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**Qualitative Enquiry into Mindfulness of Death Meditation among Experienced
Practitioners**

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Abstract

The benefits of meditation and mindfulness-based interventions are widely known and have been studied extensively since the end of the last century. However, mindfulness of death is a less researched practice, and appears to be less common among mindfulness practitioners. In non-clinical populations mindfulness of death has been linked to greater self-awareness, decreased death anxiety and increase in prosocial attitudes and values. Given the positive reports for using this practice, further research into its effects and mechanisms could be of benefit. The current study is a qualitative enquiry into mindfulness of death among experienced practitioners. The research is directed at exploring individual motivations to participate in such practice, its effects and challenges. Semi-structured interviews with six individuals from Aotearoa New Zealand and Australia were completed. Transcripts of the interviews were analysed using Interpretative Phenomenological Analysis (IPA), an appropriate qualitative methodology for analysing subjective experiences of meditation. Three group experiential themes emerged from the dataset: (1) *close and personal with death*, (2) *transformation* and (3) *controlled losing of the mind*. The results of this study indicated that mindfulness of death was an important practice that contributed to how participants understood their relationship with dying and living. It had contributed to their focus on values-based living and mindfulness in relationships. The participants also reported deepening their metacognitive and emotion regulation abilities. Identified challenges were around frequency and intensity of the practice, as well as one's emotional readiness to confront mortality. Practical implications of the findings are discussed. There is room for future quantitative research exploring the themes generated from this study using a larger statistically significant sample to test generalisability. Aspects such as intensity and frequency of this practice can also be explored further.

To my late Grandmother, Galina

Thank you for your kindness and love that will forever light my way.

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Table of Contents

Abstract.....	i
Acknowledgements	iii
Table of Contents	iv
List of Tables.....	viii
List of Figures.....	ix
Introduction.....	1
Research Aims.....	2
Structure of Thesis	3
Personal Statement	4
Chapter One: Death and Mortality.....	5
Death Anxiety.....	5
Early Theories	6
Death Denial.....	7
Existential Psychotherapy	8
Terror Management Theory (TMT)	8
Meaning Management Theory	12
Confronting mortality.....	14
Near-Death Experiences	15
Psychedelic Induced Experiences.....	17

Post-Traumatic Growth	18
Intentional encounters	20
Memento Mori (remember death)	20
Death Positive Movement	21
Traditional Practices	22
Chapter Two: Buddhism, Mindfulness and Death	25
Buddhism	25
Buddhism and Psychology	27
Meditation and Mindfulness	28
Mindfulness and the West.....	29
How Does Mindfulness Work?.....	31
Mindfulness and Death.....	33
Buddhism on Death.....	34
Mindfulness of Death	35
Death Contemplation in Clinical Practice	38
Research on Mindfulness of Death.....	40
Mindfulness and Death Anxiety	43
Mindfulness of Death as Exposure?	46
Summary of Literature Review	47
Current Research Objectives.....	48
Chapter Three: Method.....	50

Ethical Considerations.....	50
Theoretical Framework: Phenomenology	51
Methodology: Interpretative Phenomenological Analysis (IPA)	52
Participants.....	53
Procedure.....	55
Data Analysis.....	56
Trustworthiness.....	59
Chapter Four: Results	62
Close and Personal with Death.....	64
Shock of Death	65
Challenging Conditioning.....	69
Existential Crisis as Pathway to Healing.....	72
Transformation	74
Time is of the Essence – “Intentional living”	75
Mindfulness in Relationships	78
Fear – Insight in Discomfort.....	80
Transforming the Mind – Transforming Suffering.....	84
Letting Go.....	86
Reframing Death.....	89
“Controlled Losing of the Mind”	92
Sensory Immersion.....	92

Potent Medicine.....	93
Emotional Readiness	96
Chapter Five: Discussion.....	98
Pathways to Mindfulness of Death Meditation	98
Transformation Effects.....	101
Challenges in Practice	107
Practical Implications.....	109
Limitations	112
Future Research.....	114
Conclusion.....	115
Final Reflections	116
References.....	117
Footnotes.....	140
Appendix A	141
Appendix B.....	145
Appendix C.....	146
Appendix B.....	147

List of Tables

Table 1. <i>Example of Exploratory Notes and Experiential Statements</i>	57
Table 2. <i>Example of Personal Experiential Themes (PETs), Subthemes and Experiential Statements</i>	58
Table 3. <i>Results: Group Experiential Themes (GETs) and Subthemes</i>	62

List of Figures

Figure 1. *Thematic Map of Findings*.....64

Introduction

Awareness of one's own mortality has troubled human beings from the beginning of time. The knowing that an end will come to us all is a special gift to humans, yet it comes at a price (Menzies & Menzies, 2021; Yalom, 2008). As Yalom (2008) states, our existence is forever shadowed by the knowledge that we will grow, blossom, and inevitably, diminish and die.

Terror Management Theory (TMT; Solomon, et al., 1991) suggests that awareness of mortality, or mortality salience, generates a sense of fear, insecurity, and anxiety. According to TMT, individuals engage in protective and defensive behaviours, such as status seeking, materialism and prejudice, which underpin several cultural traditions and norms. Alternatively, Cozzolino et al. (2004) suggest that direct mortality awareness (whether it is a lab induced contemplation or a result of a life experience) could assist to manage existential terror, embrace existence, and enable intrinsic needs and values to surface.

Close encounters with mortality, such as confronting a terminal illness, accidents, facing a death of a loved one or near-death experiences (NDEs), can be extremely distressing and traumatic. However, at times they can have transformational and positive psychological effects (Taylor, 2016). These effects are often linked to the ideas around post-traumatic growth (PTG; Tedeschi & Calhoun, 1995). PTG is characterised by positive changes, including a new sense of appreciation for life, improved relationships, shifts in spiritual and philosophical attitudes and a new sense of self-confidence (Morris et. al, 2005).

Purposeful confrontations with mortality and impermanence can also have positive transformational effects. In fact, some forms of psychotherapy include imagining one's death or a funeral, contemplating death and impermanence, and reflections on existence (Furer & Walker, 2008; Hayes & Smith, 2005; Levine, 1997; Menzies & Menzies, 2020). Mindfulness

of death is one of the core practices for Buddhist practitioners (Shonin & Van Gordon, 2014) and is a focused technique of contemplating mortality. It is believed to be linked to finding greater meaning in life, letting go of stresses and material attachments (Shonin & Van Gordon, 2014). This practice consists of several instructions on death awareness, including contemplation on the inevitability of death, mindfulness of knowledge that death can happen at any time, awareness of attachments and eventually mindfulness of the breakdown of the body (Bond, 1980).

The benefits of meditation and mindfulness-based interventions (Kabat-Zinn, 2003) are widely known and have been studied extensively since the end of the last century. However, mindfulness of death is a less researched practice. In non-clinical populations mindfulness of death has been linked to greater self-awareness (Stella, 2016), decreased death anxiety (Park et al., 2016) and increases in prosocial attitudes and values (Moon, 2019; Moon 2020). Given the positive reports for using this practice, further research into its effects and mechanisms could be of benefit. It could provide more information of what mindfulness of death entails and identify possible challenges. In an era where mindfulness is commonly used by clinical practitioners, better understanding of this ancient Buddhist practice could serve as guidance on how to appropriately implement it in a therapeutic setting.

Research Aims

As there is limited academic literature on the topic of mindfulness of death, the current research questions are relatively broad. Mainly they centre around the aim of understanding what mindfulness of death practice involves and how it is experienced by practitioners. To expand on this primary aim, the study explores individual motivations to participate in such practice, its effects and challenges. The questions of this research are: What motivates someone to engage in mindfulness of death practice? What is the experience of the practice like for them? What effects are observed? What (if any) are the overall

impacts of this practice on relationship with themes of death and dying? To answer these questions, a qualitative enquiry method (Interpretative Phenomenological Analysis, IPA; Smith et al., 2009; Smith & Eatough, 2012) was utilised to analyse the experiences of individuals who have engaged or are currently practicing mindfulness of death meditation. All participants have been exposed to mindfulness of death as a practitioner, client, or a student, and reside in Aotearoa New Zealand or Australia.

Structure of Thesis

The first chapter explores ideas and theories around death and confrontations with mortality. It summarises early and contemporary theories, as well as literature on circumstantial and intentional encounters with death and the effects these can have on individuals.

The second chapter introduces Buddhism and its connections to modern psychology and practice of mindfulness. More information on mindfulness of death practice is provided in this chapter. Literature on utilising the practice is also summarised. The chapter is concluded with the description of the rationale for the current research aims.

The third chapter describes the researcher's theoretical framework adapted for the purposes of the current study. Ethical considerations, methodology and information about the participants are described.

The results of the analysis are presented in Chapter Four. These are illustrated and supported by direct quotes from participant interviews. Researcher's interpretations of participant reflections are included throughout the chapter.

The final chapter, Chapter Five, provides a discussion and interpretation of the research findings in the context of existing literature. Practical implications, limitations and

ideas for future research are discussed. Conclusion of the study follows at the end of that chapter.

Personal Statement

It is important to note that as a researcher, I cannot completely separate personal interests, experiences and perspectives on death and dying. After all, death is a universal condition that we all face, no matter how we feel or what we think about it. In my personal existential wondering, and at times terror, I have been drawn to and repelled by death. I have experienced encounters with dead and dying throughout my emergency services career, as well as death of family members that were very close to my heart. I have experienced a sense of panic at the thoughts of my own death, and at the same time felt inspired in pursuit of what was important.

I have practiced meditation and mindfulness for several years personally and for over a decade with counselling clients, as a therapist. Yet, I have not approached death in meditation until more recently, when the fear of death was no longer something I wished to compartmentalise or shun away from. What I did not expect followed. The fear of death remained, but the feelings of being alive, confident and content with everything around me became more prominent. Despite these insights I never encountered a context where I felt I could talk openly about this experience. Perhaps it is reflective of human innate death denial and avoidance, as Becker (1973) would suggest. It was not until now, whilst undertaking postgraduate study in psychology, that I revisited the practice. As such, my personal experience is something that I am mindful of before and during undertaking of this investigation. It is my hope that this research can guide others into this practice and uncover ways that we can confront mortality with curiosity and acceptance. Death can teach us the lessons before we die, so why not take an opportunity to get closer and find out what it has to say.

Chapter One: Death and Mortality

This chapter covers the literature on confrontation of death and mortality. The first part summarises early theories on the topic, followed by contemporary ideas such as Terror Management Theory (TMT) and Meaning Management Theory (MMT). The second part is a review of accounts of individuals confronting mortality circumstantially or on purpose. These instances include near-death experiences (NDEs), post-traumatic growth (PTG), as well as intentional encounters with death through traditional, religious and cultural practices.

Death Anxiety

According to Menzies and Menzies (2018), the human awareness of death develops across the first decade of life. This is when fear and anxiety related to death can increase. By the age of ten, most children can understand that death is irreversible and applies to all living things, it is inevitable and is characterised by ceasing of all bodily processes, such as speech, hearing and dreaming (Menzies & Menzies, 2018). For most, this fear will remain throughout adolescence and diminish to an extent across the lifetime. However, for some, a lifelong struggle with death anxiety may develop.

Menzies and Menzies (2021), describe death anxiety as a complex construct that may involve a range of different fears. These include, but are not limited to, fears of: (1) the dying process; (2) the annihilation of the self; (3) watching loved ones die; (4) separation from loved ones; (5) premature death; (6) potential punishment after death; (7) the unknown; (9) treatment of the body after death, and (9) how others will cope with one's absence (Menzies & Menzies, 2021). Death anxiety can drive adaptive coping strategies, such as seeking meaning through values-based actions, or through bolstering relationships with others, but it can also drive maladaptive coping strategies, such as avoidance, repression and related defensive behaviours (Menzies & Menzies, 2023; Solomon et al., 2015; Yalom, 2008). Dread

of death has been attributed to development and maintenance of numerous mental disorders (Arndt et al., 2005; Menzies & Menzies, 2023).

Early Theories

Early psychological theories on death include Freud's thesis on the 'death drive', *Todestrieb* (Freud 1920/1955). Freud proposed that there are two primary drives in one's unconscious mind, a sexual drive for Life – Eros, and a drive toward Death - Thanatos. The Eros is a drive toward life enhancement and self-preservation; and the Thanatos is a drive responsible for our innate propensity for destruction, manifesting in aggression and self-sabotage. According to Freud's writings the 'death drive' is an impulse toward return to the inorganic state. Death becomes the ultimate resolution of tension between Eros and Thanatos. The tension between life and death drives can be observed in psychotherapy (Mills, 2006). Human inherent capacities for self-destruction present as symptoms such as addictions, self-victimization and harmful behaviours (Mills, 2006). These lead to deterioration of physical health that are inherently made in pursuit of pleasure (Mills, 2006).

Later, Elisabeth Kübler-Ross' (1969) work brought the topics of death, loss and grief into the psychological research field. Kübler-Ross (1969) presented that a pattern of adjusting to death is in the five stages of coping: denial, anger, bargaining, depression, and acceptance. Her contribution had a powerful impact on study of death and grief. The sequential idea of the five stages has been criticised (Tyrrell et al., 2023), but what Kübler-Ross' work brought forward was the ideas around the defence mechanisms of denial and bargaining when dealing with death. She also highlighted the emotional impacts of facing and accepting the reality of death - anger and depression. In comparison to Freud's theory on drives, Kübler-Ross' ideas appeared to be more palpable, in that death related responses could be observed and measured.

Death Denial

Becker (1973) followed by expanding on the strong emotional impacts that confronting death can create in humans. Becker (1973) suggested that we have a drive to avoid death at all costs and that the conscious mind's response to death and its prospect is manifested in paralysing fear and anxiety. In line with these ideas, Western society¹ is often described as death avoidant and 'death denying'. Some argue that we hide from death through a variety of socially accepted behaviours and norms, such as isolating old and ill (Kübler-Ross, 1969), medicalising death (Burgess, 1993), embalming the dead (Gorer, 1955) and a general taboo around conversations about death (Zimmerman & Rodin, 2004). We deny death through treating aging as a disease, avoiding it through pursuit of immortality as evidenced by the 'hype' around anti-aging medicine (Petersen & Seear, 2009).

The death denial ideas have been challenged to a degree. It seems that our relationship with death is more multifaceted, and goes beyond protection from grief, fear, and denial. Kellehear (1984) argued that societies do not deny death but instead create culturally appropriate forms of organising around it, and that the societal responses to death are complex and historically unique. For example, Zimmerman and Rodin (2004) explain that our segregation of the dying is not necessarily evidence for death denial but a reflection of the society's tendency for individualism and efficiency. They argue that the segregation of the dying does not necessarily represent an attitude of death 'denial'. What it represents is that even when individuals are fully acceptant of the fact that someone is dying, they may not have the time or resources to care for them at home or leave work for an extended period of time.

¹ 'Western society' refers to countries influenced by European traditions and development of modern democratic and capitalist systems – primarily Western European, North American (Canada and United States) and Australasian (specifically Australia and New Zealand).

Existential Psychotherapy

Rollo May and his colleagues (1958) presented an additional perspective on human relationship with death through the lens of existential psychology. May's ideas became vital to Irvin D Yalom's work and formed basis for his approach in existential psychotherapy (Yalom, 1980). Yalom (1980) integrated the idea of death with life, in that life and death are interdependent. Yalom emphasised that without the idea of death and awareness that it is inevitable, life feels impoverished.

According to Yalom (1980), death denial was indeed one of the contributors to psychopathology, such as depression and anxiety. However, he described that there are in fact four fundamental existential concerns for every human being: death, freedom, isolation, and meaning. By facing death, a major source of anxiety, one can accept the inevitable. Freedom is the realisation that, ultimately, we are in charge of our own existence and choices. The responsibility of that can be paralyzing. Isolation is the realisation of being alone and separate from others, as well as parts of our own self, while longing for lasting connections. And lastly, while humans search for life's purpose and meaning, without which they can feel lost, they can become hedonistic or nihilistic. In his description of the concerns around death, Yalom highlighted the philosophical ideas of Martin Heidegger, who distinguishes between the states of "forgetfulness" - being the everyday mode of awareness, and "mindfulness" - of being aware of own possibilities and limits, facing absolute freedom and nothingness (Yalom, 1980, p. 31). Essentially, through mindfully facing the inevitable one is enabled and inspired to live authentically and with more meaning.

Terror Management Theory (TMT)

Becker's (1973) ideas gave rise to one of the most popular contemporary theories on managing death related anxiety, the Terror Management Theory (TMT; Greenberg et al.,

1986; Solomon et al., 1991; Solomon et al., 2015). TMT's premise is that human intellectual capacities make us painfully aware that one day we will die. This awareness, paired with instinctive desire for preservation and continued life creates the potential for paralyzing terror.

TMT proposes that some cultural practices and conceptions of reality evolved to provide us with protection from the angst and fear of death. They provide people with a sense of meaning, assuring that life is significant and, in some ways, permanent. According to TMT, there are buffering internal mechanisms to protect us from death-related fear. The terror of death is managed by a system consisting of cultural worldviews, self-esteem, and orientation in close interpersonal relationships (Pyszczynski et al., 2021). These anxiety-buffering systems mitigate existential terror by imparting a sense that one is a person of value living in a meaningful world (Solomon et al., 2015). For example, adherence to a cultural worldview, which supports meaningful and stable conception of reality, standards, norms, and values makes individuals feel valuable and gives a promise that death transcendence is possible. This can be either through literal suggestions of life beyond physical existence (e.g., heaven, nirvana, reincarnation) or symbolical evidence of one's input (e.g., artwork, writings, influential relationships, contributions that outlast one's lifetime). In turn, self-esteem comes from the belief that one is currently living up to these standards. Given that these buffering components protect us from existential terror, a great deal of our behaviour is aimed at sustaining cultural norms and values, and defending them against threats (Jonas et al., 2002).

TMT's hypotheses gained a lot of traction and empirical support (Solomon et al., 1991; Solomon et al., 2015). Studies specifically designed to test the self-esteem hypothesis have shown that bolstering people's self-esteem reduces both physiological arousal and self-reported anxiety in response to depictions of death (Greenberg et al., 1992; Greenberg et al., 1993). Other examples include studies where participants with high self-esteem or

experimentally bolstered self-esteem show reduced defensive responses to reminders of death (Arndt & Greenberg, 1999; Harmon-Jones et al., 1997). When reassurances about death transcendence or an afterlife are made, striving for self-esteem decreases (Pyszczynski, et al., 2004).

According to TMT, being reminded of mortality, or mortality salience, should increase people's defensiveness and rigidity around preferred cultural worldviews as a way of protection from terror. Research is generally consistent with the mortality salience hypothesis and has shown that reminding people of death increases adherence to cultural norms (Greenberg et al., 1995), increases behaviours directly associated with self-esteem, such as risky driving among those who are highly invested in their driving ability (Ben-Ari, et al., 1999), promotes focus on bodily appearance for those who take pride in their looks (Goldenberg et.al, 2000), and intensifies identification with successful groups and disidentification from unsuccessful groups (Dechesne et al., 2000). There is strong evidence that reminders of death increase commitment to one's worldview (Burke et al., 2010). Jonas et al. (2002) research suggested that there is cross cultural evidence that mortality salience increases positive reactions to those who uphold or validate the individual's worldview and negative reactions to those who violate or challenge it.

Many TMT studies are conducted in controlled environments and with limited participant diversity (mostly Western and educated populations). Its applicability in real-life cross-cultural settings is questionable. More recently however, the TMT hypotheses were put to the test amid COVID 19 pandemic. According to Pyszczynski et al. (2021), mortality salience brought on by COVID-19 played a central role in driving the populations' attitudes and behaviour, even for those who believed that the dangers of the virus have been vastly exaggerated. Pyszczynski et al. (2021) distinguished between distal and proximal defences observed through group and individual behaviours. Distal defences did not seem to have a

logical relationship to death, but enabled people to construe themselves as valuable contributors to a meaningful, significant whole. Such group behaviours, as outbreaks of protests and violence and tendencies for political polarization, were of form of expression of distal defences. Other examples included individual behaviours directed at distancing and buffering from thoughts and fear of death, through social isolation and engaging in self-soothing behaviours during the pandemic (e.g. overeating, alcohol use). However, these may have been to manage lack of activities and boredom over the lockdown periods. Proximal defences were directly related to the problem of death. These were observed in disease excessive preventative measures, such as virus avoidance and medication use.

Barnes (2021) conducted an investigation into manifestations of death anxiety and various coping mechanisms across online Twitter (now known as 'X') platform by looking at user-generated content in United Kingdom. They examined three anxiety buffers mentioned in TMT literature: social, religion and achievement. They found mixed results over the five-month period when death anxiety appears to have peaked. Social and religious affiliation were confirmed as buffers, however, the area of achievement (e.g. leaving symbolical lasting presence) did not manifest strongly. Kwon and Park (2022) examined Twitter data across US, UK and India. They found a confirmation for manifestation of distal defences such as worldview defences, self-esteem striving and seeking close relationships. Polarization was evident in the US and UK users, however, not in India. Similarly, racial division was found only among the US users. Proximal defences, such as posting about health measures to prevent the effects from the virus were observed across all three countries. In the US and UK this information was mostly posted by individuals and in India, by the government. The study highlighted a need for more cross-cultural empirical data to investigate the application of TMT hypotheses.

Meaning Management Theory

Overall, TMT has had a lot of empirical support and academic interest. However, it appears to have a somewhat pessimistic and deficit focused view, when it comes to exploring human behaviour in the face of mortality. Vail et al. (2012) highlight that most TMT studies have centred on how existential fears contribute to evaluative biases (stereotyping, racism and prejudice), amplification of greed and materialism, defensive distortions, aggressive protection of one's cultural beliefs and self-esteem, and how these can lead to risky behaviours at the cost to individuals' health. Vail et al. (2012, p. 305) create an argument for considering a "positive" terror management, where, when confronted with mortality, individuals follow positive trajectories toward a good life, such as developing a healthier approach to relationships and health, empathy and forgiveness and helping behaviours. "Humans want to believe that life consists of more than taking in food, expelling waste, and temporarily clinging to survival on a on rock flying through space" (Jonas et al., 2002, p. 1343).

According to Yalom (2008), both conscious and unconscious death anxiety, may undermine our well-being and prevent us from fully engaging in life. Obsession with the fear of death, its avoidance, denial and suppression would use vital psychic and cognitive energy. This energy is better put to use for living a full and meaningful life. In contrast to death denial, death acceptance can provide a more inspiring approach to the idea of dying.

