Community-Based Death Preparation and Education: A Scoping Review

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Abstract

The COVID-19 pandemic revealed a need for people and communities for death preparation. Few studies have examined community-level interventions for death preparation and education. This scoping review scrutinized the relevant literature following PRISMA 2018 guidelines. Six databases were searched for articles published between 2010 and 2020. We found that cultural, socioeconomic, and individual values affected death preparation and that online courses and life-death education were effective preparation methods. Additional research is needed to identify the population-specific effectiveness of interventions. To fully investigate death preparation and education at the community level, theory-based studies employing quantitative and qualitative methods are also needed.

Keywords

Death; Preparation; Death education; Dying; Community-based

Introduction

The outbreak of COVID-19 has affected people in over 200 countries according to the World Health Organization (WHO, 2022). At the time of writing, among more than 412 million confirmed infection cases, at least 5.8 million people have died (WHO, 2022). Given this horrendous and largely unforeseen situation, occurring in conjunction with the aging of the global population, the need for research regarding preparation for death has increased.

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Death preparation refers to taking actions to accept mortality broadly (Kastenbaum, 2012). Community-based death preparation includes understanding the continuum of life and death, appreciating life events, reducing fear and anxiety from death, and thinking about how to deal with death-related issues for oneself or in relation to losing a loved one in the future (Liu & Van Schalkwyk, 2018; Mak, 2012). Community-based death preparation education focuses on educating the public while individuals are healthy to prepare them for the future by integrating death education into daily life (Mak, 2013).

Community-based death preparation and education should be addressed as part of individuals' normal lives and not only in the hospital setting, where the process of death is often impeded by medical science (Kim et al., 2016). While many studies have addressed end-of-life care for patients in the hospital setting, little research has focused on preparation or education for death at the community level. Given the aging of our population, much medical attention has been focused on end-of-life or palliative care (Boucher et al., 2021; Luta et al., 2021), and advanced end-of-life care and advanced socio-emotional care are provided for those near death (Liu & Schalkwyk, 2018). Such care can extend people's lives, and thus patients and family members have had to make medical decisions about whether physical death should be delayed (Miller-Lewis et al., 2020). However, community-based death preparation has largely been neglected by researchers.

People can experience the death of those close to them any time, and death preparation promotes acceptance of unexpected death as part of the continuum of life. For example, among other studies that have supported the need for death education within the community health context, Chapple et al. (2017) found that encouraging a community conversation about death helped people to accept death in a positive way and to behave proactively with regard to death-related decision making. In addition, previous research has suggested a need for advance preparation for unanticipated death. Death preparation at the community level has taken various forms in particular situations, including management of death anxiety in the elderly population (Mohammadpour et al., 2018) and survivors' contending with the loss of loved ones (Liu & van Schalkwyk, 2018; Shah et al., 2013).

Death preparation offers various benefits such as decreasing death-related anxiety and stress, promoting a positive awareness of death, and motivating people to appreciate their lives (Chapple et al., 2017; Liu & van Schalkwyk, 2018; Mohammadpour et al., 2018; Nan et al., 2018; Shah et al., 2013). Despite the suggested benefits of death preparation, many people do not undergo this process and must contend with unresolved issues related to death (Chan & Yau, 2009). On the whole, there has also been inadequate research attention to death preparation and particularly to the lack of it at the community level. Given the small number of publications in this area, we employed a scoping review methodology to examine the literature regarding community-based death preparation and education. The findings illustrate how death preparation and education have been investigated, which factors affect death preparation, and synthesize significant findings from the literature.

Methods

Search Strategy

The literature review for this study followed the 2018 Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (PRISMA, 2018). From March 18 through July 13, 2020, we searched six databases: Academic Search Complete via EBSCO, MEDLINE via Ovid, APA PsycINFO via ProQuest, Sociological Abstracts via ProQuest, the Cumulative Index of Nursing and Allied Health Literature (CINAHL), and the Excerpta Medica Database (Embase) through Elsevier. The search used the following subject headings and keywords in various combinations employing "OR": *death/dying preparation*, *death/dying education*, *death/dying with dignity*, *death literacy*, *dignified death/ dying*, and *good death*. Due to difficulty in identifying search terms that would define specific populations, we decided to screen all the articles retrieved to detect the populations to exclude.

