

# Exploring The Interplay Of Death Attitudes And Internal Locus Of Control: A Correlational Study

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## Abstract

Throughout the annals of human history, philosophers have wrestled with existential concerns such as life, death, and the meaning we give them. Our attitude toward life is shaped by our attitude toward death, making various types of Death Attitude an interesting variable to study (Yalom, 1980). Becker (1973) posits that much human behavior is motivated by fear of death, which people seek to resolve through various psychological methods. Denial of death is one of the motivations of human efforts, forming the attitudes, beliefs and traditions of individuals and groups (Becker, 1973). This raises the interesting question of whether Locus of Control may be one of the coping strategies employed to deal with existential anxieties about Death. The goal of existing research is to examine the relationship between different types of Death Attitude and Locus of Control. The study was conducted among 218 Indian adults aged 18 to 30 from Surat City, Gujarat. The Revised Death Attitude Profile Scale and the Levenson Multidimensional Locus of Control Scale were used to measure types of Death Attitude and Locus of Control, respectively. Convenience and snowball sampling techniques were used to collect data. The data were analyzed using various statistical tools including descriptive statistics and Pearson's correlation coefficient through SPSS software. This study hypothesized a significant relationship between different types of Death Attitude and Locus of Control. The hypotheses are supported by the results.

**Keywords:** Death Attitude, Locus of Control, Death Attitude Profile- Revised Scale, Internal Locus of Control, External Locus of Control, Death Anxiety

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## I. Introduction

"The idea of death, the fear of it, haunts the human animal like nothing else; it is a mainspring of human activity – designed largely to avoid the fatality of death, to overcome it by denying in some way that it is the final destiny of man." (Ernest Becker, 1997 in *The Denial of Death*)

Death has the ability to give us a reality check on our fictitious materialistic world. Death has the potential to bring ego on its knees. The awareness of death knocking on our doorstep can ground us back to reality of how small and insignificant our self really is. Understanding the impact of the concept of death on human life is fundamental because it delves into fundamental aspects of human existence and shapes individual perception, behavior, and psychological well-being. Throughout history, prominent philosophers and thinkers have extensively reflected on the existential meaning of death and provided deep insights into its psychological impact (Yalom, 1980).

One of the important aspects of studying the impact of death on human life is its role in shaping individual attitudes and behaviors. Existential philosophers such as Søren Kierkegaard have emphasized the deep existential fear that arises from awareness of one's mortality. Kierkegaard (1849) hypothesized that the contemplation of death acts as a catalyst for individuals to face the ultimate questions of existence, leading to existential panic and a search for meaning. Furthermore, philosophers such as Martin Heidegger have clarified the concept of "being towards death," suggesting that awareness of mortality fundamentally shapes human existence by influencing one's priorities, values, and choices. According to Heidegger, the prospect of death reveals the limited nature of human existence and forces people to truly participate in their lives and to face their possibilities and limitations (Heidegger, 1927).

Psychiatrist and Holocaust survivor Viktor Frankl also emphasized the importance of wrestling with the concept of death in his existential analysis. Frankl (1946) argues that knowledge of death is a motivational force that inspires people to find meaning and purpose in life, particularly when faced with pain and suffering. In accepting the end of life, people must overcome their circumstances and strive to live their lives successfully. Furthermore, the psychology of death extends beyond the individual's imagination to social and cultural phenomena. Philosopher Ernest Becker's work "The Denial of Death" describes how the collective effort to deny

or reduce the fear of death affects human behavior, culture, and faith. Becker stated that much of human civilization is driven by the collective desire for immortality, with people seeking to transcend death through social actions, cultural actions, and religious beliefs (Becker, 1973).