Wong and his associates (1994) explored death fear and death avoidance. In this process they also identified different types of death acceptance and developed a three-component death acceptance model (Wong et al., 1994). The components included, (a) neutral death acceptance, facing death rationally as an inevitable end of every life; (b) approach acceptance, accepting death as a gateway to a better place/afterlife, and (c) escape acceptance, choosing death over a painful experience while being alive.

Wong (2008) explains that by accepting mortality, humans declare the intention to invest energy into living the good life rather than defending against thoughts of the inevitable death. Ideally, death acceptance should set us free from anxiety and energize us to live with vitality and purpose. Wong (2008), identifies several basic propositions of Meaning Management Theory (MMT; Wong, 2008):

- 1) Humans are bio-psychosocial-spiritual beings – this protects them against the fear of death, but also facilitates death acceptance.
- 2) Human beings are meaning-seeking and meaning-making creatures. Human capacity for symbolic meaning and story-telling helps achieve a sense of unity and coherence. A sense of meaning and purpose not only offers the best protection against the terrors of life and death but also contributes the most to healing and well-being.
- 3) Humans have two primary motivations: (a) to survive and (b) to find the meaning and reason for survival. When life is fraught with struggle and suffering, it will trigger a quest for reasons for living in spite of the pain.
- 4) Meaning can be found in all situations, no matter how horrific. Meaning is essential for maintaining hope and happiness.
- 5) The motivational tendencies for avoidance and approach may complement each other, and result in maximizing positive motivation. For example, the tendency to avoid death combined with seeking a happy life can work together to maximize human motivation to live and die well.

MMT does not contradict the propositions of TMT, instead it compliments them with a different perspective on motivation for behaviour with the focus on growth. In essence, according to MMT mortality salience can fuel meaning making and efforts to have a fulfilling life through commitment to act and live with purpose. Rather than pathologising responses to

mortality salience, MMT emphasises the benefits in confronting mortality. Rather than terror, MMT puts the quest for a meaningful life at the core of human behaviour.

MMT, however, does not have the robust research evidence to validate its claims, like TMT, and serves as more of a theoretical framework. Overall, the observed outcome of behaviour according to both theories is the same. Both MMT and TMT would predict an increase in pro-culture and pro-esteem activities in response to mortality salience, but for different reasons (Wong & Tomer, 2011). According to TMT it is for minimizing terror, but according to MMT, it is for maximizing meaning and fulfilment (Wong & Tomer, 2011). There is evidence to suggest that a stronger perception of meaning in life is correlated with lesser death anxiety (Routledge & Juhl, 2010), meaning seeking behaviours can significantly negatively predict fear of death among young people (Lyke, 2013) and self-esteem has a mediating effect within the connection between meaning in life and death anxiety in elderly (Zhang et al., 2019). MMT makes room for exploration of the mechanisms behind meaning seeking behaviours and meaning making cognitions. Perhaps, clinicians can use TMT to understand the psychopathology of death anxiety and use MMT to inform interventions that strive toward death acceptance.

Confronting mortality

Humans confront mortality in different ways. For the purposes of the following discussion, it is important to make a distinction that confrontations with mortality could be conscious and unconscious, circumstantial or on purpose. As mentioned earlier, TMT distinguishes between direct and indirect confrontations with death. A direct confrontation, i.e. within conscious awareness can elicit proximal defences. A more peripheral or unconscious reminders of death give rise to distal defences. Indirect confrontations with death would be through reminders that death is around, such as media reports of war and violence, death notices, or reports on danger of a pandemic. Direct confrontation with death,

or close encounters, would involve situations when we are personally confronted with things like a diagnosis of a terminal illness, death of a loved one, a funeral, surviving an accident or near-death experiences (NDEs). For example, driving past a cemetery without purposefully paying attention to it could be an indirect, circumstantial unconscious confrontation with mortality. Writing a journal entry about own thoughts on dying would be a close confrontation with mortality.

It is important to note that confronting death, a risk of death, trauma or serious injury or illness can result in Post-Traumatic Stress Disorder (PTSD; Mental Health Foundation of New Zealand, 2022). However, close encounters with mortality can also have transformational and positive psychological effects (Taylor, 2016). Such experiences have often been linked to post-traumatic growth (PTG; Tedeschi & Calhoun, 1995), explained in one of the following sections. It is characterised by positive changes, including a new sense of appreciation for life, improved relationships, shifts in spiritual and philosophical attitudes and a new sense of self-confidence (Morris et. al, 2005). Several examples of different types of close encounters with death are described below, with a focus on exploring possible effects that these may have on individual attitudes and beliefs about death, and life.

Near-Death Experiences

Near-death experiences (NDEs) are defined as:

Unusual, often vivid and realistic, and sometimes profoundly life-changing experiences occurring to people who have been physiologically close to death, as in cardiac arrest or other life-threatening conditions, or psychologically close to death, as in accidents or illnesses in which they feared they would die (Greyson, 2014, p. 334).

These phenomena were initially brought to light and popularised by the work of Raymond Moody (1975). However, there is evidence for NDE's among tales and folklore spanning through centuries cross-culturally (Shushan, 2018).

NDE features include an altered sense of time, tunnel sensation, intense feelings of peace and joy, out-of-body experience, panoramic life review, encounters with mystical beings or presence of spirits (Moody, 1975; Greyson, 2014; Greyson, 2023). Most NDEs are subjectively positive and transcendental, however 11-22% experiences can be distressing and can lead to emotional trauma (Greyson, 2023). Greyson and Evans Bush (1992) identified that the three types of frightening experiences included entering an 'alternative' and unfamiliar reality; perceptions of utter emptiness, ultimate aloneness, and nonexistence; and "hellish" encounters. Rommer (2002) described a fourth type, where an individual felt disturbed by the life-review and perceptions of being judged. Cassol et al. (2019) and Greyson (2023) highlight that the distressing NDE's are linked to circumstantial and biological factors. For example, the proportion of suicide survivors was higher in the distressing NDE's as compared to 'classical' ones (Cassol et al., 2019). Despite this, studies link NDE's to reduced death anxiety and loss fear of death (Tassell-Matamua & Lindsay 2016; Pehlivanova et al., 2023). Pehlivanova et al. (2023) found that encountering mystical beings and having a life review during one's NDE were the strongest predictors of reduced fear of death. Greyson (2014) summarises the overall aftereffects of NDE's as beneficial personal transformations, such as increases in spiritual attitudes and interests; concern for others; appreciation of life; and decreases in fear of death, materialism, and competitiveness.

The explanations for the causes and mechanisms of NDE's are still not completely understood. There are several approaches to explaining NDE's that involve neurological, psychological, physiological (Greyson, 2014) and pharmacological (Strassman, 2001) theories and hypotheses. The lack of consensus and clarity comes from no unified definitions,

difficulties with measuring these experiences in real time and reliance on uncontrolled retrospective accounts (Greyson, 2014).

Psychedelic Induced Experiences

With the resurgence of scientific research into psychedelics within the last two decades, it is important to point to the overlap between the phenomenology of the classic psychedelic experience and NDEs (Bryant, 2003). These similarities have formed the basis of the pharmacological hypothesis for NDEs. This hypothesis specifies that endogenous DMT (N, N-Dimethyltryptamine) is released during the dying process, which contributes to the experiences reported after NDEs (Strassman, 2001). Although, there have been some critiques of this hypothesis (Nichols, 2018), and there is no empirical evidence to support it, commonalities of NDE and the DMT experiences do exist. They include, but not limited to, a feeling of transcending one's body, entering into an alternative 'realm', perceiving and communicating with other entities, as well as reflections on death and the after-life (Strassman, 2001). There is also reported vividness to these subjective experiences, described as 'realer than real' (for NDEs see Moody, 1975; for DMT see Strassman, 2001).

Some recent studies do show evidence supporting the similarities. In a within-subjects placebo-controlled study, Timmerman et al. (2018) revealed significant overlap in features experienced by participants who had NDE experiences and participants who were administered DMT, compared to the placebo group. In another comparison study Sweeney et al. (2022) surveyed participants with history of a psychedelic drug use, or a near-death or another non-ordinary experience. They found striking similarities both in the phenomenological features of the experience as well as changes following such an experience. These included decreased fear of death, positive changes in attitudes about death, and increases in personal well-being and life purpose and meaning. Comparisons across psychedelic substances, ayahuasca (DMT-containing Amazonian brew) and DMT groups

reported stronger similarities to the near-death experience group, than the psilocybin and LSD (Lysergic acid diethylamide) groups. David et al. (2023) explored the effects of experience of ayahuasca ceremony participants on attitudes toward death. They found that half of the participants, irrespective of demographics, underwent an experience described as ‘death-like’. As expected, these experiences were perceived as powerful and impacted people’s attitudes toward death. The longevity of these effects is unclear, while effects of NDEs have long-term impacts on death attitudes (Greyson, 2022).

Post-Traumatic Growth

The idea of growth after a period of suffering is quite ancient. It is widely accepted and often supported by the premises of religious and philosophical traditions, that suffering can have transformative effects on one’s awareness, attitudes and views on the meaning of life (Tedeschi & Calhoun, 1995). Friedrich Nietzsche (1888/1998) is known to have said, “whatever does not kill me makes me stronger” (p.5). This saying has been popularised through songs and arts and implies a generally established idea that one does not just return to a previous state after experiencing hardship.

The concept of posttraumatic growth (PTG) has entered the research field relatively recently (Tedeschi & Calhoun, 1995; Tedeschi & Calhoun, 1996). It does not occur as a direct result of trauma itself; rather, it is the individual's response to the new reality post trauma (Tedeschi & Calhoun, 2004).

Posttraumatic growth is the experience of positive change that occurs as a result of a struggle with highly challenging life crises. It is manifested in a variety of ways, including an increased appreciation for life in general, more meaningful interpersonal relationships, an increased sense of personal strength, changed priorities, and a richer existential and spiritual life. (Tedeschi & Calhoun, 2004, p. 1)

There is a growing body of evidence to support the notion that facing trauma, illness, threat to life, death and bereavement can facilitate PTG (Doherty & Scannell-Desch, 2023; Capaldi et al., 2024). Tsai et al. (2015) surveyed veterans and found that the traumatic events most strongly associated with PTG were a life-threatening illness or injury. They also found that greater social connectedness, intrinsic religiosity and purpose in life were independently associated with greater PTG. Groarke et al. (2017) found that among women undergoing treatment for cancer, cancer-specific stress was related to higher PTG concurrently and longitudinally. Overall, the more severe the traumatic event, the higher level of growth is experienced (Morris et al., 2005).

NDEs have also been closely associated with PTG. Khanna and Greyson (2015) investigated PTG after a near-death experience and at the time of a close brush with death among 251 survivors using Posttraumatic Growth Inventory (PGI; Tedeschi & Calhoun, 1996) the NDE Scale (Greyson, 1983). Near-death experiences were associated with greater PTG than close brushes with death without the subjective experience typical of an NDE. Scores on the NDE Scale were significantly correlated with scores on the PGI. Khanna and Greyson (2015) highlighted that the results suggested that spiritual factors made a significant contribution to PTG and were consistent with the model that posits challenges to the assumptive worldview as a major stimulus for PTG.

Overall, the research indicates that PTG fosters a deeper spirituality and a stronger sense of personal meaning. Perhaps, as TMT would suggest, we resort to affiliation with spirituality for relief from terror and seek ways to impart an imprint in this world. Or, perhaps, looking through the lens of MMT, when we intimately face death, it propels us closer to committed action toward a fulfilling life. Either way, close encounters with death and contemplating mortality can change our attitudes, behaviour, and improve quality of our relationships.

Intentional encounters

Whilst circumstantial and accidental encounters with mortality are generally unpredictable and undesirable, some seek to face death intentionally. Motivation for these intentional encounters can vary. Perhaps, it is a way of managing the fear of dying, through a type of self-driven exposure and systematic desensitization. There is in fact evidence to suggest that systematic desensitization, imaginal and graded exposure type therapies can be effective in managing death anxiety (Menzies & Menzies, 2018). For others it could be a drive to seek a more fulfilling and meaningful life amid suffering and uncertainty. Practices of purposefully confronting mortality can be traced throughout cultures and time.

Memento Mori (remember death)

The Stoicism tradition that has its origin in Ancient Rome, strongly urges to stare directly and regularly at death and to meditate on its truth (Menzies & Menzies, 2021). The Stoic view on death is that its avoidance and denial would only increase fear. Seneca, an ancient Roman philosopher, whose ideas have influenced Stoicism, advised that preparation for death, is in fact preparation for life (Noyes, 1973).

Many of the early Stoics lived during turbulent times, amid wars and reminders of death and suffering. Perhaps, this is the reason why Stoics reflected on death so often and understood the need to accept death. It is believed that the Latin phrase ‘memento mori’, meaning ‘remember death’, originated with the Romans and was then incorporated into a wide range of decorative, fine art and practical items in Western culture in the late medieval and early modern periods (Howarth & Leaman, 2002). Expression of the themes of Memento Mori can be traced through poetry, music, dance, painting, and sculpture spanning across centuries (Noonan et al., 2013). For example, the French painter Philippe de Champaigne expressed in his painting *Still Life with a Skull*, three essentials of existence — the tulip

(life), the skull (death), and the hourglass (time). The painting is part of a genre referred to as Vanitas, a form of painting that contains images representing death and the fleeting nature of life and earthly pleasures (Campbell, 2022).

There appears to have been a modern resurgence of stoics and ‘memento mori’ philosophy. Mortality motivation is practiced by successful entrepreneurs, professionals in the Silicon Valley, artists, athletes, and authors (Donovan, 2022; Drumwright, 2017; Wellman, 2020). In his 2005 Stanford commencement address Steve Jobs famously said,

Remembering that I’ll be dead soon is the most important tool I’ve ever encountered to help me make the big choices in life. Almost everything— all external expectations, all pride, all fear of embarrassment or failure— these things just fall away in the face of death, leaving only what is truly important. Remembering that you are going to die is the best way I know to avoid the trap of thinking you have something to lose. You are already naked. There is no reason not to follow your heart . . . Your time is limited, so don't waste it living someone else's life. Don't be trapped by dogma — which is living with the results of other people's thinking. Don't let the noise of others' opinions drown out your own inner voice. And most important, have the courage to follow your heart and intuition. They somehow already know what you truly want to become. Everything else is secondary. (Naughton, 2011, para. 25 - 31).

Death Positive Movement

Another movement, aimed at defusing the taboo and anxiety around death, and to consciously face mortality, is the ‘death-positive’ movement (Doughty, 2017). This movement has given rise to death-positive literature that aims to shift the narrative from fear and avoidance to acceptance and understanding of death (Dresse, 2023). This movement invites readers to engage with the topic of mortality in a thoughtful and introspective way.

Death positivity had also inspired several online and community social groups, whose aim is to invite frank and honest conversations about death and dying that are inclusive and free of religious and other cultural dogmas (Murphy, 2021). The death-positive movement appears to have created a shift in attitudes toward dying, gave attention to such professions as death doulas, also known as ‘end-of-life doulas’ or ‘death midwives’ in Western countries, such as the US, UK, Canada and Australasia (Yoong, et al., 2022). Perhaps, as a ‘Western society’, we are moving away from the original presuppositions of Becker’s (1973) death denial hypothesis and toward a more conscious and death inclusive culture.

Traditional Practices

Some cultures have traditional rituals and spiritual practices that purposefully bring forth the awareness of death. This subsection provides a brief overview of these. It is in no way exhaustive, given the expansive variety and depth of practices across cultures and spiritual traditions. Below are practices that invite the idea of death and conscious contemplation on death, or examples of cultures where death is central and significant (such as with Māori).

Māori Understandings of Death. “Māori walk with death day in day out; we live and breathe death”, (Kaumātua Pita Te Ngāru, personal communication, July 3, 2024). As Kaumātua Pita Te Ngāru from Waikato explains, “we talk to the dead”, “we constantly acknowledge people who passed”, “kids grow up seeing dead [bodies] all the time”, “we touch and kiss the dead” (personal communication, July 3, 2024), implying that death is not something that is separate or shunned away from everyday living for Māori.

Life and death are closely interwoven in the cultural practices of the Māori, with deceased ancestors (tūpuna) integrated into everyday existence (Paterson, 2015; Sullivan, 2013). The tangihanga (funeral) is central to Māori culture and has an enduring tikanga

(protocol) that contributes to addressing a loss and allows it to be openly and honestly shared, contributing to healing of the bereaved (McClintock & Baker, 2019; Paterson, 2015). The length of the tangihanga and tikanga can vary among different iwi (tribes), however, it is generally longer than the traditional ‘pākehā’ (non-Polynesian New Zealanders), in order to allow for the wairua (spirit) of the deceased to safely depart (McClintock & Baker, 2019; Sullivan 2013). The length of the traditional processes has been affected through colonisation and implementation of regulations and modern legislation (Sullivan, 2013).

For Māori, death is a journey, where the wairua of the dead person is believed to travel to Te Rerenga Wairua / Cape Reinga, before entering the underworld, however, there are different accounts among iwi (Sullivan, 2013). The kōrero (description) of what happens after death varies (Sullivan, 2013). However, it has been noted that Māori accounts of experiences of death at times parallel clinical reports of NDEs (King, 2023). As for the physical body, a great importance is placed on returning to Papatūānuku (the land/earth) (Sullivan, 2013). Papatūānuku is believed to be the centre of the cyclic view of death and life, ‘she’ represents whenua – meaning both soil and placenta (Sullivan, 2013).

Mexico. Mexico is another culture that embraces death and integrates it into everyday living through ceremonies, rituals and art. Mexico’s *el Dia de los Muertos*, the Day of the Dead, is a fusion of Aztec and Mayan rituals, as well as Catholic doctrine and Hispanic culture (Howarth & Leaman, 2002). The celebration involves rituals, such as storytelling, dress ups and decorations, music and dining as acts of remembrance and reconnections with the dead. The living ‘reunite’ with the dead during that period.

Islam. Sufis pay specific attention to death and death contemplation, and known to meditate near a grave, or even dig out their own grave and meditate on the thoughts of own end and decay (Fahm, 2014; Pantic, 2023).

Yoga. In yoga, the meditative ‘corpse pose’ (shavasana) performed with every practice (Powers, 2008). Shavasana is the ultimate relaxation pose, a pose of a dead body, that brings the practitioners awareness to confront impermanence.

Buddhism. For Buddhists, death is ever-present (Shonin & Van Gordon, 2014). In Tibet, practices such as the ‘sky burials’ (Shank, 2019) have known to be traditionally implemented, although now are rare (Mohan, 2017). Sky burial is a funeral ritual in which the human corpse is exposed to the open area to be eaten by vultures. This practice is believed to demonstrate fundamental values of Tibetan Buddhism such as reincarnation, impermanence, compassion, and non-attachment (Shank, 2019). Buddhist meditation on death and impermanence, is one of the core practices, and known as Maranassati in Theravada Buddhism (Bond, 1980).

A Zen Buddhist sect in Japan practice a simulated departure ceremony, known as *Tabidachi* (Ananda Freedom, n.d.). A recent documentary depicts a New Zealand TV personality, Dai Henwood, participating in the ceremony (Henwood, 2024a). Henwood takes the audience on a journey of terminal cancer diagnosis and facing mortality. The ceremony involves simulating a funeral, starting with practicing letting go of what is important, down to going through a meditation or a simulated process of dying and spending an extensive amount of time in the dead corpse pose. Henwood (2024b), explains that the “passport to living is to imagine yourself in a grave” (p. 250), as per the philosophy of a priest and psychotherapist, Anthony De Mello (1990).

Buddhist philosophy and meditations on death are explored further in the following chapter.

Chapter Two: Buddhism, Mindfulness and Death

This chapter of the literature review focuses on the Buddhist derived meditation and mindfulness practice. The aim is to provide sufficient information to guide the reader into the topic of this research, mindfulness of death meditation, and does not cover the extensive academic literature on mindfulness. An overview of the currently available research into the topic of this study is provided. The chapter is concluded with a brief summary of the literature review chapters and current research objectives.

Buddhism

Buddhism originated approximately 2,500 years ago, in India. It is based on the teachings of Siddhartha Gautama, who later become known as Shakyamuni Buddha (Shonin et. al, 2014a) or the Buddha – the awakened one (Bullitt, 2005). Since the original teachings, also referred to as dharma in Sanskrit, and after Buddha's passing, eighteen distinct sects of Buddhism emerged (Bullitt, 2005). All Buddhism forms can be classified into three different traditions:

- 1) Theravada Buddhism, sometimes referred to as 'the hearer vehicle'. This is the longest surviving tradition. It is prevalent in southern and southeast Asia. The focus of this tradition is on the 'original word' of the historical Buddha.
- 2) Mahayana Buddhism, 'the great vehicle', which is more prevalent in east Asia. Its emphasis is on compassionate activity and the 'nondual' or 'empty' nature of phenomena.
- 3) Vajrayana Buddhism 'the diamond vehicle' is associated with Himalayan plateau. Significance is placed on 'sacred outlook,' the bond with the spiritual guide or 'guru,' and on esoteric practices intended to effectuate a realization of the nature of mind.

(Bullitt, 2005; Shonin et. al, 2014a)

All three Buddhist ‘vehicles’ are now practiced in the West. Despite the differences, the underlying Buddhist fundamentals of wisdom, meditation, and ethical awareness reflect the root principles of each Buddhist vehicle and encompass the entire spectrum of Buddhist practices (Shonin et. al, 2014a).

Buddhist teachings and writings are not regarded as gospels revealed by a ‘prophet’, nor they are accepted as global truths. There is no supposition of an existing God or an omnipotent creator. The teachings are meant to be experienced through practice and assessed firsthand (Bullitt, 2005). Hence, one is left to turn to themselves to achieve a state of attainment (arahant state) and freedom from suffering through individual practice and efforts (Bullitt, 2005). A state of attainment and purified consciousness comes through different practices of restrained and disciplined conduct as well as meditative efforts.

Claessens (2009) describes the ‘four noble truths’ that guide all Buddhist practices as the following:

1. Life is Suffering.

Our suffering originates from the realisation of impermanence. This truth refers to the transitory nature of things and experiences, whether material, physical, cognitive or emotional.

2. Craving is the source of life’s suffering.

We crave permanence, never-ending happiness, never changing love, eternal youth, certainty, and total safety. We attempt to fix it and extend our existence by any available means. Yet, we are doomed by our failure to do this.

