

and specific attitudes. The Cultural Indicators Project samples the content of television programs and compares that content with the real world. Cultivation research documents that “heavy” viewing cultivates attitudes that are more consistent with what is shown on television than reality. Probably the best known area of cultivation research documents that heavy viewing rates are associated with an overestimation of violent crime rates and risks, but many other beliefs and attitudes also have been studied over the past 30+ years from a cultivation perspective (Gerbner, Gross, Morgan, Signorielli, & Shanahan, 2002; Shanahan & Morgan, 1999).

Mass communication research also has investigated the influence of specific televised genres, shows, and situations. Social learning theory posits that television viewers are socialized, in part, through observational learning. Bandura (2002) contended that “virtually all behavioral, cognitive, and affective learning from direct experience can be achieved vicariously by observing people’s actions and the consequences for them” (p. 126). Bandura’s best known work concerns the effects of televised violence, but mass communication researchers also have linked observational learning with attitude change in other areas, such as gender roles, homosexuality, family planning, and preventive health care (Bandura, 2000; Bussey & Bandura, 1999; Flerx, Fidler, & Rogers, 1976; McGhee & Frueh, 1980; O’Bryant & Corder-Bolz, 1978; Perry & Bussey, 1979; Riggle, Ellis, & Crawford, 1996; Westoff & Rodriguez, 1995).

Not surprisingly, television has its greatest opportunity to influence beliefs and attitudes concerning “groups and phenomena about which there is little first-hand opportunity for learning” (Gross, 1991, p. 22). Because we learn about dying only indirectly by experiencing the death of others, it is reasonable to hypothesize that our attitudes about death and dying could be influenced by mass mediated messages.

Researchers interested in attitudes about death rarely have examined mass media effects. Stack (2000, 2002) has looked at blues and opera fans and their attitudes about suicide acceptability, and a number of studies have examined the role of literature in teaching children about death (Bernstein, 1979; Delisle & McNamee, 1981; Guy, 1993; Klingman, 1980, 1987; Ordal, 1980). Though the objective of the study was construct validation rather than a test of media effects, Neimeyer, Dingemans, and Epting (1977) found that participants shown a 32-minute film, *Night and Fog*, depicting Nazi atrocities in World War II, demonstrated an increase in death anxiety as measured by the Death Anxiety Scale (Templar, 1970) but not death threat. Wass, Raup, and

Sisler (1989) have documented that adolescents who consume violent television programming typically overestimate the number of murders that occur in the real world. In the only study to examine an individual television series, Sharapan (1977) described some of the death-related content of the children's show, *Mister Rogers' Neighborhood*, and suggested, based on mail sent to the program from children and parents, that televised content about death "can be a stimulus for families to explore together their comprehension of death" (p. 136). King and Hayslip (2001/2002) surveyed college students and found that higher fear of death correlated with higher levels of certain death-related media exposure. However, because the data were gathered in one survey, the ability to draw causal inferences is limited. As King and Hayslip acknowledged, "it may be that more death anxious persons are drawn to media portrayals of the deaths of groups or individuals" (p. 52). In short, although research supports the general notion that mass media can lead to change in death-related attitudes, no study has investigated experimentally the effects of an individual television series.

The following study is a preliminary exploration of the research question, "Can a television series differentially alter attitudes about death?" A substantial body of literature documents that formalized death education programs can influence our attitudes about death (Durlak & Riesenberg, 1991; Maglio & Robinson, 1994). It seems reasonable to explore further whether the important socializing agent of television also can influence our thinking about death and dying. To pursue this question we selected the critically acclaimed and popular Home Box Office (HBO) television series *Six Feet Under*, because it is the first television series of which we are aware that takes the subjects of death and dying as its explicit theme. We anticipated that exposure to 10 hours of the show would function in a similar manner as didactic death education programs that increase "cognitive awareness and understanding of death-related issues" (Durlak & Riesenberg, 1991, p. 42). Consistent with the media studies of death-related attitudes described above, we hypothesized that the explicit death-related content of the series and the amount of stimuli (10 hours) would prompt students to consider their own mortality and lower their ability to ignore thinking about death. As a result, general measures of death attitudes were expected to move in a more fearful direction. At the same time, we anticipated that participants would demonstrate increased complexity in their attitudes given the range of issues of death and dying that *Six Feet Under* explores.

