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Do parents want death to be included in their children's education?

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Abstract

The objective of this study is to determine whether parents of schoolchildren want an education that takes death into account or not. To address this objective, the Death Education Attitudes Scale-Parents (DEAS-P) was designed, validated and applied to the Spanish population, through an exploratory and confirmatory factor analysis, with suitable values. The reliability test found a Cronbach's alpha

of .90, with two factors. The scale was complemented with a short questionnaire probing opinions on how to approach death in society and schools. The sample comprised 917 mothers and fathers of children and adolescents from early childhood education to sixth form. The results indicated moderately positive attitudes towards an education taking death into account. Variables such as gender, religious beliefs and children's educational stage were significantly related to parents' attitudes. The results argue in favour of the educational inclusion of death in families and schools.

Keywords: Pedagogy of death; death education; attitudes; parents; school

INTRODUCTION

We live in a society that is as oriented towards immediacy, enjoyment and self-centred accumulation as it is resistant to cultivating the inner life, deep growth and lucid renunciation. Human beings' typical duality (Dewey, 1910) has led us to associate death with suffering and to respond to this pairing in two ways which do not exclude each other: avoiding it through education or transforming it through culture. Bauman (2000) conceptualises human cultures as ingenious artefacts for making life with the awareness of death more bearable.

From the historical and sociological perspective, Bendelow & Williams (1995) conclude that pain and all that goes with it have been traditionally addressed in Western culture with a biomedical and psychological model, excluding the viewpoints and experiences of other sociocultural spheres. For them, this exclusion is rooted in Cartesian mind-body dualism. However, the phenomenon of life includes circumstances related to what we see as negative and death. Thus it makes little sense, *a priori*, to claim to educate for life whilst excluding the awareness of suffering, pain and death.

The lack of studies on loss and pain in other social contexts contributes to ignorance of how children and adolescents experience these situations and to their invisibilization in schools (Biedma et al., 2019), possibly also in families. All families can undergo significant deaths within their life cycle. Childhood and adolescence are not exempt from this experience in the course of development. In fact, loss is one of the factors affecting family instability (Bradley, 2007), and, in consequence, it is among the processes making up a family upbringing. Further, family instability is an important factor

in many risk behaviours and in dropping out of school in childhood (Gil-Hernández, 2019) and adolescence (Cavanagh & Fomby, 2012; Cavanagh et al., 2006).

However, there are no academic studies investigating family instability caused by significant deaths from a pedagogical perspective, i.e., centred on educational guidance in such situations, from school tutors or parents, as the natural educators of the child or adolescent. The emerging pedagogy of death approach applied to the family does not only respond to important situations of loss; it also aims at a form of education which, through phenomena associated with death, promotes greater awareness and personal and social maturity (Dyregrov et al., 2013; Herrán & Cortina, 2006; Herrán et al., 2000; Holland, 2008; Willis, 2002). Thus death education forms part of an education for life that includes the awareness of death and finiteness as a fundamental factor in integrated schooling (Aspinall, 1996; Corr et al., 2019; Herrán & Cortina, 2006; Herrán et al., 2000; Mantegazza, 2004; Petitfils, 2016).

The education community and especially students' families participate actively in the education of children and share pedagogical purposes with the whole of society. In all fields, and particularly those which, like death, affect all aspects of the person, the view of education as a cooperative task shared among families and schools is becoming recognised as increasingly meaningful (McGovern & Barry, 2000). Therefore, if we are to educate children with an awareness of death, the family should be included in the process.

This study sets out to make a contribution to death education in the family setting, although as yet it is a topic very little studied in the pedagogy of death applied to families. To this end, and acting jointly with schools, we compiled the views of mothers and fathers, aiming to determine their attitudes to death education, the influence on these attitudes of a set of socio-demographic variables, and their opinions on how the topic of death is approached in society and schools.

THEORETICAL GROUNDING

Research into death education

The pedagogy of death is an emerging area in education sciences that so far has a scarce international track record (Rodríguez et al., 2019). Its main object of study is education which embraces death in order to educate for a life with greater awareness, both on a

social and a personal level. Its epistemological approach is oriented towards guidance in education, and in relation to the death of a loved one it can be either anticipatory and normalising or reactive and palliative (Herrán & Cortina, 2006; Herrán et al., 2000). El enfoque de los autores de este artículo se sustenta en un concepto amplio de muerte. Incluye todo lo relacionado con la conciencia de muerte, en relación con la finitud propia y de los seres queridos, las ‘muertes parciales’ (Herrán et al., 2000) o ‘pequeñas muertes’ (Aspinall, 1996; Dennis, 2009), que hacen referencia a pérdidas que, sin suponer la muerte de alguien cercano, generan pensamientos y sentimientos parecidos -por ejemplo, el divorcio de los padres, un cambio de escuela, una amputación, por enfermedad grave, etc. -. Así mismo, incluye la conciencia de muerte relacionada con la continua muerte y renovación celular, con la evolución histórica o con la pérdida de biodiversidad, por ejemplo. Es decir, educar en la muerte no significa tan solo, desde este punto de vista, hablar de la muerte y asociarla a fallecimiento, sino educar en la finitud, como un elemento que permite prepararnos para la idea que la vida está circunscrita a eventualidades sobre las cuales tenemos poco o ningún control, condición propia del mundo en que vivimos (Smith, 2006). Por tanto, equivale a una educación para una vida que incluye la muerte, como parte inseparable de la complejidad del fenómeno.