Study Selection

We focused on investigating community-based death preparation and education without consideration of what diseases might be involved. Article selection was completed based on the following study inclusion criteria: (a) primary research that was published in English in a scholarly journal between 2010 and 2020 and (b) was original research; (c) focused on death preparation or education intended for healthy people without diagnosed disease; and (d) focusd on healthy adults population (who had no diagnosed disease). Under the exclusion criteria, we excluded articles focusing on children or students and studies of the concept of grief or bereavement; end-of-life care; spiritual care; and health care professionals, caregivers, or patients. Also, research regarding Death Cafés was excluded due to Cafés being organized within a healthcare setting, engaging with healthcare providers, and focusing on patient's treatment (Koksvik & Richards, 2021). Furthermore, cell biology studies, forensic science papers, and full text of the article could not be obtained were also excluded from the review.

A total of 6,436 sources were found among the six databases. After removal of duplicate references, 4,093 articles remained (see Figure 1). Title and abstract screening resulted in exclusion of 1,721 articles, leaving 2,372 remaining for full-text screening. A final total of eight articles that met all the inclusion criteria were reviewed.

Results

How death preparation and education have been investigated

Of the eight articles reviewed in this study, five reported on qualitative research employing individual interviews, observations, and/or an ethnographic approach (Chan & Yau, 2009; Liu & van Schalkwyk, 2018; Mak, 2013; Nan et al., 2018; Rattanamongkolgul et al., 2012). The three remaining articles involved quantitative research: two studies each addressed a single online educational platform and collected data by means of pre- and post-intervention surveys (Miller-Lewis et al., 2020; Tieman et al., 2018), and one study employed an expert survey (Kim et al., 2016). Two of the eight studies were performed in Western countries; the

other six were conducted in Asian countries. Six studies involved at least some participants over 50 years of age (Chan & Yau, 2009; Liu & Van Schalkwyk, 2018; Miller-Lewis et al., 2020; Mak, 2013; Rattanamongkolgul et al., 2012; Tiemen et al., 2018). In addition, only two of the eight studies employed a theoretical framework. Liu and van Schalkwyk's (2018) study employed Kastenbaum's (2012) framework as a system for death, which consists of five elements (people, places, times, objects, and symbols) and seven functions of death preparation. This framework describes death as a network of interpersonal, sociophysical, and symbolic factors through which society mediates the relationship of an individual to mortality (Kastenbaum, 2012). Meanwhile, Mak's (2013) use of "life and death studies," in which life and death were viewed as compatible, did not specify a theoretical framework but did employ extended concepts from thanatology theory.