Program Content

Six Feet Under is a critically acclaimed television series that averaged 5.7 million viewers for its first two seasons and earned six Emmy awards and two Golden Globes (Rottenberg, 2003). In 2003 the show received a prestigious George Foster Peabody Award for outstanding achievement in broadcasting and cable for “struggling to discover the many meanings of life while dealing with death on a daily basis” (62nd Peabodys, 2003). *Six Feet Under* is described by HBO (2003) as providing a

darkly comic look at the Fishers, a dysfunctional family who own and operate an independent funeral home in Los Angeles. Patriarch Nathaniel Fisher is no longer living (except in the hearts and visions of his family). So his wife Ruth, sons Nate and David, and daughter Claire are left to cope with the routine and not-so-routine aspects of life in the grief-management business.

Although all the family members have prominent roles and are affected by spending a lifetime in a funeral home, we learn the most about Nate, described by one critic as “the soul of the series” (James, 2003). He is the character concerned most with his own mortality and the meaning of life.

Each episode begins with a portrayal of a common, everyday situation in which one of the people involved meets his or her death. In the 10 episodes shown in this study, all of the deaths are presented as unexpected, even a death apparently of “natural causes”: (a) Nathaniel Fisher, described as being in his late 50s, is killed in a car accident when his hearse is hit by a city bus; (b) a 38-year-old male dives into a pool, and hits his head on the bottom; (c) in an industrial accident, a 56-year-old male is chopped into pieces by an industrial dough mixer; (d) a 20-year-old Hispanic gang member is shot to death by a rival gang member; (e) a 43-year-old former porn star is electrocuted in the bathtub when her cat knocked a plugged-in curling iron into it; (f) a 79-year-old woman dies in her sleep of unspecified causes; (g) a 41-year-old newly divorced woman has her head crushed by a cherry picker immediately after she stands up through the sunroof of a limousine; (h) a 6-year-old boy accidentally shoots himself in the face while playing with his mother’s gun; (i) a 23-year-old man is beaten to death by two men for being gay; and (j) a 61-year-old woman is struck in the head by a flying golf ball at a country club.

Corr, Nabe, and Corr (2003) noted that television viewers are exposed to a large number of deaths in the news and drama but suggested that there

“media deaths are distant and remote” for viewers because they are “by definition out of the ordinary” (p. 85). The deaths that occur in *Six Feet Under* are also extraordinary and unrealistic, given that most deaths are not caused by accidents. What makes the first season of the series different from most television is that the subject of death *per se* is an ongoing concern. Each episode typically portrays the impact of death on those close to the deceased, as well as providing an ongoing account of the personal lives and careers of each member of the Fisher family. A number of episodes provide information about what happens to the body after death, including portrayals of bodies in various states of preparation in the funeral home, identifying the body at the morgue, post-mortem erections, bodily noises and smells, preparation of the body for open casket viewings, and the speed at which the human body decomposes. In several episodes, David Fisher emphasizes the importance of showing respect to the bodies of the deceased, and an employee, Federico Diaz, is supposedly an expert in restoring bodies to lifelike status for viewings.

People close to the deceased grieve in a wide variety of ways, including one portrayal of a “casket climber,” and sometimes the appropriateness of different expressions of grief is discussed explicitly. As Ruth and David regularly attend church, there are occasional discussions of religious beliefs. Sometimes the deceased reappear in the imagination of the living and extended conversations take place; such discussions sometimes explore notions of death as a welcome escape from the hassles of life or as something strange and frightening. The pressure of the funeral home business is an explicit theme, including the cost of caskets, body preparation, cremation, the sanitized language of the funeral business, and funeral costs.

