The Relationship between Coping with Death and Attitude to Death in College Students

Yijun Song
Chengdu University of TCM, No.1166 Liutai Avenue, Wenjiang District, Chengdu City, Sichuan Province
272280163@qq.com

Keywords: college students, coping with death, attitude to death

Abstract: This study aimed to determine the relationship between attitude to death and coping with death in college students, and explore the difference in coping with death among college students with diversity backgrounds. It was carried out in two universities located in Chengdu and Chongqing with 319 participants (male=126, female=194). The results implied that their coping with death was significantly correlated to three dimensions such as escape acceptance, neutral acceptance and approach acceptance of attitude to death (P < .01). College students born in different places were different in coping with death (P < .01).

1. Background

Death is viewed as a serious event, in China, death is an unlucky topic, we always avoid to talk about it. But nowadays, a lot of suicide events, especially about college students, appear to public, we have to face with it. The ability of coping with death refers to a series of abilities and skills of an individual to deal with the death of oneself and others, as well as the attitude and belief in these abilities [1] [2]. However most studies about coping with death are focused on nurses, the better the nurses’ ability in coping with death, the better they can nurse the dying patients [3].

And there are also few studies of college students’ attitudes to death, who don’t major in medicine. Attitude to death refers to people's reaction to the death of oneself or others, and it is the evaluative and stable internal psychological tendency (positive or negative) that people hold towards death [4]. Principal components factor analysis confirmed our five theoretical scales, namely: Approach Acceptance (AA, view of death as a gateway to a happy afterlife), Escape Acceptance (EA, view of death as escape from a painful existence), Neutral Acceptance (NA, view of death as a reality that is neither to be feared nor welcomed), Fear of Death (FD, negative thoughts and feelings about the state of death and process of dying), and Death Avoidance (DA, some sort of defense mechanism that keeps death away from one's consciousness) [5]. As the dying people’ important career, nurses need to receive sufficient death and terminal patient care training during and after their school education, so that they can gain insights into their own professional behaviors [6] [7].

The suicide event of college students has attracted more and more attention from the public. In this article, we will focus on analyzing the ability of college students to cope with death and the relationship between coping with death and attitude to death. In this way, we hope that researchers can deeply understand the coping with death and attitude towards death of ordinary college students, and then conceive a scientific death/life education, let college students attach great importance to life and reduce the suicide rate of them.

2. Methods

2.1 Participants

The current study used a convenience sampling method to recruit college students in two universities located in Sichuan province and Chongqing province. The sample consisted of 319 college students, aged seventeen to twenty-four. Of these students, 39.2 percent were males, 60.8 percent were
females; 33.2 percent majored in medicine, 66.8 percent didn’t; 31.3 percent were only child, 68.7 percent were not; 70.5 percent were come from rural areas, 29.5 percent were come from urban. Data were collected online, after completing the online questionnaire.

2.2 Coping with death

We used the Coping with Death Scale (CDS) developed by Bugen [2] to measure college students’ ability of coping with death, and explore the difference in coping with death under different backgrounds. Chinese researcher Zheng Ruishuang et. translated this scale into Chinese version in 2021. The revised simplified Chinese version on CDS included 28 items which were grouped into six factors (① the ability to communicate with others on dying or death, ② self-death acceptability, ③ ability to deal with matters after death, ④ ability to cope with death, ⑤ self-death perception and expression ability, ⑥ life inspection ability). S-CVI of the scale was 0.987, and I-CVIs were between 0.382 to 1.000. Six factors enjoyed a cumulative contribution rate of 60.800%. The Cronbach’s α coefficient for the Chinese version CDS was 0.905, the Guttman split-half reliability was 0.784, and the test-retest reliability of the scale was 0.973. So the simplified Chinese version CDS has good reliability and validity [8].

2.3 Attitude to death

Attitude to death was measured by the Death attitude profile-revised (DAP-R) [9], DAP-R captures attitudes towards dying and death. The measure consists of 32 items, which are assigned to 5 dimensions [10]. The measure is answered on a 5-point Likert scale (from 1 = disagree to 5 = agree), All dimensions are scored positively. Total scores on each sub-scale are the average of the items of the sub-scale, the higher the score, the more the participants’ attitude towards death tends to this dimension. The Cronbach’s α coefficient of the whole scale was 0.868, and the Spearman-Brown split-half Coefficient was 0.835. The Pearson correlation coefficients was from 0.554 to 0.828. In addition to natural acceptance, the Pearson correlation coefficients between dimensions and the total score were 0.630-0.792, five factors form factor analysis were basically the theoretical conception of the DAP-R scale, and the cumulative variance contribution rate was 55.906% [11].

