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Death & policy: toward an
understanding of motivational reactivity
as a predictor of partisanship in
response to mortality salient media

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BOSTON UNIVERSITY
COLLEGE OF COMMUNICATION

Dissertation

**DEATH & POLICY:
TOWARD AN UNDERSTANDING OF MOTIVATIONAL REACTIVITY
AS A PREDICTOR OF PARTISANSHIP IN RESPONSE
TO MORTALITY SALIENT MEDIA**

by

SARAH PARKER WARD

B.A., State University of New York at Potsdam, 2009
M.A., Marist College, 2012

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Approved by

First Reader

James Cummings, Ph.D.
Assistant Professor of Emerging Media Studies

Second Reader

Kelsey Prena, Ph.D.
Assistant Professor of Emerging Media Studies

Third Reader

Christopher Wells, Ph.D.
Associate Professor of Emerging Media Studies

Fourth Reader

Andrey G. Vyshedskiy, Ph.D.
Adjunct Neuroscience Lecturer
Boston University, Metropolitan College
Founder & CEO
ImagiRation LLC

DEDICATION

For Weheeley, my constant inspiration to keep going.

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SARAH PARKER WARD

Boston University College of Communication, 2022

Major Professor: James Cummings, Ph.D., Assistant Professor of Emerging Media Studies

ABSTRACT

As biomedical advancements continue to improve, the line between life and death continues to blur. At the same time, the American populace is challenged by a variety of competing cultural values in respect to end-of-life rights and post-mortem care, the result of which is often heated debate within an already polarized political arena. These realities make the prospect of satisfactory advancement of end-of-life care reform worrisome. The present study sought to find a constructive pathway forward by exploring the psychological framework for mortality salient processing posited by terror management theory as it relates to subsequent affective polarization. In working to bolster this theory's predictive power by incorporating individual-level cognitive traits, namely motivational reactivity and self-compassion, in conditional process models, the author also aimed to gain a better understanding for the individual-level conditions that support political cohesion in the face of death-related policies and messaging. Though findings did not achieve statistical significance, they signal an important role of innate traits as predictors of mortality salience processing while also calling for additional studies that reliably

account for lifestyle influences.

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LIST OF ABBREVIATIONS

CDC	Centers for Disease Control and Prevention
LC4MP	Limited Capacity Model of Motivated Mediated Message Processing
MAiD	Medical-Aid-in-Dying
MS	Mortality Salience
TM	Terror Management

CHAPTER I: INTRODUCTION

As the innate companion to life, death is a ubiquitous experience that pervades all modalities and forums of human communication: from early cave drawings to contemporary emojis. Though still considered a taboo topic by more than two-thirds of Americans (Hamel, Wu, & Brody, 2017), one specific area in which death-related discourse is becoming increasingly overt is the political arena. Indeed, much of how we die and how our bodies are subsequently cared for posthumously is dictated first and foremost by state and federal policies, often over culture, religion, or even clinical purview. In fact, death itself has been defined in this country by legislative constructs for more than forty years, albeit with notable definitional differences between states (National Conference of Commissioners on Uniform State Laws, 1980).

In light of the deadly COVID-19 pandemic that has swept the globe since early 2019, human frailty and expiration have become markedly more salient for the American populace. Nearly two years in, fierce debates between political actors over how to best avoid coronavirus deaths among the nation's citizenry, whether through regional shut-downs, masking requirements, or vaccine mandates, remain center stage. Yet tensions over death rights were already coming to the fore of legislative debate well in advance of coronavirus' arrival. Issues related to the right to die, the right to try, more natural disposition methods, and the therapeutic use of psychedelics in end-of-life care — to name only a few — have transitioned from formerly fringe-group interests to more mainstream movements within a few decades. As Guttman and Moreno (2019) write in the opening of their robust text on the evolution of bioethics, “The answers to these life-

and-death questions remain highly controversial, and it has become not just health care professionals' or judges' but everybody's business to answer them."

Why has this become everybody's business? Because while all generations prior were equally afflicted by this "leading cause of not living," as political satirist Samantha Bee (2021) recently framed it, Americans today are uniquely imbued with a panoply of biotechnological choices when it comes to their final moments, or rather what could be their final moments. "Death is not a single event, but a process that may be interrupted, even reversed," wrote neurologist Dr. Sanjay Gupta in 2009, "And here's the exciting part -- at any point during this process, the course of what seems inevitable *can* be changed" [italics present in original]. From resuscitation measures to novel pharmacologic and medical device interventions, the opportunity to keep an individual in a suspended inanimate state, if not reanimated, is often present in near death experiences, even in situations of severe trauma. Consequently, to not have an opinion on the matter is to risk someone else making the wrong choice during a rite of passage that is already rife with considerable uncertainty and could, under some belief systems, lead to harsh everlasting consequences.

However, it's not just the mere existence of these biotechnological advancements that have transformed death into a matter for public discourse. Communication technologies have also played a pivotal role, making death's presence more pervasive and breathing new life into our visibility of the very experiences of expiration. Mobile phones and streaming technologies keep us perpetually just one click away from representations of mortal demise, whether via video games, children's films, or even live social media

broadcasts of human tragedy. News media, in particular, is uniquely married to asking the viewer to confront death, and through the technological infrastructures afforded today, is able to draw attention to such information in mass nearly on-demand. Consider, for example, how quickly the nation's attention was directed to the loss of life that occurred in the terrorist attacks of September 11, 2001. Additionally, in the current landscape, not only is death a newsworthy event through news values of unexpectedness, tragedy, celebrity, and magnitude, but also through relevance via the very constructs of death policies. A recent example is the 2014 nation-wide news coverage devoted to Oregonian Brittany Maynard's decision to access death with dignity services after receiving a terminal cancer diagnosis at the age of 29. While the newsworthiness of death and even death policy are not new, the accessibility to such content has clearly changed. Today, a news viewer can immediately take to the internet to discover, within fractions of a second, a plethora of news accounts on any of the many death-rights policies currently under review. Such coverage not only makes the topic of end-of-life policies more accessible, but — as will be detailed in Chapter III — may also reinforce existing cultural values and attitudes, while motivating responses that bolster their own worldview and/or denigrate those with alternate views.

Notably, achieving a consensus between “everyone” is often difficult, and notoriously so when the topic at hand involves conflicts of values. Consider, for example, legislation regarding the right to die or medical aid-in-dying (MAiD), also commonly referred to as “death with dignity” and “assisted suicide.” Oregon was the first state in the U.S. to adopt MAiD legislation in 1994. Yet of the nine other states and U.S. jurisdictions

that have passed similar statutes, six have done so in the last five years. An additional fourteen states, including New York, Massachusetts, and Arizona, have formally added similar legislation to their debate agendas or specified committee reviews for the next legislative session in 2022. Per the *2020 State of the Death with Dignity Movement* address made by one of the country's oldest MAiD advocacy organizations, Death with Dignity, fewer than 10 million Americans had access to medically assisted death in 2015 while more than 70 million had gained access in 2020 on account of advancing state legislation (Death with Dignity, 2020). Often such advances are based on the argument that mentally competent adults should be endowed the personal autonomy and means to meet their maker in a way that preserves their dignity and avoids a drawn out death, particularly if they have already been diagnosed with a terminal illness (Gutmann & Moreno, 2019). Clearly, this issue is gaining traction and widespread interest. However, to indicate that the passage of such legislation indicates mass accord would be significantly mistaken.

Other powerful stakeholder organizations have invested substantial resources to clarify and voice strong opinions against the overarching legality of MAiD and the spider web of underlying policy implementation questions that it yields, expressing a further range of values and concerns. For instance, some of the largest professional healthcare organizations, including the American Medical Association (AMA) and the American College of Physicians, have published formal stances against contemporary MAiD legislation, raising moral and ethical concerns about asking doctors to end a life when their professional oath encourages them to, "First, do no harm." The AMA (2021)

explicitly warns in its Code of Medical Ethics Opinion 5.8 that “permitting physicians to engage in euthanasia would ultimately cause more harm than good. Euthanasia is fundamentally incompatible with the physician’s role as healer.”

Still others contest that such legislation is sacrilegious and a threat to the First Amendment to the U.S. Constitution, presenting an irresolvable impasse over how such policies will be implemented in the face of theological values that are at odds with willfully ending a human life under any condition. For instance, even in states where MAiD legislation has been adopted, religiously-affiliated healthcare institutions — which serve more than one in seven of all hospital patients in the US, according to the Catholic Health Association of the United States (2021) — have not only opted out of MAiD policies where such exclusions have been made possible, but have also taken to the judicial system to push back on such policies in targeted ways. In the 2019 Colorado case of *Mahoney and Morris v Centura Health Corporation*, for example, Centura contested it had the legal grounds to expel healthcare staff who consulted on MAiD cases because they had breached the religious components of their employment contracts (Graham, 2019). More recently in 2021, Pope Francis, the global leader of the Catholic Church and sovereign of the Vatican City State, explicitly reasserted his condemnation of MAiD while addressing the Pontifical Academy of Life, stating that such “throwaway culture” viewed the elderly as “waste material,” and warning, “This is a road on which we cannot go: the road of discarding” (Mares, 2021).

Clearly, reactions to MAiD legislation cannot be neatly parsed into merely “in favor” or “against,” and this reality is not atypical for the numerous end-of-life rights and

liberties currently volleying through legislative discussions. Rather, as exemplified above, there are routinely multiple competing and even antithetical values being voiced, often through incongruous forms of reasoning with considerable disparity in underlying warrants and definitions.

At first, this fractious and contentious landscape can appear chaotic in its discord over end-of-life priorities. However, in exploring the unique arc of the institutionalization of death in the US as well as the unprecedented biotechnological advancements over the past century that are contributing to life extension, scholar Tony Walter (1994) developed an archetypal schema for delineating dominant Western cultural responses to mortality, of which he posits there are three: *traditional*, *modern*, and *neo-modern*. Using this framework, which will be discussed in greater detail in Chapter II, the sociological underpinnings of death in America are more easily untangled: contemporary death rights reformation can reasonably be conceptualized as attempts to reform traditional and modern-era archetype cultural response legislation, or lack thereof, into alternatives that permit, if not prioritize, the expression of neo-modern revivalist values.

Thus, one factor for the pugnacious political tensions over death rights may be the result of having to funnel such heterogeneous values — indeed Walter identifies twenty-five unique underlying facets of each archetype — into a two-party electorate which, in and of itself, has faced dangerously stark increases in outrage behavior and partisanship over the past three decades (Berry & Sobieraj, 2014; Iyengar, 2019; Hendricks & Vestergaard, 2019). As end-of-life studies scholar David Clarke (2016) writes, “When death becomes a matter of public debate, dissension is not far away” (p. 3). Put simply,

when it comes to end-of-life policies, chances of a winner-takes-all scenario are nearly impossible. Rather, everyone is forced to concede to some degree in what could be construed as a lose-lose scenario that ultimately ends up with all stakeholders dying anyway.

Nonetheless, the analysis of influences affecting such controversy should not stop with the cultural retrospective. Rather, there may be an additional factor that uniquely exacerbates conflicts regarding death rights: the thought of death itself. Indeed, it is nearly impossible to debate the merits of end-of-life legislation without the actors acknowledging, at some level of consciousness, that their own life will not last forever. Whatever priority one argues, the logical evolution of such thought is that the embodiment of their argument will eventually apply to them. As Hemingway penned in *Death in the Afternoon*, “All stories, if continued far enough, end in death...” (1932, p. 100). Yet a great deal of thanatological scholarship has demonstrated a near-universal trend for such thoughts to activate negative responses, even in the absence of any material threat. Particularly interestingly is that such responses have been shown to manifest in a wide array of preferences and behaviors that are not directly associated with matters of death, but rather with upholding and strengthening one’s existing cultural beliefs and values in a broad sense or in ways that are readily available in the scenario at hand, such as protecting cultural objects (Greenberg et al., 1995). Were humans strictly logic-based beings, this may come as a surprise. However, humans are often irrational, subject to a range of cognitive limitations and psychological biases that make this common finding rather foreseeable (Tversky and Kahneman, 1974). After all, death

entails a great deal of uncertainty: it can come at any time for any one, and no one knows for sure what it's like to experience because no dead individual has verifiably returned to tell survivors about what they encountered. Additionally, for cultures in which life is viewed linearly, death is conceptually tied to loss, another emotion that humans generally find distressing. This is perhaps one reason why related studies have found significantly larger effect sizes of various behavioral reactions to death among Western, and particularly American, populations (Burke et al., 2009) where beliefs in reincarnation and the circularity of life and death are less common (Gire, 2014).

More specific to the present investigation is that a substantial, ever-growing corpus of scholarship provides reason to believe that the specific nature of death-related policy may be responsible for activating cognitive responses that intensify in-group bias, or greater animosity towards those who do not submit to the same cultural worldview. Four decades of terror management (TM) theory work have provided evidence for its posited psychological framework of mortality salient processing, the result of which is that individuals often subconsciously double-down on their existing beliefs, values, and norms in order to attain symbolic immortality and neutralize the terror potential associated with thinking about their inescapable end. Here mortality salience is conceptualized as the recognition, however fleeting, that one will ultimately die. This pronounced adherence to one's ideologies often results in preferential behaviors toward the groups with which one personally identifies, while augmenting negative associations with and even retributive behaviors toward others. Put more simply, death reminders, even if only subliminal (see Solomon et al., 2015), have been found to magnify one's

commitment to their values. Thus, the fervent political debates regarding the ethics and logistics of contemporary death may not just be run-of-the-mill partisanship or the result of having to filter a variety of competing cultural values into a single vote for or against an elected official. Rather, they may also be a consequence of individual-level existential crisis that the individual actor may not even be fully conscious of.

In the context of the present political landscape, which often not only provokes but also rewards outrage (Berry and Sobieraj, 2014; Hendricks & Vestergaard, 2019), this clearly does not bode well for bipartisan collaboration on legislative actions that overtly address death-related issues, let alone others such as climate change and national security that may more indirectly conjure concepts of humanity's mortal limits. Yet failing to address end-of-life rights would not make the issues any less pressing. Based on 2017 data produced by the Centers for Disease Control and Prevention, an average 7,708 Americans die every day, and this number is expected to reach historic highs in the next two decades as baby boomers, the largest generation of living Americans, reach the end of their life expectancies (Devine, 2017). Additionally, as it is, studies show great disparities between the way Americans wish to die and the ways in which they are actually dying as 71% of Americans report wishing to die at home (Hamel, Wu, & Brody, 2020), though only 30.7% actually are (Cross & Wairach, 2019). What's more, life-extending technologies continue to proliferate that are not only able to extend the lifespan but are also more successful at bringing people back from the brink of expiration (Gupta, 2009; C. Walter, 2020), despite the fact that only 23% of the population considers "living as long as possible" to be "extremely important" in end-of-life care (Hamel, Wu, &

Brody, 2020). Political inaction, then, is likely to only exacerbate the traumas and social injustices that occur when the dying are unable to expire in accordance with their wishes. As a result, it's imperative to gain deeper insight into the cognitive mechanisms at play in this vital dynamic so that advocates can better address such invisible challenges head on, potentially through more personalized communications that take into account one's cognitive state and traits.

The aim of the present dissertation then is to build upon the framework provided by terror management and improve our scientific understanding of the cognitive relationship between mortality salience and subsequent political bias. This objective is achieved through an interdisciplinary approach, exploring complementary theories drawing from psychology, cognitive science, and communication scholarship. Specifically, this research seeks to understand the cognitive weight of thinking about death, as compared to other negative stimuli, and investigates how biological predisposition, namely trait motivational reactivity, may moderate the relationship between mortality salience and subsequent differences in perceptions of warmth for Democrats and Republicans ("affective polarization"). Recognizing that innate traits are not deterministic, this work also builds on pertinent scholarship to consider lifestyle influences, namely the frequency of one's exposure to experiences involving death and dying, as well as the magnitude of one's daily news media consumption. This work also examines whether the metacognitive skill of self-compassion, which can be taught, may be a pivotal mechanism for moderating the prepotent mortality salience processing component that is posited to yield prejudicial outcomes. Though exploring potential

influential conditions on mortality salience processing outcomes is not novel among terror management literature, the specific aforementioned variables introduce new or understudied relationships that could yield both theoretical and practical implications. Altogether, this dissertation aims to help answer the broader question, “How does our natural inclination to approach or avoid environmental stimuli impact how we are influenced by death reminders?”

Results rendered help to further explicate extant literature and shed light on discrepancies in scholarship around partisan consequences of death reminders. Such work paves the way for more effective communication strategies and personalized messages in pertinent death rights advocacy work, as well as a range of other policy endeavors that tie indirectly to concepts of mortality. Understanding how, after thinking about their own death, one’s innate motivations color their subsequent perceptions of the other political team highlights the need for especially sensitive and dynamic communications, particularly in such politically turbulent times.

The subsequent chapters in this dissertation outline the background research and completion of the main experimental study. Chapter II employ’s Walters’ (1994) schema to explore the sociological and historical background necessary to fully understand the complexity of the present political debate regarding death rights, as well as offer structure to it. Chapter III provides an overview of terror management scholarship and the various manifestations of ideological bolstering that death contemplation has been shown to yield, including contradictory findings pertaining to partisanship. Chapter IV details how the inclusion of motivated cognition may improve the predictive power of terror

management (TM) theory, and explores what roles cognitive fatigue and self-compassion may play in mortality salient processing through the theoretical lens of the Limited Capacity Model of Motivated Mediated Message Processing (LC4MP). Chapter V then describes the research methods, followed by the investigation's results in Chapter VI. Finally, Chapter VII provides a discussion of the findings, explores pertinent methodological and theoretical implications, and encourages consideration for future research.