Method

Participants consisted of 174 (107 women, 64 men, 3 unspecified) college students between the ages of 18 and 36 ($M = 21.76$, $SD = 2.49$) enrolled in an undergraduate course titled “Television Studies: *Six Feet Under*” in the spring semester of 2003. The course met once a week for 3 hours for 15 weeks. On the first night of class, all students present completed one of two surveys. Seventy-four students (43 women, 28 men, 3 unspecified) were randomly assigned to a pretest group to complete a survey that included standard demographic questions, Likert-type items

concerning religious beliefs, a forced-choice item to determine if the participant had a close friend or relative die in the past year, an item assessing previous exposure to *Six Feet Under*, and three instruments concerned with attitudes about death. The instruments used were the Death Attitude Profile—Revised (DAP—R; Wong, Reker, & Gesser, 1994), the Multidimensional Fear of Death Scale (MFODS; Hoelzer, 1979; Neimeyer & Moore, 1994), and the short version of the death Threat Index (TI; Neimeyer, 1994). These instruments were selected because collectively they cover a number of dimensions of death and dying concerns, and the psychometric properties of each instrument is well documented.

The remaining students completed a survey unrelated to this study about media attitudes. This second group (posttest only) did not complete the death attitude instruments until after all episodes were viewed ($n = 100$). At that time, those completing the pretest completed the instruments a second time ($n = 74$). Subsequent t tests found no evidence of sensitization to the instruments for the group completing both the pre- and posttests, as there were no significant differences ($p < .20$) between the pre- and posttest group and the posttest-only group in scores on the various dimensions of the DAP—R, MFODS, or TI when they were administered after the exposure to the episodes. Accordingly, in what follows we do not differentiate between the two posttest groups but treat them as one. Data were analyzed using only surveys completed by students who reported they had never seen an episode of *Six Feet Under* prior to the study, yielding a pretest group ($n = 56$) and a posttest group ($n = 129$) with no prior exposure to the content of the series.

The design is aptly described as quasi-experimental insofar as students were not randomly assigned to the class (Shadish, Cook, & Campbell, 2001). Also, it was judged impractical to expose half of the class to *Six Feet Under* and treat the other half as a control group. These limitations are addressed further in the *Discussion* section.

Exposure to Six Feet Under

Over a period of five weeks, students were shown 10 episodes of the 13 aired in the first season of *Six Feet Under*. Short clips were shown and a brief summary provided only for the three episodes not shown in full during class so that students could keep up with various plot narratives; the exposure of the clips totaled 15 minutes. Ten hour-long episodes were shown in full. The average number of episodes viewed by participants

was 10.4, as a number of students became sufficiently interested in the show to rent the episodes not fully shown in class. During the five weeks of viewing, there was no in-class discussion of the show. After attendance was taken at each class meeting, one episode was shown followed by a 15-minute break, then a second episode was shown. No discussions were held concerning the shows during class until the experiment was concluded. After the posttest was administered, the viewings were discussed throughout the remaining weeks of the semester in the context of television theory and research in general.

Measures

After the final episode was shown, participants completed the DAP-R, MFODS, and TI, as well as the demographic questions identified in the pretest group survey. An additional item was included to ask if participants had known anyone close who had died over the course of the six weeks of the experiment. The experiment was conducted between January 22 and February 26, 2003, prior to the onset of the most recent war with Iraq.

The DAP-R (Wong et al., 1994) includes five components that assess death attitudes from an existential view. The Fear of Death component includes items such as "I have an intense fear of death." The Death Avoidance component measures the extent to which participants avoid thoughts of death with such items as "I avoid death thoughts at all costs." The Neutral Acceptance component assesses the extent to which a participant accepts death as normal and nonthreatening with items such as "Death is a natural aspect of life." Approach Acceptance implies belief in a nonfrightening afterlife with items such as "I look forward to life after death." Escape Acceptance suggests that death represents a release from a generally unhappy life with such items as "Death will bring an end to all my troubles." Each item was assessed with a 7-point Likert-type scale (*strongly agree* to *strongly disagree*). In our study, Cronbach's α s were reasonably high for both the pretest group (1) and posttest group (2) for each component: Fear of Death ($\alpha_1 = .71$, $\alpha_2 = .86$); Death Avoidance ($\alpha_1 = .89$, $\alpha_2 = .92$); Neutral Acceptance ($\alpha_1 = .73$, $\alpha_2 = .66$); Approach Acceptance ($\alpha_1 = .92$, $\alpha_2 = .93$); and Escape Acceptance ($\alpha_1 = .82$, $\alpha_2 = .79$).

