THE RELATION OF SEARCH FOR AND PRESENCE OF MEANING IN LIFE TO ATTITUDES ABOUT DEATH

By

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A Thesis
Presented to
The Faculty of Humboldt State University

In Partial Fulfillment
Of the Requirements for the Degree

Masters of Arts
In Psychology, Counseling

May 2010
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ATTITUDES ABOUT DEATH

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Various theories have hypothesized and research has corroborated that individuals who find meaning in life are more accepting of their own mortality. More recently, scholars have noted important distinctions between individuals who report presence of meaning in life versus those who report search for meaning in life. To our knowledge no research has investigated the search for meaning in life as it relates to individual attitudes towards personal mortality. This study investigates the relation of both search for meaning in life and presence of meaning in life to individual attitudes towards death. Our study sample consisted of 106 undergraduate students from Humboldt State University. Participants were administered the Death Attitude Profile-Revised (Wong, Reker, & Gesser, 1994) and the Meaning in Life Questionnaire (Steger, Oishi, & Kaler, 2006). Several directional hypotheses were conceptualized based on previous research findings and a review of the existing literature. It was hypothesized that there would be positive correlations between the more ‘positive’ attitudes towards death (i.e., the Approach Acceptance and Neutral Acceptance scales of the DAP-R) and Presence of Meaning in life as measured by the MLQ. It was also hypothesized that there would be positive correlations between the more ‘negative’ attitudes towards death (i.e., the Fear of Death and Death Avoidance scales of the DAP-R) and Search for Meaning in life as measured by the MLQ. Hypotheses were partially supported in that Presence of Meaning in life...
and Approach Acceptance were positively correlated, and Search for Meaning in life and Death Avoidance were negatively correlated. Gender differences on these scales were also examined, revealing gender differences in the Neutral Acceptance and Fear of Death scales of the DAP-R. Male participants scored significantly higher on Neutral Acceptance, and female participants had higher mean scores on Fear of Death. Significant gender differences were also found for the Presence of Meaning subscale of the MLQ with female participants reporting higher levels of Presence of Meaning in life. Small, but significant correlations were found between the DAP-R and MLQ scales. However, further regression analysis was performed that included all five DAP-R scales simultaneously, and these correlations became nonsignificant. Therefore, no significant correlations were found overall between the DAP-R scales and the MLQ scales. Directions for future research and possible clinical implications are discussed.
Acknowledgments

To begin, I would like to thank my advisor, Dr. Beth Eckerd for her unwavering patience, incredibly helpful feedback, and continual encouragement and support throughout this entire process- I really do not know if I could have completed this without you! I would also like to thank my committee members, Dr. Emily Sommerman and Dr. Lou Ann Wieand for all of the helpful feedback and flexibility in meeting. I would also like to thank each of my colleagues, without whom I would probably not have made it through this program. So thank you Tina, Liz, Jane, Mark, Noah, and Bill- you have all contributed immensely to my experience in this program and to my development as a therapist. I would also like to thank my family and friends who have given me nothing but support and encouragement throughout the years. Lastly I would like to thank my wife, Erika, for everything. You have always been a major source of inspiration, guidance, and support in my life. Thank you for being exactly who you are!
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Chapter One

Introduction

Approximately 150,000 people die each day across the globe (Aubrey, 2007). In the United States alone the number of deaths recorded in 2006 totaled 2,426,264 (CDC, 2006). Whether we like it or not, death is intrinsically and unavoidably an integral part of life and the human condition. Since time immemorial humans have attempted to know and explain the meaning of life and death. From elaborate mythologies birthed from centuries of oral tradition, to sophisticated hieroglyphs carved and painted on papyrus and wood, humans have sought to explain and record the meaning of existence and what happens to us after we die.

More recently, various psychological theories have offered different explanations regarding the basic questions of human existence. Existential psychology in particular is one theoretical foundation which has offered a compelling theory regarding the questions of life, death, and the human condition. Central to existential theory are the four major “givens” of existence that all humans experience and come to grips with in one way or another (Yalom, 2005). Irvin Yalom (2005), a prominent psychiatrist and existential philosopher, explains that the “paramount struggle is with the ‘givens’ of existence, the ultimate concerns of the human condition: death, isolation, freedom, and meaningless” (p. 101).
Although Yalom (2005) maintains that individuals tend to seek out therapy due to a general anxiety when confronting the existential “givens,” Victor Frankl (1965), another prominent existential philosopher and psychologist, offers an alternate explanation of how an individual can come to grips with these “givens.” According to Frankl (1965), the ephemeral nature of life and the human condition is not only an existential “given,” but also an important reason for its meaningfulness. Frankl (1965) states that “the meaning of human existence is based on its irreversible quality” (p. 64), thus clearly acknowledging that each human is limited by the “finality” and “temporality” of death, yet instead of viewing death as something that casts a shadow of meaninglessness or basic anxiety on an individual’s life, Frankl regards death as that which gives meaning to an individual’s life. In an exploratory study investigating the hypothetical possibility of a life without death, Kastenbaum (1996) found that 88% participants were initially favorable to a life without death, but that upon more serious reflection 93% of the participants expressed that they actually preferred life as it is (i.e., a life with death) in contrast to a life without death. Kastenbaum (1996) goes on to offer a possible explanation for these findings, maintaining that “the knowledge that death is universal and inevitable seems to have a function in the way individuals organize their lives” (p. 111). In this way, Kastenbaum’s (1996) findings provide some empirical evidence for Frankl’s (1965) view that it is both the finality and temporality of human life which gives it meaning.

The differences in Frankl and Yalom’s theories regarding how individuals react to major existential concerns helps to illustrate the fact that individual reactions do vary
greatly (Kastenbaum, 2008). This is particularly true in regard to the existential given of death. Individual attitudes and reactions towards death have been found to differ considerably and include fear, avoidance, ambivalence, and acceptance (Wong, Reker, & Gesser, 1994). For example, whereas some people may think of death as “an integral part of life” and thus accept the prospect of death openly, others may avoid the topic of death altogether with the hope that not talking or thinking about it will help in reducing the anxiety that death produces (Wong et al., 1994). These disparities in individual attitudes towards death have significant implications for the manner in which a person comes to terms with the other fundamental questions of existence (Neimeyer, Wittowski, & Moser, 2004). As Feifel (1959) further points out, an individual’s attitude towards death “can serve as an important organizing principle in determining how he conducts himself in life” (p. 128).

