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To cite this report: Beljaars D. & Shubin, S. (2023). 'Closer to death': thinking about dying in pandemic times Bi-monthly report 13, January 2023. COVINFORM H2020 Project No. 101016247.

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This project has received funding from the European Union's Horizon 2020 Research and Innovation Programme under Grant Agreement No 101016247.

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INTRODUCTION

This bi-monthly report focuses on the changing relations people have had with death during the COVID-19 pandemic. It is based on a survey study on which the Swansea University partner collaborated with the Swansea Bay University Health Board, Neath Port Talbot Council for Voluntary Services, and Swansea Council for Voluntary Services. The full report can be accessed here: https://www.covinform.eu/project-outputs/country-reports/

"Death strikes in the now, and immediately drives its shock wave into the future and down the past of that life. Death strikes, reducing to nothing the instrument she had made of herself in the world of work, reducing to nothing her individual identity."

- Alphonso Lingis, Dangerous Emotions (2000), page 120

As of 30 December 2022, the number of people who have died with COVID-19 as contributing factor has reached 11,237 in Wales, with Swansea Council posting 909 deaths and Neath Port Talbot 627 (Duffy, 2023). With 55 COVID deaths in the community, the Sandfields area in Port Talbot is second on the list of worst hit communities in Wales. On 10 January 2023, since March 2020, the Office for National Statistics records 8,715 more deaths in Wales in comparison with the five-year, non-pandemic average. On a population of 3.1 million and over the course of almost 3 years, these mortality numbers have had several implications for how the pandemic was experienced and what lasting legacies it leaves for individuals.

Death has been a central theme in the experience of pandemic times for many people. Echoing Alphonso Lingis' opening quotation, the possibility of dying prompted increased anxiety and fear of possible personal demise and feelings of hopelessness and uncertainty.

Some facts about the 'Health and Wellbeing Service Engagement' Survey:

% ——	It consists of 50 multiple choice answers, slides and Likert scales, and open-ended questions
	The data collection took place online and in person
000	It has 139 respondents for the majority of the questions and for a minority it has 173 respondents.
	The survey results are not statistically representative of the Swansea, Neath, and Port Talbot areas, nor of the populations.
?	The questions touched on themes such as life changes, vulnerability, vaccination, health service accessibility, and social relations.
NnN 200	The largest survey demographic consists of women between the age of 25 and 54 who live in Swansea
	Ethnic background of respondents: 85% belong to ethnic minorities in Wales, this includes mixed and multiple ethnicities, with the largest groups consisting of Bangladeshi, Pakistani, Indian, Black African and Caribbean people, and 15% White people.

Reflecting the experience of the survey respondents, many people reported knowing several others in their social circles and communities who have passed away. Even for those who do not personally know people who have died after being infected with the virus, death has been on their mind in more intense forms due to widespread information in the media. Survey respondents remarked on the intensification of feelings of anxiety, fear, and depression in relation to the fear of death in broadly four themes.

4 THEMES



1. Nearness of death

As the survey suggests, the most common theme in shifting thoughts around death during the pandemic is the realisation that death is not always preceded by long and 'complete' life or a period of illness. Rather, respondents more strongly consider the possibility of death to happen "at any time" or even "now" and be "closer" than they previously thought. Appealing to their sense of safety and protection, death is perceived as being "near" or "closer to home", which is perceived as "cruel" and "daunting". Equally, according to the qualitative comments in the survey, death takes place "anyhow" and alluding to its inescapability, one "can't avoid it". In addition, in relation to ideas about living a fulfilled life, the COVID-19 pandemic made people particularly worried about dying "early". Whilst death may not be early or late in experience, the anxiety that comes from realising that dying quickly will be rooted in more existential thoughts about the meaning of life and one's place in the world.

