A SOCIOCULTURAL EXPLORATION OF THE CONCEPTS OF DEATH AND DYING AMONG FILIPINO CHILDREN

Abstract: Death is a challenging topic to discuss with children. The present study explored children's understanding of death and dying using a phenomenological inquiry design. A sample of eight Filipino children with previous experiences of a death of a relative in the past six months were interviewed to examine the processes underlying children's understanding of death and dying. Analysis of the interview transcripts resulted in the identification of three major categories representing children's understanding of death and dying, namely, cognitive orientation, cultural orientation, and social orientation. Findings suggest that children attribute death to old age and cessation of body functioning, Moreover, they believe that death is a matter of time and there is a spiritual component in dying. This study shed light on the importance of socio-cultural factors such as spiritual values in understanding death and dying.

Key words: Cognitive orientation, Conceptualization of death, Cultural orientation, Death, Development of beliefs about death, Dying, Social orientation

INTRODUCTION

Studies on death-related encounters, attitudes, and beliefs or practices in children have shown important differences depending on racial, ethnic, cultural, and religious background (Schonfeld & Smilansky, 1989). Specifically, in a review of 40 studies, Speece and Brent (1984) described three kinds of early ideas children have in relation to death: irreversibility, that is, death is irrevocable and permanent; non-functionality or cessation of physical mechanisms; and universality, with death being inevitable and an immediate possibility. Mature understanding of death includes ideas about irreversibility, non-functionality, and universality, but also causality (Speece, 1995). These findings resonate with the theory of Nagy in her seminal paper on children's understanding of death (Nagy, 1948) and Alexander and Adlerstein's study on children's affective responses to death (Alexander & Adlerstein, 1958). Nagy (1948) suggested three stages in children's understanding of death, with children in the early years believing that death is temporary; this initial conceptualization develops to include the personification of death (e.g., that death is a person), and, finally, reach the understanding that death is a cessation of physical functioning. On the other hand, Alexander and Adlerstein (1958) showed that concepts denoting death evoked increased emotional response. The above studies have served as the basic early source of evidence on beliefs about death by children as young as three years old.

Recent research on children's ideas about death have confirmed previous findings but also revealed cultural effects. Specifically, in the Philippines the understanding of death among children has been found to be aligned with Speece's (1995) theory of the characteristics of death, namely, irreversibility, universality, and causality of death among children (Macabulos, Adona, & Sedilla, 2015). In Asian samples, however, children place greater emphasis on personal, psychological, and physical state in their perceptions of a "good" death (Yang & Park, 2017) compared to their Western counterparts. Furthermore, in studies among Asian children, whose age ranged from five to eleven years, the concepts of divine providence (Macabulos et al., 2015), negative emotional states and low level of attachment (Yang & Chen, 2009), and parting with loved ones (Yang & Park, 2017) emerged. These ideas reflect a relational perspective rather than simply "individual" death. Our study aimed to further investigate the relational aspect of death and dying in Filipino children, with emphasis on the socio-cultural aspects of what one needs to be before passing away.

Children's perceptions of death

As children grow and hear older family members talk about death, they acquire various schemas explaining it. As early as preschool, children tend to depend on their parents to deal with grief (Bugge, Darbyshire, Røkholt, Haugstvedt, & Helseth, 2014) and manifestations of grief as reflected in behavior, bodily expressions, and play. However, their capacity to comprehend and explain death is constrained by their ability to grasp abstract concepts and verbalize their thoughts (Stylianou & Zembylas, 2016). Specifically, to help children express their thoughts, researchers have used tools like completing stories (Yang & Chen, 2009), drawing pictures related to death (Bonoti, Leondari, & Mastora, 2011; Yang & Park, 2017), and participating in death education (Lee, Lee, & Moon, 2009). Other studies investigated how children understand death-related concepts through children's picture books and storybooks (Lee, Kim, Choi, & Koo, 2014; Malcom, 2011; Poling & Hupp, 2008).