CHAPTER II: A BRIEF SOCIOLOGICAL HISTORY OF DEATH IN CONTEMPORARY AMERICA

Between the start and end of the 20th century, something radical and unprecedented happened to humanity: the average life expectancy at birth of those in advanced nations nearly doubled from 47 years of age in 1900 to 79 years in 2013 (Centers for Disease Control, 2017). Rapid scientific innovation coupled with improvements in medical education, public health, and other societal changes, produced life-extending technologies that transformed death itself, as well as Americans' cultural responses to it.

Recognizing a cultural shift in the growing wave of more tolerant perspectives on death appearing in the latter half of the 20th century, the British sociologist Walter (1994) mapped 25 dimensions of prevailing responses to death into a schema of three ideal archetypes.¹ These archetypes can be charted against general periods of contemporary American history, and thus the schema performs a useful function in providing necessary cultural and historical context, as well as conceptual structure, for the present complexity of perspectives on end-of-life rights playing out in the American political arena. The following sections not only explore each of the three archetypes with particular coverage afforded to their respective values and figures of authority, but also extend beyond Walter's (1994) work to reference legislative shifts that both reflected and reified the given period's dominant cultural perspective.

¹ Note here that "ideal" refers to the coherent grouping of sociological factors that may not often exist in pure form in reality and may instead perpetually crisscross generations, locales, and even individual identities.

The Traditional Archetype & Religious Authority

To begin, we examine the *traditional* archetype whose dominance most closely aligns with the expansive time period of the pre-colonial era through the early Victorian period of the mid-19th century; a time when dying was a comparably quick endeavor. Focusing toward the later decades of this era, one finds the nation marred not only by the bloody outcomes 600,000 lives lost during the Civil War but also by rampant, economically-indiscriminate pandemics of cholera, dysentery, and tuberculosis that could strike anyone at any time and frequently claimed the lives of children under five. As a result of such excess exposure to death, the period is routinely characterized by historians and sociologists alike by its preoccupation with the morbid, and even “often misunderstood as pathologically death-obsessed.” (Harmeyer, 2018, p. 35). Indeed, the popular art, literature, and social customs of the time all reflected a generally heightened interest in death and supernatural, as exemplified by the success of the American dime novel equivalent of Britain’s penny dreadfuls and investments in *memento mori* (“remember, you will die”) objects including postmortem photography and ornamental hairwork.

During this period, death was also a highly social event as both end-of-life care and post-mortem death rituals typically occurred in the home under the purview of immediate family and religious authority, but with considerable expectations of supportive engagement from one’s larger social network. For instance, preparation of the body, including washing and dressing, was often managed by close family or female neighbors such as those listed in the 1810 Philadelphia, Pennsylvania directory as

“Layers Out of the Dead.” (Colman, 1997). Similarly, funerals, which were typically held within a home’s parlor because it both housed the family’s best furniture and could conveniently be closed off to retain cooler temperatures, were also often orchestrated by one’s social network (National Home Funeral Alliance, 2021). Friends were expected to relieve pressures on the grief-stricken immediate family by taking on logistical tasks, appropriately transitioning the space through rearranging furniture, covering mirrors, and draping objects in black crepe (Colman, 1997). Subsequent mourning, too, was a highly public ritual. Front doors would often include displays, such as wreaths, that indicated bereavement, and family of the deceased, most especially women, would dress in accordance with rigorously defined social rules often for extensive periods ranging from many months to even years (Walter, 1994).

Of particular importance to this time is that religion, namely Christianity, was the ultimate authority on matters of death and dying. The highly popular *Ars moriendi* (“The Art of Dying”) text of the 15th century, which offered succinct instructions to both the dying and their attendants for achieving a good death, was largely retained in Catholic teachings throughout the Western world until the late 19th century. Among the edicts laid out within via text and woodcut depictions was the necessity of avoiding a lack of faith and foregoing one’s own wishes to instead lean into the consolation of Christ’s redemptive love (Dugdale, 2020; Thornton & Phillips, 2009). Accordingly, active dying was widely viewed as a fleeting and final opportunity for repentance and prayer in preparation for meeting one’s Maker and the absolution of the soul (Dugdale, 2020). Funeral and disposition arrangements, too, were also strictly dictated by the rituals of the

Church. Interment was the only Catholically-condoned method of disposal and, during this time, burial most often occurred in graveyards which were annexed to church or on personal property.

Taken together, these realities of rapid corporeal decline, a visible communal role, and heightened religious authority comprise the headlining aspects of the period most clearly associated with the traditional ideal type (Walter, 1994). Notably, they represent not only a more routine presence of death and death knowledge as compared to more recent periods, but also a comparative lack of death *management* on the part of the government. Official legislation pertaining to death was, as compared to today, largely absent during this time, and what was in existence generally recapitulated ecclesiastic law (Calderon, 2016). Pertinent policies include those that had been crafted largely in response to public outcry over the desecration of graves by traditional grave robbers and, more substantially, the illicit acquisition of cadavers by the more industrious body snatchers of the early “anatomy era” (Sappol, 2002). Such policies, more colloquially referred to as “bone bills,” included state statutes such as New York’s 1789 *Act to Prevent the Odious Practice of Digging Up and Removing for the Purpose of Dissection Dead Bodies Interred in Cemeteries or Burial Places* (Hartwell, 1880) which attempted to simultaneously assuage devout Christians who demanded legal protections for the sanctity of the grave without stymying the nation’s scientific advancements. Similarly, early statutes outlawing willful assistance in suicide, including the seminal Act of Dec. 10, 1828 N.Y. Laws 19 (Washington et al. v. Glucksberg et al., 1997), worked to undermine the Enlightenment-era acceptability of ending one’s own life and instead reify

the authority of Christian doctrine.

To summarize, the *traditionalist* respected death as part of the fabric of life and experienced it regularly, often in an intimate, unmediated, yet social way. Religious actors were granted the ultimate authority on matters of death not only by the general populace, but also by elected officials who referred and deferred to traditions of canonical law both in the enactment and absence, respectively, of formal legislation. However, a formidable new authority was developing that would soon undermine the expansiveness of religion's jurisdiction and demand that government actors begin to take a more active, responsive role.

The Rise of the Modern Archetype & Medical Authority

Significant changes were afoot in the U.S. during the latter half of the 19th century, facilitating a transition between Walter's *traditional* and *modern* archetypes. For one, public health was outgrowing its infancy, contributing improved vital statistics and more comprehensive infrastructure within urban areas that had previously been teeming with disease-fostering refuse. Relatedly, modern conveniences such as indoor plumbing, electricity, and motor vehicles, all of which fostered improved sanitation and health care, were also becoming more widespread. These changes, further cemented by the establishment of governmental organizations such as the National Board of Health, ushered in "the great sanitary awakening." With the discovery of modern bacteriology in 1880, both disease transmission and laboratory vaccinations were more fully understood, dramatically impacting the mortality rates of numerous previously-fatal diseases and abolishing the prevailing belief that moral transgression and sin were the ultimate ushers

of death (National Institutes of Health, 1976).

In addition, the medical field itself was undergoing dramatic improvements in the period between 1880 and 1920. With the development of robust, graded curriculums at medical education institutions such as Harvard and Johns Hopkins University, aspiring physicians had long since progressed from having to choose between the costly access to quality European tutelage and the far cheaper domestic solutions of proprietary “academies.” As a result, the health of the American population benefitted from an increase in practitioners who were well trained, and not only in anatomical science and evidence-based practices, but also medical research (National Institutes of Health (NIH), 1976). Notably, this training prioritized the biologic model of care over more holistic alternatives and largely interpreted the Hippocratic Oath (often recognized by the aforementioned precept “First, do no harm”) as a foundational ethical tenant for keeping the patient alive at all costs (Guttman & Moreno, 2020).

Similarly, the funerary industry was beginning to take hold. Tracing its roots to the Civil War and the use of rudimentary embalming techniques as a means of preserving decedent soldiers’ bodies during return travel to their families, the early tradesmen began expanding their offerings and positioning themselves as a pedigreed profession. In 1882, the first meeting of the National Funeral Directors Association occurred and by 1920 there were nearly 25,000 funeral homes across the country (Laderman, 2005, p. 19). Capitalizing on the positive outcomes associated with improved public health infrastructure, many such establishments began casting the care of the deceased as a public health issue and exaggerating the risk involved in home funerals (National Home

Funeral Alliance, 2020). Consequently, and in conjunction with the burgeoning women's rights movement, the willingness of female family members to continue prior centuries' flagship efforts of unpaid and now potentially hazardous labor in postmortem care waned considerably, further propelling the death care market (Laderman, 2005).

It's during this time of expansive change and progress in human welfare that we see the sociological emergence of Walter's (1994) *modern* archetype. Critically, Walter (1994) notes that religion loses its grip on death as the reigns of authority are transferred from the men of God to medical experts, extending also to the period's rapidly growing funerary industry. In this "commercialization and professionalization," he points out that death becomes increasingly hidden in two critical dimensions. First, death is removed from the home — and the hands-on care of neighbors and kin — to the institutions where such experts and their assemblage of equipment reside, namely hospitals and funeral homes. This not only excises much of the social component of death and dying, but also the intimate knowledge of death that came with firsthand experiences. In parallel, Walter (1994) points out that coping mechanisms and survivor experiences also become less visible and community-oriented during this period. "Modernity entails a profound split between the public and the private realms, between the world of work and reason and the world of family and emotion, and this split is reflected in the modern way of death" (Walter, 1994, p. 23). Instead of actively involving networks of neighbors, friends, relatives, and clergy in one dynamic, the social structure dichotomizes into distinct public and private spheres. The direct experience of death becomes reserved for select individuals, often the nuclear family and the medical professionals on which they rely

and within which a clear hierarchy develops that places the healthcare professional in a position of superiority and heroism. Those in the broader public sphere are exposed only to a brief encounter that is both physically and emotionally more removed. This separation is marked by the period's vernacular valorizing the "fight" against death and the social importance of preserving one's dignity against the physical and cognitive decline of finitude through privacy measures (Thornton & Phillips, 2009; Sontag, 1978). In fact, Walter goes so far as to posit that within the modern archetype, courage itself is displayed through public silence and a good death is characterized by dying "without being a bother to others," underpinning the broader argument made by many scholars that death's taboo becomes paramount in the US throughout the 20th century .

Second, the economic awareness of death becomes less pervasive as medical innovations, from evidence-based practices to implantable devices, make working age individuals increasingly less susceptible to the fatal pathologies, genetic defects, and bodily traumas that had claimed previous generations. From the earlier development of antibiotics and organ transplantation to more contemporary life-extension solutions such as artificial respiration, pacemaker implantation, and hypothermic therapy, to name only a few (Gutmann & Moreno, 2020; Gupta, 2009; C. Walter, 2020), people began — and have continued — living long enough to age out of the workforce. As a result, when death does finally occur at a ripe older age, it no longer rocks households in the same financial manner because the status of "breadwinner" has already passed on to a younger generation. It's important to note, however, that the consequence of this is that the emotional hardship is said to be magnified by the extended duration of companionship

(Walter, 1994).

As such, in place of rapid declines and the anyone, anytime, anywhere submission to death seen in the Victorian era, Americans of the 20th century — *modernists* — become accustomed to a longer lifespan with a more gradual, managed decline in one's quality of life. This is clearly reflected in the rising average life expectancy at birth mentioned at the start of this Chapter as well as the manifestation of institutionalized deaths.

Additionally, even when individuals of this period did meet their end, their bodies were passed on to funeral directors who routinely treated the corpse with inorganic solutions, including formaldehyde-based embalming treatments and cosmetics, which provided an extended illusion of suspended animation during family viewings and memorials. Collectively, these changes facilitated unprecedented control over death itself as well as perceptions of death, and the reverence once exclusively reserved and expressed for God began to transfer to the men who were most responsible for “death's rationalization and medicalization” (Walter, 1994, p. 13).

Thus, we can summarize the *modern* archetype as one that hides death, both logistically and emotionally, and holds the doctor's orders, not God's will or a religious interpretation thereof, as both the ultimate authority and a means by which to realize greater control over the inevitable. This latter shift marks a critical transition in the political power over death as the relationship between Church and State is radically different than that of State and industry. Of importance to the present work is the notion that as medical interventions continue to succeed in blurring the line between life and

death and unprecedented changes to average lifespan unfold across the century, we see regulatory standards come into play which attempt to protect public interest without stymying the biomedical industry and the associated privileges in posturing it afforded the U.S. on the global stage.

Notably, legislative policies pertaining to death and dying begin to proliferate. These efforts sought to both add structure to and balance the public interest in the continued growth of the biomedical and funerary industries with the need for safe practices and legacy beliefs of the traditional era. Most overtly, by the 1920's, the practice of medicine itself became a regulated profession in which healthcare providers must pass specific tests in order to gain state-approved recognition (NIH, 1997). However, another and even earlier example of pertinent government oversight is the 1891 landmark case of *Larson v. Chase* in which the court found, after reviewing extant U.S. law, that mental distress caused from interference with a decedent's common law right of sepulcher (the right to a prompt burial emphasized in ecclesiastic law) is a punishable offense. Of particular interest to the present study is that the plaintiff had dissected the corpse for the purposes of scientific advancement without due notice to, and thus approval from, the next of kin. Consequently, not only did this finding set the precedent that a decedent's body would be legally treated as quasi-property, but it also served as one of the earliest signals to the flourishing biomedical industry that despite its growing cultural omnipotence, it would not run unchecked forever. In truth, the wheels of medical innovation continued to turn rapidly for another seventy years without the teeth of related codified legislation affecting protections for all Americans. Still, that such precedents

were set during this time period is nonetheless essential for understanding the precarious position the governing body held during the transition of cultural power from religious actors to the men of science.

The Rise of the Neo-Modern Archetype and Self Authority

As the century passes, both medical authority and average life expectancy continue to grow in tandem. However, toward the end of the 20th century through the present day, Walter (1994) notes a burgeoning new archetype, the *neo-modern*, developing in direct response to the *modern* archetype. He writes, “Revival — the critique of the modern way of death — derives from the contradiction between private experience and public discourse, and intends to abolish it” (p. 24). The *neo-modernist* seeks to completely redefine aspects of his historical predecessors’ cultural responses, particularly those held by *modernists*, and revive the community-oriented aspects of the *traditionalist*, albeit often by inadvertently romanticizing the devastating circumstances faced by the latter.

In direct contrast to the modernist’s esteem for silent strength and excess privacy, the neo-modern movement prizes expressivism underpinned by continued emotional growth and greater social transparency. Grief counselors, talk therapy, and an iterative process of identity reconstruction in the context of interpersonal relationships are all promoted as healthier means of approaching mortality in both ourselves and others. Therein, we see the centering of one’s psyche and personal inner journey, not a proscribed religious faithfulness or a statistically normalized biomedical process, as the key components to a fruitful death experience. In conjunction, the notion of hiding death

is wholly undermined by the neo-modernist who, instead, looks to revive the more communal components of care valued by traditional forms of society.

Most notably, the neo-modernist places the Self as the highest authority on death, unseating doctors who had reigned supreme during the height of the modernist period and continuing to turn away from the reverence shown to religious authority under the traditional period. Walter (1994) more casually refers to this strong sense of autonomy and individualized end-of-life care as “Sinatra Syndrome,” alluding to the singer’s famous tune “I did it my way.” Though some of the roots of this archetype can be charted to early 20th century organizations such as The Hemlock Society and the Euthanasia Society of America, it’s the United States’ adoption of Hospice from Great Britain in the early 1970’s that is largely viewed as the turning point in which the *modern* biomedical response begins to give way to the more holistic, patient-centered alternative upheld by *neo-modernists*. Interestingly, the founder of Hospice, Dame Cicely Saunders, had not only trained as a nurse, doctor, and social worker, but also engaged in a robust spiritual practice paving the way for what is now known as the biopsychosocial model (Walter, 1994).

Yet again, this next wave of sociological evolution in cultural response to death reverberates in policy and attempts at policy reform that reflect the values upheld by neo-modernists. An early manifestation of new policy adoption was the Federal Trade Commission’s 1982 Funeral Industry Practices Rule (“The Funeral Rule”) which responded to the damning account of the industry put forward by Jessica Mitford’s highly successful 1963 investigative text, *The American Way of Death*, and the subsequent wave

of international criticism it waged. The Rule provides increased consumer protection by demanding greater transparency from funeral homes and directors in an effort to afford greater autonomy to the deceased and their surviving loved ones. For example, this law stipulates that funeral directors must present itemized costs for all goods and services to the consumer in a complete, upfront manner and cannot require that all goods — including the casket — be purchased from within their inventory. Similarly, the rule prohibits certain misrepresentations and deceptive practices such as implying that embalming is required or that a casket must be purchased in instances of direct cremation.

Somewhat relatedly, there is also now a call for revised regulation regarding disposal, specifically to afford decedents comparably environmentally-friendly end-of-life options such as green burials and natural decomposition, more colloquially referred to as “human composting.” Many extant state regulations, however, make it difficult for existing cemeteries to embrace revival burial methods, while also setting high barriers to entry, such as minimum endowment valuations, for new market entrants. Washington became the first state to enact such legislation in 2020, followed by Colorado in August of 2021, and with other concerted efforts on-going in California and New York for similar policy adoption.

Many of the fundamental values that initiated and continue calls for increased regulation of the funerary industry and greater autonomy in postmortem care are also found in the tensions presently peaking regarding physician-assisted death. Though early policy reform attempts favoring MAiD began in the early 20th century, such efforts were

far from mainstream and largely ignored by governing bodies. Awareness proliferated much later in the century, however, after a variety of highly publicized court cases including those involving Terri Schiavo, Dr. Jack Kevorkian, and Dr. Timothy Quill gripped the public's attention (Guttman & Moreno, 2021). As elaborated on in Chapter I, this debate remains highly contentious.

