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Children's Understanding of Death: Formation of the Concept of Death and Its Main Characteristics

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Abstract

Introduction. Already at an early age a child learns what death is, faces the fact of his or her own mortality and the mortality of loved ones. The death anxiety caused by the realization of one's own mortality affects the mental and psychological well-being of the individual. Discussion of death contributes to its understanding - for this purpose, programs of death education are created. To work effectively with the topic of death in children and adolescents, it is important to know the age norms for the development of the concept of death. The concept of death is an understanding of death, awareness of its main characteristics, described through a number of components (universality, irreversibility, non-functionality/cessation and causality). **Theoretical justification** The conceptualization of death is influenced by various factors: age, cognitive and intellectual characteristics, culture, family, religion, and media. The maturity of the concept of death is achieved through the development of its components, which leads to the formation of a natural-scientific understanding of death. **Discussion.** Age is one of the leading factors for the formation of the concept of death. For children under 3 years of age the understanding of death is practically inaccessible: the absence of a parent is perceived as his death, emotional reactions to the loss are formed. From 3 to 6 years of age, understanding of individual components of the concept of death develops actively, but unevenly. Children begin to describe death as a biological phenomenon, fear of death arises. From ages 6 to 9, most develop a relatively mature understanding of death, but biological ideas coexist with supernatural ones. Children 9–11 years old think about death abstractly, are interested in religion, the concept of death becomes "fuzzy". Understanding of the irreversibility of death deteriorates. Fear of death decreases by adolescence. Adolescents rarely talk about death, but may ask questions when they do.

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Belief in their uniqueness, immortality is revealed; interest in death increases, religious knowledge is replaced by atheistic knowledge. Understanding the age specifics of the formation of the concept of death will help to make programs of work with children and adolescents in the framework of the theme of death.

Keywords

understanding death, concept of death, childhood, developmental psychology, thanatopsychology, fear of death, anxiety, death anxiety

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Introduction

At a fairly early age, an individual is confronted with the realization that life is finite. The psychological well-being of the individual depends on how successfully he or she manages to cope with the anxiety arising from the realization of the finality of life. More and more researchers are delving into the study of thanatopsychological issues (understanding the concept of death, attitudes toward death, awareness of automortality, the relationship between thanatic factors and psychological well-being, etc.) due to the understanding of the importance of the problem and the impact of death anxiety on everyone.

According to the existential paradigm, our psychological well-being depends on how we deal with the fear of death. I. Yalom believes that death anxiety represents one of the basic factors in the development of psychopathology: a child at an early age is confronted with the thought of death, and in response to this, anxiety arises in his consciousness. Psychopathology represents a failed, ineffective way of coping with anxiety (Yalom, 2008; Iverach, Menzies & Menzies, 2014).

The topic of death can touch a child at any time: relatives may die, pets may die, the child may face a serious illness or life-threatening situations. The family, teachers and psychologists should be ready to provide support in such moments. In order to provide quality support, we need to have a good understanding of how children see this phenomenon, how they feel about it, what exactly scares them, and what factors influence children's perception of death.

Purpose of the study

Our goal is to collect and summarize the data obtained in foreign and domestic works reflecting the main factors influencing the formation of the concept of death. Based on the age factor, we have identified groups of children, listed the features of understanding of death in each group.

The specifics of understanding death are described using the four-factor concept of death, originally developed by Speece and Brent. This conceptualization is widely accepted among Western studies (Slaughter, Griffith, 2007; Bonoti, Leondari & Mastora, 2013; Panagiotaki, Hopkins, Nobes, Ward & Griffiths, 2018; Agrawal, 2019, etc.). The four-factor conceptualization of death includes such categories as cessation (with death, the inherent life functioning of the organism ceases), universality (all living beings will die one day), irreversibility (it is impossible to reverse death; once someone has died, they will not come back to life), and causality (realistic internal and external causes) of death. In our opinion, such generalization will help specialists to better orient themselves when working with a child of any age, which will improve the quality, effectiveness of any preventive and psycho-corrective measures.