Which factors affect death preparation

The reviewed eight studies reported that cultural, socioeconomic, and individual values affected people's preparation for death. First, four studies found that cultural perceptions affected community perspectives toward death and death preparation and thus also affected individuals' attitudes toward these matters (Chan & Yau, 2009; Liu & van Schalkwyk, 2018; Mak, 2013; Miller-Lewis et al., 2020). For example, Liu and van Schalkwyk (2018) pointed out that the Chinese consider death something not to be discussed in public, and Miller-Lewis et al. (2020) identified a similar discomfort in Western countries. Another example of cultural influences is that in Asian countries where Confucianism has historically been embraced, traditional funeral rituals involve family members gathering and taking responsibility for the funeral; typically, the oldest son of a dead parent takes charge of the overall ritual as a show of filial piety (Chan & Yau, 2009). Compliance with traditions related to death was also found to be a factor affecting death preparation (Chan & Yau, 2009). Furthermore, mass media, including television programs and movies, were found to initiate thinking and talking about death and to influence people's viewpoints toward death (Mak, 2013). Second, four studies were with regard to socioeconomic influences on death preparation (Chan & Yau, 2009; Kim et al., 2016; Mak, 2013; Rattanamongkolgul et al., 2012). Chan and Yau (2009) reported that economic status affected people's formal preparations for death such as preparing a will. Mak (2013) pointed out that death was connected to social justice and economics because death and life are one. Moreover, traditional funeral rituals and social relationships were connected to financial burdens placed on family members (Kim et al., 2016; Rattanamongkolgul et al., 2012). Finally, three studies reported individual factors affected death preparation and education (Chan and Yau, 2009; Liu & van Schalkwyk, 2018; Mak, 2013). In two studies (Chan and Yau, 2009; Mak, 2013), significant near-death experiences on the part of the individual or family members were found to stimulate review of one's life and greater valuation of life. Also, individual experiences of death education enhanced participants' attitude toward death (Nan et al., 2018; Tiemen et al., 2018). Furthermore, both shared religious beliefs and individual beliefs regarding death and dying affected individuals' perceptions of death and preparation for making a good death (Liu & van Schalkwyk, 2018; Mak, 2013). For example, Christians and Buddhists have traditionally considered death as initiating a new life in the context of immortality (Mak, 2013).

Synthesized significant findings from the literature

Meaning of life and death to be an aspect of death preparation.—Five of eight studies addressed meaning of life' importance (Chan & Yau, 2009; Kim et al., 2016; Mak, 2013; Nan et al., 2018; Tiemen et al., 2018). Preparing for death provides an opportunity for evaluation of the dying individual's past and the value of their life while also recognizing what one needs to do to prepare for the rest of one's own life (Chan & Yau, 2009; Nan et al., 2018). By doing so, people can improve their ability to cope with future stresses related to death (Chan & Yau, 2009). Also, Mak (2013) suggested that education about life and death based on the concepts of thanatology could help young people learn how to spend their lives more meaningfully by acquiring life skills. In particular, Mak (2013) explained that involving teachers in death education would help them encourage their students to pursue meaningful lives and to reflect on their own life and death when appropriate. Meanwhile, Kim et al. (2016) developed a death education curriculum for people in the community that incorporated the viewpoints of a variety of disciplines, including a meaningful life.

In addition, Hong Kong's life-death education (LDE) program not only addresses life and death for individuals but also provides helpful death preparation guidance for family members (Mak, 2013; Nan et al., 2018). Mak (2013) found that teachers in Hong Kong learned about life and death through the academic curriculum they completed in high school. Consistent exposure to death-related issues was accomplished through curriculum elements such as group discussions, role-playing, and art projects (Mak, 2013). Nan et al. (2018) explained that LDE in Hong Kong is provided in various forms, such as public speaking, group discussions, and oral presentations in home care settings. In Tiemen et al.'s study (2018) participants were encouraged to talk about any issues around living and death, and they reported that participants agreed that death is a part of life after Massive Open Online Courses (MOOCs) intervention.

Interventions that have been performed to be a method of death education.— Two studies used MOOCs as an online platform to provide death education and facilitate discussion about death at the community level. In Miller-Lewis et al.'s (2020) study, the online intervention provided articles and videos in multiple modules and encouraged participants to post comments on a death-related topic, including about how society viewed the topic, in each module. Tieman et al. (2018) also used MOOCs to promote community-level discussions of death-related topics, including the concept of death, awareness of death through media and language, and engagement in death. After discussing these and other death-related topics during the MOOCs, participants expressed greater comfort in talking about death compared to baseline (Tieman et al., 2018). In other words, the MOOCs were shown to be effective in promoting a positive attitude toward talking about death in public. In addition, Nan et al. (2018) applied Hong Kong's LDE education, incorporating visual arts sessions. These sessions made it easier for participants to express their wishes for death preparation with their family members, enlightened participants about the importance of death preparation discussions and helped people to understand that death is a natural part of life.