Theory arguing the relevance of including death in the education of children and adolescents appeared in the 1980s in the field of health and social work (Rodríguez et al., 2012; 2019). Gradually the focus of interest shifted from health towards teachers’ knowledge (Bibeau & Eddy, 1985) and education (Mèlich, 1989). In recent years, research into death education has grown considerably, especially in countries such as Spain (Jambrina, 2014; Rodríguez et al., 2012) and the United States (Martínez-Heredia & Bedmar, 2020).

It can be observed that, since its beginnings, and due to the influence of the health sciences approach, education embracing death has been linked to personal loss, in the areas of both preparation and intervention. Currently in pedagogy, however, death education is understood more broadly. Firstly, it is included in a form of education for life that includes the awareness of death and finiteness; in this area it is complementary to competency-based education (Herrán et al., 2019). Secondly, it promotes the development of a counselling or palliative approach in education through tutoring, where this is possible (Herrán & Cortina, 2006; Herrán et. al, 2000; Holland, 2008), and also elaborates an anticipatory, normalising approach. From both these perspectives, education including death can be seen as a branch of ‘awareness education’ (Herrán &

Cortina, 2006; Herrán et al., 2000), i.e. that oriented towards a more conscious life (Herrán, 2015). In fact, the inclusion of death in education is associated with gains in awareness of life, i.e., becoming more mindful of the significance, complexity and possible meanings of life. Thus from the pedagogy of death perspective, an education for life which does not include the awareness of death and finiteness is not only incomplete, but in fact a contradiction in terms.

Pedagogical research on death education in recent decades has investigated various topic areas related to it. The anticipatory and palliative approaches have been defined (Herrán et al., 2000; Herrán & Cortina, 2006); teacher training for addressing death in education has been studied (Dyregrov et al., 2013; Herrán, 2015; Herrán & Cortina, 2006; Herrán et al., 2000; Hinton & Kirk, 2015; Pott, 2013); various concepts of death that can be applied in teaching have been distinguished, particularly, the concept of 'partial deaths' or 'little deaths' for losses stemming from separation, divorce, redundancy, change, amputation, etc. (Aspinall, 1996; Dennis, 2009; Herrán et al., 2000); the relationship between educational action and the concepts of death among children and adolescents has been studied (Paul, 2019); the possibility of including death in education and the curriculum in ordinary teaching has been explored (Carter, 2016; Corr et al., 2019; Herrán & Cortina, 2006; Herrán et al., 2000; Herrán et al., 2019; James, 2015; Rodríguez et al., 2020; Stylianou & Zembylas, 2016); methods and techniques of applied education have been studied in greater depth (Galende, 2015; Herrán & Cortina, 2006; Herrán et al., 2000), along with teaching resources such as the cinema (Cortina & Herrán, 2011; Tenzek & Nickels 2017); and death education through the study of genocide, barbarism, war and the Holocaust (Cowan & Maitles, 2011; Gross, 2014; Low & Sonntag, 2013).

Studies have also been made of the education community's perceptions and attitudes towards death education. This research has mainly centred on teachers' perceptions. One Irish study among 142 primary education teachers (McGovern & Barry, 2000) found a high level of interest in the integration of death as a topic in education. This interest was greater among women and teachers who had experienced a significant loss. A study by Dyregrov et al. (2013) confirmed these associations with teachers' openness towards addressing death in education, and adds that 90% of a sample of 138 teachers in early childhood and primary education did not feel adequately trained to guide their students in situations of loss. This finding relates to the general lack of training for educators on how to approach the topic of death in schools (Herrán et al., 2000; Hinton & Kirk, 2015; Pott, 2013). With regard to teachers' preparedness for counselling children

and adolescents in situations of loss, a study by Engarhos et al. (2013) found that teachers who had experienced the loss of a loved one were less afraid of talking about death with their pupils.

Death education in the family

Family attitudes towards death education have also been studied, although to a lesser extent. One section of the literature consists in studies of attitudes associated with ‘family instability.’ Ackerman et al. (1999) defined this as the situation arising in a family in circumstances of important changes, such as migration, the appearance of a new partner who takes over looking after the child, serious childhood illness, loss of work on the part of parents, or the death of a relative. Studies on family instability have analysed its impact on students’ cognitive, emotional, social and academic development (Ackerman et al., 1999; Bakker et al., 2012; Baxter et al., 2014).

Amongst these losses it has been shown that the loss of a parent in childhood or adolescence, whether through death, separation or abandonment, is related to depression, vulnerability and behavioural problems in adulthood (Christ et al., 2002). Also the impact of the loss of grandparents living with the child on the latter’s concept of death (Jamison et al., 2002), and the importance of the death of pets in children’s development (Kaufman & Kaufman, 2006), have both been investigated. These studies have found that any close and significant death affects families and their stability. La death education, desde el acompañamiento educativo de los tutores, podría orientar la respuesta educativa a estas situaciones contextuales de pérdidas que se encuentran niños y adolescentes y que afectan a la estabilidad familiar.