In the mid-1960s, behavioral scientists avoided the subject of death. It was Templer's work on death anxiety that gave new life to the concept of death (Wong, Reker and Gesser, 1994). The work of Kubler Ross, along with that of Templer, the influence of human existential psychology, and the atrocities of World War II played an important role in the development of knowledge about death (Feifel, 1990, cited in Wong, Reker and Gesser, 1994). Several terrorist attacks have spread fear of death across the world, leading to many attacks. Death anxiety is followed by waves of anger and grief that lead to the destruction of safety, security, and despair (Janoff-Bulman & Berger, Neimeyer, 2000, cited in Wittkowski and Moser, 2004). These different feelings include some people becoming more religious and loving, while others display aggression and violence. Some of them share their answers in terms of personal development and altruistic activities. Therefore, attitudes toward death can range from fear of death to rejection of death as a reality. This controversial and multifaceted nature of dying behavior makes it an interesting topic to study (Neimeyer, Wittkowski & Moser, 2004 cited in Vyas & Nadkarni, 2023).

In this study, we define death attitudes as a person's thoughts regarding the death of oneself or others. It is a stable psychological assessment through which people respond to death or its related aspects (Dezutter et al., 2009). Death anxiety began to dominate the field of psychological thanatology. Many scientists have limited their scientific research and development to death anxiety. The process of shifting attention from death anxiety to death attitude has been credited to Paul Wong, Gary Reker, and Gina Gessar (Wong, Reker, & Gessar, 1994). *Fear of death* means fear of getting lost. It also encapsulates fears about life after death and concerns about the health of our loved ones (Feifel 1977, cited in Wong, Reker, & Gessar, 1994). The resistance that people experience when exposed to stimuli with death-related content is called Death avoidance (Becker, 1973; Wong, Reker, & Gessar, 1994). *Neutral acceptance of Death* is defined as a passive attitude that neither fears nor welcomes death, but simply accepts it as an inevitable part of life (Wong, Reker, & Gessar, 1994). *Approach Acceptance* refers to the acceptance of death by believing in the afterlife (Wong, Reker, & Gessar, 1994). *Escape Acceptance of Death* refers to the behavior of seeking to escape a miserable life through death (Wong, Reker, & Gessar, 1994).

Becker (1973) stated that people struggle with the fear of death, which causes them to develop various cultural and psychological defenses to cope with this anxiety. Such defense may arise from an individual's locus of control (Yalom, 1980). This leads to interesting questions that explore the different interactions between types of Death Attitude and Locus of control. Patton and Freitag (2016) conducted a study on Death Anxiety, General Anxiety and Locus of Control and concluded that there was a small but significant relationship between Death Anxiety and Locus of control. Other research explores differences between Locus of control and Attitudes toward death, finding a positive relationship between External Locus of control and Death-related concerns (Hyams; Barbara; Domino; George; Spencer & Robert, 1982). One study found a positive relationship between Internal Locus of control and positive Attitudes toward Death among college students who participated in a Death Education (Williams, 1990). Another study conducted to understand the relationship between locus of control and level of death anxiety found a significant interaction between locus of control and fear of death (Hayslip and Stewart-Bussey, 1987).

Another study that explored Erikson's concept of Ego-Integrity by investigating death anxiety, life satisfaction, and locus of control in adults revealed a significant relationship between internal locus of control and low death anxiety (Nehrke ; Bellucci and Gabriel, 1978). Another study examining death anxiety and psychological distress among Chinese university students showed a positive relationship. Studies have shown that women and younger people tend to fear death more than older people and men. People who reported having death anxiety were more likely to receive an external health check. Internal locus of control and conscious fear of death are uniquely related (Tang; Wu & Yan, 2010). Carter's (1983) study of locus of control, physical behavior, and death anxiety in college students concluded that locus of control did not predict death anxiety in men but did predict death anxiety in women. Another study conducted by the Pakistani police found a negative relationship between death anxiety and internal locus of control, as well as a positive relationship with external locus of control (Samreen & Zubair, 2013). A correlational study to explore the relationship between death attitude, self-esteem, and locus of control character among college students concluded positive correlation of locus of control character with fear of death and escape acceptance (Cai, He, Li & Zhu, 2014). In order to enable cancer patients to change their condition, a study aims to understand the function of attributional style and examine the relationship between various forms of well-being and death anxiety across genders. Research has found a positive relationship between health locus of control and death anxiety, suggesting that patients experience more anxiety when they are externally oriented (Shukla and Rishi, 2018).