3. The way to escape suffering is to fully accept the transitory, fragile and contradictory nature of existence and relinquish the craving for permanence.

By facing the impermanence of our experiences and existence and practicing mindful living and cognition, we can face the illusionary nature of the self that we construct to function in daily life.

4. The path of practice leading to the cessation of suffering is the ‘Noble Eightfold Path’ (also known as the ‘Middle Path’) of right view, right resolve, right speech, right action, right livelihood, right effort, right mindfulness, and right concentration. Following the Middle Path is to practice being between the two extremes of self-mortification and self-indulgence, asceticism and hedonism. This Middle Path represents the practical realisation of the understanding of the principles of the three former truths and is integral to the process of awakening to the true nature of existence.

Buddhism and Psychology

Buddhist dharma is centred on the nature of mind, consciousness and behaviour. According to Carl Jung, “the goal in psychotherapy is exactly the same as in Buddhism” (Muramoto, 2004, p. 112). It is not surprising that Buddhist ideas have been of interest to Western scholars and clinical practitioners over the last hundred years. In fact, Buddhist texts propose theories and suggestions on how one can understand what drives human behaviour, nature of perception and cognition, and techniques of practice toward a pathway of resolution of disfunction, delusion and suffering (de Silva, 1990).

Meditation and mind training feature as central practices in Buddhist texts (de Silva, 1990; Marques, 2012). Khong (2009) explains, that it is the Buddhist practice “that offers a systematic and rigorous way for understanding the workings of the mind and body” (p. 121). In some way, Buddha can be viewed as a psychotherapist with the aim of helping people take responsibility and reduce their own suffering through understanding the nature of life and universal experiences (Dhammananda, 2002).

Meditation and Mindfulness

Mindfulness and meditation practices are central aspects of the 2,500-year-old tradition of Buddhist psychology (Siegel et al., 2009). It is important however to distinguish between the terms of mindfulness and meditation. Meditation is an umbrella term used for multiple contemplative practices. The Western usage of the word ‘meditation’ generally means the exercise of ‘thinking about’ something. In Buddhism it may mean this, but often refers to placing one’s mind, a spotlight, upon physical sensations, sights or sounds, or tangible objects of smell and taste (Olendzki, 2009). Meditating by pointing one’s attention to an object, can have transformative effects in a move from suffering to well-being, however that type of meditation has limited usefulness in Buddhism (Olednzki, 2009). Mindfulness is a tool that can be used in meditation to enhance it. It refers to particular mode of observation and a certain presence of mind that attends to the objects of present experience with persistent clarity (Olednzki, 2009). As opposed to being a spotlight, “mindfulness illuminates a more fluid phenomenological field of ever-changing experience rather than isolating a particular object for intensive scrutiny” (Olendzki, 2009, p. 42). Whereas concentration practice involves returning the mind again and again to the primary object of meditation (such as breath), mindfulness practice allows the mind to follow whatever is arising in experience (Olendzki, 2009). Mindfulness in itself can be cultivated through formal and informal practices. It can help develop specific qualities and attitudes for living, such as kindness, compassion, appreciative joy, and equanimity (Olendzki, 2009). A formal practice to cultivate the qualities of mindfulness can be engagement in intentional activity, such as meditation.

In the teachings of the Four Noble Truth and the Middle Path, two kinds of meditation are recommended - tranquillity (samatha) meditation, and insight (vipassana) meditation (Khong, 2009). ‘Samatha’ is a way in which the mind can be brought to rest, focused on only one thing, such as a prayer chant, a candle flame, without allowing the

attention to wander. ‘Vipassana’ is a meditation where one uses concentration as a tool to generate insight and go beyond the “illusion which cuts him off from living light of reality” (Gunaratana, 1994, p. 5). Vipassana is commonly referred to as mindfulness practice among academic literature. Gunaratana (1994) describes mindfulness as “that flowing, soft-focused moment of pure awareness”, “that brief flashing mind-moment you experience a thing as an un-thing . . . softly flowing moment of pure experience that is interlocked with the rest of reality, not separate from it” (p. 82). The practice of mindfulness is directed toward training the practitioners to prolong that moment of awareness (Gunaratana, 1994).

It is important to note that, although meditation is commonly associated with Buddhist practices and ideas, meditation, per se, is not unique to Buddhism. Other traditions, including and not limited to Christianity, Islam, Hinduism, and Judaism, have their own unique meditative practices to centre the mind and body, as well as achieving states of transcendence and enlightenment (Wahbeh, et. al, 2018).

Mindfulness and the West

Dr Jon Kabat-Zinn, often referred to as the ‘godfather of mindfulness’ in the West, is the founder of the Mindfulness-Based Stress Reduction (MBSR; Kabat-Zinn, 2003). He pioneered the application of the Buddhist concept of mindfulness within the practice of professional psychology in 1979. He established the Centre for Mindfulness at the University of Massachusetts Medical School in the United States. MBSR is an 8-week programme that integrates Buddhist Vipassana meditation and other contemplative practices informed by Zen philosophy and yoga, as well as western strategies for coping with stress (Kabat-Zinn, 2003). Participants are guided through regular mindful activities such as body scans, mindful breathing, sitting meditation, and informal mindfulness to cultivate mindful attention in daily life (Kabat-Zinn, 2003).

Jon Kabat-Zinn's (2003) working definition of mindfulness is: "the awareness that emerges through paying attention on purpose, in the present moment, and nonjudgmentally to the unfolding of experience moment by moment" (p. 145). He describes mindfulness as having to do with particular qualities of paying attention, these can be developed through practice such as, but not limited to, meditation. A mindful way of paying attention could be practiced while 'being with' an experience, whether it is walking, eating, listening to music or through present focus in meditation on awareness of mind and body activities moment to moment.

Gunaratana (1994) explains mindfulness practice as a "participatory investigation in which you observe your own experiences while participating in them, as they occur" (p. 21). An example of a formal practice of mindfulness often begins with the instruction to find a comfortable sitting position (although, as mentioned earlier one can be mindful during an activity). The practitioner is then instructed to direct their attention to an object or activity, such as breath, or the act of breathing. Attention is then focused on the object of meditation and the unfolding of the experience moment to moment. The instruction is to avoid straining or rushing, dwelling, or pondering, but rather accepting everything that arises with curiosity through gentle investigation (Gunaratana, 1994).

Jon Kabat-Zinn's work inspired research and development of several psychological interventions. Mindfulness-based interventions (MBI's) experienced an exponential increase in popularity and scientific interest over the last several decades and literature on the topic is expansive. Mindfulness techniques and practice became integrated into empirically supported psychotherapeutic modalities such, but not limited to, as Mindfulness-Based Cognitive Therapy (MBCT; Teasdale et al., 2000), Trauma-Focus Cognitive Behavioural Therapy (TFCBT; Cohen et al., 2006), Dialectical Behaviour Therapy (DBT; Linehan, 1993), and Acceptance and Commitment Therapy (ACT; Hayes et al., 1999).

There is robust evidence in support of potency and, in some instances, superior effectiveness of mindfulness-based interventions for treating clinical symptoms in psychiatric disorders, when compared with other evidence-based modalities (Goldberg et al., 2018). Most consistently, mindfulness-based interventions have been found to be effective for depression, pain management, substance use, and addictions (Goldberg et al., 2018).

It is of note, that adverse effects of mindfulness-based interventions have been largely undocumented in amongst academic research (Schuman-Olivier et al., 2020; Wong et al., 2018). A systematic review of MBI's randomised control trials by Wong et al. (2018) reported that only 15.6% of 231 studies on mindfulness included a statement about adverse events. However, there is evidence that adverse effects of Buddhist meditation practices can include anxiety, panic, paranoia, dissociative symptoms, and development of delusional beliefs often impacting social life domains (Lindahl et al., 2017).

How Does Mindfulness Work?

The process of change with mindfulness is facilitated through practice of the four essential elements: (a) mindful awareness, (b) attentional control, (c) focus on present moment, and (d) nonjudgmental acknowledgement and acceptance (Teasdale et al., 1995). During a mindfulness practice one 'notices', 'sees', and 'observes' cognitive, emotional or sensory impressions. There is no striving for a particular outcome, resolution or relaxation, it is not about 'fixing' anything or 'getting' anywhere. However, transformation, relief from suffering and stress can arise overtime because of dedicated mindfulness practice (Kabat-Zinn, 2003). There lies a paradox, as individuals drawn to techniques such as mindfulness come with an aim to reduce their stress and suffering, yet, through this practice they face a challenge of letting go of their aims and have to develop an openness to anything that unfolds with trust and without judgement.

There have been several studies onto the mechanisms of change in mindfulness. The proposed mechanisms of change are found to be linked to ‘de-automisation’ of spontaneous responses (Kang et al., 2013) through ‘de-coupling’ of internal experiences and internal/overt behaviour (Levin et al., 2015) and development of meta-cognitive skills and compassionate attitude toward self and internal processes (Schuman-Olivier et al., 2020; van der Velden et al., 2015).

Kang et al. (2013) and Levin et al. (2015) explain the process of ‘de-automisation’ and ‘de-coupling’ in a similar manner, and the two concepts appear to be interlinked. Both are based on the premise that much of our emotional and mental life is comprised of unconscious, spontaneous, and seemingly instantaneous processes and reactions. People can often be on an ‘autopilot’ in their behaviour and decision-making. This automaticity is adaptive, freeing us to respond to what is perceived as important in the moment, however, it can lead to unhealthy automatic behaviours, such as habits, ruminations, and impulsive behaviour. The automatic thoughts, feelings, and behaviours, particularly when they are unhelpful, may lead one to experience helplessness and lack of perceived control over their actions and internal and external environments. This can form basis for mental health problems, such as anxiety, depression and addiction. What seems to be a by-product of mindfulness practice, is that one can develop awareness and acceptance of some of the internal experiences (thoughts, feelings and urges) without necessarily accepting them as ‘truths’, judging them as positive or negative, automatically responding and acting on these, or attempting to avoid them through maladaptive strategies.

Schuman-Olivier et al. (2020) synthesized neuroscientific findings and clinical research evaluating the effects of mindfulness-based interventions targeting health behaviours in psychotherapeutic and psychiatric settings as well as literature on motivation and learning. They summarised the mechanisms of change in mindfulness-based interventions in a

‘mindful self-regulation model’. Their model postulates that self-regulation is a core process in establishing healthy behaviours. In summary, mindfulness contributes to improvements in attentional control (e.g. sustaining attention), cognitive control (e.g. cognitive flexibility), emotion regulation and self-related processes (e.g. self-compassion). These interact with neural mechanisms for motivation and learning and individual’s capacity for behaviour change. Schuman-Olivier et al. (2020) explain that mindful self-regulation starts with curiosity about present-moment experience and with alternatives to self-critical rumination. Reappraisal of mental and emotional experiences leads to decrease in automatic reactivity, while establishing safety through a window of tolerance and cultivating self-compassion and inner warmth. By reducing self-criticism, autonomic reactivity, and internal conflict, the focus shifts from unhealthy patterns toward self-care. Cultivating a kind awareness allows for greater goal-driven control based on values and away from harmful behaviours. This then leads to a positive feedback loop in favour of a positive change.

Mindfulness and Death

Kabat-Zinn (2020) makes a connection between the practice of mindfulness and death in his quote, “he who dies before he dies does not die when he dies” (p. 829). This means that the practice of mindfulness expands our perceptions beyond the narrowly constrained view of reality that one develops through one’s limited ideas, opinions, conditioned preferences and aversions (Kabat-Zinn, 2020). The practice of mindfulness uncovers the fleeing nature of feelings, thoughts, sensations and responses to experience. It allows to go beyond the automaticity, ambitions and fears and to look deeper into the nature of things (Kabat-Zinn, 2020). Once an individual becomes aware of the continually self-constructing and self-referencing ego without getting caught up in it, there comes a realisation that “there is no you to die” (Kabat-Zinn, 2020, p. 830). Hence the practice of mindfulness is a death of the isolated concept of the ‘I’ - death that can be experienced before the physical death of the

body. And this is the type of liberation, that the Buddha spoke of as “the deathless” (Kabat-Zinn, 2020, p. 830).

Taylor (2016) draws connections between mindfulness practice and how it can facilitate a confrontation with mortality, without having to be faced with an immediate threat of losing one’s life or dying. Taylor (2016) argues that tolerating and reducing suffering or distress is one reason that mindfulness may be particularly helpful in dealing with thoughts of death, where fear and anxiety are common responses. Reducing or slowing automatic fear response might help to interrupt or, perhaps, re-train defensive reactions to mortality.

Buddhism on Death

The popularity of mindfulness has sometimes led practitioners to overlook important aspects of the Buddha’s teachings, such as impermanence, dependent origination, non-attachment, acceptance and letting be, and letting go (Khong, 2009). Buddhist literature and texts are loaded with instructions on purposefully confronting death and mortality (Dorje, 2006; Gyatso, 2022; Soygal, 1992; Thurman, 1994). Buddha is believed to have declared, “of all the footprints in the jungle that of the elephant is supreme. Of all the mindfulness practices, mindfulness of death is supreme” (Cash, 2018, para. 6). The Buddhist suttas (scriptures) on mindfulness specifically include the ‘nine charnel ground contemplations’, exercises that are specifically concerned with cultivating an awareness of impermanence (Shonin & Van Gordon, 2014).

There are several reasons why Buddhist teachings promote the practice of mindfulness of death. It is believed that forgetting about death means that one would become engrossed in the concerns of everyday life, with its pleasures, but also with its anxieties (Gyatso, 2022). If one does not practice the awareness of death, when death comes, it is too late to realise that a lot of life’s efforts have been futile (Gyatso, 2022). Another reason for

practicing death awareness, is to overcome complacency about death or assumption that it is something that will never happen to them (Gyatso, 2022; Shonin & Gordon, 2014). The problem with being complacent about death, and such thoughts as ‘I would not die today’, is that when the moment comes, and one is faced with death they could experience feelings of fear and anguish (Shonin & Gordon, 2014). Other than preparation for death, the practice of mindfulness of death can be a rewarding and liberating experience, where increased acceptance and internalization of impermanence can buffer against psychopathology and assist with post-traumatic growth (Shonin & Gordon, 2014).

Mindfulness of Death

There are several ways to approach mindfulness of death through structured Buddhist meditations and contemplation practices. Specific methods vary among Buddhist traditions. Below, are some examples, although these do not necessarily cover the extent of these practices.

Kadampa Tradition. In Kadampa tradition (Gyatso, 2022), meditating on death is taught in three parts: 1) considering the dangers of forgetting about death; 2) considering the benefits of remaining mindful of death; 3) the actual meditation on death. The actual meditation on death includes meditating using the “nine ways of reasoning” (Gyatso, 2022, p. 184), followed by imagining that the time of death has come. Gyatso (2022) instructs that the nine ways of reasoning consist of reflections on the following:

- 6) Death will definitely come and nothing can prevent it.
- 7) Our life span cannot be increased and it decreases continuously.
- 8) Death will come regardless of whether or not we have made time to practice Dharma.
- 9) The life span of beings living in this world is not fixed.
- 10) There are many more conditions conducive to death than to survival.

- 11) The human body is fragile.
- 12) At the time of death our wealth cannot help us.
- 13) At the time of death our friends and relatives cannot help us.
- 14) At the time of death even our own body is of no use.

The meditation on death continues with guided instructions on imagining a corpse, or looking at photographs of corpses, and thinking ‘I myself will soon be just like that’. It is followed by imaging a particular way of dying, whether it is an illness or an accident, the feelings of helplessness, distress, loss of relationships, impaired coherence and bodily functions, loss of memory and eventually an end to everything. Gyatso (2022) instructs, that if visualising is too difficult, to engage in such practices as visiting cemeteries and looking at gravestones and contemplating what a corpse under the gravestone may look like, and that one day we would also face a similar fate.

The Eight Stages of Dying. The traditional Tibetan Buddhist method of meditating on death is commonly referred to as the Eight Stage death meditation (Thurman, 1994). It is practiced as a part of regular meditation sessions and can also be applied to the processes of falling asleep and waking up. The meditation is aimed to prepare oneself to navigate the dying process in a calm and aware state. This is done to maximize the potential for enlightenment when one has to die and to attain a positive rebirth so that one may continue to work towards enlightenment in future lives (Thurman, 1994).

The Eight Stages of Dying meditation (Dorje, 2006; Soygal, 1992; Thurman, 1994) involves reflecting on the five elements in the body (earth, water, fire, air, and consciousness) dissolving one by one into the other. It is believed that at the end of the dissolution of these elements, the person is clinically dead. This is followed by the three final stages where the four elements of consciousness, luminance, radiance, imminence dissolve into one another

and into a state of transparency. The state of transparency is generally described as a state of calm and peaceful awareness. Then the reverse process is imagined. This aligns with the belief of going into a rebirth. The reverse process starts with transparency element and finishes with embodying the earth element. The instruction on the progression through the dissolution of elements is generally consistent among Tibetan scripts, however, the specific names of the elements can vary across translations.

Maranassati. In Theravada there are two separate forms of meditations on death: Maranassati (alternatively spelled with one 's' - Maranasati), meaning - recollection of death (Bond, 1980; Panyapatipo 2007; Suriya, 2019; Thanissaro, 1997), and Asubha Bhdvand, meditation on the 'foulness' of a decaying body (Bond, 1980). Maranassati is a mindfulness of death meditation, whilst the latter practice (Asubha Bhdvand) can involve meditating over actual decomposing corpses, or using photographs of corpses (Stonnington, 2009). Thanissaro's (1997) translation of the Maranassati Sutta, implies a sense of urgency to practice awareness of death. Mindfulness of death is seen as an ever-present state, in which students are instructed to contemplate ongoing inner mental work. Buddha compares the importance of practice of mindfulness of death, to "a person whose turban or head was on fire would put forth extra desire, effort, diligence, endeavour, undivided mindfulness, & alertness to put out the fire on his turban or head" (Thanissaro, 1997, Maranassati Sutta, para. 2).

Maranassati involves withdrawal to a solitary place, as per usual meditation practice, and then simply focusing the mind on the thought "death will occur, the life faculty will be interrupted" or solely on the idea of "death, death" (Bond, 1980, p. 243). This is designed to enable the meditator to come to terms with the difficult reality that death plays in their own life (Bond, 1980). The meditator is also encouraged to reflect on the eight points around various aspects of death. Bond (1980, pp. 243-244) summarises these as the following:

- 1) Death as having the appearance of an executioner.
- 2) Death as the ruin of all success.
- 3) Death as the inevitable end for all persons-just as it strikes down the great and mighty, so will it strike us down also.
- 4) Death as the result of "sharing the body with many"; a reflection on the infinite number of factors, both internal and external, that can cause death.
- 5) Death as lying near at hand, kept away only by this frail process of life.
- 6) Death as 'signless'; nothing about it can be predicted or known in advance.
- 7) Death as the certain end of a life span that is short at best.
- 8) Death as a constant phenomenon, occurring at every moment for the aggregates of existence.

Anālayo (2018), summarises Maranassati in a guided meditation, step by step, similarly to the Eight Stages of Dying, and takes the practitioner through an imagined process of death. The meditation consists of instructions and reflections around the falling away of aspects of existence, such as relationships, possessions, elements of the physical body and mental body. It is concluded with connecting to a state of 'awareness and deathlessness' and then guides the practitioner back to the present moment.

Death Contemplation in Clinical Practice

Some forms of psychotherapy include imagining one's death or a funeral, contemplation on death and impermanence, and reflections on existence and mortality. Below are examples of how clinicians use the topic of death in their work with clients, whether it is to address fears of non-existence and death anxiety, or to help direct one's actions toward a values' driven living.

Exposure Therapy. Furer and Walker (2008), focus on practical approaches to treating death anxiety. Furer and Walker (2008) explain that some of the most effective and common ways of dealing with death anxiety is through Cognitive-Behavioural Therapy (CBT), particularly, through exposure therapy (in vivo or imaginal). Exposure to feared themes in relation to death through contemplation, imagination and cognitive restructuring can be particularly effective (Furer & Walker, 2008). Furer & Walker (2008) suggested various exercises that can be used with clients with death anxiety, including writing about what their worst fears about death could be, depictions of their death and their funeral, creating or reading obituaries or tentatively preparing for death by writing their will.

Acceptance and Commitment Therapy. Reflecting on one's own death is an exercise used in Acceptance and Commitment Therapy (ACT; Hayes & Smith, 2005). The aim of the exercise is to reconnect individuals with their values and to help guide goal setting and commitment to action. Clients are instructed to imagine being present at their own funeral or imagine their tomb stone. This is then followed by imagining a family member or a friend stand up and describe what the client cared about and the path they have taken. However, in one scenario the client would imagine what they are afraid could be said, and in another scenario what they would like to be said if they followed and lived a life in line with their innermost values. Hayes and Smith (2005) also encourage to plot a timeline starting with the present day and ending with the day of death in order to help identify important short and long-term goals.

Existential Psychotherapy. Yalom (1980) outlines treatment of psychopathology through an existential approach (as described in Chapter One). In response to anxiety around non-existence Yalom (2008) recommends using the Stoic philosophy "Epicurus's symmetry argument: After death, I will be in the same state of nonbeing as before birth" (p. 296). Menzies and Menzies (2020) explain that clients can also be encouraged to foster gratitude

for ever coming into existence at all, an idea expressed and popularised by Richard Dawkins (1998). One of the exercises is based on contemplation of the likelihood of one's existence, by reflecting on the probability of one's parents ever meeting, followed by grandparents and preceding generations and events. This can help clients focus on the remarkable improbability of their own genetic sequence ever existing at all, rather than focusing on the tragedy of their impermanence (Menziés & Menziés, 2020).

A Year to Live. Stephen Levine, a meditation teacher, therapist, and an author, incorporated the fundamentals of Theravada Buddhism and simulation of a dying process and a funeral in his therapeutic work. He subsequently created a programme that was grounded in contemplation of impermanence and dying – a 'Year to Live' (Levine, 1997).

The programme is based on imagining that one is going to die exactly one year from now and consists of month-by-month practices and meditations. The first part of the year is focussed on discussing attitudes and fear of death. It is followed by a life review and developing an attitude of gratitude and forgiveness towards others. Later in the year, participants contemplate on what happens to their body after death, writing a will and an epitaph, together with letters and poems for the loved ones. The tenth month is focused on letting go of possessions. The eleventh month revolves on spending time with relatives and friends and contemplating their mortality too. And finally, in the twelfth month, one says goodbye to the body, expresses gratitude to loved ones, and prepares for death. There have been positive reports on the profound effects of this programme (Eastick, n.d.; Taylor, 2016), although, there does not appear to be any formal evaluations amongst the academic literature.