Research on children's understanding of death has shown that children as young as three years old already have ideas about death (Agrawal, 2019). There is evidence that three to five-year-old children understand the universality of death when they had come across death in real life or had discussed death with an adult. Eppler (2008) found that children's stories indicated that they had discussed death with a surviving guardian or parental figure, especially when dealing with the death of a parent. However, cross-cultural research showed that Chinese children reported not gaining appropriate information on death, or loss, from parents or other family members (Yang & Park, 2017). This was likely due to Chinese and Korean parents being reluctant to discuss topics of death with their children. In another cultural context, Cyprus, children expressed anxiety and insecurity to talk about death (Stylianou & Zembylas, 2016), and this led the researchers to conjecture that there is need for adults to be able to engage in conversations about death so that children can move from death denial to death acceptance. Finally, in another study of Asian children's understanding of death, it was found that their ideas were organized around causality, emotional reaction, sociocultural practices, and character status (Wong, 2010). Wong's (2010) study showed that causality of death is a universal concept among children, with children understanding that people die for various reasons. Likewise, children's views on death were associated to emotions about a person's character (Wong, 2010). For example, children were empathic with the death of a "good" person, but not with the death of a "bad" person, with the latter deserving to die. Lastly, with regards sociocultural practices, Wong (2010) attributed children's capacity to talk about sorrow and death based on how adults explained death to them and how tradition had been passed to them when encountering the death of a significant person.

To sum up, it seems that the sociocultural context shapes children's conceptions of death and dying. However, whereas many Asian studies explored how younger children understand death and the process of dying, there is a dearth of such studies in the Philippines. The present study aimed to explore how children understand death from the perspective of social and cultural influences on children's conceptualization of death.

Religion, death education and mass media effects on death conceptions

Children in various cultures vary in the way they are exposed to death ideas or death-related practices (Callanan, 2014). The sociocultural underpinnings of children's death conceptions are affected by their family's religious and cultural background (Wong, 2010). That is, when adults talk about the afterlife of the deceased, they address children's understanding of death as well as their emotional needs, such as grief (Bugge et al., 2014). Cultural factors related to parents' and other significant persons' role as emotional buffers provide the ground how a child understands the continued relationship with the deceased. It should be noted, however, that sociocultural effects are difficult to disentangle from religious beliefs and practices. In a study by Gupta (2011), it was found that the idea that death is a transition and that what happens in the afterlife is a function of how the person lived their life when they were alive (karmic philosophy) was prevalent among Hindus in the United States. Indeed, religion is important for the formation of children's conception of death. Specifically, children in Catholic schools whose ages were between five to eleven years old, stated that life cessation is linked to psychobiological states (liveness of the body) and perceptual states (subjective experiences) rather than emotions, desires, and cognition (knowing and believing) (Bering, Hernández-Blasi, Bjorklund, 2005). However, the idea that being good, as compared to being bad, is advantageous for afterlife was not evident in the argument that emotions are related to character status when, for example, a person is characterized as a "good person" (e.g., police cops) and the other as a "bad person" (e.g., someone who was found guilty in committing a crime).

Another source of ideas about death is death education classes, classroom discussions about grief and grieving, and psychoeducational programs (Corr, 2016; Siegel, Mesgano, & Christ, 1990; Stylianou & Zembylas, 2016). In a study with death education classes death concepts and the dying process were explicitly discussed with children aged 5 to 6 years (Lee et al., 2009). Classroom activities highlighted death-related concepts such as causality, irreversibility, finality, inevitability, and old age, using examples from nature such as seasons and how they change, the life cycle of leaves or animals and, lastly, changes people undergo as they grow and the life cycle of humans. The activities were presented through slide and puppet shows, coloring

materials, self-portraits, children's books, and discussions in the form of storytelling. Children attending the death education class scored higher on all five categories of the death concept (i.e., causality, old age, irreversibility, finality, and inevitability) compared to those who were not exposed to any of the death education activities (Lee et al., 2009). A study conducted in Cyprus followed different format. The researchers integrated grief and grieving discussions in Health Education classes (Stylianou & Zembylas, 2016). Designed for Grade 5 students, the intervention aimed to develop appropriate pedagogies for children of different ages, cultural or social settings, and moral or religious beliefs. The intervention made use of scenarios illustrating the various emotions associated with grief, factors affecting grieving, support to grievers using memories, and religious practices addressing grief. Stylianou and Zembylas (2016) concluded that when grief and grieving are discussed in the classroom, children demystify the negative emotions accompanying death, loss, and bereavement.