Many studies and theories have examined the relationship between a person's sense of control over their life, called locus of control, and attitudes toward death. These findings suggest that people who have internal locus of control, who demonstrate self-determination and wisdom in the face of life's challenges, are more likely

to have a positive outlook on death. Conversely, people who have an external locus of control, feeling helpless, are more likely to have a negative attitude about death. These findings suggest that an individual's desire for control and self-determination may play an important role in attitudes toward death. Based on the review of existing literature, it can be safely concluded that locus of control and death attitude exhibit a close relationship with each other. A review of available literature revealed insufficient research on adults aged 18–30 years in the city of Surat, Gujarat, India. Therefore, this study aims to examine the relationship between Locus of Control and Death Attitude of 218 adults aged 18-30 years in Surat region. It also aims to provide further support for thinking about Existential Psychology, regarding future implications and applications that can contribute to people's development and health.

## **II. Method**

### **Aim:**

- To explore the association of types of Death Attitude and Internal Locus of Control.

### **Objective:**

- To study the relationship between different types of Death Attitude and Internal Locus of Control.

### **Hypothesis:**

- There will be a statistically significant relationship between Fear of Death and Internal locus of control.
- There will be a statistically significant relationship between Death Avoidance and Internal locus of control.
- There will be a statistically significant relationship between Neutral Acceptance and Internal locus of control.
- There will be a statistically significant relationship between Approach Acceptance and Internal locus of control..
- There will be a statistically significant relationship between Escape Acceptance and Internal locus of control.

**Research Design:** Correlational Study

### **Variables:**

#### **Dependent Variable -**

- Internal Locus of Control

#### **Independent Variable-**

- Fear of Death
- Death Avoidance
- Neutral Acceptance of Death
- Approach Acceptance of Death
- Escape Acceptance of Death

#### **Inclusion Criteria-**

- Adults aged 18 to 30 were included.
- Participants residing in Surat were included.
- Participants with an educational background of at least 12 samples were included.
- Participants comprehending English were included.
- Binary gender participants were included.

#### **Exclusion Criteria-**

- Adults under 18 and over 30 were excluded.
- Participants not residing in Surat were excluded.
- Participants who did not have an educational background of at least 12 standards were excluded.
- Participants who did not comprehend English were excluded.
- Non-binary gender participants were excluded.

### **Sample Characteristics:**

The sample consisted of 218 participants from Surat, Gujarat, India. The sample is selected from the age group of adults 18-30 years old who have at least 12th standard education and can read and understand the English language. Convenience and Snowball Sampling Technique were used for data collection.

**Tools Used:**

Death Attitude Profile- Revised Scale and Levenson Multidimensional Locus of Control Scale were employed to measure variables of Death Attitude and Locus of control respectively.

- *Death Attitude Profile - Revised Scale:* Gina Gessar, Paul Wong and Gary Reker have done seminal work developing scales to measure different types of Death Attitude. This scale is an updated version of the Death Attitude Profile developed by Gina Gessar, Paul T.P. Wong and Gary T. Reker consisted of 32 items distributed in 5 dimensions in 1987-88. The face validity of the scale was developed by asking 10 young people, 10 students and 10 elderly people to place the items in the category that best suited them. The results showed an agreement of more than 70%, indicating that this scale has strong validity. Internal consistency and test-retest reliability were determined, and results indicated good reliability, ranging from a minimum of 0.65 (Neutral Acceptance) to a maximum of 0.97 (Approach Acceptance). To establish construct validity, several subscales of this scale were analyzed using correlation with Death Anxiety Scale, Death Perspective Scale, Semantic differential of Life and Death, Indifference toward Death Subscale and Death as an afterlife of Reward Subscale. The results show that there is a strong construct validity. Therefore, the DAP-R scale is a psychometrically sound scale (Wong, Reker, & Gesser, 1994).
- *Levenson Multidimensional Locus of Control Scale :* The concept of locus of control was first proposed by Rotter in 1966. Rotter refers to locus of control as a person's degree of belief in how much control they believe they have beyond the circumstances of his life. In 1981, Hanna Levenson developed a three-dimensional measure of locus of control consisting of 24 items. This scale rates responses on a 7-point Likert scale. The scale has been validated with different populations. Internal reliability is psychometrically high, ranging from 0.64 to 0.82. The split half reliability for the three subscales is 0.62, 0.64, and 0.66. Test-retest reliability over 1 week ranged from 0.60 to 0.79 and over 7 weeks from 0.62 to 0.73. The validity of the scale was established using convergent and discriminant validity, demonstrating psychometric validity (Levenson, 1981).

