circle...). Some expressions reflect the psychological background of Pbs (terms such as Freud, escape, coping, dissonance).

The most common connotation of the term "death" was the word sadness/grief. As many as 42 (84%) Pbs have mentioned it and it was followed by terms: crying/tears (mentioned 35 times), end (33 times), funeral (28 times) and loss, pain, anxiety/fears (22 times) which were mentioned by nearly every other Pb. Except observing the frequency, the method of allocation of the score according to the order of connotation on the list of productions (see table 3) was made. This method revealed which term(s) came to mind first when the word "death" was told. The biggest number of points gained the term "sadness/grief" again. This means, that in addition to being the most common term, it also figured on the first places in the order of produced connotations. This connotation gained 304 points (see table 5) which represents the sum of points which the word gained for its placement on the Pbs' lists. Regarding the content of this connotation, it is expressing negative accompanying emotions, which is not an unexpected fact. Death is generally seen as something sad, as something which causes grief mainly.

### **Table 5**

The score (weight) assigned to the term in order to their placement on the list of connotations

1 point	guilt, bed, ECG curve mystery, sacrifice, ash, insomnia, substitutability, knowledge, circle, hatred, misunderstanding, balance, return, cigarette, worries, love, fate, wound, suicide, murder
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2 points	questions, doctor, war, finances, injustice, body, transience, meaning of life, Hell scythe, dissonance
3 points	spirit, trust, escape, All Souls', angel, skeleton, prayers, light
4 points	nothing, loss of appetite, coping, values, Freud
5 points	justice, emotion, candle, taboo, against the will
6 points	memories, independence
7 points	compassion, car
8 points	purity, priest, goal, cross, help/support
10 points	sleep, eyes
11 points	breath, journey
12 points	tunnel, unexpected
13 points	forgiveness, flowers/wreaths, farewell
14 points	anger
15 points	quiet, problems, irreversibility, cold
16 points	faith, hope
17 points	eternity, helplessness
18 points	unknown, fear of the unknown, hospital, to balance
19 points	church, law, cemetery
20 points	leaving the world
23 points	nature
24 points	leaving the world
25 points	change, anxiety
29 points	soul
32 points	grave/pit, transition
33 points	loneliness, demise
36 points	relief (from pain), bereaved
42 points	heaven
43 points	peace, old age, coffin
49 points	despair/hopelessness, disease
52 points	redemption
53 points	accident
56 points	"after-life" dark
58 points	suffering
62 points	black
71 points	beginning
102 points	fear/concern
114 points	loss
119 points	funeral
135 points	pain
170 points	crying/tears
242 points	end
304 points	sadness/grief

The second term, which received the majority of the first places on the list was “the end” with 242 points. This connotation has been mentioned 33 times (66% of Pbs). “The end” was followed by terms crying/tears (170 points), pain (135 points), funeral (119 points) and loss (114 points).

If we focus our attention on a broader range of connotations of the word death, we will acquire an overview about the expressions that are mostly associated with the concept of death. They are: sadness/grief, crying/tears, end, funeral, loss, pain, anxiety/fear, black, after-life, darkness, relief (from pain), beginning, accident, sickness, redemption, despair/hopelessness, old age, coffin, suffering. From the character of connotations it is clear that most of them are associated with negative attunement. There are only a few positive ones: relief (from pain), beginning, and redemption (or also the “after-life”). Neutral group includes: old age (or also the “after-life”). When we divide all connotations by their attunement into positive, neutral and negative, we get an overview about the amount of them falling within each category (see table 6).

**Table 6**  
Attunement of the connotations

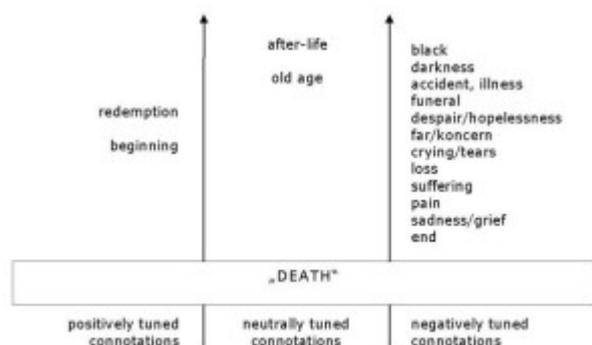
negatively tuned connotations	neutrally tuned connotations	positively tuned connotations
sadness/grief, end, anger, crying/tears, funeral, loss, guilt, pain, anxiety/fear, black, dark, accident, illness, cold, despair/hopelessness, coffin, wound, suffering grave/pit, cemetery, emptiness, insecurity, loneliness, escape, problems, demise, body, fear of the unknown, leaving the world, All Souls', helplessness, skeleton, tunnel, cold, candle, flowers/wreaths, memories, cross, hospital, war, sacrifice, bed, farewell, ash, hatred, loss of appetite, injustice, transience, ECG curve, insomnia, lack of understanding, dissonance, worries, unhappiness, against the will, suicide, murder	“after-life,” age, soul, breath, bereaved, life, spirit, nature, law, doctor, goal, changeover, taboo, sleep, eyes, nothing, eternity, prayer, journey, priest, to balance, silence, questions, unknown, change, church, destiny, irreversibility, unexpected, meaning of life, values, emotions, compassion, coping, mysterious, finance, circle, cigarette, fairness, Freud, knowledge, return, car, independence	relief (from pain), beginning, redemption, faith, peace, heaven, hope, love, forgiveness, purity, angel, help/support, light, trust, balance