Theories have hypothesized (Frankl, 1965; Yalom & Lieberman, 1991) and research has corroborated (e.g., Durlak, 1972; Reid, 1996; Ulmer, Range, & Smith, 1991) the notion that individuals who find meaning in life are more accepting of their own mortality. These findings have important implications for therapists practicing in the field of counseling psychology because grief and loss are common issues in psychotherapy. As Prigerson and Maciejewski (2008) indicate, “knowledge of how people grapple with objectionable realities such as their own or close other’s death could inform interventions designed to ameliorate loss-related distress” (p. 435). Therefore, it is essential for counselors seeing clients with loss-related distress to be aware of the attitudes and perceptions those clients have in regards to death and meaning in life.
On account of the important role that meaning in life has on an individual’s attitude towards death, it would be useful to further investigate the relationship between these two variables to better understand how they might influence therapeutic outcome. To our knowledge, no study has investigated the relationship between attitude towards death and perceived meaning in life using a multidimensional measure of death attitudes. Furthermore, theorists propose that there are important differences between individuals who perceive a presence of meaning in life and those individuals who perceive that they are searching for meaning in life (Steger, Oishi, & Kashdan, 2009). Therefore, it would be equally important to investigate whether presence of meaning in life and search for meaning in life differently influence an individual’s attitudes towards death, as these differences would likely influence therapeutic interventions and treatment outcome.
Chapter Two

Literature Review

The following literature review defines and explains the importance of the psychological constructs of death attitudes and meaning in life. This section also highlights research that has made significant contributions to the current understanding of these variables.

Study of Death Attitudes

Attitudes towards death became a topic of interest in the field of psychology following the first death symposium chaired and presented by Herman Feifel in 1956 entitled, “The Concept of Death and its Relation to Behavior.” Later that same year Feifel received the first NIMH research grant awarded to an individual to investigate attitudes towards death (Feifel, 1990). Despite early setbacks and difficulties in conducting death-related research (Feifel, 1990), Feifel’s contributions to the field of thanatology (i.e., death studies) have been cited as pioneering and leading the way to what is now a proliferation of death-related research (Moraglia, 2004).

Measuring death anxiety and fear of death. As interest in the field of thanatology continued to grow, scholars began developing instrumentation to measure various death-related constructs. According to Neimeyer et al. (2004), “methodologically, these early studies tended to rely upon projective measures and simple face valid questionnaires” (p. 311), resulting in research designs that “could not delineate qualitative differences in death-related concerns” (Mikulincer & Florian, 2008,
Also, most early measures were designed to assess specific death-related concepts such as fear of death (Collett & Lester, 1969) and death anxiety (Templer, 1970), yet researchers seemed to neglect to investigate or develop instrumentation to assess and measure other death attitudes that could be deemed “positive”, such as death acceptance. As Neimeyer, Moser, and Wittowski (2003) point out, “by any analysis, the dominant focus of death attitudes researchers has been the measurement of death anxiety, fear, and related concepts” (p. 46). Furthermore, Kastenbaum (1992) indicates that death anxiety is a general term that insufficiently addresses the specific feelings involved when confronting death.

Despite scholarly criticism regarding the limits of focusing on the death anxiety construct alone, researchers have found death anxiety to correlate with a number of factors. For example, research indicates that women on average report more death anxiety than men (Dattel & Neimeyer, 1990; Davis, Bremer, Anderson, & Tramill, 1983; DePaola, Griffin, Young, & Neimeyer, 2003), a finding which suggests that gender differences exist in regards to individual attitudes towards death. Additionally, a number of research studies reveal that older and younger adults report lower levels of death anxiety than middle age adults (Cicirelli, 2002; DePaola et al., 2003; Fortner & Neimeyer, 1999; Thorson & Powell, 1990) indicating a curvilinear relationship between age and death anxiety. Together these findings point out that both age and gender are factors influencing individuals’ attitudes towards death.

Research also suggests that one’s spiritual views influence attitude towards death. For example, Alvarado, Templer, Bresler, and Thomas-Dobson (1995) found that
individuals who reported a strong belief in afterlife also reported less anxiety towards death. Furthermore, there is some research suggesting that people who either have strong faith or no faith at all in an afterlife report less fear of death than those who are ambivalent in their faith (McMordie, 1981; Smith, Nehemkis, & Charter, 1983-84).

Similarly, Ardelt (2003) found that individuals who report greater strength of religious conviction also report less death anxiety and a more accepting attitude towards death.

Although much of the early research focused on death anxiety, scholars became increasingly cognizant of the fact that death anxiety alone was an insufficient representation of the many attitudes an individual may have towards death. A number of research studies have reported that many individuals not only report no fear of death, but also that some individuals actually enjoy talking about death, and that this is particularly true of the elderly population (Kastenbaum & Aisenberg, 1972; Wass, Berardo, & Neimeyer, 1988; Wong et al., 1994). Given that attitudes towards death vary greatly from “negative” to more “positive” attitudes, it appears that focusing on fear or anxiety concerning death alone is insufficient to address the complexities of death attitudes. Wong et al. (1994) further point out that “a better understanding of death can be achieved only in the context of an understanding of other death attitudes” (p. 141).

**Multidimensional approach to death attitudes.** In response to this overemphasis on death anxiety, scholars began developing assessment tools that reflected the multidimensional nature of death attitudes. These multidimensional measures were different from earlier measures inasmuch as they addressed the “affective, attitudinal, and cognitive components” associated with death attitudes (Neimeyer et al., 2003; Neimeyer
& Van Brunt, 1995). For example, based on empirical observation, clinical interviews, and self reports, Wong et al. (1994) noted that individuals deal with and face their own mortality in a variety of ways. From a conceptual analysis of these data, Wong et al. (1994) developed the Death Attitude Profile- Revised (DAP-R) (Wong, Reker, & Gesser, 1994), a multidimensional measure of death attitudes. According to Neimeyer et al. (2003), the DAP-R was developed “in an attempt to extend the assessment of death attitudes beyond anxiety and related concepts” (p. 59). As such, the DAP-R is, to our knowledge, the only psychometrically sound instrument available which measures both “negative” attitudes towards death (Fear of Death, Death Avoidance, Escape Acceptance) and “positive” attitudes towards death (Approach Acceptance, Neutral Acceptance). Furthermore, the DAP-R is regarded as being among the most psychometrically reliable measures of attitudes toward death currently available (Neimeyer, 1997-1998). The five subscales of the DAP-R are Neutral Acceptance, Approach Acceptance, Escape Acceptance, Fear of Death, and Death Avoidance.

**Neutral acceptance.** Neutral acceptance “implies an ambivalent or indifferent attitude” towards death in which the individual “neither fears nor welcomes” death (Wong et al., 1994). In a sample of young and middle-aged adults, Wong et al. (1994) found that Neutral Acceptance had a positive correlation with psychological and physical well-being and a negative correlation with depression. In explaining the benefits of Neutral Acceptance, Wong et al. (1994) emphasize that “when individuals come to terms with death as an inevitable fact of life, they are more likely to make the best use of their lives” (p. 126). Wong et al. (1994) go on to add that “people who believe they have led a
meaningful, fulfilling life are more likely to accept death without fear” and “in either event, the beneficial effects of Neutral Acceptance on mental health are quite convincing” (p.140). For this reason, Wong et al. (1994) have advocated that an attitude of Neutral Acceptance towards death is most adaptive due to the strong correlation between Neutral Acceptance and an individual’s overall well-being (Flint, Gayton, & Ozmon, 1983; Wong & Watt, 1991).