Theoretical justification

Research on children's understanding of death began in 1934, when P. Schilder and D. Wechsler conducted a study on children and adolescents 5-15 years old, compiling a detailed description of children's conceptions of death. Wechsler conducted a study on children and adolescents 5-15 years old, compiling a detailed description of children's conceptions of death. They noted that (Schilder & Wechsler, 1934):

- children are not able to realize their own mortality; it is prevented by the very fact of realizing their existence in the current moment;
- children have little understanding of the distant past and future, and this may affect their ability to predict their death;
- Despite their inability to realize their own mortality, children believe in the death of others, but this, in their view, is as a result of a violent act;
- death from disease and old age seems unrealistic to children;
- the child is not afraid to die, but he is afraid to be killed;
- Suicidal ideation is an avoidance tool for the child. Death is seen as a way out of the situation of deprivation.
- Adult teachings about life after death are largely accepted by the child, although they are taken more literally. God appears as a stage magician, ghosts are seen as real and dangerous.

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As one grows older, the conceptualization of death becomes more complete and realistic, from complete ignorance and lack of interest in the topic of death to a fairly complete logical or biological description of it (Anthony, 1971).

M. Nagy (1948) distinguished 3 stages of development of understanding of death depending on age:

- 3–5 years – death is not final, it is separation - the dead person continues to live elsewhere;
- 6–9 years – death is finite, but its inevitability and true causality are not realized. Death begins to be personified. The main function of personification is to alleviate anxiety (Yalom, 1980). At this stage, death seems distant from the child, and the child does not realize or acknowledge that he or she and his or her loved ones will die someday (Swain, 1978);
- from 9 years old – death is finite, irreversible, inevitable (Nagy, 1948).

The four-factor concept of death

In 1984, M. W. Speece & S. B. Brent attempted to define the main components of the concept of death, they are irreversibility, cessation, universality. The authors report that the majority of healthy children in modern urban industrial societies reach understanding of all three components at the age of 5 to 7 years (Speece & Brent, 1984). Later, the list of components varied from author to author, including such subconcepts as non-corporeal continuation (belief in the continuation of existence after the death of the body - reincarnation in a new body or the ascension of the soul to heaven), unpredictability (anyone can die at any time), and old age (understanding the biological sequence of life: birth, adulthood, aging, and death) (Brent & Speece, 1993; Lee, Lee, & Moon, 2009).

As a result, 4 components of generally accepted importance were identified. These were (Jaakkola & Slaughter, 2002):

- Inevitability/universality (death will happen to all living things);
- Irreversibility (the dead do not come back to life);
- cessation (death is characterized by cessation of body functions);
- Causality (death is ultimately caused by impaired bodily function).

Factors influencing the formation of the concept of death

A variety of factors influencing the formation of the concept of death are actively studied:

- family influence (Bonoti et al., 2013; McIntire, 1972); lower family socioeconomic status is associated with a more realistic understanding of death (Tallmer, Formanek, & Tallmer, 1974); children who have experienced prolonged separation from family during the first two years of life have a significantly poorer understanding of the concept of death than children without such experiences (Portz, 1965); parents who

are reluctant to engage children in conversations about death because of their own fear or out of a desire to protect their child from unpleasant experiences do not help their child develop a full understanding of life-cycle changes (Hunter & Smith, 2008);

- having experiences related to death (Cotton & Range, 1990; Hunter & Smith, 2008; Reilly, Hasazi, & Bond, 1983); children who faced the death of a parent due to terminal illness understood death better than their classmates who did not have such experiences (Hyslop-Christ, 2000);
- child's health status (Clunies-Ross & Lansdown, 1988; Redpath & Rogers, 1984; Spinetta, 1974; Bates & Kearney, 2015). Children with life-threatening illnesses show a greater understanding of death compared to healthy and chronically ill children (O'Halloran & Altmaier, 1996); children with cancer are less likely than healthy children to perceive death as a punishment (Jay, Green, Johnson, Caldwell, & Nitschke, 1987).