Research on Mindfulness of Death

Moon (2019) highlights that although there is substantial research on how mindfulness can positively impact physical and mental health, evidence on applying

mindfulness of death is sparse among the academic literature. However, there is some literature that indicates that the clinical applications of the practice are worth exploring, and some positive reported outcomes are summarised below.

Stella (2016) conducted a teaching session for Canadian counselling students with the aim of developing students' self-awareness skills and managing emotional reactivity when confronted with the topic of death. This was in preparation to counselling bereaved clients. Stella (2016) guided her students through a mindful exercise to contemplate their own deaths in the worst- and best-case scenarios. They then participated in smaller and bigger group reflections on the process. Students were asked to remain mindfully aware of their physical and emotional responses throughout the process. In their reflections the students reported anxiety when confronting the thought of their own death. Specifically, in the worst-case scenarios they reported 'fight-flight-freeze' type responses. Students with history of traumatic deaths in the family reported distress type responses. Others reflected on the quality of their family dynamics and evaluating their relationships.

Overall, the students reported the activity was helpful to expose their feelings about death and helped to deal with fears about counselling bereaved clients (Stella, 2016). It appears that mindfulness of death exercise created a forum to confront some of the students' difficulties around the topic of death and encouraged self-reflection within the educational environment. Stella (2016) made a suggestion that this activity can be used with counselling students for developing self-awareness. However, there appeared to be no description whether this activity was formally evaluated, or whether any type of methodology was applied, nor has there been any information provided about the participants (such as number or demographics), other than that they were counselling students.

Park et al. (2016) conducted a quasi-experimental design study to confirm whether an Insight Based Death Meditation (IBDM) programme had effects on death anxiety and quality of life scores for two groups of Korean adults. The experimental group (n=30) participated in the IBDM programme over six days and five nights, completing an eight-hour daily curriculum at a meditation centre. The control group (n=30) have only completed the pre and post measures without receiving any intervention. The IBDM curriculum consisted of meditations and teachings from Vipassana and Zen Buddhist approaches. Meditating on death was introduced on days four and five as part of the programme. Park et al. (2016) found that there were significant differences in scores between groups, indicating that immediately after the programme the experimental death anxiety scores decreased and quality of life scores increased compared to controls. The longevity of these effects was unclear. Perhaps having a follow-up measure with the two groups could have provided more insight.

In a Doctoral Dissertation, a mixed-method study, Wilkus-Stone (2017) explored the use of two types of mindfulness activities to confront mortality in 20 American participants born between 1946 and 1964, referred to as the Boomer Generation. One of the activities was a guided mindful reflection on mortality and the other one was a mindfulness of breath induction exercise. The mindfulness of breath induction produced calming effects, more focus on awareness of the body and reduced cognitive activity, in line with expectations from a meditative practice. However, the mindfulness of mortality exercise was associated with a variety of emotions, including sadness, fear, peace, and gratitude. It stimulated cognitive processing, and reflections on participants' diverse religious and spiritual beliefs. Although, the participants reported the exercise as challenging (specifically when emotions such as grief and sadness were induced), they also reported an overwhelming value in reflecting on death, and appreciation for a facilitated contemplative exercise. Wilkus-Stone's (2017)

recommendations included applying reflection on mortality in clinical and counselling practice, as means of deepening awareness and engaging with the subject of death.

Moon (2019) describes a study conducted with Korean students in 2015 (part of a Doctoral Thesis). A 13-session Mindfulness of Death Based Death Education (MDBDE) programme was delivered to 62 Korean students (aged 13-15) and compared with a 61-student control group. Significant effects were observed in the MDBDE group, specifically more positive attitudes toward life and higher levels of acceptance of death. Subsequently, Moon (2020) suggested that embracing death through practice of mindfulness of death or MDBDE programme can assist inducing mortality salience (as described in TMT), and “when it is induced, human beings place more importance on internal values, such as the meaning of life, happiness, and tolerance of others, rather than on external values, such as success, wealth, honor, and appearance” (Moon, 2020, p. 10).

In her thesis Gutschow (2023), highlighted the importance of death conversations and contemplation among health workers who specialise in working with dying. She proposed a four-week educational mindfulness and death contemplation programme for social workers. Gutschow (2023) suggested for the effectiveness of the curriculum to be evaluated by pre- and post- assessments on death anxiety, mortality salience, trait mindfulness, stress and compassion fatigue. However, at the time of this review, it was unclear whether the programme has been implemented and whether any results have been obtained to date.

Mindfulness and Death Anxiety

There is some evidence supporting that general mindfulness practice can be helpful with managing death anxiety (Anālayo et al., 2022; Ho, 2023). For example, trait mindfulness, a characteristic tendency to maintain awareness of the present moment in a non-reactive and non-judgemental manner, was found to be predictive of less suppression of death

thoughts immediately following mortality salience induction (Niemic et al., 2010). Niemic et al. (2010) reported that trait mindfulness may reduce defensive reactions to death reminders, which could further lead to a reduction in death anxiety.

Anālayo et al. (2022) conducted a randomised control trial to investigate whether a short-term mindfulness intervention would influence fears of mortality in a group of 89 New Zealand undergraduate students. The majority of participants were female (82%) and New Zealand European (67.4%). The second largest ethnic group were Māori (14.6%). The participants were randomly assigned to either the mindfulness (intervention) group (n=44) or the contemplation (active control) group (n=45). They were provided with a different meditation or a contemplation recording (of 20 minutes) each week, over 6 weeks. The meditation group listened to recordings of general mindfulness meditation instructions, such as body awareness, breathing, breathing with emphasis on impermanence and significance of the breath for staying alive. The instructions did not explicitly bring up the topic of death and dying. The contemplation (active control) group listened to recordings of identical length, on topics such as mother nature and one's internal landscape, allowing painful thoughts and emotions, and observing them, recognizing humanity in others, developing empathy, experiencing anger and guilt, and letting them go.

It was concluded that both short-term mindfulness and a contemplative practice, can reduce fears related to dying of oneself or others, as well as increase trait mindfulness and self-compassion. The results demonstrated that both mindfulness and contemplative practices significantly reduced fear of oneself dying and fear of the death of others. At the same time, significant increases on mindfulness facets linked to trait mindfulness and self-compassion were evident in both groups. Results for both groups indicated an increase in fear related to the dying of others when followed up (one to three weeks afterwards), however, still remained significantly lower than baseline. The authors did note that the two conditions were

not completely distinct from each other; hence they did not provide sufficient distinction in effectiveness when compared, and that a third, non-intervention control condition could have resolved this. They also indicated that the study was carried out during the Covid 19 pandemic, that could have had some confounding effects on increased mortality salience.

Jain (2024) explored similar effects in an experimental study with 42 participants from India. He found a significant reduction in death anxiety scores after a 20-minute mindfulness (Vipassana) mediation (without any death related content) exercise with an experimental group (n=21), in comparison to controls (n=21) with no intervention. However, there appeared to be no follow-up measures.

Most recently, in China, Ye et al. (2024) conducted two studies. One was experimental with 61 participants, and another one was a cross-sectional study with 440 participants. Ye et al. (2024) aimed to investigate whether young people's (18-25 y.o.) levels of mindfulness could improve their attitudes toward death escape acceptance. In the first study, 25 participants in the intervention group completed a mindfulness-based training programme (one hour a week for four weeks), while 35 participants remained on the waitlist (the waitlist group - controls). The mindfulness-based training programme included instructions on mindful breathing, body scan, mindful stretching, mindful eating and walking. The results showed a significant increase in trait mindfulness and improved attitudes toward death acceptance in the mindfulness group in comparison to controls. The second study was aimed to replicate these findings cross-sectionally, and measured relationships between trait mindfulness, death acceptance and emotion regulation ability in 440 participants. The results indicated that the respondents with higher levels of mindfulness had lower levels of difficulty in emotion regulation and better attitudes toward death. Ye et al. (2024) concluded that mindfulness practice can improve individuals' trait mindfulness, which in turn can transform problematic attitudes toward death and potentially reduce unhealthy behaviours related to

general difficulties with emotion regulation. The authors did comment that the long-term effects of mindfulness training on death related attitudes was yet to be confirmed, as they did not have a follow up measure.

Mindfulness of Death as Exposure?

Kang et al. (2013) explain that mindfulness encourages a gradual orientation of attention toward fear as it arises, while exploring it with non-judgmental acceptance. “Mindfulness thus involves exposure to fearful stimuli without avoidance, which is a key ingredient in effective therapy that aims to change undesirable reactivity to fearful stimuli” (Kang et al., 2013, p. 198). Through mindfulness one can introduce a fearful stimulus, and practice desensitization in a safe environment, with the aim of eventual extinction of emotional reactivity to the themes (Kang et al., 2013). However, Kang et al. (2013) do distinguish that mindfulness-based therapies, are different to exposure-based therapies. Firstly, when practicing mindfulness one needs to abandon goals or aims. Secondly, mindfulness does not deliberately induce panic type symptoms with the aim of practicing tolerance but rather involves observing these sensations as they naturally arise.

Mindfulness of death meditation confronts the themes of death directly and at times vividly, somewhat similar to the imaginal exposure as described by Furer and Walker (2008), or visualisation proposed by Hayes and Smith (2005) and Levine (1997). Perhaps, mindfulness of death practice can facilitate a type of imaginal exposure to death related stimuli, while gently attending to responses, exploring them from a non-judgemental stance and attending to any insight that come. Application of mindfulness of death practice in clinical practice or in everyday life is worth further investigation.

Summary of Literature Review

Direct confrontation with death and mortality in some cases can contribute to psychopathology, in other cases it can have transformative effects. Cozzolino et al. (2004) findings suggest that direct mortality awareness can assist to manage existential terror, embrace existence, and enable intrinsic needs and values to surface. Buddhist mindfulness meditation on death, is a technique that enables the practitioner to contemplate and reflect on inevitability of their own death voluntarily, without facing death directly through such experiences as terminal illness, trauma or an NDE. Meditation on death practice can be rewarding and liberating, where increased acceptance and internalisation of impermanence can buffer against psychopathology and assist with post-traumatic growth (Shonin & Gordon, 2014). There are multiple variations amongst Buddhist literature on how to meditate and contemplate death mindfully.

The benefits of meditation and mindfulness-based interventions (Kabat-Zinn, 2003) are widely known and have been studied extensively since the end of the last century. However, meditation on death is a less researched practice in a therapeutic setting. Mindfulness of death is believed to be linked to finding greater meaning in life, letting go of stresses and material attachments (Shonin & Van Gordon, 2014). In non-clinical populations mindfulness of death has been linked to greater self-awareness (Stella, 2016), decreased death anxiety (Park et al., 2016) and increase in prosocial attitudes and values (Moon, 2019; Moon 2020).

At the time of this review there appears to have been no qualitative enquiry into specific mindfulness of death practice in an Australasian context or globally. Given how beneficial the initial international research suggests it to be, there is a need for a better understanding of the use of this practice and individual experiences of mindfulness of death. Qualitative exploration into individual experiences could provide more insight behind its

mechanisms, the experienced nature of its effects and potential challenges. For example, the currently available research does not provide much information around the potential negative effects of this practice.

A qualitative enquiry could help inform practitioners who may want to participate in the practice themselves, as well as meditation teachers who may like to introduce mindfulness of death to students. Most importantly, given the positive reports on how mindfulness of death, contemplation on death or mindfulness practice in general can help reduce death anxiety, clinicians may want to consider utilising variations of this practice with clients. It appears to be beneficial across age ranges as shown in current literature, from students (Moon, 2019) to Baby Boomers (Wilkus-Stone, 2017). Given an array of different ways of meditating on death mindfully, as suggested by the Buddhist and therapeutic texts, further research into this practice can provide guidance to clinicians on how to account for individual experiences when implementing it. A qualitative enquiry could also direct future research into this practice, particularly with applications to clinical populations with anxiety, such as death anxiety.

Current Research Objectives

Given there is no previous qualitative research available on the topic in Australasia, the objectives of the current study are relatively broad. The primary aim is to utilise qualitative methodology in order to explore how individuals who are engaging in mindfulness of death meditation, or have engaged with it previously, experience it.

The research questions are:

- 1) What motivations do participants have for engaging in death meditation practice?
- 2) What is the experience of this practice like for them?

- 3) What effects have they observed? What was of significance and what might have been challenging?
- 4) What (if any) was the overall impact of this practice on their relationship with the themes of death and dying?

Chapter Three: Method

This chapter describes the researcher's theoretical framework, the qualitative method of analysis utilised, ethical considerations, procedure, information on participants and data analysis.

Ethical Considerations

Given the sensitivity of the subject of death, ethics approval was sought and granted by the Northern committee of the Massey University Human Ethics Ohu Matatika 2 (MUHEC: Northern Application OM2 23/04). The ethical considerations of autonomy, confidentiality, avoidance of harm, beneficence, and cultural responsiveness were adhered to, in line with the MUHEC guidelines.

Participation in this study was voluntary. All interviewed participants reviewed the study information sheet (Appendix A) and Participant Consent Form (Appendix B). Consent to participate was indicated by physically signing the Participant Consent Form or acknowledging consent electronically via email. All participants were provided with the opportunity to review and amend their interview transcripts and signed or otherwise (via email) consented to the Authority for the Release of Transcripts Form (Appendix C).

A list of contacts for psychological support were made available to participants as part of the study information sheet (see Appendix A). None of the participants indicated this was necessary following the interview. Collected data was anonymised and stored on the researcher's computer, with back up to Microsoft OneDrive, password protected and accessible only by the researcher. The data was only analysed by the researcher.

Theoretical Framework: Phenomenology

At the beginning of the 20th century, philosopher, Edmund Husserl pioneered the Western orientation toward “an intentionally aware, nonjudgmental, and descriptive bare presence to the things that present themselves in here and-now experience” (Felder et al., 2014, p. 7). Husserl is widely regarded as the founder of phenomenology (Moran, 2005). At the core of phenomenological thinking is the study of phenomena as they appear and “manifest themselves to the consciousness, to the experiencer.” (Moran, 2000, p. 4). Phenomenology puts consciousness at the centre of being, instead of treating it as a secondary phenomenon or a byproduct of physical existence.

Martin Heidegger took Husserl’s ideas further and emphasised that the nature of human experience takes place within a context in the world, and this experience is loaded with meaning making as it unfolds (Fernandez, 2018; Smith & Eatough, 2012). Heidegger’s work formed the basis for hermeneutic phenomenology, which is underpinned by the idea that any experience requires an interpretative component to be understood (Smith & Eatough, 2012; Thomas-Anttila & Solomon, 2023). Heidegger departed from Husserl’s presuppositions that one can separate themselves from what is being studied, or ‘bracket’ out, the external world or one’s individual biases (Thomas-Anttila & Solomon, 2023). Instead, he proposed that as an enquirer, one brings who they are with beliefs and understandings to the interpretive process (Thomas-Anttila & Solomon, 2023). Gadamer (1975/2013), explains that the hermeneutic researcher’s “foregrounding” and “fore-meanings” are necessary in the process of analysis, and that these preconceptions give the researcher an ability to be alert to the texts’ meaning (pp. 281-282). Although, it is important to be aware of one’s own bias, so that “the text can present itself in all its otherness and thus assert its own truth against one’s own fore-meanings” (Gadamer, 1975/2013, p. 282).

Constructivism, initially originating from Jean Piaget's work on cognitive development and learning (Piaget, 1964), is grounded in phenomenology. Constructivism is a philosophical paradigm that ontologically emphasizes how individuals actively construct their own notions of reality through their cognition and meaning making (Lincoln et al., 2011). The meaning making occurs in the context of the individual (their past, present and future) and the world around them (social and cultural factors). Constructivism is often associated with qualitative methods of research (Shannon-Baker, 2023). Constructivists recognise that it is impossible to be separated from the research process completely, and that the findings of research are inherently transactional and co-created through meaning making between the participants and the researcher (Lincoln et al., 2011).

A constructivist 'worldview' within the phenomenological framework was adopted by the researcher for the purposes of this study. The constructivist paradigm is suitable in the context of studying participants' experience of mindfulness meditation on death, with emphasis on their subjective meaning making. Mindfulness activity focuses on experience as it unfolds, and this experience can only be understood from the point of the observer – the experiencer (the participant). The participant's relationship with death and its meaning is situated in the context of their past, present and future, as well as the broader context of cultural and social influences. A constructivist viewpoint acknowledges the researcher as contributing to the findings, and that complete 'bracketing' is not possible.

Methodology: Interpretative Phenomenological Analysis (IPA)

Interpretative Phenomenological Analysis (IPA; Smith et al., 2009; Smith & Eatough, 2012) was used to explore the experiences of participants engaging in mindfulness of death meditation. Phenomenology and hermeneutic inquiry form the dual epistemological basis of IPA (Smith & Eatough, 2012), with an emphasis on subjective experience. IPA is a collaborative approach because it explores experiential meanings through the interpretative

work between the researcher and the participant rather than being only a theory-driven analysis (Smith & Fieldsend, 2021).

Smith (2004) summarises IPA as being (1) idiographic, starting with in depth analysis of each case, with the focus on how individuals allocate meaning to their experiences, (2) inductive, allowing the themes to emerge from the analysis without attempts to verify or negate a hypothesis and (3) interrogative, as it encourages a dialogue to emerge on how the outcomes fit with existing theory and research. Shonin et al. (2014b) describe IPA as a suitable technique to analyse such experiences as meditation and mindfulness. The practices of meditation and mindfulness are subtle and are experienced differently by each individual. IPA relies upon the researcher, with their experience of meditation, interpreting the participant's interpretation of their meditation experience. Therefore, the process of analysis becomes a rich co-construction of the meaning of meditator's experiences and the researcher's. This double-hermeneutic "allows for findings to be reflexively interpreted within the context of a 2,500- year-old spiritual practice system without losing sight of the uniqueness of the participant's experience and the importance that they assign to it" (Shonin & Van Gordon, 2015).

Participants

IPA values the richness of qualitative insights, hence the number of participants for this study was anticipated to be small, up to six participants. It is recommended that the participant sample for IPA is somewhat homogenous (Smith & Fieldsend, 2021). However, given the novelty of mindfulness of death practice, difficulties in recruitment of participants were expected. Hence the inclusion criteria were relatively broad (see Appendix A). Nevertheless, only participants from Aotearoa New Zealand of Australia were recruited. This was due to the ethical implications of conducting this type of research internally, and in line with research objectives (included at the end of the previous chapter). Ideally, the participants

would have been exposed to meditation on death and mindfulness of death practice as a practitioner, client, or a student. The participants needed to be above 18 years of age, able and willing to disclose their experiences in a semi-structured interview with the researcher.

The recruitment process commenced in mid-2023 and continued up to late 2024, with intermittent breaks, due to delays in locating interested and suitable participants. The researcher had also relocated residence from Australia to New Zealand during the study.

Various strategies of recruitment were utilised:

- Internet (Google) searches for therapists and teachers practicing mindfulness of death meditation with clients and contacting them via email, phone or preferred social media application (e.g. Instagram).
- Call out to the researcher's wider professional network of clinical practitioners (counsellors, psychotherapists, psychologists) via email, phone, messaging applications (e.g. Facebook Messenger or WhatsApp) or in person.
- Posting information about the study on Meditation and Death related topic group pages on Facebook.
- Contacting various Buddhist Centres across Aotearoa New Zealand and Australia – via phone, Facebook, email and in person visits.
- Existing acquaintanceship networks.

In total, nine individuals indicated interest to participate in the study, either via email, messaging apps or in person. Follow up with interested individuals was done via email, phone or in person. All interested participants were provided with the study information sheet (Appendix A) via email or with printed copies. After receiving more information about the study seven participants indicated consent to be interviewed. Two participants did not respond.

A total of seven participants were interviewed for the study. Out of seven, six interviews were selected as suitable and in line with the topic of research. The excluded interview did not contain information specific to mindfulness of death meditation or death contemplation practice and was rather focused on spontaneous moments of death awareness. The final group (n=6) ages were between 31 and 65 years (mean age = 45 years), with one participant declining to indicate age. The group was comprised of four males and two females. Four participants identified as Caucasian or European-Pākehā, one as Caucasian/African American, and one declined to indicate ethnicity. All participants indicated tertiary level education, varying from Bachelor to Doctorate degrees. Four participants indicated Buddhism as their main religion, and two participants did not specify. All participants identified themselves as experienced mindfulness and meditation practitioners. Four of the participants reported varying levels of experience of teaching mindfulness and meditation to students/clients. Three participants were based in Aotearoa New Zealand, and three participants in Australia.

Procedure

Consistent with the IPA interview recommendations (Smith et al., 2009), the semi-structured interviews followed a Socratic questioning approach and were administered in a manner that encouraged participants to express themselves freely, whilst allowing for the researcher to prompt for additional clarification if needed. The semi-structured framework was non-prescriptive and served as a guide, it allowed for flexibility to adapt to the aims of the research. The semi-structured interview guide (see Appendix D) included open ended questions around experience with the mindfulness of death meditation, one's motivation to engage in such practice, details around the process of their meditation (e.g. was it guided, or self-directed), feelings and reflections prior, during and after the meditation, anything of significance, likes or dislikes, and any other input. The questions were asked in no specific

order or format, depending on participants' comprehension and what arose in context of the conversation.

The interviews were conducted in person and via video platforms, such as Zoom, Microsoft Teams or WhatsApp video. Two interviews were completed in person and four through a video platform. The interview length varied from 50-minute duration to two hours. One of the interviews was conducted in two sittings, three days apart, as the participant indicated a wish to add more information to the initial interview. Audio recording files were retained by the researcher and saved under a code name. Audio was then transcribed verbatim using a transcribing application by Sonix Inc (www.sonix.ai). The transcripts were converted to Microsoft.docx files and reviewed manually in real-time by the researcher against the audio to ensure accuracy and to remove any identifiable information from the content. The audio files of the interviews were deleted after data analysis was complete. The transcript .docx files were shared via email with participants to provide an opportunity for review and amendment. Three participants declined the opportunity to review. Out of three participants that reviewed their transcripts, two confirmed accuracy and did not amend. One participant did not respond after the transcript receipt. As a token of gratitude and appreciation, a \$40 grocery voucher was issued to all interviewed participants following the interviews. Two participants declined the voucher and a \$40 donation was contributed toward a charity of their choice.