**Approach acceptance.** According to Wong et al. (1994) Approach Acceptance “implies belief in a happy afterlife” in which the individual welcomes the prospect of death since a life hereafter has been secured for them. Research has found that individuals who strongly believe in an afterlife report less Fear of Death (McMordie, 1981; Smith, Nehemkis, & Charter, 1983-84). Additionally, some research has demonstrated that belief in an afterlife is related to optimism and overall longevity (Ardelt, 2003; Steinitz, 1980). Wong et al. (1994) found that older adults who reported an Approach Acceptance attitude towards death also reported more subjective well-being and lower levels of depression. Furthermore, Dezutter et al. (2009) found that individuals who reported higher levels of religiosity were more likely to endorse an Approach Acceptance attitude toward death, suggesting that religiosity may be related to belief in an afterlife.

**Escape acceptance.** Wong et al. (1994) define Escape Acceptance as an attitude held by individuals for whom the prospect of death is a welcomed alternative to a life full of pain and misery. Wong et al. (1994) assert that an individual who scores high on Escape Acceptance “can no longer effectively cope with the pain and problems of
existence” (p. 127). Research has found that individuals reporting a strong intrinsic religious orientation also report higher levels of both Approach and Escape Acceptance (Ardelt & Koenig, 2006). In a sample of young adults, Wong et al. (1994) found Escape Acceptance to be negatively correlated with physical well-being.

**Fear of death.** Wong et al. (1994) define Fear of Death as “the fear induced by thoughts of or a confrontation with death”. Wong et al. (1994) point out that Fear of Death may not so much be the “awareness of our finitude as our failure to lead meaningful lives” (p. 123). This point of view is consistent with Frankl’s (1992) view that mental illness is often caused by an “intense and enduring pattern of existential frustration” in which an individual lacks meaning in life. For Frankl (1992), a persistent lack of meaning in life ultimately leads to what he terms a “noogenic neurosis.” Similarly, Templer (1970) suggests that Fear of Death may be an important aspect of depression, especially with older adults. Furthermore, Wong et al. (1994) found that Fear of Death correlated with psychological distress and depression, particularly with older adults.

**Death avoidance.** In defining Death Avoidance, Wong et al. (1994) explain that “a person avoids thinking or talking about death in order to reduce death anxiety” (p. 128). This rationale is consistent with both Terror Management Theory (TMT; Greenberg, Pyszczynski, & Solomon, 1986), which posits that individuals cling to and will defend their worldviews when confronted with death-related thoughts to avoid the terror that personal mortality inevitably evokes, and with existential theorist Yalom’s view that mankind must confront the reality of death and that denial or avoidance of this reality
only leads to psychological distress (Yalom, 2005). Research has substantiated both TMT and Yalom’s claims, finding that individuals who are less willing to talk about death report higher levels of death concern and death anxiety (DePaola et al., 1994). Wong et al. (1994) also found Death Avoidance to correlate with factors such as psychological distress and depression, particularly for older adults and middle-aged individuals.

**Death attitudes summary.** The study of death attitudes has recently evolved and expanded from limited conceptualizations focusing primarily on the fear and anxiety often produced by death, to more sophisticated conceptualizations that encompass a wide range of attitudes including both ‘positive’ and ‘negative’ attitudes towards death. This paradigmatic shift in understanding and studying death attitudes is important for both researchers and clinicians alike as it allows the professional to tease out subtle and important differences in individual attitudes and reactions towards death. This expanded knowledge can then lead to the development of more effective therapeutic interventions designed to address the complexities inherent to existential concerns that many clients may be experiencing, especially clients dealing with issues of loss or dying.

**Meaning in Life**

Although there is variation in the definition of meaning in life throughout the field, Steger, Oishi, and Kaler (2006) succinctly define meaning of life as “the sense made of, and significance felt regarding, the nature of one’s being and existence” (p. 81). As cited by Tomer (1994), search for meaning theories (Frankl, 1965; Maddi, 1970)
emphasize the alteration of attitudes, perceptions, and life schemes often in instances of acute hardship, which aid the individual in regaining a sense of purpose in life.

According to Frankl (1992), one of the fundamental tenets of Logotherapy is that “man’s main concern is not to gain pleasure or to avoid pain but rather to see a meaning in his life” (p. 117). Furthermore, it has been argued that confrontation of existential concerns (the ‘givens’) is generally painful but ultimately therapeutic (Yalom, 2005).

**Measurement of meaning in life.** Various scales have been developed over the years to measure the meaning in life construct (e.g., Purpose in Life Test, Crumbaugh & Maholick, 1969; Seeking of Noetic Goals, Crumbaugh, 1977; Personal Meaning Index, Reker, 1992). However, most have been noted to have poor psychometric properties including inadequate factor structure and presence of confounding variables (Dyck, 1987; Frazier, Oishi, & Steger, 2003). Additionally, there is substantial research pointing towards the importance of presence of meaning in one’s life, yet little research has been conducted in regards to the beneficial or detrimental effects of the search for meaning in life construct despite clear distinctions between the two constructs (Steger et al., 2006; Steger, Kashdan, Sullivan, & Lorentz, 2008).

In response to the heavy criticism received by past meaning in life scales and the lack of instruments available to measure search for meaning in life, Steger et al. (2006) developed the Meaning in Life Questionnaire (MLQ; Steger, Frazier, Oishi, & Kaler, 2006); a self report instrument measuring both Presence of Meaning in life and Search for Meaning in life. As Steger et al. (2006) point out, “the ability of the MLQ to measure search and presence [of meaning in life] independently allows for greater theoretical and
empirical flexibility” (p. 89). Consequently, a researcher can employ the MLQ to distinguish between individuals who experience meaningfulness yet continue to search for further understanding of life’s meaning, while at the same time contrasting them with individuals who experience life as meaningful and are not searching for any further meaning. Furthermore, the differences between Presence of and Search for Meaning in life could have important implications for how counseling psychologists develop and inform interventions with clients exploring existential concerns, especially bereaved or dying clients.

**Correlates of meaning in life.** Presence of Meaning in life has been correlated with greater life satisfaction (Edwards & Holden, 2003; Heisel & Flett, 2004; Zika & Chamberlain, 1992), lower reported levels of depression (Mascarò & Rosen, 2008), greater self esteem (Steger et al., 2006), and higher overall positive affect (Debats, Van Der Lubbe, & Wezeman, 1993; Zika & Chamberlain, 1992). In contrast, Search for Meaning in life has been positively correlated with depression and overall negative affect (Steger et al. 2006), less self acceptance, higher levels of anxiety and rumination, as well as a tendency to be ‘curious, questioning, and investigative’ (Steger et al., 2008). These findings suggest clear differences between how these two variables may influence an individual’s quality of life and affect. In a clinical setting, such information would be useful as it could help therapists to develop appropriate interventions as well as monitor treatment progress through the evaluation of a client’s perceived Presence of or Search for Meaning in life. Additionally, such information would be helpful to a therapist in gaining access and entryway into client beliefs, attitudes, and perceptions regarding
important existential factors and how these existence factors are dealt with by the client. Gillies and Neimeyer (2006) point out that “the relationship between meanings and grief-related distress is of critical interest [from a clinical point of view]” (p. 58). This importance is further elucidated by research findings which indicate that meaning making and meaning reconstruction benefit bereaved individuals inasmuch as Presence of Meaning helps in decreasing grief-related distress as well as the length of the grieving process (Bonanno, Wortman, & Nesse, 2004).