Practical Aspects of Death preparation.—Along with education, death preparation also includes proactive management of the practical aspects of death: people's wishes for a good death, preparation of death-related items such as the coffin and burial place, and people's desires to be respectful of the deceased person (Chan & Yau, 2009; Liu & van Schalkwyk, 2018; Mak, 2013; Rattanamongkolgul et al., 2012). In Liu and van Schalkwyk's (2018) study, participants' concept of preparing for a good death included acting on an unselfish wish to spare others unnecessary burdens. To do this requires people to contend with administrative processes that involve several practical matters, including obtaining life insurance, preparing a will, specifying future medical care preferences, and making arrangements for one's funeral as well as for distribution of one's wealth after death (Chan & Yau, 2009; Mak, 2013; Rattanamongkolgul et al., 2012). Also, advance preparation of death-related objects such as the coffin was considered necessary to reduce the burden on family members of deciding what was needed for the funeral ritual (Liu & van Schalkwyk, 2018; Mak, 2013). In Rattanamongkolgul et al.'s (2012) study, most participants paid into a community fund for their future funerals, and some decided to donate their bodies to medical science after death to reduce the need for death preparations among their family members.

Significant Stress Management and Death Competence.—Sharing and discussion of individual perspectives on death helped people acquire a comprehensive perspective on death (Chan & Yau, 2009; Kim et al., 2016; Mak, 2013). Also, in such interactions, people were able to express appreciation, sadness, or a mixture of responses to a person's passing (Mak, 2013). However, for such death preparation experiences to be productive, people needed an understanding of how to react to loss and how to mourn without experiencing excessive stress through death preparation and education (Kim et al., 2016). Specifically, two of the studies found that helping families to prepare for the permanent absence of a loved one helped them to better manage the stress arising from their sense of loss (Chan & Yau, 2009; Liu & van Schalkwyk, 2018). Finally, Miller-Lewis et al. (2020) defined "death competence" as the ability to cope with death and considered this to be a potential determining factor for people's participation in death education. Participants who had progressed in the authors' intervention showed higher death competence, which might suggest the potential for death competence to result in positive impacts on individuals' death preparations (Miller-Lewis et al., 2020).

Discussion

Death is a complex phenomenon with many interpretations; it is difficult to explain, and its interpretation varies according to individuals' timelines, such as when they themselves face the reality of dying or experience the moment of death or end of life (Brabant, 2011). Theoretical approaches were used to help people achieve an understanding of death (Hemer, 2019). Death-related theories such as thanatology theory incorporate broader aspects of life and may also describe specific aspects of death in detail (Mak, 2013; Nicolucci, 2019). However, there has been a lack of opportunities to show these frameworks' usefulness through their application to practice (Copp, 1998).

Our study results show that most of the included studies of community-based death preparation and education lacked a theoretical framework or systematic definition of concepts. Two of the eight studies did achieve systematic conceptualization through use of a theoretical framework. Specifically, Liu and van Schalkwyk (2018) employed Kastenbaum's (2012) framework, and Mak (2013) drew upon concepts from thanatology theory. The other six studies were limited to observations, interviews, or surveys with no theory-based structure.

Past research demonstrates the benefits of applying such theories to research on death preparation. For example, Brabant (2011) focuses on the personal experience of dying and death in alignment with Berger and Luckmann's (1966) social construction of everyday life. By applying this theory to the period at end-of-life, Brabant (2011) revealed what factors (e.g., social and cultural) were related to the social construction of death. Corr (1992) uses a task-based approach that addressed the physical, psychological, social, and spiritual contexts of death. Corr also explains how people's understanding of coping strategies for dying can be improved and how to empower, engage, and support those who want to assist with situations of dying. Phan et al. (2020) suggests unifying the theoretical orientation of life and death education and the paradigm of positive psychology, which includes positive life events and influences such as happiness. And because Fonseca (2012) believes that the theoretical concepts of death are interrelated and are affected by social and personal reflection, they suggest employing a combination of quantitative and qualitative methods for death education; the assumption is that the quantitative research should be based on the findings of qualitative research.