Data Analysis

Participant transcripts (data) were analysed following standard IPA guidelines (Smith et al., 2009; Smith & Fieldsend, 2021). The analysis process was conducted with each case individually at first. Firstly, an interview was listened to at least once whilst reading the transcript, then re-read repeatedly in order to become familiar with the world of each participant and what they consider important. At this stage, initial reflections and key points

based on impressions, ideas and concerns were made for future reference. The second step involved immersion into the detailed analysis of the transcript text, noting exploratory notes in a margin to the right of the transcript. Exploratory notes were conceptual, descriptive or inquisitive in nature. They opened up a range of possible meanings derived from the text by the researcher. Subsequent review identified experiential statements from the exploratory notes and recorded in a separate margin to the right of the transcript. These statements reflected the researcher's interpretation of exploratory notes. An example of a transcript with exploratory notes and initial experiential statements is below (Table 1).

Table 1

Example of Exploratory Notes and Experiential Statements

Transcript	Exploratory notes	Experiential Statements
<p>Participant: You know, Buddha said that, you know, a meditation on death is the elephant of all meditations. And that's what I found. And in kind of moving down that path, I, I really saw the value in it for myself, you know, and to come to the understanding that, yes, you know, death and life are not opposites, but that death is actually a part of life. And that if I was to fully embrace life, it actually meant fully</p>	<p>Idea of death as fundamental to Tibetan Buddhist practice. Value to self.</p> <p>Death and life are not opposites – they are part of life.</p> <p>Embracing death means embracing life.</p>	<p>Finding personal value in a Buddhist Practice</p> <p>Death and life need each other</p>

embracing death and the path sort of unfolded for me from there.

As a fourth step, the exploratory notes and experiential statements were mapped into a separate themes table. Corresponding exploratory notes were grouped against the experiential statements. The experiential statements were then refined and condensed through examination of connections between them. Throughout this process personal experiential themes (PETs) were identified, supported by subthemes and clusters of experiential statements and exploratory notes (see Table 2). The process continued through grouping, regrouping and expanding on themes. Note, each exploratory note remained connected to the original transcript as in Table 1 and was accessed and referred to as needed for reference.

Table 2

Example of Personal Experiential Themes (PETs), Subthemes and Experiential Statements.

Personal Experiential Themes (PETs)	Subthemes	Experiential statements	Exploratory notes
Effects of death meditation	Reframing Death	Death and life need each other	<ul style="list-style-type: none"> • Death and life are not opposites – they are part of life. • Embracing death means embracing life.

The fifth step involved repeating this process with all remaining transcripts individually, allowing personalised themes to emerge for each case. As a final step, patterns were assessed across cases, which led to a reconfiguration and clustering of group experiential themes (GETs) and subthemes based on convergence. Diverging accounts and

differences were noted concurrently for future reference. Final established GETs were those that were evident in more than half of the participants' transcripts. This then formed the basis for the write up of the analysis. The analysis continued throughout the write up, the naming of GETs and subthemes was reviewed and modified as the write up unfolded with the researcher making new connections and finding differences across accounts. A final table of GETs and subthemes (Table 3) is provided in the next chapter in description of the results.

Trustworthiness

As mentioned earlier, a defining feature of IPA investigation is the double-hermeneutic, where the researcher's influence on data collection and interpretations become inseparable from the findings. Although the researchers meaning making is a necessary part of the process, it is important to ensure the trustworthiness of the findings due to the subjective nature of qualitative research (Ahmed, 2024). According to Ahmed (2024), trustworthiness is comprised of essential components such as credibility, transferability, dependability and confirmability.

Credibility includes prolonged engagement, reflexivity and triangulation (Ahmed, 2024). Prolonged engagement was achieved through building sufficient rapport with the participants and spending enough time with them to engage in a discussion that allowed for nuanced insights into their experience to emerge. Reflexivity practice (Lincoln et al., 2011; Palaganas et al., 2017) included awareness and openness to acknowledge how the researcher's social, educational, and cultural background, as well as power positioning as a 'researcher' could have impacted on the interactions with the participants and bias toward obtained data. Personal notes containing reflections and reactions throughout the process of the literature review, data collection and analysis were kept by the researcher. Potential biases were at times found and acknowledged accordingly through further reflection or in discussion with the supervisor. Triangulation, employment of multiple data sources or methods to cross-

verify findings (Ahmed, 2024), was achieved through reviews of the procedure, analysis and results with the supervisor for the study. Extensive triangulation, such as employment of mixed methods, was outside the scope and size of this study.

Transferability and dependability were achieved through transparency (Moravcsik, 2014) on data collection and detailed description of procedure and analysis in this chapter. Any identified findings were supported by verbatim quotes from transcripts in the following chapter. Information about the study and the process was fully disclosed to all participants. At the same time, some demographic information about participants has been included in description of the study, with sufficient detail about their contexts, omitting any identifiable information to ensure privacy. Confirmability, allowing participants to review the findings and peers debriefing (Ahmed 2024), was outside of the scope of this project due to size and time limitations.

In addition to the above, the researcher ensured fairness (Lincoln et al., 2011), through attempts to balance perspectives and viewpoints, and through avoidance of leading enquiry and questions. Although, at times fairness was also achieved through asking participants to reflect on aspects of their experience that were not covered in the interview (e.g. What did you dislike about this type of meditation? Is there anything you would like to add that we have not talked about?).

To lessen data contamination, self-disclosure and verbal input by the researcher during the interviews was minimised, although was not always possible. When needed, an appropriate amount of self-disclosure to build sufficient rapport was used. Subtle verbal and non-verbal encouragement were used throughout the interviews to facilitate openness and comfort. Separating the researcher's personal interest in the topic (having practiced mindfulness and mindfulness of death meditation) was not possible. However, at times it was

helpful, as it assisted with understanding of the terminology that the participants used during their interviews. The absence of a set hypothesis and using an inductive approach to analysis also assisted the process.

The next chapter describes the results of this research.

Chapter Four: Results

This chapter represents a summary of findings from the analysis of the interview data as described in Chapter Three: Method. The results are presented in a narrative form, with the focus on interpretation of participants' accounts, rather than a theory-driven examination, as per guidelines of IPA (Smith & Fieldsend, 2021). Discussion of the results with links to theory and related research follows in the next chapter, Chapter Five: Discussion.

All participants provided rich and detailed accounts of their experiences. The following three group experiential themes (GETs) were identified from the data set in relation to the questions above: (1) *close and personal with death*; (2) *transformation*; and (3) *controlled losing of the mind*. The findings are summarised in the results Table 3 below.

Table 3

Results: Group Experiential Themes (GETs) and Subthemes

Group Experiential Themes	Subthemes
1. Close and personal with death	1a. Shock of death
	1b. Challenging conditioning
	1c. Existential crisis as pathway to healing
2. Transformation	2a. Time is of the essence – intentional living
	2b. Mindfulness in relationships
	2c. Fear – insight in discomfort
	2d. Transforming the mind – transforming suffering
	2e. Letting go
	2f. Reframing death

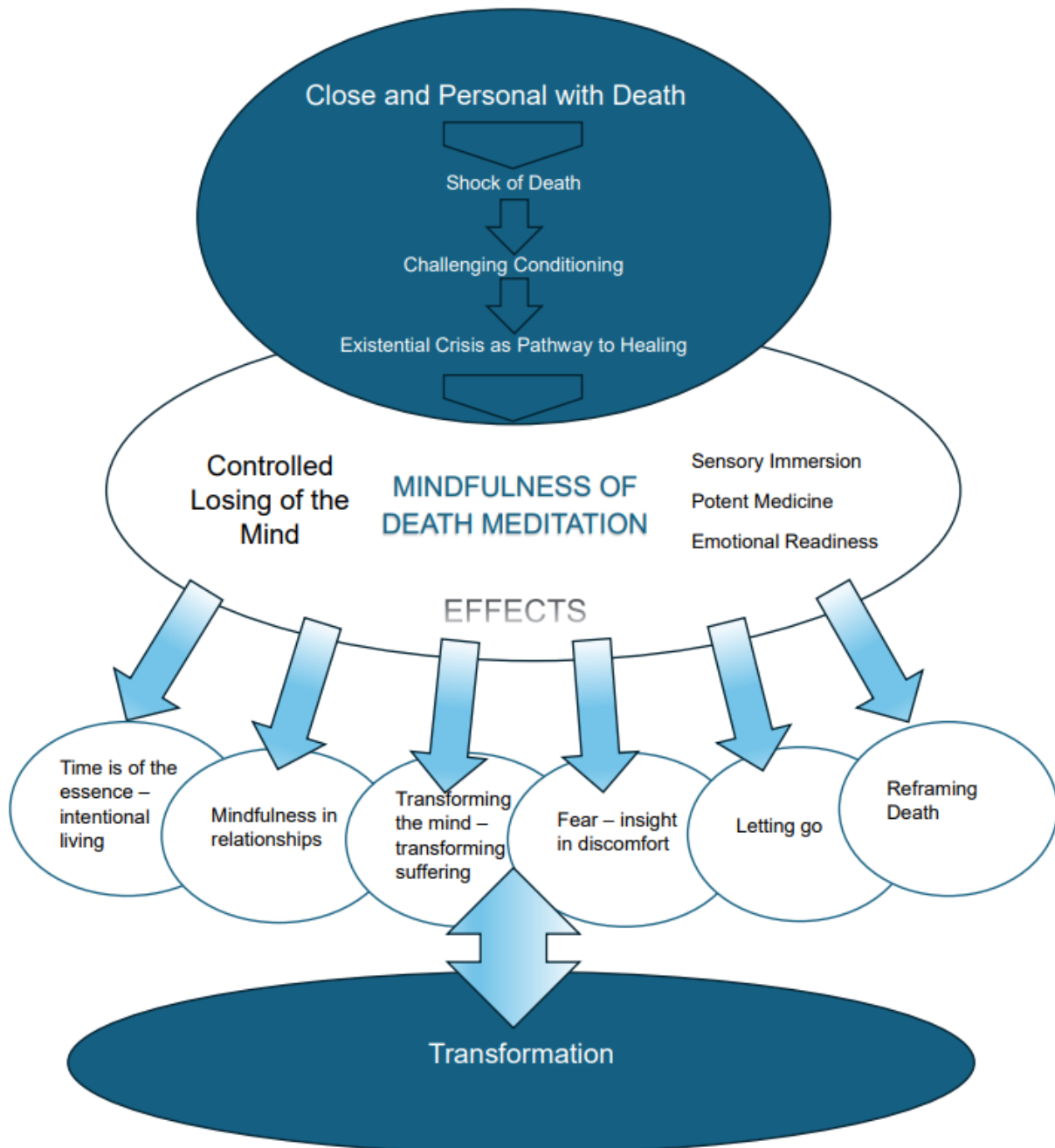
3. Controlled losing of the mind	3a. Sensory Immersion
	3b. Potent medicine
	3c. Emotional readiness

The first theme of *close and personal with death* had three subthemes: (1a) *shock of death*; (1b) *challenging conditioning*; and (1c) *existential crisis as pathway to healing*. Responses that formed this theme reflected answers to the research question about the participants' motivation to engage in mindfulness of death meditation practice. The second theme, *transformation*, included six subthemes. These highlighted the perceived effects of death meditation and relationship with the topic of death and dying. They were: (2a) *time is of the essence – intentional living*; (2b) *mindfulness in relationships*; (2c) *fear – insight in discomfort*; (2d) *transforming the mind – transforming suffering*; (2e) *letting go*; and (2f) *reframing death*. The third group experiential theme, *controlled losing of the mind*, had three subthemes: (3a) *sensory immersion*; (3b) *potent medicine*; and (3c) *emotional readiness*. This third theme and related subthemes captured the felt experience of mindfulness of death meditation practice, as well challenges. It captured participants' descriptions regarding the intensity of the practice, as well as provided some words of caution around its application.

The themes and how they relate to each other are captured in a visual representation in Figure 1, below.

Figure 1

Thematic Map of Findings



Close and Personal with Death

During the exploration of the initial motivations to engage in mindfulness of death meditation, all participants reflected on their earlier relationship with the idea of death, and

understandings around the concept of death. Most participants described a close confrontation with mortality, whether it was their own or others, and subsequent re-evaluation of their relationship and feelings around death as result. All participants reflected on challenging societal and personal worldviews on death. Their reflection falls into three subthemes: (1a) *shock of death*; (1b) *challenging conditioning*; and (1c) *existential crisis as pathway to healing*.

Shock of Death

Several participants highlighted the emotional impact that their personal confrontation with death had for them. For example, Jessica, had a traumatic near-death experience as result of an accident. She described her “shock” at death as follows.

You know, the time of death is so uncertain. And that was one of the big shocks too with my near-death experience, was, I always, you know, as most young people, you think, oh, I'll die in my 70s or 80s, you know, I'll live this long life and do all these things. I don't even have to think about death until I'm much older, you know. But the near-death experience really it was that shock of like, this could happen any time and I'm so not ready for it (Jessica).

Her account reveals a separation from the idea of death as a concept projected in time. The idea of death was distant and not rooted in Jessica's reality as a young person, with a potential of a “long life”. However, the near-death experience brought the reality of death closer in time, making it imminent and highlighting the uncertainty as to when death is going to happen. The “shock” of the imminence of death made the concept a lot more real for her, signalling a need to prepare.

Similarly, Wendy, who became a palliative counsellor and a Buddhist nun later in life, described a shift in her feelings about death, and a feeling of astonishment after her father's passing.

My mother died when I was 19. And, you know, that was [pauses] an interesting experience, I guess, that I probably didn't really reflect too much on until fairly recently. . . I guess all of this is in the context of my mother and I had. My mother had raised me in a way that death was normal, like we'd talked about death . . . so I never really saw death as something negative . . . So, I never, until my dad died, I never really got overly emotional, I suppose, around the idea of people dying . . . I mean, I was really surprised at his funeral when I got up and did a eulogy and I cried, and I was shocked by that, I didn't [pauses]. Yeah, I was really shocked by that. I didn't expect it to, for that to happen (Wendy).

It appears that despite being somewhat comfortable with the idea of death from her earlier experience with her mother, Wendy was confronted with a part of herself that has not yet been revealed to her, until her father's death. The shock of this has brought her closer to looking at her relationship with death, even though the concept and reality of it, on the surface, consciously, did not seem to be a concern. She described this experience as a call to reflect on the importance of her relationship with her father, and to look closer at her relationship with death.

Like Jessica, Michael, now a meditation teacher, explains that death was not something that he fully faced in his young age, "As a young boy growing up, I felt I was kind of ten foot tall and indestructible. And whilst, you know, I understood death as a as a relative concept, I don't think I'd really grasped the idea" (Michael). He explained how the concept of death has shifted for him due to personal encounters with death several years later.

So for me, my sister and my mother both passed away quite close to each other. . .

And then I got diagnosed with blood cancer shortly after that. And I think those three things were all, they all got me very close and personal with death. And I didn't know how to, I didn't know how to handle that proximity to death as a reality. And that really it is a part of my life rather than something separate from it (Michael).

Michael described his encounter with death as “close and personal” and named the “proximity” as making death more real for him, which is similar to Jessica when she spoke about her shock at death. He also described that this experience shifted his perception from a “relative concept” to something that is now a part of his life, integrated and not separate from his conscious awareness, and that death is a close reality for him as well, having had the cancer diagnosis.

Wendy described the inevitability of having to face her own death through a cancer diagnosis as well.

It's about . . . deeply accepting the inevitability of death . . . I had a cancer diagnosis . . . three years ago . . . I had surgery, two surgeries chemo, three months of chemotherapy and 30 days of, you know, radiation. And used that, you know, that even though the intent of my treatment I did, when you fill in the form, you know, accepting the treatment, I did tick the cure box. So that was sort of the, the expectation was that I would be cured. And I was thankful. So even that process, though, just opened so many doors for meditation. You know, like again, impermanence, the, the, the inevitability of death (Wendy).

Wendy highlighted that meditating on death is about deeply accepting its inevitability, yet there is a part of her that ‘ticked the cure’ box, perhaps in attempt to delay the moment of

death, and avoiding its acceptance. She noted this insight and linked it to the need to take it to her meditation, as an opportunity to reflect on her relationship with death further.

In a slight divergence to the above narratives, Chris, now a practicing Buddhist, described early life adversity and threats of death, as a gateway to get close and personal with death on purpose. He spoke about a time, when he was a boy and he and his mother sought refuge from his abusive father.

Another memory I have is in a house where he had found us, and he was outside the house, and he was yelling inside along the lines, you know, I'm going to kill you. I'm gonna shoot you. I got a gun. And, and I could sense that my mother was afraid in fear. And I said, don't worry, mom, I'll catch the bullet (Chris).

It is notable, that his account Chris sets himself apart from his mother who might be in fear of death, as not having the fear of death himself. In his wanting to protect her, Chris described this mentality as being almost 'bullet proof' in the face of possible death. This is in parallel to Michael's feeling "ten foot tall and indestructible" earlier in life. Chris continued to explain how he sought the contrast between being alive and the imminent possibilities of death as way to reveal and resolve an existential quest for meaning and purpose.

My whole life had been life and death experiences. I was an extreme athlete, extreme sports athlete earlier on in my life. So, I used to seek near death experiences because not only did it give me a sense of being alive, but I always had this existential quest of my life. So I had to, I was searching for the answer as to why humans are the way that they are. So I had to look under every rock and go to every extreme and so I didn't have a fear of death the way that most people do (Chris).

Somewhat similar, Gerard, now a Buddhist monk and teacher, recalls his reflections on death earlier in life as a gateway for meaning making and as a gateway to live a more meaningful life from a young age.

I've always been interested in the idea of death. And death has always been very kind of central to the way I have been kind of directing and thinking about life, because it became fairly clear to me fairly early on. I can't remember exactly what age, maybe early 20s or something. That death kind of sets a very clear, a very clear frame, in a sense, for life and it makes life more meaningful when you see it in light of death (Gerard).

Challenging Conditioning

The subtheme of *challenging (Western) conditioning* was particularly prominent across participants' accounts. This theme had permeated the texts, as participants saw it as important to contrast the Western society's constructs around death with other cultures and religions such as Buddhism. This was accompanied by an element of frustration, and perhaps feelings of being somewhat deceived by conditioning of the West.

Jeremy, who had participated in a death meditation workshop as part of a compassion meditation series, described his first death meditation experience as follows.

And for some, it was very intense, you know, just confronting death, especially in the West. We grow up kind of in fear of death. I mean, you see it on all the TV shows and movies. It's just like graveyards are scary places full of skeletons and ghouls and monsters and so, you know, from a very early age, we're kind of imbued with this idea that death is scary. And in addition to that, we hide it away or, you know, put makeup on the dead people and try to make them look as, I guess, alive or real as possible.

Whereas in a lot of the eastern cultures, you know, and I've spent some time in Nepal

when I was 19 or 20. I spent a summer there and, you know, had the opportunity to go down to the cremation areas where they do all the cremations along the riverbed. And so, you know, death, there is, is a much different experience (Jeremy).

Jeremy highlighted the fallacy of hiding the reality of death and pointed to the conditioning of fearful responses when it comes to the topic of death in the “West”. Not only he distinguishes the differences between East and West, but he also distinguishes himself from the others in his group, due to his exposure to other perspective and traditions around death.

Wendy spoke further about her frustration around the fallacy that death is not ‘real’.

I think also in the West, we're not, you know, we're not taught to analyse terribly much, I think, these days . . . How we, you know, analyse or examine the fact that we've become a very life sustaining society. You know, there is so much that we are, again, really enculturated that everything is about long life with some presumption that, that will apply to us, even though the evidence actually is totally to the contrary. You know, there is nothing that suggests that we're going to have a long life, not a thing (Wendy).

It is of note, that both Wendy and Jeremy are using the collective, ‘we’ language when speaking about the seemingly erroneous assumptions about death. In some ways they are also including themselves in the collective misconceptions around death yet distinguish themselves in a drive to change the narrative and help others to do so as well. Wendy took this further, as she spoke about challenging her conditioning that death is ‘ugly’. Through her practice she invites a possibility of a different way of seeing death.

We don't like to go to ugly things, you know. And that's a conditioned ugly, not an inherent ugly. And that's what I, that's why I like doing it, because I'm trying to just

keep working on diminishing this conditioned idea that death is ugly and to be constantly pushing away, you know (Wendy).

Michael challenged the construct of death as “a problem to be solved” and pointed to the idea of using it as a “teacher”. He linked it to the current political climate and conflicts that are divorced from what he perceived as “wisdom of death”. In a way, Michael sees death as a solution to problems, not a problem in itself.

In our culture, we've kind of made death more of a problem to be solved or something that we've, we've got a solution for through religion or something like that . . . This is about understanding death and seeing it as a teacher and not a problem to be solved, but a part of life . . . And because of our culture and divorcing ourselves from death, seeing it as a problem, seeing it as not to be spoken about, you know, hiding it under the rug. We don't get to have the wisdom that death brings to life. Like, look at all the wars that are happening. Geez, if we had more wisdom around death. I think a lot of those wouldn't be happening (Michael).

Chris referred to his challenging of conditioning as being a part of his search for authenticity. He found authenticity in Buddhism, as opposed to Christianity.

What I liked about Buddhism was that it was more true to my understanding, which is that I don't want to be conditioned, full stop. Let me unravel the writing that I've taken in from eating from this tree of knowledge, good and evil. And, you know be firm and clear and okay with just being in an undefined space (Chris).

Jeremy echoed this in his challenge of the misappropriation of Eastern concepts in the capitalist Western society by describing how his parents approached meditation. He distinguished himself and his values from his parents'. Jeremy explained how with the adoption of Buddhism and meditation in the West, the depth of the teachings can be missed.

And, it was, it's kind of weird because on the other side, my parents are extremely business oriented, and so they would often use a lot of those spiritual practices to actually enhance their business, which is a very Americanized way of looking at, oh, how can meditation, how can I use meditation, right, to, to kind of make more money? Versus how can I use meditation to actually relieve the suffering inside of me and others. Which I think is more how it was originally intended was kind of, you know, this path to enlightenment per se or deep, deepened awareness or deepened understanding of the sense of self (Jeremy).

Jessica spoke about wanting more openness around the topic of death, as she described a sense of loneliness in her difference from others and highlighted her connection to and feeling understood by Buddhism.