**Meaning in life and death attitudes.** An individual’s attitude towards death has also been found to correlate with attitudes toward life, how individuals conduct themselves in life, and how they construct meaning in life (Wong et al., 1994). For example, Durlak (1972) found that participants who reported and perceived more meaning in life tended to also report a more accepting attitude towards death. Later studies have corroborated Durlak’s findings (Hui & Fung, 2009; Reid, 1996), similarly finding that individuals who experience more meaning in life are also more accepting of death. As cited by Wong et al. (1994), a fundamental tenet of existential psychology asserts that the potential for self-actualization is only probable once the individual has accepted personal mortality (Feifel, 1990). Frankl (1965) goes further in arguing that an individual who has found meaning in life not only increases their overall well-being, but also eradicates their Fear of Death. This view is consistent with Erikson’s (1986) final stage of psychosocial development in which older adults need to resolve the crisis of integrity versus despair. According to Erikson et al. (1986), the crisis of integrity versus despair is marked by a life review in which the older adult “endeavors to integrate, rather
than resolutely deny, the mixed feelings that inevitably result from comparing the life actually lived with the life anticipated in youthful fantasy and imagined” (p. 141). Accordingly, those older adults who, after a life review, achieve integrity generally do not fear death because they perceive that they have lived a meaningful life. In contrast, individuals who perceive that they have not found meaning in life are likely to fear death and experience despair following a life review.

Erikson’s final stage of integrity versus despair has gained empirical support with research indicating that older adults who have achieved integrity place less importance on goals related to changing themselves and more importance on acceptance of themselves and emotional satisfaction with the life they have led (Cross & Markus, 1991; Ryff, 1989). More recently, research suggests that life review interviews may be effective in reducing anxiety and depression, while at the same time increasing overall well-being in terminally ill cancer patients (Ando, Morita, & Ninosaka, 2008). Furthermore, Lemay and Wilson (2008) suggest that interventions aimed at helping clients create and identify meaning may be helpful in improving self-esteem, optimism, and self-efficacy; particularly with clients who are struggling with life-threatening illnesses.

Some researchers have theorized that individuals are more terrified of a life lacking meaning than of death itself (Wong et al., 1994). In support of this view, Quinn and Reznikoff (1985) reported that individuals who lacked direction and a sense of purpose in their lives self-reported higher levels of death anxiety. Conversely, Lewis and Butler (1974) and Durlak (1972) found that individuals who had achieved personal meaning in life were more accepting of death and displayed less death anxiety. Durlak
(1972) also found that individuals who reported meaning and purpose in their lives had more accepting attitudes towards death and also reported less fear of death. In a similar study Flint, Gayton, and Ozmon (1983) reported a significant correlation between satisfaction with one’s past and death acceptance. Presence of meaning in life has also been correlated with greater life satisfaction, lower levels of depression, greater self esteem, and more positive affect (Edwards & Holden, 2003; Heisel & Flett, 2004; Zika & Chamberlain, 1992). In sum, there is substantial literature indicating a positive correlation between attitudes towards death and presence of meaning in life suggesting that individuals who have a clear meaning in life also have a more accepting attitude towards death (Frankl, 1965; Reid, 1996; Ulmer, Range, & Smith, 1991). However, to our knowledge, little research has been conducted in regards to the Search for Meaning in life construct as it relates to attitudes about death.
Chapter Three

Statement of Purpose and Hypotheses

Previous research has found correlations between attitude towards death and meaning in life (Frankl, 1965; Kastenbaum, 1992; Reid, 1996; Ulmer, Range, & Smith, 1991). However, previous research also suggests that there may be important differences between individuals who perceive a Presence of Meaning in life and individuals that perceive they Search for Meaning in life (Steger et al., 2006; Steger et al., 2008). The present study is concerned with how Presence of Meaning in life and Search for Meaning in life might influence individual attitudes towards death, thus adding to the body of existential as well as thanatological literature. The present study strives also to advance clinicians’ understanding of how both Presence of Meaning and Search for Meaning might influence individual attitudes towards death and how individuals cope with questions of life and death. Furthermore, an understanding of individual attitudes towards death in relation to perceived meaning in life can also aid clinicians in developing appropriate interventions, improving treatment outcome, helping individuals cope with existential concerns, monitoring progress in treatment, and potentially alleviating or reducing grief symptoms.

Hypotheses

1. It is hypothesized that both Approach Acceptance and Neutral Acceptance of death will correlate positively with Presence of Meaning in life. This hypothesis is
substantiated by previous research findings which indicate that individuals who either report meaning in life or have strong beliefs regarding an afterlife (or lack thereof) also report an attitude of Approach Acceptance or Neutral Acceptance towards death (Durlak, 1972; McKnight & Kashdan, 2009; Steger, Oishi, & Kashdan, 2009; Zika & Chamberlain, 1992).

2. It is hypothesized that Fear of Death, Escape Acceptance, and Death Avoidance will all correlate negatively with Presence of Meaning in life. This hypothesis was conceptualized as a corollary to hypothesis #1.

3. It is hypothesized that Search for Meaning in life will correlate positively with Fear of Death, Death Avoidance, and Escape Acceptance. Rationale for this hypothesis is based on past findings which reported that individuals searching for meaning in life tended to report higher levels of depression and overall negative affect (Steger et al., 2006), as well as higher levels of anxiety and rumination (Steger et al., 2008). Furthermore, research indicates that individuals who report a lack of direction and a no sense of purpose in life also reported higher levels of death anxiety (Quinn & Reznikoff, 1985), a finding which indicates that individuals who are searching for meaning in life are also more fearful and anxious in regards to death.

4. It is hypothesized that Search for Meaning in life will correlate negatively with Neutral Acceptance of death and Approach Acceptance of death. This hypothesis was conceived as a corollary to hypothesis #3.
Research Questions

1. Are there any significant gender differences in the DAP-R scales?

2. For DAP-R scales on which there is a significant gender difference, will Presence of Meaning in life or Search for Meaning in life significantly account for variance above and beyond the variance due to gender?

3. When considered together, which of the five DAP-R subscales (Fear of Death, Death Avoidance, Neutral Acceptance, Approach Acceptance, Escape Acceptance) predict significant variance in Presence of Meaning scores?

4. When considered together, which of the five DAP-R subscales (Fear of Death, Death Avoidance, Neutral Acceptance, Approach Acceptance, Escape Acceptance) predict significant variance in Search for Meaning scores?
Chapter 4

Method

Participants

Participants were recruited from the Humboldt State University (HSU) psychology online subject pool. HSU is a medium sized, four year, public university located in Northern California. Participation in the study was entirely voluntary and completely anonymous, with no consequences for participants that decided to withdraw from the study at any point. Our sample size consisted of 106 participants which provided us with 99% power to detect a medium effect size of .50.