The influence of religion and culture on attitudes towards death is also studied. Thus, the success of coping with automortal anxiety (anxiety and fear of a person about his or her own death) is determined by whether a person is religious or not (Andrievskaya, 2017). Religious education expands children's conceptions of the meaning of life beyond ordinary existence (McIntire, 1972). Children's conceptualization of the afterlife is significantly influenced by parental religious beliefs (Wong, 2019). Some studies report that children's understanding of the components of death conceptualization is more influenced by culture than religion. This is particularly true for urban or rural experiences – children living in rural areas had a more realistic view of the causes of death and also developed an earlier understanding of the irreversibility of death compared to urban children (Panagiotaki, Nobes, Ashraf & Aubby, 2015). In another study, we find that a group of Chinese participants are more likely to report that death causes cessation of biological and psychological functions than a group of American participants, and Chinese participants are also less likely to speculate about the supernatural aspects of death than American participants. The authors attribute this to China's recent history of discouraging religious expression (Lane, Zhu, Evans, & Wellman, 2016). We can find domestic works concerning attitudes toward death of religious individuals, but we find a lack of such information for a child sample (Andrievskaya, 2017; Zabelina, & Fenvesh, 2019).

An important contribution to the field of research on attitudes towards death was the work of L. Iverach, R. G. Menzies, R. E. Menzies (2014), R. E. Menzies, R. G. Menzies (2023). The authors found correlations between attitudes toward death and psychopathology. Psychopathology is an ineffective way of coping with death anxiety (negative experiences that arise in a person when realizing one's own mortality, approaching death). Fear of death can be a transdiagnostic variable contributing to the development and maintenance of many chronic mental health problems (Menzies, Sharpe & Dar-Nimrod, 2019). Death anxiety is one of the primary fears underlying a range of mental health disorders, including hypochondria, panic disorder, depression, and eating disorders (Zuccala & Menzies, 2022).

Among the current studies, we find those that describe the role of video games in the process of death concept formation (high involvement in violent video games is associated with worse understanding of the concept of death, as well as lower fear of death) (Kai Yee et al., 2019; Nicolucci, 2019), the use of death imagery in animated films for children (Tenzek & Nickels, 2017; Bridgewater, Menendez, & Rosengren, 2021), ultimately leading to the development of the field of death education (Death Education – DE).

Death education

Discussing death in family and educational settings leads to a better understanding of death in children and adolescents (Schonfeld & Kappelman, 1990; Lee, Lee, & Moon, 2009), reducing alexithymia (Testoni et al., 2021). Death education - death education (DE) has been shown to temporarily increase death anxiety, but significantly reduce it in the long term (Testoni et al., 2018; Testoni, Ronconi et al., 2019; Testoni, Cordioli et al., 2019; Testoni, Biancalani et al., 2019; Moore, 1989; Jackson & Colwell, 2001).

Unfortunately, in our country the practice of DE remains underdeveloped both in theoretical and methodological terms and in practical terms. This, in particular, may be due to parents' unwillingness to discuss the topic of death with children because of their own fears, lack of knowledge about what and in what form to tell a child of a certain age. Talking about death is often avoided, adults distract the child from such issues or talk about death from a religious position, based on cartoons, use euphemisms ("flew away on a cloud") - all this can lead to the formation of an unrealistic view of death, as well as show that talking about death is undesirable. (Gavrilova, 2004; Shvareva, 2012; Bakanova, Andreeva-Co-Sen-Din, 2018; Bakanova, Andreeva-Co-Sen-Din, 2019). Death education could solve a number of urgent tasks. First of all, to weaken the taboo imposed by society on the topic of death and dying, which would open new opportunities for discussion within this field and help to work more effectively with childhood and adolescent fears, suicidal ideas, and the experience of loss. We could also achieve a decrease in alexithymia among children (Bakanova, Andreeva-Ko-sen-din, 2018). The movement towards DE, creation and dissemination of specialized educational programs would contribute to the formation of a more complete view and realistic expectations of death among children and adolescents, which would inevitably lead to a more complete view of life and realistic expectations from it.