Using a principle axis factor analysis of the 32 items, based on an eigenvalue of 1.00 criterion and a scree test, four factors emerged that

accounted for 59.3% of the variance within the pretest group. The first factor matched the Approach Acceptance component; the second factor matched the Death Avoidance component; and the third factor matched the Escape Acceptance component. The fourth factor was primarily composed of the Neutral Acceptance component. Fear of Death did not emerge as a discrete factor. An identical factor analysis of the posttest group yielded five factors using the same criteria, corresponding exactly to the five DAP–R components and accounted for 62.7% of the variance.

The MFODS (Hoelter, 1979; Neimeyer & Moore, 1994) analyzes death attitudes through the use of eight subscales. Fear of the Dying Process includes such items as “I am afraid of dying very slowly.” Fear of the Dead includes such items as “I dread visiting a funeral home.” Fear of Being Destroyed includes items such as “I do not like the thought of being cremated.” Fear for Significant Others includes “I have a fear of people in my family dying.” Fear of the Unknown includes items like “I am afraid there is no afterlife.” Fear of Conscious Death includes “I am afraid of being buried alive.” Fear for the Body after Death includes items such as “I am afraid of my body being disfigured when I die.” Fear of Premature Death includes “I am afraid I will not have time to experience everything I want to.” Again, in our study, Cronbach’s α s were consistently high: Fear of the Dying Process ($\alpha_1 = .76$, $\alpha_2 = .80$); Fear of the Dead ($\alpha_1 = .73$, $\alpha_2 = .76$); Fear of Being Destroyed ($\alpha_1 = .77$, $\alpha_2 = .76$); Fear for Significant Others ($\alpha_1 = .68$, $\alpha_2 = .73$); Fear of the Unknown ($\alpha_1 = .80$, $\alpha_2 = .81$); Fear of Conscious Death ($\alpha_1 = .69$, $\alpha_2 = .70$); Fear for the Body after Death ($\alpha_1 = .80$, $\alpha_2 = .81$); and Fear of Premature Death ($\alpha_1 = .68$, $\alpha_2 = .78$).

Using a principle axis factor analysis of the 42 items, based on an eigenvalue of 1.00 criterion and a scree test, three factors emerged accounting for 38.4% of the variance within the pretest group. The first factor was composed of the subscales Fear of the Dying Process, the Fear of the Unknown, the Fear of Conscious Death, Fear of Premature Death, and most of the Fear for the Body After Death subscale. The second factor was composed of the Fear of the Dead subscale and the Fear for Significant Others subscale. The third factor was composed of the Fear of Being Destroyed subscale. An identical factor analysis of the posttest group yielded seven factors, using the same criteria, corresponding exactly to seven of the MFODS scales and accounting for 56% of the variance: Fear of the Dying Process, Fear of the Dead, Fear of Being

Destroyed, Fear for Significant Other, Fear of the Unknown, Fear for the Body After Death, and Fear of Premature Death. Fear of Conscious Death was scattered among these factors. Because our sample is smaller than those used to develop the MFODS, we scored the subscales using the standard item assignments (Neimeyer, 1994).