In the absence of death education classes, mass media, including the internet, come in to fill gaps in children or pre-adolescents' ideas about death (Yang & Chen, 2009). When children are not given the opportunity to interact with adults regarding their experiences with the death of a loved one, they may most likely turn to messages in social media (Yang & Chen, 2009). Wong's study (2010) warned that because of exposure to various media, children may receive inaccurate information about death. Death-related concepts will be better understood and expressed when supported by teachers and parents (Wong, 2010). Finally, one of the main sources of learning about death is exposure to characters in movies, computer games, or media news (Agrawal, 2019; Koocher, 1974).

To sum up, as children start formal schooling, they get exposed to settings other than their families. In this sense, they come across ideas about death from the broader socio-cultural context. As Piaget theorized, children in this stage tend to learn various strategies to describe their own experiences including labeling what they think and how they feel about certain experiences (Eccles, 1999). Our study assumed that children's self-reports of their own unique experiences about death and dying can reveal the socio-cultural background of such ideas.

The present study

This study investigated Filipino children's understanding of death and their feelings towards it. Using the findings of research in Asian contexts (Wong, 2010; Yang & Chen, 2009; Yang & Park, 2017), the study was designed to bring to the fore the emotional and sociocultural nature of children's understanding of death. Although the study is qualitative, the interview guide made use of the dimensions identified in

research related to death, dying, and bereavement, and particularly causality, irreversibility, finality, inevitability, and old age (Lee et al., 2009; Schonfeld & Smilansky, 1989; Speece & Brent, 1984). Our expectation was that besides universal aspects of children's understanding of death and dying, there will be significant sociocultural and emotion-related beliefs that are uniquely Filipino.

METHOD

Design

The study applied the phenomenological approach in qualitative research. According to Moustakas (1994), the central tenet of this approach is to identify a person's experiences about a certain phenomenon and describe their details. From individual descriptions, universality of meanings is then derived which describe the essence of the experiences (Moustakas, 1994; Meriam, 1998). The number of participants for the study was determined based on the principle of phenomenological inquiry and data saturation. According to Boyd (2001), phenomenology requires interviews from two to ten participants, while Creswell (1998) recommended three to 13 participants. This study settled to include eight interview participants since the interviews had already reached the maximum data saturation range recommended by Boyd (2001) and Creswell (1998).

Sample

Eight preschool and primary school students from a private educational institution participated in the study. There were four male and four female students. Their age ranged from six to nine years ($M = 7.5$, $SD = 1.19$). Prior to the interview sessions, consent for participation was asked from the children's parents and teachers. All participants were born in the Philippines (Filipino citizens) and had experienced death of a family member in the past six months. These inclusion criteria were set by the researchers to ensure that the participants had real-life experiences of death as required in phenomenological research (Groenewald, 2004).

The interview

The researchers developed a two-part instrument to collect needed data. The first part regarded the participants' demographic information. The second part consisted of semi-structured in-depth phenomenological interviews to examine children's ideas on

death and dying. The questions asked and the topics discussed with children included the main dimensions of the death concept, namely causality, irreversibility, finality, inevitability, and old age. The participants were interviewed using an interview guide (see Appendix A). The interview questions were open-ended and validated by experts in child and developmental psychology. The interview guide was developed based on the model of Speece (1995) and Asian studies on children's understanding of death (e.g., Wong, 2010). Since the participants were non-English speakers, open-ended questions were constructed in Filipino (mother tongue of the participants).

Mode of analysis

As the standard practice, the audio-recorded interview sessions were transcribed verbatim and corrected by the researchers (see Schmidt, 2004). Each interview transcript was then read multiple times to ensure that every detail of the interview was captured in the transcription.