We see that the accumulating knowledge about children's understanding of death is increasingly being put into practice in the world - through DE.

Among domestic ones there are a number of works that reveal the issue of adolescent attitudes to death, in particular – in adolescents with deviant or addictive behavior, with suicidal tendencies (Zhukova, 2016; Bogatyreva, Bospoldenov, 2017; Zhukova, Soldatova, 2019; Chistopolskaya, Enikolopov, Chubina, 2019; Abramyan, Khlomov, 2021; Andronnikova, 2022). There are also reviews of foreign studies of attitudes to death (Soldatova, Zhukova, 2018). There are studies of the ways of children's

coping with the fear of death (Bakanova, 2019), the personification of death is studied (Gavrilova, Barnashova, 2016). A significant part of domestic research is conducted on the adolescent sample (Novikova, Isaev, 2003; Gavrilova, Shvets, 2010; Khoziev, Vasenichev, 2015). The systematization of existing data is complicated by the fact that the use of the four-factor concept of death is insufficiently widespread in domestic studies, besides, methodological and ethical issues are still quite acute in domestic psychology.

Understanding death and psychological characteristics

Understanding of death is formed over the course of a child's life and can be considered mature when the major components of the concept of death are complete, resulting in a natural-scientific view of death. The more mature the understanding of death, the less pronounced the fear of death (Slaughter & Griffiths, 2007).

A significant part of studies emphasizes the relationship between age and the level of development of the concept of death, but not only age has weight here. A number of works find correlations between the intellectual level, as well as features of the cognitive sphere and understanding of death. It was noted (Anthony, 1971) that the relationship between the intellectual age of the child (the level of general intellectual development) and the maturity of the concept of death was higher than between the maturity of the concept of death and chronological age. The most significant changes in death conceptualization occurred between 7 and 8 years of age, attributing this to the influence of education (Anthony, 1971).

Child perceptions of death have been found to develop in parallel with the general cognitive and intellectual development formalized by Piaget: younger children create biological images of death, while older children describe the nature or essence of death, including personification, attributions of the death state, and symbolic or religious descriptions of death (Koocher, 1974; Schonfeld & Smilansky, 1989; Tamm & Granqvist, 1995; Wenestam & Wass, 1987; Yang & Chen, 2002). Death conceptualization may be influenced by measures of cognitive ability based on specific operant tasks (Cotton & Range, 1990; Kenyon, 2001; White, Elsom, & Prawat, 1978; Reilly, Hasazi, & Bond, 1983). Other studies find direct links between children's understanding of death and verbal abilities (Jenkins & Cavanaugh, 1986) or performance on Piaget's seriality, retention, and classification tasks (e.g., Cotton & Range, 1990, Hunter & Smith, 2008, Reilly et al., 1983). But there are also those who report no relationship between cognitive ability and death cognition (Mahon, 1999; Panagiotaki, Hopkins, Nobes, Ward & Griffiths, 2018). Discrepancies in findings may be due to differences in the designs and assessment measures used (Hopkins, 2014).

Intelligence helps to systematize knowledge about death, especially aspects of abstract thinking and logic. At the same time, life experience provides a better understanding of the causes of death (Orbach, Gross, Glaubman & Berman, 1986). Orbach, Weiner, Har-Even & Eshel (1995) highlight the intellectual prerequisites necessary for a mature understanding

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of death: high verbal ability; understanding of time and permanence; understanding of causality; distinguishing between "self" and "nonself"; and distinguishing between objects and living beings.