Given the multiple theoretical perspectives presented in these prior studies, it appears that the first step to understanding the constructs that would support efficient death preparation and education would be to apply the same theoretical framework of death across a series of studies. However, the studies we reviewed made little use of theoretical frameworks, and none integrated both quantitative and qualitative research methods. Such performance can mitigate theoretical challenges to fully capture the concept—instead, they reveal varied interpretations by researchers focusing on different individual factors.

Factors That Influence Death Preparation

Future community-based death preparation and education should include elements of cultural, socioeconomic, and individual factors. Consistent with earlier research (Kang et al., 2011; Lee et al., 2018), the reviewed studies found the following factors to have significant influences on death preparation: culture (Chan & Yau, 2009; Liu & van Schalkwyk, 2018; Mak, 2013; Miller-Lewis et al., 2020), socioeconomic status (Chan & Yau, 2009; Kim et al., 2016; Mak, 2013; Rattanamongkolgul et al., 2012), and individual experience (Chan & Yau, 2009; Mak, 2013; Nan et al., 2018; Rattanamongkolgul et al., 2012; Tiemen et al., 2018). However, individual factors were varied, including near-death experience, education experience, religious beliefs and individual beliefs. In addition to the influencing factors identified across the eight studies in this review, Lee et al. (2018) found that educational level, physical activity limitations, and life satisfaction all affect perceptions of death and

dying. As a suggestion for future studies, it will be helpful by specifying individual factors into physical, psychological, and spiritual categories in death preparation and education.

Specificity of Death Preparation Interventions

In this review, Mak (2013) and Nan et al. (2018) examined LDE for teachers and older adults, respectively, but we found no intervention studies that have targeted a specific at-risk population for community-level death preparation and education. Among the few descriptive studies in this area, Yun and Jo's study (2020) of older adults living alone showed a need to reduce loneliness and strengthen self-control in preparation for death.

The scarcity of studies focusing on at-risk populations is especially notable considering some groups' susceptibility to suicide. For example, the effects of occupation and employment status on suicide risk are notable, particularly among employees with unstable work circumstances (Min et al., 2015). In a 2017 U. S. national suicide report (Peterson et al., 2020), men working in the Mining, Quarrying, and Oil and Gas Extraction group had the highest overall rate of suicide, followed by men in the construction group; the highest suicide rates among women were observed in the Construction and Extraction and protective service groups. Given the effectiveness of LDE in some of the reviewed studies, an LDE approach could be expanded to help prevent suicide in groups demonstrating high suicidal ideation by effectively educating individuals about the value of life as well as about preparing for death. Considering that occupational and employment status affects the risk of suicide and that socioeconomic level is a factor affecting death (Milner et al., 2013), LDE for people with lower-skill jobs may serve to reduce their suicide risk.

On the whole, death was more often a taboo subject in Asian societies as well as in the West before COVID-19 (Chau, Cheung & Ho, 2019; Rawlings et al., 2017). This may be the reason there are not enough death preparation programs and education available at the community level globally. Our finding supported that applied LDE showed its effectiveness in teaching the targeted audiences (Mak, 2013; Nan et al., 2018). It is important to make a meaningful life and get rid of the fear of death by exploring the individual's eagerness of meaningful life at public death education. In addition, an online death education course was found to be effective in increasing death competency and in having a more positive death attitude (Miller-Lewis et al., 2020; Tiemen et al., 2018). The COVID-19 pandemic has changed customs related to death and of post-death due to governments COVID information (Sarmiento, 2021). Such changes includeprohibition of death and burial rituals, wich was not a concern in previous death preparation and education. Due to the impact by COVID-19, online death preparation and education methods could be beneficial as there are no risks of infection.