Since the responses gathered were transcribed in Filipino language, language experts were asked to translate all responses in English using transposition technique. In this sense, language experts translated the materials with changes in grammatical structure without altering meaning. This material was used for analysis. The researchers extracted the statements, phrases, or words that depicted children's conception of death and dying. Two lists were created –a non-redundant list and a list with redundant units of meaning. These two lists were examined to make sense of the data collected holistically. The researchers clustered all possible emerging themes by grouping units of meaning together to form units of significance. Common or overlapping themes were given special consideration. As more themes evolved, it became necessary to look for themes that were common or unique to each interview. A general list of the themes was then created. The researchers met again the participants to discuss the themes (both general and unique) identified in the analysis of each interview to ensure that the themes accurately reflected what the children meant in the interview. All participants agreed with the themes the researchers had identified based on their interpretation of children's verbatim reports (see Groenewald, 2004). Two of the researchers independently evaluated the categorization of responses and the emerging themes. Disagreements were resolved with discussion.

Procedure

In getting in touch with the eight children, a letter of intent was given to the school head, together with the research proposal and protocols. Upon getting the approval

of the school head, guidance counselor, and teachers, the informed consent were distributed to parents whose families were within the criteria set for selection of participants. From the 13 qualified children, only eight parents and their children responded positively.

Each interview session approximately lasted around forty-minutes. All sessions were audio-recorded, with participants being interviewed during their free time. A debriefing process was implemented to address feelings that might have surfaced in the process of data collection. A registered guidance counselor, licensed psychologist, and the respondents' parents/guardians were present throughout the whole process.

RESULTS

Based on the transcripts of the interviews, an in-depth analysis was made on the responses grouped according to themes. The analysis aimed at identifying the salient statements, descriptions, and expressions made by the participants during the interview sessions. The participants willingly shared their experiences with loved ones who had died (parents, grandparents, uncles, aunts and cousins) as well as the specific problems they had encountered along the way. Some participants disclosed how they felt about the loss and how their parents explained where the people who died would go. The data generated were organized and explored using the within-case and cross-case analyses to examine the themes and coherence of the participants' responses with reference to the meaningfulness and saliency of the statements. Interrater agreement for was 70%. Disagreements were resolved with discussion between the researchers.

Perceptions of death and dying

Three themes emerged from the analysis of significant statements made by the children. They were labelled: *cognitive orientation* (i.e., knowledge of what psychological or bodily processes continue to function, or not, after death; time perspective; universality, and biological causality); *cultural orientation* (i.e., reference to heaven, purgatory, hell, Jesus and Evil, good and bad deeds, and life after death), and *social orientation* (i.e., good people will not die and bad people will die) (see Appendix B).

Cognitive orientation

What functions after death. The responses by the children suggested that a dead person cannot move, think, eat, or speak anymore. For example, participants stated
They can't move anymore (Female, 7 years old)
Asleep but no longer breathing (Male, 9 years old)
Knowledge that there is cessation of bodily or psychological functions after death suggests that children generally understood that when people die, they can no more do what living people do in terms of behaving, thinking and feeling. Interestingly, one participant stated that a dead person is asleep but is no longer breathing. This belief is potentially based on a metaphor used by Filipinos which is observed during funerals, when attendants may comment that the dead person looks like he or she is sleeping peacefully inside the coffin. Children likely interpret such a statement literally, since a dead person's eyes are closed, although they still understand that bodily functions cease after death.

Time Perspective. As stated by the participants:
He can't live anymore because he (pertaining to his grandfather) has been buried, but he will continue living in here (pointing to his head). (Male, 7 years old)
They (dead people) will no longer be able to spend time with their family (Female, 9 years old)
Such statements suggest that children believed that a person may no longer live in a physical form with his or her loved ones but may continue to exist in the memories of those left behind

Universality. In this category, two important issues emerged. As stated by the participants:
When one's old or one has illness he or she can die (Male, 6 years old)
Mom and Papa will die when they get older (Male, 7 years old)
Everyone dies because of old age (Female, 8 years old)

These statements suggest that children believed that aged and old people will die while young people would not. This suggests that death is conceived as inevitable among the elderly. The primary characteristic of people who die is their age - that they are old. When asked why this is so, the children responded that older people had lived long enough and that they are bound to die.
The attribution of death to old age led participants to believe that only old people die, and young people are spared from death just because they are young. This belief

is reflected in how the children see themselves when they die, that is, they will die sometime in the future when they get old and only their children (who are young) will continue living.