Procedure

Measures were administered through the HSU online subject pool website. Some participants received extra credit for their participation in the study depending upon instructor approval.

Measurement

Demographic questions. We collected information about participant’s gender and age (see Appendix A).

Death attitude profile-revised. Participants completed the Death Attitude Profile-Revised (DAP-R; Wong, Gesser, & Reker, 1994), a multidimensional self-report
instrument comprised of five scales measuring Neutral Acceptance, Approach Acceptance, Escape Acceptance, Fear of Death, and Death Avoidance (see Appendix B). The DAP-R utilizes a 7-point Likert scale with which the respondent can indicate personal level of agreement for the 32 items. Answers can range from ‘strongly agree’ to ‘strongly disagree’. The DAP-R consists of ten Approach Acceptance items with possible scores ranging from 10 to 70. Approach Acceptance includes items such as “death is a union with God and eternal bliss” and “I look forward to life after death.” There are seven Fear of Death items with possible scores ranging from 7 to 49. Example Fear of Death items include “death is no doubt a grim experience” and “the subject of life after death troubles me greatly.” There are five Death Avoidance items with possible scores of 5 to 35. Example Death Avoidance items include “I avoid death thoughts at all costs” and “I try to have nothing to do with the subject of death.” There are five Escape Acceptance items with possible scores ranging from 5 to 35. Examples of Escape Acceptance items include “death will bring an end to all my troubles” and “I view death as a relief from earthly suffering.” There are also five Neutral Acceptance items with scores ranging from 5 to 35. Example Neutral Acceptance items include “death is neither good nor bad” and “death should be viewed as a natural, undeniable, and unavoidable event.” Wong et al. (1994) reported internal consistency alpha coefficients ranging from .65 for Neutral Acceptance to .97 for Approach Acceptance, test-retest stability coefficients ranging from .64 for Neutral Acceptance to .95 for Approach Acceptance, high levels of convergent validity with other similar measures, and good discriminate
validity. Additionally, Neimeyer (1997-1998) has regarded the DAP-R as being among the most psychometrically reliable measures of attitudes toward death currently available.

**Meaning in life questionnaire.** The Meaning in Life Questionnaire (MLQ; Steger, Oishi, & Kaler, 2006) is a 10 item instrument measuring both Presence of Meaning in life and Search for Meaning in life (Appendix C). According to Steger et al. (2006), the “Presence of Meaning subscale measures the subjective sense that one’s life is meaningful, whereas the Search for Meaning [subscale] measures the drive and orientation toward finding meaning in one’s life” (p. 85). Items measuring Presence of Meaning in life include “I understand my life’s meaning” and “my life has a clear sense of purpose.” Items measuring Search for Meaning in life include “I am looking for something that makes my life feel meaningful” and “I am always looking to find my life’s purpose.” The MLQ utilizes a 7-point Likert scale with responses ranging from ‘absolutely untrue’ (1) to ‘absolutely true’ (7). Item number 9, “my life has no clear purpose”, is the only reverse-coded item on the MLQ. Possible scores range from 5 to 35 for both Presence of Meaning and Search for Meaning. Steger et al. (2006) reported good overall internal consistency for the MLQ, and internal consistency reliability coefficients of .86 for the Presence of Meaning subscale and .88 for the Search for Meaning subscale. Additionally, Steger et al. (2006) reported good convergent validity with other similar measures, as well as good discriminant validity.
Chapter 5

Results

Undergraduate students \((N=106)\) completed the study online, which consisted of the Meaning in Life Questionnaire (MLQ), the Death Attitudes Profile-Revised (DAP-R), and a demographic questionnaire. Participants took approximately seven minutes \((M = 6.72, SD = 3.64)\) to complete the questionnaires, with a range of 2 to 32 minutes. The mean age of participants was 21.69 years \((SD = 5.24)\), with 79.25 % of participants reporting their gender as female \((n = 84)\). Reliability coefficients for the DAP-R scales and MLQ scales were examined using Cronbach’s alpha. The following reliability coefficients were found for the DAP-R: Approach Acceptance, \(\alpha = .95\); Neutral Acceptance, \(\alpha = .59\); Fear of Death, \(\alpha = .88\); Escape Acceptance, \(\alpha = .84\); Death Avoidance, \(\alpha = .92\). These reliability coefficients for the DAP-R are consistent with the reliability coefficients reported by Wong et al. (1994). For the MLQ, the following reliability coefficients were found: Presence of Meaning in life, \(\alpha = .86\); Search for Meaning in life, \(\alpha = .88\). These reliability coefficients are consistent with the reliability coefficients reported by Steger et al. (2006). For the purposes of our study analysis, the reliability levels for the DAP-R and the MLQ scales were considered acceptable.

To test the first four hypotheses, the five DAP-R scales were correlated with the two MLQ scales. The correlation matrix is presented in Table 1. There were small, but significant, positive correlations between Presence of Meaning and Approach
Acceptance, $r(106) = .21$; Search for Meaning and Death Avoidance, $r(106) = .17$; and Search for Meaning and Approach Acceptance, $r(106) = .19$; all $ps < .05$.

Hypothesis #1 predicted that both Approach Acceptance and Neutral Acceptance of death would correlate positively with Presence of Meaning in life. Approach Acceptance did have a significant positive correlation with Presence of Meaning; however, the correlation between Presence of Meaning and Neutral Acceptance was non-significant. Therefore, hypothesis #1 was partially supported. Hypothesis #2 hypothesized that Fear of Death, Escape Acceptance, and Death Avoidance would all correlate negatively with Presence of Meaning in life. None of these correlation coefficients was statistically significant; therefore Hypothesis #2 was not supported. Hypothesis #3 predicted that Search for Meaning would correlate positively with Fear of Death, Death Avoidance, and Escape Acceptance. In support of hypothesis #3, Death
Table 1.

Correlation Matrix for Study Variables

<table>
<thead>
<tr>
<th></th>
<th>Approach</th>
<th>Neutral</th>
<th>Escape</th>
<th>Fear of Death</th>
<th>Death Avoid</th>
<th>Presence</th>
<th>Search</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approach</td>
<td>1</td>
<td>-.181*</td>
<td>.294**</td>
<td>.046</td>
<td>.076</td>
<td>.020*</td>
<td>.192*</td>
</tr>
<tr>
<td>Neutral</td>
<td>-.181*</td>
<td>1</td>
<td>.004</td>
<td>-.517**</td>
<td>-.321**</td>
<td>.094</td>
<td>-.037</td>
</tr>
<tr>
<td>Escape</td>
<td>.294*</td>
<td>.004</td>
<td>1</td>
<td>-.012</td>
<td>-.138</td>
<td>-.062</td>
<td>.057</td>
</tr>
<tr>
<td>Fear of Death</td>
<td>.046</td>
<td>.517**</td>
<td>-.012</td>
<td>1</td>
<td>-.541**</td>
<td>-.049</td>
<td>.065</td>
</tr>
<tr>
<td>Death Avoid</td>
<td>.076</td>
<td>-.321**</td>
<td>-.138</td>
<td>-.541**</td>
<td>1</td>
<td>-.026</td>
<td>.168*</td>
</tr>
<tr>
<td>Presence</td>
<td>.209*</td>
<td>.094</td>
<td>-.062</td>
<td>-.049</td>
<td>.026</td>
<td>-1</td>
<td>.054</td>
</tr>
<tr>
<td>Search</td>
<td>.192*</td>
<td>-.037</td>
<td>.057</td>
<td>.065</td>
<td>.168*</td>
<td>.054</td>
<td>1</td>
</tr>
</tbody>
</table>

* p < .05; ** p < .01.