Some studies have explored parents’ perceptions of death education for their children. Okafor (1993) studied the importance of death education in homes in Nigeria. The main conclusions were that Nigerian women play a fundamental role in the death education of their children and that death education programmes aimed mainly at mothers would have an effective preventive impact in the area of mental health care. In another study (Jones et al., 1995) carried out with 375 parents, 77% were in agreement with death education in schools, stating that it would not interfere with their parental responsibilities. Also, in an Irish study among 119 parents of primary-school pupils (McGovern & Barry, 2000), 72% of participants stated that death should be included in teaching, with the mothers being more comfortable than the fathers when tackling the topic of death with

their children. Lastly, a Spanish study by Herrán et al. (2000) surveyed 87 parents of pupils in early childhood education in state schools, finding that 93% were in favour of their school having some type of pedagogical response in the case of the death of a loved one, with mothers more favourable than fathers. Estos estudios realizados con familias se han centrado en un concepto de death education enfocado a tratar la muerte de manera normalizada en las escuelas y al acompañamiento desde las mismas en situaciones de pérdida de seres queridos. En esta investigación se adopta un enfoque más amplio de la death education, que la entiende como la educación que contribuye a que el alumnado crezca con conciencia de finitud y, por tanto, para una educación para la vida más completa. Un ejemplo de investigación desde esta perspectiva de la death education es la realizada recientemente en España (Herrán et al., 2019; Rodríguez et al., 2020), en la que se analiza la presencia en el currículo de temas como el genocidio, la pérdida de la biodiversidad, las pequeñas pérdidas o la resiliencia. El estudio que aquí se presenta acoge esta perspectiva amplia de la death education.

Studies investigating attitudes towards death education in families are scarce, both in their overall number and in their sample sizes and use of instruments scientifically validated by parametric statistical tests. To counter these deficiencies in the existing theory our study adopted the following objectives: (1) to ascertain attitudes towards death education among mothers and fathers of students from 0 to 18, with an *ad hoc*, valid, reliable scale; (2) to identify relationships between parents' attitudes towards death education and their gender, religious beliefs, the educational stage of their child, their experiences of significant deaths and the rural or urban setting of the school; (3) to determine parents' views on how death is dealt with in society and schools.

METHOD

In order to address the above objectives, attitudes towards death education were analysed among mothers and fathers of students in early childhood, primary and obligatory secondary education and sixth forms in eight regions of Spain, in different types of schools sorted according to type (state or private), religious orientation and setting (urban or rural). To complement this, further sociodemographic variables were analysed in order to uncover possible differences in the results according to these variables; and the answers to a brief sociological questionnaire on how death is dealt with in schools were also analysed. The study design was cross-sectional, i.e. data from different contexts and

geographical locations were collected within the same period of time in order to encompass a more diverse range of backgrounds (Summers & Abd-El-Khalick, 2017).

Instruments

Two digitalised self-administered instruments were used: an attitudes scale and an opinion questionnaire. These instruments were preceded in the self-administered form by a letter of informed consent for the participant, in addition to some items collecting socio-demographic data. The study was evaluated as positive by the ethical committee of the coordinating institution.

Death Education Attitudes Scale-Parents (DEAS-P). An *ad hoc* scale was designed and validated, since in the literature review no such instrument was found. The final version of our scale comprised 9 items rated on a 5-point Likert scale (1 – strongly disagree; 2 – disagree; 3 – neither agree nor disagree; 4 – agree; 5 – strongly agree).

The instrument was validated in several phases. First a battery of 65 initial items was developed on the basis of the existing theory on death education. This battery was then subjected to a content test by 13 experts in death education. Subsequently a pilot study was carried out with 10 mothers and fathers of children and adolescents in the educational stages under study. This led to the elimination or modification of items whose formulation was not adequately understood, resulting in reduction to 52 items. With this version an analysis of response reliability was made using a test-retest ($n = 54$) method: parents responded voluntarily on two occasions with a one-week period between them. Due to both the intra-item correlation coefficient analysis for these two applications using Spearman's rho (ρ), and many participants' perception of the scale's excessive length, the instrument was further reduced to 23 items, eliminating those that were redundant and/or less reliable.

The resulting version was applied with the final sample ($n = 917$), making both an exploratory factor analysis (EFA) and confirmatory factor analysis (CFA) of the results, which reduced the definitive version to 9 items, tested for reliability using Cronbach's alpha.

Death Education Questionnaire-Parents (DEQ-P). Apart from parents' attitudes the study also set out to ascertain their opinions on how death is dealt with in society and in

schools. The design of the questionnaire started with 21 initial items written on the basis of the previous studies investigating how death is dealt with in education. The 13 experts who assessed the previous scale also validated this one, reducing the final version to 8 items with varying nominal response options. Subsequently the instrument was piloted with 10 parents in order to enhance the clarity of the items.

Sample and data collection

The study included mothers, fathers, and legal guardians of children in the compulsory educational stages, in addition to early childhood and sixth form. The directors of the participating schools emailed parents the self-administered form containing the two instruments. The final sample comprised 917 mothers, fathers and legal guardians (Table 1).

Table 1

RESULTS

Descriptive study of the scale

Table 2 shows the statistics in terms of mean, standard deviation, asymmetry and kurtosis for the items on the scale in its final version.

Table 2

All scores were over 3 points, thus indicating a positive attitude towards death education among the sample. The highest-scoring item was number 9 ($M = 4.47$, $SD = 0.86$), while the lowest was 3 ($M = 3.18$, $SD = 1.35$). The mean for all items in the scale was 3.92.

De los 23 ítems de la escala en su versión inicial, 14 fueron descartados por arrojar peores valores en el análisis exploratorio y confirmatorio así como en la fiabilidad del instrumento. Se presentan en cualquier caso en la Tabla 3 con sus resultados en la aplicación de la muestra del estudio, con la finalidad de que puedan ser explorados, en su caso, en futuras investigaciones que validen la DEAS-P en otros contextos o países.