As stated by the participants:

> *My parents will die when they get old, and I will die too when I get older (Female, 8 years old)*
>
> *Nothing is permanent in this world. Like us, everyone will die, and it is only our children who will live (Female, 8 years old).*
>
> *I won't die anytime soon because I'm still young (Female, 7 years old).*

Biological causality. When asked what causes people to die, a biological causality theme emerged. It included being ill (disease), not breathing and closing one's eyes. The responses indicated that death is caused by illness like increased blood sugar levels, blood clot, and heart attack. As stated by the participants:

> *People will die when their blood sugar rises (Female, 8 years old)*
>
> *Had a heart attack (Male, 7 years old)*
>
> *When one's old or one has illness he or she can die (Male, 6 years old)*
>
> *Blood is clotting (Female, 7 years old)*
>
> *Gets ill with cancer (Female, 9 years old)*

Interestingly, the younger children also had concrete ideas *how* a person dies. They were aware the when people die, they close their eyes, do not breathe, cannot be awakened, and do not move. A female respondent aged 8, described that when a person dies, he or she cries at first, closes his or her eyes and stops breathing. This vivid memory of how one dies is indicative of seeing one who actually passed away.

> *They cry before they die and then they close their eyes and then they no longer breathe (Female, 8 years old)*

Finally, when asked what happens to a person *after dying*, the responses included decay, worms eating the body, and bodies turning into skeletons. One interesting response reflected a transcendental thought saying that a person knows he or she is going to die and after dying will see him or herself. As stated by the participants:

> *"Their bodies get eaten by wiggly things just like what I saw in fruits that are over ripe." (Female, 7 years old)*
>
> *"Skeletons come out of the body when a person dies." (Male, 7 years old)*
>
> *"My grandpa will see himself asleep and not breathing, then he will be called by the angels." (Female, 9 years old)*

Cultural orientation
The second cluster of themes that emerged from the analysis were those categorized

under cultural orientation. Cultural orientation refers to children's views that resonated well with the findings from Asian studies as well as those considered to be relevant to the Filipino culture. In general, it included themes concerning afterlife and how life should be lived on earth.

Heaven, purgatory, hell and the concept of Jesus and Evil. The children's responses generally covered what a person does when he or she enters heaven. Insights on their concepts of heaven include heaven being a place where one usually does what one is accustomed to on earth – that is – eat, think, and walk around in heaven. However, the respondents were aware that there are conditions to going to heaven and staying there. These include being kind so that Jesus may allow them to live again, and when Jesus returns to earth so do the souls in heaven. This inclination to believing in a supreme being and adhering to the teachings of their religion are characteristic of children in the Philippines compared to other Asian countries[1]. Characterized as a religious country, Filipino parents instill their children at a young age the cost of not being good, that is, not having access to heaven. As stated by the participants:

In heaven, his spirit can eat (Male, 6 years old)
God will give them food (Female, 7 years old)
They can live again. Jesus will revive (Male, 8 years old)
When one is kind, he/she goes to heaven (Female, 7 years old).

The responses show how one will live after dying. Culling from the children's responses, death is a gateway to being able to live again.