Avoidance was significantly correlated with Search for Meaning in life. Therefore, hypothesis #3 was partially supported. Hypothesis #4 hypothesized that Search for Meaning would correlate negatively with Neutral Acceptance of death and Approach Acceptance of death. Approach Acceptance was correlated positively at a significant level with Search for Meaning in life, and Neutral Acceptance was not significantly correlated with Search for Meaning. Therefore, hypothesis #4 was not supported.

To investigate gender differences, next we performed independent samples t-tests for each of the DAP-R and MLQ scales. The t-values, means and standard deviations by gender, as well as overall means and standard deviations, are given in Table 2. Significant gender differences were found for the Neutral Acceptance and Fear of Death scales of the DAP-R. Male participants scored significantly higher on Neutral
Acceptance \( (M = 30.32, SD = 3.86) \) than female participants \( (M = 28.48, SD = 3.64) \), \( p < .05 \). For the Fear of Death scale of the DAP-R, female participants had higher mean scores on Fear of Death \( (M = 26.72, SD = 9.51) \) than male participants \( (M = 21.13, SD = 8.29) \), \( p < .05 \). Significant gender differences were also found for the Presence of Meaning subscale of the MLQ with female participants reporting higher levels of Presence of Meaning in life \( (M = 24.09, SD = 6.36) \) than male participants \( (M = 20.91, SD = 4.85) \), \( p < .05 \).

Next we performed a hierarchical regression analysis for the Fear of Death and Neutral Acceptance scales of the DAP-R to determine whether Presence of Meaning in life significantly accounted for variance in those DAP-R scales above and beyond the variance due to gender (Research Question #1). Results revealed that Presence of Meaning in life did not account for significant variance in the Neutral Acceptance scale beyond that due to gender, \( R^2_{\text{change}} = .019, F_{\text{change}} (1, 103) = 2.114, p > .10 \).
<table>
<thead>
<tr>
<th></th>
<th>Means and Standard Deviations</th>
<th>t-Values</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Women</td>
<td>Men</td>
</tr>
<tr>
<td>Approach Acc</td>
<td>37.78</td>
<td>37.00</td>
</tr>
<tr>
<td></td>
<td>(14.87)</td>
<td>(10.96)</td>
</tr>
<tr>
<td>Neutral Acc.</td>
<td>28.48</td>
<td>30.32</td>
</tr>
<tr>
<td></td>
<td>(3.64)</td>
<td>(3.86)</td>
</tr>
<tr>
<td>Escape Acc.</td>
<td>16.61</td>
<td>15.73</td>
</tr>
<tr>
<td></td>
<td>(6.40)</td>
<td>(6.52)</td>
</tr>
<tr>
<td>Fear of Death</td>
<td>26.74</td>
<td>21.14</td>
</tr>
<tr>
<td></td>
<td>(9.51)</td>
<td>(8.28)</td>
</tr>
<tr>
<td>Death Avoid</td>
<td>15.86</td>
<td>13.14</td>
</tr>
<tr>
<td></td>
<td>(6.77)</td>
<td>(5.91)</td>
</tr>
<tr>
<td>Presence</td>
<td>24.09</td>
<td>20.90</td>
</tr>
<tr>
<td></td>
<td>(6.36)</td>
<td>(4.85)</td>
</tr>
<tr>
<td>Search</td>
<td>25.96</td>
<td>25.18</td>
</tr>
<tr>
<td></td>
<td>(5.59)</td>
<td>(5.89)</td>
</tr>
</tbody>
</table>

* p < .05.
Next we performed a hierarchical regression analysis for the Fear of Death and Neutral Acceptance scales of the DAP-R to determine whether Search for Meaning in life and Presence of Meaning in life, respectively, significantly accounted for variance in those DAP-R scales above and beyond the variance due to gender (Research Question #1). Results revealed that Presence of Meaning in life did not account for significant variance in the Neutral Acceptance scale beyond that due to gender, $R^2_{\text{change}} = .019$, $F_{\text{change}}(1, 103) = 2.114, p > .10$.

Similarly, we next entered gender in Model 1 and Search for Meaning in life in Model 2 to determine whether Search for Meaning in life accounted for variance in Fear of Death above and beyond gender. Results indicated that Search for Meaning in life did not account for significant variance in the Fear of Death scale beyond that due to gender, $R^2_{\text{change}} = .003$, $F_{\text{change}}(1, 103) = .296, p > .10$.

Next we performed two separate regression analyses to investigate the relation between each of the DAP-R scales as they relate to the Presence of Meaning in life and Search for Meaning in life subscales respectively (Research Questions # 2 & 3). With all of the DAP-R scales in the model, the overall $R^2$ was nonsignificant, $R^2 = .082$, $F(5, 100) = 1.78, p > .10$ for Presence of Meaning. Similar nonsignificant results were found for the prediction of Search for Meaning from all five DAP-R scales, $R^2 = .064$, $F(5, 100) = 1.36, p > .10$. 
Chapter Four

Discussion

The purpose of this study was to examine the relation of both Search for Meaning in life and Presence of Meaning in life to individual attitudes towards death. Based on a conceptual analysis of the literature a number of hypotheses were put forth. It was hypothesized that both Approach Acceptance and Neutral Acceptance of death would correlate positively with Presence of meaning in life. It was also hypothesized that Fear of Death, Escape Acceptance, and Death Avoidance would all correlate negatively to Presence of meaning in life. It was hypothesized that Search for meaning in life would correlate positively with Fear of Death, Death Avoidance, and Escape Acceptance. It was also hypothesized that Search for meaning in life would correlate negatively with Neutral Acceptance of death and Approach Acceptance of death. The goal of the research was to contribute to the present literature on death attitudes, and examine how Search for and Presence of meaning in life relate to individuals’ attitudes towards death.

Our initial results revealed small, but significant, correlations between the following scales: Presence of Meaning and Approach Acceptance; Search for Meaning and Approach Acceptance; Search for Meaning and Death Avoidance. Therefore two of the four hypotheses were partially supported. The correlation between Approach Acceptance and Presence of Meaning is consistent with previous research findings which indicate that individuals who either report Presence of Meaning in life or have strong beliefs regarding an afterlife (or lack thereof) also tend to report an attitude of Approach
Acceptance towards death (McKnight & Kashdan, 2009; Steger, Oishi, & Kashdan, 2009; Zika & Chamberlain, 1992). However, our findings also indicate that Approach Acceptance was correlated with Search for Meaning. It is interesting to speculate on possible reasons why Approach Acceptance was correlated with Presence of Meaning and Search for Meaning in life.