**Procedure:**

Consent of authorized persons was sought to collect information from respondents. Once consent was obtained, the information was collected. The data was collected from the above questionnaire. The data were analyzed using various statistical tools of descriptive statistics and Pearson correlation by SPSS software. A discussion and interpretation of the results were developed after data analysis.

**Ethics**

Following ethical considerations were taken into account:

1. Informed consent was obtained before data collection.
2. The confidentiality and anonymity of the participants were preserved.
3. Participants were debriefed immediately after data collection.
4. No intentional physical or psychological harm was conducted during the study.
5. Participants had the right to withdraw at any time during the study.

**III. Result And Discussion**

The purpose of this study is to investigate the relationship between Death Attitudes and Locus of Control. The data collected is described below using descriptive statistics. *Table 1.1 shows descriptive statistics for Types of Death Attitudes and Locus of Control*

	N	Mean	Standard Deviation
<b>Fear of Death</b>	218	3.46	1.37
<b>Death Avoidance</b>	218	3.81	1.59
<b>Neutral Acceptance</b>	218	5.61	1.34
<b>Approach Acceptance</b>	218	4.21	1.51
<b>Escape Acceptance</b>	218	3.86	1.81
<b>Internal Locus of Control</b>	218	31.57	10.16
<b>External Locus of Control</b>	218	47.58	18.11

Based on the tabular data provided in Table 1.1, the mean and standard deviation of Fear of death were 3.46 and 1.37, respectively. Death Avoidance also has a mean and standard deviation of 3.81 and 1.59, respectively. Neutral Acceptance of death has a mean and standard deviation of 5.62 and 1.34. Additionally, participants reported that the mean and standard deviation for Approach Acceptance of Death were 4.21 and 1.52, respectively, and for Escape Acceptance, it was 3.86 and 1.81, respectively. The mean and standard deviation of Internal locus of control were 31.57 and 10.16, respectively. The mean and standard deviation of the External locus of control were 47.58 and 18.11, respectively.

**Statistical Analysis and Interpretation of Hypothesis 1:**

**Table 1.2 Showing the Correlation between Fear of Death and Internal Locus of Control**

		Fear of Death	Internal Locus of Control
Fear of Death	Pearson Correlation Sig. (2-tailed) N	1 218	.322** .000 218
Internal Locus of Control	Pearson Correlation Sig. (2-tailed) N	.322** .000 218	1 218

\*\* . Correlation is significant at the 0.01 level (2-tailed)

**H<sub>1</sub> : There will be a statistically significant relationship between Fear of Death and Internal locus of control.**

Pearson correlation analysis was performed to examine the relationship between Fear of Death and Internal Locus of Control. The results showed a significant positive correlation between the two variables with a Pearson coefficient of 0.322 ( $p < 0.01$ ). This means that the greater the fear of death, the greater the tendency toward internal locus of control. The strength of the relationship is moderate, indicating that the relationship between the two variables is not particularly strong but nonetheless significant. Terror management theory (TMT) posits that fear of death is a fundamental psychological factor that shapes human behavior (Greenberg, Solomon, and Pishchinsky, 2015). According to TMT, people's fear of death is the result of their awareness that their own death is inevitable. These perceptions can lead to various emotional and cognitive responses, including anxiety, depression, and avoidance behaviors. Additionally, TMT suggests that individuals use various psychological defense mechanisms to cope with fear of death, including maintaining their self-esteem and cultural worldview (Greenberg et al., 2015). However, these defense mechanisms can also have consequences, including increased control over one's own life. Therefore, individuals with high death anxiety may have a higher internal locus of control because they feel they have greater control over their lives. Hence, the first hypothesis is accepted.