3. Results

3.1 Data Analysis

Independent sample T-test was performed to determine relationships between college students’ demographic characteristics and their coping with. To test the hypotheses about the relationships between coping with death and attitude to death, Pearson correlation analysis was used.

3.2 Independent sample T-test

<table>
<thead>
<tr>
<th>demographic</th>
<th>n</th>
<th>Coping with death</th>
<th>x±s</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>female</td>
<td>194</td>
<td></td>
<td>111.835±20.092</td>
<td>-1.807</td>
<td>.072</td>
</tr>
<tr>
<td>male</td>
<td>125</td>
<td></td>
<td>106.536±28.535</td>
<td></td>
<td></td>
</tr>
<tr>
<td>major in medicine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>yes</td>
<td>106</td>
<td></td>
<td>112.094±20.728</td>
<td>1.235</td>
<td>.218</td>
</tr>
<tr>
<td>no</td>
<td>213</td>
<td></td>
<td>108.596±25.238</td>
<td></td>
<td></td>
</tr>
<tr>
<td>only child</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>yes</td>
<td>100</td>
<td></td>
<td>111.420±27.551</td>
<td></td>
<td></td>
</tr>
<tr>
<td>no</td>
<td>219</td>
<td></td>
<td>109±21.995</td>
<td>.840</td>
<td>.402</td>
</tr>
<tr>
<td>birthplace</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>rural</td>
<td>225</td>
<td></td>
<td>106.560±23.347</td>
<td></td>
<td></td>
</tr>
<tr>
<td>urban</td>
<td>94</td>
<td></td>
<td>117.415±23.441</td>
<td>-3.781</td>
<td>.000</td>
</tr>
</tbody>
</table>

From table 1, there is significantly difference between birthplaces and coping with death, the college students come from urban have better ability in coping with death than those from rural. First,
this may be caused by the uneven distribution of the number of people. Second, the education quality of urban is better, college students who were born in urban can get life education. Besides, they have good sources of information and living sources, they are more social experienced. It can be further analyzed from the psychological view.

3.3 Pearson correlation analysis

According to Pearson correlation analysis, coping with death is significantly correlated to escape acceptance, neutral acceptance and approach acceptance (P < .01). The higher the college students’ ability to cope with death, the more they tend to these three positive death attitudes. There is no significant difference between coping with death and fear of death, death avoidance.

Table 2. the relationship between coping with death and attitude to death

<table>
<thead>
<tr>
<th>Coping with death</th>
<th>EA</th>
<th>FD</th>
<th>DA</th>
<th>NA</th>
<th>AA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pearson correlation</td>
<td>.189**</td>
<td>.010</td>
<td>.067</td>
<td>.475**</td>
<td>.269**</td>
</tr>
<tr>
<td>Significance (two-tailed)</td>
<td>.001</td>
<td>.862</td>
<td>.233</td>
<td>.000</td>
<td>.000</td>
</tr>
</tbody>
</table>

** P < .01

4. Discussion

Our research results show that there is significant difference between college students from rural and those from urban in ability to cope with death, which may be caused by differences in educational resources or family education methods. The results of research on rural students’ mental health issues show that mental health of rural students is lower than that of urban students, such as anxiety, depression, etc [12]. The quality of education and the level of mental health may cause differences in coping with death, but how and why? These can be used as a direction for future research, and inspire researchers to carry out life education among college students.

College students’ ability in coping with death is significantly positively correlated to the three positive attitudes in attitude to death, which proves that the better the college students' ability in coping with death, the more positive their attitudes towards death. According to previous studies, college students’ attitudes towards death are more inclined to neutral acceptance, they believe death is a natural thing [13], so most people have better abilities to cope with death. And in this study, it is shown that there is no significant difference in coping with death of medical students or not. Because the college students major in medicine are more likely to face death, the research topics related to death are mostly concentrated in this group, however, as the phenomenon of suicide among college students has attracted more and more public attention, the death attitude of non-medical college students and other related issues should also be paid attention to.

Whether coping with death and attitude to death constitute a causal relationship? What factors affect the ability in coping with death and attitude to death of college students? How to carry out correct death education to improve the ability in coping with death of college students, especially those in rural areas, is worthy of further discussion.

References