One possible explanation for this unexpected finding is that, as Wong et al. (1994) point out, Approach Acceptance “implies belief in a happy afterlife” in which the individual welcomes the prospect of death since a life hereafter has been secured for them. In considering this definition, it seems logical to deduce that because an attitude of Approach Acceptance is associated with belief in an afterlife, that Approach Acceptance may somehow be related to religiosity as most religions worldwide maintain some belief in an afterlife. If we entertain the possibility that Approach Acceptance and level of religiosity are somehow related, then our unexpected finding can be placed into a coherent and explicable context. For example, Allport and Ross (1967) make a clear distinction between “intrinsic religiosity” and “extrinsic religiosity.” According to Allport and Ross (1967), "the extrinsically motivated person uses his religion” (p. 434), often for some personal gain (e.g., security, solace, sociability, status, etc.); whereas “the intrinsically motivated lives his religion" (p. 434) with a genuine, heartfelt, devout faith in the religion. Within the context of Allport and Ross’s (1967) explanation of intrinsic and extrinsic religiosity, our “unexpected” finding becomes conceivable as it is possible for an individual who is “extrinsic” in religiosity (i.e., religion is used for some personal gain), to report an attitude of Approach Acceptance (so as to remain consistent with the
beliefs of the religion), yet at the same time also be searching for meaning in life because they do not experience the ‘genuine, heartfelt, devout faith’ in the religion nor in the afterlife espoused by the religion.

Another possible explanation for this unexpected finding is offered by Steger et al. (2006), who explain that although an individual may experience meaning in life, they may also be seeking “to add to their current sources of meaning… they might want a deeper understanding of that which already makes their lives feel meaningful … they might seek new sources of meaning as existing ones fluctuate in significance” (p. 89). In this way, an individual may report an Approach Acceptance attitude towards death due to a belief in a “happy afterlife” (e.g., “because I am a good Christian I know that I am going to heaven”), yet may still be searching to add more meaning to their current source of meaning (e.g., “should I be a doctor or an artist?”).

The correlation between Search for Meaning and Death Avoidance is consistent with previous research findings which indicate that Presence of Meaning in life is negatively correlated with Death Avoidance (Ardelt, 2003). Conceptually, this finding also makes sense as it is understandable that an individual may wish to avoid “thinking or talking about death” if they have not found or are still searching for meaning in life (e.g., “I cannot entertain the idea my own mortality if I have not found a meaning for living”).

Despite the fact that small, but significant correlations were found between the aforementioned scales, once a regression analysis was performed that included all five DAP-R scales simultaneously, these correlations became nonsignificant. Therefore, no significant correlations were found overall between the DAP-R scales and the MLQ.
scales. However, due to the small, but significant correlations that were found prior to the regression analysis, further research investigating the relation between these two measures may be appropriate.

Additionally, it is important to note that the present study found no correlation between the Search for Meaning scale and the Presence of Meaning scale, thus corroborating Steger et al.’s (2006) findings that Presence of Meaning and Search for Meaning in life are in fact two separate constructs. This is particularly important as the MLQ is the only scale to our knowledge that differentiates between these two different, yet related constructs.

A possible explanation for the nonsignificant findings for Hypotheses 1 and 4 has to do with the low internal consistency reliability coefficient found for the Neutral Acceptance scale, Cronbach’s $\alpha = .59$, which is considerably lower than the generally accepted standard for scale reliability, Cronbach’s $\alpha = .70$ (Cortina, 1993). However, the reliability coefficient found in the present study for the Neutral Acceptance DAP-R scale is consistent with the reliability coefficient reported by Wong et al. (1994) for the Neutral Acceptance scale, Cronbach’s $\alpha = .65$. A likely explanation for the low internal consistency reliability coefficient for the Neutral Acceptance scale is that the questions may not be measuring a unitary construct, which then detrimentally affects the validity of the scale.

Another probable explanation for the nonsignificant results of our study in general may have to do with the fact that participants took approximately seven minutes ($M =$
6.72, $SD = 3.64$) to complete the questionnaires, with a range of 2 to 32 minutes. It is highly plausible that a number of the participants in our study answered the questionnaires rather quickly, possibly without reading and pondering the questions thoroughly. Similarly, it is important to note that participants received credit for participation in the study regardless of how long it took them to complete the questionnaires.

**Strengths and limitations.** Although no significant correlations were found overall between the DAP-R scales and the MLQ scales, the present study has a few noteworthy strengths. One strength of the present study was that it used both the Search for Meaning and Presence of Meaning constructs rather than the problematic unitary meaning in life conceptualization. Another strength of the present study is that assessed a range of death attitudes, thus adding to the body of thanatological literature concerned with investigating the multidimensional nature of death attitudes.

The present study also has several limitations. To begin, our sample consisted exclusively of undergraduate psychology students from Humboldt State University. Therefore our sample was limited not only by the fact that it was a sample of convenience, but also by the age of participants, and by the overrepresentation of women in the sample. Another possible limitation of the present study is that possible moderating variables were not assessed. Considering the fact that a number of researchers have found religiosity to influence existential beliefs and concerns (Ardelt, 2003; Dezutter et al., 2009), it seems safe to assert that religiosity would likely influence our study variables. Some other possible moderators to consider include participant
experience with death or loss, serious health issues, mental health status, as well as participant personality.

**Clinical implications.** It is interesting to note that significant correlations were found despite the fact that participants seemed to have answered the questionnaires rather quickly, and possibly without reading and pondering the questions thoroughly. Although the correlations were small, the findings have possible important clinical implications that could warrant further investigation into the relation between these two measures. For example, the present study has provided some encouraging data suggesting that Presence of Meaning in life might be related to an Approach Acceptance attitude towards death.

This finding may have important implications for mental health professionals working with clients dealing with issues of loss or dying as previous research indicates that an individual’s perceived meaning in life directly impacts the treatment of and recovery from bereavement (Hui & Fung, 2009; Lemay & Wilson, 2008; Ulmer, Range, & Smith, 1991; Wong et al., 1994). Therefore, it may be appropriate for mental health professionals to develop interventions designed to aid bereaved individuals in recognizing and developing a greater sense of meaning in their life. Furthermore, these scales could be used to gather information at intake to develop interventions and individualized treatment plans, monitor progress, and assess successful therapy outcomes.