Tabla 3

Exploratory and confirmatory factor analysis of the scale

An EFA was undertaken firstly on the 23-item version of the scale, after finding that the sample was suitable through a Kaiser-Meyer-Olkin test ($KMO = .928$) and a Bartlett sphericity test ($p = .00$). A component analysis yielded 2 factors which explained almost 68% of variance, with a total of 9 items. The reduction of the items was made by eliminating those with low saturation in the EFA. A first factor of 5 items (own value 5.21), titled ‘Inclusion of death in education,’ explained 57.87% of common variance. The mean score for factor 1 was 3.60. The second factor, titled ‘Family and teacher training’ (own value .891), comprising 4 items, explained 9.9% of common variance. The mean score for this factor was 4.32. Although the first factor alone explained almost 58% of variance, the second factor was taken into account due to the theoretical content it could contribute to the scale. The methods of extraction of principal axes and oblique rotation (oblimin with Kaiser normalization) were used, with a high correlation between the two factors ($= .82$), in order to carry out the component analysis (Table 4). Suitable factor loadings were found on carrying out the rotation.

Table 4

To verify the two-factor model obtained from the EFA a CFA was then performed. The generalised least squares technique was used since the multivariate distribution did not adjust to normality. The main indicators of goodness-of-fit were included in the CFA taking into account the size of the sample (Henson, 2006), analysed according to the generally recommended values (Hair et al., 2010): $CMIN/DF = 2.70 (\leq 5.0)$; $GFI = .98 (\geq .9)$; $CFI = .92 (\geq .9)$; error $RMSEA = .04 (\leq .05)$. These values yielded suitable fit for the two-factor model. This was compared with a single-factor model which yielded worse results: $CMIN/DF = 7.73$; $GFI = .95$; $CFI = .68$; error $RMSEA = .09$. Thus the appropriate explanation of the scale by the two-factor model emerging from the EFA was confirmed.

Scale reliability

The internal coherence of the scale was tested using Cronbach's alpha, with a result of .90 for the whole scale, .87 for factor 1 and .85 for factor 2. These results were considered excellent (Taber, 2018).

Análisis de la validez convergente y discriminante

La validez convergente del DEAS-P se analiza a través de la varianza media extraída (AVE). En el factor 1 el valor es .58 y en el factor 2 es .60. Ambos indican un buen ajuste teniendo en cuenta que se consideran adecuados valores por encima de .50 (Hair et al., 2010). Por otra parte, los pesos factoriales de cada ítem a su factor correspondiente están entre (λ) están entre .74 y .86, indicando así una buena consistencia interna de cada factor.

En relación a la validez discriminante, se comparan las AVE con la correlación al cuadrado entre cada uno de los factores. Los valores superiores de AVE frente al cuadrado de las correlaciones indican una buena validez discriminante (Farrel, 2010). En el caso de la DEAS-P, están muy cercanas pero no llegan a ser superiores al valor recomendado. La correlación al cuadrado obtenida es .67, que es superior a .58 y .60.

A pesar de que existe una alta correlación entre los dos factores, otros datos de la validación como los peores indicadores encontrados en el CFA con un modelo de un único factor o la propia construcción teórica de los conceptos justifican esta debilidad estadística (Martínez-García & Martínez Caro, 2008). En cualquier caso, es una primera escala de actitudes en death education para padres y madres que necesitará ampliar la potencia discriminante de sus factores en siguientes investigaciones.

Relationships of the sociodemographic variables to the scale results

Due to the size of the sample ($n = 917$), implying correct behaviour even when populations deviate noticeably from normality (Moore, 2007; Pardo & San Martín, 2010), robust parametric tests were used (Student's t -test and ANOVA) to analyse the impact of the socio-demographic variables (gender, religious beliefs, educational stage of the child, having experienced significant loss, and rural or urban school setting) on the scale results. In the comparisons of hypotheses where significant differences were found, the relevant statistical power analyses were applied, obtaining in all cases values higher than 9.

In order to analyse the influence of gender in the scale results, Levene's test for equality of variances was applied previously. Both in the scale total and in factor 1, 'Inclusion of death in education,' homogeneity of variance was assumed (for the whole scale, $p = .08$; for factor 1, $p = .37$, therefore, for both cases $p > .05$). However, there was no homogeneity of variance in factor 2, 'Family and teacher training', $p = .03$ ($p \leq .05$), and for this reason the T and p values of this factor were assumed to be of unequal variance. Significant differences were found in the scale total according to gender: $T = 1.99$, $p = .04$ ($\leq .05$), with higher results for women ($M = 35.53$, $SD = 7.40$) than for men ($M = 34.32$, $SD = 8.34$), and in factor 2 ($T = 2.26$, $p = .02$, $\leq .05$), with higher scores among women ($M = 17.41$, $SD = 3.05$) than men ($M = 16.80$, $SD = 3.54$). In factor 1, 'Inclusion of death in education,' while the means were higher for women ($M = 18.12$, $SD = 4.96$) than men ($M = 17.53$, $SD = 5.28$), there were no significant differences ($T = 1.47$, $p = .14$). The size of the effect of the differences found across the total scale was $d = .15$, with a small effect, according to Cohen's criteria (Cohen, 1988). El tamaño de efecto pequeño encontrado en las diferencias en función del género obliga a interpretar estos resultados con cautela.