2. Social thoughts about dying of COVID

Another set of new thoughts about death are about life after people have died and concerns about those who continue living. This alludes to how people can feel deeply responsible for others in their social circle. Indeed, many survey respondents point out how it worries they that their loved ones or family may struggle to cope without them if they come to pass away from COVID. Often it also involves taking on the grief and sense of loss for another person when they are struggling with the death of another person who they held dear. These thoughts then express in increased stress, fear and anxiety about the virus. A Muslim woman from a non-white non-listed ethnic group who is a student aged 18-24 from Port Talbot says that "It's sad, I can't sleep properly when I think about it".

3. Randomness of victimisation

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4. Confirmation of presence

This reported type of feeling about death during the pandemic was mentioned most by respondents who have had death as regular and consistently present element in their lives before the pandemic. This would pertain mostly to people who have had suicidal thoughts or who possibly have had to work through a death-related personal trauma, such as the death or illness of a loved one or their own illness or disability existing before the pandemic. As other studies suggest, the virus may have become another reason for generalised anxiety and thinking about death (Pérez-Mengual et al. 2021), particularly as a way to have control over their death, which is also evident among our survey respondents. Strategies to cope with these pandemic pressures increased and intensified thoughts about death and its nearness and inevitability. According to the survey results, during the pandemic people seem to pray more and speak more with family and friends in relation to the fear of death. One respondent stated that

"I wrote a message for my kids, making my Dad smile because life is so short we not guaranteed today let alone tomorrow" (Muslim woman, aged 45-54).

Thinking about death expresses symptoms related to anxiety, depression, and post-traumatic stress disorder (Murphy et al. 2021), with respondents in our survey reporting prevalent feelings of sadness and paranoia, which tend to be accompanied by problems with sleep.

In conclusion, the COVID-19 pandemic has at least temporarily reconfigured ideas about death, which can alter what circumstances and risks are associated with dying, what kind of behaviours are perceived as dangerous, and what kind of response is viable. Perceptions of and attitudes towards death also change depending on the type and tone of messages in pandemic communication to which people are likely to respond. Healthcare organisations therefore ought to take note of such changes – even if perhaps minute – when communicating new policies, support services, and other requirements to the public.

THOUGHTS ABOUT FINALITY



Alphonso Lingis (quoted above) reminds us that in catastrophic times when we think about death, we have no choice but to think of all of life in all its overwhelming complexity. The pandemic makes us shed new light on how our lives are so entangled with others' and renew our pasts and futures.

Indeed, in the survey particularly pertinent seems to be the renewed realisation of the inevitability of death and the speed at which it can occur. Defying notions of old age, ill health, and disability as leading to imminent demise, bodies that are more vital (young, healthy, and abled) during the pandemic seen more within reach of death than ever before. Such concerns do not only affect a specific individual but may extend to the younger and fitter family members who had been considered relatively far removed from a possibility of an 'early' death.

As such, the survey outcomes echo Menzies and Menzies' (2020: np) recommendation that "treatment programmes in mental health may need to broaden their focus to directly target the dread of death" in the broadest sense and make this sensitivity an integral part of healthcare provision.

One way of staying with death in a productive manner can be with the recommendations in the Cambridge University 'A Good Death?' project. As Dr Laura Davies explains, the project aims "to help people to think and talk about human mortality in a reflective rather than a reactive way". She offers four suggestions: (1) acknowledge the suffering COVID-19 is causing, (2) normalise conversations about death within our personal relationships, (3) reflect on and deepen our own thoughts and feelings about death by actively exploring literature and the arts, and (4) ask questions.

Further Reading



'A Good Death?' project: https://www.cam.ac.uk/stories/BeyondThePandemic_agooddeath

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The COVINFORM project

Acronym COVINFORM

Title COronavirus Vulnerabilities and INFOrmation dynamics Research and Modelling

Coordinator SYNYO GmbH **Reference** 101016247

Type Research and Innovation Action (RIA)

Programme HORIZON 2020

Topic SC1-PHE-CORONAVIRUS-2020-2C Behavioural, social and economic impacts of

the outbreak response

Start 01 November 2020

Duration 36 months

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