The TI (Neimeyer, 1994) is informed by Kelly's (1955) Personal Construct Theory. The TI attempts to assess the degree to which death represents a threat to those constructs that inform one's identity and self-understanding. The TI has been tested extensively in a variety of formats (for a review, see Neimeyer, 1994). In this study we used the short form, which consists of a series of seven paired constructs, such as good—bad, healthy—sick, and satisfied—dissatisfied. Each item was assessed with a 7-point Likert-type scale (*strongly agree with left construct to strongly agree with right construct*) in response to three categories: You or Your Present Life, Your Ideal Self, and Your Own Death. Again, Cronbach's α s were consistent: You or Your Present Life ($\alpha_1 = .88$, $\alpha_2 = .85$), Your Ideal Self ($\alpha_1 = .91$, $\alpha_2 = .91$), and Your Own Death ($\alpha_1 = .88$, $\alpha_2 = .87$).

Results of the TI can be calculated in several ways (Neimeyer, 1994). Split scoring measures the number of times a participant marks an item under one category, such as Your Present Life, as "satisfied," and marks the same item on the other side of the continuum under Your Death as "dissatisfied." All pairs are contrasted on a 7-point Likert-type scale. Where participants marked a 4 or where both marks were on the same side of the continuum, the item was scored as non-split (0). Split scores are scored as 1, and the total number of splits are summed and averaged per participant. Second, scores under each category can be summed scoring the strongly agree with the left construct as 1, and strongly agree with the right construct as 7. By doing so, one can assess whether a treatment condition significantly changed participants general characterization of their present life, ideal self, or their own death. Third, the distance between answers under Your Present Life and Your Death, and Your Ideal Self and Your Death can be assessed using the Euclidean distance formula provided in Moore and Neimeyer (1991, p. 129).

Results

Data were analyzed using only surveys completed by students who reported they had never seen an episode of *Six Feet Under* prior to the

study, yielding a pretest group ($n = 56$) and a posttest group ($n = 129$) with no prior exposure to the content of the series. There were no differences ($p < .30$) among any of the DAP–R components, MFODS subscales, or TI measures for those who had experienced a death of a friend or relative over the course of the experiment ($n = 13$) and those who did not ($n = 116$), although the power of such a test obviously is low in this case.

Death Attitude Profile—Revised

As described in Table 1, mean scores on all five components of the DAP–R show a significant difference in the anticipated directions. After exposure to 10 hours of stimuli over five weeks, participants showed a higher Fear of Death, a higher level of Death Avoidance, a decrease in Neutral Acceptance of death, a decrease in Approach Acceptance, and lower level of Escape Avoidance than the pretest group. There were no significant differences in DAP–R scores in the posttest group between those who had experienced a death of a friend or relative over the past year and those who did not ($p < .51$). When examined as a subset, those who had experienced such a death showed no significant differences between the pretest and posttest group scores on all items except for Fear of Death, which only approached significance (Pretest: $M = 28.92$, $SD = 4.8$; Posttest: $M = 26.78$, $SD = 8.4$; $t[78] = 1.52$, $p < .07$).

Multidimensional Fear of Death Scale

The MFODS results were calculated such that higher scores indicate higher levels of fear. Of the eight subscales of the MFODS, two showed

TABLE 1 Death Attitude Profile Results

Component	Pretest		Posttest		<i>t</i>	<i>df</i>
	<i>n</i>	<i>M</i> (<i>SD</i>)	<i>n</i>	<i>M</i> (<i>SD</i>)		
Fear of Death	53	28.81 (4.1)	123	27.03 (8.3)	1.89*	171
Death Avoidance	54	20.39 (3.0)	128	22.31 (7.8)	2.41**	179
Neutral Acceptance	55	26.25 (5.0)	126	12.79 (4.4)	17.97***	179
Approach Acceptance	55	37.62 (4.0)	127	31.85 (12.5)	4.68***	170
Escape Acceptance	55	19.51 (3.1)	128	22.72 (6.5)	4.51***	179

* $p < .05$. ** $p < .01$. *** $p < .001$. All significance tests are one-tailed.

a significant change for the posttest group as a whole; both subscales deal with attitudes about what happens to one's body after death. Participants registered less Fear for the Body after Death ($M=14.1$, $SD=7.85$) than did the pretest group ($M=16.39$, $SD=8.06$, $t[178]=1.78$, $p<.05$), and less Fear of Being Destroyed ($M=14.96$, $SD=6.520$) than did the pretest group ($M=13.21$, $SD=6.53$, $t[182]=1.68$, $p<.05$). No significant differences were found on the other six subscales ($p<.24$).