Good and bad deeds and life after death. Interestingly, the children emphasized that what happens to a person after dying would depend on whether they believed in Jesus (if they did not, the evil will have a way with them) and whether they lived a life of good deeds. Specifically, the children's responses referred to heaven, purgatory and hell, with purgatory being described as a place where a person goes to be cleansed and where a supreme being is to decide on the weight of one's deeds on earth. As stated by the participants:

If they keep being kind, they will live again as Jesus returns (Male, 8 years old)
God blesses other people he takes those who are kind-hearted people (Female, 7 years old)
When one has sin, in the purgatory; when one doesn't have any, he/she goes to

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[1.] The children interviewed were Roman Catholics, which is nearly 80% of the total population (Philippine Statistics Authority, 2017). Other religions in the Philippines are the Muslim religion, Buddhism and Hinduism.

heaven, but no human has no sins that's why everyone goes to the purgatory first and that's where the soul is cleansed (Female, 7 years old)

If he/she is kind, he/she goes to heaven and he/she will have fun there (Male, 9 years old)

Social orientation

The third cluster of responses were organized under the topic of social orientation. The themes in this cluster were specific to how, presumably, the children were socialized about concepts of death and dying. Specifically, the children expressed beliefs that were assumed to be nurtured by their caregivers.

Good people will not die, and bad people will die. Children expressed the belief that the key to gain access to a better 'afterlife' is whether a person possesses a particular trait (e.g., being good or bad). The respondents pointed out that kind and goodhearted people will continue to live after death, while bad people will not live again. The responses reflect a belief that there is a deity that decides on the fate of people who died based on dispositional characteristics. However, these dispositions are only related to emotional and social relationships. As stated,

If they stay kind they will live (Female, 8 years old)

When one is kind, one goes to heaven where everything is freely given (Female, 7 years old)

My grandpa takes good care of me. He will have a good life in heaven (Female, 9 years old)

If a person does bad things in life, he won't get a good life in heaven. He might end up in hell, he will be fried (Male, 9 years old)

To be noted, one respondent (male, 9 years old) mentioned that dying is related to one's being kind or not: if a person is not kind, he or she will still be given a chance to become so and is not allowed to die, yet. As stated,

Not everyone dies. The kind ones go first. The bad ones die last so that they have the chance to change (Male, 9 years old)

This excerpt further suggests a contradiction with the belief that "good people live". It reflects a belief that good people die first compared to bad people. This might reflect attributions made when a "good" person dies, likely when one is young.

DISCUSSION

Three categories of themes were abstracted from the children's responses in the interviews: cognitive, cultural, and social orientations. These orientations constitute the Filipino children's belief system about death and dying. Our findings suggest that, besides the cognitive orientation that follows the universal pattern of beliefs, as described in prior research (Wong, 2010; Yang & Chen, 2009; Yang & Park, 2017) the cultural and social orientations are the product of dialogues between the children and their caretakers, presumably because all participants had some experience of death in their families. Filipino families are known to be extended families with the grandparents and relatives living with the children's nuclear families (David, Sharma, & Petalio, 2017; Liwag, dela Cruz, & Macapaggal, 1998; Tarroja, 2010). The extended family system exposes the child to various experiences linked to death and dying.

In general, as regards the cognitive orientation, the children's ideas were in line with existing theories that explain how children come to understand death and dying (Agrawal, 2019; Speece, 1995; Speece & Brent, 1984; Nagy, 1948). Moreover, although our study was not longitudinal, children's beliefs seem to support findings from earlier studies that older children give more mental cessation of life responses than younger children do (Bering et al., 2005). This means that older children understand that part of what dies in a person is one's conscious awareness, or an awareness of one's surroundings. The idea about a person's ability to mentally function after death seemed to be prevalent in children who were nine years old compared to the younger ones. Furthermore, the cognitive orientation themes could be organized along Yang and Chen's (2009) five categories of understanding death, namely, causality, old age, irreversibility, finality, and inevitability.

An interesting finding concerns the irreversibility of death, that is, the inability to undo processes related to transition from being alive to being dead (Lee et al., 2009; Lowrie, Ray, Plummer, & Yau, 2018; Wong, 2010; Yang & Chen, 2009). The children's responses to the question whether a dead person can become alive again revealed that they understood that once a person dies coming back to life is not possible. Yet, the respondents pointed out that people continue living in the memories of their survivors (pointing to head) because people who died cannot be physically present. This finding is consistent with those suggesting that children develop a realistic view of death between 5 to 7 years of age (Callanan, 2014; Speece & Brent, 1984), and that Filipino children's conceptions of death are, in general, similar to those of children in other countries (Macabulos et al., 2015; see also Bering et al., 2005) and the understanding of life being continued on a different plane (non-corporeal continuity) (Macabulos et al., 2015).