There was other research regarding the effectiveness of interventions for death preparation and education. Servaty-Seib and Parikh (2014) discussed the benefits of combining service learning with death education, stating that service learning can be useful for incorporating death education into counselor preparation. The authors maintained that service learning was consistent with death education's aims. In addition, Fonseca and Testoni (2012) asserted that mass media, including television, advertising, and even video games, could be used to promote a positive attitude toward death in the community. These authors also recommended

prioritizing community engagement in efforts to establish death education interventions (Fonseca & Testoni, 2012). Recently, the importance and needs of community based death preparation and education has been considered especially as many lives have been lost during the pandemic. On the whole, further studies are needed to evaluate the relative efficacy of the various death preparation and education interventions available in order to determine which interventions should be implemented in particular communities.

Conclusions

Consistent with earlier research, our study found that factors having significant influences on death preparation included culture/religion, socioeconomic status, and personal experience. Consideration of these factors should be a starting point in the development of death preparation and education programs. Given the fact that massive open online courses (MOOCs) and LDE were found to be effective preparation methods, it could be helpful to expand online or LDE education to teach about death preparation at a community level.

Two of the eight studies reviewed examined LDE for teachers and for older adults, but few intervention studies have targeted a specific at-risk population for community-level death preparation and education. Additional research is needed to identify the population-specific effectiveness of death preparation and education interventions. In consideration of the COVID-19 pandemic, MOOCs could be a beneficial intervention as it has no exposure risk.

Most of the studies reviewed lacked a systematic definition of community-based death preparation and education. Most also lacked a theoretical framework, and none of the reviewed studies combined quantitative and qualitative methods. Theory-based studies employing a mixed-method approach are needed to more fully investigate death preparation and education at the community level.

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Authors' short biographical notes

Sungwon Park, MSN, RN, is a PhD candidate at the College of Nursing, the University of Illinois at Chicago (UIC). She worked as the Principal Investigator of the project titled "Establishment of NET Preparation for Death Application for Koreans." She has studied in develop death education for community healthy adults in order to make them cope with their future situation appropriately. Her major interests are health promotion for community people.