In the area of parents' religious beliefs, the options of 'Catholic,' 'atheist,' and 'agnostic' were included, ruling out others as they were statistically marginal. The ANOVA test (assuming variance homogeneity according to Leven's test), yielded significant differences between groups ($F = 6.53$, $p = .02 \leq .05$) across the whole scale and in factor 1 ($F = 10.14$, $p = .00 \leq .05$), but not in factor 2 ($F = 1.28$, $p = 0.28 > .05$). Tukey's HSD post-hoc test identified significant differences between atheists ($M = 36.82$, $SD = 6.90$) and Catholics ($M = 34.60$, $SD = 7.78$) ($p = .02 \leq .05$) for the whole scale, with a small effect size ($d = .30$) according to Cohen's criteria (1988). Differences were also significant between these two groups in factor 1 ($p = .00 \leq .05$), también con puntuaciones más altas en ateos ($M = 19.29$, $SD = 4.58$) que en católicos ($M = 17.44$, $SD = 5.10$). El tamaño de efecto de estas diferencias en el factor 1 es pequeño ($d = .38$).

Turning to the students' educational stages, the ANOVA test (with variance homogeneity according to Levene's test for factor 1, $p = .07$, therefore $> .05$, and with no homogeneity for factor 2, $p = .00$, and for the whole scale $p = .01$) yielded significant differences between groups for the whole scale ($F = 3.59$, $p = .00$, $\leq .05$) and for both factor 1 ($F = 4.66$, $p = .01$, $\leq .05$) and factor 2 ($F = 4.83$, $p = .01$, $\leq .05$). A Games-Howell post-hoc test identified significant differences for the whole scale between early childhood education (3-6 years old) and compulsory secondary education ($p = .08$, $\leq .05$),

with $d = .42$ (moderate effect size, Cohen, 1988), and between primary and compulsory secondary education ($p = .02, \leq .05$), with $d = .31$ (small effect size, Cohen, 1988). Assessing the means of each educational stage in the whole scale (Figure 1), the second part of early childhood education (3-6 years old) had the highest results ($M = 36.86, SD = 6.38$), followed by primary education (6-12 years old) ($M = 36.23, SD = 7.24$), while the stage with the lowest values was compulsory secondary education (12-16 years old) ($M = 33.77, SD = 8.32$). The first part of early childhood education (0-3 years old) and sixth form (16-18 years old) had intermediate positions with very similar results, $M = 35.68 (SD = 6.73)$ and $M = 35.93 (SD = 7.50)$ respectively.

Figure 1

En el factor 1, según la Games-Howell post-hoc test, se encuentran diferencias significativas ($p = .00, \leq .05$) entre familias de alumnos de educación primaria ($M = 18.71, SD = 4.89$) y secundaria obligatoria ($M = 17.07, SD = 5.33$), con un tamaño de efecto bajo ($d = .32$) (Cohen, 1988). En el factor 2, relativo a la formación de familias y profesores, hay diferencias significativas entre early childhood education (0-3 años) ($M = 17.68, SD = 2.88$) y compulsory education ($M = 16.70, SD = 3.49$) ($p = .01, \leq .05$), entre early childhood education (3-6 años) ($M = 18.09, SD = 2.64$) y compulsory education ($M = 16.70, SD = 3.49$) ($p = .00, \leq .05$), y entre educación primaria ($M = 17.51, SD = 2.95$) y compulsory education ($M = 16.70, SD = 3.49$) ($p = .02, \leq .05$). El tamaño de efecto es moderado en el caso de las diferencias entre padres de niños en early childhood education (3-6 años) y de compulsory education ($d = .44$), y bajo en la comparativa de compulsory education con early childhood education (0-3 años) ($d = .30$) y educación primaria ($d = .25$) (Cohen, 1988).

No se encuentran diferencias significativas en función del entorno o de la ocurrencia de una pérdida cercana de un ser querido, probablemente por el tamaño de las diferencias entre grupos. For the variable of deaths of loved ones, 91.8% of the sample said that they had experienced these, and for the setting, 82.2% had children in urban schools.

Questionnaire results

Table 5 below shows the descriptive results of the sociological questionnaire complementing the attitudes scale. Mientras que el DEAS-P pretende conocer las actitudes favorables o desfavorables hacia la death education por parte de los parents, el DEQ-P se centra en conocer cómo se trata la muerte en las escuelas y en la sociedad, desde la opinion de los parents.

Table 5

The DEQ-P, complementing the scale with sociological and opinion questions, also yielded interesting findings. It was highly significant that 72.2% of the sample saw death as a taboo topic in our society while the same participants showed favourable attitudes towards addressing death in education. Although death is taboo, as the parents remarked, it is also a fact which often hits schools. In fact almost 60% of the parents stated that they knew of losses of loved ones in the last 5 years in the cases of their children or classmates. However, they mostly did not know whether their schools had a procedure for dealing with these cases, and 86.8% said that they had received no training in death education. Despite the parents' lack of training, they stated that in general they felt prepared to deal with the topic of death with their children (items 2, 3 and 6). Lastly, it was noteworthy that parents preferred a secular approach respecting all religious beliefs in schools addressing the loss of a loved one.