In examining the relationship between government and citizenry, this exploration of Walter's (1994) schema provides essential context and structure, drawing attention to the fact that though dying is deeply personal, many of the details — when, where, how, and what happens to one's body postmortem — are also wholly political. In reviewing these significant paradigmatic transitions between the three dominant cultural responses to death as laid out in Walter's (1994) schema, the fluid relationship between the will of the people, particularly to whom they most ascribe authority in death, and the governing body's effort to continuously balance policies that respond to related cultural values becomes apparent.

It's also worth noting here that this schema is now nearly thirty years old and thus may not fully encompass the most contemporary cultural responses. Though the *neomodernist's* revival continues as evidenced by both the growing “death positive” movement and advancements of spirituality in place of religiosity (Lipka & Gecewicz, 2017), the world has also witnessed the rise of yet another novel cultural response to death: transhumanism. This movement seeks to overcome limitations of mortality altogether through novel scientific advancements and technologies, the prospect of which

may not be all that far off given the billions of dollars being allocated to such work by both public and private institutions (C. Walter, 2020). In fact, historian and philosopher Hariri (2017) predicts that this will soon give rise to a new species of humans altogether, for which the terms “living and “dead” may become especially complicated. Though elaborating fully on this arguably new archetype is beyond the scope of this work, the trend is nonetheless critical to acknowledge as part of the larger exploration of how the present ability of state and federal legislation to both reflect and uphold the end-of-life values of the populace is complicated by the discomfiting coexistence of numerous archetypes operating within a two-party system, as well as the inherent values tension that lies therein.

It’s equally imperative to underscore that this examination has largely taken place at the societal level of analysis, offering a 40,000-foot view. Walter makes clear that these archetypes are ideal amalgamations and often do not present, in reality, with such clear delineation or statistical cohesion. Rather, when examined at the individual-level of analysis, he notes that even within one individual there may be dissonant association with facets that transect two or even all three archetypes. Similarly, the archetype with which one’s identity may most align may change over the life course. As such, this review now progresses in that exact direction, narrowing down the scope of analysis to investigate individual-level differences relevant to understanding perceptions of and responses to death. Chapter III will first dive into the fundamental constructs of and evidence for terror management (TM); in turn, Chapter IV will provide an account of contemporary empirical frameworks for understanding cognitive traits that may influence the

processing of death-related stimuli.

CHAPTER III: TERROR MANAGEMENT THEORY AND THE EFFECT OF MORTALITY SALIENCE ON PARTISANSHIP

It was against the backdrop of the emergence of neo-modern archetypes and the post-Freudian era of the 1980s that young psychology scholars began empirically investigating how humans psychologically cope with the omnipresence of their own finitude. What quickly developed from early research was terror management, a theory positing a largely subconscious process through which individuals are able to manage the overwhelming and ubiquitous fear of their own death by investing in ideals that provide an illusory yet cathartic sense of immortality. As Chapter II provided a broader cultural framework for the diversity of societal-level responses that may be contributing to present political discord, Chapter III narrows in scope to individual-level responses through a robust examination of the psychological framework provided by terror management (TM) theory.

The Terror Potential of Thinking About One's Death

It is widely accepted that self-reflection and indeed all imagination is a distinctly unique trait of neurotypical humans, separating our species from a vast majority of the rest of the animal kingdom. These inimitable capacities, also referred to as mental synthesis (Vyshedskiy, 2014), allow one to wonder infinitely, not only constructing complex and entirely novel mental images but also providing the capacity to think about the very process of thinking that helped them do so. Yet while this evolutionary adaptation has allowed man to construct and reconstruct the world around him in ways that other creatures cannot, this capacity also facilitates the ability for one to imagine

their own eventual and unavoidable death. In short, mental synthesis gives rise to mortality salience. James, who is credited with identifying the duality of attention between voluntary and involuntary attending (1890), referred to this paradox of intellect as “the worm at the core” of humanity (1902) as it perpetuates an unbeatable looming doom even when there is no imminent threat to one’s well-being. Conversely, creatures without this complex cognitive capacity are posited to exist without such foresight and, outside of the most rudimentary defense systems, perpetually exist in a state of present moment awareness that is, by comparison, both more ignorant and blissful. From this, scholars postulate that humans are imbued with a unique psychological dissonance yielding significant anxiety potential that consequently must be managed through both voluntary and involuntary mechanisms of the mind.

Such was the central thesis of Ernest Becker’s 1973 Pulitzer-prize winning text, *The Denial of Death*, which serves as the foundation for much of terror management’s conceptualization. Therein, Becker, who was facing his own imminent demise during its authorship, provides a vigorously critical examination of then-contemporary psychoanalytic frameworks for understanding human motivation. Building upon a swath of ideas from other philosophical and social science vanguards including Freud, Kierkegaard, Fromm, Maslow, and most especially Rank, this work contributes two significant conceptual amalgamations important to terror management and the present work.

First, Becker illuminates at length the innate “grotesque contradiction” that is derived from having evolved the god-like powers of mental synthesis within the confines

of our pre-existing animalistic qualities, such as the bounds of the physical body. “The ego represents the immense broadening of experience and potential control, a step into a true kind of sub-divinity in nature. Admittedly, when evolution gave man a self, an inner symbolic world of experience, it split him in two, gave him an added burden” (1973, p. 263). Put succinctly, if not somewhat crassly, he emphasizes that the same beings who can conjure limitless ideas must do so while also submitting to the corporeal criteria of eating, defecating, and dying. As a result, humans — as compared to the rest of the animal kingdom — are uniquely and endlessly caught between all that their mind can imagine and, comparably, what little they can actually accomplish as a result of their bodies and limited lifespans.

Second, Becker more clearly conceptualizes that humanity’s inability to both acknowledge and fully stomach reality as it is, or “*the mysterium tremendum et fascinans* of each single thing” (Becker, 1973, p. 49), including our own caught-ness between limitless mental capacity and finite existence, is the driving cause for culture. In order to exist normally, man refuses the full spectrum of reality and instead, as Kierkegaard states, “tranquilizes themselves with the trivial” (as quoted in Becker, 1973, p. 178), willfully lying to himself. By establishing illusions of order and meaning through religion, social etiquette, and other ideological exhibitions, man is able to both transfer and ameliorate the terror of his paradoxical existence. “Culture is a compromise with life that makes human life possible” (Becker, 1973, p. 265). In this way, culture is seen as a manifestation of psychologically biting off only what one can chew in the grand expanse of reality, providing a palatable sense of grounding while also satiating our need for

heroic identification in something bigger or more lasting than the limited physical self. Reminders of our most base qualities then — including our eventual and assured demise — threaten to pull us back to the true nature of reality and thus undermine the deceptive yet effective buffer of culture. In the face of such menacing reminders, Becker and others postulate that we reflexively work to uphold the comforting façade of our creative myths (e.g., culture), though often through “folly, waste, and destruction.” (Becker, 1973, p. 261).

Building on this robust anthropological analysis as well as the rich philosophical history of meaning-making related to death, Greenberg, Pyszczynski, and Solomon (1986) put forward the *mortality salience hypothesis*, positing that humans strive to overcome death and its associated anxiety, either literally or symbolically, by investing in and rigorously defending a cultural worldview. The original authors later more robustly conceptualized cultural worldview as:

a set of beliefs about the nature of reality shared by groups of individuals that provides meaning, order, permanence, stability and the promise of literal and/or symbolic immortality to those who live up to the standard of values set by the worldview (Harmon-Jones et al., 1997).

Notably, unlike traditional defensive changes in attitude and behavior which activate the sympathetic system, this shift from not attending to attending to one’s own mortality is shown to heighten potential for anxiety without disturbing affect, typically measured via the Positive and Negative Affect Schedule. TM theorists posit that such management occurs through a two-step cognitive model. *Proximal defenses*, which occur at the

conscious level, first rationalize death through repression, distancing, or distraction. These methods, which are employed almost immediately after a death reminder, outright stifle the thought of death, substitute it with some other focus, or push the concept to some future abstraction, respectively, thereby rendering such awareness less formidable. However, it still “lingers on the fringes of our consciousness,” thus requiring a tandem protection (Solomon et al., 2015, p 171). *Distal defenses*, which occur at the subconscious level after a short lag from exposure to mortality (Burke et al., 2010), maintain no direct, logical relationship to death. Rather this defense yields behaviors that bolster cultural worldview as well as one’s self-esteem and intimate relationships (Solomon et al., 2015). In doing so, as Becker and other TM predecessors had first asserted, the psyche is fooled into the soothing belief that the individual has inserted a piece of itself into something heroic and immortal, thereby symbolically overcoming death and rendering it far less terrifying. Upholding one’s culture in response to a death reminder can be viewed as both a concession and consolation prize, as well as a coping mechanism for survival. Such distal defenses are believed to prevent the pervasive imitations of death one encounters throughout their daily activities from flooding the conscious mind and rendering the individual overwhelmed to the point of uselessness. Indeed, numerous studies have shown that experiencing prolonged or chronic states of high stress is often detrimental, yielding adverse physiological and psychological outcomes (See review in Sapolsky, 1999).

The seminal 1989 study by Rosenblatt, Greenberg, Solomon, Pyszczynski, and Lyon that empirically established terror management theory centered on behavioral

outcomes of those individuals most associated with impartially upholding the governing policies of the American populace: court judges. In this between-groups experiment, 23 judges were given a personality test before reviewing a case related to the charge of soliciting for prostitution and subsequently setting bail for the alleged criminal involved. However, unlike their counterparts in the study, half of the judges received a version of the questionnaire that included two consecutive, open-ended questions about their own mortality referred to as the Mortality Attitudes Personality Survey ((MAPS), “Please briefly describe the emotions that the thought of your own death arouses in you,” and, “Write, as specifically as you can, what you think will happen to you as you physically die, and once you are physically dead.”). In the subsequent analysis, judges who had not been exposed to the mortality questions imposed an average bond of \$50, directly in line with the court’s typical bail for such an infraction. Meanwhile, those judges who had been asked to contemplate their own death imposed a far harsher outcome with bond averaging \$455, or nine times the typical rate at the time. To explain this outcome, the researchers postulated that the judges who had been exposed to the mortality salient prime compensated for the anxiety potential it induced by inflicting more punitive burdens on the alleged criminal and ideological deviant. In this way, they are able to both castigate those who threaten their mechanism of symbolic immortality (i.e. culture) while simultaneously satisfying the ego by more robustly upholding said culture’s accepted social norms.

Since this early work, hundreds of additional studies across disciplines and cultures have provided further evidence of the effects of mortality salience on a breadth

of attitudes and behaviors, with particular emphasis toward cultural worldview validation. For example, findings have shown that mortality salience can result in increased consumption of alcohol (Ein-Dor et al., 2013) and riskier driving behaviors (Taubmen-Ben-Ari, Florian, & Mikulincer, 1999), increased receptivity to health messages from entertainers over experts (McCabe et al., 2014) and increased materialism (Akil, Robert-Demontrond & Bouille, 2018) for whom such attitudes and behaviors aligned with their pre-existing worldview.

Shortly after the seminal study, Greenberg, Pyszczynski, Solomon and Rosenblatt published findings from follow-up research (1990) in which students, some of whom had responded to the same mortality salience prime as the judges, were asked to read two essays they believed had been published in a political journal. One essay admitted certain shortcomings of the American government but concluded that America was “a great place to live freely,” while the alternate essay railed against the American government and its role in global politics. Though all readers subsequently expressed more congenial attitudes toward the pro-American essayist, those students exposed to the mortality salience prime rated the pro-American essayist significantly more favorably and the anti-American essayist significantly more negatively as compared to the control group.

Increased prejudice in response to mortality salience, as demonstrated by both seminal TM studies, has continued to be especially well documented. Consequent to MS exposure, studies have found increased antipathy toward and harsher punishments for ethnic, religious, and even sports fandom outgroups (Arndt et al., 1997; Kugler & Cooper, 2010; Burke et al., 2010). Notably, self-esteem has been found to moderate

numerous mortality salience effects. For instance, Routledge et al. (2010) found evidence that, following MS, those with low self-esteem subsequently report decreased life satisfaction, increased state anxiety, and exacerbated social avoidance, while those with high self-esteem did not. Particularly relevant to the present study is work conducted by Hohman and Hogg (2014) which found that enhanced, as opposed to neutralized, self-esteem attenuated the effects of mortality salience on defensiveness of America when evaluating pro- and ant-American essays.

Thus, while the proximal and distal processing postulated by terror management may be adaptive psychological survival mechanisms in response to the early evolutionary developments of mental synthesis and self-reflective cognitive capacities (i.e., downplaying the potential psychological terror of our mortal limitations), such findings are also deeply concerning. Under this framework, and with consideration for the empirical findings related thereto, it becomes clear that populations with differing cultural subgroups, such as those outlined by Walter (1994), are likely to induce conflict when exploring themes of death. Especially problematic is that mortality salience can refer to any experience or symbol that draws one's attention to the finitude of existence. Thus, further adding to the complexity of the extant matter is that while some symbols, such as coffins or the word "death" itself, are near universal in their ability to elicit death-related thoughts, others are highly personal, stemming from lived and synthesized experiences related to their own unique journey through life. Nonetheless, of particular interest to the present work, is that evidence suggests that such prejudicial outcomes are not exclusive to individuals upholding extremely exclusionary or dogmatic cultures, but

among everyday citizens — and voters.

The Debate Over Mortality Salience Effects on Political Behaviors

Prejudice, a deeply rooted and problematic social construct found throughout American history, is often associated with discrimination based on characteristics of gender, sexuality, and race. Presently, however, the U.S. is also experiencing the deleterious effects of prejudice as it relates to political identity. In their exploration of the average difference between Americans' positive feelings for co-partisans and negative feelings for the opposing party — termed “affective polarization” — Iyengar and colleagues (2019) empirically demonstrated rising outgroup antipathy since 1990 and warned of “grave ramifications” of associated implicit and explicit animosity. Indeed, scholarship has indicated that as cues of party affiliation have expanded into everyday life, political prejudice has become even more widespread than racial and gender bias (Iyengar & Westwood, 2015) and impacts a diverse range of behaviors including courtship, hiring, and where individuals choose to reside (Motyl et al., 2014). Chen and Rohla (2018) even uncovered a significant shift in the duration of cross-party election-year Thanksgiving dinners, providing evidence that Democrats shortened their dinner stays by 20 to 40 minutes, while Republicans shortened theirs by 50 to 70 minutes. Though almost satirical in nature, such empirical work clearly demonstrates the far-reaching consequences of affective polarization, threatening not only the societal threads of individual-level relationships but also the efficacy of our policy-making bodies.

Notably, scholarship has explored how death reminders induce prejudice within the political sphere with some conflicting findings (Burke et al., 2013). Specifically,

evidence has also developed to support the *conservative shift hypothesis*, or the tendency for individuals, regardless of party, to move toward conservatism in response to large-scale threats such as war or acts of terrorism. Within their larger meta-analysis, Jost and colleagues (2003) identified eight studies in which fear of death was a strong predictor of conservatism ($r = .50$) and also called forth a host of archival research demonstrating correlations between existential crises at the societal level and subsequent increases in authoritarianism. In drawing from terror management's conceptualization of symbolic immortality, they posit that conservative responding may more effectively manage existential concerns because conservative ideologies are more stable than liberal ideologies. When considered in the context of work by Levendusky (2018) who found that heightened salience of American national identity ameliorated partisanship, this feels especially plausible. If the constructs within which the groups exist are at risk and immortality is the goal, then it may be more cathartic to expend effort that sustains the constructs than the comparably trivial task of in- and out-group delineation. In the case of the 2004 presidential election, Landau and colleagues (2004) similarly found in their retrospective analysis that MS increased support for both the conservative political figure and right-wing terrorism response policies among conservatives *and* liberals alike. Such findings partially contradict the theoretical predictions of TM which would forecast that only conservatives would experience magnified conservative values, while liberals would be predicted to more robustly uphold liberal policies, a notion that was directly evidenced by Greenberg et al. (1992, Study 1). TM scholars, however, have since cited evidence of the moderating effect that party leader charisma has on this relationship, finding that

increased out-party leader charisma can neutralize the expected effects of mortality salience for a group (Kosloff, Greenberg, Weis, & Solomon, 2010). To date, however, this discrepancy has not been fully resolved.

One appropriate line of inquiry in light of such conflicting findings is not merely to explore whether a relationship exists, but to follow the work of Jost et al. (2003), Kosloff et al. (2010), and many others by going further in the analytic approach to understand *under what conditions* such associations may appear and to what degree. As Hayes (2018) points out, there may be a great deal of existing literature across social science disciplines that arrived at empirically apt, but nonetheless invalid results because certain conditions critical to the simple relationship merely were not accounted for. As such, we turn now to refining our understanding of the discordant nature of death policy discourse and informing a more compelling investigation into the relationship between mortality salience and subsequent in- and out-party feelings (affective polarization) through the inclusion of individual-level differences in motivation as informed by relevant theory. Specifically, this work seeks to explore the cognitive costs of mortality salience processing and, equally of interest, whether underlying motivational predisposition may diminish or augment the associated prejudice. Such inquiry remains largely unexplored in existing literature, yet filling this gap in knowledge is vital for both improving the predictive power of terror management while also nurturing improved understanding for how, from a cognitive perspective, such outcomes arise.