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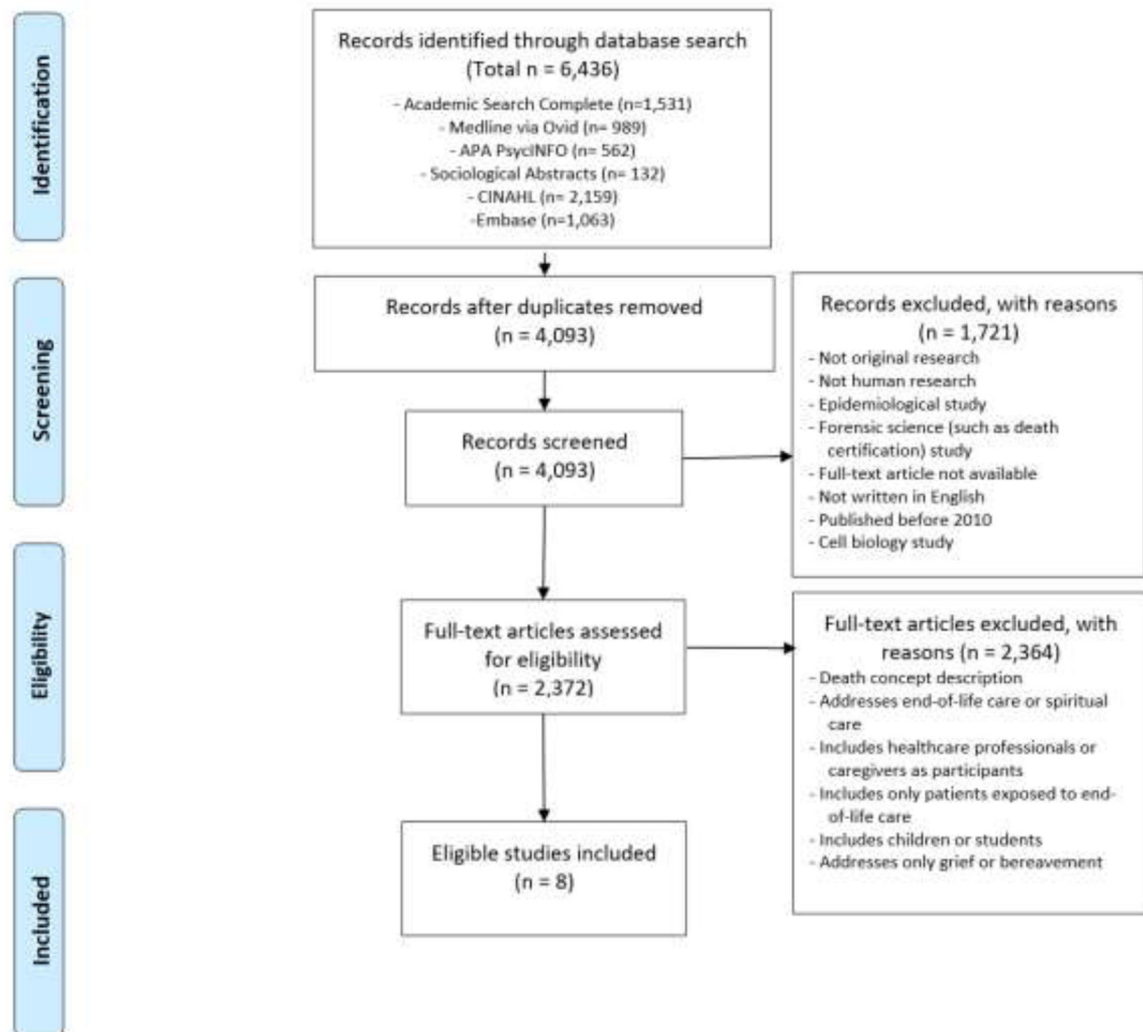Author Manuscript

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Figure 1.
The 2018 PRISMA guideline for the study

Table 1.

Summary of studies on death preparation and education

Reference	Setting and Sample	Sample Age (year)	Design	Methods	Findings
Chan & Yau (2009)	Singapore. 12 older adults. Phase I: 8 older adults Phase II: 4 older adults with experience managing the after-death affairs of a late parent	68–84	Qualitative research	In-depth interviews	1. Phase I: - Approaching issues related to death (e.g., apprehension, pain suffered, and blessings) - Factors influencing death preparation: (a) tradition; (b) previous experiences; (c) financial standing; and (d) family support. - Overall, older adults' expectations of their children can be an important predictor of the extent of death preparation; some older adults saw death preparation as an unnecessary burden on their families. 2. Phase II: - Children's attitudes toward their responsibility for parents' death preparation: did not feel this was a burden - Children's views on parents being burdens
Kim et al. (2016)	South Korea. 9 university professors.	Not reported	Expert survey	Analysis of the DACUM model using a checklist consisting of 24 duties and 77 tasks	Developed a death education model for the public: (a) preparation to say goodbye; (b) what kind of meaningful life I want; (c) fear of death; (d) hospice and alleviation medical services (1 and 2); (e) need for death education; (f) death and law; (g) what a meaningful life is; (h) communicating about death; (i) medical ethics related to death; and (j) loss and mourning
Liu & van Schalkwyk (2018)	A rural area of China. 14 community elders.	47–85	Narrative inquiry, Phenomenology	One-on-one semi-structured interviews using an adapted version of the Life Story Interview schedule (LSI; McAdams, 2008) as a guideline	1 Death preparation as instrumental - Save the next generation from difficulties - Unlike urban elders who prepared for death anticipating a good afterlife and becoming a worshiped ancestor, some rural elders seemed willing to give up this idealized future, arranging for their own death through suicide 2. Death preparation as taking action - Take action and make objects and symbols associated with death and dying - Death preparation was culturally determined and depended on the availability of life insurance, wills, or burial sites. - Ensuring intergenerational links through early distribution of material goods was a way to prepare for a good death and generate a feeling of continuity with the next generation following death.
Mak (2013)	Hong Kong. 15 university teachers.	25–55	Qualitative research	In-depth interviews (and observations) with three main questions: "What are university teachers' views on death and related issues?" "What are their strategies to help students affirm the value and meaning of life?" "What are the significant implications?"	1. Talked about death and dying 2. Experienced death and dying through four domains: (a) personal death experiences, (b) religious beliefs, (c) professional knowledge and experiences, and (d) mass media 3. Developed views on death and dying by sharing and discussing death-related matters 4. Responded to death 5. Made life decisions: need for personal and institutional support 6. Needed to be taught about life and death
Miller-Lewis et al. (2020)	Australia, United Kingdom, United States, New Zealand, and Canada.	19–84	Pretest-posttest design	Use of MOOCs offering educational interaction and participation in online discussions regarding	1. MOOCs were used as a socially constructed learning method to encourage active discussion in a virtual environment. 2. Included four modules taking 15 hours to complete. 3. Participation in Dying2Learn and exposure to online conversations about death and dying had a significant influence on death competence; the more courses participants