Comparing posttest group members who had experienced a death of a friend or relative over the past year ($M=21.94$, $SD=7.0$), with those who had not ($M=19.74$, $SD=8.1$), the difference of scores on Fear of the Dead approached significance ($t[123]=1.62$, $p<.06$). Scores on Fear for Significant Others were significantly different between those who had experienced a death of friend or relative ($M=31.08$, $SD=5.12$) and those who had not ($M=29.35$, $SD=5.4$, $t[126]=1.85$, $p<.05$). There were no differences between these groups on the other measures ($p<.22$).

Looking at data only from those who had experienced a death of a friend or relative, the posttest group ($M=21.94$, $SD=7.0$) showed more Fear of the Dead than did the pretest group ($M=19.07$, $SD=7.45$, $t[90]=1.79$, $p<.05$); and less Fear for the Body After Death (Posttest: $M=14.85$, $SD=7.78$; Pretest: $M=18.41$, $SD=7.85$; $t[93]=2.05$, $p<.05$). There were no significant differences for those experiencing the death of a friend or relative between the pretest and posttest group on the other measures ($p<.22$).

Threat Index

Using the split scoring technique, participants showed an increase in the number of split scores ($M=2.25$, $SD=2.18$) between Your Present Life and Your Own Death compared with the pretest group ($M=1.65$, $SD=1.99$, $t[179]=1.75$, $p<.05$). Participants also showed an increase in the number of split scores ($M=2.49$, $SD=2.37$) between Your Ideal Self and Your Own Death compared with the pretest group ($M=1.77$, $SD=2.03$, $t[176]=1.93$, $p<.05$). These results suggest that participants saw death as a greater threat to their present life and ideal self than they did prior to exposure to *Six Feet Under*.

Second, when the scores under each category were summed, there was no significant change in how participants saw their present life

($p = .99$). Participants saw their ideal self in more positive terms ($M = 9.45$, $SD = 4.27$) than did the pretest group ($M = 11.11$, $SD = 6.8$, $t[181] = 1.99$, $p < .05$). Participants also saw their own death in more negative terms ($M = 27.59$, $SD = 10.1$) than did the pretest group ($M = 24.79$, $SD = 10.9$, $t[177] = 1.65$, $p < .05$).

Third, using the Euclidean distance formula we found no significant change in the distance of scores between Your Present Life and Your Own Death ($p = .79$). Comparing the distance of scores between Your Ideal Self and Your Own Death, participants showed an increase in the distance score ($M = 32.15$, $SD = 9.45$) compared with the pretest group ($M = 29.87$, $SD = 10.63$) that approached significance ($t[177] = 1.42$, $p < .08$).

Using the Euclidean distance formula to calculate a death threat to Your Present Life, we found that higher levels of threat covaried with a number of other variables among post-viewing participants ($n = 126$), including more Fear of Death ($r = .25$, $p < .01$), less Neutral Acceptance ($r = .24$, $p < .01$), more Fear of the Dying Process ($r = .32$, $p < .001$), more Fear for Significant Others ($r = .31$, $p < .001$), more Fear of the Unknown ($r = .25$, $p < .01$), and more Fear of Premature Death ($r = .27$, $p < .01$). Higher levels of threat to the Ideal Self were related to more Fear of Death ($r = .25$, $p < .01$), more Death Avoidance ($r = .22$, $p < .05$), less Neutral Acceptance ($r = .25$, $p < .01$), more Escape Avoidance ($r = .18$, $p < .05$), more Fear of the Dying Process ($r = .33$, $p < .001$), more Fear for Significant Others ($r = .31$, $p < .001$), more Fear of the Unknown ($r = .22$, $p < .05$), more Fear for the Body after Death ($r = .20$, $p < .05$), and more Fear of Premature Death ($r = .29$, $p < .001$).