Individual levels of anxiety also influence children's understanding of death. Anxious children were less likely to demonstrate an understanding of the biological realities of death (Slaughter & Griffiths, 2007). Anxiety about death involves defense mechanisms that reduce children's understanding of death. For example, suicidality is associated with poor understanding of death (Orbach & Glaubman, 1979). Rates of death comprehension were worse in anxious children than in non-anxious children (Orbach et al., 1985; Orbach et al., 1986). It is separation anxiety that is thought to play a significant role in underlying death comprehension (Orbach et al., 1995). Moreover, people with secure attachment types experienced less fear of death than people with insecure attachment (Mikulincer, Florian & Tolmacz, 1990).

Discussion

Understanding death and biological age

Biological age is still the leading, most popular factor among researchers in understanding death, and it is this factor that is analyzed in particular detail.

0 to 3 years old

In a child from 0 to 3 years of age, object permanence is not fully developed; the child has no idea that the parent continues to exist when he or she is not in sight. This peculiarity imposes its imprint on the perception of death - for a child at a very early age, it is the same absence as leaving the room. Since death is an abstract concept, it is inaccessible to the child at this stage. The only things he or she can notice are the unmet needs, as well as the grieving moods of those around him or her (Krepia, Krepia & Tsilingiri, 2017).

As cognitive processes become more complex, the child is already able to recognize the mother. When she dies, the child may react with intense crying and sadness (Bowlby, 1980; Dmitrieva, 2019; Kaytez, 2020).

3 to 6 years old

At the 3- to 6-year age stage, children have a more accurate understanding of death than is traditionally expected (Hoffman, & Strauss, 1985; Ji, Cao, Han, 2017). For example, Nagy's (1948) now classic study argues that children 3-5 years old consider death to be inconclusive and reversible, i.e., the irreversibility component is incomprehensible to children, but by now a body of evidence to the contrary has accumulated (Lazar & Torney-Purta, 1991; Nguyen & Gelman, 2002; Panagiotaki et al, 2015; Mahmood Ashiri & Khodabakhshi-Koolaei, 2020; Agrawal, 2019; Slaughter & Griffiths, 2007; Slaughter & Lyons, 2003). But evidence is also found to support that for children in this age group,

death seems reversible, temporary (Isaev, 1992; Weininger, 1979; Willis, 2002) and is perceived as a dream, a temporary passing (Kaytez, 2020; Candy-Gibbs, Sharp, & Petrun, 1984–1985; Lonetto, 1980). A number of studies have documented that death is perceived as a biological phenomenon by 4–6 year old children (Slaughter, Jaakkola, & Carey, 1999; Slaughter, 2005; Panagiotaki et al., 2018; Wong & Power, 2022). At the same time, there are examples of biological and religious concepts coexisting simultaneously (Callanan, 2014; Wong & Power, 2022). Part of the research shows that the universality component was understood by most children between 3–5 years of age (Agrawal, 2019; Panagiotaki et al., 2018; Miller, Rosengren, & Gutiérrez, 2014; Slaughter, 2005; Candy-Gibbs, Sharp, & Petrun, 1984–1985), but other authors argue that universality may remain incomprehensible until 7–8 years of age, the same applies to cessation;

At age 4, children may believe that physical and mental functions in humans and animals are preserved after death (nonacceptance of cessation); by age 6, such beliefs weaken but become common again by age 7 (Lane, Zhu, Evans, & Wellman, 2016). It is also interesting that children understand the cessation of physical processes earlier than they realize that mental processes, such as thoughts and emotions, also cease with death (Bering & Bjorklund, 2004; Bering et al., 2005; Misailidi & Kornilaki, 2015).

Causality as the most complex component is learned later than the others. At this age stage, the foundations are laid: causality in plants can be understood by children as early as 4 years of age (children choose the correct option among pictures of plants and inanimate objects when asked to show "what can die if a person harms it" or "what can die if it gets sick," etc.) (Nguyen & Gelman, 2002), but the causality of human death is not understood until 8–10 years of age (Panagiotaki et al., 2015, Slaughter & Griffiths, 2007). There is also a view that states that by age 6, children begin to understand that death can be caused by many factors, not just old age (Panagiotaki et al., 2018).