The third theme identified in this study is universality of death. Believing that everyone dies, especially when one gets older, has been a pattern of response across several studies (Lee et al., 2009; Orbach, Talmon, Kedem, & Har-Even, 1987; Schonfeld & Smilansky, 1989). Interestingly, the responses of the children reflected a merging of two theorical categories, that is, old age and universality. Children's beliefs integrated causality (old age) with universality (everybody dies at some point).

Summing up, as regards the cognitive orientation, for this group of Filipino children, understanding of death and dying could be described using the dimensions identified in extant literature and which guided the questions posed in the interview. This confirmed our expectation. However, what seemed to be unique to this group of children was the integration of causality with other dimensions of the death concept. It may be that for this group of children, the dialogues during the interview had been extended and the interview questions were able to bring to the fore ideas that might not have been obvious had the interview been unstructured. Another potential explanation is that all participants had been exposed to death situations and could elaborate their personal experiences, particularly as discussed with their caretakers. This further supports our prediction that children's responses, besides the cognitive component, would have a cultural and social aspect as well. These perceptions reflect the social influence in the enculturation of death beliefs.

As regards the socio-cultural underpinnings of children's narratives of death and what happens after dying, our findings suggest that children's beliefs have been observed in other Asian cultures as well, that is, living a "good" (ideal) life promises individual salvation (Yang & Chen, 2009). The idea that one's "goodness" or "badness" will be evaluated in afterlife can be traced back to the value system embraced by parents and teachers and conveyed to the children. From the data gathered, and across the various categories of themes already discussed, children put primary importance to how a person has lived his or her life on earth. A person who believes in a deity and has lived a life of piety and goodness will have a better afterlife than those who did not live in such a way. A person who needs "soul-cleansing" will be subjected to purgatory. These beliefs among Filipino children reflect their exposure to religious doctrines and spiritual concerns. This has been already pointed out in research on children's spirituality and understanding of death (Corr, 2004; Gupta, 2011) and generalize to the Filipino culture.

However, our research further showed that being good is associated to emotions and social relations rather than just being religious. This social dimension underlying children's ideas about death and dying is of great importance and has not been sufficiently underscored in previous research. The complexity of emotions related to the death of a significant other can be understood in the context of one's relationship

networks. The child who grows up with consistent contact with caregivers (e.g., communicates with them on a regular basis), may be able to clarify his or her thoughts and emotions with the grown-ups. Consequently, this facilitates processing of own beliefs vis-à-vis older people's experiences and beliefs. Finally, our findings highlighted enculturation of Filipino beliefs about who may eventually die first, that is, good people die first unlike the bad people who live longer. Dying is associated with the reward of having a better afterlife, most especially if their lives on earth have mostly been difficult (e.g., going through prolonged sickness). Thus, people who die early are not only rewarded but are also characterized as possessing desirable characteristics such as kindness and generosity.

In conclusion, our findings confirmed the theoretical frameworks accounting for children's understanding of death and dying (see Alexander & Adlerstein, 1958; Nagy, 1948; Speece, 1995; Speece & Brent, 1984). However, our research also revealed beliefs that go beyond the cognitive dimension and highlight culturally and socially shared beliefs (see also Malcom, 2011; Wong, 2010). As early as six years of age, children associated death with religious beliefs such as heaven, hell, or staying in the purgatory. This means that religious beliefs and spirituality are indispensable components of the concept of death. Whether this is a universal aspect of the concept of death needs to be explored in future research. The children in this study have been socialized to understand death from a cultural and social perspective. Filipinos are known for their tightly knit extended families where the death of a relative is seen as an opportunity for distant relatives to come together. How caregivers explain why a grand-father, or an aunt, died, and what will happen to their soul and body after death is critical for ideas children acquire about death. Further, the children understood that death is a state that cannot be reversed, and it makes all bodily functions stop. However, death is also believed to be a state in which a person enters the afterlife and continues living depending on what one did while alive. This system of ideas about death and dying that integrates cognitive, cultural and social schemas, nevertheless, is not necessarily without internal contradictions. Contradictions are most evident when one needs to explain the death of young or good people. Whether and when these contradictions are resolved is a necessary next step in research.