Religious Beliefs

As suggested by Wong et al. (1994), answers to the item "I consider myself religious" correlated significantly with Neutral Acceptance of death ($r = .62$, $p < .001$), and there was a relationship between how conservative participants saw their religious convictions and higher levels of Neutral Acceptance ($r = .44$, $p < .001$). There was a modest relationship between conservative religious beliefs and lower levels of Death Avoidance ($r = .18$, $p < .05$). No other variables were significantly related to religious beliefs. In all cases $n = 126$.

Discussion

The one-group pretest–posttest design of this study does not permit “hard-headed causal inferences” (Cook & Campbell, 1979, p. 103) given the possibility of unknown intervening variables. Limiting the pretest to a randomly selected group within the class, then comparing the posttest results between those who completed the pretest and those that did not, generated data that appear to rule out the possibility that the instruments used influenced attitudes. Still, the absence of a random assignment to control and treatment conditions limits the strength of the inferences one can draw from the results.

Despite such design limitations, we believe the data are suggestive and warrant further investigation. As Cook and Campbell (1979) noted, “we will often achieve some knowledge using the design, even when pretest–posttest intervals are long and the outcome variables are subject to multiple influence other than the treatment” (p. 103). In this study, exposure to approximately 10 hours of *Six Feet Under* appears to have led participants to experience a mild increase in their general fears of death. Such results are similar to the effects of didactic death education courses. Meta-analyses by Durlak and Riesenber (1991) and Maglio and Robinson (1994) document that college students who complete didactic death education courses often will register higher levels of fear of death and dying. The most likely explanation is that young adults generally avoid thinking of death unless the subject and its various dimensions are made salient to them (Combs, 1981). In our study, the changes across measures of general attitudes in the DAP–R support the notion that viewing the series made neutral or positive acceptance of death much less likely, fear of death and a desire to avoid thoughts of death more likely, and a willingness to see death as an escape less likely. Similarly, the perception that death represents a threat to one’s present and ideal self increased.

At the same time, the exposure to *Six Feet Under* appears to have prompted less fear about what happens to the body after death, as measured by MFODS’s Fear of Being Destroyed and Fear for the Body After Death subscales. Observing the respect and care for bodies in the Fisher & Sons Funeral Home may have led to such changes.

Because students voluntarily enrolled in the course, they are not a random sample and cannot be assumed to be representative. This process effectively mirrors the practical reality of television behavior,

because virtually all television viewing is a matter of self-selection. Nonetheless, for those choosing to view *Six Feet Under*, the congruence between the program content and measured attitude changes strongly suggest the attitude changes measured in this study were prompted by the viewing of *Six Feet Under*.

The results of this study are noteworthy in two respects. First, mass media content can be useful in death education courses to raise awareness and fuel class discussion. We would recommend, in particular, the first two episodes of the first season of *Six Feet Under* in light of the range of death and grief issues the episodes engaged. Second, this study should be of interest to thanatologists because, added to the previous literature exploring death attitudes and mass media, there is reason to believe that mass communication is a potentially important socializing agent with respect to death attitudes. The fact that the cumulative influence of a television series could differentially alter attitudes about death is, we believe, an important possibility worth further investigation.

One might rightly ask whether it was desirable to expose students to stimuli that increased their concerns about death and dying. Death educators have wrestled with this issue as well. Knight and Elfenbein (1993) suggested it may be desirable to remind students of the preciousness of life and encouraged them to care for their life choices. Similarly, *Six Feet Under* creator Alan Ball suggested that the series is “ultimately life-affirming” (HBO, 2003). Near the end of the Season 1 finale, a grieving relative asks Nate Fisher, “Why do people have to die?” When the students in our class were asked if they recalled his reply, we find it noteworthy that many of them responded in unison: “To make life important.”

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