CHAPTER IV: EXPLORING COGNITIVE FACTORS UNDERLYING THE EFFECTS OF MORTALITY SALIENCE

A robust discussion on the potentially unique qualities of death contemplation is incomplete without serious consideration for the underlying mechanisms of cognition itself. Though terror management scholarship emphasizes concepts of conscious and subconscious thinking and explores individual-level differences related to self-esteem and certain personality traits, the opportunity for developing a stronger predictive model through the inclusion of innate motivational disposition remains. Of note is that this effort to substantiate extant psychological and communication theories through advancements in neuroscience is a swelling movement. In fact, a 2019 study by Dor-Ziderman, Lutz, and Goldstein found that when participants were exposed to their own image with accompanying mortality salient text, the brain's prediction mechanism failed to operate in the manner established with non-self stimuli, and this neuronal tendency could predict fear-of-death. In other words, through the use of magnetoencephalography imaging, they were able to provide physiological substantiation for earlier subjective findings and philosophical musings that the brain seems to shield itself from existential awareness.

This study responds to this opportunity to not only further substantiate, but also further explicate the findings of TM literature by directly investigating individual-level differences in certain cognitive mechanisms that may give rise to the changes in attitude and behavior documented therein. It is not enough to merely conclude that X, in this case mortality salience, causes Y, in this case ideological bolstering. Rather, continued pursuit of understanding why and under what conditions such ideological bolstering occurs will

advance the theory and support more impactful applications. One approach to doing so is adopting a perspective of motivated cognition wherein emotions, as well as subsequent attitudes and behaviors, are recognized as a function of underlying motivational systems. In simplified terms, such work emphasizes the importance of what an individual attends to and how they attend to it, both emotionally and cognitively, as a function of goal-orientation and posits that differences in the underlying motivational systems explain why different people respond to the same environmental stimuli in different ways. Specifically, this work leverages the theoretical framework put forward by Lang's Limited Capacity Model of Motivated Mediated Message Processing (LC4MP). This framework not only provides formative structure to the nuances of this investigation, but also offers an efficacious methodological approach for grounding terror management in advancements in cognitive science despite the pandemic-related limitations of human subjects testing that was present during the execution of this work. What follows is an examination of the two pertinent contributions of this framework to the present study: the axiom of limited cognitive capacity and the explication of media message processing as a function of the unique sensitivities of one's underlying approach and avoidance systems.

Cognition as a Resource-Bounded Phenomenon

What is thinking and how does it arise? Not unlike other theories of cognition, LC4MP conceptualizes thinking as an embodied activity wherein thoughts occur within a physical being but in relation to the external environment. This perpetual activity of information sensing, storage, and manipulation (referred to by Lang (2000) as "encoding, storing, and retrieval") is enabled via physiological changes associated with underlying

metabolic processes. Critically, and now widely accepted by scholars, these processes are believed to rely on a finite resource supply, thereby indicating that depletion is possible.

LC4MP, like many other models, recognizes the brain-body connection as a dynamic one in which these inseparable components work in tandem, both reflecting and influencing one another as they move through time and space. Constantly responding to the environment with an iterative learning process that has remained largely unchanged for most of human history, the brain is believed to engage in a tripartite of resource-consuming activities. First, referred to as *encoding*, the brain routinely takes in both internal and external sensory information, prioritizing stimuli based on the environment's salience and the goals of the individual, as well as the duration of exposure. In this way, the most salient aspects of the environment and those deemed most critical to sustaining and protecting the living being experiencing the environment in real-time are initially prioritized for encoding, while over time, less salient and motivationally-relevant information will also be recognized by the perceptual system. This information is then linked, by way of additional resource allocation, to the brain's existing idiosyncratic representation of the world through *storage*. As the system updates, the brain uses further resources to activate and bring to the fore portions of its existing model in what is referred to as *retrieval*.

Within the LC4MP framework, attention is continuously activated and exhibited through dual mechanisms: automatic and controlled processes. This framework closely mirrors that originally put forth by James (1890), and later expanded upon by many scholars, in which he makes clear the distinction between involuntary and voluntary

attention. In both James' and Lang's conceptualizations, the prior incorporates the element of automaticity in which resources are reflexively and immediately allocated without higher order cognition to stimuli that are novel, motivationally salient, or learned signals. This directive is said to originate in the "old brain," referring to the earliest neurological anatomy in human evolution. According to Lang (2000), automatic resource allocation is found in orienting, startle, and defensive responses, all of which reflexively expand resource allocation to encoding — at the expense of storage and retrieval — for maximal environmental vigilance. Examples of behavioral manifestations of automaticity include involuntarily turning when someone calls one's name or quickly stepping out of the path of oncoming traffic without having consciously directed the body to do so (Lang, 2006). Alternately, controlled — or voluntary — resource allocation occurs in accordance with the individual's specific goals and their pertinent desire to participate, understand, or remember. This higher-order thinking is said to be dictated by the "new brain," referencing the more recent neurological anatomy in human evolution, the neocortex. An individual studying for an exam is utilizing controlled resource allocation, intentionally directing their attention toward the storage of selected information, while inhibiting their capacity for encoding as a means of filtering out other, less motivationally-relevant environmental inputs.

Especially pertinent to the present work is that controlled attention is posited as critical for both complex thinking and self-regulation (Kaplan & Berman, 2017). However, when cognitive resources are depleted and energy conservation becomes especially appropriate, higher order thinking — including self-regulation and related

inhibitory controls — often suffers. It's anticipated, then, that in instances of cognitive fatigue, heuristics are employed more liberally in order to conserve resources while sustaining continued functionality. Heuristics are conceptualized as "intuitive assessments of probability...based on data of limited validity" (Tversky & Kahneman, 1973, p. 1) wherein judgement rules allow for fast problem-solving, favoring speed and reduced cognitive resource demand over information completeness and solution accuracy. While heuristics are useful for managing many trivial, day-to-day decisions, over-reliance on such instinctual rules-of-thumb can cause an individual to overlook critical information or embrace over-generalizations. In particular, in their seminal work on this topic, Tversky and Kahneman (1973) uncovered how the representativeness heuristic can give rise to the availability bias. The availability bias drives acceptance of the most readily available information and is closely linked to stereotyping, wherein generalizations about a person or group of people are applied without discretion.

In the case of the present work, this may assist in explaining *how* reported increases in in-group affinity and out-group prejudice following exposure to death-related material function. Specifically, the present study hypothesizes that both the conscious and unconscious management of death's unique terror potential possesses a higher, and consequently more taxing, cognitive load as compared to other adverse stimuli and therefore utilizes more of one's finite resource supply. Such resource depletion then induces greater reliance on the availability heuristic, manifesting in in-group favoritism (See Figure One for conceptual map). In the political realm, this would consequently result in a greater affinity for one's own party while increasing negative bias against the

alternate party, thereby magnifying the difference in respondents' appraisals of each party.

H1: The relationship between mortality salience and affective polarization is mediated by cognitive fatigue.

Continuing further in this exploration of potentially degraded self-regulation and increased reliance on heuristic shortcuts as a result of fewer cognitive resources, it's appropriate to consider some significant drivers of relevant heuristic influences. Firstly, death exposure has been shown to diminish adverse responses to death. For example, in a randomized controlled study conducted by Spitzenstatter and Schnell (2020), those who were routinely exposed to mortality contemplations reported significantly lower ratings of fear of death and an increase in their acceptance of dying. Interestingly, within Buddhist practice, an entire schema of contemplations exist specifically related to death with the intent of providing practitioners greater control over their more automatic, aversive response to the topic (Rinpoche, 1993; Nhat Hanh, 2002). In this way, the terror potential of death may be mitigated through frequent non-traumatic exposure and a potential desensitization or hedonic adaptation that occurs as a consequence. As such, it is appropriate to consider how such familiarity, conceptualized here as the frequency of one's interactions with death-related scenarios over the life course, may impact the immediate processing experience and subsequently alleviate the proposed fatigue of mortality salience.

H2: As death exposure increases, the relationship between mortality salience and cognitive fatigue decreases.

Similarly, when considering the possibility of increased reliance on heuristic shortcuts as a consequence of cognitive fatigue, it's appropriate to also examine conditional influences of media consumption as media effects scholarship has documented a relationship between mass media exposure and increased acceptance of stereotypes (Mastro & Tuchachinsky, 2011) as well as increased employment of confirmation bias strategies (Boyer, 2021). In the confines of the present study wherein one's group identity is attributed to political party, it is appropriate to qualify media to news media, specifically, wherein political information is most often covered, albeit in increasingly sensationalist means (Vestergaard & Hendricks, 2018; Berry & Sobieraj, 2016). As shown in Figure 1, news media is explored in a conditional process model as a second stage moderator.

H3: As news media consumption increases, the relationship between cognitive fatigue and affective polarization increases.

At this point, it is clear that thinking comprises an array of metabolically-bound processes wherein environmental information is acknowledged through a complex, time-sensitive reaction by way of the mind-body system. Simply put, humans are constantly sensing, identifying, remembering, and responding through a dynamic combination of automatic and controlled means. Yet still the question of how resources are uniquely allocated to stimuli has yet to be satisfactorily explicated. Why might two people encounter the same scenario simultaneously and yet respond with great variety and later recall vastly different experiences? Under LC4MP, the answer lies in motivational systems.

Motivational Systems as Determinants of Emotion & Attention

In addition to resource scarcity and attentional duality, LC4MP further explicates resource allocation by building upon Caccioppo and colleagues' (1999) dual-system model of functional emotion. In this model, emotions exist along two planes: valence and arousal. Valence assigns a positive or negative attribution to emotions, while arousal indexes the emotional intensity. LC4MP, too, acknowledges emotions as functional, emphasizing their role as both an input *and* output within the larger dynamic, embodied system. Critically, motivational system activation is cited as the underlying lynchpin: “motivation is the very beginning of a causal chain of responses that leads from a stimulus to an emotional feeling or experience” (Lang, 2006, p. 245), which in turn, drives attention and behaviors.

The motivational system is composed of two independent yet interrelated arrangements within the brain, the appetitive and aversive systems, both of which respond to the environment to produce affective responses. Along the spectrum of valence, appetitive system activation (ASA) is deemed responsible for generally positive emotions, promoting curiosity and exploration, particularly within neutral environments. Alternately, aversive, or defensive, system activation (DSA) is said to drive negative emotions, namely fear, and supports the conservation and vigilance that is commonly associated with the “fight or flight” state. Arousal is a function of increasing activation in the underlying motivation system, such that increases in arousal drive more intense emotional experiences. In sum, LC4MP posits that it is the unique sensitivities of each individual's motivational systems that trigger, within milliseconds of exposure to

environmental stimuli, emotional experiences which in turn effect further resource allocation for both cognitive and behavioral responses (Lang, 2006).

These systems, ASA and DSA, can work reciprocally, such that when one increases the other decreases, or in parallel such that they are simultaneously elevated or diminished, depending on the nature of environmental stimuli. Dimensions of familiarity, control over the presentation of stimuli, and sensory channel (visual, auditory, physical, etc.), among other factors, all influence how an individual's motivational systems may direct subsequent affective response and associated resource allocation. Notably, ASA and DSA not only activate with some predictability across various environments, but are also shown to exist within individuals as static traits. Thus, despite there existing a panoply of environmental permutations to which one's motivational system may respond, consistencies in reactivity have been found in relation to personality types. In fact, one's unique motivational system sensitivities are referred to as "trait motivational reactivity." Lang, Kurita, Rubenking, and Potter (2011) found a significant association between trait motivational reactivity and sensation seeking, such that those high in ASA and low in DSA scored highest on sensation seeking measures while those with low ASA and high DSA scored the lowest. Associations with excess activity of the defensive system are especially well-established within clinical psychology scholarship (Berenbaum, Raghavan, Le, Vernon, & Gomez, 1999). An early example of such research is that by Bryant and Harvey (1995) wherein a modified Stroop test using threat and non-threat words found that high-anxiety individuals were slower at reporting the colors of threat versus non-threat words because of their heightened attentional bias toward the threat. In

other words, they could not as easily exclusively focus on the color of the text because they could not ignore the meaning of the threatening words.

In early LC4MP work, such differences led to the categorization of four motivational groups: Risk Takers, Risk Avoiders, Coactives, and Inactives (Lang, 2006). Though these distinctions are now often regarded as too arbitrary to warrant explicit delineation, the stability and consequent predictability of trait motivational reactivity allows media scholars and communications practitioners to construct messages that strategically manipulate participants' reactivity for maximal emotional, cognitive, and behavioral effect. "High-ASA individuals tend to have more positive responses, pay more attention to and be somewhat less aroused by all messages, and in particular to arousing negative messages. High-DSA individuals tend to feel more negative and be very aroused by all negative messages and to pay more attention to moderately arousing and less attention to highly arousing negative messages" (Lang & Lee, 2014).

To assess motivational system reactivity, Lang, Shin, and Lee (2005), developed the Motivational Activation Measure (MAM). This protocol does not ask respondents to reflect on their own behaviors. Rather, respondents rate how positive, negative, and arousing they find a standard series of images selected from the International Affective Picture System in order to provide a covert assessment of individual-level appetitive and defensive system reactivity. This tool has been shown to be a reliable mechanism for objectively assessing trait motivational reactivity through both concurrent physiological measures and test-retest methods, and has since been successfully applied to understanding responses to and usage of a range of media applications, including but not

limited to cancer messaging (Lang, 2006), in-game advertising (Chung & Sparks, 2015), and even online dating app behavior (Cummings & Mays, 2021), to better predict how individuals will respond to certain frames, features, and modalities of stimuli.

In the employment of MAM, as well as the broader cognitive framework presented by LC4MP, the present study seeks to assess trait motivational reactivity and subsequently investigate if such biological predisposition affects cognitive performance and affective outcomes following exposure to mortality salient content. In light of established literature indicating associations between high defensive system activation and an attentional bias toward moderately arousing, negative stimuli (Lang, 2011), this work anticipates that those with high defensive system activation will have particular difficulty ignoring the threat-relevant information presented by the mortality salience prime and will consequently require more cognitive resources to effectively manage the associated terror potential. This will result in reported increased levels of cognitive fatigue as compared to those in a control condition. Similarly, this increased attenuation to the death reminder is expected to magnify the effects of partisanship, wherein those with high DSA will become increasingly determined to bolster their worldview, as predicted by extant terror management literature, through out-party denigration. Conversely, those high in ASA are expected to find the mortality salience prime less arousing and consequently dismiss it, and its associated terror potential, from their consciousness more efficiently. As a result, respondents are expected to report less cognitive fatigue and be less prone to ideological bolstering (i.e., reduced partisanship).

H4a: Those with high defensive system activation (DSA) will exhibit increased cognitive fatigue after a mortality salience exposure.

H4b: Those with high approach system activation (ASA) will exhibit decreased cognitive fatigue after a mortality salience exposure.

H5a: Those with high defensive system activation (DSA) will exhibit increased affective polarization after a mortality salience exposure.

H5b: Those with high approach system activation (ASA) will exhibit decreased affective polarization after a mortality salience exposure.

As shown by Figure One, these hypotheses examine the effect of trait motivational reactivity on both the indirect and direct paths in the proposed mediation model.

Together, these hypotheses work to understand whether individual-level differences in trait motivational reactivity may be associated with unique processing patterns for mortality salience that, in turn, may shed light on how evidence for disparate behavioral outcomes may co-exist.

However, this work also maximizes the present opportunity to investigate another cognitive moderator that may function during distal processing yet mitigate adverse behavioral outcomes. Specifically, this work turns to self-compassion as a final individual-level difference to be explored.

Consideration for the Metacognitive Skill of Self-Compassion

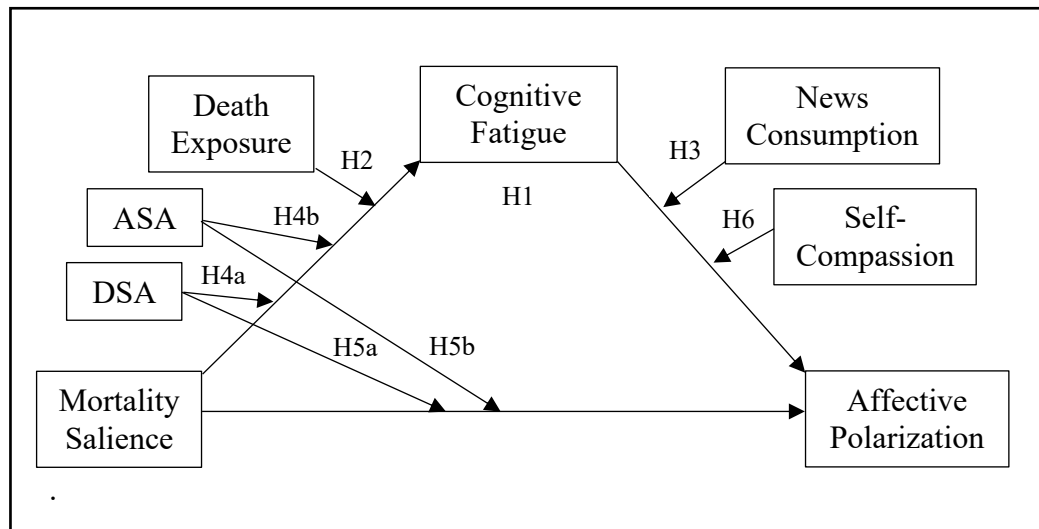
Nearly three decades after its development, TMT theorists hypothesize in their full text on the subject that individuals who have high self-esteem — defined here as the feeling that one is a valuable participant in a meaningful universe — are those most likely to react to conscious death thoughts in a constructive manner. Indeed, high self-esteem has been shown to buffer effects of anxiety more broadly while low self-esteem has been linked to a range of social, psychological, and health problems (See Solomon et al., 2015, p. 53). However, self-esteem when conceptualized this way is tied directly to one’s cultural boundaries of “good” and “bad” as a means of establishing both value and meaning. The present study seeks to examine an alternate positive trait that can be disentangled from cultural bounds and, most pertinent for the objective of research applications, can also be taught: self-compassion.