This heterogeneity may suggest that at this age stage there is an active but uneven development of understanding of the individual components of the concept of death. Hyslop-Christ (2000) in his study also shows that none of the groups of children surveyed (3–5 years and 6–8 years) had an understanding of all four components. Fear of death often occurs at this age stage, with approximately 26% of 4–6 year old children reporting a fear of death (Slaughter & Griffiths, 2007).

6 to 9 years old

Some authors argue that between the ages of 5 and 8, most children develop a mature understanding of death (Smith & Hunter, 2008), while other data suggest that this occurs between the ages of 7 and 11 (Speece & Brent, 1992). Research indicates children's understanding of the universality and irreversibility of death during this age period (Gartley & Bernasconi, 1967; Vianello & Marin, 1989; Lansdown & Benjamin, 1985; Lazar & Torney-Purta, 1991; Stambrook & Parker, 1987; Childers & Wimmer, 1971; Cuddy-Casey & Orvaschel, 1997; Bering & Bjorklund, 2004; Panagiotaki et al., 2018; Kuzmina, 2021). Some surveys show that 7–8-year-old children provide biological explanations for death

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that also reflect a criterion of cessation (Talwar, Harris & Schleifer, 2011; Melear, 1973), mixed with supernatural ideas (Harris & Gimenez, 2005). American 6-year-old children also understood all 4 major components, but also relied on religious and metaphysical explanations of the afterlife (Rosengren, Gutiérrez, & Schein, 2014). According to some reports, automortality may be denied up to age 7–8 (Vianello, & Marin, 1989; Willis, 2002), irreversibility is also denied - children may have ideas that the dead can be resurrected if suitable measures are taken to do so. Older children may accept the universality of death but believe that only external influences or old age can cause death, indicating an incomplete understanding of causality (Meadows, 2006). All of this may be due to the fact that the child is actually aware of the universality and irreversibility of death, but chooses to deny it. Denial is also discussed by Yalom, who states that children understand the concept of death at a very early age, but adults train them to fear death (Yalom, 1980). When asking children about the causes of death, children are more likely to name unnatural causes (e.g., violence) at age 5–6, and natural causes (e.g., illness) at age 8–9 (Kenyon, 2001). Fear of death is one of the most common fears among children 7 years and older, with 50% or more of children over the age of 7 reporting a fear of death (Zakharov, 2005; Slaughter & Griffiths, 2007; Muris et al., 2000).

9 to 11 years old

Traditionally, it is believed that at this age stage, an "adult" understanding of death is already established (Kenyon, 2001; Slaughter & Griffiths, 2007; Ellis & Stump, 2000; Brent et al., 1996; D'Antonio, 2011). Nevertheless, based on other findings, it appears that the concept of death is not fully matured. Panagiotaki et al. (2018) argue that causality remains poorly understood in 10–11 year olds, there is no meaningful improvement in the understanding of cessation between 4 and 11 years of age. Irreversibility is understood worse in 10–11 year olds than in other age groups (Panagiotaki et al., 2018). A similar phenomenon is observed by Labrell & Stefaniak (2011), who note that only 55% of 11-year-olds provide correct answers to questions about irreversibility, although previous research indicates understanding of this aspect at an earlier age.

During this age period, children begin to think about death in more abstract, religious, metaphysical concepts (Panagiotaki et al., 2018), and as a result, the concept of death may become "fuzzy" (Koocher, 1973). Children aged 10–11 may be more likely to rely on supernatural ideas than younger children. The proportion of biological explanations for death may decrease in children of this age. Apparently, children need to recognize the universality and irreversibility of death in order to then begin thinking about the afterlife (Astuti & Harris, 2008; Harris, 2011). Thus, religious and biological explanations of death coexist simultaneously in the mind of a 10–11 year old child (Harris & Giménez, 2005; Legare, Evans, Rosengren, & Harris, 2012).