And I've tried to talk to my friends and family about death and all of this, but a lot of people are quite uncomfortable with confronting their own, or they'll confront it in a very jokey kind of sense, you know, and, and very dismissive kind of approach to it, you know. Whereas yeah, like I was saying before, like in Tibet, there's just this, a constant awareness that's what it is. And I think it's because, it's through the teachings and everything too and, you know, one of the core beliefs of Buddhism is the impermanence of all things (Jessica).

Existential Crisis as Pathway to Healing

Most participants described experiencing struggles with mental health and lifestyle prior to engaging in death meditation. Some of their mental health difficulties resulted directly from confronting death. Michael described how his connection to Buddhism, meditation and death meditation provided a pathway to healing after his experience.

I didn't know how to handle that proximity to death as a reality. And it really is part of my life rather than something separate from it. And so, I had a nervous breakdown, and I ended up, ended up in an institution for a little while. Yeah, that's where I came to meditation in general. It had always been something my mother was very involved in meditation, but I hadn't. I dabbled in it, but I really kind of came to it then. It's almost like I've heard it said, like, often meditation comes when there's literally nowhere else to go but inside (Michael).

From his account, despite being familiar with meditation, it was not until he could no longer cope with the mental and emotional difficulties precipitated and perpetuated by his proximity to death, that he engaged in the practice.

Similarly, Jessica, despite being familiar with Buddhism, did not approach death meditation until after her traumatic near-death experience. Her comments demonstrate depth and the pain of her trauma, as well as fear. Jessica's pathway to healing was not straight forward, as she pointed to the length of time it had taken her to confront it in counselling. Like Michael, it was only when "there was literally nowhere else to go" (Michael), that she reconnected with the practice at advice of her counsellor.

The death meditation specifically came after I had had my near-death experience, which was when I was 21 and I was traveling in Nepal at the time whitewater rafting. I fell out of the boat and got sucked under it, and almost drowned and had a very traumatic near-death experience. Not one of the positive bright white lights and happiness. It was very negative, dark, awful, awful, awful experience. That left me quite traumatised for quite a while. And, when I finally started going to counselling for it, because it took me a few years to really, even after that event, it took me a few years to really even be able to confront the fact that I was traumatised and that I had

had this very negative experience and put a label on it and then seek help for it. . .

And the counsellor who I spoke to encouraged me to revisit Buddhism (Jessica).

Chris described his journey to Buddhism and death meditation was through depression and an existential struggle. Chris challenged the standards of success, “all the stuff you’re supposed to want”, by pointing out that achieving these did not improve his depression or feelings of being “crazy”. He pointed to a sense of relief after connecting with Buddhism. Chris spoke about a “spiritual awakening” and “psychological deaths” as experiences of realisation and shedding identification with “mask” and worldviews that no longer served him. In this, he also described his depression as a motivator to resolution of the existential crisis.

And I went and did the whole degree thing. I got an electrical engineering degree, a law degree, got the little, you know, the, the measures of success in the human world. Started my own business. Had at age 30, I had a couple of homes, passive income, all the stuff you're supposed to want. But I was still depressed, in and out with these bouts of depression. And I had my first spiritual awakening at 30. And in that sense, I'll call it, that's my first death - psychological death. And I came across a Buddhist worldview, Theravada and Buddhist worldview, Noble Eightfold Path. And it allowed me to confirm that I wasn't the only one with these sorts of thoughts and that I wasn't crazy. And that it was okay being in that undefined state and recognizing that I'm putting on masks (Chris).

Transformation

Most participants spoke in detail about the effects that death meditation had for them.

Identified subthemes included: (2a) *time is of the essence – intentional living*; (2b)

mindfulness in relationships; (2c) fear – insight in discomfort; (2d) transforming the mind – transforming suffering, (2e) letting go; and (2f) reframing death.

Time is of the Essence – “Intentional living”

All participants reported re-connecting with values and what they perceived as important in their lives following their engagement in death meditation practice. Some spoke about making significant life changes. Jeremy’s account captures how getting closer to awareness of death and its uncertainty empowered his “intentional living”. Jeremy described living with more gratitude for this life and each present moment, which helps with re-evaluation of actions and reframing situations.

The meditation really helps hone in to the fact that, well, you don't know if on your way to work in the morning, you're not going to get hit by another car and you know, that's it. You know, you don't know if you're going to even wake up from going to sleep that night before. And it really kind of empowers that intentional living or being, you know, being in tune with just how precious life is and how it at any moment, you know, it also helps to give perspective to, is this actually the way that I want to be acting right now? (Jeremy)

Gerard spoke about re-evaluating life and identifying whether he was living it in the most “optimal” way. Death meditation evoked a type of “positive anxiety” and urgency for him, that helped to re-direct some of the aspects of his living.

I kind of got this feeling that actually, I wasn't living my life optimally in the best possible way. I was spending too much time doing theoretical things or writing things or something like that . . . there was too many, still too many desires maybe, or issues or problems in my life that I hadn't really let go of. And I, you know, so for me, it was actually [pauses] Yes, it is a bit, a little bit unpleasant when you feel a little bit of

anxiety. It's never nice to have anxiety. But it was a, but it was positive for me in the sense that it just reminded me of what I was going to have to do (Gerard).

Chris also pointed to a sense of urgency, and that “time is of the essence”. Chris described how reconnecting with his values brought him to redirecting his actions toward higher goals. With the use of metaphors such as “flowering” Chris described his life as an evolving and “creative arena”.

So, time is of the essence, let me not waste time. But there's another aspect that definitely, anytime I do death meditation, I feel this other aspect of urgency, which is I'll say, seriousness is important, like taking life in every moment serious. So, in the first sense, maybe, you know, this urgency will make it so that will start evaluating and putting more focus into life. But this other aspect of urgency is, you know, let me be conscious of when I catch myself sitting around doing mindless entertainment, rubbish, you know, or going down paths that aren't ultimately important . . . what's the highest, what's the highest goal or value that I, that I need to use to guide my first steps into this flowering, vague creative arena? (Chris)

Chris spoke about connecting with his purpose, a purpose for existence, something that was not yet available to him prior to engaging in the practice.

It really stems to this whole ultimately, it stems from death experience and from death meditation because it's like there's a purpose why I exist while I exist, you know, whatever state the ‘I’ is conventionally, I exist for a purpose and a reason. Let me always be conscious of identifying what that purpose and reason is, and fulfilling that purpose and reason, because that's what existence wants from me. (Chris).

Jessica recalled making significant changes in her life and taking risks she was afraid to take prior to confronting her mortality through the near-death experience first and then through death meditation.

Every single day I would turn my mind to think about death and think about my own death, and that the time of death was uncertain, and reinforce again to myself that there's no other time to do these things that are important to me and that I need to do. And that's also part of what spurred me to go and move to Tibet was because that's something I had always wanted to do . . . You know, so many things that I'd been afraid to do. But then literally, when you've been confronted with death, it's like, well, what else is there to fear? You know, death is the ultimate, fear (Jessica).

Jessica described a sense of urgency that gave her energy, drive and inspiration, moving her toward achieving her dreams and becoming in a way, fearless. However, this sense of urgency and fearlessness had a shadow side. Jessica described that ongoing reflection on such aspects as time of death is uncertain and pushing herself toward achieving all the important things in life had the opposite effect of what Gerard referred to as “positive anxiety”. In fact, long term, the sense of urgency had a significant negative impact on her mental and physical health.

And I just had this nonstop sense of urgency that I, anything I wanted to do had to be done now before I died again, because I never know when that might happen. And that was quite extreme for a few years. To the point where then I went back to counselling to deal with that, because it was to the extreme where I was putting intense amounts of pressure on myself to achieve all of these things . . . I would set myself these intense like goals and be like, I want to achieve all of these things within the next month, and I want to achieve all of these things within the next six months.

And this really like just a lot of pressure on myself. And I would go, go, go, go, go.

And then I would burn out and then I would go, go, go, go. And then I would burn out and it became quite unhealthy (Jessica).

Michael had a different perspective around feeling the need to redirect his life or make changes. He spoke about becoming more “precise in life”, without “giving it all up”. In his narrative he referred to the concept of the “wisdom of death” as a guide to connect to a “gift” or perhaps a purpose, but in a gentle and measured way.

It was about just becoming a lot more precise about what I was doing in the horizontal realm and what my true gift was. And so I just had to kind of realign things a little bit. So, and I think that's different. That's death wisdom coming in and saying, you know, don't give all that up, but maybe you can look at being a bit more specific.

Mindfulness in Relationships

Whilst describing a drive toward more precise and authentic living, all participants also reported that death meditation highlighted the importance of relationships and the quality of relationships in their lives. This subsequently influenced the way they connected and interacted with others. For example, Gerard spoke about his daily death contemplation and how it affects the way he presents with others in his daily interactions. He connected the positive qualities of kindness and compassion as important shared values in “society”.

And then I go out and I meet people, and then I tend to be more kind, more caring, more understanding, more listening, having more of those qualities that we would generally regard as good in our society (Gerard).

Michael took this further by pointing to the awareness of shared impermanence as a motivator to be more present and precise about the quality of his communication and

interaction with others. He linked it to the shared experience with the researcher, by grounding it in the experience of the interview.

Like for me, even down to individual conversations, you know, how can I really meet that person in the moment? Because, you know, if I bring in death wisdom, it's like, you know, how often am I going to get the chance to speak to, particularly in a situation like you and I speaking? I mean, we've come together through a very, you're doing something very specific, and I happen to have had certain experiences which are helpful in that. But once we put the phone down, you know, it may be the last time we see each other alive. And why not honour that, instead of just pretending that that reality doesn't exist (Michael).

Jessica explained that death meditation helped her reflect on her own attachments and impermanence, however, it was her attachment to her family that she found the most important and most difficult to let go off.

You know, like, you can talk about all this attachment to money or material things or whatever, but it's always family. That's the hardest thing to say goodbye to at the end. That's always the part that, again, part of the practice, too, was realizing, like, you know, it's not just me that's going to die, but it's going to be my parents, so it's going to be my loved ones. And being able to direct my practice in that kind of way to, I mean, obviously I'm still not super comfortable with my parents dying any time soon, but, you know, to again realize that that is the reality that's, that happens for everyone and it's that universal. You're born and you die (Jessica).

Jeremy described how connecting to the importance of his relationship with his grandmother and the awareness of her approaching death not only improved his ability to be more present with her, but also helped with his recovery from substance abuse.

I was self-medicating to numb all the pain. But in doing so, that was cutting me off from actually being present with the ones I loved . . . And so, one example of the impact of this meditation was that, I was able, it helped me, actually not abuse substances anymore. And so, I was able to go home for that Christmas, you know, break and be clean and be fully present with my grandma because I realized that might be her last Christmas with us (Jeremy).

Jeremy also went on to explaining that meditating on mortality has assisted him with becoming more aware of his conduct that may have been hurtful to others and led him to mend some of these relationships. There is a felt sense of personal growth in the way he described this.

I think one of the biggest things that triggered for me was going and being accountable for all the wrong doings I had done. . . that was a big thing where I started to take ownership of mistakes I had made and reaching out to some people that I had hurt in the past and kind of mending that relationship if I could, or if I felt comfortable doing that.

Fear – Insight in Discomfort

Most participants reflected on death meditation experience as going toward and through fear. There appeared to be a shared understanding in that confronting death in meditation would evoke fear and aversion, and that the meditation was a way of working with that. Although, overall, there also appeared a shared understanding that death meditation is not about removing the fear of death but becoming more comfortable with it.

Jessica described multiple ways of meditating on death through visualisation and how this was a way of confronting her fear of death initially, and then becoming more comfortable with the reality of letting go, and the ultimate dissolution of her physical body and everything

that was ever important to her. However, she also pointed to the fact that her fear of dying persisted, despite this.

Doing all of these visualizations of myself dying was also a part of confronting that. But in a way that was so different, I never, I never, you know, imagined myself, visualize myself drowning again because that was too close to home. But it was still to do with watching my body disappear and watching my life disappear. And you know, it being the end and being comfortable with that, and being comfortable with the reality that it was going to happen, and also the reality that it could happen at any time (Jessica).

Wendy described her practice as being a way of familiarising herself with what death may feel like and working toward reducing her fear and aversion to the idea of dying. Wendy explained that by inviting her responses to the process of dying, intentionally, in her meditation, she became aware of the types of responses that will come up when she does go through the process of dying in her life. And if she had some practice at managing these, it is likely that the dying process for her would be more familiar, less distressing and more peaceful. Being peaceful at the time of death is highly important to her personally, in her role as a palliative counsellor with her clients and as a Buddhist.

So there is a component in that where you, you actually meditate on the death process. But much more about reducing my fear, you know, reducing my attachment and aversion, my attachment to this life, my aversion to death. So that's where I've put most of my energy in terms of meditating on death is, you know, like, I meditate on scenarios where I might die, you know, and, and even though it's all imagination and of course, that still may not be how it happens, you know. The more for me, what I've come to understand through my meditation is the more that you familiarize yourself

with something, whatever it is, the better you get at that. Or you understand it, the more you, you know, the more responses you give yourself (Wendy).

Chris described going toward fear as means to undo, or perhaps challenge automated responses to fear, and use that as a doorway for deeper insight and self-development. Going toward fear seems to be his intrinsic quality that he is aware of.

So it really for me, it really centres around this notion of existence and death. And so, I focus on fear a lot to the point where I've had to be careful because, I learned to go towards fear at an early age. I learned to go towards fear even before I became spiritual as a way of getting through my conditioning. So, I started seeing fear as, instead of the automatic response, which is to run and go away, I would see that as a doorway to truth or whatever I was looking to unlock . . . When I approached death meditation, it's because I realized that the only, the only place left to look is in what I'm not . . . I started, I started going through the doors where there was fear and resistance (Chris).

Michael shared that his experience of death meditation was linked to reframing the notion of fear itself. Michael pointed to how reframing fear in any situation, including death meditation, is a gateway to becoming conscious of what it could be linked to. He described fear as an invitation to look further in order to connect with an emotion or perhaps an understanding of why something could be of great importance. In this instance, the fear of loss of his son pointed to his love for him. He describes fear as a signal of approaching something that could be precious.

If I'm afraid of something, it's because I'm close to something that's important to me, right? If I'm afraid of something happening to my son, it's because I love him. So how can we reframe fear as actually me being close to something that's important. . . And I

think death meditation invites you to come in closer contact with that fear and then move through it, not dissolve the fear, if that makes sense (Michael).

Most participants described going toward fear and making insights that were not directly available or anticipated by the conscious mind. Wendy connected facing discomfort in meditation, exploring an aversion or fear, to be an invitation for her to address it, or if the discomfort was too strong, then to come back to it, because there is something behind the discomfort that was worth exploring.

I did feel this discomfort, this anxiety, which was, which was uncomfortable, but that also gave me food to delve even further about what that was about . . . I never see it as negative because it gives me more to look at, you know. It gives me more to watch. And if I can't do that, you know, if for something, something is so strong and my aversion or my fear or whatever it is, my ego is too strong and I end the meditation, I will always come back to it again . . . but so whenever I experience sort of negativity or physical discomfort or emotional or psychological discomfort, I always know it's ego, you know. So I never see it as a negative thing (Wendy).

In a slight divergence, Gerard perceived that if the fear of death felt intense, then one is not living in line with their values, or what one considers a good life. For him, checking the intensity of fear was a way of gauging or checking in on whether one feels they are on the right track.

I don't know if you have noticed, but you know, the fear of death is much stronger when you don't live well. The moment you live well, the moment you live, actually, the fear of death tends to subside a lot. And it's the same thing when you do death meditation. If you are ready to die now, it's usually at a time when you feel quite good about yourself. Yeah. You feel okay. I'm... You know, I'm a good person. I'm living

my life to the best of my ability. And you feel kind of have a warm feeling inside of yourself about yourself. That is when death does not seem like an insuperable obstacle (Gerard).

Transforming the Mind – Transforming Suffering

All participants described a greater awareness of their thoughts and feelings, and the effect these can have on their behaviour. They spoke about transforming their mental and emotional states to become more peaceful and calm. For example, Jeremy spoke about how reflection on impermanence and mortality helped him to work on transforming anger, particularly when in relationship with others.

You know, so in terms of like anger rising up or disagreements or things like that, it's like, well, do I want to be right or do I want to actually create something, is kind of, one way to think about it. You know, do I, do I want to be right or do I want to be loved, you know, or do I want to feel love? And not in a way of just bowing down to anyone else and, you know, kind of saying like, oh, you're right all the time. But more in tune to, is this actually worth getting angry over? Is this worth bringing kind of negative energy into the space, or is there another avenue where I can actually bring positivity into it? (Jeremy)

Chris described developing an ability to observe his automated reactions and change them. He spoke about developing an awareness of the process of “donning on the mask” and acting out in a role that may not be in line with his authentic self, but a conditioned self. In this excerpt he explained how “dying to a story” that his mind had created, ending a “drama” that he might feel caught up in, resulted in a reconnection with the authenticity of what he described as a “deathless” self.

There's going to be times where you're not quite on guard and you get caught up in some automated behaviour pattern, but you catch yourself and you're like, oh, wow, I, I got caught up with some ego again, you know? And it's again at that moment it's death meditation. It's like, wait, that's not me. Let me die to this position that I just took. Let me die to this, you know, sense of this is really this little drama. Human drama is really important. It's not important. I can die to that. I can get back to the deathless (Chris).

Wendy spoke about her work on challenging the 'ego', the automated reactions. In her understanding the ego is the part that contributes to feelings of attachment or aversion, pleasure or suffering in her life. Through meditation she connects with the concept that her suffering, and human suffering in general, is about mental and emotional states, rather than physical pain.

I've imagined, you know, in my meditation . . . what it might be like to be an antelope killed by a lion . . . I think it's so different to us as humans because they don't have the thought process. You know, they don't have that extent of narrative and the emotional component to that. So meditating on death has made me much more aware of all of these sort of interrelationships and how our thoughts and our emotions and our feelings just exacerbate everything, you know? Whether that's, you know, in what we might label a positive way or a negative, a negative way. But it's just given me so much more information about my own ego. (Wendy).

Gerard described death meditation as having a "purifying effect on the mind" and his ability to become generally mindful and more present. He explained that for him death meditation has a centring effect. For him, mindfulness is a byproduct achieved after death

meditation, and is a semi-conscious process, that occurs outside of his direct intentional awareness.

It happens automatically because it's like the mind understands by itself that it's crazy to desire all this stuff if you're going to die. So, it kind of happens as a, as a part of just the contemplation then. And that's beautiful because it makes you peaceful . . .

And you gain things like mindfulness, for example. It ties in very, very nicely with the idea of mindfulness, because mindfulness is precisely the ability to be present with things. So, death contemplation is a very powerful way of bringing about mindfulness (Gerard).

Letting Go

Most participants reflected on the process of working on *letting go* of attachment to the physical body, relationships, ideas, identities and roles as part of their death meditation. Jessica described a feeling of release as result. She explained that this occurred in the context of working through letting go of attachments to material aspects of living, such as money, the physical body, as well as mental preoccupations, such as ideas of the self in the of future.

Well, first of all, like non-attachment to your body and non-attachment to all of these material things around you, which is a big obstacle on the path. You know, if you're so attached to this and that and money and whatever, then you're less likely to follow the spiritual path. But also, non-attachment to your own physical self and your ego and everything. And meditation on death really cuts through all of that. It's about cutting through all of your attachments. It's about releasing all of your expectations as well of, 'I'm going to do this thing and this thing and this' (Jessica).

She continued to describe how confronting visualisations of dying through burning of her body connected her to feelings of “freshness” after the meditation. It is as if the visualisation

of disintegration of her physical self, brought on a felt sense of renewal. She also noted that counselling helped her to achieve this along with the meditation.

Watching my body just completely fall away into ash. And yeah, I always felt afterwards so fresh. Which was, I think also because I was simultaneously doing this counselling to help work through the near-death experience and the trauma of that . . . But it was still to do with watching my body disappear and watching my life disappear. And you know, it being the end and being comfortable with that, and being comfortable with the reality that it was going to happen, and also the reality that it could happen at any time (Jessica).

Michael described a feeling of ease that he cultivated through meditation of death practice. This is coupled with his reframing of death and a sense of a “burden” being lifted off his shoulders.

More generally, there's just an ease that comes over, comes over me. It's like there's a, there's a, there's a burden that's lifted from my shoulders. It's like, oh, I don't have to like, I don't see death as a problem anymore (Michael).

He describes that death contemplation at times of anxiety and stress can alleviate them and bring an “immediate sense of expansion and ease”. He spoke about death anxiety and connected such anxiety to other types of endings (Michael).

A lot of anxiety around, you know, around any deaths, and everything's dying all around you. Right? So you're walking around with a lot of anxiety, and I think just these little moments or these little opportunities to really go straight into it through a death meditation, it's just there's an immediate sense of expansion and ease that comes over you. And a lessening of that, that anxiousness and that worry (Michael).

Gerard also spoke about a sense of expansion following his death meditation. He described the meditation as a pathway to letting go of confinement of history, thoughts, feelings, body, pressures, roles and identities that one may take on in life. In some way he struggles to put words to describe this feeling of “expanded consciousness”. This kind of freedom felt beyond regular sensory perceptions that could be described accurately in words.

And that is a very beautiful thing, because our identity is this confinement that confines us to some, you know, being which is kind of determined by society and by people around us. The moment you let go of that, actually, you kind of expand, you become something much more, much more... I was going to say ineffable, but the word ineffable is wrong. It's more like you can't really pin yourself down anymore. You become this expanded consciousness, an expanded mind which is no longer trapped by that identity, by that body, by that past, by that history that you have had. And so you become something more. It's a beautiful feeling when you can let go of some of our identity in this world (Gerard).

He went on to describe this feeling a “beautiful emptiness”.

And it leaves you in this beautiful, empty kind of space. Emptiness is beautiful. People are afraid of empty emptiness. Actually, it's a very beautiful thing when there is no thinking in the mind. The sense of identity is lost to a large extent. . . There's a sense of kind of expansiveness of the mind. It's actually very beautiful (Gerard).

Jeremy also spoke about letting go, but in a different context. He described death meditation as having a “profound” liberating effect from substance abuse. Through reconnecting with what was important for him, he found strength and grounding, which helped him to manage peer pressure when returning to university, after his first death meditation practice.