Compassion itself is widely regarded around the world as a critical element of societal well-being and retains, through a variety of conceptualizations, a prominent place in both religious and professional doctrines. Across extant scholarship, a broad consensus exists that compassion includes attending to another’s suffering and a motivation to relieve that suffering. Self-compassion, more specifically, is conceptualized by Neff (2003) as including three distinct components: (a) kindness toward self (b) a shared sense of humanity via the universality of suffering and (c) mindfulness in the form of present moment awareness.

Exploratory and pilot studies employing self-compassion meditation and skills training have uncovered promising results on well-being including reduced levels of

depression and anxiety among both physically healthy groups (Gilbert & Proctor, 2006; Allen & Leary, 2010; Haukaas et al., 2016) and those with terminal illness, reduced self-criticism and rumination (Purdie & Morley, 2015; Mosewich et al., 2020), and improved behavioral response to psychosocial stress (Pace et al., 2009). Perhaps most prescient to the present study and the concern of distal defenses, Phillips, Hine, & Marks (2017), identified self-compassion's moderating capacity for implicit, or preconscious, cognitive processing.

Given the evidence for self-compassion's buffering functionality against such biopsychosocial stressors, it is appropriate to speculate that this metacognitive skill may also facilitate more adaptive processing for managing potential existential anxiety than the implicit distal defense mechanisms posited by TM. Recall that distal defenses are said to be enacted subconsciously following proximal defenses and do not possess a direct, logical relation to death itself. Indeed, self-compassion is a critical component of Stoicism and Buddhism, both of which also feature constructive death contemplation practices. Self-compassion practice is associated with soothing defensive systems or simply resisting further activation (Neff, 2021). In this way, someone with high self-compassion is able to hold and even reflect on an innate adverse reaction to stimuli as a means of neutralization. Thus, the present study seeks to explore the hypothesis that increased self-compassion will moderate the relationship between cognitive fatigue and mortality-induced affective polarization, or the second stage of the indirect effect in the proposed model shown in Figure 1. Specifically, H6 posits: As self-compassion increases, the relationship between cognitive fatigue and affective polarization decreases.

Figure 1*Visualization of Hypothesized Relationships*

Together, these variables provide a deeper examination of possible underlying cognitive mechanisms and lifestyle influences affecting the processing model put forward by terror management.

CHAPTER V: METHODOLOGY

Overview & Goals

The purpose of this dissertation study is to establish not only if a mortality salience prime will cause increased affective polarization as posited by terror management theory, but also to explore the mechanisms through and conditions under which such a relationship may occur. Specifically, with the contributions afforded by the theoretical lens of LC4MP, this study is occupied with the potential mediating role that cognitive fatigue may play. Both death exposure and trait motivational reactivity are explored as potential first stage moderators in this relationship, while news consumption and self-compassion are explored as pertinent second stage moderators that may affect the posited increased reliance on heuristic shortcuts consequent to increased cognitive fatigue. In doing so, this work seeks to increase the predictive power of the terror management framework by accounting for biological predisposition. This insight, in turn, could pave the way for more personalized communications on death-related policy — whether related to MAiD, human recomposition, or other future matters of public interest — that are designed to avoid exacerbating implicit prejudice and, instead, support collaborative consideration.

Design & Sample Characteristics

This experimental study was administered to a sample of 235 American, English-speaking adults between the ages of 20 to 50 years old with equal distribution between those identifying as Democrats and Republicans. Participants were recruited through the paid research platform Qualtrics and randomly assigned to either an experimental MS

treatment condition or a control condition. The sample size (n=235) was based on available funding for the research. Age thresholds were in response to both (a) Burke's (2010) explicit call for TM scholarship produced with non-collegiate samples and (b) effects of senescence on cognition, particularly after the age of 50, as shown by extant research.

The questionnaire display and scoring for variables of interest is available in the appendix.

Measures

Mortality Salience

The mortality salience manipulation was conducted via the Mortality Attitudes Personality Survey ([MAPS], Rosenblatt et al., 1989). MAPS consists of two open-ended essay questions which respondents were encouraged to write at least a few sentences in response to, "Please briefly describe the emotions that the thought of your own death arouses in you," and, "Write, as specifically as you can, what you think will happen to you as you physically die, and once you are physically dead." Conversely, participants in the control condition responded to the same questions framed around severe dental pain instead of death, as has been done in numerous terror management studies as shown by the meta-analysis completed by Burke and colleagues (2010).

Trait Motivational Reactivity

Biological predisposition was operationalized through the Mini-Motivational Activation Measure (MAM; Lang, Shin, & Lee, 2005; Lang, 2011). MAM was first developed by Lang and colleagues as a means of effectively indexing biologic

motivational predisposition without relying on the methodologically burdensome challenge of measuring physiological responses. Rather, MAM covertly indexes participants' ASA and DSA by showing a standardized series of 90 photos and subsequently asking participants to rate their emotional experience (positive, negative, arousal) of viewing each; a process that was validated through concurrent physiological measures in 2007 (Lang, Bradley, Sparks & Lee). The Mini-MAM functions in the same way, but with a reduced completion time as it shows only 41 images. Given the time-sensitivities of mortality salient cognition demonstrated to date as well as the duration of the protocol, this study employed the Mini-MAM instead of its predecessor as a means of combating participant fatigue. Individual scores for the respective reactivity systems were then tabulated in accordance with the appropriate manual guidelines as provided by Lang et al. (2011): ASA is calculated by subtracting the mean positive rating of both positive and negative images at Arousal Level 1 from the mean positivity of positive images at Arousal Level 6 while DSA is calculated by subtracting the mean negativity of both positive and negative images at Arousal Level 1 from the mean negativity of negative images at Arousal Levels 3 and 4.

Cognitive Fatigue

Depletion of cognitive resources as a result of the proposed inhibition of death thoughts, was measured using Paas' (1992) mental effort self-report item. Using a 9-point Likert scale, respondents indicated how much mental effort was required to answer the MS (or control) priming questions. Notably, CLT also operates on the scientifically-durable premise that cognition is limited in capacity, complimenting LC4MP. To control

for baseline fatigue, respondents were also initially asked to indicate how mentally rested they were on a scale of 1–100 at the very beginning of the study procedure.

Affective Polarization

Assessing outgroup animus requires two pieces of information: personal group identity and, subsequently, the subjective affective assessments of both the identified in-group as well as the consequent out-group(s). Thus, to first assess political identities and ideologies, participants were asked via a single item to indicate the extent to which they identified with either the Republican or Democratic Party. Then, following the experimental manipulations, subjects completed a “feeling thermometer” for each party in accordance with the American National Election Study data on which Iyengar and colleagues (2012) based some of their analysis. This instrument asks respondents to rate each party on a 101-point scale ranging from cold (0) to warm (100). In subsequent data preparation, in- and out-party feeling were established with respect to their initial identification response, and because of the differential mathematical nature of affective polarization, all analyses were conducted for in- and out-party feelings independently.

Death Exposure

Death exposure was operationalized via the death exposure subscale of Jong and colleague’s (2019) International Death Survey (IDT). This instrument includes one global, subjective measure for familiarity and contact with death, as well as nine items investigating specific death-related experiences including attendance at a funeral, witnessing a pet die, involvement in hunting, and nearly dying themselves. Participants are asked to rate each on a 4-point Likert scale ranging from “never” to “frequently.”

Notably, to avoid priming death in a way that could impact the typical processing framework posited by TM and the associated hypotheses studied here, the IDT items were the last items displayed to participants within the study procedure. Cronbach's alpha of the scale in the present study was only fair ($\alpha = 0.63$).

News Media Consumption

Though accurately capturing media consumption behaviors through self-report methods is replete with challenges, the present study acknowledges the critical importance of examining this variable within the proposed model. As such, news media consumption was operationalized through the following one-item self-report measure: "On average, approximately how much time each day do you spend viewing news media?" News media was then further qualified as either print or traditional public interest information with examples including The New York Times, Fox News, ABC News, and The Washington Post. Respondents then chose from 15-minute increments ranging from fewer than 15 minutes to "more than 3 hours."

Self-Compassion

Trait self-compassion was operationalized using Raes, Pommier, Neff, & Van Gucht's (2011) Self-Compassion Scale Short-Form which is a time sensitive alternative to Neff's (2003) 26-item Self-Compassion Scale. The short form retains the six subscales — self-kindness, self-judgement, common humanity, isolation, mindfulness, overidentification — of the longer version and maintains near-perfect correlation ($r = .97$). In this 12-item questionnaire, participants indicate through a 5-point Likert scale how often they act a specific way toward themselves in difficult times, with statements

including content such as “When times are really difficult, I tend to be tough on myself” and “I try to see my failings as part of the human condition.” After reverse scoring for negative subscales and calculating the average of each of the six subscales, total scores are established using respondents’ overall mean. Neff (2003) notes the absence of clinical norms for scoring but suggests an ad hoc rubric of < 2.49 as low, $2.5-3.5$ as moderate, and > 3.51 as high. The scale demonstrated strong reliability in the present study with a Cronbach’s alpha of 0.82.

Pretesting of the Protocol

A soft launch of the protocol was administered through Qualtrics to a small sample ($n = 41$) to test the efficacy of the survey design and selected instruments. The resulting respondent data indicated three significant flaws in the original design, each of which is outlined below along with the pertinent protocol updates that were executed to solve each challenge.

First and most glaringly, the initial study made use of Backward Digit Span, a subscale of the Wechsler Adult Intelligence Scale (1991), as the objective measure for cognitive fatigue, rather than Paas (1992) one-item self-report scale. However, this proved ineffective for the online questionnaire design. A mere 14% of pre-test respondents successfully achieved four-digit strings, significantly underperforming expected outcomes. Previous research indicates that, for the given sample’s age range, the average span achieved should have been between 4.3 and 4.9 digits (Gregoire & Van der Linden, 2011). This could have been a result of low respondent attention or environmental distractions. As a result, Paas’ (1992) single-item cognitive fatigue

measure was instituted as a replacement. Unlike Backward Digit Span which is a more covert measure of cognitive performance, this item asked respondents to self-rate on a 9-point scale how cognitively fatigued they were by the treatment or control exercise, dependent upon their respective condition.

Second, pretest respondents generally did not provide substantive answers in response to either the experimental or control stimuli. In earlier terror management scholarship that employed the two-question prime of the Mortality Attitudes and Personality Survey, respondents largely complied with the request to compose detailed responses. Achieving response specificity assisted in the face-validity of the manipulation check. However, a great deal of this scholarship has also been instituted in a lab setting where researchers can employ greater environmental control and may also benefit from response bias given the comparable proximity of the researcher. Similarly, a majority of terror management studies have been executed with collegiate samples who may be more inclined to provide substantive answers in order to acquire credit for their participation. Therefore, in addition to incorporating more stringent response guidelines (no gibberish or duplicate responses) and a 15-character minimum response threshold, a 30-second minimum view time was also instituted for the mortality salience manipulation exercise.

Third, to assist in improving overall respondent attention and performance throughout the totality of the survey, a single-item response commitment question was also instituted immediately following the consent agreement and cognitive fatigue screening question: “We care deeply about the quality of this survey and hope to receive the most accurate measure of your views. Though some sections of this survey may feel

repetitive, it is important that you thoughtfully provide your best answer to each question. Do you commit to providing thoughtful and honest answers to the questions in this survey?” Respondents were then given three choices: “I will not provide my best answers.” “I cannot promise either way.” “I will not provide my best answers.”

Finally, as an additional quality assurance measure, the pretest response time was used to institute a completion speed check. Respondents who completed the survey in one-tenth of the median time were automatically removed from the response set.

Data Preparation & Cleaning

Prior to conducting any analysis, respondent data was cleaned through two stages. First, the data was reviewed based on dimensions of face validity. Three respondents who had indicated in the commitment pre-qualifying question that they would not provide their best responses were omitted. Nine respondents who provided nonsensical responses to the mortality salience or dental prime stimuli were also removed. Finally, a further nine respondents who had thru-lined two or more instruments were also removed.

In addition to measures of face validity, one respondent was omitted on the grounds of empirical outlier tests. To determine outliers, Mahalanobis distance, Cook’s distance, and Levene test for equality of variances were executed on respondent data for each of the variables of interest. The resulting indicators were then totaled across all three tests. Respondents who subsequently scored a two or higher, indicating that at least two of the aforementioned tests found the dataset to be an outlier, were also removed.

In total, 22 of the initial 235 responses were removed. All remaining responses were then screened for missing data. A total of two cases, one from the experimental

group and one from the control group, were incomplete with missing data only for the one-item cognitive fatigue measure following the experimental manipulation. In both instances, the missing value was replaced with the median value for their respective condition.

These data cleaning procedures resulted in a final sample of 213 viable respondents. Pertinent demographic information for the final data set is described in Table One below. Subsequent to data cleaning, the sample retained a distribution of 54.9% Republicans and 45.1% Democrats, and 47.9% males and 52.1% females. Race was reported at 77.9% White/Caucasian, 8.5% Hispanic/Latino, 8.0% African American, 4.7% Asian, and 1.0% other. Finally, 30.5% of the sample had no dependents, while 39% had one dependent, and the balance (30.5%) had more than one dependent.

Analysis

Investigations exploring through what mechanism an independent variable exerts influence on a dependent variable call for a mediation analysis, while investigations exploring when, or under what conditions, a relationship occurs require a moderation analysis. Igartua and Hayes (2020) state, “The most ambitious research and analysis combines the goals of understanding mechanisms and boundary conditions by examining whether certain psychological mechanisms are stronger or weaker in certain circumstances or contexts, or for certain types of people.” The present study set out to do exactly that in what has historically been referred to as a “moderated mediation” model, but which Hayes (2018) strongly encourages referring to as conditional processing as a means of minimizing confusion.

It is important to note here that the best approach to such analyses is ever-evolving. Significant to the present work is that a mediation analysis can still be an appropriate line of inquiry even when the total effect of X, as represented by path c, on Y is not statistically different from zero (O'Rourke & MacKinnon, 2018; Igartua & Hayes, 2021). In this case, an independent samples t-test found no significant difference in reported cognitive fatigue levels, in-party feeling, or out-party feeling between the experimental and control conditions. Despite this, Igartua and Hayes (2021) contend exploration of a theoretically-sound mediating variable is still appropriate: "Though evidence of a statistically significant effect of X on Y often motivates questions about mediation in the first place, it is now widely understood and advocated among experts ...that neither is a requirement for mediation to be in operation in the process generating one's data." (p. 8).

Additionally, contemporary statistical work, including that by Hayes (2018), has come to favor mediation and conditional processing interpretations that examine the product of the regression coefficients of paths a and b over tests of joint significance of said paths. "What matters is whether the product of a and b is different from zero, since it quantifies how much X 'moves' Y by 'moving' M" (Igartua & Hayes, 2021, p. 11). However, as the sampling distribution of the product of two regression coefficients is generally abnormal, an accepted alternative to inferences about the indirect effect is percentile bootstrap confidence intervals, not p-values. This is the approach that was adopted by the present study.

The present analysis was conducted using version 4.0 of Hayes (2018) PROCESS

Macro on IBM SPSS Version 27. Hayes' macro is one tool that has gained considerable traction for testing moderation, mediation, and conditional process models for the purposes of not only identifying *if*, but also *how* and under what conditions (*when*) an outcome may occur. The macro offers more than 80 model templates for testing a variety of moderation, mediation, and conditional processes, but does face a limitation regarding the maximum number of moderators that can be tolerated by any one model, even when utilizing custom syntax, within SPSS. No more than two moderators may be included. Consequently, hypothesis testing was implemented through five separate tests, replicated twice for each component of affective polarization. Each test retained the same predictor (MS), mediator (CF), and dependent variables (in-/out-party feeling), but utilized the specific PROCESS macro model most appropriate for testing the hypothesized moderator's path effect(s). In all tests, age and baseline cognitive fatigue were entered as control variables. Similarly, all tests utilized bias-corrected 95% confidence intervals ($n = 5,000$) to test the significance of indirect effects. Path figures with coefficients for each hypothesis are shown within the respective results section and include both in-party and out-party feeling outcomes.

CHAPTER VI: RESULTS

Descriptive Statistics

Means, standard deviations, and Pearson's correlations (r) were calculated for all variables of interest, as shown in Table 1. Contrary to expectations, MS was negatively correlated with in-party feelings ($r(213) = -.09, p = .17$) and positively correlated with out-party feelings ($r(213) = .02, p = .73$), though neither achieved significance. Also unexpected, cognitive fatigue was significantly positively associated with both in-party feelings ($r(213) = .26, p < .001$) and out-party feelings ($r(213) = .16, p < .05$). Interestingly, both ASA and DSA demonstrated significant negative relationships with out-party feeling ($r(213) = -.25, p < .001$; $r(213) = -.35, p < .001$).

Table 1

Descriptive Statistics & Pearson's Correlation Values for Variables of Interest

	M	SD	1	2	3	4	5	6	7
1. ASA	.83	1.65							
2. DSA	2.07	2.27	.25*						
3. DE	18.08	6.31	-.11	-.23*					
4. CF	6.39	2.03	-.08	.09	.15*				
5. SC	2.97	.58	-.12	-.18*	-.06	.04			
6. NC	61.06	53.70	-.06	-.16*	.17*	.06	.03		
7. IPF	67.16	25.39	-.07	-.05	.18*	.26**	.08	.22**	
8. OPF	37.24	29.22	-.25**	-.35**	.32**	.16*	.02	.07	.07

Note. N = 213. * $p < .05$, ** $p < .001$,

Abbreviations: ASA = Appetitive System Activation; DSA = Defensive System Activation; DE = death exposure; CF = cognitive fatigue; SC = self-compassion; NC = news consumption; IPF = In-party feeling; OPF = out-party feeling.