Reference	Setting and Sample	Sample Age (year)	Design	Methods	Findings
	134 members of the general public who completed MOOCs and surveys			sensitive death-related topics over 6 weeks	took, the greater their death competence became. 4. The between-subjects (i.e., between death experience and no death experience groups) main effect of age was statistically significant. Participants who had death experience scored higher for death competence than those without death experience.
Nan et al. (2018)	Hong Kong. 49 older adults: 16 men and 33 women.	Age range: not reported Mean: 71.5 SD: 7.6	Ethnography	A 10-session expressive arts-based life-death education program Analysis of photos of art products (mainly visual art), creative writings, and videotape sharing by participants in each session	1. Making art helps to recollect memories and organize life experience: (a) improving the thought process and prompting memories; (b) facilitating re-examination and re-organization of significant life experiences that occurred in various life stages; (c) acknowledging past significant experiences and inspiring insights; (d) social workers' role as a facilitator in the art-making process; and (e) art displaying a family theme 2. Making art enhances emotional expression: (a) evoking older adults' repressed emotions; (b) helping them express and release emotions; (c) retaining their feelings; and (d) transforming their emotions 3. LDE with art making enhances interpersonal and intrapersonal communication: (a) serving as a conduit for communicating deep personal feelings and thoughts; (b) catalyzing sharing of life and death issues with family members; and (c) providing a platform for dealing with afterlife arrangements 4. Making art inspires insights into life and death issues: (a) acceptance of the fact that death is part of life and (b) embracing life
Rattanamo-ngkolgul et al. (2012)	Thailand. 35 older adults: 21 women, 14 men.	60–89	Qualitative research	Participant observations, natural conversations, and in-depth interviews	1.Perceptions on aging 2. Preparing for old age: (a) changes in physical health; (b) greater dependence on others; (c) spirituality through life experiences and religious beliefs; and (d) preparing for death 3. Factors influencing preparation for aging: (a) life events; (b) personal health status; and (c) family economic status
Tiemen et al. (2018)	Australia. 1,156 participants who completed MOOCs.	16–84	Pretest-posttest design	Use of MOOCs offering educational interaction and participation in online discussions regarding sensitive death-related topics over 5 weeks	1. MOOCs helped participants have (a) greater agreement that death is a normal part of life; (b) a more positive attitude toward talking about death/dying; and (c) greater acceptance of social media discussion of death and dying over time 2. MOOCs produced no clear changes in participants' attitudes toward these statements: "Most people do not feel comfortable talking about death and dying," and "Death and dying are presented as a normal part of life in the mainstream media."

Note. DACUM: Developing a Curriculum; LDE: Life-Death Education; MOOC: massive open online course; SD: Standard Deviation.