I was able to go back to uni and, you know, all my, a lot of my friends were still in that space of kind of substance abuse, and I was able to stay strong enough and grounded enough in, in kind of how profound this was for me that I wasn't put off balance by, you know, oh, come hang out and we need to be around you and, and, you know. It was like I was able to still be around people without abusing the substances, which for me was huge because, I mean, I fully abused them throughout my uni days (Jeremy).

Reframing Death

A thread of *reframing* of the construct of *death* was evident across most accounts. The main commonalities were around there being more than just a death of a physical body. Michael (and also Chris) described all meditations as meditations on death.

I realised that all meditations are actually a meditation on death, you know. And that was the realization I started to have. Like, if I'm asked to, to pay attention to what's going on in my body, even a body scan is really just, you know, watching the lights go out to some degree (Michael).

Chris described facing “psychological deaths” throughout his lifetime. Psychological deaths for him were the shedding of conditioning, “shedding” of identity layers and automated ways of thinking and responding. He described shedding the layers of identity and roles he held onto as deaths, which then led to being “reborn” again in a different form. It is of note that he used a collective ‘we’ in his account, which could have been a way of feeling connected with others in their existential struggles, with the assumption that the struggle is universal.

I started viewing it as a psychological death, and I started viewing it as something that one can choose . . . So this death meditation allows me to overcome the fear that is

associated with this idea of dying. Recognizing that no, psychological death doesn't mean permanent death. It doesn't mean you'll cease to exist. You'll be reborn again in another way. It's you know, it's the tree drops the seed and you'll, you'll blossom again. You'll shed a layer of skin or you'll shed a condition, a layer of conditioning (Chris).

Wendy linked meditation on death to meditation on endings, and that “everything that meets must part”. She described that death is all around, in nature and in relationships. She challenged the concept of death as something negative, by describing it as beautiful and “infinite”.

And so death meditation for me, impermanence and death, you know, is really just this amazing way. . . even just going to the ocean, which is my happy place, you know, to go and sit and watch the ocean, the movement of the ocean, recognizing that every wave that touches the ocean, every wave that touches the shore, you know, is like a death of that wave. It goes out and it comes back. And this is like everything, you know, every crumpled leaf, every leaf that falls to the ground, you know, is death. And, you know, like every, we have a saying in Buddhism is that everything that meets must part. You know, and that parting is a death, you know, like anything that comes to a conclusion is sort of really a death. But we've so connotated this word to make it such a negative, you know, thing. So, yeah, you know, like meditating on death is almost like an infinite (Wendy).

Michael spoke about his relationship to death being transformed to that of “love, not hate”. His reframing comes from focusing on the beauty of the patterns of life and death, and seeing it as a “dance” of beginnings and endings. He speaks about reframing his relationship with death, reframing it from a “battle” to a “relationship of love”.

I'm like, I can have cancer and I have a relationship of love, not hate. And that's come through a clearer understanding of death and the patterns of life and the rhythm of life. Because, and it disturbs me when I see in the world, you know, we talk about hashtag fuck cancer or battle cancer. And I'm like, if you set it up as a battle against death, you're going to lose every single time. So why not see it as a, as a, as a dance or as something that you it's an entwinement an entanglement. And it's a relationship which, like every relationship, is based on love. Not fear, not hate, not battle (Michael).

Jessica's account highlighted the polarity between the terror of death and its beauty. She attended sky burials in Tibet as part of her death meditation practice. She described this practice as "awful" yet "beautiful". The tension between life and death, the attachment to self and letting go, awful and beautiful – through that tension death meditation had the transformative impact on her.

They [Tibetans] don't shy away from death. It's very... It's there. It's ever present in your life, it's, you know, you can see sky burials happening as you drive through the valleys. You know, you see the vultures circling and you know that there's one happening. And, yeah, it's an amazing very intense practice. The smell is fucking awful. That's something that was quite confronting when I first went to one. The smell of rotting flesh is not pleasant. But again, it's part of that experience of letting go of attachment to the self . . . I've always found it a really beautiful practice, you know, thinking, like thinking about death and visiting the sky burial sites and it's felt like a really important practice (Jessica).

“Controlled Losing of the Mind”

All participants reflected on the perceived potency of death meditation practice, its confronting nature as well as importance of timing, frequency and readiness. Their reflections formed the last group experiential theme, *controlled losing of the mind*. The following subthemes were identified: (3a) *sensory immersion*; (3b) *potent medicine*; and (3c) *emotional readiness*.

Sensory Immersion

Some participants described attending environments where death was present as part of their practice. Chris reported attending gravesites to meditate there. Wendy described attending char grounds whilst in training in Tibet. Jessica attended Tibetan sky burials. Most participants also spoke about engaging in visualisation of confronting images when meditating on scenarios of their own death. Some of these appeared to be of intense and explicit nature. For example, Jessica commenced her practice by following the Buddhist texts, before making the trip to Tibet and attending sky burials in person. She described her practice as highly vivid, and aimed at evoking all senses, such as touch, smell.

... so my first practice was in my room in Wellington at university, just before I'd been to a sky burial, before I'd experienced that, it was visualisation, which is what they talk you through, is they talk you through visualizing yourself as a corpse, decomposing and visualizing the birds picking away at your corpse and taking it away piece by piece, and literally visualizing the parts of you that haven't been taken rotting away and decomposing, and the smells and the sounds of the of the claws against your bones and the bones being bleached by the sun (Jessica).

... [I] was imagining my body being on fire, like those people had been, and seeing my flesh melting away and seeing it lifting away and charring. And I would do this

while looking at myself in the mirror, sitting on the ground, looking at myself in the mirror and watching (Jessica).

Wendy echoed this subtheme by reflecting on the reactions of others when she told them about meditating on different scenarios of dying, whether it is in a gruesome unpredictable accident, or a more benign way. “You know, if I said to people those sorts of things that I meditate on, you know, as I said, people would think I was absolutely nuts and, you know, probably even warped “(Wendy). However, for her this practice is a way to confront her internal process and challenge herself.

But if I've had some mental preparation, even if just in my imagination, maybe that will help me to deal with it, you know, and to recognize attachment to life, aversion to death and all of these sorts of things that contribute to our suffering, you know, and keep us stuck in a dualistic, you know, state of mind (Wendy).

She later added, “Whether it helps me at the time of death remains to be seen. But what it does is that it helps me in, in my life because it helps me not to be distressed and disturbed” (Wendy). Despite her dedication to Buddhism, she is challenging her views on the death process. She links to the importance of this practice to helping her with coping now, in this life. She also describes her death meditation as disturbing but part of preparation in this life or another.

Potent Medicine

Most participants described that frequency and intensity of this practice can vary. There appeared to be a general convergence in a sense that the less intense the practice, such as a short ritual of death contemplation or ‘memento mori’ (remembering death), the more frequently they would engage in it. They described longer and more intense forms of practice (such as the Eight Stage of Dying meditation or the char ground visualisations) as less

frequent, months and years apart. For example, Michael described death meditation practice as “medicine”, linking it to the concept of “microdosing”, taking smaller doses more frequently, as being most effective for him.

So death meditation is like microdosing. It's like if we microdose death in moments through a meditation, then we get to operate in a much wider view with a different interpretation of death. So it's like a little bit equals a lot . . . And that's why I think a little microdose is good. I like having a sacred moment every day when I, when I, that stoic term *memento mori*, when I just do that, you know. Yeah. It's not every second of every day (Michael).

Gerard also described having a daily ritual of reflecting on death, during his morning walk. However, he highlighted that the reflection is most effective when the imminence of death is imagined as more real and closer in time, than just a hypothetical reminder that death may come at some point.

Okay, I might be dead within a year and see how that, what that feels like. And then you bring it closer. Maybe the snake will not bite me in a year. Maybe it will bite me next month. Maybe next week. Right. And you bring it closer like this. And you bring it as close as you possibly can. Because the closer it is in time, the more powerful the effect is of that idea of this death contemplation (Gerard).

In opposition to ‘microdosing’, Jessica described instances in her practice when perhaps the dose was too frequent, too large or too potent, “I practiced quite regularly for a good few months with that kind of meditation many times a week. Like 3 to 4 times a week”. Her account highlighted the importance of timing and intensity, as well as need for external support with death meditation. Jessica spoke about her sense of feeling alone in her drive to confront death. She also appeared to express a sense of regret in going toward it on her own

with such intensity and without a teacher. As she described earlier, one of the negative effects of this meditation for her, long-term, was increase in anxiety around the urgency of living. She also wondered if the anxiety contributed to the deterioration in her physical health at the time and a diagnosis of an autoimmune disorder.

There were a couple of times early on when I was practicing that I did scare myself with the visualization. It was just quite intense, you know, and I would be a bit shaken afterwards . . . I mean, for a lot of Tibetan Buddhist practice, there are very specific meditations and practices that they say you're actually not allowed to do without a teacher present . . . But yeah, I, I, I couldn't find anyone, at the time, any teachers who were teaching what I needed. And like I said, from reading the book, it just felt like it was what I needed to do. And I didn't want to be stopped. So, Yeah. But I do wonder sometimes, like how different it would have been if I had managed to find a teacher and go through a different kind of channel to reach there, you know? (Jessica)

Jeremy's account highlighted what others did not. He spoke to the potency and effectiveness of death meditation, and that for him, taking his second dose was not as impactful the second time, however still effective.

And having revisited it, you know, the first time I revisited it after probably not having been around it for maybe ten years. It wasn't the same profoundness as the first time I heard it, but it was a deep kind of remembering of the power of the meditation in terms of that intentional living space. And just kind of a check in, is there anything I need to say or do differently? Or is there anything I need to, you know, repair or just do more of? (Jeremy).

Emotional Readiness

Michael, Gerard and Wendy described that the timing and setting of the meditation are of importance. This spoke to their extensive experience with their own practice, but also teaching this practice to others. “And so you want to have a baseline of peace and a baseline of, of mindfulness before you actually do any kind of meditation, even breath meditation”, Gerard explained. Wendy shared that her practice needed to be timed to when she was feeling emotionally and mentally prepared for it.

Often those meditations will just be a weekend thing . . . I would never do it if I'm feeling a bit, you know, if I've had, say, a rough week with my son, say, for example because he stresses me out a lot with his mental illness. I probably wouldn't do it then just simply because one reason I wouldn't do it very well anyway. But also because you know, I don't think it would be a particularly helpful, you know, meditation (Wendy).

Chris highlighted particular importance of readiness. He referred to death meditation practice as “sacred”, as did Michael. Chris described death meditation having profound and challenging effects for him. He attended a second interview with the researcher (at his request) in order to explain this. It demonstrated a felt sense of responsibility for others, who may come into contact with this research or may like to take on the practice of death meditation, and perhaps also wanting to postface his account with a word of caution.

Death meditation is a sacred thing. It's not something like, you know, we come across. Oh, that would be cool to try and do. It's, it's a sacred thing. And I wanted to impart that sacredness to it and give it its proper respect, and also to give a fair warning that, you know, if one isn't ready to lose their mind, then stay away. Really. Then stay away. Because that's the only purpose of it really is to, it's a controlled losing of your

mind. If you're not ready for that, if you're not ready to give up everything that you are and all your stories and your mothers and your fathers and your friends, because they cease to exist when you fall away. Be careful (Chris).

Chapter Five: Discussion

This research aimed to utilise qualitative methodology (IPA) to investigate how individuals who have engaged or are currently engaging in mindfulness of death practice experience it. The research aimed to answer the following questions: What was the participants' motivation for engaging in death meditation practice? What was the experience of the practice like for them? What effects have they observed? What was of significance and what might have been a challenge? What (if any) was the overall impact of this practice on their relationship with the themes of death and dying?

The study represented a first qualitative investigation into mindfulness of death meditation in an Australasian setting. Although there are two international studies that outline some qualitative exploration of experiences of mortality contemplation (Stella, 2016; Wilkus-Stone, 2017), to the researcher's knowledge there are no qualitative studies that specifically analyse experiences of mindfulness of death meditation. Consequently, there appears to be no benchmark to compare participant experiences of this study. Therefore, the following discussion will contextualise key findings within the literature around theoretical frameworks on death and mindfulness, other mindfulness meditation qualitative studies, quantitative data on death meditation and traditional Buddhist literature. This is followed by comments on practical implications. Limitations and suggestions for future research are acknowledged at the end of this chapter.

Pathways to Mindfulness of Death Meditation

Exploration of the individual motivations for beginning mindfulness of death meditation practice revealed that most participants felt highly challenged emotionally and mentally, when faced with their own mortality or death of a loved one. This echoed Becker's (1973) death denial ideas. Becker (1973) suggested that humans have a drive to avoid death,

and the conscious mind's response to death or its prospects is manifested through paralysing fear and anxiety. Similarly, according to the Terror Management Theory (TMT; Greenberg et al., 1986; Solomon et al., 1991; Solomon et al., 2015) the instinctive desire for preservation and continued life creates the potential for paralysing terror. Several participants reflected on how unexpected the *shock of possible death* was for them. This was in the context of facing death after having spent most of their lifetime holding death as an idea, a concept that was unrelated to them, projected in time and put away far in the future, perhaps with the aim of avoiding the existential terror. The problem with being complacent about death, is that when the moment comes, and one is faced with death they could experience feelings of fear and anguish (Gyatso, 2022; Shonin & Gordon, 2014). This was confirmed by the participants in the description of their experience.

According to TMT, being reminded of mortality, should increase people's defensiveness and rigidity around preferred cultural worldviews as a way of protection from terror. What was reported by the participants in this study did not quite align with TMT's propositions, although did not completely disagree with them. Most of the participants felt challenged within the Western context as to how to address the *shock of death*. The challenge was then not about finding a solution in preferred cultural worldviews in search of protection and comfort, but in finding a solution that did not dismiss a certainty that they were facing, a certainty that death would come. The solutions the participants were drawn to appeared to feel authentic and were in line with their personal values, as TMT would suggest. For some, the preferred and most relatable views on death were found in Buddhism. However, it was not in the promise of an afterlife, but in looking at death mindfully, without judgment or conditioned avoidance and aversion alleged as prominent in the West (Burgess, 1993; Gorer, 1955; Kübler-Ross, 1969; Petersen & Seear, 2009; Zimmerman & Rodin, 2004). In their search for authenticity, they have engaged in *challenging* of the *conditioning* of the West and

perceived fallacies surrounding the themes of death and dying, moving toward death acceptance as the Meaning Management Theory (MMT; Wong, 2008) would suggest.

Several participants described experiencing an *existential crisis*, manifesting through mental health struggles such as anxiety, depression or addictions. This essentially served as *pathway to healing*, a pathway to mindfulness meditation and mindfulness of death meditation. Others described existential concerns as being important in the context of planning and living what they considered as a meaningful life. This finding supports basic propositions of MMT, that humans have two primary motivations: (a) to survive and (b) to find the meaning and reason for survival. When life is fraught with struggle and suffering, it will trigger a quest for reasons for living in spite of the pain (Wong, 2008).

According to Yalom (1980), death denial is one of the contributors to psychopathology (e.g. depression, anxiety). However, by mindfully facing the inevitable, one can be enabled and inspired to live authentically and with more meaning (Yalom, 1980). Tacey (2013) compares mental health ailments, such as depression, to initiation; “We might begin to reconceive depression as a meaningful act on the part of the psyche, rather than an unfortunate condition visited upon us from outside” (Tacey, 2013, p. 148). This is in line with the assumptions of depth and Jungian analytical psychologists (Dura-Vila & Dane, 2009; Paris, 2013). The ‘Dark Night of the Soul,’ commonly understood as periods of distress, mental and emotional angst and disillusionment, is not perceived as a pathological phenomenon, but an opportunity for reflection and making changes for a better life (Dura-Vila & Dane, 2009). These ideas have direct links to the Post-Traumatic Growth (PTG; Tedeschi & Calhoun, 2004) literature, where some individuals experience a positive change as result of experiencing significant life struggles. It appears that the practitioners in this study approached mindfulness of death through an existential struggle of some kind. In words

from one of the participants, “often meditation comes when there's literally nowhere else to go but inside” (Michael).

Transformation Effects

All participants reflected on mindfulness of death meditation as transformative. And although they were experienced with mindfulness and meditation in general, the meditation on death held a unique place in their practice. Some participant reiterated the importance of this practice. The participants reported transformations linked to re-orientation toward meaningful living and values, deepening their meta-cognitive abilities, becoming more mindful in relationships with others, expanding and growing through letting go of attachments, and reframing their views on death and endings.

According to Yalom (2008), both conscious and unconscious death anxiety, may undermine our well-being and prevent us from fully engaging in life. Obsession with the fear of death, its avoidance, denial and suppression would use vital psychic and cognitive energy (Yalom, 2008). This energy is better put to use for living a full and meaningful life. Perhaps, by mindfully confronting death in meditation, the participants moved away from the suppression of fears and death or anxiety, as well as conditioned responses of avoidance and aversion. This has freed their attention and psychic energy to be directed toward meaningful living. According to MMT, a sense of meaning and purpose not only offers the best protection against the terrors of life and death but also contributes the most to healing and well-being.

All participants reflected on the impermanence of human bonds and reconnecting with their values in relationships. They reported developing a stronger connection to feelings of gratitude and compassion. This was in line with the findings of Stella's (2016) teaching session, where after contemplating death and mortality participants reported reflecting on the quality of their family dynamics and evaluating relationships. Similarly, participants in the

study by Wilkus-Stone (2017), were interpersonally oriented and reflected on concerns around aging and loss involving their relationships, with the emphasis on the impact that their declining health and death might have on their loved ones.

The results of this study support both TMT's and MMT's ways of understanding the re-orientation toward values in relationships. TMT would suggest that increased focus on close relationships in face of mortality serves as a buffer against the terror of death and bolsters self-esteem. If mindfulness of death meditation is viewed as an induction of mortality salience, it would certainly be expected to evoke the defence mechanisms directed to protect self-esteem as a buffer to death anxiety. However, Vail et al. (2012, p. 305) argued that this defence mechanism serves as "positive" terror management, where individuals chose to follow positive trajectories in line with socially shared values of empathy, forgiveness and helping behaviours. MMT's interpretation of this process would suggest that enhancing relationships in face of mortality is motivated by desire to live well whilst maximising meaning and fulfilment in relationships given their impermanence.

It is of note that all participants were experienced mindfulness meditation practitioners, and the majority identified as Buddhists. Consistent mindfulness practice cultivates trait mindfulness and develops into qualities and attitudes for living, such as kindness, compassion, appreciative joy, and equanimity (Olendzki, 2009). Participant orientation toward compassion for others, empathy and appreciation of value of their relationships could be reflective of trait mindfulness qualities, and traditional Buddhist practices that they have already engaged in. In fact, a 'greater sense of compassion' was reported as a subtheme in another qualitative IPA study on experiences of meditation awareness training (Gordon et al., 2016) in Britain. In that study, most participants appeared to have had limited or no experience with mindfulness meditation. The implemented intervention included mindfulness meditation and was overtly spiritual, Buddhist, in nature

(Gordon et al., 2016). After participating in the programme, participants reported developing a greater sense of compassion and empathy, and a felt sense of wanting to help others. It is possible that developing an orientation toward compassion, kindness and empathy is inherent to Buddhism and its values and may not specifically be a direct result of mindfulness meditation experience. Therefore, the effects in the current study may not be exclusively attributed to mindfulness of death meditation. However, it is likely that focusing on impermanence of attachments, to such elements as the physical body and relationships, would promote awareness of shared impermanence. The awareness of shared impermanence puts a spotlight on importance of some connections and their quality.

As expected, and as a common byproduct of mindfulness interventions, the participants described developing a greater awareness of their thoughts, feelings, and actions. They spoke about transforming their mental and emotional states and becoming more peaceful and calmer. They described developing a better ability to notice their automated responses and change their behaviour, if needed, to align with values and goals. This was supported by the insights that their suffering was mostly situated in the mind, as Buddhist teachings would suggest (Claessens, 2009). Relief from suffering was linked to the ability to interrupt the automaticity of emotional or cognitive responses, whether this was in relationship to death or in other circumstances.

In a way, the participants in this study described a process similar to the ‘de-automisation’ and ‘de-coupling’ mechanisms of mindfulness (Kang et al., 2013; Levin et al., 2015). De-automisation (Kang et al., 2013) and de-coupling (Levin et al., 2015) refer to effect of mindfulness practice, where individuals develop an awareness of automatic internal processes (thoughts, feelings and urges) and an ability to observe these with self-compassion and without judgement. One can then develop an acceptance of some of these internal experiences without necessarily judging them as ‘truths’, or labelling them as positive or

negative. This interrupts automatic responses, such as attempts to avoid these through maladaptive strategies.

In her summary of the ‘four noble truths’ of Buddhism, Claessens (2009) summarised that human suffering originates in the realisation of impermanence. This truth refers to the transitory nature of things and experiences, whether physical, cognitive or emotional. The participants’ reflections in this study were very much aligned with connecting to the transitory nature of experiences. Some of the descriptions were consistent with reflections by Kabat-Zinn (2020), in that mindfulness practice uncovers the fleeting nature of feelings, thoughts and other responses. At the same time, it allows one to go beyond the automated ambitions or fears and become aware of the self-constructing and self-referencing ego (Kabat-Zinn, 2020). The awareness of these constructions and their impermanence points to the fact that “there is no you to die,” and yet, you can experience death through this awareness before the actual death of the physical body (Kabat-Zinn, 2020, p. 830).

Following on from the above, the participants described a sense of ease, *letting go*, renewal, refreshment, liberation and a felt expansion immediately following their mindfulness of death meditation. One of the participants described it as “beautiful emptiness” (Gerard). This appeared to have been in the context of fully embracing and accepting death and impermanence of their physical bodies, relationships, attachments, material aspects of living and constructions of their identities. This is the type of liberation, that the Buddha spoke of as “the deathless” (Kabat-Zinn, 2020, p. 830).

Shonin and Gordon (2014, p. 466) write, “as soon as we stop trying to hide from death or pretend that we are immune to it, we find that it becomes much easier to breathe, and we immediately feel more confident, relaxed, and truthful with ourselves.” This is consistent with the experiences described by participants in this study. The reorientation toward

meaningful and values driven living appears to be an observed effect of this meditation in other studies on death contemplation (Moon, 2019; Park et al., 2016) or in TMT and MMT literature in response to mortality salience. However, this particular element of felt expansion reported in this study appears to be unique to mindful contemplation of death and impermanence, as noted in another qualitative study on mindfulness practice below.