Hypothesis Testing

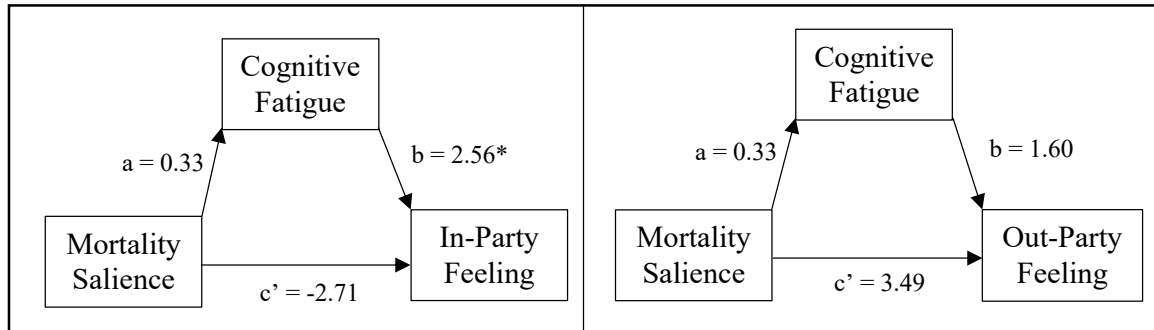
To begin, an independent samples t-test was run to compare the means of reported cognitive fatigue, in-party feeling, and out-party between the MS and control groups. There was no significant difference in the scores for cognitive fatigue between the experimental (M=6.47, SD=2.04) and control (M=6.33, SD=2.03) conditions; $t(211)=-.50, p =.620$. Similarly, there was no significant difference in scores for in-party feeling between the experimental (M =64.72, SD = 26.25) and the control (M=69.45, SD =24.17) conditions; $t(211)=1.36, p =.17$. Finally, scores for out-party feeling between the experimental (M =37.96, SD = 29.49) and the control (M=36.56, SD =29.09) conditions also failed to generate significant results; $t(211)=-.35, p =.73$. However, though the t-test did not yield statistically significant differences between the groups in critical variables being explored across the analysis, scholars now accept that mediation may still be at work: “Though evidence of a statistically significant effect of X on Y often motivates questions about mediation in the first place, it is now widely understood and advocated among experts who think and write about mediation analysis for a living that this is neither a requirement for mediation analysis to be undertaken nor for mediation to be in operation in the process of generating one’s data” (Igartua & Hayes, 2021, p. 4).

Simple Mediation Effects of Cognitive Fatigue Between Mortality Salience and Affective Polarization

H1 predicted that the relationship between mortality salience and affective polarization is mediated by cognitive fatigue. This was not supported.

Figure 2

Statistical Models of Simple Mediation Effects of Cognitive Fatigue on In- and Out-Party Feeling



Note. * $p < .01$

In-Party Affect. Participants exposed to the MS prime exhibited more negative feeling toward in-party members, on average, than those who were exposed to the control condition ($\beta = -1.87, t = -.55, p = .58$). Notably, statistical significance of the total effect is not considered a requirement of mediation. Rather, the analysis must explore the partitions of the total effect via indirect (a, b) and direct (c') pathways of influence. The indirect effect is the product of the effect of MS on cognitive fatigue (path a) and the effect of cognitive fatigue on in-party feeling (path b). As shown in Figure 2, those exposed to MS experienced an increase in cognitive fatigue ($\beta = .33, t = 1.19, p = .23$), on average, and the more a participant experienced cognitive fatigue, the more positive the subsequent evaluation of in-party members ($\beta = 2.56, t = 3.09, p < .01$). While only the latter effect was statistically significant, per Igartua and Hayes (2021), joint significance of the components of the indirect effect is not requisite for meaningful mediation; it is the indirect effect ($a*b$) that matters. In this case, $ab = .33(2.56) = .84$, indicating that respondents reported .84 units more positive feelings for in-party members, on average,

resulting from an increase in cognitive fatigue from exposure to MS. However, the bootstrap confidence interval for this indirect effect based on 5,000 bootstrapped samples includes zero [-.57 to 2.58], indicating a lack of statistical significance. Taken together, the results of this analysis did not support mediation of the effects of MS on in-party feelings via cognitive fatigue. The observed direct effect, then, represents the difference between the conditions' in-party feelings that results through some process other than cognitive fatigue. Adjusting for differences between reported cognitive fatigue levels, exposure to MS was associated, on average, with a slight decrease in feelings about the in-party, though this was not statistically significant ($\beta = 2.71$, $t = -.81$, $p = .42$). As a result, the observed outcomes do not support H1 as it relates to in-party feelings.

Table 2
Testing the Mediating Effect of Cognitive Fatigue on In-Party Feeling

Predictors	On Cognitive Fatigue				On In-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.99	[-.04, .04]	-.24	.25	.33	[-.73, .25]
BF	.02	.01	<.001	[.01, .03]	.24	.065	<.001	[.11, .37]
MS	.33	.278	.24	[-.22, .77]	-2.71	3.33	.42	[-9.29, 3.86]
CF					2.56	.83	.002	[.93, 4.19]
R^2	.06		.006		.14		<.001	
F	4.30				8.49			

Note. This analysis used PROCESS macro model 4. N = 213.

Abbreviations. BF =baseline fatigue; MS = mortality salience; CF = cognitive fatigue.

Out-Party Affect. Participants exposed to the mortality salience prime reported more positive feelings about the out-party, on average, than those exposed to the control; however, this total effect was not statistically significant ($\beta = 4.01$ units, $t = 1.00$, $p =$

.32). Regarding the indirect effect as shown in Figure 11, path a naturally remained unchanged over the in-party analysis ($\beta = .33, t = 1.19, p = .24$) while path b found increased cognitive fatigue to be associated with more positive out-party evaluations ($\beta = 1.60, t = 1.61, p = .11$). However, neither pathway was statistically significant. The resulting indirect effect as measured by $a*b = .33(1.60) = .54$ also yielded non-significance (95% CI [-.4346 to 1.958]). Therefore, the results of this analysis do not support mediation of the effects of MS on out-party feelings by cognitive fatigue. Adjusting for differences between reported cognitive fatigue levels, exposure to MS was associated with, on average, more positive feelings about the out-party, though this is non-significant ($\beta = 3.49, t = .87, p = .38$). As a result, H1 is not supported as it relates to out-party feelings.

Table 3

PROCESS Results for the Mediating Effect of Cognitive Fatigue on Out-Party Feeling

Predictors	On Cognitive Fatigue				On Out-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.99	[-.04, .04]	-.149	.30	.61	[-.73, .44]
BF	.02	.01	<.001	[.01, .03]	.24	.08	.003	[.08, .39]
MS	.33	.278	.24	[-.22, .77]	3.49	4.00	.38	[-4.39, 11.37]
CF					1.59	.99	.11	[-.36, 3.55]
R^2	.06		.006		.07		.006	
F	4.30				3.8			

Note. This analysis used PROCESS model 4. $N = 213$.

Abbreviations. *BF* = baseline fatigue; *MS* = mortality salience; *CF* = cognitive fatigue.

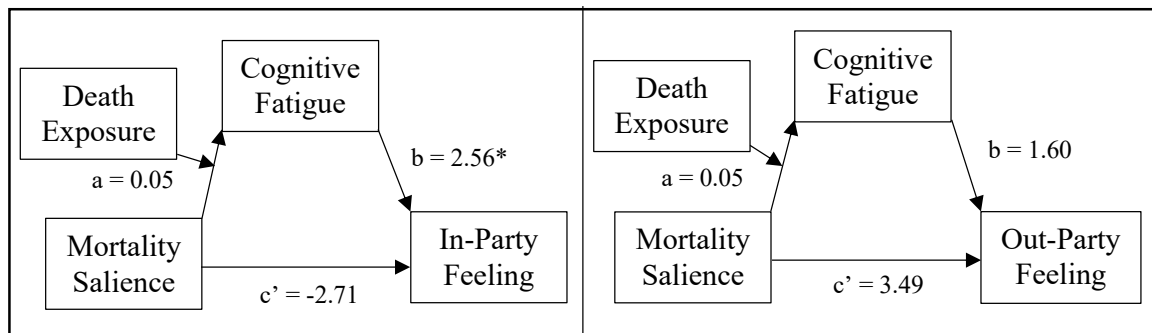
In consideration of measures related to both in- and out-party affect, this analysis did not yield any evidence to support H1, the mediation of the relationship between mortality salience and affective polarization via cognitive fatigue.

Influence of Death Exposure on Mortality Salience Processing

As shown in Figure 3, this conditional process analysis examined the hypothesized first stage moderator of death exposure (H2) on the relationship between mortality salience and cognitive fatigue, with an expectation that death exposure would interact with mortality salience to reduce cognitive fatigue. This was tested using the PROCESS macro model number 7. Age and baseline fatigue were entered as covariates.

Figure 3

Statistical Model of the Influence of Death Exposure on In- and Out-Party Feeling



Note. * $p < .01$

In-Party Affect. In the test of conditional indirect effects, death exposure was not found to significantly moderate the effect of mortality salience and in-party feelings via cognitive fatigue among the recorded observations (Unstandardized interaction $\beta = .05$, $t = 1.10$, $p = .27$). As shown in Table 4, though increased cognitive fatigue was significantly associated with more positive in-party feelings ($\beta = 2.56$, $t = 3.09$, $p = .002$), the overall moderated mediation model for the observed outcomes was not supported with an index = .12 (95% CI = [-.08, .41]). Tests on the conditional effects on path a found a weaker association between mortality salience and cognitive fatigue among those low in death

exposure ($\beta = -.05, t = -.11, p = .90$) relative to those with high death exposure ($\beta = .56, t = 1.45, p = .15$), though neither association was statistically significant.

Table 4

Conditional Processing PROCESS Results for Death Exposure on In-Party Feeling

Predictors	On Cognitive Fatigue				On In-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.98	[-.04, .04]	-.24	.07	.33	[-.73, .25]
BF	.02	.01	.002	[.01, .03]	.24	.07	<.000	[.11, .37]
MS	.26	.28	.36	[-.30, .81]	-2.71	3.33	.42	[-9.29, 3.86]
MS x DE	.05	.04	.27	[-.04, .13]				
CF					2.56	.82	.002	[.98, 4.19]
R^2	.07		.007		.14		<.000	
F	3.33				8.50			

Note. Analysis used PROCESS macro model 7. $N = 213$.

Abbreviations. BF = baseline fatigue; MS = mortality salience; DE = death exposure; CF = cognitive fatigue.

Out-Party Feeling. In the test of conditional indirect effects, death exposure was not found to significantly moderate the effect of mortality salience on out-party rating via cognitive fatigue among the recorded observations (Unstandardized interaction $\beta = .05, t = 1.10, p = .27$). Though both mortality salience ($\beta = 3.49, t = .87, p = .38$) and increased cognitive fatigue were associated with higher out-party feelings ($\beta = 1.60, t = 1.61, p = .11$) via measures of direct and indirect effects, respectively, neither relationship was significant. The overall moderated mediation model shown in Table 5 was not supported with an index = .08 (95% CI = [-.06, .30]).

Table 5*Conditional Processing PROCESS Results for Death Exposure on Out-Party Feeling*

Predictors	On Cognitive Fatigue				On Out-Party Feeling			
	β	SE	<i>p</i>	95% CI	β	SE	<i>p</i>	95% CI
Age	.00	.02	.98	[-.04, .04]	-.15	.07	.33	[-.73, .25]
BF	.02	.01	.002	[.01, .03]	.24	.07	.003	[.08, .39]
MS	.26	.28	.36	[-.30, .81]	-3.49	4.00	.38	[-4.39, 11.37]
MS x DE	.05	.04	.27	[-.04, .13]				
CF					1.60	.99	.11	[-.36, 3.55]
R^2	.07		.007		.07		.006	
<i>F</i>	5.00				3.76			

Note. This analysis used PROCESS macro model 7. N = 213.

Abbreviations. BF = baseline fatigue; MS = mortality salience; DE = death exposure; CF = cognitive fatigue.

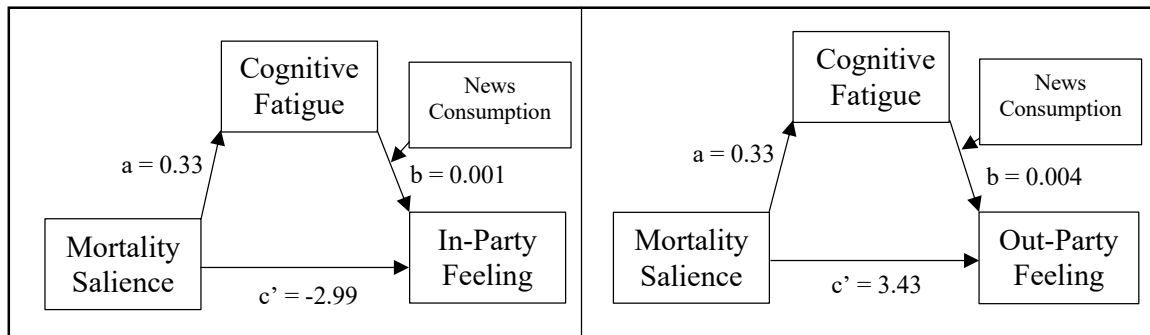
In considering both the in-party and out-party analyses, H2 is not supported as death exposure was not found to moderate the effect of mortality salience on affective polarization via cognitive fatigue among the recorded observations, let alone in the predicted direction.

Influence of News Consumption on Mortality Salience Processing

As shown in Figure 4, this conditional process analysis examined a hypothesized second stage moderator, news consumption (H3), on mortality salience processing. Specifically, H3 predicted that as news consumption increased, the effect of cognitive fatigue on affective polarization will increase.

Figure 4

Statistical Models of the Influence of News Consumption on In- and Out-Party Feeling



In-Party Feeling. In the test of conditional indirect effects, news consumption was not found to significantly moderate the effect of mortality salience on in-party feeling via cognitive fatigue among the recorded observations (Unstandardized interaction $\beta = .001$, $t = .09$, $p = .93$). As in the original mediation model testing H1 and shown in Table 6, mortality salience is non-significantly associated with increased cognitive fatigue ($\beta = .33$, $t = 1.19$, $p = .24$) and non-significantly associated with decreased in-party feeling ($\beta = -2.99$, $t = -.91$, $p = .37$). The overall moderated mediation model was not supported with an index = .00 (95% CI = [-.01, .02]).

Table 6

Conditional Processing PROCESS Results for News Consumption on In-Party Feeling

Predictors	On Cognitive Fatigue				On In-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.98	[-.04, .04]	-.21	.25	.39	[-.69, .27]
BF	.02	.01	<.001	[.01, .03]	.22	.07	.001	[.09, .35]
MS	.33	.28	.24	[-.22, .88]	-2.99	3.29	.37	[-9.48, 3.50]
CF					2.52	.83	.003	[.88, 4.15]
CF x NC					.001	.02	.93	[-.03, .03]
R^2	.06			.006	.17			<.000
F	4.30				7.05			

Note. This analysis used PROCESS model 14. $N = 213$.

Abbreviations. BF = baseline fatigue; MS = mortality salience; CF = cognitive fatigue; NC = news consumption.

Out-Party Feeling. In the test of conditional indirect effects, news consumption was not found to significantly moderate the effect of mortality salience on out-party feelings via cognitive fatigue among the recorded observations (Unstandardized interaction $\beta = .004$, $t = .19$, $p = .85$). As in the original mediation model testing H1 and shown in Table 7, mortality salience was non-significantly associated with increased cognitive fatigue ($\beta = .33$, $t = 1.19$, $p = .24$) and non-significantly associated with increased perceptions of warmth for the out-party ($\beta = 3.43$, $t = .85$, $p = .40$). The overall moderated mediation model was not supported with an index = .001 (95% CI = [-.01, .02]).

Table 7

Conditional Processing PROCESS Results for News Consumption on Out-Party Feeling

Predictors	On Cognitive Fatigue				On Out-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.98	[-.04, .04]	-.15	.29	.63	[-.73, .44]
BF	.02	.01	<.000	[.01, .03]	.23	.08	.005	[.07, .38]
MS	.33	.28	.24	[-.22, .88]	3.43	4.02	.40	[-4.49, 11.34]
CF					1.62	1.01	.11	[-.38, 3.62]
CF x NC					.004	.02	.85	[-.04, .04]
R^2	.06		.006		.07		.02	
F	4.30				2.52			

Note. This analysis used PROCESS model 14. N = 213.

Abbreviations. BF = baseline fatigue; MS = mortality salience; CF = cognitive fatigue; NC = news consumption.