The amount of connotations in each category correspond to the expectations—most of them have a negative emotional attunement. Nevertheless, there are still relatively large numbers of neutral terms present. More than 1/10 (11.57%) of connotations had positive attunement. It is questionable whether we would achieve the same results in a group of older Pbs, where contact with the reality of death is more intense and its threat more actual. An interesting finding is the fact that the majority of positively tuned terms were related to the dying person (end of his suffering, a new life in eternity, salvation, etc.). For others, death is a circumstance in life, which has significantly (and often exclusively) negative consequences. Although there are several studies reflecting the possibility of positive impact of the experience with death or disease (so-called post-traumatic growth), [28] we did not see this in our sample. There were only some signs of this fact—they can be seen in productions such as: value or meaning in life, which may indicate a tendency for slightly positive changes due to contact with death. An interesting finding was the relatively frequent connotation “after-life,” which has a connection with the positive influence of religion. Up to 38% of subjects (N = 19) wrote a connotation, which showed some belief in the afterlife.

Further on, we've concentrated on the "top list" connotations (see table 5) and subsequently we've counted their average order in which they were written on the list of Pbs' connotations. Figure 1 presents a graphical model of the distance between the word death and its connotations divided in order to its attunement.

### Figure 1

The proximity of the most frequent connotations from the central word of "death" and their attunement



In Figure 1 there were included those terms that appeared in the lists of Pbs' connotations more than 10 times. They are located by their distance from the central concept of „death“, which represents the average value of the order of connotation on the lists. Unlike the order presented in Table 5 (where the order of connotation was the result of absolute value of the points which the term gained), distances in Figure 1 are relative - they were created by calculating the average value of the order of each term in the list of all productions. Compared to the order in Table 5, the biggest difference occurred in connotation „weeping/tears“, which was the second most frequent term, but Pbs have placed it between the sixth and seventh place in average. The difference between the frequency and proximity can be observed also in terms of “loss,” “dark” or “black,” which belong to relatively frequent, but rather distant terms. This means, that although they belong to those connotations, that are often associated with death, they come to one's mind relatively later (they are more distant from the term death).

The content analysis also reveals, that most connotations belong to four main categories: a) the terms describing the circumstances of death—eg. disease, suicide, accident, old age...

b) the terms describing emotional aspects of the situation: sadness/grief, crying/tears, pain, hate, compassion...

c) the terms related to the funeral—flowers/wreaths, grave, coffin, cemetery, candle...

d) the terms associated with different forms of existence of life after death— angel, heaven, the soul...

Just a few words do not fit within this scheme (Freud, coping...). These terms had a strong connection to the psychological background of Pbs. We can again re-consider, whether these terms would have occurred also in individuals with other than a psychological background, or in other age groups. We assume that in individuals who have had experience with death of a very close person, the category of terms associated with a funeral would be larger and emotional category significantly more negative (absence of positively tuned connotations).

The productions of Pbs show a strong influence of culture and other social influences (religion, traditions, etc.). In up to 20% (N = 24) of expressions there is apparent the dominant influence of the culture on their connection with the concept of death (see Table 7). We suppose, that also within some others we can expect this effect (eg., road, changeover, breath...). The area of ideas about death is certainly a topic where intercultural research would be very interesting.

## Table 7

### Culturally conditioned connotations of death

ECG curve, hell, angel, scythe, cross, light, tunnel, prayers, eternity, All Souls' Day, heaven, spirit, church, hospital, farewell, flowers/wreaths, candle, faith, after-life, grave/pit, cemetery, coffin, dark, funeral

### Conclusion

The exploratory enquiry on a sample of college students showed that the most frequent terms associated with the word "death" in this sample are (in sequence): sadness/grief, crying/tears, end, funeral, loss, pain, anxiety/fear. Most of the most frequent terms reflect an emotional state of mind and is negatively tuned. The terms linked to the concept of death the most closely (that are produced immediately, the first) are: sadness/grief, end, crying/tears, pain, funeral, loss, anxiety/fear and beginning.

Most of the connotations associated with the concept of death were negatively tuned (49%), neutral terms achieved 39% and positive concepts formed a relatively large, 12-percent group. Results gained from this enquiry should be interpreted with respect to the specific character of the survey sample, which consisted of master degree students of psychology. The interpretation of the primary and ancillary research findings and their analyses outlined several problems/issues that may be an inspiration for the following work in the field of connotations of death:

- What would be the content of connotations in groups of students of other disciplines?
- Do the content and frequency of death connotations change in ontogenesis?
- What is the ratio of positive/neutral/negative connotations in other age groups?
- Does the level of spiritual maturity affect the content and attunement of the connotations of death?
- Is the experience with the death of a close person the factor that affects the content/attunement of the connotations of death?
- What is the relative influence of emotions, culture and cognitive factors on the content of connotations of death?

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## Notes

- [1] Slovak version of the text is available in Ostium 1/2011.
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