Limitations of the study and implications for future research

The present study contributes to the limited literature on Filipino children's ideas about death and dying. While there have been studies with children in Asian countries, the present study focused on a cultural context that differs from others in terms of religion (i.e., catholic vs. Hindu or other) (Yang & Chen, 2009). Philippines

also differs from Western catholic countries because of its Asian background. This makes the Filipino context unique because it integrates different cultural traditions. Yet, future research should explore how various ethnic groups in the Philippines may see and understand death and the dying process. This will provide evidence on the multicultural influences the Philippines has and the strength of enculturation processes in Filipino children's knowledge about death and dying.

A second contribution of the present research is that the children that participated in the study had some personal experience with death unlike other studies that addressed a general population of children (Hunter & Smith, 2008; Stylianou & Zembylas, 2016; Wolchik, Ma, Sandler, & Ayers, 2008). However, because of the small sample size, since the methodology adopted was phenomenological, it was not possible to have more information on the characteristics of the deceased (e.g., age, gender, core or extended family member) and their impact on children's ideas. Another limitation is that it was not possible to trace the source of children's ideas about death, that is, parents or the extended family members, priests, teachers, neighbors, peers, etc. Future research should address the above limitations but also investigate the effects of developmental and individual differences factors on children's ideas about death.

Finally, another limitation of the present study is that it was not possible to record the content of the children's death experiences and their potential association with the ideas about death or dying. For example, there were children who shared vivid thoughts, the point in time their relatives had died and whether they had been present when that had happened, while some others had only participated in a funeral. Questions on thoughts and emotions experienced as well as the experience of changing social relationships during or after death should also be explored in future research. Such evidence can provide valuable help to health practitioners and socio-emotional support groups as to how they will explain, help deal, and address children's emotions and concerns.

In conclusion, the present study showed Filipino children's understanding of death and its cognitive, cultural and social underpinnings. Although children mainly relied on biological explanations of death, they also used spiritual and religious concepts as well as social coherence factors, such as being good or bad person. Most importantly, this study revealed how children try to accommodate potential contradictions between prevalent explanations of death, e.g., goodness, and reality, namely that "bad" persons may live longer than good ones. Whether such contradictions persist in adulthood or old age is a challenge for future research.

Appendix A: Questions in the Interview Guide

English: Can a dead person move? Get hungry? Speak? *Filipino: Nakakagalaw ba ang isang taong patay na? Kumakain ba ang taong patay na? Nakakapagsalita pa ba ang isang patay?*
English: Can a dead person become a live person again? Is there anything that could make a dead person come back to life? *Filipino: Kapag ang isang tao ba ay namatay, mabubuhay ba siya ulit? Paano siya mabubuhay ulit? Ano ang kailangan niyang gawin?*
English: Does everyone die at some time? Will your parents die someday? Will you die? *Filipino: Namamatay ba ang lahat ng tao? Bakit?Mamatay ba ang mga magulang mo?Mamatay ka ba?*
English: What makes a person die? *Filipino: Bakit namamatay ang isang tao?*
English: Where do dead people go? Where do you go when you die? *Filipino: Saan napupunta ang mga namamatay na tao? San ka pupunta kapag namatay ka?*

Appendix B: Summary of significant themes

Major themes	*Sub-themes*
1. Cognitive Orientation	a. Knowledge of functional vs. non-functional
	b. Time perspective
	c. Universality
	d. Biological causality
2. Cultural Orientation	a. Heaven, purgatory, and hell
	b. Jesus and Evil
	c. Good and bad deeds
	d. Life after death
3. Social Orientation	a. Good people will not die
	b. Bad people will die

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138

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