In considering both the in-party and out-party analyses, increased news consumption was very weakly associated with more positive affect on both accounts, but a significant interaction is clearly absent. As a result, H3 is not supported as news consumption was not found to moderate the effect of mortality salience on affective

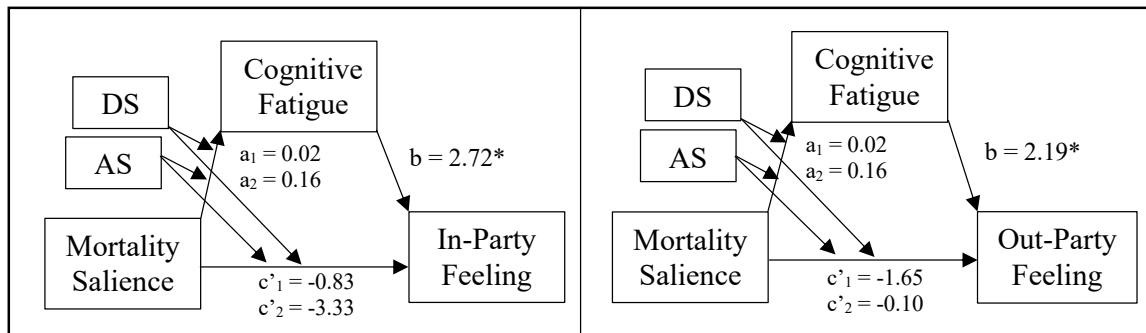
polarization via cognitive fatigue among the recorded observations.

Influence of Trait Motivational Reactivity on Mortality Salience Processing

As shown in Figure 5, this conditional process analysis examined the hypothesized first stage and direct effect influences of trait motivational reactivity (H4a–H4b, H5a–H5b) on mortality salient processing. This was analyzed using the PROCESS macro model number 10 which explicitly tests the moderating effect on path a, between the predictor and mediator, and path c, the direct effect between predictor and outcome. Age and baseline fatigue were entered as controls.

Figure 5

Statistical Models of the Influences of Trait Motivational Reactivity on In- and Out-Party Feelings



Note. * $p < .01$

In-Party Feeling. Neither ASA nor DSA were found to significantly moderate the relationship between mortality salience and in-party affect among the recorded observations. The test of conditional indirect effects yielded non-significant findings for the moderation of mortality salience and cognitive fatigue (ASA unstandardized interaction $\beta = .16, t = .94, p = .35$; DSA unstandardized interaction $\beta = .02, t = .18, p =$

.86). In the test of direct effects, path c' , the analysis also yielded non-significant findings thereby failing to support the moderation of either ASA or DSA on the relationship between mortality salience and in-party feeling (See Table 8; ASA unstandardized interaction $\beta = -3.33$, $t = -1.61$, $p = .11$; DSA unstandardized interaction $\beta = -.83$, $t = -.55$, $p = .58$). As in the original mediation model testing H1, cognitive fatigue was shown to significantly increase in-party feelings ($\beta = 2.72$, $t = 3.24$, $p = .001$). However, the overall conditional process model generated an index of partial moderated mediation for ASA of .44 (95% CI = -.512, 1.705) and for DSA of .06 (95% CI = -.65, .81).

Table 8

Conditional Processing PROCESS Results for Trait Motivational Reactivity on In-Party Feeling

Predictors	On Cognitive Fatigue				On In-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.95	[-.04, .04]	-.26	.25	.29	[-.75, .23]
BF	.02	.01	<.001	[.01, .03]	.23	.07	.001	[.10, .36]
MS	.37	.28	.19	[-.18, .91]	-2.90	3.34	.39	[-9.49, 3.69]
MS x DSA	.02	.13	.86	[-.23, .27]	-.83	1.52	.58	[-3.83, 2.16]
MS x ASA	.16	.17	.35	[-.17, .50]	-3.33	2.06	.11	[-7.40, .740]
CF					2.72	.84	.001	[1.07, 4.38]
R^2	.09		.01		.16		<.001	
F	2.73				4.73			

Note. This analysis used PROCESS model 10. $N = 213$.

Abbreviations. BF = baseline fatigue; MS = mortality salience; CF = cognitive fatigue; ASA = appetitive system activation; DSA = defensive system activation.

Out-Party Feeling. Neither ASA nor DSA were found to significantly moderate the relationship between mortality salience and in-party affect among the recorded observations. Unlike the original mediation model shown in Figure 2 testing H1,

cognitive fatigue was shown to significantly increase out-party feelings ($\beta = 2.12, t = 2.26, p = .03$). As shown in Figure 5 and Table 9, within the test of conditional indirect effects, path a remained unchanged over the in-party feeling model (ASA unstandardized interaction $\beta = .16, t = .94, p = .35$; DSA unstandardized interaction $\beta = .02, t = .18, p = .86$). In the test of direct effects, path c', the analysis yielded non-significant findings among the observed effects, failing to support the hypothesized moderation of ASA and DSA on the relationships between mortality salience and in-party feeling (ASA unstandardized interaction $\beta = -.10, t = -.04, p = .97$; DSA unstandardized interaction $\beta = -1.65, t = -.97, p = .33$). The overall conditional process model generated an index of partial moderated mediation for ASA of .34 (95% CI = [-.39, 1.54]) and for DSA of .05 (95% CI = [-.49, .72]).

Table 9

Conditional Processing PROCESS Results for Trait Motivational Reactivity on Out-Party Feeling

Predictors	On Cognitive Fatigue				On Out-Party Feeling			
	β	SE	<i>p</i>	95% CI	β	SE	<i>p</i>	95% CI
Age	.001	.02	.95	[-.04, .04]	-.26	.28	.35	[-.81, .23]
BF	.02	.01	<.001	[.01, .03]	.14	.07	.07	[-.01, .28]
MS	.37	.28	.19	[-.18, .91]	2.64	3.74	.48	[-4.72, 10.01]
MS x DSA	.02	.13	.86	[-.23, .27]	-1.65	1.70	.33	[-5.00, 1.70]
MS x ASA	.16	.17	.35	[-.17, .50]	-.10	2.31	.97	[-4.65, 4.45]
CF					2.12	.94	.03	[.27, 3.97]
R^2	.09		.01		.21		<.001	
<i>F</i>	2.73				6.56			

Note. This analysis used PROCESS model 10. N = 213.

Abbreviations. BF = Baseline Fatigue; MS = Mortality Salience; CF = cognitive fatigue; ASA = Appetitive System Activation; DSA = Defensive System Activation.

Considering the findings of in-party and out-party feelings, the observed findings did not statistically support any of the hypothesized moderating effects of ASA and DSA (H4a, H4b, H5a, H5b) either by measures of the interactions' respective p-values or through the indices of moderated mediation. Therefore, the appropriate conclusion is that no relationship existed. However, for the purposes of a robust examination of the recorded observations in service to future scholarship, it is apt to note that the analysis did yield interesting associations in line with the predicted negative relationship between DSA and cognitive fatigue (H4a) and the predicted positive relationship between ASA and cognitive fatigue (H4b). Similarly, when examining conditional direct effects path c' as shown in Figure 5, ASA was associated with more negative in-party feelings while findings for DSA were the opposite, as increases in DSA were associated with stronger negative out-party evaluations . Upon closer examination, we find that DSA interacted with mortality salience to produce negative appraisal on both in-party and out-party feeling, but with larger differentials for the out-party, as predicted by H5a. In alignment with both H5a and H5b, then when considering average in- and out-party feelings, increased DSA was associated with widening the gap and therefore exacerbating affective polarization, while increased ASA closed the gap, leading to less polarization. For further practical consideration, it is useful to examine the extremes of both underlying motivational systems, wherein high (+1SD) DSA coupled with low (-1SD) ASA yielded a .70 unit increase in in-party feeling and a .93 unit decrease in out-party feelings, thereby exacerbating polarization. In the reverse situation, high ASA coupled with low DSA yielded a 6.5 unit decrease in in-party feeling and a 6.2 unit increase in

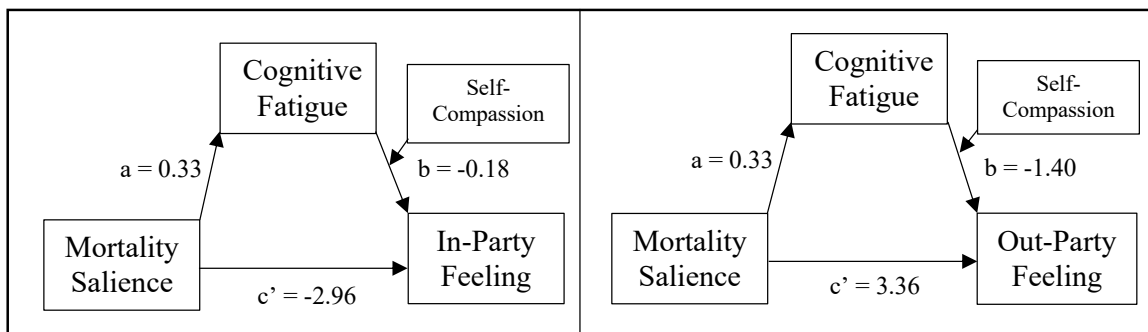
out-party affect, thereby generating a neutralizing effect. Unfortunately, however, it's imperative to underscore that such associations did not achieve significance, and therefore, while interesting within the confines of this specific study, cannot be extrapolated in any way.

Influence of Self-Compassion on Mortality Salience Processing

As shown in Figure 6, this conditional process analysis examined a hypothesized second stage moderator, self-compassion (H6), on mortality salient processing. Specifically, H6 predicted that self-compassion would moderate the relationship between cognitive fatigue and affective polarization such that increased self-compassion would diminish affective polarization outcomes. As with all models, age and baseline fatigue were entered as controls.

Figure 6

Statistical Model of the Influence of Self-Compassion on In- and Out-Party Feeling



In-Party Feeling. Self-compassion was not found to moderate the effect of cognitive fatigue on in-party feeling among the recorded observations (Unstandardized interaction $\beta = -.18, t = .13, p = .90$). As shown in Table 10, the relationship between mortality salience and cognitive fatigue remained unchanged over the original mediation analysis

(H1), ($\beta = .33, t = 1.19, p = .24$), while the direct effect between mortality salience and in-party feelings retained a negative, non-significant association ($\beta = -2.96, t = -.88, p = .38$). The overall moderated mediation model was not supported with an index = $-.06$ (95% CI = $[-1.63, 1.43]$).

Table 10

Conditional Processing PROCESS Results for Self-compassion on In-Party Feeling

Predictors	On Cognitive Fatigue				On In-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.98	[-.04, .04]	-.26	.25	.31	[-.76, .24]
BF	.02	.01	<.001	[.01, .03]	.24	.07	<.001	[.11, .37]
MS	.33	.28	.24	[-.22, .88]	-2.96	3.37	.38	[-9.60, 3.69]
CF					2.55	.83	.002	[.92, 4.19]
CF x SC					-.18	1.34	.90	[-2.82, 2.46]
R^2	.58		.006		.14		<.001	
F	4.30				5.74			

Note. This analysis used PROCESS model 14. $N = 213$.

Abbreviations. BF = Baseline Fatigue; MS = Mortality Salience; CF = cognitive fatigue; SC = Self-compassion.

Out-Party Feeling. Self-compassion was not found to moderate the effect of cognitive fatigue on in-party feeling among the recorded observations (Unstandardized interaction $\beta = -1.40, t = -.87, p = .38$). As shown in Figure 6 and Table 11, the relationship between mortality salience and cognitive fatigue remains unchanged over the original mediation analysis (H1), ($\beta = .33, t = 1.19, p = .24$), while the direct effect between mortality salience and out-party feelings retains a positive, non-significant association ($\beta = 3.36, t = .83, p = .41$). The overall moderated mediation model was not supported with an index

= -.46 (95% CI = [-2.35, .79]).

Table 11

Conditional Processing PROCESS Results for Self-compassion on Out-Party Feeling

Predictors	On Cognitive Fatigue				On Out-Party Feeling			
	β	SE	p	95% CI	β	SE	p	95% CI
Age	.00	.02	.98	[-.04, .04]	-.14	.08	.63	[-.74, .45]
BF	.02	.01	<.001	[.01, .03]	.22	.08	.005	[.07, .38]
MS	.33	.28	.24	[-.22, .88]	3.36	4.03	.40	[-4.59, 11.30]
CF					1.59	.99	.11	[-.37, 3.55]
CF x SC					-1.40	1.60	.38	[-4.56, 1.76]
R^2	.06		.006		.08		.01	
F	4.30				2.79			

Note. This analysis used PROCESS model 14. N = 213.

Abbreviations. BF = Baseline Fatigue; MS = Mortality Salience; CF =, cognitive fatigue; SC = Self-compassion.

In considering both the in-party and out-party analyses, we find that increased self-compassion interacts with cognitive fatigue to yield more negative feelings for both the in- and out-party, though this finding did not yield statistical significance. In fact, given that the effect moves in the same direction and is magnified in the out-party group, we would see that — when examining the average reported in- and out-party feelings — self-compassion would seem to interact with cognitive fatigue to amplify affective polarization in direct contrast to the predicted outcomes. As a result of this finding and the overall lack of significance, H6 is not supported in that self-compassion was not found to moderate the effect of mortality salience on affective polarization via cognitive fatigue among the recorded observations.

Post-Hoc Analysis

Following the initial analysis, further exploration was conducted examining the variables of interest through independent Pearson's Correlation values for each condition.

Table 12

Descriptive Statistics & Pearson's Correlation Values for Variables of Interest Among Control Group

	M	SD	1	2	3	4	5	6	7
1. ASA	.74	1.57	--						
2. DSA	2.10	2.40	.20*	--					
3. DE	17.41	6.30	-.02	-.21*	--				
4. CF	6.33	2.32	-.14	-.08	.06	--			
5. SC	2.93	.60	-.19*	-.17	-.09	-.05	--		
6. NC	60.78	56.16	.05	-.08	.10	.06	.06	--	
7. IPF	69.45	24.17	.05	.004	.06	.25**	.21*	.24*	--
8. OPF	36.56	29.09	-.22*	-.31**	.32**	.18	.03	.07	.11

Note. N = 110. * $p < .05$, ** $p < .01$

Abbreviations: ASA = Appetitive System Activation; DSA = Defensive System Activation; DE = death exposure; CF = cognitive fatigue; SC = self-compassion; NC = news consumption; IPF = In-party feeling; OPF = out-party feeling.

Table 13

Descriptive Statistics & Pearson's Correlation Values for Variables of Interest Among Experimental Group

	M	SD	1	2	3	4	5	6	7
1. ASA	.92	1.74	--						
2. DSA	2.05	2.13	.32**	--					
3. DE	18.80	6.27	-.21*	-.25*	--				
4. CF	6.47	2.04	-.02	.09	.24*	--			
5. SC	3.02	.55	-.06	-.18	-.04*	.14	--		
6. NC	61.35	51.21	-.18	-.29**	.26**	.17*	-.02	--	
7. IPF	64.72	26.52	-.17	-.12	.31**	.28**	-.05**	.21**	--
8. OPF	37.96	29.49	-.29**	-.41**	.33**	.14	.16	.06	.04

Note. N = 103. * $p < .05$, ** $p < .01$

Abbreviations: ASA = Appetitive System Activation; DSA = Defensive System Activation; DE = death exposure; CF = cognitive fatigue; SC = self-compassion; NC = news consumption; IPF = In-party feeling; OPF = out-party feeling.

In examining significant between-group differences, there are two notable takeaways, each of which should be regarded with caution given the small sample size, non-significant findings reported earlier, and weak coefficient values.

Pertinent to H5a, which predicted that those high in DSA would exhibit increased affective polarization following mortality salience, DSA was found to negatively correlate with out-party feeling in both groups, but with a stronger association in the experimental group shown in Table 12 ($r(103) = -.41, p < .01$) as compared to $r(110) = -.31, p < .01$ in the control group, shown in Table 13. Though cautionary, this evidence provides support of H5a such that those higher in DSA and exposed to a mortality salient

prime were more strongly associated with negative out-party feelings than respondents in the control group.

Pertinent to H5b, which predicted that those high in ASA would exhibit decreased affective polarization following mortality salience, ASA is also negatively correlated with out-party feeling across both groups. As was the case with DSA, a stronger association was found in the experimental condition as shown in Table 13 ($r(103) = -.29, p < .01$) as compared to the control group shown in Table 12 ($r(110) = -.22, p < .01$). This relationship is opposite of what was predicted in H5b. However, it provides cautionary support for different outcomes of ASA on out-party feelings in the presence of a mortality salience prime as opposed to the control condition.

CHAPTER VII: DISCUSSION, LIMITATIONS, & FUTURE IMPLICATIONS

Discussion

The goal of this study was to test hypotheses regarding whether and under what conditions cognitive fatigue may mediate the relationship between exposure to mortality salient content and affective polarization. Unfortunately, though employing a sample that should have yielded enough power to ascertain effect sizes in line with TM extant scholarship, this study yielded little in the way of statistically significant outcomes. First and foremost, there was no significant difference in average reported cognitive fatigue between those exposed to the mortality salience prime and those who were not. Likewise, further mediation analysis failed to generate significant evidence that cognitive fatigue acts as a mediator on the relationship between mortality salience and subsequent partisan feelings.

Though Hayes (2018) and Igartua and Hayes (2021) posit that exploration of theoretically appropriate moderators of a potential mediated relationship may augment findings or lack thereof, the models tested here did not benefit from the inclusion of any of five other theoretically relevant moderators: death exposure, new consumption, aversive system activation, defensive system activation, and self-compassion. Still, there were interesting, albeit weak, correlations found herein that may warrant further investigation. Specifically, both ASA and DSA were negatively correlated with out-party feeling across both groups and the analysis identified stronger correlations for each among the mortality salience condition. This would indicate that those who are high in both approach and defensive systems, not merely DSA as hypothesized, are actually most

strongly associated with decreased out-party perceptions following a mortality salience prime. In addition, it's interesting that out-party feeling is the only component of affective polarization with which a significant relationship exists. Notably, Iyengar and colleagues (2015) found that the continued rise of affective polarization over recent decades was also largely attributed to degradation of out-party appraisals relative to static in-party appraisals.