DISCUSSION

Our first research objective was to ascertain attitudes towards death education among parents of school students from 0 to 18 years old, from early childhood education to sixth form, in line with the structure of the Spanish education system. This study contributes an attitudes scale validated by an EFA and a CFA with suitable values for a two-factor model and very strong reliability (Cronbach's alpha of .90 for the whole scale). Todos los valores obtenidos en el proceso de validación son adecuados, excepto la validez discriminante entre los factores que precisa de ser mejorada en futuras investigaciones. This is an original contribution to the field of death education, responding to its current lack of scientifically validated instruments that enable us to determine the education

community's attitudes towards this emerging topic (Rodríguez et al., 2019). Previous studies (Dyregrov et al., 2013; Herrán et al., 2000; Jones et al., 1995; McGovern & Barry, 2000) have investigated the perceptions of teachers and parents towards death education but with mixed questionnaires lacking validation with parametric tests. The DEAS-P designed and validated in this study, however, may be adapted and validated for other countries and settings, which would thus enable us to compare differences among different contexts. It is also an instrument that may be of use for the impact assessment of training programmes in death education for parents.

The two-factor model reliably reflects the detail of parents' attitudes towards death education, as found in the existing literature. Factor 1, 'Inclusion of death in education,' encompasses items referring to the incorporation of death education at various different educational stages; the purposes of death education; and its inclusion as curriculum content in the individual subjects. The incorporation of death in the subject curriculum at different educational stages has been investigated in documentary studies (Herrán et al., 2019; James, 2015; Rodríguez et al., 2020; Stylianou & Zembylas, 2016) and in research on the education community's perceptions of the potential inclusion of death education (Dyregrov et al., 2013; Jones et al., 1995; McGovern & Barry, 2000). Also, the study of the purposes of death education is present in the existing theory and research (e.g. Affifi & Christie, 2019; Bos, 2014; Corr et al., 2019; Herrán & Cortina, 2006; Herrán et al., 2000; Lindquist, 2007; Mantegazza, 2004; Petitfils, 2016; Zembylas, 2011). Factor 2, 'Family and teacher training,' includes items referring to parents' and teachers' need for training in death education. Training is an essential component in death education, since its inclusion in the curriculum and in the family necessarily also involves educating the educators. As such, it has also been the object of research by various analysts (Dyregrov et al., 2013; Herrán, 2015; Herrán & Cortina, 2006; Herrán et al., 2000; Hinton & Kirk, 2015; McGovern & Barry, 2000; Pott, 2013). Therefore, our definitive 9-item scale responds to theoretical advances in death education and reflects the latter's essential foundations: its inclusion in school and family education, and training for teachers and parents.

Analysis of the results of the scale's application yielded high values overall, with a mean of 3.92 for the whole scale, 3.60 for factor 1 and 4.32 for factor 2. In other words, parents' attitudes towards death education can be seen as moderately positive. They are also positive with regard to the need for training on the topic for themselves and teachers, as perceived by the parents themselves. As many as 5 scale items scored over 4.00

(‘agree’). These items represent all those in factor 2 and one in factor 1 (item 2). These results coincide with those of other studies also showing a positive attitude on the part of parents towards death education (Jones et al., 1995; McGovern & Barry, 2000). They also appear to concur with the findings of Jones, Hodges and Slate (1995) on the possible interference of death education with parental responsibilities, with the majority of parents taking part in the study stating that death education in schools did not interfere with how they brought up their children at home. In other words, death is not alien to the family setting, and on occasions affects its stability (Ackerman et al., 1999), therefore also affecting the family’s interaction with the school in its educational functions. In this study the parents seemed to be aware of the presence of death in the family and school settings and of the possible educational response to the topic. The positive attitudes of the parents taking part in our study contrast, however, to the real situation of the curriculum in various countries, among them Spain (Herrán et al., 2019; Rodríguez et al., 2020), in which death is not included as educational content at any stage.

The relations between the socio-demographic variables and the scale results (our second objective) yielded some interesting findings. First, gender seems to be a variable affecting attitudes towards death education. It was noticeable that women had more positive attitudes than men towards the inclusion of death in education, as in other studies both of parents (McGovern & Barry, 2000) and teachers (Dyregrov et al., 2013; McGovern & Barry, 2000). En cualquier caso, estas diferencias tienen un tamaño de efecto pequeño. Another widely investigated variable in previous studies is the loss of a loved one. In various studies carried out with parents (McGovern & Barry, 2000) and teachers (Dyregrov et al., 2013; McGovern & Barry, 2000) a relationship was found between having suffered such a loss and having a favourable attitude towards death being addressed in education. In our study, this positive tendency in the relationship between the loss of a loved one and attitudes towards death education was also seen, although the relationship was not statistically significant, probably due to the difference in the size of the groups.

This study includes variables that have not been analysed in previous research, such as religious beliefs and the educational stage of the schoolchildren. Regarding religious beliefs, we found that in both the whole scale and factor 1, referring to the inclusion of death in education, families identifying themselves as atheist were more open to death being addressed in education than Catholic families. Also agnostic families had higher scores than Catholic, although differences were not significant in this case. One

reason for this result may be that Catholic parents regarded death as a topic exclusively covered by religion or in parents' moral upbringing of their children. This hypothesis was not tested in our study however, and thus may be a subject for future research. Our results indicate that children's educational stage also influenced the scale results, both overall and in the two factors: parents with children in the second stage of early childhood education (3-6 years old) had the most positive attitudes towards death education, confirming similar findings by Herrán et al. (2000) for parents with schoolchildren of the same age. The second most positive attitudes were found amongst parents whose children were in primary education (6-12 years old). For those with children in compulsory secondary education (12-16 years old) there seemed to be a less positive attitude towards death education. Although death education is relevant to all stages of education (Bowie, 2000; Carter, 2016; Corr et al., 2019; Herrán & Cortina, 2006; Jackson & Colwell, 2002), it seems to be more accepted at earlier levels. These findings may be due to the Spanish educational model, which promotes a more general education in early childhood and the first years of primary school. In contrast, in compulsory secondary education the subjects are separated more methodically, and tutorial action, although required by the legislation, is given less importance than subject tuition. Lastly, regarding the demographic variables, participants in urban areas tended to yield higher scores than those in rural settings, although differences were slight and not statistically significant.