Against the background of increased religiosity, the understanding of both irreversibility, universality and cessation of death and its causality are weakening: children aged 11–12 are more likely to give spiritual explanations of death (e.g., claiming that the

time of the deceased has come) (Kenyon, 2001). It is confirmed that understanding of causality and universality is influenced by religious context (Gavrilova, 2009). A study on a sample of Spanish children ages 4-12 found that those who attended Catholic schools demonstrated a weaker understanding of cessation than children attending a secular school (Bering, Blasi & Bjorklund, 2005). A survey of American children ages 4 and 7-8 found that they had a poorer understanding of cessation compared to their Chinese peers, also attributed to the influence of religious context (Lane, Zhu, Evans, & Wellman, 2016).

Fear of death, which is more pronounced earlier in life, begins to subside closer to adolescence (Westenberg et al., 2004). It is important to note that a more mature understanding of death is associated with lower fear of death (Slaughter & Griffiths, 2007). Additionally, fear of death was lower in those children who had the opportunity to talk about their emotions and discuss death with their family (Slaughter & Griffiths, 2007; Stylianou & Zembylas, 2018).

Ages 12 and up

At this age period, the phenomenon of "personal fable" - the child's belief in his/her uniqueness and immortality - manifests itself. The age of 12-15 years is characterized by the belief that other people are mortal, but the child himself will not be affected by it (Elkind, 1967). With age, this belief wanes. Adolescents rarely talk about death with friends or family, but if the opportunity arises, they may ask questions that concern them ("How do people prepare for death?", "Do some people really die happy?"). Adolescents are chronologically distant from the future, they face new challenges that require solutions, they are oriented toward life and their youth, but at the same time they are living through loss: the loss of childhood, of naive ways of knowing, of "ideal" parents-all leading to "normal adolescent mourning" (Sugar, 1968). And it is precisely such contradictions - between the seemingly optimistic features of adolescence and its losses - that create a special attraction to the topic of death, a need to understand it, and, at the same time, a heightened fear caused by these experiences (Noppe & Noppe, 1991).

Adolescents may also experience "social death"-isolation from their peer group for a variety of reasons, leading to feelings of loneliness and anxiety (Noppe & Noppe, 1991).

In younger adolescence, the cognitive component of the attitude to death is characterized by the predominance of religious knowledge, but in older adolescence atheistic knowledge begins to prevail (Bogatyeva, Bepoldenov, 2017). In 13-14 years old adolescents are characterized by fear of unexpected death, in 15-16 years old - fear of painful death and worries about the transience of time (Gavrilova, 2004). Adolescents realize their own finitude. The fear of death in adolescents may be associated with the unknown, loss of loved ones and loneliness; the fear of death is characterized by a pronounced desire to live (Novikova, Isaev, 2001; Novikova, 2002; Novikova, Isaev, 2002; Novikova, Isaev, 2003).

Conclusion

Realization of one's own mortality and understanding of death are topics of concern for every person regardless of gender, age, nationality and other factors. Every individual faces reflection on the topic of death, and already at the age of four a child begins to familiarize with the phenomenon of death, all components of the concept of death develop. The quality of development of death components can be influenced by different factors: family, health status, experience of encountering death, age and level of psychological development.

The development of the concept of death is uneven, and future studies are yet to identify the regularities of this process. It is also important to determine the strength of factors other than age that influence the formation of the concept of death. This will allow for the development of tools through which professionals can effectively adjust children's understanding of and attitudes toward death. Another important task to be accomplished is the creation of a common methodology for future research.

The data presented in this article can form the basis of recommendations for parents and professionals. The data from our survey will help adults to understand what, depending on the age stage, children think about death and what may be troubling them. Also, based on the survey, psychological support programs can be created for children and adolescents facing anxiety about death.

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Conflict of Interest Information

The author has no conflicts of interest to declare.