Though such generally ambiguous findings are disappointing in regard to the hypotheses presented here and surprising in light of the corpus of literature upon which they were developed, this unexpected outcome nonetheless makes for interesting exploration of methodological implications, broader theoretical implications, and recommendations for future scholarly research in this domain. What's more, from a strictly practical perspective, the absence of a relationship between mortality salience and affective polarization may support cautionary optimism for those seeking bipartisan support in death policy reform efforts.

Methodological Limitations

To illuminate potential contributing factors to the non-significant results found by this work, we turn to investigate the research design itself and related methodological concerns that future research will do well to consider. Specifically, the author wishes to underscore four specific factors, including potentially ineffective manipulation, low reliability of certain key measures, the two-fold challenges brought by the COVID-19 pandemic and, finally, statistical modelling limitations of the chosen analysis.

Manipulation Efficacy

Firstly, the extent to which participants in the experimental condition experienced mortality salience was difficult to assess and simply may not have achieved the magnitude necessary to elucidate the effect sizes that previous literature has established. Initially, a post-hoc content assessment of individual responses based on the number of adjectives used had been planned as a manipulation check. However even after instituting performance-enhancing updates following the concerning minimalist responses within the pre-test, respondents generally continued to provide exceedingly short answers, most often in the form of incomplete sentences (e.g. “Sadness. Concern.” “Afterlife and my body rotting away.”) The intended manipulation check was consequently ineffective. Relatedly, extant TM scholarship has demonstrated a threshold effect for mortality salience processing specific to implicit distal processing that may or may not have been achieved. Peak effect sizes are ascertained between seven to ten minutes after exposure to the MS stimuli and the subsequent dependent variable, in this case party feelings. Within this study, though average respondent time for survey completion was 1722 seconds, or 28.7 minutes, much of this time was devoted to completing the Motivational Activation Measures instrument, and the duration between the MAPS questionnaire as the mortality salience prime and the in- and out-party ratings was substantially less, separated only by a short battery of demographic questions and the Self-Compassion Scale - Short Form. Unfortunately, instituting additional instruments between the manipulation and subsequent dependent variable measures presented challenges both in terms of respondent attrition as well as sample size limitations with respect to the finite funding

available.

Pandemic-Related Challenges

Second, it is imperative to discuss the dual challenges to this study brought about by the COVID-19 pandemic. Specific to the study design is that this work was executed at an unprecedented time when in-person lab research with human subjects was strictly scrutinized and generally impermissible outside of critical healthcare work.

Acknowledging these adverse conditions, the study design was reconditioned for an online survey which, as the pre-test results specific to Backward Digit Span clearly attested to, is not optimal for the specific nature of this work or the necessary duration. With no control over respondents' ambient distractions or the neutrality of their environment, it is likely that responses suffered, carrying with them environmental effects for which there is no control.

Beyond the design limitations, it would be remiss not to also acknowledge the broader effects of COVID-19 for a study examining one's response to death. Given the scale of both national and global deaths as a result of the on-going pandemic, death had been inarguably more salient for Americans over the fifteen months preceding the delivery of this survey. Controlling for those effects is simply implausible in part because we do not yet know what the effects of such pervasive death reminders are on the previously documented relationship between MS and subsequent prejudicial behaviors. On one hand, it's possible that the increased exposure has desensitized the populace to such a stimulus and simply made thoughts of death more routine, and were such a relationship to exist, the present study was not designed with enough sensitivity to have

captured such a development even despite the use of the death exposure. On the other hand, it's possible that the heightened state of stress experienced by the populace makes death references even more arousing. The point is, however, that the results of this study, regardless of statistical significance, cannot be explored within a vacuum and will likely limit the appropriateness of comparative analysis with future findings.

Reliability Concerns

Third, we turn to specific instances of reliability concerns for the dependent variables captured herein. Specifically, recorded observations for death exposure yielded an alpha level .07 below the acceptable threshold of Cronbach's $\alpha = 0.7$. This was likely a consequence of the measure falling at the end of the protocol when respondents were suffering the most fatigue. Furthermore, both news media consumption and cognitive fatigue were also captured using one-item instruments for which this most common measure of internal consistency naturally cannot be computed. Though single-item measurements can be reliable tools in certain circumstances, their specific benefit herein of succinctness may have come at the cost of reliability. Accurately capturing media consumption estimates through self-report proxies is especially replete with challenges, as respondents often respond in a manner that reflects what they believe is expected more-so than reality. Regarding the measure of cognitive fatigue, the single-item assessment may not only have been challenged by respondents' ability to self-reflect on how mentally fatiguing the questions were, but may also not have been sensitive enough to adequately capture felt changes in said mental exertion were it adequately assessed.

To conclude, this study presented a number of methodological limitations that

should be transparently examined and considered for the improvement of future research, not the least of which is struggles related to measurement reliability. It's also important to underscore that this was a paid sample supplied by a research firm. Paid samples generally have the primary motivation to simply complete the task, rather than carefully attending to the nuances of cognitive instruments, which drives further concerns of reliability. Given the length and monotony of this specific study, as well as the pre-test sample's underwhelming performance on Backward Digit Span, the possibility that respondents' experienced survey fatigue and response bias is especially concerning. Thus, while this study engaged a sampling solution that responded directly to Burke and colleagues' (2010) explicit call for more terror management studies executed with non-collegiate samples, doing so may have come at the cost of thoughtful, accurate responses while also potentially introducing issues of homogeneity among the sample respective to those who take surveys for financial gain.

Recommendations

In addressing the limitations and concerns referenced above, the present author wishes to underscore three critical facets of future work in the same area. Namely, the employment of laboratory settings and increased reliance on objective measures for the variables of interest. Together, these adaptations speak to the limitations above and set the stage for more efficacious work that may establish and support more insightful relationships.

While certainly not all terror management research should be completed within the confines of a laboratory setting, that which seeks to empirically explore the

underlying affective and cognitive dimensions of the posited relationship will do well to have greater control over the valence of the environment as well as potential distractions. By controlling the setting of the observed phenomena, researchers can better understand the true nature of the relationship. Similarly, a distraction-free environment is essential for sensitive cognitive measures such as the Backward Digit Span wherein if a respondent glances away to attend to a stimulus unrelated to the study, they usurp their ability to respond accurately.

Not unrelatedly, it's important to examine the quality and magnitude of the manipulation itself. Certainly, a lab can allow for real-time control and assessment of the mortality salience prime. However, regardless of design method, for scholarship leveraging the Mortality Attitudes Personality Survey, specifically, respondents should be encouraged to write, at the very least, a few complete sentences to ensure that they are indeed contemplating their death. In testing scenarios where respondents may be less forthcoming with substantive responses, alternative MS stimuli should be considered. Florian and Kravetz's (1983) multidimensional Fear of Personal Death Scale and the revised Collet-Lester Fear of Death Scale (Lester, 1990) are among the functional alternatives, as is asking respondents to read detailed death-related essays, news reports, or court cases. Likewise, use of an appropriate manipulation check such as the Death Thought Accessibility test which provides respondents with a set of incomplete words that can be completed with letters to form either death-related or neutral words (e.g. COFF__ can be completed to read either "coffin" or "coffee) is also recommended.

On the heels of the first recommendation is the related suggestion to employ

objective measures wherever possible. As laboratories have re-opened for work with human subjects following improved understanding of coronavirus transmission, so too has the opportunity to more easily record physiological data returned. Cognition tests such as the Backward Digit Span and Sustained Attention to Response Task, both of which are most appropriate for a laboratory setting, as well as neuroimaging, electroencephalography, and pupillometry are all objective methods that could and should be considered for better understanding the underlying mechanisms at play in this delicate relationship. However, clearly not all objective measures rely upon a lab and yet should still be explored as mechanisms for reducing self-report bias and consequently improving reliability moving forward in a more ecologically valid environment. For instance, like the Motivational Activation Measure, the Political Identity Implicit Associations Test developed by Iyengar and Westwood (2015) is an objective alternative to the feelings thermometer method for establishing one's party affinity that can be delivered anywhere a respondent has internet access. Similarly, one might analyze a digital online activity log over a given duration of time, ideally more than one day, to establish a more reliable measure of average media consumption than that provided by self-report.

Finally, for the sake of repletteness, it is also worth emphasizing that a sample that is large enough to both provide appropriate statistical power and substantiate generalizability is always desired and should be, resources permitting, secured. Likewise, as referenced above, a paid sample from a research panel is likely not the most efficacious approach when such nuanced research is being conducted online.

Theoretical Implications

Given the ambiguous nature of the nonsignificant findings above, the present author treads lightly on making theoretical recommendations. Still, having explored methodological reasons for why this work may have yielded nonsignificant results, it is nonetheless pertinent to examine what such a lack of a meaningful relationship may mean for extant theory, including but not limited to terror management, mortality salience processing and the framework posited by TM scholars, as well as the postulated influence of trait motivational reactivity. On one hand, this may highlight that thoughts of one's own death are not created equal and for the posited relationship between mortality salience and out-group antipathy to appear, certain environmental, social, or cognitive conditions that have not yet been observed and accounted for must also be met.

To begin, this work may highlight is that party association is not as deeply embedded into the fabric of our identities as recent scholarship may lead us to believe. In other words, overall perceptions of a party's population, whether as the in- or out-group, may not be so intrinsically tied to one's ideologies as to support the catharsis of ideological bolstering posited by terror management. On one hand, this provides commentary for the study of partisan affect as a whole. "Republican" and "Democrat" may be groups as defined by voter registration, but may not constitute an ideology. Rather, a spectrum of "conservative values" to "liberal values" may be more appropriate than simple party dichotomy as mechanisms for exploring ideological boundaries and transgression. It is apt to refer here to contextual work afforded by Chapter II and the complexity of values regarding death displayed by today's mix of Walter's (1994)

traditionalists, modernists, and neo-modernists, many of whom likely exist as “Republican” or “Democrat” despite significantly different values and attributions of authority.

However, this also inspires questions very appropriate for terror management scholarship specifically. Often, terror management scholarship, including that examining prejudicial outcomes, is grounded in affect as it relates to a specific individual and that specific individual’s words or actions. Take, for example, the seminal terror management study involving the judges (Solomon et al., 1989) . Had the judges simply been asked to evaluate prostitutes an amorphous population rather than a single individual perpetrating a specific behavior, perhaps the resulting bail would not have been so substantially greater. In the study by Kugler and Cooper (2010), respondents reacted to specific, named American and Saudi Arabian terror suspects who were alleged to have provided bomb-making materials to a terrorist organization. Likewise, in work by Leippi, Bergold, and Eisenstadt (2017) examining the influence of racial identity on mortality salience processing, respondents were asked to read court cases involving specific crimes — murder/carjacking or auto theft — perpetrated by a specific offender. To be clear, there are two specific items at play here. One is the level of analysis. Does mortality salient processing influence evaluations at the population and individual levels the same way, or are these effects magnified by the comparable concreteness offered at the individual-level? Second, we must examine the role of clarity of ideological transgression. For instance, following a death reminder, are punitive evaluations of equal likelihood and magnitude for individuals simply labelled as part of an out-group as for an individual

who clearly exemplifies an out-group's deviant value(s)? On the prior, how would the judges' bail change for "prostitutes" as opposed to "a prostitute"? On the latter, how would the judges' bail change for simply "a prostitute" versus a prostitute whose deviant behavior is fully described in a case file? In sum, the nature of post-mortality salience prejudice, including that related to affective polarization, may be moderated by both the proximity and concreteness of an opposing worldview threat.

Turning now to the cognitive framework presented in this work, we must ask, "If resource depletion and fatigue are not the cognitive mechanisms most responsible for driving the increased prejudice so widely documented in terror management, what mechanisms are?" Here we refer back to the groundbreaking neuroimaging work by Dor-Ziderman, Lutz, and Goldstein (2019) as a clue to one possible explanation. In identifying the brain's prediction error response to thoughts of one's own death through neuroimaging, they may have uncovered a critical component in the hardwiring of neural anatomy as it relates to mortality salient processing. Their work provides evidence that innate prediction models anticipate death will be associated others, but not the self. Therefore, when confronted with thoughts of one's own death, a negative prediction error occurs which requires the mental model to update. Could it be that this tendency and its associated depression of dopamine (See Schultz, 2016) is what drives the latent effect of prejudicial behaviors? This would also provide further explanation for the work by Spitzenstatter and Schnell (2020), as well as Buddhist death contemplation practices, which find that consideration of one's own death can improve well-being (Rinpoche, 1993; Nhat Hanh, 2002). In activating the prediction error repeatedly within a neutral

environment, the brain may learn that simply thinking about one's death does not bear an imminent threat, and over time, rewire the innate response to death observed by Dor-Ziderman and colleagues (2019) to one that is pleasurable. Notably, this emphasis on utility encoding is not at odds with theories of motivated cognition, but rather complimentary as it recognizes that such economic evaluations are proscribed, in part, as a result of underlying appetitive and aversive system sensitivities. Returning to the present study, while bearing in mind that no significant relationships were uncovered, that the correlations involving ASA and DSA acted in the hypothesized direction further encourages exploration of the role of biologic predisposition in this domain.

Looking to the Future

Though ardent efforts to overcome death are well underway, it's presence for the foreseeable future is unyielding. As such, Americans' struggle with death is far from over. Returning to Walter's (1994) ideal archetypes, it's clear that the rise of the *neomodernist* is no end-all, be-all utopian turn of events. Rather, this cultural response bears its own tensions and concerns. Commenting on the *neomodernist's* liberation from the external constraints of religious and social custom, Walter writes, "If the self cannot exert its own authority, then normlessness is not liberation but anomie" (p. 28). Similarly, concerns exist about the pressure placed upon the individual to comprehend a process of which no one truly understands, particularly at a time in history when so few Americans are exposed to unmediated experiences of dying and death. Is the contemporary American Self capable of disentangling this timeless mystery, particularly in the final days of living when both body and mind are often in disarray? Where optimal well-being

exists on the spectrum of rigid tradition and complete individuality in response to death is as yet unknown.

Furthermore, it's imperative to also consider the ever-evolving landscape of life-extension solutions and associated changes in cultural values. One could argue that while the *neomodernist* places authority in the Self and seeks to celebrate individuality in death, the transhumanist places authority in algorithms and seeks to overrule death through technological advancement, a prospect that, as alluded to in Chapter II, may not be that far off. These new cultural values, as well as dynamic biological norms on which they are founded, will continue to bring about challenges that ask voters and politicians alike to critically examine death, including who — or what — has the right to die and under what circumstances.

Uncovering, then, the invisible psychological forces that this pervasive experience may hold over us in life is essential to advancing our understanding of identity and how we engage with one another, both in terms of our democracy, but also our broader humanity. Indeed, it will be of considerable value to continue examining the role of trait motivational reactivity in relation to mortality salient message processing in contexts *outside* of the political arena, exploring not the policies related to end-of-life but rather their direct application. For example, what can these indices tell us about how individuals will process health messaging that relates to one's own end-of-life decisions? Extant LC4MP scholarship indicates that such work may help not only build better predictive models for who will process death-related material in a manner most supportive of well-being, but may also provide insight into individualized messaging and tools that could be

used as interventions for those who may be more apt to engage in destructive behaviors directed toward the self or others.

Clearly, within our larger pursuits of humanitarian meaning-making and scientific understanding by way of empirical means, we must continue to ask why, as evidenced by the robust contributions of terror management scholarship, thoughts of death are so qualitatively unique and under what conditions related behavioral outcomes arise. In doing so, we may develop more effective communication methods for not only for establishing end-of-life policies that better reflect the populace's breadth of values, but also for approaching the end of life itself.

APPENDIX

Survey Measures

Trait Motivational Reactivity [9-pt scale, not at all - extremely]

How positive did you feel while looking at the picture?

How negative did you feel while looking at the picture?

How aroused you feel while looking at the picture?

Mortality Attitudes Personality Survey & Control Condition [open-ended response]

Please briefly describe the emotions the thought of [your own death / experiencing severe dental pain] arouses pain in you.

Describe, as specifically as you can, what you think will happen to you [as you physically die, and once you are physically dead / when you are experiencing severe dental pain].

Cognitive Fatigue (9-point scale, very low mental effort – very high mental effort).

Indicate on the scale below the amount of mental effort you used to read and adequately answer the previous two questions.

News Media Consumption [Single item selection of 15-minute intervals up to “More than 3 hours”]

On average, approximately how much time each day do you spend viewing news media in either digital or traditional print format? For this question, "news media" is considered public interest information from any dominant media provider. Examples include The New York Times, CBS, Fox News, ABC News, and the Washington Post.

Death Exposure (4-point scale, never – frequently)

Throughout your lifetime, how often have you:

...attended a funeral?

...lived through the death of a close family member or friend?

...witnessed first-hand a close family member or friend die?

...witnessed first-hand a pet die?

...killed an animal while hunting?

...slaughtered or witnessed slaughtering an animal?

...been involved in armed conflict?

...almost died yourself?

Self-Compassion Scale - Short Form (5-pt scale, almost never – almost always)

When I fail at something important to me I become consumed by feelings of inadequacy.

I try to be understanding and patient towards those aspects of my personality I don't like.

When something painful happens, I try to take a balanced view of the situation.

When I'm feeling down, I tend to feel like most other people are probably happier than I am.

I try to see my failings as part of the human condition.

When I'm going through a very hard time, I give myself the caring and tenderness I need.

When something upsets me, I try to keep my emotions in balance.

When I fail at something that's important to me, I tend to feel alone in my failure.

When I'm feeling down I tend to obsess and fixate on everything that's wrong.

When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.

I'm disapproving and judgmental about my own flaws and inadequacies.

I'm intolerant and impatient toward those aspects of my personality I don't like.

In- and Out-Party Feeling (101 thermometer scale, extremely cold - extremely warm)

Please rate how warm Republicans are.

Please rate how warm Democrats are.

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