With respect to DEQ-P, findings coincide with other studies carried out among teachers (Hinton & Kirk, 2015; Pott, 2013), in which it was also found that they had little training on the topic. A pesar de ello, los padres se sienten en general preparados para tratar la muerte con sus hijos de una manera educativa. Another question that may be investigated in future studies is whether this assumption of competence coincides with parents' real skills in tackling the topic of death with their children. La preferencia de los padres de que la muerte se trate desde una perspectiva no religiosa en las escuelas es coherente con el planteamiento inclusivo de la death education que proponen algunos autores (Herrán & Cortina, 2006; Herrán et al., 2000). This confirms the unanimous views of parents of children in state schools, who preferred a non-religious response to a significant death for children from 3 to 6 (Herrán et al., 2000). It should be noted that the children of most of the sample in our study were in state schools, which in the Spanish education system are non-religious.

This study presents some limitations which may be of use in orienting future lines of work in the scientific study of death education. The first limitation is that the scale was

validated in a specific country and for a specific population, and therefore the results obtained are not transferable to other countries and contexts. Also, as we remarked above, the sample consisted mostly of parents with children in state schools. It may be of interest for comparison to undertake further studies in religious schools. En cualquier caso, esta investigación, con los resultados obtenidos, arroja una serie de conclusiones y recomendaciones de interés científico y profesional: (1) Un agente educativo fundamental como es la familia se muestra favorable a que la muerte se incluya en la educación; (2) Las familias y los profesionales de la educación requieren formación en death education, por tanto se necesitan planes de formación para toda la comunidad educativa; y (3) Los sistemas educativos deberían transitar hacia el diseño de unos currícula que eduquen para la vida teniendo en cuenta el carácter formativo de la conciencia de muerte. En definitiva, este estudio hace explícita la necesidad de una educación que tenga en cuenta la muerte - porque no puede ser de otra forma, si se quiere educar para la vida-, fundamentada en la formación de educadores (familias y profesionales de la educación) y en la transformación curricular. De otra forma, será una educación incompleta, tanto para el desarrollo individual como para la evolución social.

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Table 1. Characteristics of the sample ($n = 917$).

Variable	Percentage
Gender	Feminine. 78% Masculine. 22%
Age	Less than 20. 4.9% 21-25. 0.2% 26-30. 1.4% 31-35. 8.7% 36-40. 20.3% 41-45. 26.7% 46-50. 24.8% 51-55. 9.9% 56-60. 2.2% 61 or over. 0.9%
Number of children in the school	1. 71.7% 2. 25.8% 3. 2.4%
Educational stage of children	Early childhood (0 to 3). 17.6% Early childhood (3 to 6). 6.9% Primary (6 to 12). 28.7% Compulsory secondary (12 to 16). 35.4% Sixth form (16 to 18). 10.8% Others*. 0.6%
School setting	Urban. 82.2% Rural. 17.8%
Type of school	State. 87.2% Private. 12.8%
School religious orientation	Non-religious. 91.8% Religious. 8.2%
Family religion or religious belief	Catholic. 58.6% Atheist. 19% Agnostic. 15.8% Others*. 6.6%
Having experienced death of loved ones	Yes. 91.8% No. 8.2%

Note. *Minority responses with a result of less than 1.5% were grouped into “Others.”

Table 2. Descriptive data of the results of the DEAS-P ($n = 917$).

Item	Mean (SD)	Asymmetry SE = .81	Kurtosis SE = .161
1. The inclusion of death in education would help students to be happier.	3.57 (1.14)	- .55	- .22
2. It is appropriate to deal with the topic of death in compulsory secondary education.	4.08 (1.14)	- 1.25	.85
3. It is appropriate to deal with the topic of death in the training of families expecting a baby.	3.18 (1.35)	- .19	- 1.06
4. It is appropriate to deal with the topic of death in primary education.	3.64 (1.30)	- .63	- .71
5. Death should be included in the content of school subjects.	3.52 (1.28)	- .53	- .71
6. Teachers should have training in how to approach the topic of death with their students.	4.40 (.94)	- 1.80	3.10
7. I believe that training in the pedagogy of death for parents would prepare me for intervening educationally in situations of loss in the family.	4.12 (1.05)	- 1.19	.87
8. Parents should have training in approaching the topic of death with their children.	4.29 (.95)	- 1.38	1.56
9. A professional educator should know how the idea of death changes among students according to their age and circumstances.	4.47 (0.86)	- 1.92	3.95