‘Letting go of self’ was identified as one of the themes in an IPA qualitative study by Shonin and Gordon (2015), where participants underwent an eight-week meditation training in United Kingdom. The training contained elements of mindfulness in conjunction with other traditional Buddhist practices on cultivating insights and qualities of mindfulness. One of these was a meditative insight into concepts such as emptiness and impermanence. Similarly to the group in the current study, the participants commented that the programme helped broaden their understanding of what constituted as the ‘self’, and to reconstruct their ontological stance on the concept of the ‘I’. All participants experienced ‘emptiness’ as a positive concept and this had caused them to be less preoccupied with their own agenda and entitlements.

Nevertheless, it is also possible that the overall sense of ease and *letting go* reported by the participant in the current study could have been a byproduct of stress reduction through mindfulness meditation practice. The sense of liberation may come from the de-automatisation of unpleasant responses to death related stimuli confronted in death meditation. This could have been accompanied by reduction in death anxiety. As highlighted in quantitative studies, death anxiety is expected to decrease with mindfulness practice (Anālayo et al., 2022; Jain, 2024; Moon, 2019; Park et al., 2016; Ye et al., 2024), giving way to a felt sense of ease and relief.

Despite reporting some discomfort or fear during the meditation, there appeared to be a shared understanding among the participants that mindfulness of death practice does not ‘remove’ the fear of death. Instead, it becomes a doorway toward a deeper self-knowledge and insights into what the discomfort was about. For example, fear of losing a loved one is linked to the intensity of attachment, love and connection. Fear of losing a sense of identity pointed to an attachment to constructed roles and cultural scripts the individuals saw themselves playing in society.

Most practitioners come to meditation in search of relief from suffering (Kabat-Zinn, 2003), just like the participants in the current study, who reported feelings of discomfort or fear in relation to death. Yet, the practice of mindfulness needs to abandon all goals (Kabat – Zinn, 2003). This means that the aim of overcoming fear of death through death meditation, if this is an issue or a concern, should also be abandoned. Mindfulness encourages a gradual orientation of attention toward fear as it arises, without deliberate induction of panic symptoms, while exploring it with non-judgmental acceptance (Kang et al., 2013). The participants in the current study would have faced a challenge in abandoning their aims, and looking beyond the surface of fear, observing it as it unfolded and provided insights into its nature. And as it seemed to happen, the nature of their fears rested beyond the finality of the death of the physical body.

Reframing death appears to have been an antidote to the conditioning that the participants reflected on prior to engaging in mindfulness of death meditation. Some reflected on the process of death as death of self-constructed roles, identities and ego. Others described life and death as sides of the same coin, in that there is not one without the other, and that both are required for life to continue and transform. Through observing the object of death mindfully, they opened up to possibilities of ‘relaxing’ around death, giving it space and room

to breathe, without judgement or attempts to suppress their responses to it. Whereas initially, they came across messaging that death was something problematic or needed to be avoided.

Reframing of death and defusing taboos around death is one of the aims of ‘death positive’ movement (Doughty, 2017). This movement inspired emerging literature that shifts the narrative from fear and avoidance of death to a better understanding of the dying process (Dresse, 2023). It has given rise to such professions as ‘death midwives’ – death doulas, that essentially reframe death into a process similar to birth (Yoong, et al., 2022). There is evidence to suggest that death education programs among nurses and end of life carers is important not only to reduce death anxiety but also improve understanding about death and the dying process, the impact it has on all involved, and to reframe death and attitudes around it (Mooney, 2005).

Overall, the results of this study support the premises of such theories as TMT and MMT, whilst highlighting that intentional engagement in mindfulness of death can have transformative effects on how individuals respond to their internal processes (whether they are death related or not). It appears that this practice can challenge automatic responses to impermanence and death, as well as reform their approach in confronting other fearful stimuli. This supports the wide literature on effects of mindfulness practice. Additionally, this practice showed to have an impact on participant mindful conduct in relationships and lives in general, coming closer to their innermost authentic values. This is in line with literature on PTG, and transformational effects that confrontation with mortality can induce in individuals.

Challenges in Practice

Whilst many positive effects were reported, the practice was not without challenges. The participants described the process of mindfulness of death meditation as very distinct from other types of mindfulness meditation. In some ways, they imparted a sense of caution

around the practice and guidance on the do's and the don'ts. Mindfulness of death confronts death in ways that can be intense, and visually graphic, particularly in some traditional Buddhist practices, such as attending sky burials and char grounds, or meditating at grave sites and over images of corpses, as well as explicit visualisations of violent or painful death that some participants engaged in. Despite the imagery, most participants did not appear to perceive this as disturbing, but rather "beautiful" (Jessica & Wendy). However, some emphasised importance of emotional readiness to confront themes that can arise from such practice and that it had potential to be distressing.

Participants commented on death meditation as a potent medicine in that the intensity (potency) and frequency of such meditation are inversely correlated. Brief death contemplation, such as 'memento mori' or reflection on impermanence was practiced more frequently, and for some it was daily. Whilst more formal meditations, such as the Eight Stage of Dying or Maranassati were less frequent due to length and/or intensity of content. One of the participants reflected on "positive anxiety" (Gerard) that short daily meditation can create, helping to direct one's actions in line with goals and values. Another participant, spoke about meditating too intensely and too frequently and experiencing a sense of anxiety around "running out of time" (Jessica) to do all the things she perceived as important to achieve before death.

This emphasises the importance for better understanding of the 'dose-response' effects of mindfulness meditation. Currently there is no data to contextualise dose-response effects for mindfulness of death meditation. There is also no consensus on how long and how frequently individuals need to practice other types of mindfulness meditation to observe desired effects, despite hundreds of randomised controlled trials on mindfulness interventions (Bowels et al., 2023). Bowles et al. (2023) summarise that overall, shorter and more frequent sessions can be more advantageous for establishing and sustaining practice, and longer

sessions could be beneficial for developing deeper insights and state of relaxation. However, longer or frequent practice can be ineffective or even harmful for some (Britton, 2019). These ideas appear to be supported by participant reports in the current study, in that the shorter less intense sessions were effective and maintainable, whilst longer and intensive sessions were not always possible, and doing these frequently had an effect of increasing anxiety for some.

Practical Implications

The results of this study demonstrated that close encounters with mortality and engaging in mindfulness of death meditation had transformative effects on the participants. Taylor (2016) describes that intense encounters with mortality, such as through illness or accidents, can generate spontaneous mindfulness in individuals. Encountering mortality dramatically increases the sense of the value of time, experiences and relationships, which prompts people to pay more attention to these, and become more mindful (Taylor, 2016). One could argue that engaging in such practices as mindfulness of death meditation would bring us closer to becoming more mindful and appreciative of the value of our lives and experiences, but without having to confront mortality through trauma or intense distress.

Encountering mortality in psychotherapeutic practice with the aim of enhancing one's psychological well-being and values driven living is already utilised by such modalities as Acceptance and Commitment Therapy (ACT; Hayes et. al, 1999; Hayes & Smith, 2005), as described in Chapter Two. It appears that mindfulness of death practice can complement these therapeutic approaches. However, one of the identified subthemes in this study has indicated that a level of emotional readiness and preparation is highly important with mindfulness of death meditation. Hence practitioners and clinicians need to assess that individuals have sufficient emotional and cognitive capacity to process themes that would arise as result of this meditation, and that therapeutic support to assist with any distressing

content is available. The themes evoked by this meditation may need time to be processed over time, and this would not be suitable as a component in a short-term intervention.

As with most mindfulness interventions, development of metacognitive abilities was reported by the current group, suggesting that state mindfulness could be induced and that trait mindfulness qualities can be developed through practice of mindfulness of death meditation. The participants reported that this practice has assisted them in managing thoughts and emotions, which is in line with the application of mindfulness interventions in clinical settings. Again, if applied in a clinical setting, it may best to incorporate this into long term therapy, where insights from this meditation can be explored over time.

Claessens (2009) makes a case for use of mindfulness in existential psychotherapy, and that mindfulness can be utilised in the exploration of individual experiences as they unfold. In the context of confronting mortality in psychotherapy, mindfulness of death can be used with the view of developing insights into the experiences and emotional states in response to impermanence. Mindfully observing impermanence and death in therapy could be a way of bringing awareness to processes that have not been consciously accessible to clients. This can encourage further exploration and reflection. Responses to mortality can be shared with the therapist, in the context of empathic, therapeutic and relational space. As mentioned by some of the participants in this study, they felt isolated in their existential angst among what was perceived as 'death avoidant' society. Opening these themes in therapy could have beneficial effects for those who are facing death as result of their circumstances, or those who are experiencing existential stress. Mindfulness of death practice can produce some calming effects, but it can also produce discomfort. Exploration of the discomfort in a therapeutic relationship could have the potential for transformation.

There is not enough evidence, at this stage, to advocate for the clinical use of this practice with anxiety disorders. However, it can be hypothesised, that if applied with the view of treatment of anxiety, such as death anxiety, a consideration needs to be given for dose and frequency. Understanding the dose-response effects is particularly important in the context of application of mindfulness of death with the view of addressing death anxiety. Britton (2019) explains that mindfulness can work as exposure to an unwanted anxiety provoking stimulus by facilitating an observation of distress; and then subsequently distinguishing the symptoms through reduction of emotional avoidance. This could be beneficial for those who engage in experiential avoidance. However, she highlights that anxiety and other disorders can be caused and maintained in two different ways, one through bias away from the threat, and another through bias toward the threat. Whilst avoidant individuals have been shown to benefit from exposure (attending to threat), those with bias toward the threat benefit most from cognitive bias modification away from threat (Barry et. al, 2015). This is important to consider when implementing mindfulness interventions, that orient the individual toward the ‘threat’, such as mindfulness of death. The exposure could be more effective for the avoidant individuals, versus the ones with a ‘toward threat’ bias, where it could be less effective or more harmful (Britton, 2019). A client’s tendency for experiential bias toward or away from the threat of death needs to be assessed prior to treatment. For example, frequent and dose intensive mindfulness of death practice may not be suitable to individuals who are naturally biased to go toward the threat, but could serve as appropriate exposure practice for experience avoidant individuals.

Mindfulness of death meditation is a traditional Buddhist practice, and this could be a challenge for some clinicians who are not familiar with Buddhist philosophy and perspectives. Similarly, clients with religious or cultural beliefs different to Buddhism may find this practice intrusive. Hence, it is important that meditation teachers and clinicians

remain culturally and spiritually responsive when considering implementing mindfulness of death meditation, assess their scope and capacity, as well as limitations and biases. This meditation practice can however be suitable to individuals and practitioners who have some fluidity in their spiritual and religious beliefs. However, in general, some familiarity with Buddhist concepts is beneficial with any type of mindfulness practice due to its origins.

Finally, given that the consideration of readiness and appropriateness have taken place, mindfulness of death practice can be used by practitioners who work with death and the dying. These professions include but not limited to end-of-life carers, palliative nurses and counsellors. Mindfulness of death practice could serve as means for enhancing their understanding of responses to themes of dying and impermanence. The insights could be further utilised for self-reflection in practice and in supervision. Less graphic and more gentle versions of this practice, such as short contemplative exercises on impermanence or the longer Eight Stages of Dying meditation, could also be introduced in death education programs, as some have suggested this already (Gutschow, 2023; Stella, 2016). Again, counselling and therapeutic support would need to be available for anyone wishing to engage in this practice.

Limitations

It is important to note that this qualitative study was not designed to assess efficacy of mindfulness of death meditation, or to allow findings to be generalised beyond the current participant sample. The participants in this study were all experienced meditation and mindfulness practitioners and most had at least one prior intense encounter with mortality. Therefore the effects of mindfulness of death meditation practice are contextualised within this prior experience.

An IPA study is recommended to be conducted with a homogenous group of participants to generate a rich, detailed exploration of personal meaning (Smith & Fieldsend, 2021). However, given the novelty of this topic, there were some difficulties in recruiting a sufficiently homogenous group, the inclusion criteria remained broad and participant demographics and level of experience varied. This would have impacted the accounts of their practice. However, the group was generally homogenous in their education and socioeconomic status. Location limits were also applied to Aotearoa New Zealand and Australia, for this investigation to be specific Australasian context. The shared GETs were still identifiable among all transcripts, indicating a sufficient level of homogeneity was achieved.

The types of mindfulness of death meditation practices varied between participants within the group. Some have engaged in short and regular mortality contemplation. Some engaged in meditations on impermanence. Some followed specific instructions of the Buddhist texts and participated in what could be perceived as highly intense practice. Hence the reported effects were not reflective of one type or length of mindfulness of death mediation. Additionally, some participants in the study had meditation teaching experience, which would have also impacted on the way they spoke about the topic, whilst blending their personal responses to the practice with the teaching of this meditation and meaning making of their students.

Two interviews were conducted in person and four on video. The online format of the interviews has limitations. Although sufficient rapport with the participants was established, the researcher's ability to gauge non-verbal cues would have been impacted. This could have influenced the flow of the conversations, in some cases, limiting the participants' ability to share more spontaneous personal insights.

Future Research

There is a benefit in exploring the effects of the mindfulness of death practice and how it can enhance health and well-being. For example, quantitative research further exploring the themes generated from the current study using a larger statistically significant sample can be done to test generalisability beyond the current sample. Other future directions could include experimental investigations into this practice with participants who do not have prior experience and have not had challenging prior intense encounters with mortality. As mentioned, the participants in the current study engaged in different types of death meditation, choosing and focusing on effects of a specific type of death meditation in comparison with the others could provide better insights into the intricacies of different methods.

Additionally, given that general mindfulness practice has effects on individuals' perceptions on impermanence and levels of death anxiety (Anālayo et al., 2022; Jain, 2024; Ye et al., 2024), it is important to understand whether mindfulness of death meditation would produce any other impacts that have not already been observed and documented with other mindfulness practices. This is where dose-response effects can also be investigated. It is also important to establish the longevity of such effects, as most existing studies did not implement a post-intervention measure.

Other future exploratory qualitative or quantitative research can examine how religious and cultural practices and beliefs about death may relate to how participants experience mindfulness of death meditation practice, and whether this affects how they receive it. This may further inform clinical practice with culturally and religiously diverse clients. Furthermore, conducting a study that looks at differences among age groups could provide more insights into how this interacts with participant experiences of reflecting on

mortality. For example, there could be variations between a younger and an older sample, as responses and challenges with this practice might vary.

Conclusion

This qualitative research explored the use of mindfulness of death meditation. It aimed to investigate what motivated individuals to participate in this practice, what effects the practice had for them, as well as its challenges.

The results of this study indicated that mindfulness of death contributed to how participants understood their relationship with dying and living. They were initially drawn to the practice through personal confrontations with death and existential wonderings. The meditation opened a possibility to look at death and impermanence non-judgementally and with acceptance. This had in turn transformed what they perceived as valuable in life and in relationships with others. The participants also reported further developing their metacognitive and emotion regulation abilities. The practice assisted them to transcend the initial aversion or fear of death, leading to reframing of the role that death and endings played in their lives. In some ways, death was no longer separate from life, but was something that could be observed in the unfolding nature of all experiences. Challenges with this practice were also identified, specifically around frequency and intensity, as well as importance of one's emotional readiness to purposefully confront mortality.

The practical application of this practice, whether personal or therapeutic, could assist with connecting with more meaningful and values driven living. Humans are meaning making creatures, and perhaps mindfulness of death can assist in this ongoing search. One does not have to confront mortality through a traumatic accidental encounter but instead face death intentionally and with purpose through mindful practice.

It is, however, unclear whether this practice is appropriate with clinical groups, such as with clients with death anxiety. In the era, where mindfulness-based interventions have become common in clinical settings, mindfulness of death meditation does not yet have the support for use with clinical populations. Caution needs to be exercised, specifically around emotional readiness and ‘dosage’ to mitigate any potential negative effects. If using this practice as a spiritual or a personal development tool, it is important that teaching or counselling support is available. Future research into applications of this practice is needed.

Final Reflections

On a personal note, conducting this research has challenged me in several ways. This has been an experience in academic and personal learning. The process of writing was accompanied by ongoing parallel reflections on mortality and impermanence, often leading to seemingly random periods of inner turmoil followed by periods of silence. Contextualising these within the theory and literature on effects of mortality salience has been an interesting individual case study. The interviews with the participants had also had a profound effect. The individuals that participated in this study imparted a wisdom that cannot be found anywhere else, highlighting the importance of qualitative academic enquiry. Having experienced these first hand, I am very grateful. It is my hope that what they have shared can assist others in incorporating mindfulness practice with more purpose and authenticity to the method. It is easy to overlook the core principles of Buddhism with mindfulness becoming so mainstream. For me, this study has emphasised the importance of a deeper understanding of such practices. Perhaps, this research can inspire others to investigate mindfulness and mindfulness of death further, whether it is through academic research or for personal learning.

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Footnotes

¹ ‘Western society’ refers to countries influenced by European traditions and development of modern democratic and capitalist systems – primarily Western European, North American (Canada and United States) and Australasian (specifically Australia and New Zealand).

Appendix A



NGĀ KUPU WHAKAMĀRAMA / INFORMATION SHEET

He aha te kaupapa o tēnei rangahau? / What is this research about?

The benefits of mindfulness meditation are widely known and have been studied extensively since the end of the last century. However, mindfulness of death meditation is a less researched practice.

Meditation on death (also known as Maranasati), is one of the core practices for some Buddhist practitioners. This practice consists of instructions on death awareness, contemplation on the inevitability of death, mindfulness of knowledge that death can happen at any time, awareness of attachments and eventually mindfulness of the breakdown of the body.

The research on the effects or outcomes of practicing this type of meditation is limited, hence further study could be of benefit. This research could also provide further information and guidance to practitioners around using meditation and mindfulness approaches in clinical settings with clients.

Ma wai e mahi tēnei rangahau? / Who is doing this research?

My name is Anya, a postgraduate student at the School of Psychology, Massey University. I am a therapist and a meditation practitioner, in Auckland, New Zealand. I have a keen interest in topics of spirituality, meditation, death and extraordinary experiences.

Dr Nicole Lindsay is the supervising staff member for Massey University. She is an experienced researcher and qualified therapist, with an interest in spiritually integrated techniques. She has conducted a variety of qualitative research across diverse areas including near-death experiences, wairua and spirituality.

The research will contribute towards the requirements of a Master of Science (Psychology) degree.

He aha āku mahi mā ngā kairangahau? / What will I be asked to do?

Should you decide to take part, you will be requested to participate in an individual interview with me. The interview will be semi-structured, I will ask you some questions about your experience with meditation on death and dying. The interview will be audio recorded. The interview can take place in person or via Zoom at a time that suits you.

It is anticipated the interview will take up to 60 minutes to complete. As compensation for your time, and as a token of gratitude, you will receive a \$40 grocery voucher.

Massey University

Te Kunenga ki Pūrehuroa

Massey University, Private Bag 11 222, Palmerston North, 4442, New Zealand

+64 6 350 5701 | contact@massey.ac.nz | massey.ac.nz



Ma wai ngā tāngata e whai wāhi tēnei rangahau? / Who can take part in this research?

If you reside in Aotearoa New Zealand or Australia, are aged 18 and over and have practiced the mindfulness of death meditation at least one occasion, then you are eligible to take part in this study.

He aha ōku mōtika? / What are my rights as a participant?

You are under no obligation to accept this invitation. If you do participate, you have the right to skip, or decline to answer a particular question, ask questions about the study, and withdraw from the study at any time up to two weeks after having had the opportunity to review your transcript. Your interview transcript will remain completely anonymous, and name changes will occur during the write up of the project. All raw data from this questionnaire, including audio recordings, will be kept on a password secured computer and data security will adhere to the Massey University Code of Responsible Research Conduct. Raw interview data and any identifiable information will be destroyed at the completion of the thesis (or after 5 years, whichever comes first).

Me aha ahau ināiane! What do I do now?

If you feel you would like to participate in this research, please email Anya on her work email at [REDACTED] or feel free to call or text on +64 [REDACTED].

Mēnā he pātai āku, mā wai aku pātai e whakautu? Who can I contact about the research?

If you have any further questions, queries, or would like to know more about this study, please contact Anya or Nicole:

Primary Investigator

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If you have any further questions, queries, or would like to know more about this study, please contact Anya or Nicole:

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This project has been reviewed and approved by the Massey University Human Ethics Ohu Matatika 2, Application OM2 23/04. If you have any concerns about the conduct of this research, please contact Associate Professor Fiona Te Momo, Chair, Massey University Human Ethics Ohu Matatika 2, telephone 09 414 0800 x 43347, email humanethics2@massey.ac.nz.

Appendix B



Mindfulness of death meditation experiences

PARTICIPANT CONSENT FORM - INDIVIDUAL

I have read and understand the Information Sheet attached as Appendix I. I have had the details of the study explained to me, any questions I had have been answered to my satisfaction, and I understand that I may ask further questions at any time. I have been given sufficient time to consider whether to participate in this study and I understand participation is voluntary and that I may withdraw from the study at any time.

1. I agree/do not agree to the interview being sound recorded.
2. I agree to participate in this study under the conditions set out in the Information Sheet.

Declaration by Participant:

I _____ [print full name] hereby consent to take part in this study.

Signature: _____ Date: _____

Appendix C



Mindfulness of death meditation experiences

AUTHORITY FOR THE RELEASE OF TRANSCRIPTS

I confirm that I have had the opportunity to read and amend the transcript of the interview(s) conducted with me.

I agree that the edited transcript and extracts from this may be used in reports and publications arising from the research.

Signature: _____ **Date:** _____

Full Name - printed _____

Appendix B

Interview Schedule:

Mindfulness of death meditation experiences.

Anya Sadykova [REDACTED]

School of Psychology, Massey University

Email: [REDACTED]

Phone: +64 [REDACTED]

Semi-structured interview guide

(Note: These are a general guide and could be subject to change. The interviewer can expand further with verbal and non-verbal cues to encourage participant's sharing)

Prior to the interview, cover introductions, check-in, address any concerns, develop sufficient rapport.

Q1: Tell me about your experience with the mindfulness of death meditation. Where and how you did engage in this practice? What is the length of your experience?

Q2: What prompted you to practice this type of mediation? Tell me about your motivation, reservations, anticipation etc.

Q3: Tell me more about the process of your meditation (e.g. was it guided, or self-directed). What did the instructions involve?

Q4: What was your experience of this meditation? How did you feel prior, during and after the meditation?

Q5: Tell me more about anything you liked or disliked about it.

Q6: What further reflections do you have on your personal experience of this meditation?

Q7: What else would you like to add?