**Directions for future research.** Future studies should attempt to replicate the present study by collecting data from a broader population sample (e.g., not just undergraduate psychology students). Also, it may be valuable to not include the Neutral Acceptance scale as the internal consistency reliability coefficient is below generally
acceptable standards, indicating that the Neutral Acceptance subscale may not be measuring a unitary construct. It may also be important for future studies to utilize a religiosity and/or spirituality measure in conjunction with a questionnaire related to experience with loss and death to account for the possible moderating effect religiosity and personal experience with loss or death may have on the study variables. Another important consideration for future studies is to administer the measures in such a way that participants are more motivated to fully consider each item on the questionnaires. This can be done by administering the measures in person or perhaps by offering some desirable compensation for participating in the study. Future studies should also assess these constructs in bereaved or dying individuals so that any future findings are more applicable to these populations.
References


Appendix A

Demographic Questions
For the following questions please circle or provide the answer that best describes you:

1. Gender? Male Female

2. Age? ____________
Appendix B

Death Attitude Profile-Revised
Death Attitude Profile-Revised (DAP-R)

This questionnaire contains a number of statements related to different attitudes toward death. Read each statement carefully, and then decide the extent to which you agree or disagree. For example, an item might read: “Death is a friend.” Indicate how well you agree or disagree by circling one of the following: SA = strongly agree; A = agree; MA = moderately agree; U = undecided; MD = moderately disagree; D = disagree; SD = strongly disagree. Note that the scales run both from strongly agree to strongly disagree and from strongly disagree to strongly agree.

If you strongly agreed with the statement, you would circle SA. If you strongly disagreed you would circle SD. If you are undecided, circle U. However, try to use the undecided category sparingly. It is important that you work through the statements and answer each one. Many of the statements will seem alike, but all are necessary to show slight differences in attitudes.

1. Death is no doubt a grim experience. 
   SD  D  MD  U  MA  A  SA

2. The prospects of my own death arouses anxiety in me.
   SD  D  MD  U  MA  A  SA

3. I avoid death thoughts at all costs.
   SD  D  MD  U  MA  A  SA

4. I believe that I will be in heaven after I die.
   SD  D  MD  U  MA  A  SA

5. Death will bring an end to all my troubles.
   SD  D  MD  U  MA  A  SA

6. Death should be viewed as a natural, undeniable, and unavoidable event.
   SD  D  MD  U  MA  A  SA
7. I am disturbed by the finality of death.  
8. Death is an entrance to a place of ultimate satisfaction.  
9. Death provides an escape from this terrible world.  
10. Whenever the thought of death enters my mind, I try to push it away.  
11. Death is deliverance from pain and suffering.  
12. I always try not to think about death.  
13. I believe that heaven will be a much better place than this world.  
14. Death is a natural aspect of life.  
15. Death is a union with God and eternal bliss.  
16. Death brings a promise of a new and glorious life.  
17. I would neither fear death nor welcome it.  
18. I have an intense fear of death.  
19. I avoid thinking about death altogether.  
20. The subject of life after death troubles me greatly.
21. The fact that death will mean the end of everything as I know it frightens me.  SD  D  MD  U  MA  A  SA
22. I look forward to a reunion with my loved ones after I die.  SD  D  MD  U  MA  A  SA
23. I view death as a relief from earthly suffering.  SD  D  MD  U  MA  A  SA
24. Death is simply a part of the process of life.  SD  D  MD  U  MA  A  SA
25. I see death as a passage to an eternal and blessed place.  SD  D  MD  U  MA  A  SA
26. I try to have nothing to do with the subject of death.  SD  D  MD  U  MA  A  SA
27. Death offers a wonderful release of the soul.  SD  D  MD  U  MA  A  SA
28. One thing that gives me comfort in facing death is my belief in the afterlife.  SD  D  MD  U  MA  A  SA
29. I see death as a relief from the burden of this life.  SD  D  MD  U  MA  A  SA
30. Death is neither good nor bad.  SD  D  MD  U  MA  A  SA
31. I look forward to life after death.  SD  D  MD  U  MA  A  SA
32. The uncertainty of not knowing what happens after death worries me.  SD  D  MD  U  MA  A  SA
Appendix C

Meaning In Life Questionnaire
Meaning in Life Questionnaire (MLQ)

Please take a moment to think about what makes your life and existence feel important and significant to you. Please respond to the following statements as truthfully and accurately as you can, and also please remember that these are very subjective questions and that there are no right or wrong answers. Please answer according to the scale below:

<table>
<thead>
<tr>
<th>Absolutely</th>
<th>Mostly</th>
<th>Somewhat</th>
<th>Can't Say</th>
<th>Somewhat</th>
<th>Mostly</th>
<th>Absolutely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Untrue</td>
<td>Untrue</td>
<td>Untrue</td>
<td>True or False</td>
<td>True</td>
<td>True</td>
<td>True</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>

1. _____ I understand my life’s meaning.
2. _____ I am looking for something that makes my life feel meaningful.
3. _____ I am always looking to find my life’s purpose.
4. _____ My life has a clear sense of purpose.
5. _____ I have a good sense of what makes my life meaningful.
6. _____ I have discovered a satisfying life purpose.
7. _____ I am always searching for something that makes my life feel significant.
8. _____ I am seeking a purpose or mission for my life.
9. _____ My life has no clear purpose.
10. _____ I am searching for meaning in my life.
Online Instructions

To begin, thank you all for your time and willingness to participate in this study conducted by Kevin Powell, a graduate student in the Psychology department at Humboldt State University. Psychological research is important because it often aids researchers and clinicians in developing new interventions for better therapeutic outcomes. Your participation in this study is important to psychological research as the results of this study will contribute to scientific literature. Participation in this study is completely voluntary and therefore you can withdraw from the study at any point without penalty. You must be 18 years of age or older to participate. In order to advance to the first page, you must click on the box below that says “I Agree” to indicate your consent to participate in this research study. Your participation in this study will remain completely confidential and any identifying information will be kept separate from your responses. In view of the fact that some of the information being gathered is possibly of a sensitive nature, there is a potential risk that you may experience some negative affect. As a result, upon completion of the questionnaires a page that includes detailed information about local psychological services available to students as well as other community members will be provided. Please review this page and print it out if you would like a copy for yourself. We estimate that the questionnaires will take you approximately 15-25 minutes to fill out. If you have any questions, please contact Dr. Beth Eckerd either by phone at: (707) 826-3757, or by email at: beth.eckerd@humboldt.edu

Thank you very much for your participation.

I understand that by clicking on “I agree” below I am consenting to participate in this research study and am at least 18 years of age.

☐ I agree
☐ I do not agree
Appendix E

Mental Health Referral List
We wish to thank you for volunteering in our study. We recognize that some of the questionnaires touch upon several questions that are of an existential nature. As such we also recognize that some of the questions asked may be potential areas of concern for you. People sometimes, while completing the questionnaires, become aware of behaviors and thoughts that may suggest the need to talk to a professional or seek out further information.

If, after completing the questionnaires, you recognize that there may be some issues or feelings that are a potential problem for you, we strongly urge you to contact a professional to talk to about your concerns or to answer questions that you may have.

The following agencies and resources are available for you to contact:

- HSU Counseling & Psychological Services (707)826-3236
- HSU Community Counseling Clinic (707)826-3921
- Open Door Clinic (707)441-1624
- Humboldt County Mental Health (707)445-7715

Once again, we thank you for your participation in this research project.