Note: SD indicates standard deviation, SE indicates standard error

Table 3. Items descartados de la escala

Discarded item	Mean (SD)
- Es adecuado tratar el tema de la muerte en bachillerato.	4.24 (1.07)
- Saber que la vida tiene un principio y un fin en el tiempo puede mejorar la educación.	4.03 (1.09)
- Es adecuado tratar el tema de la muerte en educación infantil (0 a 3 años).	2.64 (1.45)
- Es adecuado tratar el tema de la muerte en educación infantil 3 a 6 años).	3.01 (1.46)
- Creo que debo coordinarme con el tutor del centro educativo en caso de que mi hijo perdiera a un ser querido.	4.48 (.88)
- Cuando una muerte significativa afecta a algún alumno, debería realizarse alguna acción educativa.	4.48 (.88)
- La muerte debería tratarse, cuando proceda, en las tutorías.	4.05 (1.09)
- Saber que algún día me voy a morir influye en la valoración de lo cotidiano.	3.96 (1.20)
- Saber que algún día me voy a morir puede ayudarme a orientar mejor mi proyecto de vida.	3.84 (1.22)
- Tratar el tema de la muerte en la educación contribuirá a una sociedad más madura.	4.01 (1.15)
- Saber que algún día me voy a morir puede ayudarme a ser mejor padre/madre.	3.47 (1.36)
- Haber experimentado la muerte de un ser querido ayuda a ver la muerte como parte de la vida.	4.20 (1.04)
- Es mejor permitir que los niños y adolescents hablen libremente de la muerte cuando lo necesiten.	4.60 (.73)
- Debería dars a los niños y adolescents la opción de despedirse de un ser querido en fase terminal.	4.06 (1.06)

Note: SD indicates standard deviation

Table 4. Component analysis of the EFA.

Item	Factor 1. Inclusion of death in education	Factor 2. Family and teacher training
4	.849	.570
2	.839	.599
1	.806	.543
5	.803	.592
3	.758	.462
6	.565	.858
7	.681	.843
8	.591	.822
9	.487	.800

Table 5. Results of the DEQ-P ($n = 917$).

Item	Results
1. Do you know if your child or one of her/his classmates has experienced the death of someone close to them in the last 5 years?	Yes, this has happened. 55.9% No, this hasn't happened. 23.4% I don't know: 20.6%
2. Do you feel able to guide your child educationally, if s/he has suffered a significant loss due to the death of a loved one?	Yes. 81.9% No. 18.1%
3. Do you feel able to respond educationally to your child when s/he makes a comment or reflection or asks a question about death?	Yes. 81.6% No. 18.4%
4. Have you received, as mother, father or legal guardian, any training in death education?	Yes. 13.2% No. 86.8%
5. Does your school have any procedure to deal with a death affecting a student?	Yes. 1.9% No. 7.4% The procedure is under development. 0.7% I don't know. 90.1%
6. Would you be able to identify when guidance from parents in the case of bereavement is insufficient and a specialist should intervene (in bereavements that are difficult or developing badly?)	Yes. 54.6% No. 45.4%
7. In the case of my child suffering the death of a loved one, teachers should deal with the topic of death:	From a non-religious educational perspective. 66.5% From the perspective of my child's religious beliefs, if s/he has them. 14.4% From the perspective of the family's religious beliefs, if we have them. 9.8% They should not deal with the topic. 6% From the perspective of the school's religious beliefs, if it has them. 2.9% From the perspective of the teacher's religious beliefs, if s/he has them. 0.4%
8. Do you believe that death is a taboo topic in our society?	Yes. 72.2% No. 27.8%

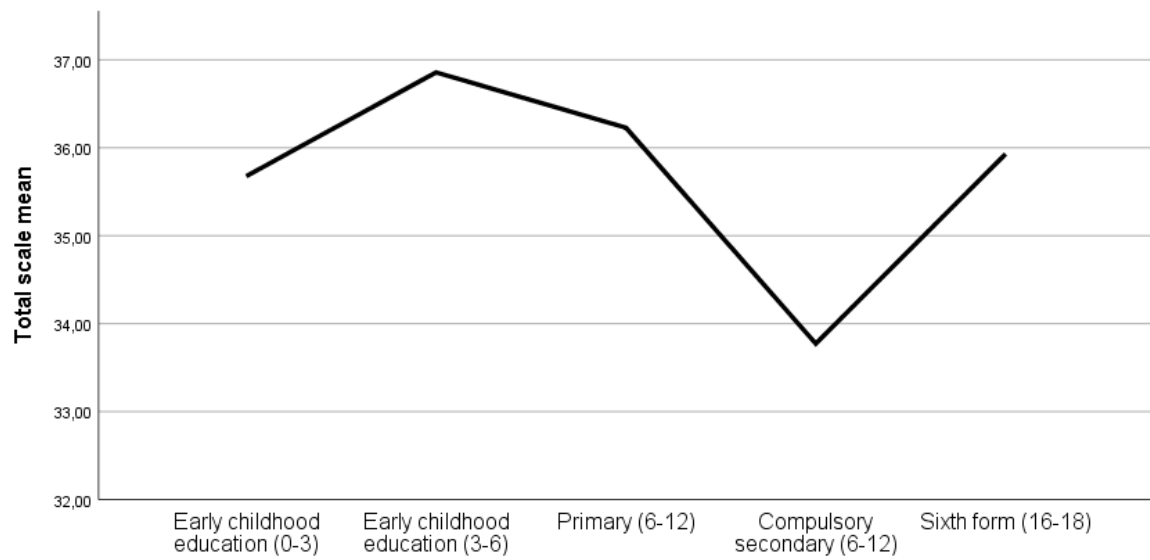


Figure 1. Relationships of results in the whole scale with the variable ‘educational stage’.