**Statistical Analysis and Interpretation of Hypothesis 2:**

**Table 1.3 Showing the Correlation between Death Avoidance and Internal Locus of Control**

		Death Avoidance	Internal Locus of Control
Death Avoidance	Pearson Correlation Sig. (2-tailed) N	1 218	.383** .000 218
Internal Locus of Control	Pearson Correlation Sig. (2-tailed) N	.383** .000 218	1 218

\*\* . Correlation is significant at the 0.01 level (2-tailed)

**H<sub>2</sub> : There will be a statistically significant relationship between Death Avoidance and Internal locus of control.**

Pearson correlation analysis was performed to investigate the relationship between Death avoidance and Internal locus of control. The results showed a good correlation between the two variables with a Pearson coefficient of 0.383 ( $p < 0.01$ ). This shows that as Death avoidance increases, the tendency to exercise Internal locus of control also increases. The strength of the relationship is moderate, indicating that the relationship between the two variables is not particularly strong but nonetheless significant. Learned helplessness theory suggests that when individuals realize that they have no control over their environment, they may become passive and stop trying to change their situation, even when it is possible (Seligman, 1975). This learned helplessness can extend to other areas of life, including health-related behaviors. In the context of death prevention, individuals high in internal locus of control are more likely to believe that they have control over their health and that their

actions can influence their likelihood of dying. This sense of control may motivate one to adopt health-promoting behaviors to reduce mortality risk. Therefore, higher mortality-avoidance behaviors among individuals with a higher internal locus of control may be due to a sense of control over their health, which prompts them to engage in health-promoting and death-avoiding behaviors. Therefore, the second hypothesis is accepted.

**Statistical Analysis and Interpretation of Hypothesis 3:**

**Table 1.4 Showing the Correlation between Neutral Acceptance and Internal Locus of Control**

		Neutral Acceptance	Internal Locus of Control
Neutral Acceptance	Pearson Correlation Sig. (2-tailed) N	1 218	.655** .000 218
Internal Locus of Control	Pearson Correlation Sig. (2-tailed) N	.655** .000 218	1 218

\*\* . Correlation is significant at the 0.01 level (2-tailed)

***H<sub>3</sub> : There will be a statistically significant relationship between Neutral Acceptance and Internal locus of control.***

Pearson correlation analysis was conducted to examine the relationship between Neutral acceptance and Internal locus of control. The results showed that there is a significant positive correlation between the two variables, with a Pearson coefficient of 0.655 ( $p < 0.01$ ). This suggests that as neutral acceptance increases, the tendency to have an internal locus of control also increases. The strength of the correlation is strong, indicating that there is an underlying relationship between her two variables. Self-determination theory emphasizes the importance of personal freedom, competence, and social responsibility (Ryan & Deci, 2000). Individuals with an internal locus of control are more likely to be independent and competent because they believe that their actions and decisions can affect life. Therefore, they are more likely to reach the point of acceptance of Death. People with internal locus of control are less affected by fear of death and are more likely to feel independent and competent, which can lead them to accept death. Hence, the third hypothesis is accepted.

**Statistical Analysis and Interpretation of Hypothesis 4:**

**Table 1.5 Showing the Correlation between Approach Acceptance and Internal Locus of Control**

		Approach Acceptance	Internal Locus of Control
Approach Acceptance	Pearson Correlation Sig. (2-tailed) N	1 218	.373** .000 218
Internal Locus of Control	Pearson Correlation Sig. (2-tailed) N	.373** .000 218	1 218

\*\* . Correlation is significant at the 0.01 level (2-tailed)

***H<sub>4</sub> : There will be a statistically significant relationship between Approach Acceptance and Internal locus of control.***

The results indicated a positive correlation between the two variables with a correlation coefficient of 0.373. A statistical significance level of 0.01 was set, indicating a 1% probability that this result was due to random chance. These results suggest that individuals with a high internal locus of control are more likely to exhibit approach-acceptance behaviors. One possible explanation for this relationship is based on existential theories of personality. According to this theory, individuals with a strong internal locus of control are more likely to seek out experiences that help them understand their lives and find meaning (Yalom, 1980). This desire to understand and give meaning to their lives can extend into death, causing people with an internal locus of control to approach death with curiosity and openness. People who have an internal locus of control use more active coping strategies to deal with the fear of death, such as seeking information and understanding about death. Hence, fourth hypothesis is accepted.

**Statistical Analysis and Interpretation of Hypothesis 5:**

**Table 1.6 Showing the Correlation between Escape Acceptance and Internal Locus of Control**

		Escape Acceptance	Internal Locus of Control
Escape Acceptance	Pearson Correlation Sig. (2-tailed) N	1 218	.235** .000 218
Internal Locus of Control	Pearson Correlation Sig. (2-tailed) N	.235** .000 218	1 218

\*\* . Correlation is significant at the 0.01 level (2-tailed)

**H<sub>5</sub> : There will be a statistically significant relationship between Escape Acceptance and Internal locus of control.**

The results showed a statistically significant positive correlation between Escape Acceptance and internal locus of control ( $r = .235, p < .001$ ). This means that individuals with higher levels of escape acceptance tend to have a higher internal locus of control. The correlation coefficient of .235 indicates a weak positive relationship between escape acceptance and internal locus of control. attributional style theory suggests that individuals who have an internal locus of control tend to view negative events as controllable and therefore, are more likely to take responsibility for their actions and the outcomes of those actions (Peterson & Seligman, 1987). Thus, individuals with an internal locus of control may view death as a controllable event, and therefore, may be more likely to accept it as a means of escaping the pain and misery of life. Hence, the fifth hypothesis is accepted.

**IV. Implication**

- Understanding the relationship between attitudes toward death and locus of control can inform psychological interventions. Doctors can tailor interventions to address a patient's specific Death Attitude based on the person's locus of control. For example, people with internal locus of control may benefit from cognitive behavioral therapy to improve negative thoughts associated with death anxiety.
- Healthcare professionals involved in end-of-life care can use this knowledge to better understand patients' attitudes toward death and coping with life events. By recognizing patients' attitudes toward death and their locus of control, physicians can provide more personalized and supportive care, allowing patients to feel empowered and respected in the decision-making process.
- Based on the findings of this research, courses can be designed to promote healthy dying attitude and improve people's ability to manage their lives. By addressing the fear of death and developing internal locus of control, these programs can help people cope with the anxiety that exists and move forward with life.
- Employers can implement health plans that take into account employees' attitudes toward death and their attitudes toward management. By providing resources and support to help employees develop a healthy approach to death and strengthening their internal locus of control, organizations can improve employees' overall health, productivity and job satisfaction.
- Counseling and group programs can be tailored to each individual's different approaches to death. Group interventions that encourage discussion about death and sharing of experiences can help people explore their beliefs, fears, and coping skills in a supportive environment, thereby promoting mental health and development.

**V. Limitations**

- A sample of Indian adults may not be representative of other nations based on their cultural backgrounds, beliefs, and values.
- This study relies on self-report measures that are prone to biased responses such as social desirability.
- Participants may be reluctant to express their true attitude toward death, which may affect the validity of the results.
- This study only focused on young people aged 18 to 30. This restricted age group may not be representative of individuals in other age groups who may have different perspectives on death and locus of control.
- This study only included participants who could read and understand English. These exclusion criteria may limit the representativeness of the sample and affect the generalizability of the results.

**VI. Suggestions for future research**

- Given that this study was conducted on a specific sample of youth in India, future research could replicate the study using a different sample to ensure that findings exist across different cultures and ages.

- Future research could use longitudinal research designs to determine how attitudes toward death and locus of control change over time and how these changes may affect different lifestyles.
- The current study used self-report measures, which may be subject to response bias. Future studies could use other measures to confirm the validity of the results.
- Future research might consider qualitative research methods, such as interviews or focus groups, to better understand people's ideas and locus of control, and the role death and control will play in this process.

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